

Insurance program for members of OAMHP



Prepared for:



OAMHP
Ontario Association of
Mental Health Professionals



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Helping protect the finances of you and your family

Your choice of career shows how much you care for others' well-being. It's important to look after your own as well. In addition to protecting members' rights and interests, the Ontario Association of Mental Health Professionals (OAMHP) tries to provide extra value to make your membership more rewarding. That includes helping you look after your family and finances with the OAMHP insurance program, which offers "group" pricing.

This brochure provides highlights but not all the details of the OAMHP insurance program. The complete terms, conditions, exclusions and limitations governing the coverage are found in the group insurance policy and certificate of insurance issued by Canadian Premier Life Insurance Company, which operates under the brand name Securian Canada.

Overview

A quick look at the program

A full array of benefits

...with the advantage of group plan savings.

Exclusive to OAMHP members who are:

- Members in good standing
- Living in Canada
- Actively working a minimum of 25 hours a week

Financial protection for yourself and your family at a glance

Type of insurance	Coverage available for
Life	You, your spouse and dependant children
Accidental death and dismemberment (AD&D)	You and your family (must have OAMHP life coverage to apply for AD&D coverage)
Long-term disability (LTD)	You
Critical illness (CI)	You and your spouse
Extended health care (EHC) and dental care	You, your spouse and dependant children
Professional overhead expense (POE)	You (if you also have LTD insurance)

Evidence of good health

You will need to provide proof of good health for some products, through a medical questionnaire. For long-term disability insurance, we'll also ask some financial and employment questions. Your insurance coverage becomes effective the date Securian Canada approves your application and receives your premium payment.

Take ownership of your health and well-being.

Visit securiancanada.ca/oamhp to get started today!

Questions?

Please contact: **Dan Hurrell**, Partner
Dominion Group Benefits Limited
Dan.Hurrell@yourgroup.ca

You can also contact Securian Canada at **1-877-363-2773**, Monday-Friday, 8 a.m.-8 p.m. ET



Next steps

Learn more about each type of insurance offered by your association, so you can find the coverage that meets your needs.

Life insurance

Life insurance lets you look after the people who count on you when you cannot, whether that's your spouse, your children or your aging parents.

Since life insurance benefits are paid out in a lump-sum payment, they provide an important safety net that can replace income and also can cover many expenses, including: funeral costs, probate fees, legal fees, education and mortgage payments. Life insurance can also be used to provide an inheritance or a final donation to a favourite charity.

About the coverage

Coverage available for

- You, your spouse, all of your dependant children

Coverage amounts

- You and your spouse can apply from \$50,000 to \$1,000,000 of coverage each, in units of \$25,000
- Child under 15 days: \$1,000 per child
- Child 15 days or older: \$10,000 per child
- Coverage for all of your children costs only \$2.25 per month

Qualifying for coverage

- Under the age of 65
- A Canadian resident
- Actively at work for 25 hours a week
- An association member in good standing

Extra advantages

✓ Waiver of premium

With this program, if you're totally disabled for six months before age 65, your life insurance continues, but you don't have to pay the premiums. In this case, you'll need to meet all the requirements to show you are totally disabled.

✓ Easy switch to an individual policy

If you or your covered family member's life insurance ends before age 66, other than by your choice (for example, if you leave this association), you can apply to switch to an individual life policy. That policy gives you up to \$200,000 in coverage (or more, if legislation requires). You don't need to provide any proof of good health, as long as you apply within 31 days of your association life insurance coverage ending.

What's the cost?

Life insurance rates – for member/spouse

Coverage from \$50,000 to \$1,000,000 is available
 Monthly premium per \$25,000 of benefit

Age	Non-smoker male	Non-smoker female	Smoker male	Smoker female
Under 30	\$1.98	\$1.44	\$2.87	\$2.24
30-34	2.06	1.61	3.52	2.65
35-39	2.67	1.96	4.88	3.37
40-44	4.00	3.12	7.97	5.55
45-49	6.09	4.43	11.97	8.00
50-54	9.18	6.54	17.76	11.52
55-59	15.02	10.08	26.39	18.26
60-64	17.64	12.39	44.55	27.65
65-69*	33.74	24.02	78.41	41.71
70-75*	70.72	53.13	164.65	92.10

Dependant life insurance

\$10,000 for each covered dependant child
 Single monthly premium of \$2.25 covers all eligible children

*Renewal rates only

Rates are calculated based on your age, gender and smoking status as of the policy anniversary.
 Age calculation is made at policy anniversary of each year.

Rates are reviewed every year, may change, and will increase as you move into the next age band.

Rates are yearly renewable and subject to provincial tax where applicable.

What's excluded?

There is no payment for a death before the first two years of coverage if death results directly or indirectly from self-inflicted injury or attempted suicide, regardless of whether you have the ability to form the requisite intent or regardless of whether you have a mental illness such that you do not know or understand the consequences of your action(s). If you add more insurance, the two-year period for that amount runs from the additional coverage's start date.



Accidental death and dismemberment insurance

A serious accident can have a huge impact on your life. Accidental death and dismemberment insurance (AD&D) provides a payment to help your family financially after an accident.

About the coverage

Coverage available for

- You and your family

Coverage amounts

- The coverage ranges from \$25,000 to \$250,000, in units of \$25,000
- Your AD&D coverage amount cannot exceed your life coverage amount

Qualifying for coverage

- Under the age of 60
- A Canadian resident
- An association member in good standing
- Actively at work for 25 hours a week
- You must have life insurance through this group plan to qualify for AD&D insurance

Extra advantages

✓ Occupational training for your spouse

If you die as a direct result of an accident, your spouse will receive financial help for training for a job he or she was not previously qualified for.

✓ Coverage for return to home

If you die from an accident 100 km or more from home, there's a payment of up to \$10,000 for the cost of preparing and transporting your body home for burial or cremation.

✓ Additional coverage to adapt your home or vehicle

If you suffer the loss of use of, or loss of, both feet or both legs, or suffer from hemiplegia, quadriplegia or paraplegia as a direct result of an accident, and are confined in a wheelchair, there's an additional 10 percent payment (up to \$10,000) to make your residence and/or vehicle wheelchair accessible.

✓ Waiver of premium

If you're totally disabled while covered before age 70, your coverage continues, but you don't have to pay the premiums as long as you remain totally disabled. In this case, you'll need to meet all the requirements to show you are totally disabled.

✓ Seat belt benefit

If you die from a car accident, there's an additional 10 percent payment if the accident report indicates your seat belt was properly fastened.

How it works

- The benefit payment is a percentage of the AD&D coverage you've selected, based on the loss suffered (see the table of losses for details)
- You can insure yourself and your family

Single coverage

- A lump-sum payment is paid upon approval of the claim, if you or your covered family member suffers a serious injury or dies due to an accident.
- The amount is a percentage of the AD&D coverage you've selected, based on the loss. (See the table below for details.)

