

# Benefits Fact Sheet

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## Critical Illness – Basic Accidental Death and Dismemberment

All active employees under age 65 who are insured under the Basic Accidental Death & Dismemberment Program are eligible to apply for the **Critical Illness** benefit.

The Critical Illness benefit is a payment in the amount of \$2,000 payable 90 days following the date of diagnosis of Life Threatening Cancer or 30 days following the date of diagnosis of other eligible Critical Illness as described below. In the event that the employee suffers another Critical Illness, this benefit can only be claimed once. This benefit is not a medical expense reimbursement, nor are there any restrictions on how the claimant may use the payment.

**Critical Illness** means any of the following illnesses:

- a) **Heart Attack;**
- b) **Coronary Artery Bypass Surgery;**
- c) **Stroke or Cerebrovascular incident (CVA); and**
- d) **Cancer (certain types of cancer are not covered).**

a) **Heart Attack** means the diagnosis of the death of a portion of the heart muscle, resulting from blockage of one or more coronary arteries. The diagnosis must be based on both: a) new permanent or temporary electrocardiographic (EGG) changes compatible with an infarction diagnosis; and b) elevations of cardiac enzymes in a compatible clinical context.

b) **Coronary Artery Bypass Surgery** means heart surgery to correct narrowing or blockage of one or more coronary arteries with bypass grafts. The surgery must be recommended by a consultant cardiologist licensed and practicing in Canada.

The procedures **NOT** covered by this definition include: Non-surgical techniques such as balloon angioplasty, laser embolectomy or other non-bypass techniques

c) **Stroke or CVA** means the diagnosis of a cerebrovascular accident resulting from infarction of brain tissue, due to thrombosis, embolism or hemorrhage and producing measurable functional neurological deficits (cortical, motor or sensory) persisting for thirty (30) days following the occurrence of the stroke.

d) **Cancer** means the diagnosis of a malignancy characterized by uncontrolled growth of malignant cells and the invasion of tissue.

The types of cancers **NOT** covered by this definition include:

- Early prostate cancer, diagnosed as T1OMO or equivalent staging;
- Non-invasive cancer in situ;
- Pre-malignant lesions, benign tumours or polyps;
- Any skin cancer, except invasive malignant melanoma into the dermis or deeper; and
- Any tumour in the presence of the Human Immunodeficiency Virus (HIV).

The diagnosis of a Critical Illness must be provided by a medical practitioner or specialist licensed and practicing medicine in Canada, other than the insured person, a business associate or a relative.

**Coverage** - The employee must survive 90 days following the date of diagnosis of Life Threatening Cancer or 30 days following the date of diagnosis of other eligible Critical Illness. No benefit is payable if the insured person does not survive this period.

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### Exclusions

The benefit will not be paid if a Critical Illness results directly or indirectly from any one or more of the following causes:

- a) Diagnosis of any Cancer made within ninety (90) days following the effective date of coverage.
- b) An intentionally self-inflicted injury or sickness, whether the insured person is sane or insane.
- c) The use of illicit drugs other than as prescribed and administered by or in accordance with the instruction of a legally licensed medical practitioner.
- d) From a **Pre-existing Condition**\* unless the Critical Illness is diagnosed twenty-four (24) consecutive months after the effective date of coverage.

\* **Pre-existing Condition** means an illness or condition for which the insured person has received medical consultation, treatment, care services or has been prescribed during the twenty-four (24) months immediately preceding the effective date of the Critical Illness coverage.

### How to Apply?

Critical Illness benefit forms can be obtained from your Human Resource office or from Vestcor Pension Services Corporation. However, to ensure confidentiality and privacy during the claim process, the employee should deal directly with the insurance company.

Within **thirty (30) days** after the date diagnosis is made a written notice of Critical Illness, with particulars sufficient to identify the insured person, must be sent to:

AIG Insurance Company of Canada  
120 Bremner Boulevard, Suite 2200  
Toronto, ON M5J 0A8

Upon receipt of this notice, the insurance company will send to the claimant the forms for filing proof of a Critical Illness.

All completed forms must be forwarded to the insurance company within **ninety (90) days** after the date of diagnosis.

Failure to provide this proof within this time will not invalidate any claim if it is shown not to have been reasonably possible to provide the proof during this time and that it was provided as soon as was reasonably possible, but **not later than one (1) year** after the date of the diagnosis.

The insurance company reserves the right to examination of the insured person and confirmation of the Critical Illness diagnosis by a medical practitioner appointed by the company.

For more information, contact a Pensions and Benefits Specialist at (506) 453-2296 or toll free 1-800-561-4012.



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