



Certificate of Insurance

Accidental Death and Dismemberment

Benefits are provided by:

The Manufacturers Life Insurance Company (Manulife)

We administer this certificate and pay benefits to the person named in the *Certificate Schedule*, according to the terms, conditions, and limitations of Group Policy #95001, which we have issued to the

Ontario Medical Association (OMA)

This document contains all details about your insurance and how to use it. Your contract includes this certificate, *Certificate Schedule*, applications for insurance submitted by you, and any schedules, riders, attachments, and amendments and/or endorsements to this certificate executed by us. If there is any conflict between the terms and conditions of this certificate and the group policy, the terms of the group policy will take precedence to the extent permitted by law.

The effective date, also known as the start date, of this certificate appears on your *Certificate Schedule*. Read this certificate carefully to become familiar with the features of the group policy so you can take full advantage of the benefits it offers.

This certificate contains a provision removing or restricting the right of the insured to designate persons to whom or for whose benefit insurance money is to be payable.

Signed for The Manufacturers Life Insurance Company at Toronto by:

Roy Gori,

President and Chief Executive Officer

30-day satisfaction guarantee

The first 30 days from the start date of your insurance is known as the free-look period. If you decide that you don't want your certificate, simply mail it to the address below for cancellation. We will cancel your certificate as of the start date shown on your *Certificate Schedule* and send you a full refund of premiums, minus any claims we've paid. If the claims we paid are more than your premium payments, you must repay the difference. This right of cancellation expires 30 days after the certificate is received by you. The rights of any beneficiary under the certificate are also subject to this right of cancellation.

The Manufacturers Life Insurance Company

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Waterloo, Ontario N2J 0G5

Visit our website:

manulife.ca

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1-888-596-8881

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Before you begin

This certificate indicates that your application for insurance under the group policy has been accepted by us and, as of the start date shown on your *Certificate Schedule*, your insurance is in force under the terms and conditions of the certificate.

To be eligible to submit claims, this certificate must be in good standing, which means the certificate premiums must be paid in full to the current date.

We may update our terms and conditions without notice to reflect corporate policies, economic changes, or legislative changes, including changes to income tax legislation. Any changes we make to the terms and conditions may affect the benefits provided by this certificate. We reserve the right to change premiums or benefits required for this certificate for any reason.

All benefits outlined in this certificate apply to you. This certificate contains information about your insurance coverage, including exclusions, limitations, conditions, deductibles, maximums, and definitions. Please read it carefully and be sure to keep it in a safe place.

Some of the terms used in this certificate have been assigned a specific meaning. It's very important this certificate is read and understood with these specific meanings in mind. Refer to Section 9: **Words and phrases used in this certificate** to familiarize yourself with these terms and their associated meaning whenever consulting this certificate.

1 How your coverage works

Coverage type and amount of insurance

This Accidental Death and Dismemberment plan has two types of coverage available. The details about the amount of insurance for each type is listed below.

Coverage type	Insured persons	Amount of insurance
Member Only	You	Amount of insurance you selected, in increments of \$100,000, with a minimum of \$100,000 and a maximum of \$1,000,000
Family	You and your spouse	You: 100% of the amount of insurance you selected Spouse: 50% of your amount of insurance
	You and your dependent child(ren) – no spouse	You: 100% of the amount of insurance you selected Dependent child: 20% of your amount of insurance, up to a maximum of \$100,000 per child (regardless of the number of children)
	You, your spouse, and dependent child(ren)	You: 100% of the amount of insurance you selected Spouse: 40% of your amount of insurance Dependent child: <ul style="list-style-type: none">• 10% of your amount of insurance, if your spouse is not a member of an eligible association, or• 20% of your amount of insurance, if your spouse is also a member of an eligible association, and

- up to a maximum of \$100,000 per child (regardless of the number of children).
-

If you currently have Family coverage for you and your spouse and in the future have dependent children you want to cover, you must notify us so we can change your coverage to the appropriate Family type.

Eligibility

To be eligible for Member Only coverage, at the time of your initial application you must be:

- a duly qualified member in good standing with an eligible association,
- between ages 18 to 69, inclusive,
- in Canada, actively:
 - practicing medicine as a general practitioner or a specialist, or
 - employed in medical research, medical and health sciences education, administration in connection with the profession of medicine, or the Federal Civil Services or Canadian Armed Forces, or
 - undergoing a period of training as undergraduate medical student, resident, or post-graduate student, or
 - serving as a medical missionary, and
- a Canadian resident who has submitted the application in a province or territory other than Quebec, and not a resident of Quebec at the time the application is submitted after the group policy has come into force.

