

Important information (click on to consult it)

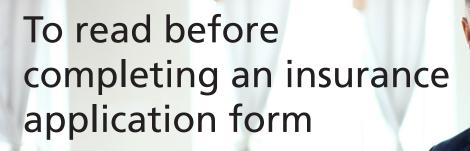
Medical conditions (click on the condition to consult it)			
Alcohol abuse/alcoholism	Diabetes type 1	Hyperthyroidism (Goiter)	Mental disorders:
Anemia	Diabetes type 2	Hypothyroidism	Minor depression
Aneurysm	Drug and narcotic abuse	Impaired glucose tolerance	Multiple sclerosis
Arthritis	Epilepsy	Leukemia	
Asthma	Family history	Mental disorders: Anxiety/	Muscle and joint conditions (bursitis, tendonitis, epicondylitis,
Back pain	Gestational diabetes	stress/ adjustment disorder	carpal tunnel syndrome, sprain, patellofemoral syndrome)
Bariatric surgery	Height and weight	Mental disorders: Attention	
Cancer	Hepatitis A	deficit hyperactivity disorder	Non-Hodgkin's lymphoma
Cerebrovascular	Hepatitis B (ADHD) Pulmon		Pulmonary embolism
accident - CVA (Stroke)	Hepatitis C	Mental disorders: Bipolar	Schizophrenia
Chronic obstructive	Hodgkin's lymphoma	disorder/manic depressive	Sleep apnea
pulmonary disease (COPD)	(Hodgkin's disease)	disorder	Thrombophlebitis
Coronary artery disease	Hyperlipidemia (high cholesterol)	Mental disorders:	Transient ischemic attacks (TIA)
Crohn's disease	Hypertension (high blood pressure)	Major depression	Ulcerative colitis

Non-medical conditions (click on the condition to consult it)			
Aviation	Flying (other than aviation)	Scuba diving	
Backcountry skiing (including Heli-ski)	Motor vehicule racing	Travel abroad	
Driving	Mountaineering and other types of climbing		

Desjardins Insurance refers to Desjardins Financial Security Life Assurance Company.



IMPORTANT INFORMATION



This guide is designed to help you anticipate the decisions the insurer will make when an insurance application is submitted and the proposed insured presents a specific condition. It includes common medical and non-medical conditions.

For each condition, this guide indicates the factors that may influence the risk and presents an overview of the decisions you may expect. However, the final decision may differ once the file has been assessed.

For most of these condition, the decision applies for adult and may be different for children.

TIPS AND TRICKS

Before completing an insurance application

- If an investigation is underway or test results have yet to be received: wait until completed and the results are available.
 - If any follow-up exams or tests are recommended: wait until completed and the results are available.
- If travel to an at-risk country is planned in the near future: wait until the client returns.

General rules

- The longer the time since the last event or last episode, the lower the rated premium will be.
- The younger the insured is at the time of the event, the higher the rated premium will be.
- For disability insurance with longer benefit period, generally there is a higher rating and likelihood of an exclusion.
- For disability insurance with longer benefit period, generally there is a higher rating and likelihood of an exclusion.
- No exclusion apply for dangerous sports or activities when it is insured's occupation. A flat dollar per \$1,000 of insurance is applied.

ALCOHOL ABUSE/ALCOHOLISM

Excessive alcohol consumption that can lead to health problems including dependence, heart and liver problems, accidental injuries, and certain forms of cancer.

Risk factors

- Current age
- Current and history of consumption
- Past history
- Treatment recommended or received
- Relapses
- Any history of relapse

- Driving while impaired
- Medical conditions
- Other substance use
- Occupation
- Member of a support group

WHAT RESPONSE CAN YOU EXPECT?

After 2 to 3 years of abstinence:	rated + 50 to +150 may be offered
After 7 years of abstinence:	generally standard
If 1 relapse:	generally declined
If more than 1 relapse:	decline
If use of other substances:	declined for a minimum of 7 years individual consideration thereafter

CRITICAL ILLNESS

After 3 years of abstinence:	rated +100 may be offered
After 5 years of abstinence:	generally standard
• If 1 relapse:	generally declined
If more than 1 relapse:	decline
If use of other substances:	declined for a minimum of 10 years individual consideration thereafter

DISABILITY

After 5 years of abstinence:	rated +50 to +100 and limitation on the waiting period of at least 90 days and/or benefit period of up to 5 years may be offered
After 7 years of abstinence:	generally standard
If relapse:	decline
If use of other substances:	declined for a minimum of 10 years individual consideration thereafter

HEALTHCARE

ANEMIA

A red blood cell deficiency caused by one or a combination of reasons (eg. poor diet, blood loss, bone marrow problems, etc.)

Risk factors

- Current age
- Type of anemia
- Cause

- Related conditions
- Type of treatment

WHAT RESPONSE CAN YOU EXPECT?

LIFE

If iron deficiency anemia:	generally standard
Other types:	standard, rated or declined

CRITICAL ILLNESS

If iron deficiency anemia:	generally standard
Other types:	standard, rated or declined

DISABILITY

Iron deficiency anemia - present - mild	
 Waiting period of 90 days or more: 	standard
Waiting period of less than 90 days:	rated +25 to +50
Iron deficiency anemia - present - moderate	rated +25 to +75
Iron deficiency anemia - present - severe	decline
Iron deficiency anemia - full recovery	generally standard
Other types	individual consideration

HEALTHCARE

ANEURYSM

Abnormal dilation of an artery.

Risk factors

- Current age
- Type of aneurysm
- Location of aneurysm
- Size of aneurysm
- Diagnosis date

- Treatment
- Sequelae
- Tobacco use
- Blood pressure control

WHAT RESPONSE CAN YOU EXPECT?	
LIFE	
Cerebral	
• Very small:	standard may be offered if there are no other risk factor
• Large, no surgery:	decline
With surgery and no sequelae:	standard may be offered
With surgery and sequelae:	rated +50 to +175 or declined
Abdominal or thoracic	
• With surgery:	rated +100 to +150 or declined
Without surgery:	decline

CRITICAL ILLNESS

All cases: decline

DISABILITY

DISABILITY	
Cerebral	
With surgery within the first year:	postpone
• With surgery after 1 to 5 years:	rated +50 to +75 and limitation on the waiting period and/or benefit period may be offered
With surgery after 5 years:	standard may be offered
Without surgery:	decline
Abdominal or thoracic	decline

HEALTHCARE

ARTHRITIS

Joint inflammation that leads to pain, redness, warmth and swelling. There are different types of arthritis, the most common being osteoarthritis, which typically worsens with age.

Risk factors

- Current age
- Type
- Severity

- Affected joints
- Medication and dosage
- Physical limitations

WHAT RESPONSE CAN YOU EXPECT?

