A serious illness can take anyone by surprise. Medical advances mean the journey to recovery is often successful, but it can still be stressful and expensive. You can plan ahead to prepare for these unexpected illnesses. Added financial security can help give you the freedom to focus on what’s most important – your recovery.

Sun Critical Illness Insurance (Sun CII) provides a lump sum benefit to help you respond to the financial impacts of being diagnosed with, and surviving, one of the defined covered illnesses. The benefit is yours to spend any way you choose.

This brochure gives you a summary of:
- covered illnesses for adults and children (page 3),
- your options for coverage and plan types (page 4),
- optional benefits you can add to your plan (page 5), and
- definitions of some key terms (page 8).

**BEST DOCTORS® SERVICES – A DAY 1 BENEFIT**

Sun Critical Illness Insurance automatically includes access to Best Doctors services – an international physician network that can help you understand your medical condition and treatment options. When facing the uncertainty of a medical condition, Best Doctors provides a range of services to help you get the right information, the right diagnosis and the right treatment.

Once insured, you, your spouse, dependent children, parents and parents-in-law can use the services for any type or degree of uncertainty. You can also extend a one time gift of services to your grandparent or sibling.

*Best Doctors is a service we currently make available to you, but it’s not part of the policy and may be altered or withdrawn at any time, without any notice.*

This brochure does not form part of your policy. If there are any inconsistencies between the content of this brochure and your policy, the terms of your policy will apply.
Covered illnesses

26 full payout illnesses

We'll pay 100% of your coverage amount if you're diagnosed with one of the following illnesses or conditions and survive the amount of time specified in your policy. When a benefit for a full payout illness is paid, the policy ends.

- Acquired brain injury
- Aortic surgery
- Aplastic anemia
- Bacterial meningitis
- Benign brain tumour
- Blindness
- Cancer
- Coma
- Coronary artery bypass surgery
- Deafness
- Dementia, including Alzheimer’s disease
- Heart attack
- Heart valve replacement or repair
- Kidney failure
- Loss of independent existence*
- Loss of limbs
- Loss of speech
- Major organ failure on waiting list
- Major organ transplant
- Motor neuron disease
- Multiple sclerosis
- Occupational HIV infection
- Paralysis
- Parkinson’s disease and specified atypical parkinsonian disorders
- Severe burns
- Stroke

8 partial payout illnesses

We'll pay 15% of your coverage amount, up to a maximum of $50,000, if you're diagnosed with one of the following illnesses. You can claim once per illness, to a maximum of 4 partial payments.

- Cancer – chronic lymphocytic leukemia (CLL) Rai stage 0
- Cancer – ductal carcinoma in situ of the breast
- Cancer – gastrointestinal stromal tumours classified as AJCC Stage 1
- Cancer – grade 1 neuroendocrine tumours (carcinoid)
- Cancer – papillary or follicular thyroid cancer stage T1
- Cancer – stage 1A malignant melanoma
- Cancer – stage A (T1a or T1b) prostate cancer
- Coronary angioplasty

These illnesses are still serious, but they generally have a better prognosis and treatment options. Once a payment for a partial payout critical illness is made, you can’t make another claim for the same illness. Your coverage will continue for all full benefit payout illnesses and partial payout illnesses for which a payment has not been made. Your coverage amount will not be reduced by any partial payments that have already been made.

5 additional illnesses covered by your child’s policy

Children are also covered for five childhood illnesses until the insured child's 24th birthday.

- Cerebral palsy
- Congenital heart disease
- Cystic fibrosis
- Muscular dystrophy
- Type 1 diabetes mellitus

We'll pay 100% of the coverage amount if your child is diagnosed with one of the childhood illnesses and survives the amount of time specified in the policy. When a benefit for a childhood illness or condition is paid, the policy ends.

* If your child is diagnosed with loss of independent existence before the policy anniversary nearest their 18th birthday, you can submit the claim any time between the policy anniversaries nearest their 18th and 19th birthdays.

Refer to the GUIDE TO CRITICAL ILLNESS DEFINITIONS for a detailed description of covered illnesses, survival periods and exclusions.
Coverage options

<table>
<thead>
<tr>
<th>ADULT PLANS</th>
<th>CHILD PLANS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Available between ages 18 to 65</td>
<td>Available between ages 30 days to 17 years</td>
</tr>
<tr>
<td>Offers coverage amounts from $25,000 to $2,500,000</td>
<td>Offers coverage amounts from $25,000 to $1,000,000</td>
</tr>
</tbody>
</table>

Choosing your plan

You can choose plans that last for a specific term, or a plan that provides coverage for life. You’ll be covered for the duration of your plan, unless you receive a full benefit payout, the policy is cancelled, or death occurs.

