Ducati Protection Plus
Loan Protection

DUCATI EVER RED

Product Summary

Life, Accidental Death, Critical Illness, Total Disability, and Accidental Disability Plus.

PRODUCT SUMMARY

Group Life, Critical Illness, Disability and Involuntary Unemployment and Insurance (Group policy CPL202611)

Insured by:

Canadian Premier Life Insurance Company

(Securian Canada)

25 Sheppard Avenue West, Suite 1400
Toronto, Ontario M2N 6S6

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

- Email: **service@securiancanada.ca**
- Phone (Toll-free): **1-855-883-6176**
- Website: **securiancanada.ca**
- AMF client number: **2000829775**
- AMF Website: **lautorite.qc.ca/en**

Administrated by:

Reinsurance Management Associates, Inc.
170 University Avenue, Suite 500
Toronto, Ontario M5H 3B3

- Email: **info@rmacan.com**
- Phone: **1-888-307-7443**

Offered by:

[to be filled by the distributor]

Group Life, Critical Illness, Disability and Involuntary Unemployment Insurance (Group policy CPL202611)

This Summary is designed to describe our creditor insurance by providing you with information in a reader-friendly format. Please refer to the full terms and conditions of the Group Policy for a complete list of limitations and exclusions.

Life is full of uncertainties…Customized coverage to suit your needs. You can choose from one or all the 4 following coverages:

1) Life Insurance OR Accidental Death Insurance	2) Critical Illness Insurance
• You are financing or leasing a vehicle. • You want to protect your family and your Loved Ones if you suddenly pass away. • Less expensive coverage available with Accidental Death Insurance but **the death must result from an accident only**. • Optional insurance for any balloon/residual amount. • Single or joint coverage available.	• You are financing or leasing a vehicle. • You want to protect your family and your Loved Ones if you are suddenly diagnosed with a critical illness, and your cost of living has altered significantly. • Optional insurance for any balloon/residual amount. • Single or joint coverage available.
3) Total Disability Insurance	**4) Accidental Disability Insurance Plus**
• You are financing or leasing a vehicle. • You want to protect your family and your Loved Ones • in case you become Totally Disabled due to an injury or sickness. • Single or joint coverage available.	• You are financing or leasing a vehicle. • You want to protect your family and your Loved Ones in case you become Totally Disabled due to an accident only or your become involuntary unemployed. • Single or joint coverage available.

Only a few conditions apply for your Eligibility:

1) Life Insurance OR Accidental Death Insurance	2) Critical Illness Insurance
• You must be at least 18 years of age, but not yet 70 years old. • No medical questions asked up to $250,000 of coverage.	• You must be at least 18 years of age, but not yet 61 years old. • No medical questions asked up to $50,000 of coverage. • For any coverage amount exceeding $50,000, you must answer 4 medical questions. If you answer “Yes” to any of the questions, your eligibility for coverage will be determined by the insurer.
3) Total Disability Insurance	**4) Accidental Disability Insurance Plus**
• You must be at least 18 years of age, but not yet 66 years. • You must be employed and actively at work to qualify for this coverage. Please see the “Conditions of Eligibility” section on the Certificate of Insurance for full eligibility requirements. • No medical questions asked up to $1,500 of coverage per month. • For any coverage amount exceeding $1,500 per month, you must answer 4 medical questions. If you answer “Yes” to any of the questions, your eligibility for coverage will be determined by the insurer.	• You must be at least 18 years of age, but not yet 66 years. • You must be employed and actively at work to qualify for this coverage. Please see the “Conditions of Eligibility” section on the Certificate of Insurance for full eligibility requirements. • No medical questions asked up to $1,500 of coverage per month. • For any coverage amount exceeding $1,500 per month, you must answer 4 medical questions. If you answer “Yes” to any of the questions, your eligibility for coverage will be determined by the insurer.

What are the Insurance terms and benefits?

