

Age	up to \$99,999	100,000 to \$249,999	250,000 to \$499,999	500,000 to \$1,000,000	1,000,001 to \$2,000,000	2,000,001 to \$3,000,000	3,000,001 to \$10,000,000	\$10,000,001 and over
0 - 15								
16 - 45				*	*	P, BP	P, BP	P, BP, IR
46 - 50			*	*	*	P, BP	P, BP	P, BP, IR
51 - 55		*	*	P, BP	P, BP	P, BP	P, BP	P, BP, IR
56 - 60	*	*	*	P, BP	P, BP	P, BP	P, BP	P, BP, IR
61 - 65	*	P, BP	P, BP	P, BP	P, BP	P, BP	P, BP, EKG	P, BP, EKG, IR
66 - 70	*	P, BP	P, BP	P, BP	P, BP, EKG	P, BP, EKG	P, BP, EKG	P, BP, EKG, IR
71 - 75	P, BP	P, BP	P, BP	P, BP, EKG	P, BP, EKG	P, BP, EKG	P, BP, EKG	P, BP, EKG, IR
76 and over	PRELIMINARY APPLICATION. NO EXAMS SHOULD BE REQUESTED. A PHYSICIAN STATEMENT WILL BE REQUESTED BY THE UNDERWRITING DEPARTMENT IN ORDER TO MAKE A PRELIMINARY OFFER.							

In the cells marked with an asterisk (*), only the declaration of insurability will be required. However, evidence of insurability may be required depending on the result of the predictive analysis.

Term life insurance only

Preferred risk classes are available:

- From \$2,000,001 for ages 18-50
- From \$500,000 for ages 51 and above

Legend

BP	Blood profile including urinalysis
EKG	Resting electrocardiogram
IR	Inspection report
P	Paramedical

**The Inspection report (IR) is ordered by
Beneva Inc. when required.**

Prostate specific antigen for men (PSA) will be requested for all males who are 51 years of age and older, when a blood profile including urinalysis is required.

Other underwriting rules

1. Insured person currently with the Company:
The age and amount requirements are calculated based on the total amount of life insurance pending or in force with the Company within the last 6 months.
2. Medical evidence is valid for a period of 12 months, up to age 69, and for a period of 6 months, from age 70 and over.
3. The Company reserves the right to request any other requirement deemed necessary for file review at any time.
4. The telephone interview and vital signs have the same value as the paramedical.

Adult Build Chart (for life product only)

If there is no other medical conditions, standard rates apply to the following height and weight measurements (regardless of sex and age):

Height		Weight (lbs)	
Feet	Inches	Minimum	Maximum
4	8	76	166
4	9	79	173
4	10	81	178
4	11	85	185
5	0	87	190
5	1	91	198
5	2	93	204
5	3	96	211
5	4	100	219
5	5	102	225
5	6	106	233
5	7	109	238
5	8	113	247
5	9	115	253
5	10	119	261
5	11	122	267
6	0	126	276
6	1	129	283
6	2	133	292
6	3	137	301
6	4	140	307
6	5	144	317
6	6	147	324
6	7	152	333
6	8	155	340
6	9	159	350
6	10	163	357
6	11	167	368
7	0	170	375

Advisors – Underwriting guidelines

About this guide

The following *Underwriting guidelines* aim to provide an overview of which information could be required and what the underwriting decision may be for different medical and non-medical conditions. It is therefore a reference tool which will help you better prepare your clients, particularly when a rating may be applicable.

It is understood that the “probable decisions” which are indicated in these guidelines are **only preliminary estimates and do not bind Beneva Inc.** in any way. In fact, all final decisions are based on a complete assessment of the file (in accordance with the underwriting standards in effect). As such, the complete assessment of the file must start with a duly completed insurance application submitted to Beneva Inc.

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Beneva's process for trial applications

(Paper application only)

1. What is a trial (preliminary) application:

It is an application submitted on a preliminary basis to determine the eligibility of the proposed insured before ordering the underwriting evidence for age and amount.

2. When should a trial application be sent to Beneva:

On the basis of age: age 76 and over

For a special medical condition or when it is uncertain if a client is insurable, please refer to the medical conditions described in the following pages first.

3. How to complete a trial application:

It should be completed like a regular application. Medical and non-medical sections should be filled out, including full contact information for the attending physician.

*The Underwriting department will order the attending physician report.

4. Communication of case decisions:

Underwriting will either accept and make a tentative offer (standard or substandard, subject to age and amount requirements), decline or postpone the application.

A clear message will be sent to the MGA through Lifesuite and a letter will be sent to the client if the decision is to decline or postpone.