Family coverage

- No dependant children? Your spouse will be insured for 50 percent of your benefit amount.
- Spouse and dependant children? Your spouse will be insured for 40 percent of your benefit and each dependant child, regardless of the number, will be insured for 10 percent of your benefit, to a maximum of \$50,000 per child.
- Dependant children, no spouse? Each dependant child will be insured for 20 percent of your benefit up to a maximum of \$50,000 per child.

Table of losses	Amount payable (% of principal sum)
Quadriplegia or paraplegia or hemiplegia	200.00%
Loss of life	100.00%
Loss of both arms or both legs	100.00%
Loss of both hands or both feet	100.00%
Loss of entire sight of both eyes	100.00%
Loss of speech and hearing in both ears	100.00%
Loss of one hand and one foot	100.00%
Loss of one hand or one foot, and entire sight of one eye	100.00%
Loss of one arm or one leg	75.00%
Loss of one hand or one foot	75.00%
Loss of entire sight of one eye	75.00%
Loss of speech	75.00%
Loss of hearing in both ears	75.00%
Loss of thumb and index finger on same hand	33.33%
Loss of four fingers on same hand	33.33%
Loss of hearing in one ear	25.00%
Loss of four toes on same foot	25.00%
Loss of use of both arms or both legs	100.00%
Loss of use of both hands or both feet	100.00%
Loss of use of one arm or one leg	75.00%
Loss of use of one hand or one foot	75.00%

What's the cost?

Accidental death and dismemberment insurance

Coverage from \$25,000 to \$250,000
Monthly premium per \$25,000 benefit
Single - \$1.50

Family - \$3.00

Rates are reviewed every year, are renewed yearly and are subject to provincial tax where applicable.

What's excluded?

There are no benefits paid for claims resulting directly or indirectly from any of the following:

- Self-inflicted injuries (firearm or otherwise)
- Drug overdose
- Carbon monoxide inhalation
- Suicide or attempted suicide while sane or insane
- Voluntary participation in a riot or act of civil disobedience
- War, insurrection or rebellion
- Full-time service in armed forces
- Committing or attempting to commit a criminal offence
- Aircraft accidents, including boarding and disembarking, learning to fly, sky-diving, performing any duties in connection to the aircraft and other circumstances related to flying



Long-term disability insurance

Long-term disability (LTD) insurance is your own safety net. It's there to catch you if a mental health issue, illness or accident keeps you from working. You'll have help paying your regular bills, and possibly even some of the extra costs that come with a long-term illness, so your finances stay healthy while you heal.

About the coverage

The monthly benefits range from \$1,000 to \$5,000, in units of \$100. This is based on your net annual earned income per month.

You can choose a 30-, 90- or 180-day elimination period (number of days you are totally disabled before payments begin). Usually, a longer elimination period lowers the premium.

Qualifying for coverage

- Under the age of 65
- A Canadian resident
- An association member in good standing
- Actively working at least 25 hours a week
- Use the table to find your annual income and the corresponding maximum monthly benefit

Extra advantages

✓ Waiver of premium

If you're totally disabled for a full 90 days before age 65 and are receiving LTD benefits, you don't have to pay LTD premiums if you remain totally disabled.

✓ Potential partial benefit when you re-start work

You may qualify for a partial benefit if, right after a period of total disability where you were receiving benefits, you start working and a physician monitors your medical progress. Securian Canada must approve your partial benefit.

The partial benefit is your full monthly benefit, minus 50 percent of your employment earnings and any other amount payable to you under the Integration of Benefits definition (see the glossary).

Income ratio guide

Annual income	Monthly benefit amount
\$12,000-\$14,999	\$500
\$15,000-\$17,999	\$900
\$18,000-\$23,999	\$1,100
\$24,000-\$30,999	\$1,400
\$31,000-\$35,999	\$1,700
\$36,000-\$44,999	\$2,000
\$45,000-\$59,999	\$2,400
\$60,000-\$71,999	\$3,000
\$72,000-\$83,999	\$3,400
\$84,000-\$95,999	\$3,800
\$96,000-\$109,999	\$4,200
\$110,000-\$119,999	\$4,600
\$120,000-\$129,999	\$4,800
\$130,000 +	\$5,000

What's the cost?

Long-term disability insurance plan – member only

Monthly premium per \$100 of monthly benefit

Coverage from \$1,000 to \$5,000 per month

Elimination period (EP)

Age	EP 30 days - male	EP 30 days - female	EP 90 days - male	EP 90 days - female	EP 180 days - male	EP 180 days - female
Under 25	\$1.30	\$1.30	\$0.81	\$0.87	\$0.69	\$0.76
25-29	1.31	1.31	0.82	0.87	0.70	0.76
30-34	1.47	1.75	0.92	1.09	0.82	0.92
35-39	1.75	2.08	1.14	1.31	0.98	1.14
40-44	2.14	3.17	1.37	1.97	1.37	1.92
45-49	3.17	4.13	2.08	2.74	1.97	2.47
50-54	4.61	5.05	3.07	3.35	2.96	3.24
55-59	6.44	5.22	4.22	3.52	4.12	3.39
60-65*	5.60	4.39	3.52	2.79	3.39	2.74

*Renewal rates only

Rates are calculated based on your age and gender as of the policy anniversary. Age calculation is made at policy anniversary of each year.

Rates are reviewed every year, may change, and will increase as you move into the next age band.

Rates are yearly renewable and subject to provincial tax where applicable.



What's excluded?

There are no benefits paid for claims resulting directly or indirectly from any of the following:

- Self-inflicted injury or attempted suicide, regardless of whether the insured has the ability to form the requisite intent or regardless of whether the insured has a mental illness such that the insured does not know or understand the consequences of the insured's action(s)
- Voluntary participation in a riot or act of civil disobedience
- War, insurrection or rebellion
- Committing or attempting to commit a criminal offence
- Normal pregnancy and/or childbirth
- During any period of imprisonment
- Travel or flight in any aircraft if you have any duties on or related to the aircraft or flight, or if you are flying as part of aviation training, instruction, testing or armed manoeuvres

In order to qualify for the payment of benefits, the insured must receive appropriate medical treatment, beginning with the onset of the condition involved and continuing throughout both the elimination period and any subsequent benefit period.

Critical illness insurance

Critical illness (CI) insurance provides a lump-sum payment if you are diagnosed with one of 11 life-threatening illnesses - even if you're still able to work. Use it any way you want: regular expenses, expenses for a loved one who is caring for you, alternative treatments or even a trip. You decide what's best.

About the coverage

The coverage ranges from \$25,000 to \$250,000, in units of \$25,000. Your spouse can apply for the same coverage you choose for yourself.