1) Life Insurance OR Accidental Death Insurance	2) Critical Illness Insurance
• Pays to the creditor the outstanding balance of the insured loan or the remaining payments under a lease agreement. • Pays to the creditor any residual/balloon amount if the corresponding coverage has been purchased. • Any amount in default or any amount you paid or paid by the creditor or other insurance providers are not part of the benefit. • Coverage available up to $250,000. • You are covered for the duration of your loan, up to a maximum of 180 months, without exceeding the date on which you turn 75 years old.	• Pays to the creditor the outstanding balance of the insured loan or the remaining payments under a lease agreement, if you are diagnosed with a covered Critical Illness, and survive 30 days. • Pays to the creditor any residual/balloon amount if the corresponding coverage has been purchased. • Any amount in default or any amount you paid or paid by the creditor or other insurance providers are not part of the benefit. • Coverage available up to $250,000. • You are covered for the duration of your loan, up to a maximum of 120 months, without exceeding the date on which you turn 66 years old.
3) Total Disability Insurance	**4) Accidental Disability Insurance Plus**

• Pays the monthly debt obligation to the creditor during the period of disability, after you have been Totally Disabled during the waiting period of 30 days.
• Coverage available up to $5,000 per month.
• You are covered for the duration of your loan, up to a maximum of 96 months, without exceeding the date on which you turn 70 years old or the date you retire.
• Customize your coverage:
  ○ 30 Day Retroactive: payments start after the waiting period, and are retroactive to the date of Total Disability.
  ○ 30 Day Non-Retroactive: payments start after the waiting period, but are not retroactive to the date of Total Disability.
  ○ Term of Insurance or 12 Months Max.: “Term of Insurance” pays benefits for the entire length of the Total Disability, while “12 Months. Max” limits the number of benefit payments to 12 monthly payments per occurrence. Non-Retroactive.
	• Pays the monthly debt obligation to the creditor during the period of disability, after you have been Totally Disabled, **due to an accident only**, during the waiting period of 30 days. Payments are Non-Retroactive.
	• Pays the monthly debt obligation to the creditor during the period of unemployment, after you have been involuntary unemployed during the waiting period of 30 days. Payments are Non-Retroactive. There is a 90-day qualification period during which no claims for involuntary unemployment are eligible.
	• Coverage available up to $5,000 per month.
	• You are covered for the duration of your loan, up to a maximum of 96 months, without exceeding the date on which you turn 70 years old or the date you retire.
	• Up to 6 payments per period of disability or involuntary unemployment.

You can choose to be covered under both disability insurance coverages (3 & 4). In this case, any claim for a total disability due to an accident will be reviewed under the Total Disability Insurance because it provides the greater benefit.

Who is the *beneficiary* of this insurance?
The *beneficiary* of this insurance is your *creditor*. Thus, insurance benefits are payable directly to the *creditor* to reduce or repay your *loan*.

How is my premium amount calculated?
In order to guarantee competitive rates, premiums are based on group insurance rates. The premiums are calculated based on a formula, depending on the Principal Amount Insured, the Term of Insurance, the benefits selected, the number of persons insured and the type of option selected for Total Disability Insurance (30 Day Retroactive, 30 Day Non-Retroactive, 12 months Max or Term of Insurance).

How is my insurance premium paid?
It will consist of a First Year Premium, which must be paid in full upon purchase, and Renewal Premiums, due annually on each anniversary of the effective date of your coverage. Provincial tax applicable on insurance premiums applies. The First Year Premium may be added to the amount of your *loan.*

What is my proof of insurance?
If your application for insurance is accepted, you will receive a letter confirming that you are insured within 30 days after signing the application for insurance.

Can I renew my insurance?
No, once the insurance period has expired, it cannot be renewed.

What are the exclusions and limitations of coverage?

All insurance is subject to some exclusions and limitations. Below is a summary of the exclusions and limitations to this coverage. Please refer to the "Exclusions" and "Limitations" sections of the Certificate of Insurance.

Any concealment, misrepresentation or making a false declaring could void the insurance.

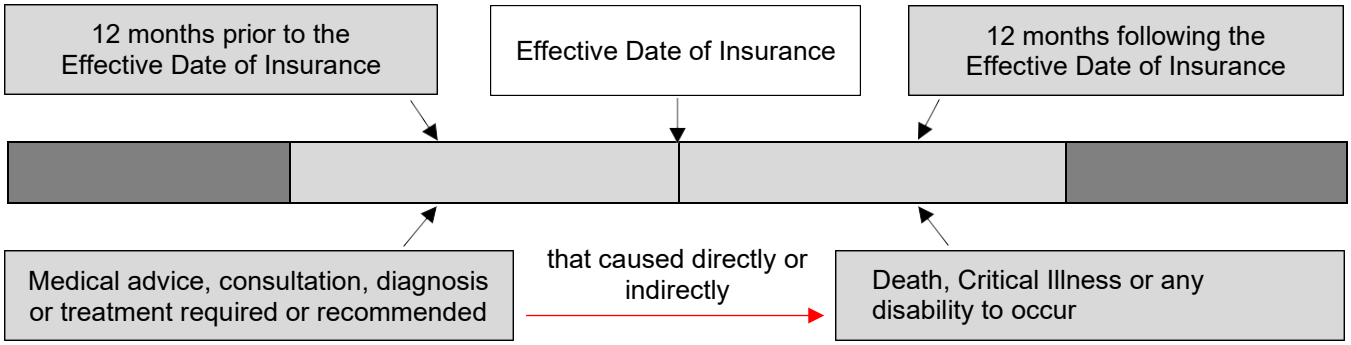
The insurer will not pay your claim if your death, Critical Illness or Total Disability results from the following:

- a Pre-Existing Condition occurring during the first 12 months of coverage;
- war or act of war, whether declared or undeclared;
- suicide or attempted suicide or self-inflicted injury within two (2) years of the Effective Date of
- Insurance, while sane or insane;
- flight in a non-scheduled aircraft;
- poisoning, intoxication, abuse of any alcohol or drug; or
- commission or attempted commission of a criminal offence.
- For Total Disability only, childbirth, abortion, pregnancy, complication of pregnancy, or miscarriage.
- For Critical Illness, the specific exclusions under each type of Critical Illness, defined in the Certificate.

The insurer will not pay your claim if your involuntary unemployment results from the following:

- involuntary unemployment beginning within a period of ninety (90) days following the Effective Date of Insurance;
- loss of self-employment;
- involuntary unemployment resulting directly or indirectly from:
  - seasonal layoff;
  - expiry of a contract of employment for a fixed term;
  - termination of employment with cause;
  - voluntary resignation;
  - voluntary or mandatory retirement;
  - maternity leave or parental leave;
  - deception, fraud, criminal conduct, conflict of interest, willful misconduct or refusal to perform one's own position;
  - lock-out or strike;
  - any layoff or staff reduction program announced by an employer prior to the Effective Date of Insurance;
  - any Total Disability occurring while insurance is in force and for which a valid claim may be made under any disability insurance; or
  - expiry of a contract of employment with a temporary employment agency.

What is a Pre-Existing condition?



Limitations

Life Insurance OR Accidental Death Insurance, Critical Illness Insurance

- In no event shall any benefit exceed a maximum amount of $250,000.
- If joint coverage was purchased and there is death of both Applicants, the Insurer shall pay only one benefit.

Any Disability Insurance and Involuntary Unemployment Insurance

- Your Monthly Amount Insured shall not exceed $5,000 per month.
- If you become totally disabled (for the same condition) or involuntary unemployed within 180 days from a previous period, this will be considered a continuation of the previous period.
- If joint coverage was purchased and you and your Co-Applicant are Totally Disabled or involuntary unemployed at the same time, the Insurer shall pay benefits with respect to one Applicant only.
- No benefit will be paid under Total Disability Insurance while benefits are being paid under the Accidental Disability Insurance Plus and vice versa.
- If your Total Disability results directly or indirectly from any back or neck, injury or disorder you must be under the care of a licensed specialist such as a neurologist, a neurosurgeon, a physiatrist, an orthopedic surgeon or a rheumatologist. For such Total Disability, the benefit period will never exceed six (6) months.
- If your Total Disability results directly or indirectly from any mental, nervous, psychological, emotional, behavioral disorder, disease or condition, you must be under the continuing care of a specialist in psychiatry. If you are on a waiting list, you do not qualify for benefits. For such Total Disability, the benefit period will never exceed six (6) months.

Other considerations

- During the first 12 months of a Total Disability claim, you must:
  - be under the continuous care of a physician; and
  - you must be prevented from performing the main duties of your occupation.

- If you do not have an occupation when the Total Disability occurs OR after a Disability claim that has been paid for 12 months, any new benefit payments will only be made if:
  - You are under the continuing care of a physician; and if
  - you are prevented from performing the duties of any occupation for which you are reasonably suited by reason of education, training or experience, regardless of the availability of employment.

- Your disability benefit will end if you not participate in, and cooperate with, a treatment program prescribed by your Physician. Please refer the Definition section of your Certificate of Insurance for additional information regarding a Treatment Program.

How do I make a claim:

Simply by contacting the administrator in order to obtain a claim form and the instructions to complete it:

- Call the administrator at: 1-888-307-7443; or
- Email the administrator: info@rmacan.com indicating:
    - the address the claim form should be sent to
    - the telephone number where the claimant can be reached; or
- Write to the administrator at the following address:
    - Reinsurance Management Associates, Inc.,
    - 170 University Avenue – Suite 500
    - Toronto, Ontario M5H 3B3

There is a 1 year limit to make a claim for Life or Accidental Death Insurance and 90 days for Critical Illness, any disability or involuntary unemployment insurance.

