

**Policy 57J00**

**Active employees (divisions 1 to 6, 9 and 10)**

CCMBC - ACTIVE EMPLOYEES (DIVISIONS 1 TO 6, 9 & 10)

COLUMBIA BIBLE COLLEGE (DIVISION 9)

MB MISSION - CANADIAN OFFICE (DIVISION 10)

**May 1, 2017**

This document contains important information. Please keep it for future reference.

**SSQ, LIFE INSURANCE COMPANY INC.**

**YOUR GROUP INSURANCE PLAN**

**CANADIAN CONFERENCE OF MENNONITE BRETHREN CHURCHES**

**This document shows the contractual provisions  
in force on May 1, 2017 for the following participants:**

*Class: Active employees (divisions 1 to 6, 9 and 10)*

*Group(s): 57J00, 57J04, 57J05*

*(Policy No.: 57J00)*

In this document, "SSQ" refers to SSQ, Life Insurance Company Inc.

## **NOTICE OF NEW FILE**

### **File and Personal Information**

In order to maintain the confidentiality of information concerning the persons it insures, SSQ, Life Insurance Company Inc. opens an insurance file to hold personal information about the application for insurance and any insurance claims made.

With the exception of certain cases provided for under applicable legislation, access to insured persons' files is restricted to those employees, legal agents and service providers who must consult these files for the purpose of contract management, inquiries or underwriting, in addition to reinsurers and any other person you may authorize. SSQ keeps these insurance files in its offices.

All persons insured with SSQ have the right to consult the information contained in their file and, if necessary, to have any errors or inaccuracies corrected, free of charge, by making a written request to the attention of SSQ's Personal Information Protection Officer at the following address: SSQ, Life Insurance Company Inc., 2525 Laurier Boulevard, P.O. Box 10500, Station Sainte-Foy, Quebec QC G1V 4H6. However, SSQ may charge fees for transcribing, reproducing or sending this information. The person making the request for information will be informed beforehand of the approximate amount that will be charged.

### **Legal Agents and Service Providers**

SSQ may exchange information of a personal and confidential nature with its reinsurers, legal agents and service providers only for the purpose of allowing them to carry out the tasks they are assigned. SSQ's legal agents and service providers must comply with SSQ's Personal Information Protection Policy.

When you enrol in a group insurance plan, and also when you make a claim, you are actually giving your consent that the insurer and its legal agents and service providers may use your personal information for the above-mentioned purposes. It is understood that not giving this consent would compromise the management of your insurance coverage and the quality of the services SSQ can offer you.

For more information, consult the SSQ Personal Information Protection Policy available at [ssq.ca](http://ssq.ca).

## **AVAILABLE INFORMATION ON YOUR GROUP INSURANCE PLAN**

If your contract has been modified since the production date of this booklet, there may be wording differences between the booklet and the policy. If so, the policy wording will prevail; hence, you are entitled to consult the policy at the policyholder's address and obtain a copy thereof.

The masculine gender is used throughout this document solely for readability purposes and applies to both men and women.

**TABLE OF CONTENTS**

**SCHEDULE OF INSURANCE..... i**

**GENERAL PROVISIONS.....1**

Definitions and Interpretation..... 1

Participation requirements.....5

Applicable insurance periods.....7

Payment of benefits.....12

Limitation of contractual liability.....14

Changes of insurer.....14

Waiver of premiums in the event of total disability.....15

**LIFE INSURANCE PLAN.....17**

Participant's Life Insurance..... 17

Spouse's and Dependent Children's Life Insurance..... 19



---

# SCHEDULE OF INSURANCE

---

## General Provisions

This document shows the contractual provisions in force on **May 1, 2017**.

