

Tangible[®]

Peace of mind... today and tomorrow



CRITICAL ILLNESS

- Basic benefit
- Deluxe benefit

CRITICAL ILLNESS MULTI-PROTECTION (per child)

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Here are the definitions of the critical and non-critical illnesses included in the following benefits:

- Critical illness Multi-protection (per child)
- Critical illness - Basic benefit
- Critical illness - Deluxe benefit

Please consult the table of ILLNESSES/CONDITIONS COVERED to check which illnesses are covered under each of the benefits.

1

Stroke (Cerebrovascular Accident)

A cerebrovascular event producing neurological sequelae lasting more than 30 days and caused by intracranial thrombosis or hemorrhage or by embolism from an extra-cranial source. There must be evidence of measurable, objective neurological deficit.

Exclusion

Transient ischemic attacks are specifically excluded.

2

Aplastic Anaemia

Chronic persistent bone marrow failure which results in anaemia, neutropenia and thrombocytopenia requiring treatment with at least one of the following:

- a) Blood product transfusion
- b) Marrow stimulating agents
- c) Immunosuppressive agents
- d) Bone marrow transplantation

3

Autism

An organic defect in brain development characterized by failure to develop communicative language or other forms of social communication, with the diagnosis confirmed by a specialist before the third birthday.

4

Burns

Third degree burns over at least 20% of the body surface.

5

Cancer

A tumour characterized by the uncontrolled growth and spread of malignant cells and the invasion of tissue.

Leukemia is a type of cancer that is covered under this benefit.

Exclusions

1. The following cancers are excluded from coverage:
 - a) Carcinoma in situ
 - b) Stage 1A malignant melanoma (melanoma less than or equal to 1.0 mm in thickness, not ulcerated and without level IV or V invasion)
 - c) Any non-melanoma skin cancer that has not become metastatic (spread to neighbouring organs)
 - d) Stage A (T1a or T1b) prostate cancer

5 Cancer (CONTINUED)

2. Furthermore, no benefit will be payable for cancer or for a subsequent diagnosis of any cancer or other covered conditions directly resulting from, or the treatment of, any cancer (covered or excluded under this benefit) if within the first 90 days after the effective date of the benefit or the effective date of last reinstatement of the benefit, the insured has any of the following:
- Signs or symptoms of cancer that lead to a diagnosis of cancer (covered or excluded under this benefit), regardless of when the diagnosis is made
 - Medical consultations or tests that lead to a diagnosis of cancer (covered or excluded under this benefit), regardless of when the diagnosis is made
 - A diagnosis of cancer (covered or excluded under this benefit)

The insured must report this information to Blue Cross within six months of the date of diagnosis. If the insured does not disclose this information, Blue Cross has the right to deny any claim for cancer or for any critical illness caused by cancer or its treatment.

6 Blindness

The total and irreversible loss of vision in both eyes as confirmed by an ophthalmologist, with the corrected visual acuity being 20/200 or less in each eye or the field of vision being less than 20 degrees in both eyes.

7 Coma

A state of unconsciousness with no reaction to external stimuli or response to internal needs for a continuous period of four days. The Glasgow coma score must be four or less continuously during the four days.

Exclusions

- A medically induced coma
- A coma which results directly from alcohol or drug use

8 Coronary Artery Bypass Surgery

The undergoing of heart surgery, when medically needed, to correct narrowing or blockage of one or more coronary arteries with bypass grafts.

Exclusion

Non-surgical techniques such as balloon angioplasty or laser relief of an obstruction are not covered.

9 Aortic Surgery

The undergoing of surgery for disease of the aorta requiring excision and surgical replacement of the diseased aorta with a graft. Aorta refers to the thoracic and abdominal aorta but not its branches.

10 Type 1 Diabetes Mellitus

A diagnosis of type 1 diabetes mellitus, characterized by absolute insulin deficiency and continuous dependence on exogenous insulin for survival. The diagnosis must be made before the insured's 18th birthday by a qualified pediatrician or endocrinologist licensed and practising in Canada or the U.S.

Furthermore, there must be evidence of dependence on insulin for a minimum of three months.

11 Muscular Dystrophy

A definitive diagnosis, before the insured's 18th birthday, of muscular dystrophy, characterized by well-defined neurological abnormalities and confirmed by electromyography and muscle biopsy.

12

Cystic Fibrosis

A definitive diagnosis of cystic fibrosis confirmed by a specialist before the 18th birthday with evidence of chronic lung disease and pancreatic insufficiency.