LIFE

Mild with little or no limitations:	generally standard
Moderate:	rated +50 to +150
Severe:	decline

CRITICAL ILLNESS

Mild with little or no limitations	generally standard
Moderate:	rated +50 to +100
Severe:	decline

DISABILITY

Mild to moderate

• Within 2 years of the last flare-up or the last symptoms: decline

 More than 2 years since the last flare-up or the last symptoms: rated +25 to +50 with exclusion and waiting period minimum

90 days and benefit period 2 or 5 years

Severe decline

HEALTHCARE

ASTHMA

Chronic inflammation of the airways that causes shortness of breath, wheezing and coughing. Allergens, irritants, some medications and exercise can cause an asthma attack.

Risk factors

- Current age
- Diagnosis date
- Frequency and severity of attacks

- Hospital stays and visits to the emergency room
- Treatment/medication, frequency and response
- Tobacco use

WHAT RESPONSE CAN YOU EXPECT?

LIFE

Mild to moderate

• No tobacco use: standard

With tobacco use: rated +50 to +200

Severe decline

CRITICAL ILLNESS

Mild to moderate

No tobacco use: standard

With tobacco use: rated +50

Severe rated +75 or declined

DISABILITY

Mild to moderate

• No tobacco use: standard or rated +25 to +50

• With tobacco use: rated +50 to +75 and/or waiting period may be increased and

benefit period limited to 2 years

Severe decline

HEALTHCARE



BACK PAIN

Risk factors

- Current age
- Location
- Acute or chronic pain
- Medication and dosage
- Surgery
- Occupation

- Length of disability leave
- Limitation
- Other related conditions
- Reccurence

WHAT RESPONSE CAN YOU EXPECT?

LIFE

• Chronic and severe: rated +50 may be offered

• Other: generally standard

CRITICAL ILLNESS

• Chronic and severe: "Paralysis and Loss of independent existence" exclusion

• Other: generally standard

DISABILITY

• Chronic and severe: may be declined

• Other: generally accepted with exclusion and with possibility of limitation on the waiting period and/or benefit period

HEALTHCARE

BARIATRIC SURGERY

Surgery to address obesity in patients who have been unable to lose weight through conventional methods. The goal is to limit food intake.

Risk factors

- Current age
- Weight before surgery and current weight
- Date of surgery

- Type of surgery
- Complications
- Other related conditions

WHAT RESPONSE CAN YOU EXPECT?

LIFE

Within 6 months of the surgery:	postpone
 More than 6 months since the surgery, with no complications: 	generally standard

CRITICAL ILLNESS

Within the first year of the surgery:	postpone
 More than a year since the surgery, with no complications: 	consideration depending on weight loss
 More than a year since the surgery, with complications: 	individual consideration

DISABILTY

With no complications	With
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• Within the first year of the surgery:	postpone
• 1 to 3 years since the surgery:	rated +50 and waiting period minimum 90 days
• 3 to 5 years since the surgery:	rated +25 and waiting period minimum 90 days
 More than 5 years since the surgery: 	standard or rated +25 and waiting period minimum 90 days

With minor complications

• Within 3 years of the surgery:	postpone
• More than 3 years since the surgery:	rated +25 to +50 and waiting period minimum 90 days
Other	postpone

HEALTHCARE



CANCER

Development of abnormal cells that multiply in an organ or tissue.

Risk factors

- Current age
- Type of cancer
- Diagnosis date
- Stage
- Invasive

- Type of treatment (surgery, chemotherapy, radiotherapy, other medications)
- Complications arising from treatments
- Date of last treatment
- Recurrence

WHAT RESPONSE CAN YOU EXPECT?

LIFE

 Depends on the type, stage and grade of the cancer, the length of time since the last treatment (surgery, chemotherapy, radiotherapy or other) and test results: 	standard, rated or declined
With recurrence:	decline
With metastasis:	decline

CRITICAL ILLNESS

 Depends on the type, stage and grade of the cancer, the length of time since the last treatment (surgery, chemotherapy, radiotherapy or other) and test results: 	standard, and/or exclusion or declined
 Within 5 years of the end of treatment: 	generally declined
With recurrence:	decline
With metastasis:	decline

DISABILITY

t	Depends on the type, stage and grade of the cancer, the length of time since the last treatment (surgery, chemotherapy, radiotherapy or other) and test results:	rated and/or exclusion and possibility of limitation on the waiting period and/or benefit period or declined
• \	With recurrence:	decline
• \	With metastasis:	decline

HEALTHCARE

CEREBROVASCULAR ACCIDENT - CVA (STROKE)

An obstruction to blood flow to a part of the brain causing nerve cell degeneration which leads to a permanent neurological deficit of varying degrees.

Risk factors

- Age at diagnosis and current age
- Number of episodes
- Type of treatment

- Sequelae
- Current and history of tobacco use
- Cholesterol and blood pressure

WHAT RESPONSE CAN YOU EXPECT?

LIFE

Within 6 months of the episode:	postpone
 More than 6 months since a unique episode, no or minimal sequelae and no other risk factor: 	standard or rated +50 to +150
Multiple episodes:	decline
Significant sequelae:	decline

CRITICAL ILLNESS

All cases: decline	All cases:	decline
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DISABILITY

Within 5 years of the episode:	decline
 More than 5 years since a unique episode, no or minimal sequelae and no other risk factor: 	rated +75 to +150 and limitation on the waiting period of at least 90 days and/or benefit period may be offered
Other:	decline

HEALTHCARE

CHRONIC OBSTRUCTIVE PULMONARY DISEASE (COPD)

A chronic progressive disease that affects the airways making it harder to breath.

Risk factors

- Current age
- Height and weight
- Tobacco use
- Severity
- Type of treatment

- Hospital stays
- Limitation
- Other related conditions
- Pulmonary function test results

WHAT RESPONSE CAN YOU EXPECT?

LIFE

• Mild:	rated +50 to +100
Moderate:	rated +100 to +200 or declined
Severe:	decline

CRITICAL ILLNESS

• Mild:	rated +50 to +100
Moderate:	rated +100 to +200 or declined
Severe:	decline

DISABILITY

• Mild:	rated +25 to +100 and possibility to limit the waiting period and/ or benefit
Moderate:	rated +75 to +100 and possibility to limit the waiting period and/ or benefit period or declined
• Severe:	decline

HEALTHCARE

CORONARY ARTERY DISEASE

A condition in which the coronary artery becomes narrowed and cannot provide enough blood to the heart leading to a silent infarction (heart attack), angina or a myocardial infarction.

Risk factors

- Current age
- Diagnosis date
- Severity (affected arteries)
- Type of treatment
- Récurrence

- Family history
- Tobacco use
- Test results (cholesterol, blood pressure, resting and exercise electrocardiogram)
- Other related conditions (obesity, diabetes)

WHAT RESPONSE CAN YOU EXPECT?