To be eligible for Family coverage, you must meet the above eligibility requirements and any family members must meet the respective definitions of 'spouse' (eligible between age 18 to 69, inclusive) or 'dependent child' in Section 9. If you obtained your coverage on or after September 1, 2023, and both you and your spouse are members in good standing with one of the eligible associations, you may each be covered under Member only coverage, or one of you must be covered for Member Only coverage and the other spouse must be covered under the Family coverage (no spouse option).

This certificate indicates that your application for insurance under the group policy has been accepted by us and your insurance is in force under the terms and conditions of the group policy.

If we decide that you are not eligible, we may cancel the entire certificate, or we may modify it. If we decide that anyone else on the certificate is not eligible, we may cancel the coverage of the ineligible individual, or we may modify it. Premiums will be returned for cancelled coverage.

Premiums

The premium, also known as the cost of insurance, is the amount we charge you to maintain this insurance and is shown on your *Certificate Schedule*. The cost of insurance is based on rates agreed to by us and the OMA. The *Certificate Schedule* shows your cost, including any applicable taxes.

The premium rate is subject to change if you change your coverage selection or if the coverage you chose has a rate change on a scheduled renewal date. We'll send you a notice when your premium is scheduled to change. We reserve the right to change premiums required for this certificate. If we do, we'll give you 30 days' written notice.

The first premium payment is due at the time of your initial insurance application and covers you from your start date until your next premium due date. If we do not receive the first premium, or if the first premium is not honoured when first presented for payment, the insurance will not go into effect.

Afterwards, premiums can be paid either monthly on the 1st of each month following your start date, or annually on the group policy anniversary date.

For the first year, premiums are pro-rated based on the number of full months remaining from your start date until the next group policy anniversary date. Your insurance remains active from month to month if the required premiums are paid when due. You may request to change the premium payment frequency.

Grace period

Following payment of your first premium, if you don't pay your subsequent premiums, you have a 31-day grace period to pay the overdue amount to maintain your insurance. Your insurance will remain active during this grace period, subject to the conditions of Section 7. Your insurance ends on the last day of the grace period if we don't receive your full payment. We will refund you any partial payments made during the grace period.

Reinstatement

Your insurance cannot be reinstated once it ends. You must submit a new application for insurance to have coverage once again under this plan.

2 What is covered

We provide you and, if applicable, your spouse and dependent children, insurance against accidental death or accidental injury sustained anywhere in the world.

We pay a benefit when you suffer a total, permanent, and irrecoverable loss, subject to the terms and conditions of this certificate, if the loss or loss of use is directly caused by an accident, independent of any other condition or cause, and occurs within 1 year (365 days) following the accident while this certificate is active.

The table below shows the losses covered, the percentage of the amount of insurance we will pay for each loss, and a definition of each loss.

Loss, or loss of use of	Percentage of amount of insurance
Paralysis (quadriplegia, paraplegia, or hemiplegia)	200%
Life (death)	100%
One or both hands, arms, legs, or feet	100%
Entire sight of both eyes	100%
Hearing in both ears	100%
Speech	100%
Entire sight of one eye	66%
Loss of thumb or index finger or both of either hand	50%
Four fingers of the same hand	50%
Hearing in one ear	33%
All toes on one foot	25%

Loss means severance at or above the elbow or knee joint with respect to an arm or leg, severance at or above the wrist or ankle joint with respect to a hand or foot, severance at or above the first phalange with respect to a thumb, finger or toe, the total and irreversible loss of speech or hearing as certified by a physician, and the total and irreversible loss of the entire sight with respect to an eye.

Loss of use with reference to a hand, arm, leg, foot, thumb, fingers, or toes means the total and irrecoverable loss of use as certified by a physician.

Loss of use must be certified by a physician and evidenced by a visible contusion or wound on the exterior of the body except in the case of loss of life due to drowning or due to internal injuries revealed by autopsy. We may require you to be examined by physicians of our choice.

Loss of speech or hearing, loss of use of a hand, arm, leg, foot, thumb, fingers or toes, quadriplegia, paraplegia, or hemiplegia must exist for a continuous period of not less than 12 months before the benefit is payable.

Quadriplegia means the complete and irreversible paralysis of both upper and lower limbs as certified by a physician.

Paraplegia means the complete and irreversible paralysis of both lower limbs, as certified by a physician.

Hemiplegia means the complete and irreversible paralysis of one side of the body including upper and lower limbs, as certified by a physician.