Things to know

- Benefits are only paid for the first condition you experience; after which, the insurance terminates
- Diagnosis must be after date of coverage and you must complete a survival period (30 days); Securian Canada must approve your claim
- Additional provisions, exclusions and limitations may apply, including a 12-month pre-existing condition (a medical condition where symptoms appeared or required medical attention, hospitalization or treatment) and 90-day cancer waiting period

Illnesses covered

- Blindness
- Cancer (life-threatening)
- Coronary artery bypass surgery
- Deafness
- Heart attack
- Kidney failure
- Loss of independent existence
- Major organ transplant
- Multiple sclerosis
- Paralysis
- Stroke (cerebrovascular accident)

Full descriptions of illnesses covered are on pages 30–33 in the critical illness appendix.

Qualifying for coverage

- Under the age of 65
- A Canadian resident
- An association member in good standing
- Actively at work for at least 25 hours a week

What's the cost?

Critical illness insurance for member/spouse

Monthly premium per \$25,000 of benefit
 Coverage from \$25,000 to \$250,000

Age	Non-smoker male	Non-smoker female	Smoker male	Smoker female
Under 30	\$3.30	\$3.30	\$3.90	\$3.80
30-34	4.50	5.50	6.10	7.60
35-39	5.50	7.00	8.20	10.70
40-44	8.10	9.40	14.20	17.30
45-49	13.90	13.30	28.40	27.70
50-54	23.10	18.30	52.40	39.10
55-59	36.10	24.30	87.90	51.00
60-64	58.70	34.10	140.30	64.80
65-70*	110.50	57.80	243.40	101.20

* Age 65+ are renewal rates only.
 Rates are calculated based on your age, gender and smoking status as of the policy anniversary.
 Age calculation is made at policy anniversary of each year.
 Rates are reviewed every year, may change, and will increase as you move into the next age band.
 Rates are yearly renewable and subject to provincial tax where applicable.





What's excluded?

There are no benefits paid for claims resulting directly or indirectly from any of the following:

- Self-inflicted injury or attempted suicide, regardless of whether the insured has the ability to form the requisite intent or regardless of whether the insured has a mental illness such that the insured does not know or understand the consequences of the insured's action(s)
- Voluntary participation in a riot or act of civil disobedience
- War, insurrection or rebellion
- Committing or attempting to commit a criminal offence
- Using illegal or illicit drugs or substances, or misuse of drugs or alcohol
- Death of the insured during the required survival period described in the detailed definitions table

Extended health care and dental care insurance

Your association’s extended health care (EHC) and dental care insurance package gives you a lot of options. Whether you want additional health and dental coverage or you’re looking to reduce out-of-pocket expenses for your family, you can select the level of care that’s right for you. And, as a member you can take advantage of group insurance rates.

About the coverage

There are five health care plans available. Choose the plan that’s right for you and your family.

Coverage is per covered family member, per plan year, unless otherwise noted.

Benefit details

EHC

Options	Basic	Standard	Standard Plus	Enhanced	Enhanced Plus
Prescription drugs	70%	For the first \$1,000 of expenses you receive 70% reimbursement. Once you’ve had \$1,000 worth of expenses, you’re reimbursed for 80% of your expenses.	For the first \$800 of expenses you receive 70% reimbursement. Once you’ve had \$800 worth of expenses, you’re reimbursed for 80% of your expenses.	For the first \$3,000 of expenses you receive 80% reimbursement. Once you’ve had \$3,000 worth of expenses, you’re reimbursed for 90% of your expenses.	For the first \$3,000 of expenses you receive 80% reimbursement. Once you’ve had \$3,000 worth of expenses, you’re reimbursed for 90% of your expenses.
Dispensing fee maximum	100% up to \$6.50 per prescription or refill	100% up to \$6.50 per prescription or refill	100% up to \$6.50 per prescription or refill	80% No maximum	80% No maximum
Oral contraceptives	Not covered	Not covered	Not covered	Covered	Covered
Plan year maximum	\$750 per person	\$5,000 per person	\$3,500 per person	\$12,000 per person	\$12,000 per person
Hospital expenses in your province	Not covered	80%	80%	90%	90%
Convalescent hospital	Not covered	Not covered	Not covered	Not covered	Covered
Expenses out of your province¹	Not covered	100%	100%	100%	100%
Emergency travel assistance	Not covered	First 15 days	First 20 days	First 30 days	First 30 days

1. Excludes unstable medical conditions that existed during the nine months prior to your trip.

EHC

Options	Basic	Standard	Standard Plus	Enhanced	Enhanced Plus
Medical services and equipment	70%	80%	80%	90%	90%
Plan year combined maximum	\$1,000 per person	\$1,500 per person	\$1,500 per person	\$2,000 per person	\$2,000 per person
Lifetime maximum	\$20,000	\$20,000	\$20,000	\$20,000	\$20,000
MRI and other imaging services (Quebec only) plan year maximum	\$750 per person	\$1,000 per person	\$1,000 per person	\$1,200 per person	\$1,200 per person
Wigs maximum per person	\$100 per plan year	\$500 per lifetime	\$500 per lifetime	\$500 per lifetime	\$500 per lifetime
Hospital beds lifetime maximum	Up to the Lifetime maximum shown above	\$1,000 per person	\$1,000 per person	\$1,200 per person	\$1,200 per person
Wheelchairs lifetime maximum	\$1,000 per person	\$1,000 per person	\$1,000 per person	\$1,200 per person	\$1,200 per person
Casts, splints, trusses, canes and crutches plan year maximum	Up to the plan year combined maximum shown above	\$500 per person	\$500 per person	\$500 per person	\$500 per person
Breast prosthesis plan year maximum	Up to the plan year combined maximum shown above	\$200 per person	\$200 per person	\$200 per person	\$200 per person
Orthotic inserts and orthopaedic shoes plan year maximum ²	\$250 per person	\$250 per person	\$250 per person	\$300 per person	\$300 per person
Glucometers maximum in any 5-year period	\$150 per person	\$300 per person	\$300 per person	\$300 per person	\$300 per person
Private duty nursing³	70%	80%	80%	90%	90%
Plan year maximum	\$2,500 per person	\$5,000 per person	\$5,000 per person	\$7,500 per person	\$7,500 per person
Lifetime maximum	\$10,000 per person	\$15,000 per person	\$15,000 per person	\$20,000 per person	\$20,000 per person
Ambulance services⁴	70%	80%	80%	90%	90%

2. Must be prescribed by a physician, podiatrist, chiropodist or chiropractor.

3. Your treatment must require the level of expertise of a nurse.

4. Licensed ground or emergency air ambulance service to the nearest hospital equipped to provide the required treatment.