5. When should the requirements for age and amount be ordered:

Only after receiving the tentative offer by Underwriting. Regular age and amount requirements can then be ordered by the MGA to finalize the analysis.

6. MIB search and MIB coding

Regardless of the final decision, Underwriting will search MIB (as done with any regular application) and code to MIB any medical or non-medical facts that would influence the decision, as laid out by MIB rules.

Please note that MIB coding is in regard to medical and non-medical conditions and not the Underwriting decision.

			Probable decision of the underwriter		
Medical conditions	Information to speed up the underwriting process	Requirement	Life Insurance	Disability	Critical Illness
Arthritis Juvenile Psoriatic Rheumatoid	Name and address of the physician with the complete medical file Activity limitation Time off work Treatment and prescribed medication Date of diagnosis Frequency of flare-ups	Attending physician statement (APS)	Depending on severity: standard to decline	Depending on severity: from exclusion to rating of +25 to +50, including a limitation of the benefit period between 2 and 5 years Severe case: decline <u>Juvenile arthritis</u> Insured < 25 years old: decline	Depending on severity: standard to +150 including exclusion
Asthma	Name and address of the physician with the complete medical file Provide the date of diagnosis, date of last attack and frequency of attacks Hospitalization Activity limitation Prescribed medication and posology Time off work Tobacco use Symptoms like wheezing, cough or shortness of breath	Questionnaire or Attending physician statement (APS)	Present or symptoms within last 2 years Mild to moderate symptoms: standard to +100 Severe to very severe symptoms: +150 to decline Asymptomatic > 2 years Mild to moderate symptoms: standard to +50 Severe to very severe symptoms: +100 to decline	Present or symptoms within last 2 years Mild to moderate symptoms: standard to +50 and exclusion Severe to very severe symptoms: decline Asymptomatic > 2 years ago Mild to moderate symptoms: standard to exclusion Severe to very severe symptoms: decline Status asthmaticus: decline *Possible limitation of benefit period to 2 or 5 years	Mild to moderate symptoms: standard to +100 Severe to very severe symptoms: decline
Atrial fibrillation	Name and address of the physician with the complete medical file Prescribed medication and posology Frequency of episodes	Attending physician statement (APS)	Without a complete cardiac investigation: decline <u>Intermittent</u> < 1 year since last episode: +50 > 1 year since last episode: standard <u>Chronic</u> Depending on age: +50 to +125	Without a complete cardiac investigation: decline <u>1 episode</u> > 1 year since last episode: standard to +75 More than 1 episode: decline <u>Chronic</u> Decline	Without a complete cardiac investigation: decline With complete cardiac investigation, no known cause and no cardiac impairment <u>Intermittent</u> Treated with anticoagulants: +50 No treatment: minimum +75 <u>Chronic</u> Treated with anticoagulants: +50 No treatment: decline

			Probable decision of the underwriter		
Medical conditions	Information to speed up the underwriting process	Requirement	Life Insurance	Disability	Critical Illness
Attention deficit hyperactivity disorder (Adult/child)	Date of diagnosis With or without hyperactivity Presence of complications: Nervous disorder: anxiety, depression, personality disorder Prescribed medication and posology History of substance abuse	Attending physician statement (APS)	Adult: Without complications, well controlled: standard Otherwise: underwriting based on complications Child: Without complications, well controlled: standard Otherwise: postponed until age 16	Current age > 25 years old: Diagnosis < 5 years: exclusion Diagnosis > 5 years: exclusion Current age < 25 years old: Diagnosis < 5 years: postponed Diagnosis > 5 years: exclusion with a benefit period of maximum 5 years With another nervous disorder: Current age > 25 years old: Diagnosis < 5 years: postponed Diagnosis > 5 years: exclusion with a benefit period of maximum 5 years Current age < 25 years old: Diagnosis < 5 years: postponed Diagnosis > 5 years: exclusion with a benefit period of maximum 5 years With history of substance abuse: decline	Adult: Standard Child: Without complications, with a normal development: standard Otherwise: postponed until age 18
Autism	Name and address of the physician with the complete medical file Prescribed medication and posology	Attending physician statement (APS)	< 18 years old: decline > 18 years old: possibility of an offer depending on the autonomy level (mild autism)	< 25 years old: decline > 25 years old: possibility of an offer depending on the autonomy level (mild autism)	< 18 years old: decline > 18 years old: possibility of an offer depending on the autonomy level (mild autism)
Bariatric surgery	Name and address of the physician with the complete medical file Date of surgery Complications Weight before and after surgery		< 6 months after surgery: postponed > 6 months: rating according to height and weight	< 12 months after surgery: postponed > 12 months: rating according to height and weight	< 6 months after surgery: postponed > 6 months: rating according to height and weight
Barrett's esophagus	Name and address of the physician with the complete medical file Treatment Lifestyle changes	Attending physician statement (APS)	Depending on severity and frequency of follow-ups Depending on the level of dysplasia and time elapsed since last symptoms: standard to decline	Depending on severity and frequency of follow-ups Depending on the level of dysplasia and time elapsed since last symptoms: standard to exclusion	All cases: decline
Cancer – blood (leukemia)	Name and address of the physician with the complete medical file (including pathology reports) Date of diagnosis Type of treatment Date of last treatment Recurrences	Attending physician statement (APS)	Chronic Lymphocytic Leukemia 3 years post treatment: <u>Stage 0</u> According to age at diagnosis: +150 to +200 <u>Stage 1</u> According to age at diagnosis: +200 to +300 <u>Stage 2 to 4</u> Decline Other types of leukemia: most likely a decline	<u>All stages</u> Decline	<u>All stages</u> Decline

