

BLUE CROSS® LIFE

Protection when faced with a critical illness diagnosis and you need treatment

Comprehensive
Critical Illness Insurance

No one is ever really prepared for a critical illness diagnosis. The whirlwind of appointments, tests, treatments and medications is often life-altering and could add to your stress levels.

The treatment to recovery is vital, but it can also be expensive. Your group benefits plan and Provincial Health Insurance may only cover some of the costs associated with treatment. You may still be responsible for out-of-pocket expenses.

Comprehensive Critical Illness coverage helps provide financial support if you are diagnosed with a covered critical illness. With the expense of treatment often high, seeking the treatment you need could seem like a financial burden. When a diagnosis occurs, you need to be focused on getting better and taking control of your health, not stressing over financial worries.

Here's How It Works

You choose benefits to protect yourself and any family members. Then, if diagnosed with a covered critical illness, you will receive a cash benefit based on the percentage payable for the condition.

Meeting Your Needs

- Guaranteed Issue coverage, subject to exclusions and limitations[1]
- Coverage available for spouse at an additional cost
- Dependent children are automatically covered at no cost for 50% of your Comprehensive Critical Illness benefit amount
- Benefits paid regardless of any other medical or disability plan coverage
- Premiums are affordable with a convenient payment process
- Coverage may be continued after employment; refer to your certificate for details
- No pre-existing condition exclusions and no survival period
- Claims are typically paid within 2-4 days from when forms are received

With Blue Cross Life®, you can make treatment decisions without putting your finances at risk.

DID YOU KNOW?

48%

of deaths in Canada in 2023 were attributed to cancer, heart disease and stroke/cerebrovascular disease.[2]

696/day

people in Canada expected to be diagnosed with cancer in 2026[3]

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[1]Please refer to the Exclusions and Limitations section of this brochure.
[2]Statistics Canada, Top 10 leading causes of death, Canada, 2023
[3]Canadian Cancer Society, Canadian Cancer Statistics 2026 / CMAJ, Projected estimates of cancer in Canada in 2026

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Meet Ashley

Ashley is like any single parent who has been diagnosed with a critical illness. She's worried about her future, her children and how they will cope with her treatments. Most importantly, she worries about how she will pay for it all.

Here is what weighs heavily on her mind:

- My group benefits plan doesn't cover all of the expenses related to my treatment
- I need help to better understand my treatment options
- My drug coverage still requires me to pay a portion of my drug costs
- If I am not working due to my treatments, I must cover my bills, rent/mortgage, groceries and my children's education
- If the right treatment is not available locally, I will have to travel to get the treatment I need

Ashley's story of diagnosis and treatment turned into a happy ending, because she had Comprehensive Critical Illness Insurance to help with expenses.

CHOOSE

Ashley chooses Comprehensive Critical Illness to help protect herself and her family from expenses not covered through Provincial Medicare or an employer-paid health care plan.

USE

During Ashley's annual physician checkup, her doctor noticed a mole on her back. She underwent a biopsy, which confirmed stage 3a melanoma.

Here's Ashley's treatment path:

- Ashley has her annual physician checkup
- Her doctor notices an abnormally colored mole on her back, tests are performed, and she is diagnosed with Stage 3a melanoma
- She is referred to an oncologist
- Ashley follows her doctor-required drug therapy treatment for a period of 10 months

Ashley is doing well and is on the road to recovery.

CLAIM

Ashley's Comprehensive Critical Illness claim can be used for non-Provincial Health Insurance covered expenses such as:

Life-saving drug therapy

Financial help to pay for living expenses while on leave from work

Counseling for anxiety

The cash benefits were direct deposited into her bank account.

For a listing of benefits and benefit amounts, see your company's rate insert.

Using your cash benefits

Cash benefits provide you with options, because you decide how to use them.

Finances
Can help protect savings and retirement plans from being depleted.

Travel
Can help pay for expenses while receiving treatment in another city.

Home
Can help pay the mortgage, continue rental payments, or perform needed home repairs for after care.

Expenses
Can help pay your family's living expenses such as bills, electricity, and gas.

Benefits (subject to maximums)

Benefit paid upon diagnosis of one of the following conditions

* Benefits are paid once per covered person. When all benefits have been used, the coverage terminates.