EHC

Options	Basic	Standard	Standard Plus	Enhanced	Enhanced Plus
Accidental dental	70%	80%	80%	90%	90%
Maximum	\$2,000 per accident	\$2,500 per accident	\$2,500 per accident	\$3,000 per accident	\$3,000 per accident
Hearing aids⁵	70%	80%	80%	90%	90%
Maximum in any 5-year period	\$350 per person	\$400 per person	\$450 per person	\$550 per person	\$550 per person
Paramedical services⁶	70%	80%	80%	90%	90%
Plan year maximum per specialty	\$350 per person	\$480 per person	\$480 per person	\$600 per person	\$600 per person
Plan year combined maximum	\$600 per person	\$800 per person	\$800 per person	\$1,000 per person	\$1,000 per person
Vision care	None	1 year	1 year	1 year	1 year
Waiting period (Eye exam only)	(Eye exam only)				
Maximum in any 2 plan years ⁷	-	100% \$150 per person	100% \$150 per person	100% \$250 per person	100% \$250 per person
EHC lifetime maximum per person					
Out of province emergencies	Not covered	\$3,000,000	\$3,000,000	\$3,000,000	\$3,000,000
All other expenses	\$100,000	\$300,000	\$300,000	\$500,000	\$500,000

5. Includes purchase and repairs.

6. Covers the services of licensed acupuncturist, audiologist, chiropractors, occupational therapist, physiotherapist or social workers, psychotherapists, psychologist, massage therapist, naturopaths, osteopaths, or speech language pathologist.

7. Includes laser eye surgery, eyeglasses, prescription sunglasses, or contact lenses. Eye exam includes up to \$50 per person per plan year for a person under the age of 18 or in 2 plan years for any other person.

Dental care

Options	Basic	Standard	Standard Plus	Enhanced	Enhanced Plus
Preventive and basic Waiting period	Not covered	Not covered	70% 3 months Includes: <ul style="list-style-type: none"> • Oral examinations • X-rays • Testing and labs • Polishing • Scaling and root planning • Consultation • Space maintainers • Oral hygiene instruction once every 9 months • Emergency or palliative services • Pit and fissure sealants. Only children under 19 are covered for this treatment • Fillings, retentive pins • Prefabricated metal or plastic restorations 	Not covered	80% 3 months Includes: <ul style="list-style-type: none"> • Oral examinations • X-rays • Testing and labs • Polishing • Scaling and root planning • Consultation • Space maintainers • Oral hygiene instruction once every 9 months • Emergency or palliative services • Pit and fissure sealants. Only children under 19 are covered for this treatment • Fillings, retentive pins
Major Waiting period	Not covered	Not covered	Not covered	Not covered	50% 6 months Includes: <ul style="list-style-type: none"> • Endodontics – root canal • Oral surgery • Related surgical services (anaesthesia) • Periodontics • Repairing, relining or rebasing dentures • Major restoration • Prosthodontics

Dental care

Options	Basic	Standard	Standard Plus	Enhanced	Enhanced Plus
Orthodontics Waiting period	Not covered	Not covered	Not covered	Not covered	60% 1 year Includes: <ul style="list-style-type: none"> • Examinations (including orthodontic diagnostic services and fixed or removable appliances such as braces) • Interceptive, interventive or preventive orthodontic services, other than space maintainers (Preventive dental procedures) • Comprehensive orthodontic treatment, using a removable or fixed appliance, or combination of both • This includes diagnostic procedures, formal treatment and retention
Dental maximum Per plan year per person	Not covered	Not covered	\$750 for preventive and basic combined	Not covered	\$750 for preventive and basic combined \$500 for major
Lifetime per person	Not covered	Not covered	Not covered	Not covered	\$1,500 for orthodontics
Lock-in period changes in options⁸	2 years	2 years	2 years	2 years	2 years

8. Subject to the lock-in period indicated above, you can change your option on the policy anniversary. Evidence of insurability is required if you are moving up an option.

Qualifying for coverage

- Under the age of 75
- A Canadian resident
- An association member in good standing
- Actively working at least 25 hours a week
- To be eligible for this coverage, you and any dependants you wish to insure must also have provincial health insurance
- **Quebec residents** must also have health and drug coverage through Régie de l'assurance maladie du Québec (RAMQ). Prescription drug claims have to be submitted first to RAMQ. Your association coverage will pay the remaining eligible amount. The RAMQ coinsurance and deductible apply.
- If you are covered under this and another plan (for example, a spouse's benefits plan), your association coverage will pay according to standard coordination of benefits rules

What's the cost?

Extended health care and dental care insurance – option 1 (basic plan)

Monthly premium

Single

Age band	AB	BC	MB	NB	NL	NS	ON	PE	QC	SK	NT, NU and YT
Under 30	\$64.90	\$63.00	\$67.00	\$76.80	\$73.40	\$73.40	\$69.90	\$73.40	\$59.50	\$67.00	\$76.80
30-44	68.10	66.20	70.50	80.70	77.20	77.20	73.40	77.20	62.40	70.50	80.70
45-54	72.90	70.80	75.40	86.30	82.40	82.40	78.60	82.40	66.80	75.40	86.30
55-59	79.50	77.20	82.10	94.20	90.00	90.00	85.70	90.00	72.90	82.10	94.20
60-64	88.10	85.70	91.10	104.50	99.90	99.90	95.10	99.90	81.00	91.10	104.50
65-69	73.30	71.20	75.70	109.60	83.00	83.00	79.10	83.00	76.80	75.70	86.70
70-74	77.10	74.70	79.50	115.10	86.90	86.90	83.00	86.90	80.70	79.50	91.00

Couple (rate per person)

Age band	AB	BC	MB	NB	NL	NS	ON	PE	QC	SK	NT, NU and YT
Under 30	\$61.70	\$59.90	\$63.70	\$72.90	\$69.80	\$69.80	\$66.40	\$69.80	\$56.50	\$63.70	\$72.90
30-44	64.70	62.70	66.80	76.70	73.30	73.30	69.80	73.30	59.20	66.80	76.70
45-54	69.20	67.30	71.70	82.10	78.40	78.40	74.70	78.40	63.50	71.70	82.10
55-59	75.60	73.30	78.00	89.50	85.60	85.60	81.50	85.60	69.20	78.00	89.50
60-64	83.70	81.50	86.50	99.30	94.90	94.90	90.30	94.90	76.80	86.50	99.30
65-69	69.60	67.60	72.00	104.10	78.80	78.80	75.10	78.80	72.90	72.00	82.40
70-74	73.10	70.90	75.60	109.50	82.50	82.50	78.80	82.50	76.70	75.60	86.30

Child (rate per person)

AB	BC	MB	NB	NL	NS	ON	PE	QC	SK	NT, NU and YT
\$25.90	\$25.20	\$26.80	\$30.80	\$29.40	\$29.40	\$28.00	\$29.40	\$23.70	\$26.80	\$30.80

Extended health care and dental care insurance – option 2 (standard plan)

