

# Companion Extend & Companion II Quick Reference



COVERAGE	Companion Extend	Companion II
<b>Life Coverage</b>	<p><b>Up to \$1,000,000 (18-69) – BC, AB, SK, MB &amp; ON</b>  <b>Up to \$1,000,000 (18-75) – ATL</b></p> <ul style="list-style-type: none"> <li>Max. Term: - 180 months or to age 73 (BC, AB, SK, MB &amp; ON)                      - 180 months or to age 76 (ATL)</li> <li>Monthly Decreasing Term</li> <li>Residual Payment</li> </ul> <p><b>Accidental Dismemberment</b> coverage included to cover: Permanent and complete loss of both hands, both feet; the entire sight of both eyes; or any combination of two of hand, foot and sight of one eye</p>	<p><b>Up to \$125,000 (18-59)</b>  <b>Up to \$72,000 (60-65)</b></p> <ul style="list-style-type: none"> <li>Max. Term: 120 months or to age 73</li> <li>Monthly Decreasing Term</li> <li>Residual Payment</li> </ul>
<b>Critical Illness Coverage</b>	<p><b>Up to \$500,000 (18-69) – BC, AB, SK, MB &amp; ON</b>  <b>Up to \$500,000 (18-75) – ATL</b></p> <ul style="list-style-type: none"> <li>Max. Term: - 180 months or to age 73 (BC, AB, SK, MB &amp; ON)                      - 180 months or to age 76 (ATL)</li> </ul> <p><b>Covered Conditions:</b> Life-threatening cancer, Heart attack, Coronary artery bypass surgery, Stroke, Major organ failure requiring transplant, Paralysis</p>	<b>Not applicable</b>
<b>Disability Coverage</b>	<p><b>Up to \$5,000/month (18-65)</b>  <b>To aggregate maximum of \$300,000 (18-65)</b></p> <ul style="list-style-type: none"> <li>Max. Term: - 84 months (BC, AB, SK, MB &amp; ON)                      - 120 months (ATL)</li> <li>7-day Retroactive</li> <li>14-day Retroactive</li> <li>30-day Retroactive</li> <li>30-day Elimination</li> </ul> <p><b>Hospitalization Benefit:</b> The Waiting Period will be waived for Retroactive policies if Total Disability requires hospitalization for a minimum of 72 hours (refer to definitions on the certificate for details)</p>	<p><b>Up to \$1,500/month (18-59)</b>  <b>Up to \$1,000/month (60-65)</b></p> <ul style="list-style-type: none"> <li>Max. Term: 84 months</li> </ul> <p><b>BC, AB, SK, MB, ON:</b></p> <ul style="list-style-type: none"> <li>30-day Elimination</li> <li>60-day Elimination</li> <li>90-day Elimination</li> <li>120-day Elimination</li> <li>120-day Critical Coverage</li> </ul> <p><b>ATL only:</b></p> <ul style="list-style-type: none"> <li>14-day Retroactive</li> <li>30-day Retroactive</li> <li>30-day Elimination</li> </ul>
ELIGIBILITY		
<b>Life and/or CI</b>	<ul style="list-style-type: none"> <li><b>BC, AB, SK, MB, ON:</b> 18 but not yet 70 years of age</li> <li><b>ATL:</b> 18 but not yet 76 years of age</li> <li><b>For CI only:</b> Have not had a Critical Illness prior to the ED</li> <li>Supplemental Health Questionnaire required when insured amount exceeds limits*.                      If answers 'Yes' to any health questions, or Insured Financed Amount plus Insured Residual Value &gt; \$300,000, application is underwritten.</li> <li>Temporary Insurance while application is being assessed*                      * see Dealer Guide for details</li> </ul>	<ul style="list-style-type: none"> <li>18 but not yet 66 years of age</li> </ul>
<b>Disability</b>	<ul style="list-style-type: none"> <li>18 but not yet 66 years of age; and</li> <li>Able to perform usual duties of own occupation; and</li> <li>Gainfully employed and working for a minimum of 23 hours per week for the past 4 weeks; or</li> <li>Gainfully employed Seasonally for at least 13 consecutive weeks during the past 12 months.</li> </ul>	<ul style="list-style-type: none"> <li>18 but not yet 66 years of age; and</li> <li>able to perform usual duties of own occupation; and</li> <li>Gainfully employed and working for a minimum of 23 hours per week for the past 4 weeks; or</li> <li>Gainfully employed Seasonally for at least 13 consecutive weeks during the past 12 months.</li> </ul>
EXCLUSIONS AND LIMITATIONS		
<b>Pre-existing</b>	<p><b>12 &amp; 12</b></p> <p><b>In BC, AB, SK, MB &amp; ON, the limitation/exclusion with regards to pre-existing condition only applies if the event claimed for occurs within 24 months of the effective date of insurance</b></p>	<p><b>24 &amp; 12</b> for Neck and Back, <b>12 &amp; 12</b> for other conditions</p>
<b>Special Limitations</b>	<p>If your Total Disability is caused or contributed to by:</p> <p>a) mental, nervous or psychiatric condition or disorder, after a benefit period of three months, payments will only be made if you are regularly attending a licensed psychiatrist, a licensed psychologist or a licensed neurologist;</p> <p>b) disease or disorder of the neck or back including but not limited to lumbar, thoracic or cervical spine, after a benefit period of two months, payments will only be made if you are under the care of a licensed Specialist such as a neurologist, a neurosurgeon, a physiatrist, an orthopaedic surgeon or a rheumatologist.</p>	<p>If your Total Disability is caused or contributed to by:</p> <p>a) mental, nervous or psychiatric condition or disorder, after a benefit period of three months, payments will only be made if you are regularly attending a licensed psychiatrist, a licensed psychologist or a licensed neurologist;</p> <p>b) disease or disorder of the neck or back including but not limited to lumbar, thoracic or cervical spine, after a benefit period of two months, payments will only be made if you are under the care of a licensed medical specialist such as a neurologist, a neurosurgeon, a physiatrist, an orthopaedic surgeon or a rheumatologist.</p>

Full details of Coverage, Limitations and Exclusions on Certificate - Forms 7113E (ATL) / 7193 (BC, AB, SK, MB & ON) and 7015E (ATL) / 7159 (BC, AB, SK, MB & ON)  
 For customer questions regarding Pre-existing Conditions, Eligibility, Limitations and Exclusions, call 1 800 761-4655.