LIFE

Diagnosis before 35 years old:	decline
If more that 1 heart attack:	decline
Within 6 months of the diagnosis or surgery:	postpone
Other:	rated +50 to +300 or declined

CRITICAL ILLNESS

All cases:

decline

DISABILITY

Diagnosis before 35 years old:	decline
If more than 1 heart attack:	decline
Tobacco use:	decline
Within 2 years of the diagnosis or surgery:	postpone
Other:	rated +25 to +100 and waiting period minimum 90 days and benefit period 2 or 5 years

HEALTHCARE



CROHN'S DISEASE

Chronic inflammatory disease that affects the small and large intestines but it may affect any part of the digestive tract. The disease is a chronic, relapsing condition and treatment often involves surgery.

Risk factors

- Current age
- Diagnosis date
- Severity
- Date of the last flare-up

- Frequency of flare-ups
- Type of treatment (medication, dosage, surgery)
- Complications or other related conditions

WHAT RESPONSE CAN YOU EXPECT?

LIFE

Without surgery - Mild

- Within 6 months of the diagnosis: postpone
- More than 6 months since the diagnosis: standard, rated +50 to +100 or declined

Without surgery - Moderate

- Within 2 years of the last flare-up: decline
- More than 2 years since the last flare-up: rated +50 to +150

Without surgery - Severe decline

With surgery

- Within 2 years of the surgery: decline
- More than 2 years since the surgery (total colectomy): generally standard
- If 2 chirurgies or more: decline

CRITICAL ILLNESS

Without surgery rated and exclusion or declined

With surgery

- Within 1 year of the surgery: postpone
- More than 1 year since the surgery: rated and exclusion or declined



DISABILITY AND HEALTHCARE RESPONSES ON THE NEXT PAGE

CROHN'S DISEASE (CONTINUATION)

Chronic inflammatory disease that affects the small and large intestines but it may affect any part of the digestive tract. The disease is a chronic, relapsing condition and treatment often involves surgery.

Risk factors

- Current age
- Diagnosis date
- Severity
- Date of the last flare-up

- Frequency of flare-ups
- Type of treatment (medication, dosage, surgery)
- Complications or other related conditions

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Without	surgery	- Mild
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• Within 2 years of the last flare-up: decline

• More than 2 years since the last flare-up: rated +25 to +50 with exclusion and possibility to limit the

waiting period at 90 days and/or the benefit period to 5 years

Without surgery - Moderate

• Within 3 years of the last flare-up: decline

rated +25 to +50 with exclusion and possibility to limit the More than 3 years since the last flare-up:

waiting period at 90 days and/or the benefit period to 5 years

Without surgery - Severe decline

With surgery

decline • Within 3 years of the surgery:

rated +25 to +50 with exclusion and possibility to limit the

• More than 3 years since the surgery: waiting period at 90 days and/or the benefit period to 5 years

HEALTHCARE

Learn more >



LIFE AND CRITICAL ILLNESS RESPONSES ON THE PREVIOUS PAGE

DIABETES TYPE 1

A condition in which the pancreas does not produce enough insulin. Also known as juvenile diabetes or insulin-dependent diabetes. Diagnosis typically occurs before the age of 20 and requires insulin injections.

Risk factors

- Age at diagnosis and current age
- Medication and dosage
- Treatment and response
- Complications and other related conditions (*i.e.*, hypertension/high blood pressure, kidney disease, retinopathy, coronary artery disease)
- Tobacco use
- Height and weight

WHAT RESPONSE CAN YOU EXPECT?

LIFE

Depends on age at diagnosis, length of time since diagnosis, severity and other risk factors.

- Under age 20 at time of application: decline
- Other: rated +100 to +250 or declined

CRITICAL ILLNESS

• All cases: decline

DISABILITY

Depends on age at diagnosis, length of time since diagnosis, severity and other risk factors

- Under 30 years old at the request time: decline
- Other: rated +25 to +100 and possibility of limitation on the waiting period and/or benefit period of up to 2 years or declined

HEALTHCARE

DIABETES TYPE 2

A condition in which the pancreas does not produce enough insulin or the body does not respond appropriately to insulin. Also known as adult-onset or non-insulin dependant diabetes. Diagnosis typically occurs after the age of 40. Can be managed through diet and oral medication.

Risk factors

- Age at diagnosis and current age
- Medication and dosage
- Treatment and response
- Complications and other related conditions (i.e., hypertension/high blood pressure, kidney disease, retinopathy, coronary artery disease)
- Tobacco use
- Height and weight

WHAT RESPONSE CAN YOU EXPECT?

LIFE

Depends on age at diagnosis, length of time since diagnosis, severity and other risk factors.

• All cases: rated +50 to +200 or declined



possible standard offer for ages 60 and over, managed through diet or oral medication with excellent control and no complications

CRITICAL ILLNESS

Depends on age at diagnosis, length of time since diagnosis, severity and other risk factors.

All cases: rated +50 to +150 or declined

DISABILITY

Depends on age at diagnosis, length of time since diagnosis, severity and other risk factors.

• Under 30 years old at the request time: decline

• Other: rated +25 to +75 and possibility of limitation on the waiting period and/or benefit period of up to 5 years or declined

HEALTHCARE



DRUG AND NARCOTIC ABUSE

Use of illicit substances or medications (other than prescribed by a doctor) that can lead to serious mental and physical problems, and dependence. The combined use of different types of drugs and/or alcohol increases the risk.

Risk factors

- Current age
- Type of consumption (current and past)
- Dosage and frequency
- Duration

- Current use
- Alcohol consumption
- Treatment
- Occupation

WHAT RESPONSE CAN YOU EXPECT?

LIFE

Current use

 Marijuana - Consider dosage, frequency, age (without any other risk factors):

standard, rated +50 to +100 or declined



Non-smoking and preferential rates may be granted to marijuana users

Other substances:

Past use - consideration after 2 years of complete abstinence (depends on the type of use)

2 to 5 years: rated +50 to +200 or declined After 5 years: generally standard Multiple addictions: postponed for 7 years and individual consideration thereafter decline Relapse:

decline

CRITICAL ILLNESS

Current use

Marijuana - Consider dosage, frequency, age standard, rated +50 to +100 or declined (without any other risk factors):

Other substances: decline

Past use - consideration after 3 years of complete abstinence

• 3 to 5 years: rated +75 to +100 After 5 years: standard or rated +50 to +75 Multiple addictions: postponed for 5 years and individual consideration thereafter Relapse: decline



DISABILITY AND HEALTHCARE RESPONSES ON THE NEXT PAGE

DRUG AND NARCOTIC ABUSE (CONTINUATION)

Use of illicit substances or medications (other than prescribed by a doctor) that can lead to serious mental and physical problems, and dependence. The combined use of different types of drugs and/or alcohol increases the risk.

