

CIBC Critical Illness Insurance

CIBC Critical Illness Insurance: Exclusions and limitations

CIBC Critical Illness Insurance is optional insurance underwritten by CIBC Life Insurance Company Limited ("CIBC Life"). You may contact CIBC Life at [1 888 393-1110](tel:18883931110) or visit cibcinsurance.com.

Note to Quebec residents: This product isn't available online in Quebec at this time. Call one of our licensed insurance agents at [1 888 393-1110](tel:18883931110) to get a quote and buy.

NOTE: The following information is intended as a summary only. For complete terms and conditions, please view the Sample CIBC Critical Illness Insurance Policy which you can access in your application.

All critical illness insurance products have certain common events or circumstances (exclusions and limitations) that are not eligible for the critical illness benefit.

The exclusions and limitations under CIBC Critical Illness Insurance are:

Aggregate maximum

If you have more than one CIBC Critical Illness Insurance policy, the critical illness benefit, if paid, under all policies you have will be limited to \$200,000 regardless of the total coverage amounts of those policies.

Critical illnesses not covered

1. Heart Attack

No critical illness benefit amount will be paid for Heart Attack for the following:

- elevated biochemical cardiac markers that result from an intra-arterial cardiac procedure, including coronary angiography and coronary angioplasty, in the absence of new Q waves; or
- ECG changes suggesting a prior myocardial infarction, which do not meet the Heart Attack definition as described above.

2. Cancer (Life-Threatening)

No critical illness benefit amount will be paid for Cancer (Life-Threatening) if, within the first 90 days following the effective date of your policy or reinstatement of your policy (if applicable), you have any of the following:

- i) signs, symptoms or investigations, that lead to a diagnosis of Cancer (Life-Threatening) or a diagnosis of cancer (whether covered or not under your policy), regardless of when the diagnosis is made; or
- ii) a diagnosis of Cancer (Life-Threatening) or any other cancer (whether covered or not under your policy).

Medical information about any diagnosis of Cancer (Life-Threatening) or any other type of cancer (whether covered or not under your policy) and any signs, symptoms or investigations that lead to a diagnosis of Cancer (Life-Threatening) or any other type of cancer (whether covered or not under your policy) must be reported to us within 6 months of the date of diagnosis. If this information is not reported within this time period, we may deny your claim for Cancer (Life-Threatening) and any other covered critical illness caused by any cancer or its treatment.

No critical illness benefit amount will be paid for Cancer (Life-Threatening) for the following:

- lesions described as benign, pre-malignant, uncertain, borderline, non-invasive, carcinoma in-situ (Tis), or tumors classified as Ta;
- malignant melanoma skin cancer that is less than or equal to 1.0 mm in thickness, unless it is ulcerated or is accompanied by lymph node or distant metastasis;
- any non-melanoma skin cancer, without lymph node or distant metastasis;
- prostate cancer classified as T1a or T1b, without lymph node or distant metastasis;

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- papillary thyroid cancer or follicular thyroid cancer, or both, that is less than or equal to 2.0 cm in greatest diameter and classified as T1, without lymph node or distant metastasis;
- chronic lymphocytic leukemia classified less than Rai stage 1; or
- malignant gastrointestinal stromal tumours (GIST) and malignant carcinoid tumors, classified less than AJCC Stage 2.

The terms Tis, Ta, T1a, T1b, T1 and AJCC Stage 2 are to be applied as defined in the American Joint Committee on Cancer (AJCC) cancer staging manual, 7th Edition, 2010.

The term Rai staging is to be applied as set out in KR Rai, A Sawitsky, EP Cronkite, AD Chanana, RN Levy and BS Pasternack: Clinical staging of chronic lymphocytic leukemia. Blood 46:219, 1975.

3. Coronary Artery Bypass Surgery

No critical illness benefit amount will be paid for Coronary Artery Bypass Surgery for any of the following:

- angioplasty;
- intra-arterial procedures;
- percutaneous trans-catheter procedures; or
- non-surgical procedures.

4. Stroke

No critical illness benefit amount will be paid for Stroke for any of the following:

- Transient Ischaemic Attacks;
- intracerebral vascular events due to trauma; or
- lacunar infarcts which do not meet the definition of Stroke as described above.

Diagnosis or surgery caused by excluded condition

No critical illness benefit amount will be paid for a covered critical illness if the diagnosis or surgery results from, or is related to, any condition, disease, or illness not covered under your policy.