13

Heart Attack (Myocardial Infarction)

The death of a portion of heart muscle as a result of inadequate blood supply as evidenced by the following:

- a) New electrocardiographic (ECG) changes indicative of a myocardial infarction, and
- b) The elevation of cardiac biochemical markers to levels considered diagnostic for infarction

Heart attack during coronary angioplasty is covered provided there are diagnostic changes of new Q wave infarction on the ECG in addition to elevation of cardiac markers.

Exclusion

Heart attack does not include an incidental finding of ECG changes suggesting a prior myocardial infarction in the absence of a corroborating event.

14

Occupational HIV Infection

Diagnosis of Human Immunodeficiency Virus (HIV) resulting from accidental injury during the course of the insured's normal occupation which exposed the insured to HIV-contaminated body fluids.

Exclusions

No benefit is payable under this provision unless all of the following conditions are met:

- a) The accidental injury is reported to Blue Cross within 14 days of its occurrence
- b) An HIV test is performed within 14 days of the accidental injury and the result is negative
- c) An HIV test is performed between 90 and 180 days after the accidental injury and the result is positive
- d) All HIV tests are performed by facilities approved by Blue Cross
- e) The accidental injury is reported, investigated and documented in accordance with current Canadian workplace guidelines

No payment will be made if any of the following apply:

- a) The insured elects not to take any available licensed vaccine offering protection against HIV
- b) A licensed cure for HIV infection becomes available prior to the accidental injury
- c) The HIV infection results from a non-accidental injury (including, but not limited to, sexual transmission or intravenous (IV) drug use)

15

Kidney Failure

Chronic irreversible failure of both kidneys (end stage renal disease) necessitating treatment by regular hemodialysis, peritoneal dialysis or renal transplantation.

16

Alzheimer's Disease

A definitive clinical diagnosis by a specialist of Alzheimer's Disease, which is a progressive degenerative disease of the brain. The insured must exhibit loss of intellectual capacity involving impairment of memory and judgement which results in a significant reduction in mental and social functioning such that he or she requires continuous daily supervision.

Exclusion

All other dementing organic brain disorders and psychiatric illnesses are excluded.

17

Parkinson's Disease

A definitive diagnosis by a specialist of primary idiopathic Parkinson's Disease characterized by two or more of the following clinical manifestations: muscle rigidity, tremor or bradykinesia (abnormal slowness of movement, sluggishness of physical and mental responses). The insured must require substantial physical assistance from another adult to perform at least two of the six Activities of Daily Living (as defined in the contract).

Exclusion

All other types of Parkinsonism are specifically excluded.

18

Motor Neuron Disease

A definitive diagnosis of one of the following: amyotrophic lateral sclerosis (ALS or Lou Gehrig's disease), primary lateral sclerosis, progressive spinal muscular atrophy, progressive bulbar palsy or pseudo bulbar palsy, and limited to these entities.

19

Bacterial Meningitis

A definitive diagnosis of bacterial meningitis that is confirmed by laboratory analysis of cerebrospinal fluid showing growth of pathogenic bacteria in culture and that causes permanent neurological deficit confirmed by a neurologist and documented for at least ninety days following the date of diagnosis.

Exclusion

Viral meningitis is not covered.

20

Paralysis

The complete and permanent loss of use of two or more limbs for a continuous period of ninety days following the precipitating events, during which time there has been no sign of improvement.

Exclusion

All psychiatric related causes are specifically excluded.

21

Cerebral Palsy

A definitive diagnosis of cerebral palsy, a non-progressive neurological defect characterized by spasticity and incoordination of movements.

22

Loss of speech

Total and irreversible loss of the ability to speak as the result of physical injury or disease, the loss persisting for a continuous period of at least 180 days.

Exclusion

All psychiatric related causes are specifically excluded.

23

Loss of Autonomy

An unequivocal diagnosis, by a specialist, of either of the following for a continuous period of 90 days:

- a) Total and permanent inability to perform independently at least two of the six Activities of Daily Living (as defined in the contract), with no reasonable chance of recovery
- b) Cognitive impairment as defined in the contract

24 Loss of Limbs

The irreversible severance of two or more limbs from above the wrist or ankle joint as the result of an accident or medically required amputation.

25 Heart Valve Replacement

The undergoing of replacement of any heart valve with either a natural or mechanical valve when medically needed.

Exclusion

Heart valve repair is specifically excluded.

26 Multiple Sclerosis

A definitive diagnosis by a neurologist of multiple sclerosis, characterized by well-defined neurological abnormalities persisting for a continuous period of at least six months or with evidence of two separate clinically documented episodes. Multiple areas of demyelination must be confirmed by MRI scanning or imaging techniques generally used to diagnose multiple sclerosis.

27 Deafness

Total and irreversible loss of hearing in both ears, with an auditory threshold of 90 decibels or greater within a speech threshold of 500 to 3000 cycles per second.