<b>Group Name(s) and No(s).</b>	57J00 CCMBBC - ACTIVE EMPLOYEES (DIVISIONS 1 TO 6, 9 & 10) 57J04 COLUMBIA BIBLE COLLEGE (DIVISION 9) 57J05 MB MISSION - CANADIAN OFFICE (DIVISION 10)
<b>Class</b>	Active employees (divisions 1 to 6, 9 and 10)
<b>Category of individuals eligible as participants</b>	All regular employees of CCMBBC, Canadian Conference, Columbia Bible College, MB Mission Canadian Office (divisions 1 to 6, 9 and 10) working at least 22 hours a week and of Willingdon working at least 30 hours a week.
<b>Eligibility date for new employees</b>	3 month(s) after the employment date
<b>End of "own occupation" period for definition of total disability</b>	After 24 months of a same period of total disability

### Notes:

#### Other general provisions

#### Dependent Child Definition

Unmarried children under age 21 or under 26 years of age if they are full-time students. A child under age 21 must not be working more than 30 hours a week, unless full-time student. A child is considered a full-time student if he has been registered attendance at an elementary school, high school, university, or similar educational institution for 15 hours a week or more sometime in the last 6 months. Children who are incapable of supporting themselves because of physical or mental disorder are covered without age limit if the disorder begins before they turn 21, or while they are students under age 26.

---

# SCHEDULE OF INSURANCE

---

## Life Insurance Plan

### Participant's Life Insurance

<b>Amount of insurance - under age 65</b>	400% of annual salary, rounded to higher \$1,000 of amount of insurance
<b>Minimum</b>	\$50,000
<b>Maximum</b>	\$750,000
<b>Reduction of amount of insurance</b>	
<b>at age 65</b>	50% less than amount of insurance for insureds under age 65, minimum \$50,000 Date of reduction: the day of your birthday
<b>at age 71</b>	\$5,000 Date of reduction: the day of your birthday
<b>Termination of insurance</b>	At retirement

### Spouse's and Children's Life Insurance

<b>Amount of insurance</b>	Spouse: \$10,000 Dependent children: \$5,000
<b>Termination of insurance</b>	At retirement

#### Notes:

##### Termination of Spouse's Insurance

Your spouse's life insurance terminates on the earliest of: the day your spouse reaches age 65 or the day you retire.



# GENERAL PROVISIONS

## Definitions and Interpretation

Some of the terms used to describe your plan are defined below. These terms should be interpreted as defined wherever the context allows. These definitions apply to terms that are used in more than one part of the text. Where required, other terms are defined in the description of the benefit in which they are used.

In order to provide for the special features of your group coverage, notes may be included in the "Schedule of Insurance". If there are any discrepancies between the notes and the other terms and conditions of your group insurance plan, the notes will always take precedence.

### **Accident**

An unintentional, sudden, unforeseen and unpredictable event due exclusively to a violent external cause and resulting, directly and independently of any other cause, in bodily injury.

### **Actively at work**

An employee is deemed to be "actively at work" when present at his or her place of work and capable of carrying out normal duties in accordance with the regular work schedule and on full pay. Employees who are not disabled are also deemed to be actively at work if their absence is due only to a period of leave or a non-working day.

### **Contract**

Agreement between SSQ and the Policyholder regarding the policy whose number identifies the present document.

### **Dependent child**

A child for whom you or your spouse exercise parental authority, or would exercise if a minor, and whom you or your spouse support. To be eligible, the child must also be unmarried and:

- under age 21;  
or
- age 21 or over but under age 26 and a full-time student in an accredited educational institution, subject to proof of registration deemed satisfactory by SSQ;  
or
- regardless of age, be residing at your home or that of your spouse and be suffering from a severe, incurable and chronic physical or mental disability that began while the child met any of the conditions indicated above in this definition, and have remained continuously disabled since that date; the disability must render the child incapable of pursuing any gainful activity. SSQ may require medical evidence of such as it deems necessary.

The child must also reside in Canada at least 9 months per year and be covered under the public health and hospitalization insurance plan of a Canadian province.

**Employee**

An individual who works for the employer as a regular employee and who belongs to one of the classes of eligible employees specified in the contract.

**Employer**

Any employer with at least one class of employees eligible for insurance under the plan.

**Insured**

An individual covered under the benefit referred to in the context in which the term is used.

**Participant**

An individual enrolled in the insurance plan as a member of a class of eligible individuals. The individual must also be covered under the public health and hospitalization insurance plan of a Canadian province. In addition, employees will not be considered as participants unless they reside in Canada at least 9 months per year and their usual place of work is located in Canada.

**Period of total disability**

Period during which you are totally disabled and which cannot initially be shorter than:

- a) the applicable elimination period provided for under your Short term Disability benefit, if applicable;
- b) 7 consecutive days if your plan does not include a Short term Disability benefit.

**Plan administrator**

An individual, appointed by the Policyholder, responsible for the administration of this insurance plan.