Survival period, policy is not in effect or policy is declared void

No critical illness benefit amount will be paid:

- i) if you are not alive at the end of the 30-day survival period¹ or if you have experienced irreversible cessation of all functions of the brain before the end of the 30-day survival period;
- ii) if your policy is not in effect;
- iii) if you are diagnosed with any covered critical illness or undergo Coronary Artery Bypass Surgery while your policy is not in effect;
- iv) if your policy is declared void because you misrepresented or failed to disclose a material fact, or you committed fraud in connection with your policy.

¹ **survival period** means the period starting from the date you are diagnosed with a covered critical illness (except for Coronary Artery Bypass Surgery) and ending 30 days later. For Coronary Artery Bypass Surgery, the survival period means the period starting on the date of the surgery and ending 30 days later.

Other excluded circumstances

No critical illness benefit amount will be paid for a covered critical illness if the diagnosis or surgery results from, or is related to:

- i) any self-inflicted injury or attempted suicide regardless of whether you intended or understood the consequences of your actions;
- ii) your intentional use or intake of any drug, intoxicant (including alcohol), narcotic or poisonous substance, except as prescribed by a physician or as directed by the manufacturer in the case of non-prescribed medication;
- iii) your attempt to commit or commission of an indictable offence, whether charged or not;
- iv) your participation in war (whether such war is declared or undeclared) or hostile act of the armed forces of any country, insurrection or civil commotion; or
- v) your operation of any land, water or air conveyance which is moved or operated by any means other than muscular power, while your concentration of alcohol in one hundred (100) milliliters of blood exceeds eighty (80) milligrams or while you are under the influence of any drug, intoxicant, narcotic or poisonous substance except as prescribed by a physician or as directed by the manufacturer in the case of non-prescribed medication.

For more information on the exclusions and limitations, please view the Sample CIBC Critical Illness Insurance Policy which you can access in your application.

To speak to a licensed insurance agent for more details on the exclusions or limitations, please call [1 888 393-1110](tel:18883931110) Monday to Friday from 8 am to 10 pm (ET).

CIBC Critical Illness Insurance: When your policy ends

Your policy will terminate² on the earliest of the following:

- i) the date that a critical illness benefit amount is paid;
- ii) the date that you die if no covered critical illness benefit amount is payable;
- iii) the expiry date³ of your policy if no critical illness benefit amount is payable;
- iv) 15 days after you receive notice by registered mail (recorded mail in Alberta) that your policy will be cancelled, if your initial premium has not been received by us on its due date;
- v) **if you reside in Quebec:** 15 days after you receive notice by registered mail that your policy will be cancelled, if an overdue premium, other than your initial premium, has not been received by us;
- vi) **if you do not reside in Quebec:** 36 days after a premium's due date⁴, if an overdue premium, other than your initial premium, has not been received by us;
- vii) the date that you convert your entire coverage amount under your policy to a new policy;
- viii) the next monthly anniversary⁵ of your policy after we receive your request to cancel your policy (provided that any irrevocable beneficiary⁶ consents, if applicable, have also been obtained); or
- ix) the date that fraud in connection with your application or a claim under your policy is discovered.

² **terminate** means the coverage under your policy will end or has ended. When a policy terminates, the policy, and all coverages and features, are no longer in effect.

³ **expiry date** means your 75th birthday for a Term-10 or Term-20 policy. There is no expiry date for a Term-100 policy.

⁴ **premium due date** means the date that your premiums are due. Your premium due date defaults to the monthly anniversary if you are paying your premiums on a monthly basis or to your policy anniversary if you are paying your premiums on an annual basis.

⁵ **monthly anniversary** means the day of each month that is the same as the date of the month that your policy is in effect and coverage begins.

⁶ **irrevocable beneficiary** means a beneficiary (whether primary or contingent) whose status as your beneficiary cannot be changed by you without the signed consent of that beneficiary. You also cannot make certain changes to your policy without the consent of the irrevocable beneficiaries. Such changes include:

- reducing your coverage amount; or
- reducing the percentage allocation for that irrevocable beneficiary; or
- changing that beneficiary's status from irrevocable to revocable; or
- revoking that person or entity's status as a beneficiary so that the person or entity is no longer entitled to receive the benefit amount.

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