Risk factors

- Current age
- Type of consumption (current and past)
- Dosage and frequency
- Duration

- Current use
- Alcohol consumption
- Treatment
- Occupation

WHAT RESPONSE CAN YOU EXPECT?

DISABILITY

Current use

(without any other risk factors): waiting period and/or benefit period or declined	•	Marijuana - Consider dosage, frequency, age	standard, rated +25 to +75 with possibility of limitation on the
<u> </u>		(without any other risk factors):	waiting period and/or benefit period or declined

Other substances: decline

Past use	
Within 5 years:	decline
After 5 to 7 years:	rated +25 to +75 and possibility of limitation on the waiting period and/or benefit period
After 7 years:	standard
Multiple addictions:	postponed for 10 years and individual consideration thereafter
• Relapse:	decline

HEALTHCARE

Learn more >



LIFE AND CRITICAL ILLNESS RESPONSES ON THE PREVIOUS PAGE

EPILEPSY

Neurological disorder caused by a disruption of cell activity in the brain. Seizures are caused by abnormal electrical impulses in certain parts of the brain. Symptoms vary widely from convulsions, loss of muscle tone, etc.

Risk factors

- Current age
- Type of epilepsy
- Seizure severity and frequency

- Type of treatment (medication, dosage, surgery)
- Occupation

WHAT RESPONSE CAN YOU EXPECT?

LIFE

Very infrequent seizures	standard or rated +50 to +150 may be offered	
Frequent seizures	rated +100 to +200 or declined	

CRITICAL ILLNESS

Very infrequent seizures

• Within 1 year of the last seizure: decline

• More than 1 year since the last seizure, with a full investigation and good response to medication:

rated +50 to +150

decline

Frequent seizures

With surgery decline

with surgery

DISABILITY

Very infrequent seizures

Within 2 years of the last seizure: generally declined

More than 2 years since the last seizure: rated +25 to +100 and possibility of limitation on the waiting

period and/or benefit period or declined

Frequent seizures decline

HEALTHCARE

FAMILY HISTORY

Immediate family members (father, mother and siblings) **diagnosed with an illness before the age of 60** that may lead to an increased risk of the insured contracting the same illness or a similar condition.

Risk factors

- Insured age and gender
- Nature of the condition
- Number of family members with the same condition. The higher the number, the stricter the decision
- Parent's age at diagnosis
- Degree of relationship
- Associated risk factors (e.g., smoker with a family history of coronary artery disease)

WHAT RESPONSE CAN YOU EXPECT?

LIFE

Type	of	patho	logy
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1 family member with history: generally standard
 More than 1 family member with history: standard or rated

CRITICAL ILLNESS

Type of pathology

1 family member with history: standard, rated or exclusion may be offered
 More than 1 family member with history: rated, exclusion or declined

DISABILITY

Type of pathology

1 family member with history: generally standard
 More than 1 family member with history: generally rated and/or exclusion and limitation on the waiting period and/or benefit period

HEALTHCARE



GESTATIONAL DIABETES

Glucose intolerance diagnosed in pregnancy. Increases the risk of developing type 2 diabetes.

Risk factors

- Current age
- Current and past pregnancies
- Blood test results
- Other related risk factors

WHAT RESPONSE CAN YOU EXPECT?

LIFE

• Pregnant or less than 3 months after giving birth:	postpone
• 3 months after giving birth:	standard or rated +50 may be offered

CRITICAL ILLNESS

• Pregnant or less than 3 months after giving birth:	postpone
• 3 months after giving birth:	standard or rated +50 to +100 may be offered

DISABILITY

• Pregnant or less than 3 months after giving birth:	postpone
3 months after giving birth:	standard or rated +25 to 75 may be offered

HEALTHCARE

HEIGHT AND WEIGHT

Risk factors

- Current age
- Body Mass Index (<u>BMI</u>):
 - Metric: Weight (kg)/height² (m)
 - Imperial: Weight (lbs)/height² (in) X 703
- Other risk factors (*i.e.*, diabetes, hypertension, coronary artery disease)
- Weight stability

WHAT RESPONSE CAN YOU EXPECT?

LIFE

16 years old or older at te time of application

• BMI abovee 17 and below 37: standard

• Other: rated or declined

CRITICAL ILLNESS

16 years old or older at te time of application

BMI above 17 and below 34
 standard

Other: rated or declined

DISABILITY

16 years old or older at te time of application

BMI above 18 and below 34
 standard

• Other: rated or declined

HEALTHCARE

HEPATITIS A

Infectious disease caused by the hepatitis A virus (HAV), usually benign.

Risk factors

- Diagnosis date
- Full recovery

WHAT RESPONSE CAN YOU EXPECT?

LIFE

Current:	postponed for 3 months
 After 3 months since the diagnosis, if liver enzymes are normal: 	standard

CRITICAL ILLNESS

• Current:	postponed for 3 months
• After 3 months since the diagnosis, if liver enzymes are normal:	standard

DISABILITY

• Current:	postponed for 3 months
• After 3 months since the diagnosis, if liver enzymes are normal:	standard

HEALTHCARE

HEPATITIS B

Infectious disease caused by the hepatitis B virus (HBV) that can be characterized as acute or chronic. Some cases may go unnoticed but can be detected with blood tests.

Risk factors

- Diagnosis date
- Acute or chronic
- Type of treatment

- Lab test results
- Drug use and dosage and/or alcohol consumption

WHAT RESPONSE CAN YOU EXPECT?

LIFE

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• Within 1 year of the diagnosis: postpone

• After 1 year since the diagnosis, subject to screening test results and liver enzymes:

standard may be offered

Chronic rated +50 to +150 or declined

CRITICAL ILLNESS

Acute, subject to screening test results and liver enzymes	standard may be offered
Chronic	rated +25 to +75 with exclusion of liver cancer or declined

DISABILITY

Acute

• Within 1 year of the diagnosis: postpone

• After 1 year since the diagnosis, subject to screening test results and liver enzymes:

Chronic exclusion (some cases) or declined

HEALTHCARE



HEPATITIS C

Infectious disease caused by the hepatitis C virus (HCV). Often asymptomatic, but may become chronic and cause liver damage over a number of years.

Risk factors

- Diagnosis date
- Acute or chronic
- Type of treatment

- Biopsy results
- Lab test results
- Drug use and dosage and/or alcohol consumption

WHAT RESPONSE CAN YOU EXPECT?

LIFE

• All cases: rated +50 to +200 or declined

CRITICAL ILLNESS

• All cases: rated +25 to +75 and/or exclusion of liver cancer or declined

DISABILITY

No biopsy:	generally declined
Recent biopsy:	exclusion or declined

HEALTHCARE

HODGKIN'S LYMPHOMA (HODGKIN'S DISEASE)

Cancer of the lymphatic system.

Risk factors

- Current age
- Type
- Stage

- Type of treatment Date of last treatment
- Recurrence

	OU FXPFCT?

