Simplified issue cancer insurance that helps ease the financial burden
If you are diagnosed with cancer, the last thing you want to think about is your finances.
Cancer statistics are everywhere. You hear them everyday and it can be overwhelming. But that doesn’t mean you should ignore the facts – particularly the facts about how much a diagnosis of cancer can cost you and your family.

The cost of a cancer diagnosis

There are real costs associated with a cancer diagnosis that many people don’t consider. You may have thought about lost wages, but there are other facts that must also be considered:

$17,729 The average amount of lost wages if you are diagnosed with cancer and have to miss work due to the illness or treatments.\(^1\)

25% The percentage of lost income for caregivers who are taking time off work to be with a loved one who has been diagnosed with cancer.

44%, 27% and 26% According to a recent study, 44% of patients cope with financial hardship by tapping into their savings and investments, 27% take on debt and 26% return to work before being ready. \(^2\)

$65K is the price of an average course of treatment for the latest drugs.\(^3\) Even if you have private supplemental health insurance coverage, you may require to pay 20% of the cost or you may have an annual or lifetime maximum that can be quickly reached. If you have to pay 20%, that will be $13,000 out of your pocket.

23 weeks is the average gap without federal Employment Insurance program for the average treatment period for many cancers.\(^2\) The EI benefit – 55% of your salary, up to a maximum of $537 per week as of 2016 – is only paid for 15 weeks.

\(^1\) “Estimating the National Wage Loss from Cancer in Canada.” Current Oncology 17(2): 40-49
What are the odds?

There is a very good chance that you or someone you love will be affected by cancer in your lifetime. **In fact, 2 in 5 Canadians will develop cancer in their lifetime.** If you are diagnosed with cancer, the last thing you want to think about is your finances. But that doesn’t mean financial issues aren’t going to quickly become a concern. Let’s look at how cancer affected the financial security of some very real families.

The real cost of having cancer

**THIS IS LYNNE’S STORY**

**Cancer can radically change your retirement plans – but it doesn’t have to**

Lynne was diagnosed with stage-four colon cancer in 2006. A single mom with a teenage daughter, she was forced to quit a well-paying job when her aggressive chemotherapy regimen left her unable to work. Soon, she found herself struggling to make car and mortgage payments as well as managing day-to-day living expenses.

With no income and no health benefits, she had no option but to go on welfare and liquidate all investments, including RRSPs. After six months of chemo and multiple surgeries, Lynne was declared cancer-free in 2006.

Unfortunately, as a side effect of the chemo, she has joint pain and severe short-term memory loss and can no longer work. Though she wants to stay in her community, Lynne, now 67, is selling her home to finance her retirement as she has no savings left to live on. She wishes she had purchased cancer insurance when it was offered by her former employer.

**Could CancerGuard have helped Lynne?**

If Lynne had purchased CancerGuard at age 49, she could have paid $47.90 a month for a 10 year (T10) contract with $75,000 in coverage. And today, she probably wouldn’t have to worry about losing her house.

**Note:** If you are interested in reading more testimonials like this one, ask your advisor to share them with you.
THIS IS JENN’S STORY

Count on yourself, not your employment benefits, when an illness strikes

Jenn was diagnosed with breast cancer in her early 40s and had to leave her job. She began chemotherapy and collected Employment Insurance for 15 weeks before it ended.

Still unable to work, provincial welfare was her only option, but her debts kept growing until she finally filed for bankruptcy.

Now Jenn is working in a low-paying job and any savings are gone. She learned the hard way that not all jobs come with sickness benefits.

Today Jenn wonders whether she would have had chemotherapy if she had known about the financial strain that lay ahead. And she wonders how she could have made her situation better.\(^{(1)}\)

How could CancerGuard have helped Jenn?

With CancerGuard, Jenn’s life would have been much easier and certainly less stressful. If she had purchased CancerGuard at age 38, she could have paid $21.30 a month for a 20 year (T20) policy with $50,000 in coverage.

In a perfect world

Had Lynne and Jenn not been diagnosed with cancer, they could each have received 50% of their premiums back at age 75 by choosing to include the return of premium option with their CancerGuard contract.

If your child becomes diagnosed with cancer tomorrow, are you going back to work the next day?

Real expenses of a caregiver parent taking care of their child

When a Manitoba family was given the news that their daughter had Hodgin’s lymphoma, their costs started to add up quickly! They found themselves traveling with their daughter over a six month period to Winnipeg and Brandon for ongoing tests, surgery and chemotherapy. Not helping their daughter was never an option. But they had not planned on these out-of-pocket expenses.

One rural family’s travel costs\(^{(1)}\)

<table>
<thead>
<tr>
<th>Description</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Transportation</td>
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<tr>
<td>Parking</td>
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<tr>
<td>Accommodation</td>
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<td>Food</td>
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<tr>
<td>Incidentals</td>
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<tr>
<td>Lost wages</td>
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<tr>
<td><strong>TOTAL</strong></td>
<td><strong>$24,706.54</strong></td>
</tr>
</tbody>
</table>

\(^{(1)}\) Five-Year Action Plan to Address the Financial Hardship of cancer in Canada: A Call for Action, Canadian Cancer Action Network and Canadian Cancer Society, Manitoba Division, 2013.