Monthly premium

Single

Age band	AB	BC	MB	NB	NL	NS	ON	PE	QC	SK	NT, NU and YT
Under 30	\$115.80	\$113.30	\$117.10	\$129.50	\$128.30	\$128.30	\$123.30	\$128.30	\$104.90	\$117.10	\$129.50
30-44	119.40	116.80	120.60	133.20	132.20	132.20	127.10	132.20	107.90	120.60	133.20
45-54	129.00	126.10	130.20	144.10	142.80	142.80	137.00	142.80	116.80	130.20	144.10
55-59	143.90	140.70	145.20	160.50	159.30	159.30	152.80	159.30	130.20	145.20	160.50
60-64	163.30	159.60	164.70	182.30	180.80	180.80	173.60	180.80	147.80	164.70	182.30
65-69	135.70	132.50	136.60	191.20	150.00	150.00	144.10	150.00	140.40	136.60	151.20
70-74	150.40	147.00	151.70	212.30	166.60	166.60	159.90	166.60	155.80	151.70	167.80

Couple (rate per person)

Age band	AB	BC	MB	NB	NL	NS	ON	PE	QC	SK	NT, NU and YT
Under 30	\$109.90	\$107.60	\$111.20	\$123.20	\$121.90	\$121.90	\$117.10	\$121.90	\$99.50	\$111.20	\$123.20
30-44	113.30	110.90	114.70	126.60	125.70	125.70	120.60	125.70	102.80	114.70	126.60
45-54	122.60	119.80	123.60	136.70	135.80	135.80	130.20	135.80	110.90	123.60	136.70
55-59	136.60	133.70	137.90	152.50	151.40	151.40	145.30	151.40	123.60	137.90	152.50
60-64	155.10	151.70	156.50	173.30	171.70	171.70	164.90	171.70	140.40	156.50	173.30
65-69	128.70	126.00	129.90	181.50	142.60	142.60	136.70	142.60	133.10	129.90	143.50
70-74	142.90	139.80	144.10	201.80	158.20	158.20	151.80	158.20	147.90	144.10	159.50

Child (rate per person)

AB	BC	MB	NB	NL	NS	ON	PE	QC	SK	NT, NU and YT
\$34.90	\$33.90	\$35.20	\$38.90	\$38.40	\$38.40	\$37.10	\$38.40	\$31.40	\$35.20	\$38.90

Extended health care and dental care insurance – option 3 (standard plus plan)

Monthly premium

Single

Age band	AB	BC	MB	NB	NL	NS	ON	PE	QC	SK	NT, NU and YT
Under 30	\$147.00	\$142.30	\$137.40	\$167.80	\$137.40	\$137.40	\$159.90	\$137.40	\$136.00	\$137.40	\$167.80
30-44	154.40	149.40	144.50	176.10	144.50	144.50	167.80	144.50	142.60	144.50	176.10
45-54	166.80	161.30	155.90	190.20	155.90	155.90	181.20	155.90	154.00	155.90	190.20
55-59	183.40	177.30	171.60	209.20	171.60	171.60	199.30	171.60	169.50	171.60	209.20
60-64	205.40	198.70	192.20	234.20	192.20	192.20	223.30	192.20	189.70	192.20	234.20
65-69	176.70	170.90	165.20	245.90	165.20	165.20	192.20	165.20	180.50	165.20	201.30
70-74	194.50	187.80	181.50	270.60	181.50	181.50	211.30	181.50	198.60	181.50	221.70

Couple (rate per person)

Age band	AB	BC	MB	NB	NL	NS	ON	PE	QC	SK	NT, NU and YT
Under 30	\$139.80	\$135.10	\$130.50	\$159.50	\$130.50	\$130.50	\$151.80	\$130.50	\$129.20	\$130.50	\$159.50
30-44	146.70	141.90	137.00	167.40	137.00	137.00	159.50	137.00	135.70	137.00	167.40
45-54	158.40	153.40	148.20	180.60	148.20	148.20	172.20	148.20	146.30	148.20	180.60
55-59	174.20	168.50	163.10	198.70	163.10	163.10	189.40	163.10	161.00	163.10	198.70
60-64	195.20	188.80	182.60	222.50	182.60	182.60	212.20	182.60	180.50	182.60	222.50
65-69	167.80	162.30	156.90	233.60	156.90	156.90	182.60	156.90	171.40	156.90	191.20
70-74	184.70	178.50	172.60	257.10	172.60	172.60	200.70	172.60	188.70	172.60	210.60

Child (rate per person)

AB	BC	MB	NB	NL	NS	ON	PE	QC	SK	NT, NU and YT
\$39.70	\$38.40	\$37.10	\$45.30	\$37.10	\$37.10	\$43.20	\$37.10	\$36.80	\$37.10	\$45.30

Extended health care and dental care insurance – option 4 (enhanced plan)

Monthly premium

Single

Age band	AB	BC	MB	NB	NL	NS	ON	PE	QC	SK	NT, NU and YT
Under 30	\$187.00	\$180.90	\$177.00	\$202.70	\$200.70	\$200.70	\$196.70	\$200.70	\$167.40	\$177.00	\$202.70
30-44	196.40	190.10	185.90	212.60	210.70	210.70	206.50	210.70	175.70	185.90	212.60
45-54	214.10	207.00	202.70	231.80	229.70	229.70	225.10	229.70	191.40	202.70	231.80
55-59	237.70	229.70	225.00	257.50	254.90	254.90	249.90	254.90	212.50	225.00	257.50
60-64	268.60	259.60	254.20	291.00	288.10	288.10	282.50	288.10	240.10	254.20	291.00
65-69	220.20	212.90	208.50	305.60	236.30	236.30	231.50	236.30	228.10	208.50	238.70
70-74	242.10	234.20	229.40	336.00	259.90	259.90	254.80	259.90	251.10	229.40	262.60

Couple (rate per person)

Age band	AB	BC	MB	NB	NL	NS	ON	PE	QC	SK	NT, NU and YT
Under 30	\$177.60	\$171.90	\$168.10	\$192.50	\$190.50	\$190.50	\$187.00	\$190.50	\$159.00	\$168.10	\$192.50
30-44	186.70	180.50	176.70	202.10	200.30	200.30	196.20	200.30	167.00	176.70	202.10
45-54	203.40	196.70	192.50	220.30	218.20	218.20	214.00	218.20	181.80	192.50	220.30
55-59	225.80	218.20	213.80	244.50	242.10	242.10	237.60	242.10	202.00	213.80	244.50
60-64	255.20	246.60	241.50	276.40	273.70	273.70	268.30	273.70	228.10	241.50	276.40
65-69	209.20	202.30	198.00	290.20	224.40	224.40	220.00	224.40	216.70	198.00	226.70
70-74	230.10	222.50	217.90	319.20	247.00	247.00	242.00	247.00	238.40	217.90	249.40

Child (rate per person)