LIFE

Within 2 years of the diagnosis:	decline
• 2 to 6 years since the diagnosis:	rated +50 a flat extra premium from \$10.00 to \$17.50 per \$1,000 of insurance or declined
 More than 6 years since diagnosis: 	rated minimum +50 or declined

CRITICAL ILLNESS

• All cases: decline

DISABILITY

Within 6 years of the diagnosis:	decline
 More than 6 years since the diagnosis: 	rated +50 to +100 or declined

HEALTHCARE

HYPERLIPIDEMIA (HIGH CHOLESTEROL)

Elevated lipid (fat) levels in the blood (cholesterol, triglycerides)

Risk factors

- Current age
- Type (familial/non-familial)
- Other related conditions (*i.e.*, obesity, hypertension/high blood pressure, diabetes, coronary artery disease, tobacco use, family history)
- Blood test results

WHAT RESPONSE CAN YOU EXPECT?

LIFE

•	If properly managed with no major risk factors:	generally standard
•	If not properly managed or with major risk factors:	rated +50 to +150 or declined

CRITICAL ILLNESS

If properly managed with no major risk factors:	generally standard
• If not properly managed or with major risk factors:	rated +25 to +150 or declined

DISABILITY

If properly managed with no major risk factors:	generally standard
If not properly managed or with major risk factors:	rated +25 to +150 with possibility of limitation of the waiting period and/or benefit period or declined

HEALTHCARE

HYPERTENSION (HIGH BLOOD PRESSURE)

The most common form, essential hypertension is characterized by elevated blood pressure and has no identifiable cause, but has been attributed to genetic, demographic or environmental factors. Secondary hypertension is caused by conditions that affect the kidneys and endocrine system.

Risk factors

- Age at diagnosis and current age
- Medication
- Blood pressure stability

• Other related conditions (*i.e.*, kidney, vascular and coronary artery disease, diabetes, height and weight, tobacco use)

WHAT RESPONSE CAN YOU EXPECT?

LIFE

Properly managed, no complications:	standard
Managed, non-optimal:	rated +50 to +125
Unmanaged:	postpone

CRITICAL ILLNESS

Properly managed, no complications:	standard
Managed, non-optimal:	rated +25 to +100
Unmanaged:	postpone

DISABILITY

Properly managed, no complications:	standard
Managed, non-optimal:	rated +25 to +125
Unmanaged:	postpone

HEALTHCARE



HYPERTHYROIDISM (GOITER)

Condition in which the thyroid gland accelerates the body's metabolism, causing a rapid pulse, elevated body temperature, etc.

Risk factors

- Current age
- Cause

- Nature of treatments
- Complications

WHAT RESPONSE CAN YOU EXPECT?

LIFE

Present – untreated decline

Treated – with no symptoms or complications

• Within 6 months of the diagnosis: postpone

• More than 6 months since the diagnosis: generally standard

CRITICAL ILLNESS

Present – with no symptoms or complications generally standard

• Other: postpone

History (medication or surgery) – with no symptoms or complications

• Within 6 months of the surgery, end of treatment rated+50

or medication:

 More than 6 months since the surgery, end of treatment or medication:

• Other: postpone

DISABILITY

Present – untreated decline

Treated – with no symptoms or complications

• Within 2 years of the diagnosis: depending on waiting period chosen: standard or rated +25 or with exclusion

More than 2 years since the diagnosis: generally standard

HEALTHCARE

HYPOTHYROIDISM

Condition in which there is a lack of thyroid hormones resulting from an underactive thyroid gland, causing symptoms including fatigue, muscle weakness, increased sensitivity to cold, etc.

Risk factors

- Current age
- Cause

- Nature of treatments
- Complications

WHAT RESPONSE CAN YOU EXPECT?

LIFE

Untreated

• Minimal or no symptoms: generally standard

• Other: postpone

Treated and properly managed standard

CRITICAL ILLNESS

Untreated

No symptoms: standardMild symptoms: rated +75

Other: postpone

Treated

No symptoms and no complications: standard

• Other: decline

DISABILITY

Untreated

• Minimal or no symptoms: standard or rated +25

• Other: postpone

Treated and properly managed standard

HEALTHCARE



IMPAIRED GLUCOSE TOLERANCE

Abnormally high blood sugar, associated with an increased risk of Diabetes Mellitus.

Risk factors

- Age at diagnosis
- Other related conditions (i.e., obesity, hypertension, coronary artery disease, tobacco use, family history)
- Blood test results
- Height and weight

WHAT RESPONSE CAN YOU EXPECT?

LIFE

• All cases: standard or rated +50 to +75

CRITICAL ILLNESS

• 30 years old or less at the time of application: decline

• Over 30 years old: rated +50 to +100 or declined

DISABILITY

• All cases: standard or rated +25 to +50

HEALTHCARE

LEUKEMIA

A form of cancer in which the bone marrow produces abnormal white blood cells. There are several types of leukemia that can be acute or chronic.

Risk factors

- Age at diagnosis and current age
- Type of leukemia
- Stage

- Type of treatment
- Date of last treatment
- Recurrence

W/LIVE D	PECDOI	VICE CAN V	YOU EXPECT?
VVHALL	(ESFUI	NOE CAIN	TOU EXPECT:

LIFE

decline
a flat extra premium from \$15.00 to \$20.00 per \$1,000 of insurance
standard may be offered
decline
generally declined

CRITICAL ILLNESS

• All cases: decline

DISABILITY

• All cases: decline

HEALTHCARE

MENTAL DISORDERS: ANXIETY/STRESS/ ADJUSTMENT DISORDER

Excessive fears or worry that can lead to generalized anxiety disorder, phobias or obsessive-compulsive disorder. Condition can also involve physical symptoms.

Risk factors

- Current age
- Severity
- Medication and dosage
- Response to medication
- Length of time on disability
- Recurrence

- Stability
- Hospital stays
- Suicidal thoughts or suicide attempt
- Occupation
- Habits (drugs, alcohol)
- Environment

	OU EXPECT?

LIFE

Best cases:	standard
Other:	rated +50
If currently on disability:	postponed for 6 months

CRITICAL ILLNESS

• Best cases:	generally standard
If currently on disability:	postponed for 6 months

DISABILITY

Best cases:	standard with possibility of limitation of the waiting period and/or benefit period
• Within 3 years of the diagnosis:	exclusion
 More than 3 years since the diagnosis: 	standard or exicusion

HEALTHCARE

MENTAL DISORDERS: ATTENTION DEFICIT HYPERACTIVITY DISORDER (ADHD)

A neurological disorder in which a person cannot control their thoughts and behaviour. The disorder is generally diagnosed in childhood and can persist into adulthood.

Risk factors

- Current age
- Medication and dosage
- Response to medication
- Stability

- Other related mental illnesses
- Habits (drugs, alcohol)
- Environment

- A'A'		OU EXPECT?