Incomplete forms will only delay the processing of your claim. You must perform all actions required by the Insurer. You must also provide the Insurer with such information or documentation as may be required. If you do not satisfy the Insurer's requests, the Insurer will not be responsible for making any claim payments. Until you have satisfied all of the Insurer's requirements, you shall be solely responsible for making the required payments for your loan.

The insurer will adjudicate the claim as soon as it is received. You will receive a letter from the insurer generally within 10 days of receiving the claim form. If the insurer determines that benefits are payable based on the initial documents received, a cheque will be issued to the creditor within 10 days of receiving the claim.

It is important that you continue to make regular loan payments until a decision has been made.

Should your claim be denied, you may appeal this decision by writing to the administrator within 2 years of the date of the denial.

Termination of Insurance

30-day Satisfaction Guarantee

- You can cancel your insurance within 30 days following the signing of the application for insurance without penalties. The First Year Premium will be refunded to your creditor.

After the first 30 days

- You can cancel your insurance at any time.
- Refunds are calculated based on the Rule of 78 formula (see example below).
- A policy fee of $125 will be deducted from the refundable amount.
- An administration fee of $150 will be deducted from the refundable amount;
- All benefit payments made will be deducted from the refundable amount.
- Amounts of less than $10 will not be refunded.

Insurance will automatically terminate on the earliest of the following dates:

- the date you loan is fully repaid or discharged;
- the date your creditor repossesses your vehicle;
- the date the administrator receives your written request to terminate insurance;
- the date your loan is renegotiated, transferred to another creditor or transferred to another debtor;
- the date your retire for any reasons, including but not limited to voluntary, mandatory or disability retirement, in regards to any disability insurance or Involuntary Unemployment Insurance;
- the date a Life, Critical Illness or Accidental Death Insurance benefit is paid;
- the date on which you turn 75 years of age for Life or Accidental Death Insurance;
- the date on which you turn 66 years of age for Critical Illness Insurance;
- the date on which you turn 70 years of age for any disability insurance or Involuntary Unemployment Insurance; or
- for a specific coverage: the date the term of insurance for this coverage for this insured has ended.

Rule of 78 formula:

$$\text{Refund} = \text{First Year Premium paid} \times \frac{N \times (N + 1)}{D \times (D + 1)}$$

N = number of months remaining
D = total number of months scheduled in the insurance contract.

Example of a calculation using the rule of 78 formula:
The term of your insurance contract is 60 months, but you choose to cancel your contract after 10 months. You paid a premium of $650. Therefore, N = 50 and D = 60 and the calculation is the following:

$$\frac{50 \times (50 + 1)}{60 \times (60 + 1)} = 0.6967.$$

We will reimburse you $650 x 0.6967 = $452.86, less the administration fee, policy fee, and benefits paid, plus any applicable tax.

You can send your cancellation letter to the administrator at the following address:

Reinsurance Management Associates, Inc.
170 University Avenue - Suite 500
Toronto, Ontario M5H 3B3
Telephone (toll-free): 1 888 307-7443
Fax: 1 888 475-1116

Complaints

The insurer and the administrator are committed to providing you with exceptional customer service and product. We are also committed to reviewing and responding to your concerns about our product and services in a timely manner.

However, despite best efforts and intentions, if you are unsatisfied, you can file a complaint with the insurer (https://securiancanada.ca/complaints/).

Your complaint is important to us and we will treat it with the utmost respect, importance, and confidentiality.

The procedure for handling complaints once they have been received is as follows:

- Your complaint will be directed to the appropriate person within 24 hours.
- Your complaint will be acknowledged and you will be notified of the steps in the complaint resolution process and your right to escalate the complaint to a third party if not resolved to your satisfaction or within a reasonable time frame.
- If your complaint cannot be resolved, or if you decide to escalate your complaint, then your complaint will be referred to a supervisor or manager.
- The supervisor or manager will review your complaint, and advise you in writing of the Company's final position with respect to your complaint.
- If you are still not satisfied, you may appeal to the following:

  OmbudService for Life & Health Insurance (OLHI)
  401 Bay Street, Suite 1507
  P.O. Box 7
  Toronto, Ontario
  M5H 2Y4
  Telephone: (416) 777-9002 (Toronto only)
  (888) 295-8112 (toll free)
  Fax: (416) 777-9750
  Website: www.olhi.ca