

FAMILY ACCIDENT REIMBURSEMENT INSURANCE INSURANCE BENEFITS SUMMARY

This Insurance Benefits Summary is designed to outline the Family Accident Reimbursement Insurance benefits which are available to you and your dependents under the Group Policy endorsed by a participating school board and issued by Industrial Alliance Insurance and Financial Services Inc. ("I

“Covered Conditions” with respect to an Insured Dependent Child only are Cerebral Palsy, Congenital Heart Disease, Cystic Fibrosis, Down Syndrome, Muscular Dystrophy and Type 1 Diabetes.

“Cystic Fibrosis” means a definitive Diagnosis of Cystic Fibrosis with evidence of chronic lung disease and pancreatic insufficiency.

“Date of Diagnosis” means the date on which a Specialist diagnoses the Insured Person with one of the Covered Conditions.

“Dependent Child” means any natural child, step-child or legally adopted child of a Participant who is over 14 days of age and under 21 years of age, unmarried and receives full parental support and maintenance; or 21 years of age or over but under 25 years of age, unmarried and receives full parental support and maintenance for reason of full-time attendance at a School for Higher Learning. Notwithstanding the foregoing, this definition will also include a child of the Participant’s Spouse who is in the care, custody and control of the Participant and living in a parent-child relationship.

“Diagnosis” means the certified diagnosis of the Insured Person with a Covered Condition by a Specialist.

“Down Syndrome” means a definitive Diagnosis of Down Syndrome supported by chromosomal evidence of Trisomy 21.

“Heart Attack” means 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
- 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.

Exclusions: No benefit will be payable under this condition for:

- *elevated biochemical cardiac markers as a result of an intra-arterial cardiac procedure including, but not limited to, 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.*

“Injury” means bodily injury caused by an Accident occurring while the Family Accident Reimbursement Insurance is in force as to the Insured Person whose injury is the basis of a claim and resulting directly and independently of all other causes in a loss covered by the policy, and that is not caused or contributed to, directly or indirectly, by physical or mental illness or disease or treatment for the illness or disease.

“Insured Dependent Child” means an Insured Person who is a Dependent Child.

“Insured Participant” means an Insured Person who is a Participant.

“Insured Person” means a person who is insured under the policy.

“Insured Spouse” means an Insured Person who is a Spouse.

“Muscular Dystrophy” means a definitive Diagnosis of Muscular Dystrophy, characterized by well defined neurological abnormalities, confirmed by electromyography and muscle biopsy.

“School for Higher Learning” means any university, college, CEGEP (Collège D’Enseignement Général et Professionnel) or trade school.

“Participant” means the parent or legal guardian of a Dependent Child who is attending a school within a participating school board at the time of application.

“Qualified Teacher” means a tutor who has a valid teaching certificate or written letter from the school confirming the credentials of the tutor and that the tutor is recognized by the school board as a qualified tutor.

“Specialist” means a licensed medical practitioner who

- has been trained in the specific area of medicine relevant to the Covered Condition for which a benefit is being claimed;
- has been certified by a specialty examining board; and
- Is currently practicing in their area of specialty in Canada or the United States of America

Specialist includes but is not limited to: cardiologist, neurologist, nephrologist, oncologist, ophthalmologist, burn specialist and internist. The Specialist must not be the Insured Person, a relative or business associate of the Insured Person.

In the absence or unavailability of a Specialist, and as approved by the Company, a Covered Condition may be diagnosed by a qualified medical practitioner practicing in Canada or the United States of America.

“Spouse” means the legal or common-law spouse of a Participant. Legal spouse is a person who is legally married to and cohabiting with the Participant and with whom there is no formal or informal agreement of separation. Common-law spouse is a *perré*

Policy Exclusions and Limitations – Applicable to all benefits

- a) The policy does not cover:
 - i) sickness or disease either as a cause or effect except as otherwise provided under the Critical Illness Benefit;
 - ii) suicide or attempt thereat;
 - iii) Injury for which compensation is payable under any Workers' Compensation Act, except in the case of Accidental Death, and Dismemberment or Total and Permanent Loss of Use benefits;
 - iv) the expense of a brace or similar device used for non-therapeutic purposes or solely for the purpose of participating in sports or other leisure activities;
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GENERAL PROVISIONS

PAYMENT OF BENEFITS

Accidental Death Benefit: You may designate a beneficiary of your choice. If you do not have a beneficiary, the benefit will be paid to your estate. You are the beneficiary for your Spouse's and Dependent Child's insurance under this benefit.

Critical Illness Benefit: Benefits for you or your Insured Spouse will be paid to you or your Insured Spouse, respectively. Benefits for your Dependent Child will be paid to you.

All other benefits: Benefits for you or your Insured Spouse will be paid to, or at the direction of, you or your Insured Spouse, respectively. Benefits for your Dependent Child will be paid to you or at your direction.

TERMINATION OF INSURANCE

An Insured Person's insurance will terminate automatically on the earliest of the following dates:

- a) the termination date of the Group Policy;
 - b) the August 31st coincident with or next following a Participant's 65th birthday, unless the Insured Spouse and Insured Dependent Children are eligible to continue coverage in accordance with the Special Continuation provision;
 - c) the date of death of the Insured Participant, unless the Insured Spouse and Insured Dependent Children are eligible to continue coverage in accordance with the Special Continuation provision;
 - d) the due date of any unpaid premiums;
 - e) the end of the month coincident with or next following the date that the Company receives written notice from you requesting cancellation of all or part of the insurance;
 - f) with respect to a Spouse's insurance, the earliest of the above or the August 31st coincident with or following an insured Spouse's 65th birthday, or the end of the month coincident with or next following
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