Important Notice

This is not a contract. Actual terms and conditions are detailed in the policy issued by Manulife upon final application approval. It contains important details concerning exclusions, conditions and limitations. Please review it carefully upon receipt.

For more information, contact your advisor.

Plans underwritten by The Manufacturers Life Insurance Company.

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What conditions are covered?

Cancer (Life-Threatening)

A definite diagnosis of a tumour characterized by the uncontrolled growth and spread of malignant cells and the invasion of tissue. The diagnosis of cancer must be made by a specialist.

Heart Attack

A definite diagnosis of the death of heart muscle due to obstruction of blood flow, that results in a rise and fall of biochemical cardiac markers to levels considered diagnostic of myocardial infarction, with at least one of the following:

- heart attack symptoms,
- new electrocardiogram (ECG) changes consistent with a heart attack, or
- development of new Q waves during or immediately following an intra-arterial cardiac procedure including, but not limited to, coronary angiography and coronary angioplasty.

The diagnosis of heart attack must be made by a specialist.

Stroke (Cerebrovascular Accident)

A definite diagnosis of an acute cerebrovascular event caused by intra-cranial thrombosis or hemorrhage, or embolism from an extra-cranial source, with:

- acute onset of new neurological symptoms, and
- new objective neurological deficits on clinical examination,

persisting for more than 30 days following the date of diagnosis. These new symptoms and deficits must be corroborated by diagnostic imaging testing. The diagnosis of stroke must be made by a specialist.

Coronary Artery Bypass Surgery

The undergoing of heart surgery to correct narrowing or blockage of one or more coronary arteries with bypass graft(s). The surgery must be determined to be medically necessary by a specialist.

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. The surgery must be determined to be medically necessary by a specialist.

Manulife

When you're focused on recovery, we're focused on you

Lifecheque® Basic Critical Illness Insurance

The Manufacturers Life Insurance Company

Lifecheque Basic: The easy way to ease financial concerns in case of critical illness.

What would you do if you were Tara, age 31?

Tara was recently married and living a happy life, when her doctor shocked her with an unexpected diagnosis: lung cancer. Fortunately, it was caught early and she had a good chance of survival.

But Tara and her husband had been struggling to save for a down payment on a house. How would they pay for treatment costs not covered by her government health insurance plan? How would they compensate for lost wages or other miscellaneous costs associated with her treatment and recovery?

The same challenges could be experienced by any person diagnosed with other types of cancer, or other serious conditions like heart attack, stroke, coronary artery bypass surgery or aortic surgery.

Consider these numbers:

- 9 out of 10 Canadian families touched by cancer report financial troubles caused by the disease, according to the Canadian Cancer Society[1]
- It usually takes 8 to 16 weeks to return to work after a heart attack.[2] How would you make up for that lost income?

1 The Toronto Star, "Cancer diagnosis can lead to financial crisis for some," July 2, 2014.

2 www.heartandstroke.on.ca

Fortunately, there's a simple solution: Lifecheque Basic Critical Illness Insurance from Manulife

If you are diagnosed with a covered critical illness, you'll receive a lump-sum payment of the amount you chose. **How you spend it is entirely up to you.**

Anyone between the ages of 18 to 55, inclusive, can choose from three coverage amounts:

- $25,000
- $50,000
- $75,000

Coverage is also available to other age groups:

Ages 56-60: $25,000 or $50,000

Ages 61-65: $25,000

It's easy to apply

If you can sign a declaration of your good health, your coverage becomes effective on the first of the month after we receive your application and premium payment. It's that simple.

We don't even need to know your family medical history.

The declaration requires you to confirm that you have not experienced signs or symptoms, consulted your doctor or had abnormal tests related to the covered critical illnesses:

- Cancer
- Heart attack
- Stroke
- Coronary artery bypass surgery
- Aortic surgery

Premiums

Monthly premiums are based on your age, gender and smoking status, so the younger you are when you apply, the lower your premiums will be for the first five years of coverage.

Premiums are guaranteed not to increase for the first five years. At the end of the first five years, and every five years after that, your coverage will be renewed at your new age-based rate – without any medical questions asked! All you have to do is make sure your payments are up to date.

Premiums for a 31-year-old female non-smoker, like Tara, can be as low as $8.50 per month!

Healthy savings for non-smokers

Non-smokers receive up to 50% savings on their premiums, compared to other applicants.

Guaranteed renewable

Your coverage is guaranteed renewable up to age 75, regardless of any changes to your health or occupation. Even if your health declines, your coverage cannot be cancelled, as long as you pay your premiums.

Plus, you can take advantage of these value-added features

Health Service Navigator included at NO EXTRA COST

With Health Service Navigator, you and your eligible family members can quickly and easily get answers to your questions and access to support services. One simple call to a dedicated toll-free line and you will be connected to a health care professional. You can receive information, medical coordination services and resources on how to navigate the Canadian health care system. And, if you want a second opinion from a world class hospital, Health Service Navigator will help you get it. Best of all: **you don't need to make a claim to use this service!**

Return of Premium Option

If you are between 18 and 55 years of age, you can add the Return of Premium Option to your policy and Manulife will provide a full refund of all premiums paid – up to 100% of your benefit amount, if you've paid that amount in premiums – when you reach your 75th birthday and if no claim has been made. This is only available at the time of initial application.

30-day money-back guarantee

You can write to your advisor or Manulife and request a cancellation at any time. If you request a cancellation within 30 days of receiving your policy, you'll receive a full refund.