COMPREHENSIVE CRITICAL ILLNESS BENEFITS*

Alzheimer's Disease - must exhibit impaired memory and judgment and require eight hours of daily supervision

Amyotrophic Lateral Sclerosis (ALS) - must be diagnosed by a specialist showing progressive neuromuscular disease. No other motor neuron disease is covered by this benefit

Aortic Surgery - surgical removal and replacement of the diseased thoracic or abdominal aorta with a graft. Does not include the branches of the aorta

Benign Brain Tumour - a non-malignant tumour located in the cranial vault and limited to the brain, meninges, cranial nerves or pituitary gland that requires surgery or radiation treatment, or causes irreversible neurological deficits. Pituitary adenomas less than 10mm, tumours of the skull and germinomas are not covered

Blindness - total and irreversible loss of sight in both eyes

Carcinoma In Situ - non-invasive cancer, including melanoma that has not invaded the dermis. Other skin malignancies are not covered

Coma - unconsciousness with no reaction to external stimuli or responses to internal needs for a continuous period of at least 96 hours. Glasgow coma score must be four or less. Medically-induced coma, a coma which results directly from alcohol or drug use, and a diagnosis of brain death are not covered

Coronary Artery Bypass Surgery - to correct narrowing or blockage of one or more coronary arteries with bypass graft. Balloon angioplasty, laser embolectomy, atherectomy, stent placement, and other non-surgical procedures are not covered

Deafness - total and irreversible loss of hearing in both ears

Heart Attack - the death of a portion of the heart muscle due to inadequate blood supply. Not payable for incidental finding of ECG changes suggesting a prior myocardial infarction (in absence of a corroborating event) or elevation of cardiac markers to coronary angioplasty unless diagnostic changes of new Q wave infarction on the ECG

Invasive Cancer - malignant tumour with uncontrolled growth and spread of malignant cells into other tissue. Includes invasive malignant melanoma in the dermis or deeper or skin malignancies that have become metastatic. Other skin cancers are not covered

Kidney Failure - irreversible failure of both kidneys resulting in peritoneal dialysis, haemodialysis or renal transplantation being initiated. Does not include failure of both kidneys to function caused by traumatic event, including surgical traumas

Loss of Speech - total and irreversible loss of the ability to speak as the result of an accidental injury or disease

Major Organ Failure (Transplant or Waiting List) - irreversible failure of heart, lung, liver, kidney or bone marrow, with either transplantation deemed necessary or the covered person enrolling on a major transplant list in Canada or the U.S

Multiple Sclerosis - must be diagnosed by a specialist and have at least one of the following: two or more separate clinical attacks; well-defined neurological abnormalities lasting more than six months; a single attack with lesions of demyelination having developed in intervals of one per month

Paralysis - total and permanent loss of muscle function of 2 or more limbs

Parkinson's Disease - must exhibit two or more of the following: muscle rigidity, tremor, or bradykinesis (slowness in physical and mental responses), and be certified unable to perform at least two daily activities (bathing, dressing, toileting, bladder and bowel continence, transferring and feeding) without adult assistance

Severe Burns - diagnosis of third-degree burns over at least 20% of the body surface

Stroke - acute cerebrovascular event caused by intracranial thrombosis or haemorrhage, or embolism from an extracranial source. Not payable for transient ischemic attacks (TIAs), intra-cerebral vascular events due to trauma, or lacunar infarct which do not meet the definition of stroke as described above

Waiver of Premium (Employee only) - premiums waived if disabled for 90 consecutive days due to a critical illness

Critical Illness Insurance (GCIP)

from Blue Cross Life

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BENEFIT AMOUNTS

Percentages below are based on th **Comprehensive PLAN 1** benefit amount of $10,000, and **Comprehensive PLAN 2** benefit amount of $20,000 chosen by your employer.

†**Covered spouses receive 50% of your basic-benefit amount. Covered children receive 50% of your basic-benefit amount.**