AB	BC	MB	NB	NL	NS	ON	PE	QC	SK	NT, NU and YT
\$50.60	\$48.70	\$47.70	\$54.70	\$54.20	\$54.20	\$53.00	\$54.20	\$45.30	\$47.70	\$54.70

Extended health care and dental care insurance – option 5 (enhanced plus plan)

Monthly premium

Single

Age band	AB	BC	MB	NB	NL	NS	ON	PE	QC	SK	NT, NU and YT
Under 30	\$256.70	\$248.40	\$240.00	\$293.10	\$240.00	\$240.00	\$279.10	\$240.00	\$237.30	\$240.00	\$293.10
30-44	269.40	260.70	252.00	307.90	252.00	252.00	293.10	252.00	249.10	252.00	307.90
45-54	304.40	294.60	284.90	348.00	284.90	284.90	331.20	284.90	281.60	284.90	348.00
55-59	335.00	324.00	313.40	382.60	313.40	313.40	364.40	313.40	309.60	313.40	382.60
60-64	375.30	363.00	351.00	428.50	351.00	351.00	407.90	351.00	346.90	351.00	428.50
65-69	319.00	308.50	298.30	450.00	298.30	298.30	346.80	298.30	329.50	298.30	364.40
70-74	354.20	342.40	331.20	499.70	331.20	331.20	385.00	331.20	365.80	331.20	404.50

Couple (Rate per person)

Age band	AB	BC	MB	NB	NL	NS	ON	PE	QC	SK	NT, NU and YT
Under 30	\$243.90	\$235.90	\$228.00	\$278.40	\$228.00	\$228.00	\$265.00	\$228.00	\$225.30	\$228.00	\$278.40
30-44	256.00	247.80	239.50	292.40	239.50	239.50	278.40	239.50	236.70	239.50	292.40
45-54	289.10	279.90	270.70	330.50	270.70	270.70	314.80	270.70	267.40	270.70	330.50
55-59	318.20	308.00	297.90	363.50	297.90	297.90	346.20	297.90	294.20	297.90	363.50
60-64	356.50	344.80	333.50	407.20	333.50	333.50	387.70	333.50	329.50	333.50	407.20
65-69	303.00	293.10	283.60	427.50	283.60	283.60	329.40	283.60	313.10	283.60	346.20
70-74	336.40	325.40	314.80	474.60	314.80	314.80	365.80	314.80	347.60	314.80	384.20

Child (Rate per person)

AB	BC	MB	NB	NL	NS	ON	PE	QC	SK	NT, NU and YT
\$69.50	\$67.00	\$64.70	\$79.20	\$64.70	\$64.70	\$75.40	\$64.70	\$64.10	\$64.70	\$79.20

Rates are calculated based on your age and gender as of the policy anniversary. Age calculation is made at policy anniversary of each year.

Rates are reviewed every year, may change, and will increase as you move into the next age band.

Rates are yearly renewable and subject to provincial tax where applicable.



What's excluded?

There are no benefits paid for claims resulting directly or indirectly from any of the following:

- Services or supplies payable or available (regardless of any waiting list) under any government-sponsored plan or program
- Services or supplies that exceed reasonable costs and usual rates where they are provided
- Equipment that Securian Canada considers ineligible including, but not limited to: orthopaedic mattresses, exercise equipment, air-conditioning or air-purifying equipment, whirlpools and humidifiers
- Any services or supplies that are not usually provided to treat an illness, including experimental or investigational treatments
- Services or supplies that would normally be free of charge
- Services or supplies that are self-prescribed or are prescribed by a person who lives with insured or who is related to insured by blood or marriage
- Intentional self-inflicted injuries or attempted suicide while sane or insane
- Voluntary participation in a riot or act of civil disobedience
- War, insurrection or rebellion
- Committing or attempting to commit a crime

Professional overhead expense insurance

If you're ill, what's your plan to keep your business healthy? Professional overhead expense (POE) insurance means you don't have to worry about some of your office expenses if you have to be away to recover from an illness or accident.

About the coverage

You can apply for a monthly benefit payment of \$500 to \$5,000 in units of \$100. When you have POE insurance under another insurance plan, Securian Canada will pay a proportional share of the expenses.

Here's a list of what's covered and not covered under your association's POE insurance:

What's covered	What's not covered
<ul style="list-style-type: none">• Staff salaries/wages• Rent• Heat, water, electricity, telephone• Depreciation• Other fixed expenses normally related to running an office, including taxes and mortgage interest on owned business properties	<ul style="list-style-type: none">• Payment for a person to perform your duties in your absence• Cost of goods or merchandise• Implements of your occupation• Cost of automobiles• Mortgage amortization payments, payment of mortgage principal

Qualifying for coverage

- Under the age of 60
- A Canadian resident
- An association member in good standing
- Actively working at least 25 hours a week

Extra advantages

✓ Add or reduce your coverage anytime within your maximum

You'll need to make your request in writing to increase your coverage and provide evidence that you are insurable.

✓ Waiver of premium

If you're totally disabled for a full 90 days before age 65 and receiving POE benefits, you don't have to pay POE premiums as long as you remain totally disabled.

✓ Top up for reduced income when you re-start work

You may qualify for a partial benefit if, right after a period of total disability where you were receiving benefits, you start working and a physician monitors your medical progress.

The payment is reduced by 50 percent of your earnings when you return to work and any other amount payable to you under other coverage, government or association programs.

Securian Canada must approve your partial benefit.

What's the cost?

Professional overhead expense insurance

Monthly rates in units of \$100

Coverage from \$500 to \$5,000

Elimination period (EP)

Age	EP 14 days - male	EP 14 days - female	EP 30 days - male	EP 30 days - female
Under 30	\$0.68	\$0.90	\$0.59	\$0.70
30-34	0.73	0.97	0.63	0.80
35-39	0.75	1.00	0.65	0.90
40-44	0.85	1.25	0.75	1.15
45-49	1.10	1.45	0.90	1.35
50-54	1.45	1.60	1.20	1.45
55-59	2.00	1.90	1.65	1.55
60-64*	2.65	2.30	2.15	1.75

* Renewal rates only

Rates are calculated based on your age and gender as of the policy anniversary. Age calculation is made at policy anniversary of each year.

Rates are reviewed every year, may change, and will increase as you move into the next age band.

Rates are yearly renewable and subject to provincial tax where applicable.

What's excluded?

There are no benefits paid for claims resulting directly or indirectly from any of the following:

- Declared or undeclared war, insurrection or rebellion
- Voluntary participation in a riot or act of civil disobedience
- Self-inflicted injury regardless of whether the insured has the ability to form the requisite intent or regardless of whether the insured has a mental illness such that the insured does not know or understand the consequences of the insured's action(s)
- Committing or attempting to commit a criminal offence
- Normal pregnancy and/or childbirth

When does your coverage end?