**Premium period**

Period for which premiums are payable, as agreed by SSQ and the Policyholder.

**Recurring total disability**

Successive periods of total disability due to the same causes and separated by less than 31 full consecutive days during which you were actively at work or able to be actively at work. Recurring total disability also means successive periods of total disability due to entirely different causes and separated by less than one full day during which you return to work.

When a period of total disability, as defined above, exceeds 6 months, a period of total disability due to the same causes as the previous period is considered a recurring total disability if the periods are separated by less than 180 full consecutive days during which you return to work on a minimum daily schedule equivalent to your pre-disability work schedule or were able to do so.

After the end of the contract, the durations used to determine the end of periods of total disability are those provided for by law.

## **Salary**

Your regular salary, excluding bonuses, payments for overtime, fees, accommodation and meal allowances, amounts paid by the employer as fringe benefits, isolation allowances and any lump-sum payments.

## **Spouse**

An individual who resides in Canada at least 9 months per year and is covered under the public health and hospitalization insurance plan of a Canadian province, provided that this is an individual who:

- is married to you through a civil union or other legally recognized marriage;  
or
- you are able to prove lives with you on a regular basis and whom you have designated in writing to SSQ as your spouse, provided that a child has been born of your union;  
or
- you are able to prove has been living with you on a regular basis for at least 12 months and whom you have designated in writing to SSQ as your spouse.

The status of spouse ends when:

- in the case of a marriage or civil union, you and this person have been separated for more than 3 months or have obtained a divorce or annulment of your marriage or civil union;
- in the case of a common-law union, you and this person have been separated for more than 3 months.

In the case of more than one spouse, only the last person you have designated as such in writing to SSQ will be recognized as your spouse. If no spouse is designated, only a person linked to you by civil union or marriage will be recognized as your spouse.

## **Subrogation**

The substitution of one person or thing in the place of another with respect to a lawful claim. SSQ's right of subrogation is described later in this "General Provisions" section.

## **Total disability**

### At the start of the period of total disability

A disability caused by an accident or illness that renders you totally incapable of carrying out the main duties of your usual employment.

### After the own occupation period specified in the "Schedule of Insurance"

A disability caused by an accident or illness that renders you totally incapable of pursuing any gainful occupation for which you are reasonably suited by education, training or experience, regardless of the availability of employment.

**Total disability resulting from an accident**

Total disability resulting exclusively from an accident, that begins within 90 days of the date of the accident.

**Totally disabled**

Describes an individual who meets the definition of "total disability" specified in the contract.

**You**

Personal pronoun used to refer to the participant. "You", "your" and "yours" refer to the participant directly.

# Participation requirements

## 1. Participation compulsory

Participation in your group insurance plan is compulsory.

## 2. Eligibility conditions

Any individual residing in Canada, who is actively at work and who meets the eligibility conditions specified in the "Schedule of Insurance", is eligible for insurance as a participant, unless specified otherwise. Individuals who are absent because they are on leave or because their eligibility date is a non-working day, are also eligible for insurance.

Deaths and total disabilities resulting from disabilities that arose while the individual was insured as a participant under the previous group insurance contract are not covered under a subsequent contract, except as provided for under any applicable legislation or in accordance with the Canadian life and health insurance standards.

Spouses and dependent children of individuals insured as participants are themselves eligible for insurance as spouses and dependent children.

Despite what precedes, any individual insured under the previous contract may not be excluded from the new contract or be denied benefits solely because of a pre-existing condition that was no longer applicable or that was not provided for in the previous contract, or because the individual is not at work on the effective date of the new contract.

All individuals insured under the previous contract are covered with full rights under the new contract upon termination of the previous contract if the termination of their insurance is exclusively attributable to the termination of the contract and if they belong to a class of participants covered by the new contract.

## 3. Applications for insurance

An application for insurance must be submitted to SSQ for insurance to become effective, even in cases where participation in insurance is compulsory. If an application for insurance is not submitted within the time provided for under this plan, SSQ may require evidence of insurability and decline the application.

Certain events, such as marriage or the birth of a child, may enable you to make changes to the insurance that became effective at the time of enrollment. Please refer to the provisions regarding periods of insurance for more information about making such changes.