No more than 100% of the amount of insurance will be paid for all losses due to any one accident, except in the case of paralysis. Only one percentage amount, the largest percentage amount, will be paid for multiple injuries to the same limb due to any one accident.

3 Additional benefits

Common disaster

If you have selected Family coverage where both you and spouse are insured, and if you and your spouse die within 365 days as a result of a common accident, the amount payable will be increased for your spouse up to your amount of insurance, to a maximum \$500,000, subject to the terms and conditions of this certificate.

Exposure

It will be considered an accidental injury or death in cases of unavoidable exposure to the elements if this exposure results in injury or death within 365 days following the accident, provided the coverage is active at the time of the accident and subject to the terms and conditions of this certificate.

Disappearance

If there is no evidence to the contrary, it will be considered an accidental death in cases of accidental disappearance, forced landing, stranding, sinking or wrecking of a conveyance if your body, or eligible family member's body, is not found within 365 days of such accident, provided the coverage is active at the time of the accident and subject to the terms and conditions of this certificate.

Repatriation

If you, or an eligible family member, suffers accidental death in a country other than the country of residence, for which the accidental death benefit becomes payable, a repatriation benefit of up to \$15,000 is payable, subject to the terms and conditions of this certificate. This benefit is only payable with proof of the reasonable and necessary expenses actually incurred in preparing the deceased for burial or cremation and shipment of the body or ashes to the city of residence of the deceased. The city of residence can be anywhere in the world. This benefit is payable to the same recipient who received the death benefit.

Education

This benefit is only available if you have selected Family coverage. In the event of your death for which the accidental death benefit becomes payable, we will pay an education benefit to each eligible dependent child, subject to the terms and conditions of this certificate.

At the time of loss, a dependent child will be eligible for the education benefit if:

- enrolled as a full-time student in an institution of higher learning beyond the secondary school level; or
- at the secondary school level and subsequently enrolls as a full-time student in an institution of higher learning within 365 days following the date of your death.

This will be payable for a maximum of up to 4 consecutive annual payments of \$5,000 for any one dependent child, provided the eligible dependent child continues education as described above. This benefit will be paid directly to the eligible dependent child.

If you have selected Family coverage but have no dependent child eligible for the education benefit at the time of your death, we will pay a lump-sum amount of \$1,000 to your designated beneficiary, and if no designated beneficiary, to your estate.

Spousal training

In the event of your death for which the accidental death benefit becomes payable, and subject to the terms and conditions of this certificate, we will pay the reasonable and necessary expenses actually incurred by your spouse to participate in a formal occupational training program to qualify for active employment in an occupation your spouse otherwise would not be suitably qualified for. Proof of such expenses is required for this benefit to become payable.

This benefit must be used within 5 years from the date of your accident and will be paid up to a maximum of \$15,000. This benefit will be paid directly to your spouse.

There will be no payment made for room, board, or other ordinary living, travelling, or clothing expenses.

Rehabilitation

Subject to the terms and conditions of this certificate, when you or your spouse suffer a loss for which a benefit becomes payable, other than loss of life, a rehabilitation benefit of up to \$10,000 will also be payable, provided rehabilitation is pre-approved by us based on the likelihood of successful rehabilitation and that the expenses are incurred within 2 years after the date of the accident while the claimant continues to be covered under the certificate.

Payment is made only for expenses actually incurred that are not reimbursed from other sources. Proof of such expenses is required for this benefit to become payable.

Payment is not made for ordinary living expenses such as room, board, traveling, or clothing.

Waiver of premiums

If, before reaching age 65, you become and remain totally disabled due to sickness or injury for a continuous period of at least 270 days (known as the waiting period), you will not need to pay the premiums after the waiting period for this certificate. Once the waiver of premium benefit has begun, we will refund you the premiums you paid during the waiting period. You must provide us proof of this total disability within 12 months, and you must continue to provide proof of your total disability as often as requested by us.

The waiver of premium benefit will end on the earliest of the date you no longer are totally disabled, the last day of the policy year in which you turn age 70, your certificate ends in accordance with the conditions in Section 7, your death, or the date you fail to provide proof of total disability.

Air travel

Subject to the terms and conditions of this certificate, a benefit will be payable for accidental bodily injuries sustained as a passenger for the sole purpose of transportation or as an attending physician in an air ambulance, and not as a pilot or crew member, while boarding or alighting from, being struck by, or making a forced landing with or from any transport-type aircraft:

- having a current and valid airworthiness certificate and being operated by a person holding a valid pilot's licence with the appropriate rating to operate such aircraft; or
- operated by the Canadian Armed Forces or by the similar air transport service of any duly constituted governmental authority of the recognized government of any nation anywhere in the world, provided the aircraft is not being used for test or experimental purposes.