Sun CII plans are some of the most flexible on the market. You have the option to:

- convert short-term coverage to long-term or lifetime coverage, without needing to provide new medical evidence.
- select a limited pay plan, which allows you to accelerate your premiums to pay them off faster.
- add optional benefits that are suited to your needs.

**10-YEAR TERM POLICY (T10)**

Provides coverage to the policy anniversary nearest your 75th birthday.

Coverage automatically renews at the end of each 10-year term, without having to re-qualify. A new premium amount will be charged each term. We guarantee these premiums at the time of purchase.

Can be converted to a T75 or T100 plan without providing new medical evidence, up to the policy anniversary date nearest your 65th birthday.

**TOAGE 75 POLICY (T75)**

Provides coverage to the policy anniversary nearest your 75th birthday.

There are two payment options:

- pay to age nearest 75
- pay for 15 years

Premiums don’t change.

**LIFETIME POLICY (T100)**

Provides coverage for life.

There are three payment options:

- pay to age nearest 100 with no further premiums due
- pay for 10 years
- pay for 15 years

Premiums don’t change.
Optional benefits

Based on your age, you may be able to add one or more of these optional benefits. You and your advisor can customize a plan to meet your unique needs.

Return of premium (ROP)

ROP ON DEATH
If you die while your policy is still in effect, and you’ve never claimed a full payout covered illness, the returnable premium amount is sent to your beneficiary.

RETURN OF PREMIUM ON CANCELLATION OR EXPIRY (ROPC/E)
If you haven’t claimed for a full payout covered illness, and your policy has been in force for a defined length of time (defined by the ROPC/E option selected), you can cancel your policy to receive the returnable premium amount.

The ROPC/E option you can select depends on your age and the payment period selected.

The returnable premium amount is the total of all premiums paid for the policy minus any premiums paid for the long-term care conversion option, if included in the policy.

The returnable premium amount is reduced by any unpaid premiums plus interest.

The returnable premium amount for child policies is further reduced by any advanced return of premium amount we have paid.

The returnable premium amount isn’t reduced by any payments we make for partial payout illnesses.

Return of premium on cancellation or expiry (ROPC/E) options:

<table>
<thead>
<tr>
<th>ADULT PLANS</th>
<th>CHILD PLANS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Return of premium on cancellation or expiry (ROPC/E) – 15 years: You can receive the returnable premium amount if you cancel your policy once the policy has been in force for 15 years. (Not available on T10 plans)</td>
<td>Return of premium on cancellation or expiry (ROPC/E) – 15 years: You can receive the returnable premium amount if you cancel your policy once the policy has been in force for 15 years. (Not available on T10 plans)</td>
</tr>
<tr>
<td>Return of premium on cancellation or expiry (ROPC/E) – age 65: You can receive the returnable premium amount if you cancel your policy on or after the policy anniversary nearest your 65th birthday. (Not available on plans with the Pay for 10 years or Pay for 15 years payment option)</td>
<td>Return of premium on cancellation or expiry (ROPC/E) – age 65: You can receive the returnable premium amount if you cancel your policy on or after the policy anniversary nearest your 65th birthday. (Not available on plans with the Pay for 10 years or Pay for 15 years payment option)</td>
</tr>
<tr>
<td>Return of premium on cancellation or expiry (ROPC/E) – age 75: You can receive the returnable premium amount if you cancel your policy on or after the policy anniversary nearest your 75th birthday. (Not available on plans with the Pay for 10 years or Pay for 15 years payment option)</td>
<td>Return of premium on cancellation or expiry (ROPC/E) – age 75: You can receive the returnable premium amount if you cancel your policy on or after the policy anniversary nearest your 75th birthday. (Not available on plans with the Pay for 10 years or Pay for 15 years payment option)</td>
</tr>
</tbody>
</table>

LIFETIME PAY PLANS (PAY TO AGE 75 OR PAY TO AGE 100)
Advanced return of premium on cancellation or expiry (ROPC/E): You’ll automatically receive 75% of the returnable premium amount on the 15th policy anniversary or the policy anniversary nearest your child’s 25th birthday, whichever is later. Your policy does not end when this payment is made.

You can receive the remaining returnable premium amount if you cancel your policy on or after the 30th policy anniversary, or the policy anniversary nearest the child’s 40th birthday, whichever is later.