\(^{(2)}\) Not an option if the sick person is over 16.
CancerGuard offers many advantages:

— No medical exams, no blood tests and no lengthy questionnaire
— Benefit payable upon cancer diagnosis
— Payment to be used any way you prefer
— Guaranteed renewable contract up to age 75
— Eligibility from birth to age 65
— Optional coverage: Prevention, Critical illness and Return of premiums available
— Available plans: Terms 10, 20 and 75

Fast and easy eligibility questionnaire:

— 2 questions for up to $50,000 of coverage.
— 2 additional questions to up your coverage to $100,000.
— 1 additional question to reach $150,000 of coverage.

Who needs CancerGuard?
You, of course, but have you also considered your children? Protecting children, or grandchildren, with CancerGuard can be one of the best gifts you give them – and it’s more affordable than you might think.

THIS IS ROBERT’S STORY
He purchased CancerGuard for his grandchildren so that one day they might say, « Grandpa took good care of us. »

Robert bought CancerGuard insurance for his three grandchildren aged 5, 6 and 7. He knew that the lump sum payment they would receive if a child was ever diagnosed with cancer could help get the best medical care and treatments, and spare his son or daughter from financial hardship. CancerGuard can also help cover lost wages of a parent who stays at home with a sick child.

When Robert bought his grandchildren insurance, he discovered that premiums were very affordable for young children. By purchasing long-term protection for his grandchildren, Robert chose life and health for his loved ones, over sickness and financial hardship.

CancerGuard for when life doesn’t add up the way you want it to
If you are diagnosed with cancer, you can meet your obligations head on and focus on your recovery without having to worry about the financial consequences of illness.
Three optional coverages to add

1. **Prevention**

Life-threatening cancers are covered under the basic cancer insurance, but other less threatening cancers can be financially damaging as well. The prevention option provides the payment of a partial benefit equal to 50% of the sum insured, up to a maximum of $25,000, for the following conditions:

1. carcinoma in situ of the breast;
2. stage 1A malignant melanoma (melanoma of less than or equal to 1.0 mm in thickness, not ulcerated and without Clark level IV or level V invasion);
3. Stage A (T1a or T1b) prostate cancer.

A single Prevention benefit is payable for the entire life of the contract. The sum insured is then reduced by the amount of the benefit paid.

2. **Critical illness**

For up to $150,000, you can top up your cancer insurance by adding the following illnesses:

1. stroke (cerebrovascular accident)
2. coronary artery bypass surgery
3. heart attack (myocardial infarction)
4. paralysis
5. coma

Juvenile critical illnesses:

1. cerebral palsy
2. congenital heart disease
3. cystic fibrosis
4. muscular dystrophy
5. type 1 diabetes mellitus

In the case of juvenile critical illnesses, the diagnosis must be made prior to the attainment of age 25. Please refer to the contract for details pertaining to limitations and exclusions.

3. **Return of premiums**

For those who are under age 55, the Return of premiums option can be added to a coverage.

This will return 100% of all premiums to the beneficiary if the insured person dies while the contract is in effect, less any claim payments.

If the contract expires at age 75, this option will return up to 50% of all premiums paid, less any claim payments.

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**Definition of cancer**

Means a definite diagnosis of a tumour characterized by the uncontrolled growth and spread of malignant cells and invasion of tissue.

The diagnosis of cancer must be made by a specialist.

No benefit will be payable for the following non-life-threatening cancers:

- carcinoma in situ
- stage 1A malignant melanoma (melanoma less than or equal to 1.0 mm in thickness, not ulcerated and without Clark level IV or V invasion)
- any non-melanoma skin cancer that has not metastasized
- stage A (T1a or T1b) prostate cancer
- all other types of non-invasive cancer

**Moratorium period**

No benefit will be payable for a diagnosis of cancer made within 90 days following the effective date or reinstatement date of the contract. In addition, no benefit will be payable if, within 90 days following the effective date or reinstatement date of the contract, the insured has any signs, symptoms or investigations leading to a diagnosis of cancer (whether covered or excluded under this contract), regardless of when the diagnosis was made.

If the moratorium exclusion period should apply, the contract will be cancelled and the amount of premiums paid will be returned to the policyholder.

**Pre-existing condition (24/24)**

This coverage will not apply and no benefit will be payable if a cancer and/or one of the critical illnesses covered occur within the first 24 months following the effective date or reinstatement date of the coverage and result from a condition for which the insured consulted or experienced symptoms leading to cancer and/or to one of the critical illnesses or took medication or received medical treatment (including any diagnostic test or investigation) during the 24 months preceding the effective date or reinstatement date of coverage.