			Probable decision of the underwriter		
Medical conditions	Information to speed up the underwriting process	Requirement	Life Insurance	Disability	Critical Illness
Cancer – breast	Name and address of the physician with the complete medical file (including pathology reports) Date of diagnosis Type of treatment Date of last treatment Recurrences Frequency of follow-ups and date / result of last one (mammography)	Attending physician statement (APS)	<u>Carcinoma in situ (stage 0)</u> Depending on type: \$5 to \$6 per thousand x 4 years <u>Stage 1 to 3</u> Postponed for 1 to 7 years post treatment Afterward: \$7.50 to \$20 per thousand x 5 years with possible permanent extra rating up to +100 <u>Stage 4</u> Decline	<u>Carcinoma in situ (stage 0)</u> Postponed for 1 year post treatment <u>Stage 1 to 3</u> Postponed for 4 to 10 years post treatment Afterward: +50 with exclusion to decline <u>Stage 4</u> Decline	<u>All stages</u> Decline
Cancer – lungs	Name and address of the physician with the complete medical file (including pathology reports) Date of diagnosis Type of treatment Date of last treatment Recurrences Tobacco use	Attending physician statement (APS)	<u>Stage 1</u> Postponed for 5 to 8 years post treatment Afterwards: \$10 to \$15 per thousand <u>Stage > 1</u> Decline If insured is a smoker: decline	<u>Stage 1</u> Postponed for 10 to 13 years post treatment If insured is a smoker: decline	<u>All stages</u> Decline
Cancer – prostate	Name and address of the physician with the complete medical file (including pathology reports) Date of diagnosis Type of treatment Date of last treatment Most recent result of prostate specific antigen (PSA) Recurrences	Attending physician statement (APS)	<u>Depending on stage and type of cancer</u> Postponed for 1 to 10 years, up to decline Afterwards if an offer is possible: standard to \$5 per thousand	<u>Depending on stage</u> Postponed for 1 to 10 years post treatment Afterwards if an offer is possible: exclusion	<u>Stage T1a, T1b</u> Insured > age 40 at time of diagnosis and treated with total prostatectomy < 10 years since end of treatment: postponed > 10 years: exclusion Insured < age 40 at time of diagnosis or not treated with total prostatectomy: decline <u>Stage > T1b</u> Decline
Cancer – skin Basal cell or squamous cell carcinoma Malignant tumor including melanoma	Name and address of the physician with the complete medical file (including pathology & dermatology reports) Date of diagnosis Type of treatment Date of last treatment Frequency of follow-ups and date / result of last follow-up in dermatology Date of last follow-up (month/year) Recurrences	Attending physician statement (APS)	<u>Basal cell or squamous cell carcinoma (completely excised)</u> Possibility of standard <u>Others</u> <u>Stage 0 (in situ)</u> Standard 3 months after the last treatment <u>Stage 1A</u> 6 months after the last treatment, standard to \$7.50 per thousand x 4 years <u>Stage > 1A</u> Postponed 2 to 5 years post treatment \$7.50 to \$15 per thousand afterward	<u>Basal cell or squamous cell carcinoma (completely excised)</u> Possibility of standard <u>Others</u> <u>Stage 0 (in situ)</u> Between postponed and exclusion up to 2 years after last treatment Afterwards: standard <u>Stage 1A</u> Between postponed and exclusion up to 7 years after last treatment Afterwards: standard <u>Stage > 1A</u> Between declined, postponed and exclusion	<u>Basal cell or squamous cell carcinoma (completely excised)</u> 1 occurrence: standard > 1 occurrence: exclusion <u>Others</u> Insured < age 40 at diagnosis: decline Insured > age 40 and no family history of skin cancer <u>Stages 0 or 1A</u> < 2 years after last treatment: postponed > 2 years after last treatment: exclusion Other stages or > 1 occurrence: decline