## 4. Evidence of insurability

You must provide evidence of insurability deemed satisfactory by SSQ to be entitled to the following:

- a) Any amount of insurance that exceeds the maximum amount that may be obtained without evidence of insurability. Where applicable, this amount is specified in the "Schedule of Insurance"
- b) Any insurance for which an application is submitted more than 31 days following the date the individual becomes eligible

For the purposes of insurance obtained on approval of evidence of insurability, the spouse is the individual whose own evidence of insurability has been approved and who still meets the definition of "spouse" when the insured event occurs.

For the purposes of insurance obtained on approval of evidence of insurability, a dependent child is an individual whose own evidence of insurability has been approved and who still meets the definition of "dependent child" when the insured event occurs.

# Applicable insurance periods

## 1. Time insurance becomes effective

Any date on which insurance becomes effective begins at 12:01 a.m. in the insured's place of residence.

## 2. Effective date of insurance

### Your insurance

If SSQ receives your application for insurance no later than 31 days following the date you become eligible, your insurance becomes effective on the following date:

- The date you become eligible for insurance

Otherwise, your insurance will become effective on the following date:

- The date SSQ receives your application; however, coverage for which you are required to provide evidence of insurability will become effective on the date such evidence is approved

### Insurance for your spouse or dependent children

If SSQ receives the application for insurance for your spouse or dependent children no later than 31 days following the date they become eligible for insurance, their insurance becomes effective on the following date:

- The date they become eligible for insurance

Otherwise, it will become effective on the following date:

- The date SSQ receives the application; however, coverage for which evidence of insurability is required will become effective on the date such evidence is approved

Any benefit under which your dependent children are covered applies to any new dependent children (from the birth of the child, provided there was a live birth, in the case of Life Insurance Benefits).

Insurance for any individual who is eligible as a spouse or a dependent child cannot become effective before your own insurance.

## 3. Effective date of modifications to insurance

### 3.1 Increase in insurance coverage following a change in employment or family status

If you are actively at work or temporarily absent from work and have maintained your coverage during your interruption of work, any increase in your insurance coverage following a change in employment or family status becomes effective on the date of the change, provided SSQ receives a written application to such effect within 31 days following the change and subject to the provisions on total disability. Otherwise, the

change in coverage will become effective on the date you actively return to work, subject to any other eligibility provisions in force.

If SSQ receives the application more than 31 days after the date of the event justifying an increase in insurance or if the modification applied for requires that you provide evidence of insurability, you will be required to provide such evidence and, if approved, the increase in insurance will become effective on the date SSQ receives the application.

### **3.2 Insurance that cannot be modified**

During any period where the participant is retired or totally disabled, amounts of insurance cannot be increased and the provisions used to establish these amounts cannot be modified. Such modifications shall only become effective once the participant has actively returned to work and provided he is not totally disabled at this time.

No waiver of premiums shall apply to the premiums payable for individuals who were not already insured prior to a change in coverage status if such change must occur after the date of retirement or the start of a period of total disability.

### **3.3 Reduction in insurance coverage following a change in employment or family status**

Any decrease in insurance coverage following a change in employment or family status becomes effective on the date of the change, provided SSQ receives a written application to such effect within 31 days following the change. If SSQ receives the application more than 31 days after the date of the event justifying a decrease in insurance, the decrease becomes effective on the date SSQ receives the application.

## **4. Temporary interruption of work**

### **Participation in insurance during a temporary interruption of work**

If so agreed by the Policyholder and SSQ, participation in insurance may be maintained in certain cases of temporary interruption of work, as specified below. Subject to applicable legislation regarding minimum durations for maintaining or offering to maintain participation in insurance, the Policyholder may determine the possibility of maintaining participation in insurance, and the duration thereof, taking into account the rules specified below.

### **Maximum duration for maintaining participation in insurance during a period of temporary layoff**

Participation in insurance may be maintained up to a maximum of 6 months during any period of temporary layoff.

### **Maximum duration for maintaining participation in insurance during a period of interruption of work other than a temporary layoff**

Participation in insurance may be maintained up to maximum of 24 months during any period of interruption of work other than a temporary layoff.



### **Minimum durations for maintaining participation**

For certain interruptions of work, the Policyholder is required by law to allow participants to maintain insurance coverage for a minimum time. Any individual affected by a temporary interruption of work must contact the plan administrator for more information about whether participation in insurance may or must be maintained, and for how long it may or must be maintained.