Child

• Mild to moderate: standard

Severe: postponed until adulthood

Adult generally standard

CRITICAL ILLNESS

Child

Mild to moderate: standard

Severe: postponed until adulthood

Adult generally standard

DISABILITY

• All cases: rated +25 to +50 and/or exclusion with possibility of limitation

on the waiting period of at least 90 days and/or benefit period

of up to 5 years or declined

HEALTHCARE

MENTAL DISORDERS - BIPOLAR DISORDER/MANIC DEPRESSIVE DISORDER

Extreme mood swings with emotional highs (mania) and lows (depression) separated by periods of stability.

Risk factors

- Current age
- Severity
- Medication and dosage
- Response to medication
- Length time on disability
- Recurrence

- Stability
- Hospital stays
- Suicidal thoughts or suicide attempt
- Occupation
- Habits (drugs, alcohol)
- Environment

	YOU EXPECT?	

LIFE

Within 1 year of the diagnosis:	postpone
• Between 1 and 10 years since the diagnosis:	rated +50 to +100 or declined
 More than 10 years since the diagnosis: 	standard may be offered for best cases

CRITICAL ILLNESS

•	Within 2 years of the diagnosis:	decline
•	More than 2 years since the diagnosis:	rated +50 or declined

DISABILITY

 Within 3 years of the diagnosis: 	decline
• More than 3 years since the diagnosis:	exclusion with possibility of limitation of the waiting period of at least 90 days and/or benefit period of up to 5 years for best cases

HEALTHCARE

MENTAL DISORDERS – MAJOR DEPRESSION

Feelings of sadness, unhappiness, worthlessness and guilt, excessive fatigue, apathy, loss of confidence, poor concentration, loss of interest or happiness, sleep disturbances, changes in appetite and weight gain or loss. Suicidal thoughts are also sometimes a symptom.

Risk factors

- Current age
- Severity
- Medication and dosage
- Response to medication
- Lenght of time on disability
- Recurrence

- Stability
- Hospital stays
- Suicidal thoughts or suicide attempt
- Occupation
- Habits (drugs, alcohol)
- Environment

WHAT RESPONSE CAN YOU EXPECT?

LIFE

1 episode

- Within 1 year of the diagnosis: postpone
- More than 1 year since the episode: standard or rated +50

Reccuring episodes

- Within 2 years of the last episode: postpone
- More than 2 years since the last episode: generally rated +50 to +100
- Best cases: standard may be offered

CRITICAL ILLNESS

Within 1 year:	generally postponed
• 1 to 5 years since the last episode:	rated +50 to +100

More than 5 years since the last episode: generally standard

DISABILITY

Within 2 years of the last episode:	decline
• 2 to 7 years since the last episode:	exclusion and possibility of limitation of the waiting period of at least 90 days and/or benefit period of up to 5 years
 More than 7 years since the last episode: 	generally exclusion
Best cases:	standard may be offered

HEALTHCARE



MENTAL DISORDERS - MINOR DEPRESSION

Similar to anxiety disorders, but with physical symptoms such as poor concentration, fatigue, sadness, etc. The intensity and duration of the symptoms help determine the severity of the depression.

Risk factors

- Current age
- Severity
- Medication and dosage
- Response to medication
- Lenght of time on disability
- Recurrence

- Stability
- Hospital stays
- Suicidal thoughts or suicide attempt
- Occupation
- Habits (drugs, alcohol)
- Environment

WHAT RESPONSE CAN YOU EXPECT?

LIFE

Best cases:	standard
If currently on disability:	postponed for 6 months
Other:	rated +50

CRITICAL ILLNESS

Within 1 year of the diagnosis, depending on the severity:	standard or postponed
• 1 to 5 years since the diagnosis:	standard or rated
 More than 5 years since the diagnosis: 	generally standard
If currently on disability:	postponed for 6 months

DISABILITY

Within 1 year of the diagnosis:	generally declined
• 1 to 5 years since the diagnosis:	exclusion and possibility of limitation of the waiting period of at least 90 days and/or benefit period of up to 5 years
 More than 5 years since the diagnosis: 	generally standard

HEALTHCARE

MULTIPLE SCLEROSIS

Disease that affects the central nervous system resulting in varying symptoms (numbness, weakness, heightened sensitivity, lack of coordination, vision problems, etc.). The disease is a relapsing condition that is more common among women and sequelae can be debilitating.

Risk factors

- Diagnosis date
- Age at diagnosis
- Symptoms

- Number of relapses
- Severity
- Degree of disability

WHAT RESPONSE CAN YOU EXPECT?	
LIFE	
Within 2 years of the last relapse:	decline
More than 2 years in remission:	rated +100 to +150 or declined
CRITICAL ILLNESS	
All cases:	decline
DISABILITY	
All cases:	decline
HEALTHCARE	

MUSCLE AND JOINT CONDITIONS

(BURSITIS, TENDONITIS, EPICONDYLITIS, CARPAL TUNNEL SYNDROME, SPRAIN, PATELLOFEMORAL SYNDROME)

Set of painful disorders of soft tissues: muscles, ligaments, tendons and nerves.

Risk factors

- Current Age
- Location
- Acute or chronic
- Medication and dosage
- Surgery

- Occupation
- Length of disability leave
- Limitation
- Other related conditions (*i.e.*, mental illness)
- Recurrence

WHAT RESPONSE CAN YOU EXPECT?

LIFE

• All cases: generally standard

CRITICAL ILLNESS

• All cases: generally standard

DISABILITY

Chronic and severe: may be declined
 Other: generally exclusion with possibility of limitation of the waiting period and /or benefit period

HEALTHCARE

NON-HODGKIN'S LYMPHOMA

Cancer of the lymphoid tissue. There are many subtypes of non-Hodgkin's lymphoma.

Risk factors

- Current Age
- Type
- Stage

- Type of treatment
- Date of last treatment
- Recurrence

WHAT RESPONSE CAN YOU EXPECT?	
LIFE	
Within 3 years of the diagnosis:	decline
More than 3 years since the diagnosis:	individual consideration
CRITICAL ILLNESS	
All cases:	decline
DISABILITY	
All cases:	decline
HEALTHCARE	

PULMONARY EMBOLISM

Blockage of an artery in the lungs caused by a blood clot.

Risk factors

- Cause
- Other related conditions

- Recurrence
- Type and duration of treatments

WHAT RESPONSE CAN YOU EXPECT?