			Probable decision of the underwriter		
Medical conditions	Information to speed up the underwriting process	Requirement	Life Insurance	Disability	Critical Illness
Cancer – thyroid	Name and address of the physician with the complete medical file (including pathology reports) Date of diagnosis Type of treatment Date of last treatment Recurrences Date of the last follow-up (month/year)	Attending physician statement (APS)	Depending on the stage and age Postponed between 3 months and 15 years post treatment Afterwards: \$5 to \$15 per thousand	Depending on the stage and age Postponed between 1 and 15 years post treatment Afterwards: exclusion to standard	<u>Stage T1, without metastasis</u> From the end of treatment < 6 months: postponed between 6 to 10 years: +25 with exclusion > 10 years: +25 <u>Stage > T1 or metastasis</u> Decline
Cerebrovascular diseases Cerebral aneurysm Cerebral hemorrhage Cerebrovascular accident (CVA) Transient ischemic attack (TIA)	Name and address of the physician with the complete medical file Current functional capacity Sequelae Frequency of follow-ups and date / result of last one Prescribed medication and posology Age at diagnosis Tobacco use Number of episodes Date of last episode (month/year)	Attending physician statement (APS)	CVA and cerebral hemorrhage: postponed 12 months after event TIA: postponed 6 months after event Aneurysm: Present: decline With surgery: postponed 6 months after surgery Thereafter, if no or minor sequelae, a rating can be applied depending of age and time elapsed since the event The younger the insured is, higher the rating will be. CVA: +75 to +300 TIA: standard to +125 Cerebral hemorrhage without surgery: +75 to +150 With surgery: standard to +100 Cerebral aneurysm with surgery: standard to +100 Multiple events: decline	CVA and TIA: decline With the exception of accidents caused by oral contraceptives, migraines or some cardiac malformations: standard to decline Others: declined	All cases: decline
Cervical sprain/whiplash Lumbar sprain/lumbago	Date of diagnosis Date and frequency of flare ups Treatment Time off work Activity limitation Duration of symptoms	Back questionnaire	If no limitation: standard Severe case with chronic pain and limitation: standard to +50	<u>1 or 2 acute episode(s)</u> Asymptomatic < 3 years: exclusion > 3 years: possibility of standard depending of occupation <u>Chronic symptoms</u> Exclusion with a possible limitation of the benefit period from 2 to 5 years	All cases: standard
Chronic obstructive pulmonary disease Chronic bronchitis Emphysema	Name and address of the physician with the complete medical file Date of diagnosis Prescribed medication and posology Date and result of the last pulmonary function test	Attending physician statement (APS)	Depending on the degree of severity Mild to moderate case: standard to decline Severe to very severe case: decline	Depending on the degree of severity Mild to moderate case: exclusion or exclusion with a rating of +50 and limitation of the benefit period to 5 years to decline Severe to very severe case: decline	Depending on the degree of severity Mild to moderate case: +25 to +125 Severe to very severe case: decline