### **Information to provide to SSQ**

The plan administrator must provide SSQ with the following information within 31 days following the date of your temporary interruption of work:

- The date you stopped working.
- As soon as known, the planned date of your active return to work.
- The choice made as to whether or not to apply to maintain participation in insurance during the period of interruption of work and whether or not you chose to maintain Disability Insurance coverage if both options are available.

Regardless of whether or not you maintain participation in insurance, SSQ must be notified as soon as possible of the date you actively return to work or are called back to work.

### **Total disability beginning during a period of temporary interruption of work**

In the event of a total disability that begins during a period of temporary interruption of work during which you have maintained participation in insurance:

- total disability may be considered as such for the purposes of insurance only if it has continued until the date you would have returned to work had it not been for your total disability, as confirmed to SSQ by the plan administrator;
- the duration of total disability required to be entitled to waiver of premiums begins on the date you would have returned to work had it not been for your total disability.

### **Suspension of insurance**

If the plan administrator fails to notify SSQ prior to expiration of the 31-day deadline provided, your participation in insurance is suspended for the whole duration of your interruption of work. Subject to applicable legislation, if your interruption of work lasts more than 12 months and coverage has been suspended, you may only resume participation in insurance once you return to work as a member of an eligible employee class and only once you have recompleted any period of employment specified in the eligibility conditions. If the interruption of work that led to suspension of coverage lasts 12 months or less, you may resume participation in insurance as soon as you return to work as a member of an eligible employee class.

### **Interpretation**

Notwithstanding the other provisions on temporary interruptions of work, continuation of coverage can never extend beyond the termination dates provided for elsewhere in the contract. In addition, SSQ may always rely on the fact that:

- a) participation in some benefits is compulsory;
- b) anyone who does not maintain participation in an optional benefit while being given the opportunity to do so must provide new evidence of insurability to be insured again under such benefit, which can result in coverage being declined.

## 5. Maintaining participation for the spouse and dependent children of a deceased participant

In the event of your death, your insured spouse and dependent children may maintain participation in insurance without premium payment for the Life Insurance plan, until the earliest of the following:

- The end of a period of 24 months immediately following your death
- The date when their participation in insurance would have ended, if your death had not occurred
- The date when they become eligible for similar coverage under another insurance benefit
- The date the contract terminates

For any benefit that provides for a conversion privilege, this entitlement applies to the end of the extended coverage, in accordance with the conditions applicable.

## 6. Termination of insurance

### Your insurance

Your insurance terminates no later than 12:01 a.m. on the earliest of the following dates:

- a) On the date you no longer qualify as an individual eligible as a participant, as specified in the "Schedule of Insurance"
- b) For each benefit, at the time specified for termination of insurance in the "Schedule of Insurance", if any
- c) On the date your participation is suspended following a temporary interruption of work lasting over 12 months
- d) On the date when premiums are due, if such premiums are not paid to SSQ before the end of the grace period
- e) On the date your waiver or premiums terminates because of the age you have reached, except when this termination would be legally forbidden
- f) On the day following the termination date of the contract; if a benefit is being terminated without termination of the contract, this benefit terminates no later than the day following such termination
- g) On the date you submit any claim or collect any benefits founded on misrepresentations, irrespective of the compulsory nature of any coverage or any other action SSQ may take

**Insurance for your spouse and dependent children**

Insurance for your spouse and dependent children terminates no later than 12:01 a.m. on the earliest of the following dates:

- a) The date your insurance terminates, subject to the provisions specified in the “Maintaining participation for the spouse and dependent children of a deceased participant” section of these GENERAL PROVISIONS
- b) On the date when premiums for their insurance are due, if such premiums are not paid to SSQ before the end of the grace period

# Payment of benefits

## 1. Amounts of coverage

In no case may you benefit from an amount of coverage greater than that for which SSQ has received the required premiums.

## 2. Deadlines for filing claims

Deadlines for filing claims vary from one benefit to another, and are specified in the description of each benefit.

## 3. Restriction concerning actions and proceedings

Every action or proceeding against an insurer for the recovery of insurance money payable under a contract is absolutely barred, unless commenced within the time set out to this end, if any, in the applicable provincial Insurance Act.