LIFE

 Within 6 months of the episode: 	postpone
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More than 6 months since the episode: generally standard

CRITICAL ILLNESS

1 episode

•	Within 6	months of the	enisode:	postpone

• 6 months to 2 years since the episode: rated +50 to +75

More than 2 years since the episode: generally standard

2 episodes

Within the first year of the last episode: postpone

■ 1 to 3 years since the last episode: rated +75 to +100

More than 3 years since the last episode: rated +50

More than 2 episodes decline

DISABILITY

1 episode

• Within 6 months of the episode: postpone

More than 6 months since the episode: generally standard

More than one episode: decline

HEALTHCARE

SCHIZOPHRENIA

Brain disorder that affects a person's thoughts, feelings, emotions, perceptions and behaviours. Symptoms often include delusions, hallucinations and social withdrawal.

Risk factors

- Current age
- Severity
- Type of medication and dosage
- Patient compliance with medication
- Duration of disability periods
- Recurrence

- Stability
- Hospitalization
- Suicidal thoughts or attempted suicide
- Occupation
- Habits (drug or alcohol consumption)
- Environment

WHAT RESPONSE CAN YOU EXPECT?

LIFE

1	mild-to-moderate	episode.	full	recovery
	IIIIIa to IIIoaciate	cpisoac,		.ccorc.,

•	
 Within 1 year of the diagnosis: 	postpone
• 1 to 2 years since the diagnosis:	rated minimum +200
• 2 to 5 years since the diagnosis:	rated +100 to +200
• 5 to 10 years since the diagnosis:	rated +75
More than 10 years since the diagnosis:	generally standard

Recurring episodes or under treatment

 Within 2 years of the last episode: 	postpone
• 2 to 5 years since the last episode:	rated minimum +200
• 5 to 10 years since the last episode:	rated +150
 More than 10 years since the last episode: 	rated +100

CRITICAL ILLNESS

•	Age - under 25:	decline

• Age - 25 and over

1 episode, full recovery, under medication and actively working

•	Within 10 years of the diagnosis:	postpone
•	More than 10 years since the diagnosis:	rated+150

More than one episode since the last diagnosis: decline



SCHIZOPHRENIA (CONTINUATION)

Brain disorder that affects a person's thoughts, feelings, emotions, perceptions and behaviours. Symptoms often include delusions, hallucinations and social withdrawal.

Risk factors

- Current age
- Severity
- Type of medication and dosage
- Patient compliance with medication
- Duration of disability periods
- Recurrence

- Stability
- Hospitalization
- Suicidal thoughts or attempted suicide
- Occupation
- Habits (drug or alcohol consumption)
- Environment

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DISABILITY

• Age - 30 and over:

Present, stable and compliant with medication

• Within 10 years of the diagnosis: postpone

More than 10 years since the diagnosis:
 rated +100 and exclusion with a waiting period of at least

90 days and benefit period of up to 2 years

1 episode only, with no medication or psychotherapy

• Within 10 years of the diagnosis: postpone

• More than 10 years since the diagnosis: rated +25 and exclusion with a waiting period of at least

90 days and benefit period of up to 2 years

HEALTHCARE

Learn more >



LIFE AND CRITICAL ILLNESS RESPONSES ON THE PREVIOUS PAGE

SLEEP APNEA

Pauses in breathing while sleeping.

Risk factors

- Current Age
- Type of apnea
- Severity based on the polysomnogram (sleep study) results
- Nature and effectiveness of the treatment
- Height and weight

- Treatment response
- Other related conditions (*i.e.*, coronary artery disease, cardiac arrhythmia, chronic obstructive pulmonary disease)
- Occupation

WHAT RESPONSE CAN YOU EXPECT?

LIFE

Obstructive apnea (without any other risk factors)	
• Mild:	standard
Moderate, treated and properly managed:	standard
Severe:	rated + 50 to +150 or declined
Central apnea	decline

CRITICAL ILLNESS

Obstructive apnea (without any other risk factor)

• Controlled: standard or rated

Central apnea decline

DISABILITY

Obstructive apnea (without any other risk factor)	
	-tddd
• Mild:	standard or rated +25 to +50
• Moderate:	standard or rated +50
• Severe within 2 years of the last flare-up:	decline
• Severe more than 2 years since the last flare-up:	rated +50 and limitation on the waiting period and/or benefit period of up to 5 years or declined
Central apnea	decline

HEALTHCARE



THROMBOPHLEBITIS

Inflammation of a vein due to a blockage caused by a blood clot.

Risk factors

- Cause
- Other related conditions
- Recurrence

- Type and duration of treatments
- Complications

WHAT RESPONSE CAN YOU EXPECT?

LIFE

Within 3 months of the episode:	postpone
 More than 3 months since the episode: 	generally standard

CRITICAL ILLNESS

•	1 episode:	generally standard
•	More than one episode:	decline
•	Currently pregnant:	postpone

DISABILITY

1 episode

• Within first year of the episode: rated +50 or exclusion

• More than one year since the episode: generally standard

More than one episode

Within 2 years of the last episode: postpone
 2 to 3 years since the last episode: rated+50 or exclusion or postponed
 More than 3 years since the last episode: generally standard

HEALTHCARE

TRANSIENT ISCHEMIC ATTACKS (TIA)

A loss of blood flow to a part of the brain causing a temporary episode of neurological dysfunction. Sometimes referred to as a "mini-stroke".

Risk factors

- Age at diagnosis and current age
- Number of attacks
- Type of treatment
- Sequelae

- Current and history of tobacco use
- Cholesterol
- Blood pressure

WHAT RESPONSE CAN YOU EXPECT?

LIFE

Within 6 months of the attack:	postpone
 More than 6 months since the attack 	standard or rated +50 to +125

CRITICAL ILLNESS

• All cases: decline

DISABILITY

1 attack

Within 2 years of the attack:	decline
• 2 to 5 years since the attack:	rated +50 to +100 and limitation on the waiting period of at least 90 days with limitation on the benefit period may be offered or declined
 More than 5 years since the attack: 	rated +50 to +125 or declined

More than 1 attack decline

HEALTHCARE

ULCERATIVE COLITIS

Chronic inflammatory bowel disease that causes ulcers in the rectum and colon.

Risk factors

- Current age
- Diagnosis date
- Severity

Frequency of flare-ups

standard or rated +50 to +100

- Type of treatment (medication, dosage and surgery)
- Complications and other related conditions

WHAT RESPONSE CAN YOU EXPECT?

• More than 6 months since the surgery:

LIFE

Without surgery - Mild	
• Within 1 year of the last flare-up:	postpone
More than 1 year since the last flare-up:	generally standard
Without surgery - Moderate	
• Within 1 year of the last flare-up:	postpone
More than 1 year since the last flare-up:	rated +50 to +100
Without surgery - Severe	rated +100 minimum or declined
With surgery	
 Within 6 months of the surgery: 	postpone

CRITICAL ILL NESS

rated and exclusion or declined	
rated +100 with exclusion or colon cancer and metastases or declined	
rated +50 to +100 with exclusion for colon cancer and metastases or declined	

- Within 1 year of the surgery: postpone
- More than 1 year since the surgery, depending on the generally rated +50 to +100 and exclusion colon cancer type of intervention



DISABILITY AND HEALTHCARE RESPONSES ON THE NEXT PAGE

ULCERATIVE COLITIS (CONTINUATION)

Chronic inflammatory bowel disease that causes ulcers in the rectum and colon.