			Probable decision of the underwriter		
Medical conditions	Information to speed up the underwriting process	Requirement	Life Insurance	Disability	Critical Illness
Coronary artery disease (CAD) Angina Angioplasty Bypass Myocardial infarction	Name and address of the physician with the complete medical file Prescribed medication and posology Treatment Actual symptoms Severity (number of artery involved) Frequency of follow-ups	Attending physician statement (APS)	Age at onset < 35: decline < 6 months post diagnosis Postponed > 6 months to < 5 years post diagnosis 35 to 40 years old: decline > 40 years old: +100 to +250 > 5 years post diagnosis > 35 years old: from +75 to decline depending of severity and time post diagnosis > 3 bypass: decline > 1 myocardial infarction: decline	All cases: decline	All cases: decline
Diabetes Mellitus Impaired glucose tolerance Prediabetes Type 1 Type 2	Name and address of the physician with the complete medical file Type of diabetes Date of diagnosis Prescribed medication and posology Complications (retinopathy, nephropathy, etc.) Date and result of last blood test	Attending physician statement (APS)	<u>Type 1</u> According to age and duration with good control and no complications: +50 to +300 <u>Type 2</u> According to age and duration with good control and no complications: standard to +125 <u>Impaired glucose tolerance and prediabetes</u> According to age: standard to +75	<u>Type 1</u> Decline <u>Type 2</u> < 40 years old: decline < 6 months of diagnosis: postponed According to age and duration with good control and no complications: +50 to decline with a duration period limited to 2 and 5 years <u>Impaired glucose tolerance and prediabetes</u> < 6 months since diagnosis: postponed < 40 years old: decline > 40 years old: +25 to +75	<u>Type 1</u> Decline <u>Type 2</u> < 40 years old: decline Between 40 and 50 years old: < 10 years since diagnosis: +100 and +125 > 10 years since diagnosis: +150 to decline > 50 years: < 10 years since diagnosis: +50 to +100 > 10 years since diagnosis: +100 to decline <u>Impaired glucose tolerance and prediabetes</u> > 40 years old: +50 to +125
Epilepsy	Name and address of the physician with the complete medical file Prescribed medication and posology Frequency of seizures Date of last seizure Type of seizures (partial or generalized) Tests done and results	Attending physician statement (APS)	< 6 months since the last seizure: postponed <u>Generalized epilepsy</u> According to time elapsed and frequency of seizures: standard to +200 <u>Other types of epilepsy</u> According to time elapsed and frequency of seizures: standard to +100 <u>Status epilepticus</u> < 3 years: postponed Afterwards: standard to +200	<u>One event:</u> < 12 months: postponed > 12 months: standard to +75 <u>> 1 seizure:</u> Last seizure: < 2 years: postponed > 2 years, according to time elapsed and frequency of seizures: +50 to decline <u>Status epilepticus:</u> decline *Possible limitation of benefit period to 2 or 5 years	<u>Generalized epilepsy</u> > 6 seizures per year: postponed < 6 seizures per year: +25 to +75 <u>Other types of epilepsy</u> > 6 seizures per year: postponed < 6 seizures per year: standard to +50 <u>Status epilepticus</u> 1 event < 1 year: postponed > 1 year: +25 to +75 > 1 event: decline
Gestational diabetes	Date of diagnosis Medication Complications Date and result of the last blood work		Not currently pregnant Standard Currently pregnant: Stable, well controlled and without complications: standard Otherwise: considered as type 2 diabetes	Not currently pregnant, diabetes resolved: Delivery < 6 months: postponed Delivery > 6 months: < 45 years old: exclusion > 45 years old: standard Currently pregnant: postponed	Not currently pregnant, diabetes resolved: Delivery < 3 months: postponed Delivery > 3 months: standard Currently pregnant: postponed

			Probable decision of the underwriter		
Medical conditions	Information to speed up the underwriting process	Requirement	Life Insurance	Disability	Critical Illness
Hepatitis A, B or C	Name and address of the physician with the complete medical file Type of hepatitis Date of diagnosis Treatment	Attending physician statement (APS) Recent or up-to-date hepatitis screening	<u>Hepatitis A</u> > 3 months after the infection, completely resolved: standard <u>Hepatitis B and C</u> Symptomatic: decline Asymptomatic: depends on liver enzymes level, presence of liver fibrosis and duration of the disease: standard to decline	<u>Hepatitis A</u> > 3 months after the infection, completely resolved: standard <u>Hepatitis B and C</u> Symptomatic: decline Asymptomatic: depends on liver enzymes level and presence of liver fibrosis: standard to decline including a limitation of the duration to 2 or 5 years	<u>Hepatitis A</u> Completely resolved: standard <u>Hepatitis B and C</u> Carrier only, with normal liver enzymes: +50 to +75 Otherwise: exclusion to decline
Herniated disc	Name and address of the physician with the complete medical file Date of diagnosis Type of treatments Time off work Activity limitation Duration of symptoms	Back questionnaire	Pending surgery: postponed No limitation: standard Severe case with chronic pain and limitation: standard to +50	<u>1 or 2 acute episodes</u> Treated without surgery: Asymptomatic < 3 years: exclusion Treated with 1 surgery: Asymptomatic < 1 year: postponed Asymptomatic 1-7 years: exclusion Asymptomatic > 7 years: standard Treated with 2 surgeries: Asymptomatic < 2 years: postponed Asymptomatic > 2 years: exclusion <u>More than 2 episodes or chronic</u> Exclusion to postponed Pending surgery: postponed	Usually standard, possible exclusion for very severe symptoms
Hypercholesterolemia	Date of diagnosis Prescribed medication and posology Date of last follow-up and result of the blood test		If compliant to treatment and normal cholesterol level according to age: standard If not: +50 to decline	If compliant to treatment and normal cholesterol level according to age: standard If not: +25 to decline	If compliant to treatment and normal cholesterol level according to age: standard If not: +25 to decline
Hypertension	Date of diagnosis Prescribed medication and posology Control		Depending on control level: standard to decline	Depending on control level: standard to decline	Depending on control level: standard to decline
Inflammatory bowel diseases Crohn's disease Irritable bowel syndrome Proctitis Ulcerative colitis	Name and address of the physician with the complete medical file Frequency of flare-ups Severity (mild, moderate or severe) Treatment and prescribed medication Frequency of follow-ups (colonoscopy) Hospitalization Time off work	Attending physician statement (APS)	<u>Irritable bowel syndrome</u> Standard <u>Others</u> Depending on severity, time elapsed since of last flare-ups and without surgery: standard to +200 <u>With surgery</u> < 6 months post surgery: postponed Afterwards: standard to +200	<u>Irritable bowel syndrome</u> Depending on severity: standard to +50 with exclusion <u>Others</u> Depending on severity and without surgery: postponed between 2 and 5 years Afterwards: exclusion, +50 and benefit period limited to 2 or 5 years maximum <u>With surgery</u> < 2 years post surgery: postponed Afterwards: exclusion, +50 and benefit period limited to 2 or 5 years maximum	<u>Irritable bowel syndrome</u> Standard <u>Others</u> < 1 year since diagnosis: postponed 1-2 years since diagnosis: Mild condition: +50 Moderate and severe condition: postponed 2-10 years since diagnosis: +50 to +100 depending on severity > 10 years since diagnosis: +75 to decline depending on severity Total colectomy: standard