## 4. Evidence that SSQ may require

You must provide SSQ with any information and supporting documents deemed necessary by SSQ to establish your eligibility for benefits and any amount payable, at your own expense. In the event that benefits may be payable, SSQ may require the insured to undergo examination, at any time, by one or more health care professionals selected and compensated by SSQ. If the insured fails to undergo an examination required by SSQ within 30 days of SSQ's request, SSQ may decline the claim or suspend or terminate benefits.

SSQ may also request that an autopsy be performed in accordance with applicable legislation.

## 5. Currency

All amounts referred to in the contract are in the legal tender of Canada.

## 6. Third-party liability and subrogation

You must notify SSQ of any notice served to, or legal action taken against a third party or any judgment, claim or settlement related to an event which may result in entitlement to benefits under the insurance plan.

If you are entitled to receive financial compensation from a third party with respect to which benefits are payable under the contract, you will be required to reimburse SSQ the amount of any benefits overpaid.

SSQ is subrogated to all rights of the insured against a third party liable for damage that results in an entitlement to payment of benefits under the terms of the contract, up to the limitation of the amounts paid by SSQ. Should SSQ decide to exercise its right of subrogation, the insured may be required to sign a letter of subrogation drafted by SSQ.

## **7. Designating and revoking beneficiaries**

Unless otherwise provided for in the General Provisions section of the Schedule of Insurance, beneficiary designations that applied under a previous contract carried by another insurer do not apply under any replacing contract.

In compliance with applicable legislation, you have the right to designate or revoke one or more beneficiaries of any benefits payable under your group insurance. Consequently, if there is no valid new beneficiary designation to be applied under SSQ's contract, your group insurance beneficiary will be your estate.

## **Limitation of contractual liability**

If any amendment made to fiscal legislation, to a government plan, to an insurance plan provided for in employee working conditions or to an employer retirement plan has the effect of increasing liability under the contract, then the provisions of this contract shall continue to apply as though such amendment had not been made, unless the parties expressly agree otherwise. If an increase in liability is required by law, however, then an additional premium shall be payable to SSQ by the Policyholder. This additional premium shall be equal to the value of the increase in contractual liability.

## **Changes of insurer**

The expiry or cancellation of a group life insurance benefit may not be set up against a claim based on an insured event, including a death that results from a total disability, if this insured event occurred while the benefit was in force.

The expiry or cancellation of a group sickness or accident insurance that is not part of the Health Care Insurance Plan may not be set up against a claim based on death or insured mutilation resulting from an accident that occurred while the benefit was in force. It may neither be set up against a claim based on a total disability that arose or a sickness that was contracted while the benefit was in force.

The insurer of a group disability insurance benefit that expires is bound to compensate the participant for salary loss if the participant is still totally disabled after the benefit expires.

In the event of a change in insurer, be it at the beginning or end of the contract, SSQ's responsibilities are limited to what the law and standards that govern the industry of insurance of persons impose in order to protect the rights of insured individuals. As a result, SSQ is not responsible in the event of recurrence of the disabling affliction after the expiry of the period that has been determined in this regard by the law or standards of the industry and the provisions of the former and subsequent contracts are not binding on SSQ.

# Waiver of premiums in the event of total disability

## 1. Entitlement to waiver of premiums

If you become totally disabled while your insurance is in force under the contract, your participation in insurance will be maintained for the following benefits, without payment of premiums, effective as of the waiver of premiums start date provided for under this plan:

- Participant's Life Insurance
- Spouse's and Dependent Children's Life Insurance

To qualify for the waiver of premiums privilege, you must meet the following conditions:

- a) Your disability must begin while you are covered under the contract.
- b) You must be under the continuous care of a physician, except if your total disability is declared stable by your attending physician, to the satisfaction of SSQ.
- c) Your condition must meet the definition of a total disability that was in force at the time you became totally disabled.

## 2. Start and end of waiver of premiums

The start and end dates for the waiver of premiums applicable to each benefit are specified below.