Your coverage ends:

- On your 75th birthday for Life, EHC and Dental
- On your 70th birthday for AD&D and CI
- On your 65th birthday (minus the elimination period) for LTD and POE
- Date the plan terminates
- On the premium due date if you don't pay the premium (although there is a grace period)
- If you cancel your coverage
- When you no longer live in Canada
- On the date of your death
- For critical illness, on the date any critical illness benefit is paid to you
- Date you are no longer actively at work
- Date you are not covered by LTD for POE
- Date you no longer qualify for benefits under a provincial Medicare plan or federal government plan that provides similar benefit for EHC

Your spouse's coverage ends:

- On your 75th birthday for Life, EHC and Dental
- On your 70th birthday for AD&D and CI
- Date your coverage terminates
- On the premium due date if you don't pay the premium (although there is a grace period)
- When your spouse no longer lives in Canada
- Date the plan no longer includes spouse coverage
- Date your spouse no longer satisfies the required definition
- For critical illness, on the date any critical illness benefit is paid to your spouse
- Date your spouse no longer qualifies for benefits under a provincial Medicare plan or federal government plan that provides similar benefit for EHC

Your dependant child(ren)'s coverage ends:

- Date your coverage terminates
- On the premium due date if you don't pay the premium (although there is a grace period)
- When your child no longer lives in Canada
- Date your plan no longer includes dependant coverage
- Date the child no longer satisfies the required definition
- The date your child no longer qualifies for benefits under a provincial Medicare plan or federal government plan that provides similar benefit for EHC

All coverage becomes effective upon date of approval and receipt of premium payment. This brochure provides highlights but not all the details of the OAMHP insurance program. The complete terms, conditions, exclusions and limitations governing the coverage are found in the group insurance policy and certificate of insurance issued by Canadian Premier Life Insurance Company, which operates under the brand name Securian Canada.

How to apply

Protect yourself and your loved ones today

It's important to have the safeguards in place to protect yourself, your family and your finances.

With your association's group rates, getting the insurance you need is more affordable.

It's convenient too...simply visit securiancanada.ca/oamhp to check your options, see the rates and follow these three steps.



Download application



Fill it out



Mail it in



Apply today – so you can rest easier tomorrow

Have questions?

Please give us a call at **1-877-363-2773**

Monday-Friday, 8 a.m.-8 p.m. ET.

Appendix for critical illnesses covered

Covered illnesses	Description
Blindness	<p>A definite diagnosis of the total and irreversible loss of vision in both eyes, evidenced by:</p> <ul style="list-style-type: none"> a. the corrected visual acuity being 20/200 or less in both eyes; or b. the field of vision being less than 20 degrees in both eyes. <p>The diagnosis of blindness must be made by a specialist physician. The insured must survive for 30 days following the date of diagnosis.</p>
Cancer (life-threatening)	<p>A definite diagnosis of a tumour which must be characterized by the uncontrolled growth and spread of malignant cells and the invasion of tissue.</p> <p>Types of cancer include carcinoma, melanoma, leukemia, lymphoma and sarcoma.</p> <p>The diagnosis of cancer must be made by a specialist physician. The insured must survive for 30 days following the date of diagnosis.</p> <p>Exclusions</p> <p>No benefit will be payable for a recurrence or metastasis of an original cancer which was diagnosed prior to the effective date of coverage.</p> <p>No benefit will be payable under this condition for the following:</p> <ul style="list-style-type: none"> a. lesions described as benign, pre-malignant, uncertain, borderline, non-invasive, carcinoma in situ (Tis), or tumours classified as Ta; b. malignant melanoma skin cancer that is less than or equal to 1.0 mm in thickness, unless it is ulcerated or is accompanied by lymph node or distant metastasis; c. any non-melanoma skin cancer, without lymph node or distant metastasis; d. prostate cancer classified as having any of the following: <ul style="list-style-type: none"> i. papillary thyroid cancer or follicular thyroid cancer, or both, that is less than or equal to 2.0 cm in greatest diameter and classified as T1, without lymph node or distant metastasis; ii. chronic lymphocytic leukemia classified less than Rai stage 1; or iii. malignant gastrointestinal stromal tumours (GIST) and malignant carcinoid tumours, classified less than AJCC Stage 2. <p>Moratorium period exclusions</p> <p>No benefit will be payable under this condition and the insured's coverage for cancer will terminate if within the first 90 days following the later of:</p> <ul style="list-style-type: none"> a. the date the application for this coverage was signed; or b. the effective date of the insured's coverage, the insured has any of the following: <ul style="list-style-type: none"> i. signs, symptoms or investigations, that lead to diagnosis of cancer (covered or excluded under this policy), regardless of when the diagnosis is made; or ii. a diagnosis of cancer (covered or excluded under this policy).

Covered illnesses	Description
Cancer (life-threatening) (continued)	<p>While the insured's insurance for cancer terminates, insurance for all other covered conditions remains in force.</p> <p>Medical information about the diagnosis and any signs, symptoms or investigations leading to the diagnosis must be reported to the Company within 6 months of the date of the diagnosis. If this information is not provided within this period, the Company has the right to deny any claim for cancer or, any Critical Illness caused by any cancer or its treatment.</p> <p>For purposes of this policy, the terms Tis, Ta, T1a, T1b, T1 and AJCC Stage 2 are to be applied as defined in the American Joint Committee on Cancer (AJCC) cancer staging manual, 7th Edition, 2010.</p> <p>For purposes of this policy, the term Rai staging is to be applied as set out in KR Rai, A Sawitsky, EP Cronkite, AD Chanana, RN Levy and BS Pasternack: Clinical staging of chronic lymphocytic leukemia. Blood. 1975;46(2):219-34</p>
Coronary artery bypass surgery	<p>The undergoing of heart surgery to correct narrowing or blockage of one or more coronary arteries with bypass graft(s).</p> <p>The surgery must be determined to be medically necessary by a specialist physician.</p> <p>The Insured must survive for 30 days following the date of surgery.</p> <p>Exclusions</p> <p>No benefit will be payable under this condition for angioplasty, intra-arterial procedures, percutaneous trans-catheter procedures or non-surgical procedures.</p>
Deafness	<p>A definite diagnosis of total and irreversible loss of hearing in both ears, with an auditory threshold of 90 decibels or greater within the speech threshold of 500 to 3,000 hertz. The diagnosis of deafness must be made by a specialist physician. The insured must survive for 30 days following the date of diagnosis.</p>
Heart attack	<p>A definite diagnosis of death of heart muscle due to obstruction of blood flow that results in a rise and fall of biochemical cardiac markers to levels considered diagnostic of myocardial infarction, with at least one of the following:</p> <ul style="list-style-type: none"> a. heart attack symptoms; b. new electrocardiogram (ECG) changes consistent with a heart attack; or c. development of new Q waves during or immediately following an intra-arterial cardiac procedure including, but not limited to, coronary angiography and coronary angioplasty. <p>The diagnosis of heart attack must be made by a specialist physician. The insured must survive for 30 days following the date of diagnosis.</p> <p>Exclusions</p> <p>No benefit will be payable under this condition for:</p> <ul style="list-style-type: none"> a. elevated biochemical cardiac markers as a result of an intra-arterial cardiac procedure including, but not limited to, coronary angiography and coronary angioplasty, in the absence of new Q waves; or b. ECG changes suggesting a prior myocardial infarction, which do not meet the heart attack definition as described above.