CRITICAL ILLNESS BENEFITS†	PLAN 1	PLAN 2
Heart Attack (100%)	$10,000	$20,000
Stroke (100%)	$10,000	$20,000
Major Organ Failure (Transplant or Waiting List) (100%)	$10,000	$20,000
Kidney Failure (100%)	$10,000	$20,000
Carcinoma in Situ (25%)	$2,500	$5,000
Invasive Cancer (100%)	$10,000	$20,000
Alzheimer's Disease (100%)	$10,000	$20,000
Parkinson's Disease (100%)	$10,000	$20,000
Coronary Artery Bypass Surgery (100%)	$10,000	$20,000
Multiple Sclerosis (100%)	$10,000	$20,000
Paralysis (100%)	$10,000	$20,000
Deafness (100%)	$10,000	$20,000
Blindness (100%)	$10,000	$20,000
Aortic Surgery (100%)	$10,000	$20,000
Benign Brain Tumour (100%)	$10,000	$20,000
Coma (100%)	$10,000	$20,000
Severe Burns (100%)	$10,000	$20,000
Loss of Speech (100%)	$10,000	$20,000
Waiver of Premium (employee only)	Yes	Yes

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BLUE CROSS LIFE

MONTHLY PREMIUMS

Plan 1 - $10,000 Basic Benefit Amount

Non-Tobacco

AGE	ME	FE	ME + F	FE + F
15-19	$0.60	$0.50	$0.80	$0.80
20-24	$0.60	$0.80	$1.00	$1.10
25-29	$0.90	$1.20	$1.50	$1.60
30-34	$1.20	$1.70	$2.00	$2.30
35-39	$1.70	$2.40	$2.90	$3.30
40-44	$2.40	$3.30	$4.10	$4.50
45-49	$3.90	$4.50	$6.10	$6.40
50-54	$6.20	$6.10	$9.20	$9.20
55-59	$11.20	$8.90	$15.70	$14.50
60-64	$17.80	$12.70	$24.10	$21.60
65-69	$29.30	$18.90	$38.80	$33.60
70-74	$38.60	$25.20	$51.20	$44.50
75-79	$48.40	$33.20	$65.00	$57.40
80-84	$60.70	$45.10	$83.20	$75.40
85-89	$80.30	$63.50	$112.00	$103.60
90-94	$104.00	$88.30	$148.10	$140.30
95-99	$109.20	$93.90	$156.20	$148.50

Tobacco

AGE	ME	FE	ME + F	FE + F
15-19	$0.60	$0.60	$0.90	$0.90
20-24	$0.80	$0.90	$1.20	$1.30
25-29	$1.00	$1.30	$1.70	$1.90
30-34	$1.60	$2.30	$2.70	$3.10
35-39	$2.30	$3.60	$4.10	$4.80
40-44	$4.00	$6.00	$7.00	$8.00
45-49	$7.50	$9.00	$12.10	$12.80
50-54	$14.00	$12.90	$20.40	$19.90
55-59	$27.10	$18.50	$36.30	$32.00
60-64	$41.90	$24.10	$53.90	$45.10
65-69	$69.10	$35.80	$87.00	$70.40
70-74	$91.00	$47.70	$114.80	$93.20
75-79	$114.20	$62.90	$145.60	$119.90
80-84	$143.10	$85.30	$185.70	$156.80
85-89	$189.40	$119.90	$249.40	$214.60
90-94	$245.40	$166.90	$328.80	$289.60
95-99	$257.70	$177.40	$346.40	$306.30

MONTHLY PREMIUMS

Plan 2 - $20,000 Basic Benefit Amount

non-tobacco

AGE	ME	FE	ME + F	FE + F
15-19	$1.20	$1.00	$1.60	$1.60
20-24	$1.20	$1.60	$2.00	$2.20
25-29	$1.80	$2.40	$3.00	$3.20
30-34	$2.40	$3.40	$4.00	$4.60
35-39	$3.40	$4.80	$5.80	$6.60
40-44	$4.80	$6.60	$8.20	$9.00
45-49	$7.80	$9.00	$12.20	$12.80
50-54	$12.40	$12.20	$18.40	$18.40
55-59	$22.40	$17.80	$31.40	$29.00
60-64	$35.60	$25.40	$48.20	$43.20
65-69	$58.60	$37.80	$77.60	$67.20
70-74	$77.20	$50.40	$102.40	$89.00
75-79	$96.80	$66.40	$130.00	$114.80
80-84	$121.40	$90.20	$166.40	$150.80
85-89	$160.60	$127.00	$224.00	$207.20
90-94	$208.00	$176.60	$296.20	$280.60
95-99	$218.40	$187.80	$312.40	$297.00