### 2.1 Participant's Life Insurance

Start date:

- The first day of the premium period following the first 6 months of a same period of total disability

End date (the earliest of the following):

- The date you reach age 65
- The date specified in the "End of waiver of premiums for all benefits" section of these GENERAL PROVISIONS

### 2.2 Spouse's and Dependent Children's Life Insurance

Start date:

- The first day of the premium period following the first 6 months of a same period of total disability

End date (the earliest of the following):

- The date that your waiver of premiums for Participant's Life Insurance ends
- The date you reach age 65
- The date specified in the "End of waiver of premiums for all benefits" section of these GENERAL PROVISIONS

### **3. End of waiver of premiums for all benefits**

Your premium waiver automatically ends upon the earliest of the dates stated above and also upon the earliest of the following dates:

- a) The date your condition no longer meets the definition of total disability
- b) The date you are no longer under the continuous care of a physician, except if your total disability, as defined in the contract, is a condition that is declared stable by a physician, to the satisfaction of SSQ
- c) The date SSQ requests proof of your total disability, if you are unable to submit or fail to submit such proof within 90 days of SSQ's request
- d) The date you refuse to participate in good faith in a rehabilitation program recommended by SSQ
- e) The date SSQ requests that you undergo an examination by a health care professional or a treatment likely to be beneficial to your recovery, if you fail to do so within 90 days of SSQ's request

### **4. Application for waiver of premiums**

If no claim for Disability Insurance benefits is filed, applications for a waiver of premiums must be submitted in writing to SSQ. Otherwise, the Disability Insurance claim form may also be used to apply for a waiver of premiums. In either case, SSQ may require additional proof and supporting documents. In all cases, your application for a waiver of premiums and supporting documents must be submitted to SSQ within 90 days of the date you became eligible for the waiver. If you fail to meet this deadline, you must prove that you were unable to submit your application and supporting documents earlier, otherwise SSQ may decline your application or interrupt the waiver period.

From the time SSQ notifies you that your application has been declined or your waiver of premiums has been interrupted, you have 90 days in which to provide additional proof justifying your continued entitlement to a waiver or request that your file be reviewed.

Unless you submit your application for waiver or request for review within the time specified, your right to waiver will not apply to any period prior to the date SSQ receives your application or request.

For an application for waiver of premiums to be approved, all required documents must be submitted to SSQ no later than 12 months following the start date of your total disability. In addition, in the event that an application for waiver is declined or a waiver of premiums is interrupted, no waiver period will apply to your disability if all of the required documents are not submitted to SSQ at the latest 12 months after the date on which notice of refusal or interruption is issued.



# LIFE INSURANCE PLAN

## Participant's Life Insurance

### 1. Definitions

The definitions that apply specifically to the interpretation of this benefit can be found in the GENERAL PROVISIONS section.

### 2. Coverage

Subject to the provisions of the contract, SSQ agrees to pay the amount of insurance provided for under this benefit if you should die while covered under this insurance benefit. This amount is payable to your designated beneficiary. If no beneficiary is designated, the amount of insurance is payable to your estate. Any payment made in good faith to your estate or estate's legal representative, or to the person known by SSQ as the designated beneficiary at the time of payment, shall fully discharge SSQ of any liability for the amount of such payment under this benefit.

### 3. Amount of insurance

The amount of insurance provided for under this benefit is established in accordance with the "Schedule of Insurance".

### 4. Accelerated benefit payment

If you are totally disabled and your life expectancy is less than 12 months, you may request advance payment of up to 50% of your amount of insurance, up to a maximum of \$50,000. If you submit your request during the 24 months prior to the date when a reduction in the amount of insurance specified in the "Schedule of Insurance" is due to be effective, the amount paid may not exceed 50% of the amount that would be payable after the reduction. If you submit your request within 24 months preceding the date your insurance is scheduled to end, no accelerated benefit shall be payable. In all cases, your request must be approved by SSQ and the following conditions must be met:

- a) You must send a written request to SSQ
- b) You must be exempt from payment of your Life Insurance premiums under the waiver of premiums provision
- c) You must provide proof that your life expectancy is less than 12 months at the time of your request
- d) You must obtain the written consent of the beneficiary of your insurance, if irrevocable

The amount payable upon your death will be reduced by the amount of the accelerated benefit payment plus interest calculated at the average return rate of a one (1) year Treasury Bill plus 2%. Interest is calculated from the date the accelerated benefit is paid, and will

continue to accrue until the date of final payment of the remaining amount of insurance payable upon your death.