28 Major Organ Transplant or Major Organ Failure on Waiting List

Diagnosis of irreversible failure of the heart, both lungs, liver, both kidneys or bone marrow, with transplantation medically necessary.

To qualify under the insured condition of Major Organ Transplant, the insured must undergo surgery as the recipient for transplantation of a heart, lung, liver, kidney or bone marrow, and limited to these entities.

To qualify under the insured condition of Major Organ Failure on Waiting List, the insured must be eligible as a recipient in an approved government organ or bone marrow transplant program in Canada or the U.S. for one or more of the organs specified in this provision or for bone marrow. For purposes of the Survival Period, the date of diagnosis is the date the insured's enrolment in the transplant program takes effect.

29 Benign Brain Tumour

A non-malignant tumour arising from the brain or meninges. The histological nature of the tumour must be confirmed by examination of tissue (biopsy or surgical excision).

Exclusions

1. Tumours of the bony cranium and pituitary microadenomas (less than 10 mm in diameter) are excluded.
2. Furthermore, no benefit will be payable for benign brain tumour or for a subsequent diagnosis of any benign brain tumour or other covered conditions directly resulting from, or the treatment of, any benign tumour, if within the first 90 days following the effective date of the benefit or the effective date of last reinstatement of the benefit the insured has any of the following:
 - a) Signs or symptoms of benign brain tumour that lead to a diagnosis of benign brain tumour, regardless of when the diagnosis is made
 - b) Medical consultations or tests that lead to a diagnosis of benign brain tumour, regardless of when the diagnosis is made
 - c) A diagnosis of benign brain tumour

The insured must report this information to Blue Cross within six months of the date of the diagnosis. If the insured does not disclose this information, Blue Cross has the right to deny any claim for benign brain tumour or for any critical illness caused by benign brain tumour or its treatment.

1

Coronary Angioplasty

An interventional procedure to unblock and widen a vessel that supplies blood to the heart. Angioplasty must be medically necessary to allow an uninterrupted flow of blood and oxygen to the heart.

2

Non Life-Threatening Cancer

- a) Stage T1a or T1b (stage A) prostate cancer
- b) Stage 1A malignant melanoma (melanoma less than or equal to 1.0 mm in thickness)
- c) Ductal carcinoma in situ of the breast (DCIS, requires confirmation by biopsy)

Exclusion

No benefit will be payable for cancer or for a subsequent diagnosis of any cancer or other covered conditions directly resulting from, or the treatment of, any cancer (covered or excluded under this benefit), if within the first 90 days following the effective date of the benefit or the effective date of last reinstatement of the benefit the insured has any of the following:

- a) Signs or symptoms of cancer that lead to a diagnosis of cancer (covered or excluded under this benefit), regardless of when the diagnosis is made
- b) Medical consultations or tests that lead to a diagnosis of cancer (covered or excluded under this benefit), regardless of when the diagnosis is made
- c) A diagnosis of cancer (covered or excluded under this benefit)

The insured must report this information to Blue Cross within six months of the date of the diagnosis. If the insured does not disclose this information, Blue Cross has the right to deny any claim for cancer or for any critical illness caused by cancer or its treatment.

ILLNESSES/CONDITIONS COVERED

CRITICAL ILLNESSES	Critical illness Multi-protection (per child)	Critical illness Deluxe benefit	Critical illness Basic benefit
Stroke (Cerebrovascular Accident)	✓	✓	✓
Aplastic Anaemia	✓	✓	
Autism	✓		
Burns	✓	✓	
Cancer	✓	✓	✓
Blindness	✓	✓	
Coma	✓	✓	
Coronary Artery Bypass Surgery	✓	✓	✓
Aortic Surgery	✓	✓	
Type 1 Diabetes Mellitus	✓		
Muscular Dystrophy	✓		
Cystic Fibrosis	✓		
Heart Attack (Myocardial Infarction)	✓	✓	✓
Occupational HIV Infection	✓	✓	
Kidney Failure	✓	✓	✓
Alzheimer's Disease	✓	✓	
Parkinson's Disease	✓	✓	
Motor Neuron Disease	✓	✓	
Bacterial Meningitis	✓	✓	
Paralysis	✓	✓	
Cerebral Palsy	✓		
Loss of Speech	✓	✓	
Loss of Autonomy	✓	✓	
Loss of Limbs	✓	✓	
Heart Valve Replacement	✓	✓	
Multiple Sclerosis	✓	✓	
Deafness	✓	✓	
Major Organ Transplant or Major Organ Failure on Waiting List	✓	✓	
Benign Brain Tumour	✓	✓	
NON-CRITICAL ILLNESSES			
Coronary Angioplasty	✓	✓	
Non Life-Threatening Cancer	✓	✓	