tobacco

AGE	ME	FE	ME + F	FE + F
15-19	$1.20	$1.20	$1.80	$1.80
20-24	$1.60	$1.80	$2.40	$2.60
25-29	$2.00	$2.60	$3.40	$3.80
30-34	$3.20	$4.60	$5.40	$6.20
35-39	$4.60	$7.20	$8.20	$9.60
40-44	$8.00	$12.00	$14.00	$16.00
45-49	$15.00	$18.00	$24.20	$25.60
50-54	$28.00	$25.80	$40.80	$39.80
55-59	$54.20	$37.00	$72.60	$64.00
60-64	$83.80	$48.20	$107.80	$90.20
65-69	$138.20	$71.60	$174.00	$140.80
70-74	$182.00	$95.40	$229.60	$186.40
75-79	$228.40	$125.80	$291.20	$239.80
80-84	$286.20	$170.60	$371.40	$313.60
85-89	$378.80	$239.80	$498.80	$429.20
90-94	$490.80	$333.80	$657.60	$579.20
95-99	$515.40	$354.80	$692.80	$612.60

ME = Male Employee (includes children) • FE = Female Employee (includes children) • F = Family (includes spouse and children)

Attained Ages: 15 and over if Actively at Work

Premium amounts listed above do not include taxes, which may be applicable to your coverage.

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Critical Illness Insurance (GCIP)

from Blue Cross Life

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BENEFIT AMOUNTS

Percentages below are based on the **Comprehensive PLAN 3** benefit amount of $30,000.

† **Covered spouses receive 50% of your basic-benefit amount. Covered children receive 50% of your basic-benefit amount.**

CRITICAL ILLNESS BENEFITS†	PLAN 3
Heart Attack (100%)	$30,000
Stroke (100%)	$30,000
Major Organ Failure (Transplant or Waiting List) (100%)	$30,000
Kidney Failure (100%)	$30,000
Carcinoma in Situ (25%)	$7,500
Invasive Cancer (100%)	$30,000
Alzheimer's Disease (100%)	$30,000
Parkinson's Disease (100%)	$30,000
Coronary Artery Bypass Surgery (100%)	$30,000
Multiple Sclerosis (100%)	$30,000
Paralysis (100%)	$30,000
Deafness (100%)	$30,000
Blindness (100%)	$30,000
Aortic Surgery (100%)	$30,000
Benign Brain Tumour (100%)	$30,000
Coma (100%)	$30,000
Severe Burns (100%)	$30,000
Loss of Speech (100%)	$30,000
Waiver of Premium (employee only)	Yes

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BLUE CROSS LIFE

MONTHLY PREMIUMS

Plan 3 - $30,000 Basic Benefit Amount

Non-Tobacco

AGE	ME	FE	ME + F	FE + F
15-19	$1.80	$1.50	$2.40	$2.40
20-24	$1.80	$2.40	$3.00	$3.30
25-29	$2.70	$3.60	$4.50	$4.80
30-34	$3.60	$5.10	$6.00	$6.90
35-39	$5.10	$7.20	$8.70	$9.90
40-44	$7.20	$9.90	$12.30	$13.50
45-49	$11.70	$13.50	$18.30	$19.20
50-54	$18.60	$18.30	$27.60	$27.60
55-59	$33.60	$26.70	$47.10	$43.50
60-64	$53.40	$38.10	$72.30	$64.80
65-69	$87.90	$56.70	$116.40	$100.80
70-74	$115.80	$75.60	$153.60	$133.50
75-79	$145.20	$99.60	$195.00	$172.20
80-84	$182.10	$135.30	$249.60	$226.20
85-89	$240.90	$190.50	$336.00	$310.80
90-94	$312.00	$264.90	$444.30	$420.90
95-99	$327.60	$281.70	$468.60	$445.50

Tobacco

AGE	ME	FE	ME + F	FE + F
15-19	$1.80	$1.80	$2.70	$2.70
20-24	$2.40	$2.70	$3.60	$3.90
25-29	$3.00	$3.90	$5.10	$5.70
30-34	$4.80	$6.90	$8.10	$9.30
35-39	$6.90	$10.80	$12.30	$14.40
40-44	$12.00	$18.00	$21.00	$24.00
45-49	$22.50	$27.00	$36.30	$38.40
50-54	$42.00	$38.70	$61.20	$59.70
55-59	$81.30	$55.50	$108.90	$96.00
60-64	$125.70	$72.30	$161.70	$135.30
65-69	$207.30	$107.40	$261.00	$211.20
70-74	$273.00	$143.10	$344.40	$279.60
75-79	$342.60	$188.70	$436.80	$359.70
80-84	$429.30	$255.90	$557.10	$470.40
85-89	$568.20	$359.70	$748.20	$643.80
90-94	$736.20	$500.70	$986.40	$868.80
95-99	$773.10	$532.20	$1,039.20	$918.90

ME = Male Employee (includes children) • FE = Female Employee (includes children) • F = Family (includes spouse and children)

Attained Ages: 15 and over if Actively at Work

Premium amounts listed above do not include taxes, which may be applicable to your coverage.