Risk factors

- Current age
- Diagnosis date
- Severity

- Frequency of flare-ups
- Type of treatment (medication, dosage and surgery)
- Complications and other related conditions

WHAT RESPONSE CAN YOU EXPECT?

DISABILITY

ar sargery mina		
• Within 1 year of the last flare	-up: post	pone

More than 1 year since the last flare-up: exclusion and possibility of limitation on the waiting period and/or

benefit period

Without surgery - Moderate

Without surgery - Mild

• Within 1 year of the last flare-up: postpone

• More than 1 year since the last flare-up: rated +25 with exclusion and possibility of limitation on the

waiting period and/or benefit period

Without surgery - Severe:

• Within 2 years of the last flare-up: postpone

• More than 2 years since the last flare-up: individual consideration

With surgery

• Within 6 months of the surgery: postpone

• More than 6 months since the surgery: exclusion

HEALTHCARE





Healthcare



Unlike other types of coverage, we do not rate for Healthcare.

If the proposed insured has a pre-existing medical condition, the application may be approved with an exclusion.

The exclusion would apply to all healthcare treatments and medications that the person would need "for the pre-existing condition".

Example: Exclusion for a spinal cord condition

The person cannot be covered for treatment received from a health professional such as a physiotherapist or chiropractor, or for medications received "for the pre-existing condition".

However, for another condition, the expenses will be eligible.

AVIATION

Risk factors

- Current age
- Experience and qualifications
- Type of aircraft
- Private or commercial
- Purpose of the flight
- Destination
- Medical history
- Lifestyle

WHAT RESPONSE CAN YOU EXPE	

LIFE

• Depending on the case: standard, a flat extra premium from \$2.50 to \$7.50 per \$1,000

of insurance or declined

CRITICAL ILLNESS

• Depending on the case: exclusion or declined

DISABILITY

• Depending on the case: exclusion or declined

HEALTHCARE

BACKCOUNTRY SKIING (INCLUDING HELI-SKI)

WHAT RESPONSE CAN YOU EXPECT?

LIFE

• Depending on the case: a flat extra premium of \$3,00 per \$1,000 of insurance, exclusion or declined

CRITICAL ILLNESS

Depending on the case: exclusion or declined

DISABILITY

• Depending on the case: exclusion or declined

HEALTHCARE

52

DRIVING

Risk factors

- Current age
- Type of violation
- Speeding
- Dates
- Suspended license
- Date of license reinstation
- History of accidents
- Habits (drugs/alcohol)
- Occupation

WHAT RESPONSE CAN YOU EXPECT?

LIFE

Small number of minor violations:	standard
Impaired driving:	postponed for 1 year
Other:	a flat extra premium \$2.50 to \$10.00 per \$1,000 of insurance or declined

CRITICAL ILLNESS

Small number of minor violations:	standard
Impaired driving:	postponed for 1 year
Other:	rated or declined

DISABILITY

 Small number of minor violations: 	standard
Impaired driving:	postponed for 1 year
• Other:	rated and possibility of limitation on the waiting period and/or benefit period or declined

HEALTHCARE

FLYING (OTHER THAN AVIATION)

Risk factors

- Current age
- Type of sport
- Type of aircraft (motorized or not)
- Amateur or factory-built
- Experience
- Location sport practice
- Permit
- Club membership
- Medical history
- Lifestyle

	NSF CAN	

LIFE

• Depending on the case: standard, a flat extra premium \$2.50 to \$7.50 per \$1,000 of insurance, exclusion or declined

CRITICAL ILLNESS

• Depending on the case: exclusion or declined

DISABILITY

Depending on the case: exclusion or declined

HEALTHCARE

MOTOR VEHICULE RACING

Risk factors

- Current age
- Experience
- Type of race
- Type of vehicle
- Type of track
- Competition
- Frequency
- Speed
- Amateur or professional
- History of accidents
- Medical history
- Lifestyle

	NSF CAN	

LIFE

• Depending on the case: a flat extra premium from \$2.50 to \$15 per \$1,000 of insurance or declined

CRITICAL ILLNESS

Depending on the case: exclusion or declined

DISABILITY

• Depending on the case: exclusion or declined

HEALTHCARE

MOUNTAINEERING AND OTHER TYPES OF CLIMBING

Risk factors

- Current age
- Type of climbing
- Location and altitude
- Level of difficulty
- Training and experience
- Club membership
- Medical history
- Lifestyle

WHAT RESPONSE CAN YOU EXPE	

LIFE

• Depending on the case: standard, a flat extra premium from \$2.50 to \$7.50 per \$1,000

of insurance, exclusion or declined

CRITICAL ILLNESS

• Depending on the case: standard, exclusion or declined

DISABILITY

Depending on the case: standard, exclusion or declined

HEALTHCARE

SCUBA DIVING

Risk factors

- Current age
- Training and certification
- Depth
- Type of diving (cave, wreck, ice, etc.)
- Location (lakes, oceans, etc.)
- Frequency
- Medical history
- Lifestyle

	J EXPECT?

LIFE

•	Recreational with no hazardous diving to a maximum of 100 feet:	standard
•	Other:	a flat extra premium from \$2,50 to \$7,50 per \$1,000 of insurance, accepted with an exclusion or declined

CRITICAL ILLNESS

•	Recreational, no dangerous dives and 100 feet maximum depth:	standard
•	Other:	exclusion or declined

DISABILITY

•	Recreational, no dangerous dives and 100 feet maximum depth:	standard
•	Other:	exclusion or declined

HEALTHCARE

TRAVEL ABROAD

With the world situation changing so rapidly, we suggest you <u>consult the Government of Canada website</u> for information on destinations that may pose specific risks.

A destination for which the Canadian government has issued travel advisories generally represents an increased risk for the insurer. Destinations for which no travel advisories have been issued are generally approved at the standard rates.

Risk factors

- Current age
- Purpose of trip
- Country and city
- Duration
- Date of last trip
- Frequency
- Future intentions
- Amount of insurance applied for
- Country's political situation and/or sanitation status

IMPORTANT: Include a foreign travel questionnaire when submitting the application.

WILLAT DECDONCE CAN VOLLEYDECTS	
WHAT RESPONSE CAN YOU EXPECT?	
LIFE	
Depending on the case:	standard, rated, exclusion or declined
CRITICAL ILLNESS	
Depending on the case:	standard, rated, exclusion or declined
DISABILITY	
Depending on the case:	standard, exclusion or declined
HEALTHCARE	
Learn more >	

Healthcare



Unlike other types of coverage, we do not rate for Healthcare or exclude.

Depending on the case: standard or declined