			Probable decision of the underwriter		
Medical conditions	Information to speed up the underwriting process	Requirement	Life Insurance	Disability	Critical Illness
Multiple sclerosis	Name and address of the physician with the complete medical file Date of diagnosis Activity limitation Walking aid	Attending physician statement (APS)	<u>Possible diagnosis</u> Single attack only, no lesion on magnetic resonance imaging, no family history of multiple sclerosis and no current neurological abnormalities: standard to +100 <u>Definite diagnosis</u> According to the severity and time elapsed since diagnosis Mild: standard to +150 Moderate: +50 to +150 Severe: > 10 years since diagnosis +250 Very severe: decline	<u>Possible diagnosis</u> Single attack only, no lesion on magnetic resonance imaging, no family history of multiple sclerosis and no current neurological abnormalities: > 5 years since attack: exclusion <u>Definite diagnosis</u> All cases: decline	All cases: decline
Paralysis Hemiplegia Paraplegia Quadriplegia	Name and address of the physician with the complete medical file Complications	Attending physician statement (APS)	<u>Paraplegia</u> < 1 year since diagnosis: postponed > 1 year: minimum +200 <u>Hemiplegia</u> < 1 year since diagnosis: postponed > 1 year: +100 to +150 <u>Quadriplegia</u> Decline	All cases: decline	All cases: decline
Parkinson	Name and address of the physician with the complete medical file	Attending physician statement (APS)	Depending on severity Age at diagnosis < 36: decline Stage 1 and 2: +50 to +100 Stage 3: +75 to +125 Stage 4: +150 to +200 Stage 5 or uncontrolled: decline	All cases: decline	All cases: decline
Pulmonary embolism	Name and address of the physician with the complete medical file Prescribed medication and posology Date of diagnosis Recurrences Test done and result Cause, circumstances of event	Attending physician statement (APS)	<u>1 episode, no symptoms</u> > 6 months since episode: standard <u>2 episodes, investigation completed</u> < 1 year since last episode: postponed > 1 year since last episode: +50 to +100 <u>3 episodes or more</u> Decline	<u>1 episode, completely recovered</u> > 6 months since episode: standard to +50 <u>Multiple episodes</u> Decline	<u>1 episode, completely recovered</u> > 3 months since episode: standard <u>Multiple episodes</u> < 1 year since last episode: postponed > 1 year since last episode: standard to +75
Sleep apnea	Name and address of the physician with the complete medical file Provide date of diagnosis, severity, treatment prescribed and compliance (if CPAP prescribed confirm number of hours used per night) Presence of symptoms like: Snoring Daytime sleepiness Impaired concentration Morning headache Irritability Obstructive or central sleep apnea	Attending physician statement (APS)	Treated, good response to treatment: standard Without treatment and depending on severity: standard to decline The more severe the apnea is, the higher the rating will be Untreated and severe case will be declined	Treated, good response to treatment: standard Without treatment and depending on severity: standard to decline Severe case will be declined. *Possible limitation of benefit period to 2 or 5 years	Treated, good response to treatment and depending on severity: standard to +50 Without treatment: Mild case: standard Moderate and severe case: < 50 years old: +75 to decline > 50 years old: standard to +50