## **5. Conversion privilege**

If your insurance under this benefit ends because you cease to belong to the group insured while the contract is in force, you are entitled to convert all or part of your group life insurance coverage to individual life insurance without having to prove your insurability. To exercise the conversion privilege, you must apply in writing to SSQ no later than 31 days after the day you cease to belong to the group insured.

If you cease to belong to the group on the day you reach age 65 or earlier, you can opt for one of the following types of individual insurance:

- a) A life insurance that is comparable to your group insurance as to the amount and duration, but that does not exceed \$400,000 for all of your group life insurance benefits combined, including the ones you were insured for as a spouse or child, where applicable
- b) A one-year term life insurance that can be converted into the insurance described in item a) above

Individual life insurance policies issued after having exercised the conversion privilege do not provide for a premium waiver.

If you should die during the 31-day period in which you could have exercised your conversion privilege and your group insurance coverage has not already been converted, the amount of life insurance you were eligible to convert shall be payable under the group insurance contract.

In all cases described above, the premium for the first year of the individual insurance cannot exceed the premium for a one-year term insurance. Except for this first-year premium, the premiums must be uniform for the term of the individual policy. The individual policy premiums are based on the rates in force for individual insurance, in accordance with your gender, and your age and smoking status on the date you cease to belong to the group insured, and in accordance with the particulars that applied to your group life insurance. SSQ must receive the first premium for individual life insurance within 31 days following the date you cease to belong to the group insured.

## **6. Claims**

Claims and proof of death must be submitted to SSQ within 90 days following the date of death. Otherwise, the individual filing the claim must prove that he or she was unable to submit the documents earlier.

All claims must be submitted using the claim form provided. SSQ may require additional proof and supporting documents.

# Spouse's and Dependent Children's Life Insurance

## 1. Definitions

The definitions that apply specifically to the interpretation of this benefit can be found in the GENERAL PROVISIONS section.

## 2. Coverage

Subject to the provisions of the contract, SSQ agrees to pay you the amount of insurance provided for under this benefit if your spouse or one of your dependent children should die while covered under this insurance benefit. Any payment made in good faith to your estate or estate's legal representative shall fully discharge SSQ of any liability for the amount of such payment under this benefit.

## 3. Amount of insurance

The amount of your spouse's life insurance, and that of your dependent children's life insurance, are established in accordance with the "Schedule of Insurance".

## 4. Conversion privilege

If life insurance coverage for your spouse or one of your dependent children ends because you cease to belong to the group insured, you are entitled to convert all or part of this group life insurance coverage to individual life insurance without having to provide any evidence of insurability. To exercise the conversion privilege, you must apply in writing to SSQ no later than 31 days after the day you cease to belong to the group insured.

The conversion privilege applies only to those whose insurance terminates on or before their 65th birthday due to the fact that you cease to belong to the group on the day you reach age 65 or earlier. The following types of individual life insurance are available as a result of conversion:

- a) A life insurance that is comparable to the group insurance of the insured person as to the amount and duration, but that does not exceed \$400,000 for all of the group life insurance benefits combined you had for this person, whether the person is insured as a participant, spouse or child
- b) A one-year term life insurance that can be converted into the insurance described in item a) above

Individual life insurance policies issued after having exercised the conversion privilege do not provide for a premium waiver.

If your insured spouse or dependent children should die during the 31-day period in which you could have exercised this conversion privilege and their group insurance coverage has not already been converted, the amount of life insurance you were eligible to convert shall be payable under the group insurance contract.

In all cases described above, the premium for the first year of the individual insurance cannot exceed the premium for a one-year term insurance. Except for this first-year premium, the premiums must be uniform for the term of the individual policy. The individual policy premiums are based on the rates in force for individual insurance, in accordance with the gender of the individuals to be insured, and their age and smoking status on the date you cease to belong to the group insured, and in accordance with the particulars that applied to their group life insurance. SSQ must receive the first premium for individual life insurance within 31 days following the date you cease to belong to the group insured.

## **5. Claims**

Claims and proof of death must be submitted to SSQ within 90 days following the date of death. Otherwise, the individual filing the claim must prove that he or she was unable to submit the documents earlier.

All claims must be submitted using the claim form provided. SSQ may require additional proof and supporting documents.



# access

Discover our on-line services  
by registering today at our  
**ACCESS | Plan Members** Web site.

SSQ Customer Service  
**Toll free:**