Covered illnesses Description

<p>Kidney failure</p>	<p>A definite diagnosis of chronic irreversible failure of both kidneys to function, as a result of which regular haemodialysis, peritoneal dialysis or renal transplantation is initiated.</p> <p>The diagnosis of kidney failure must be made by a specialist physician. The insured must survive for 30 days following the date of diagnosis.</p>
<p>Loss of independent existence</p>	<p>A definite diagnosis of the total inability to perform, by oneself, at least 2 of the following 6 activities of daily living for a continuous period of at least 90 days with no reasonable chance of recovery. Activities of daily living are:</p> <ul style="list-style-type: none"> a. bathing – the ability to wash oneself in a bathtub, shower or by sponge bath, with or without the aid of assistive devices; b. dressing – the ability to put on and remove necessary clothing, braces, artificial limbs or other surgical appliances with or without the aid of assistive devices; c. toileting – the ability to get on and off the toilet and maintain personal hygiene with or without the aid of assistive devices; d. bladder and bowel continence – the ability to manage bowel and bladder function with or without protective undergarments or surgical appliances so that a reasonable level of hygiene is maintained; e. transferring – the ability to move in and out of a bed, chair or wheelchair, with or without the aid of assistive devices; and f. feeding – the ability to consume food or drink that already has been prepared and made available, with or without the use of assistive devices. <p>The diagnosis of loss of independent existence must be made by a specialist physician. No additional survival period is required once the conditions described above are satisfied.</p>
<p>Major organ transplant</p>	<p>A definite diagnosis of irreversible failure of the heart, both lungs, liver, both kidneys or bone marrow, and transplantation must be medically necessary.</p> <p>To qualify under major organ transplant, the insured must undergo a transplantation procedure as the recipient of a heart, lung, liver, kidney or bone marrow, and limited to these entities.</p> <p>The diagnosis of major organ failure must be made by a specialist physician.</p> <p>The insured must survive for 30 days following the date of the transplant.</p>
<p>Multiple sclerosis</p>	<p>A definite diagnosis of at least one of the following:</p> <ul style="list-style-type: none"> a. two or more separate clinical attacks, confirmed by magnetic resonance imaging (MRI) of the nervous system, showing multiple lesions of demyelination; or b. well-defined neurological abnormalities lasting more than 6 months, confirmed by MRI of the nervous system, showing multiple lesions of demyelination; or c. a single attack, confirmed by repeated MRI of the nervous system, which shows multiple lesions of demyelination which have developed at intervals at least one month apart. <p>The diagnosis of multiple sclerosis must be made by a specialist physician. The insured must survive for 30 days following the date of diagnosis.</p>

Covered illnesses Description

Paralysis	<p>A definite diagnosis of total loss of muscle function of two or more limbs as a result of injury or disease to the nerve supply of those limbs, for a period of at least 90 days following the precipitating event.</p> <p>The diagnosis of paralysis must be made by a specialist physician. The insured must survive for 90 days following the precipitating event.</p>
Stroke (cerebrovascular accident)	<p>A definite diagnosis of an acute cerebrovascular event caused by intra-cranial thrombosis or haemorrhage, or embolism from an extra-cranial source, with:</p> <ul style="list-style-type: none">a. acute onset of new neurological symptoms; andb. new objective neurological deficits on clinical examination persisting for more than 30 days following the date of diagnosis. These new symptoms and deficits must be corroborated by diagnostic imaging testing. The diagnosis of stroke must be made by a specialist physician. The insured must survive for 30 days following the date of diagnosis. <p>Exclusions</p> <p>No benefit will be payable under this condition for:</p> <ul style="list-style-type: none">a. transient ischaemic attacks;b. intracerebral vascular events due to trauma; orc. lacunar infarcts which do not meet the definition of stroke as described above.



Glossary

Dependant children: Your child(ren) who are not married or in any other formal union recognized by law, dependant on you or your spouse for support, and are under the age of 21 (age 25 if the dependant is a full-time student – age 26 in Quebec), including adopted children and stepchildren, or children of any age if incapable of supporting themselves because of physical or mental disability. Once you opt for family coverage, newborn infants are automatically covered. You must also have coverage in order to obtain dependant child coverage.

Integration of benefits: When covered under another insurance plan which provides similar coverage to the benefits provided by this benefit, Securian Canada will pay only the proportional share of the benefit.

Interrupt disability (after the elimination period): After the elimination period has been completed, interrupted periods of disability are treated as a continuation of the same disability if: no interruption is longer than 6 months and the disabilities are due to the same or related causes.

Partial disability benefit: If, immediately after a period of total disability for which benefits have been paid, the insured enters into gainful employment under the supervision of a physician and approved by the Company, the insured qualifies for monthly partial disability benefits.

Spouse: Your spouse by marriage or under any other formal union recognized by law; or a person of the opposite sex or of the same sex who is publicly represented as your spouse for a period of at least 12 months. You can only cover one spouse at a time. Discontinuance of cohabitation terminates the eligibility of a common-law spouse. You must also have coverage in order to obtain spouse coverage.

Total disability: You are considered totally disabled if, for 180 days, you are prevented by illness from performing any occupation you are or may become reasonably qualified for by education, training or experience.

Totally disabled: During the elimination period and for the first 24 months, you are considered totally disabled if sickness or injury prevents you from performing the essential duties of your regular occupation, you are under the regular care of a physician and you are not gainfully employed elsewhere except as allowed under the work re-entry program.

After 24 months, you are considered totally disabled if illness or injury prevents you from working at any occupation (this definition changes if you purchase the own occupation rider) for which you are qualified by education, training or experience, you are under the regular care of a physician and are not gainfully employed elsewhere except as permitted under the work re-entry program.

Totally disabled (for life insurance): For 180 days, you're not able to work at an occupation that you are or could become qualified for by education, training or experience.

Totally disabled (for the purpose of POE): You can't perform the essential parts of your job because of illness or injury and are not working at another paying job except as permitted under a Work Re-Entry program if approved by Securian Canada. You must also be under the regular care of a physician.

Securian Canada is the brand name used by Canadian Premier Life Insurance Company and Canadian Premier General Insurance Company to do business in Canada. Policies are underwritten by Canadian Premier Life Insurance Company.



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