LIMITED PAY PLANS (PAY FOR 10 YEARS OR PAY FOR 15 YEARS)
Return of premium on cancellation or expiry (ROPC/E) – age 35: You can receive the returnable premium amount if you cancel your policy on or after the policy anniversary nearest your child’s 35th birthday.
Long-term care conversion option

Adding this optional benefit means you can convert some or all of your critical illness coverage to long-term care insurance (LTCI). You won’t need to provide new medical evidence.

- You can apply for conversion between the policy anniversary nearest your 60th and 65th birthdays.
- Your weekly LTCI benefit = your CII benefit ÷ 200, to a maximum of $1,250 per week.
- We guarantee you’ll be able to choose an LTCI policy with an unlimited benefit period.
- The premium for your new LTCI policy will depend on your age and our rates at the time of conversion.
- This option may also be added to a child policy, between the policy anniversary nearest their 18th and 19th birthdays.

Total disability waiver

If the insured person is disabled for 6 months or more and under the age of 60, we’ll waive the premium payments and coverage will continue.

Owner waiver

We’ll waive your premiums if the policy owner dies or becomes disabled.

There are 3 owner waiver options to choose from:

- Owner waiver – death
- Owner waiver – disability
- Owner waiver – death and disability

Note: Available when the policy owner is different from the insured person.
Key terms

**AGE**
Age means a person’s age on their birthday nearest to a particular date. This is known as ‘age nearest’. For example, a person’s age at the policy date means their age on their birthday nearest to the policy date.

So, if the insured person’s actual age is 34 and 7 months, the “insurance age” will be 35. When we say a benefit ends at 65, it means the policy anniversary nearest their 65th birthday.

**ANNUAL VERSUS MONTHLY PREMIUM**
You can choose to pay your premiums annually by cheque, or monthly by pre-authorized chequing. If you pay monthly, premiums are slightly higher to help cover the additional costs for processing monthly transactions. To calculate monthly premiums, we multiply the total annual premium by .09. For example, if the annual premium is $1,500, the monthly premium is $1,500 x .09, which equals $135.

**CHANGE IN INSURABILITY**
We may need you to provide us with evidence of any change in your health or insurability that takes place between the time you apply for insurance and the time your policy is delivered.

**COVERED ILLNESSES**
Your policy defines the covered illnesses in detail, and the necessary survival period after diagnosis.

**GUARANTEED BENEFIT**
Your insurance benefit is guaranteed as long as you pay the required premium.

**GUARANTEED PREMIUMS**
Your premiums will stay the same for the duration of your policy.

**LONG-TERM CARE INSURANCE (LTCI)**
LTCI is designed to cover the cost of care over a lengthy period. It provides a benefit while the insured person is unable to care for themselves without someone else’s help. For example, you may not be able to perform routine activities like bathing or dressing. Or, you may experience a decline in mental ability, meaning you require constant supervision.

**POLICY ANNIVERSARY**
Your policy anniversary falls each year on the date your policy came into effect.

**PREMIUMS**
The payments you make in exchange for your insurance policy.

**TAX AND THE CRITICAL ILLNESS INSURANCE BENEFIT**
There are no specific income tax laws for critical illness insurance. Based on current tax laws, we believe that the health benefit from critical illness insurance will not be taxed. We also believe that the return of premium benefit will not be taxed if it does not exceed the total premiums paid. Premiums paid for critical illness insurance are not deductible. If the policy is owned by a corporation, different tax laws may apply. To learn how critical illness insurance benefits may be taxed in your situation, speak to your advisor or a tax professional.

**TEMPORARY OR INTERIM INSURANCE**
When you pay the first month’s premium with your application, you may be eligible for up to $500,000 of temporary critical illness coverage. This can provide you with critical illness protection while we’re considering your application.

The terms, conditions and exclusions of that temporary insurance are set out in a certificate of interim or temporary insurance. The certificate also states when and under what conditions coverage under the certificate will end. If you don’t pay at the time you apply and are not covered under a certificate of interim or temporary insurance, then your coverage won’t be effective until:

- > your policy is delivered,
- > you make your first payment, and
- > (when required) you have given us sufficient evidence that there’s been no change in your insurability between the time you applied for insurance and the time your policy is delivered.

**YOU AND WE**
In this document, you and your mean the owner of this policy and the insured person, unless specified otherwise. We, us, our, and the company mean Sun Life Assurance Company of Canada.