			Probable decision of the underwriter		
Medical conditions	Information to speed up the underwriting process	Requirement	Life Insurance	Disability	Critical Illness
Thrombophlebitis	Date of diagnosis Medication Number of episodes		1 episode No complication: standard to +50 With complication: +50 to +100 Multiple episodes +100 to +150	1 episode, non-smoker, no <u>treatment and completely recovered without complications</u> > 6 months since episode: standard to +50 With complication: decline <u>Multiple episodes</u> Decline	1 episode > 3 months since episode: standard <u>Multiple episodes</u> > 3 months since last episode: standard to +50
Tuberculosis	Name and address of the physician with the complete medical file Treatment	Attending physician statement (APS)	Active, not treated or currently under treatment: postponed <u>Pulmonary only</u> Active, not treated or treated since < 3 months: postponed Active, under treatment since > 3 months: +50 Treatment completed with stability since > 3 months: standard Not good response to treatment, abnormal x-ray: decline <u>Other</u> Treatment completed: < 1 year: +75 to postponed > 1 year: standard to +75	Active, not treated or currently under treatment: postponed Inactive or latent, including all tests normal since > 12 months: standard to decline	Active, not treated or currently under treatment: postponed Treated, no sequelae: standard

			Probable decision of the underwriter		
Non-medical conditions	Information to speed up the underwriting process	Requirement	Life Insurance	Disability	Critical Illness
Alcohol dependence/ Alcoholism		Alcohol questionnaire Attending physician report Blood profile	Currently drinking any amount: decline <u>Abstinent (no current consumption)</u> < 1 year: decline 1 to 5 years: +300 to +100 > 5 years: standard	Currently drinking any amount: decline <u>Abstinent (no current consumption)</u> < 5 years: decline 5 to 7 years: nervous system exclusion and rating of +50, maximum benefit period of 5 years > 7 years: +50	Currently drinking any amount: decline <u>Abstinent (no current consumption)</u> < 2 years: decline 2-5 years: +150 to +50 > 5 years: standard
Aviation: Commercial		Aviation questionnaire	For major scheduled carrier: standard Other: \$2.50 to \$10.00 per thousand (no exclusion possible)	See occupation list	For major scheduled carrier: standard Other: +25 to +100 (no exclusion possible)
Aviation: Private, recreational		Aviation questionnaire	Helicopter or fixed wing: exclusion or rating from \$2.50 to \$5.00 per thousand	Helicopter or fixed wing: from standard to exclusion	Helicopter or fixed wing: standard to +50 or possible exclusion
Car Racing	Type of vehicle and type of race	Automobile racing questionnaire	Standard to exclusion or rating from \$2.50 to \$10.00 per thousand	Exclusion or decline	Standard or exclusion
Climbing and mountaineering		Mountaineering questionnaire	Indoor climbing: standard Hiking/trailing/trekking: standard Other (rock/ice climbing): exclusion or \$2.50 per thousand to decline	Indoor climbing: standard Hiking/trailing/trekking: standard Other (rock/ice climbing): exclusion to decline	Indoor climbing: standard Hiking/trailing/trekking (< 15,000 feet): standard Other (rock/ice climbing): exclusion
Criminal activities	Date of crime Date and duration of sentence/probation/imprisonment Full details surrounding the event	Criminal record check could be required	Awaiting trial, sentence or probation not completed: postpone Violent or serious crime: decline <u>Less serious crime (1 offence)</u> < 5 years: decline Thereafter: individual consideration > 1 offence: decline	Awaiting trial, sentence or probation not completed: postpone Violent or serious crime: decline <u>Less serious crime (1 offence)</u> < 5 years: decline Thereafter: individual consideration > 1 offence: decline	Awaiting trial, sentence or probation not completed: postpone <u>Single offence</u> < 2 years: decline > 2 years: individual consideration > 1 offence: decline
Driving	Details of all infractions in the last 3 years: - Date - Type of infraction (if speeding: number of km/h over limit) Details of all DUIs (driving under influence) in the last 10 years: - Date of infraction - Sentence details: date of the sentence, duration of suspension and date of recovery, use of ignition interlock system (IIS)	Motor vehicle report	1 or 2 minor infractions per year: standard Other: \$2.50 per thousand to decline <u>Impaired driving</u> 1 DUI: from standard to \$5 per thousand 2 DUI or more: usually decline, could be considered on individual consideration DUI: Cannot consider if client awaits his court hearing or if license is currently suspended (or if usage of IIS)	1 or 2 minor infractions per year: standard Other: +50 with limitation of the duration of the guarantee between 2 and 5 years maximum to decline <u>Impaired driving</u> 1 DUI: < 2 years after suspension (or use of IIS): decline > 2 years: +50 with a duration period limited to 5 years > 5 years: standard 2 DUI or more: usually decline, could be considered on individual consideration DUI: Cannot consider if client awaits his court hearing or if license is currently suspended (or if usage of IIS)	1 or 2 minor infractions per year: standard Other: +25 to decline <u>Impaired driving</u> 1 DUI: < 1 year after license recovery: +25 to +50 Other: standard to +25 2 DUI or more: usually decline, could be considered on individual consideration DUI: Cannot consider if client awaits his court hearing or if license is currently suspended (or if usage of IIS)