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CERTIFICATE SPECIFICATIONS

Eligibility

Your employer decides who is eligible for your group (such as length of service and hours worked each week). Issue ages are 15-99.

Dependent Eligibility/Termination

Family members eligible for coverage are your spouse or domestic partner and children. Coverage for children ends when the child reaches age 21, or 25 (or the age according to the laws of your province of residence) if in full-time attendance at an institution of higher learning. Spouse coverage ends upon valid decree of divorce or your death. Domestic partner coverage ends when the domestic partnership ends or your death.

A child is a person who is your natural or adopted son or daughter, a son or daughter of your current spouse, or a child who is otherwise in a parent-child relationship with you. The child must be dependent upon you for maintenance and support and be:

1. under twenty-one (21) years of age; or
2. under twenty-five (25) years of age (or the age according to the laws of your province of residence) and in attendance at an institution of higher learning on a full-time basis.

When Coverage Ends

Coverage under the policy ends on the earliest of: the date the certificate is canceled; the date the policy is canceled; you stop paying your premium; the last day of active employment or membership; you or your class are no longer eligible; when all benefits have been paid under the policy and rider; upon discovery of claim fraud or material misrepresentation.

Portability Privilege

You may continue coverage under the Portability Privilege provision when coverage under the policy ends. Refer to your Certificate of Insurance for details.

EXCLUSIONS AND LIMITATIONS

Conditions and Limits

A diagnosis occurring before your coverage begins is not payable; however, a diagnosis of any covered critical illness or specified disease after your effective date will be payable. Each critical illness is only payable provided that we have not previously paid a benefit for that illness. All critical illnesses must meet the definitions and dates of diagnoses stated in the policy and be diagnosed by a physician while coverage is in effect. The date of diagnosis for each illness must be separated by 90 days. Emergency situations outside of Canada will be considered by a Canadian physician on foreign soil or when you return to Canada.

If the first diagnosis of cancer occurs before the effective date of coverage, benefits are paid for a subsequent diagnosis of cancer after the effective date, subject to the terms and conditions in the certificate.

Waiver of Premium

In the event the Group Life coverage is no longer in effect, we will waive premiums for in-force coverage if the insured employee or member becomes disabled due to a critical illness for which a Critical Illness Benefit has been paid and remains disabled for at least ninety (90) days. After the ninetieth (90th) day, we will waive premiums for the insured employee or member and any covered dependents due for the first ninety (90) days of disability and each additional day if the insured employee or member remains disabled. We will pay premiums for the first three hundred sixty-five (365) days if the insured employee or member is unable to work at his or her own occupation, and then after three hundred sixty-five (365) days if the insured employee or member is unable to work at any occupation.

Exclusions

Benefits are not paid for: war or participation in a riot, insurrection or rebellion; intentionally self-inflicted injuries; injury incurred while engaging in an illegal occupation or committing or attempting a felony; attempted suicide while sane or insane; injuries while under the influence of alcohol, narcotics, or controlled substances or drugs, unless doctor prescribed; participation in aeronautics unless a fare-paying passenger on a licensed common-carrier aircraft; alcohol abuse or alcoholism, drug addiction or controlled substance dependency.

Contact information:

1-844-436-1105

InfoCentre@bluecrosslifevoluntary.ca

BLUE CROSS® LIFE

This brochure is for use in enrolments sitused in Canada.

The coverage provided is limited benefit supplemental critical illness insurance. Blue Cross Life Insurance Company of Canada is the underwriter of voluntary benefits. Details of the insurance, including exclusions, restrictions, and other provisions are included in the certificates issued. For additional information, you may contact your Blue Cross Life Representative. ® Registered trademark of the Canadian Association of Blue Cross Plans, an association of independent Blue Cross Plans and Licensees. Used under license by Blue Cross Life Insurance Company of Canada, an independent licensee of the Canadian Association of Blue Cross Plans.