			Probable decision of the underwriter		
Non-medical conditions	Information to speed up the underwriting process	Requirement	Life Insurance	Disability	Critical Illness
Drug usage		Drug questionnaire	<p>Hard drugs (cocaine, amphetamines, opiates, hallucinogens and sedatives) Current use: decline <u>Last use</u> <3 years: decline 3 to 7 years: +200 to +50 >7 years: standard</p> <p>Marijuana Depending on quantity and frequency: standard to decline</p>	<p>Hard drugs (cocaine, amphetamines, opiates, hallucinogens and sedatives) Current use: decline <u>Last use</u> ≤7 years: decline 7 to 10 years: +50 with a duration period limited to 5 years >10 years: standard</p> <p>Marijuana Depending on quantity and frequency: standard to decline</p>	<p>Hard drugs (cocaine, amphetamines, opiates, hallucinogens and sedatives) Current use: decline <u>Last use</u> <3 years: decline 3 to 5 years: +150 to +50 >5 years: standard</p> <p>Opiates Current use: decline <u>Last use</u> <5 years: decline 5 to 7 years: +100 to +50 >7 years: standard</p> <p>Marijuana Depending on quantity and frequency: standard to decline</p>
Foreign travel		Foreign travel questionnaire	<p>North America or Western Europe: standard Other: standard to decline Humanitarian/charitable work: individual consideration</p>	<p>North America or Western Europe: standard Other: standard or exclusion Humanitarian/charitable work: individual consideration</p>	<p>North America or Western Europe: standard Other: standard to decline or exclusion Humanitarian/charitable work: individual consideration</p>
Scuba diving		Scuba diving questionnaire	<p><u>Amateur scuba diving, not involved in any hazardous diving activities</u> ≤ 100 feet: standard > 100 feet: exclusion or \$2.50 to \$10. 00 per thousand Snorkeling: standard With comorbid risk factor (heart disease, epilepsy, COPD, significantly overweight, etc.): decline</p>	<p><u>Amateur scuba diving, not involved in any hazardous diving activities</u> ≤ 100 feet: standard > 100 feet: exclusion to decline Snorkeling: standard With comorbid risk factor (heart disease, epilepsy, COPD, significantly overweight, etc.): decline</p>	<p><u>Amateur scuba diving, not involved in any hazardous diving activities</u> ≤ 100 feet: standard > 100 feet: exclusion Snorkeling: standard With comorbid risk factor (heart disease, epilepsy, COPD, significantly overweight, etc.): decline</p>
Sky diving		Parachute and Sky diving questionnaire	<p>Only one jump and no intention to repeat: standard Other: exclusion or \$2.50 per thousand High risk jump: decline</p>	<p>Only one jump and no intention to repeat: standard Other: exclusion High risk jump: decline</p>	<p>Club-affiliated: standard Other: exclusion</p>

About Beneva

Created by the coming together of La Capitale and SSQ Insurance, Beneva is the largest insurance mutual in Canada with more than 3.5 million members and customers. Beneva employs over 5,000 dedicated employees: people looking out for people. Its human approach is rooted in mutualist values that are shared by its employees. With \$26.8 billion in assets, Beneva positions itself as a major player in the insurance and financial services industry. Its head office is located in Quebec City.

Policyholders of contracts issued by an insurance company of Beneva Group Inc. are members of SSQ Mutual and La Capitale Civil Service Mutual.

For more information, please consult **beneva.ca**

The Beneva logo is displayed in a bold, lowercase, sans-serif font. The letters are a deep purple color. The 'b' and 'e' are connected, as are the 'v' and 'e' at the end. The overall style is clean and modern.

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