Aggregate limit of indemnity for air travel accident

There is an aggregate limit of indemnity of \$10,000,000 (ten million dollars) for all losses resulting from any one air travel accident. This means that in the event of an air travel accident that results in an accumulation of losses which collectively exceeds \$10,000,000 (ten million dollars), if this amount is insufficient to cover fully the aggregate total of benefits otherwise payable for all persons under the group policy, a pro-rata share of \$10,000,000 (ten million dollars) will be paid for each person based on the ratio which the individual benefit would have been to the said aggregate total of benefits.

Optional pilot and crew member coverage

This optional coverage, available to you only, will not apply to your spouse or dependent child. If you have purchased this optional coverage, it will be shown on your *Certificate Schedule*.

This optional coverage provides protection against losses resulting from accidental bodily injuries not covered under your standard Member Only or Family coverage, while you are travelling in the status of a pilot or crew member. You must be travelling as a pilot or crew member in a civil aircraft which has a current and valid Department of Transport Canada airworthiness certificate, or its foreign equivalent, of other than a limited, restricted or restricted as experimental classification, and which is operated by a person holding a valid pilot's licence with the appropriate rating to operate such aircraft. If you are flying in the status of a pilot, you must be operating such aircraft solely for transportation and not for hire of any description or for crop dusting, crop spraying, seeding, skywriting, racing, testing, exploration, or any other purpose except transportation.

To be eligible for this optional coverage, you must:

- meet the eligibility requirements for Member Only coverage described in Section 1,
- be duly licensed and rated with a minimum of 75 hours of flying time as an airplane pilot prior to the application date, and
- hold a current and valid Department of Transport Canada License (other than a student's licence), or its foreign equivalent, with the appropriate rating to operate an aircraft.

The amount of insurance you may select for this option is a minimum of \$100,000 up to a maximum of \$300,000. Upon our written approval of your individual application, your current insurance may be expanded to include this optional coverage from the date the completed application requesting this option is received.

You may cancel this optional coverage at any time.

4 Continuation of coverage

Provided you remain a member in good standing with an eligible association, and your premiums continue to be paid, you may continue your coverage if you are on:

- any approved leave of absence,
- temporary lay-off,
- disability, or
- maternity or parental leave.

Portability

You may continue coverage at the same or reduced amount of insurance if you are residing outside of Canada, provided you maintain your membership in an eligible association and premiums continue to be paid. You will not be able to increase your coverage until you again reside in Canada.

Conversion of coverage

Should the group policy be terminated for any reason, and not be replaced by a new insurance company, you may convert your coverage to one of our individual accidental death and dismemberment insurance plans within 31 days of the termination of the group policy, with no evidence of insurability required. Conversion of coverage for your spouse or your dependent children is not available. You must be a Canadian resident to be eligible for this conversion option.

The converted coverage will be subject to certain limitations:

- must be a plan that is available by us on the conversion date;
- must meet our minimum and maximum issue requirements;
- any restrictions on benefits or exclusions in your existing coverage applies to the converted plan; and
- the amount that may be converted will not exceed the amount of insurance on your original insurance or your total overall maximum on all accidental death and dismemberment policies by us of \$100,000.

5 How benefits are paid

Claims

Written notice of claim must be provided to us as soon as reasonably possible after the occurrence of any loss. We will provide you with the appropriate forms within 15 days upon receipt of written notice of claim. Proof of loss must be submitted to us within 180 days of the date of death or loss, or as soon as reasonably possible, but in no event will the time for filing the proof of loss be extended beyond 1 year after the date the notice of claim was submitted.

We have the right to investigate the circumstances of a death and to require an autopsy unless prohibited by law. We will notify you in writing whether a claim is payable within 30 days following receipt of proof of loss.

To whom are benefits paid

We will pay you the amount provided for such loss as outlined in Section 2, except in the case of the spousal training benefit, education benefit, and your death for which payment will be made to your beneficiary, if any, or to your estate.

If, immediately prior to this certificate coming into force on September 1, 2023, you were insured under the group policy of the OMA which this group policy replaces, the beneficiary last designated under such policy shall be the beneficiary of any death benefit payable under this certificate. You can change your beneficiary at any time by providing us with written notice of change of beneficiary, unless your previous designation was irrevocable in which case the designation of such irrevocable beneficiary may only be changed with the consent of such beneficiary.

Any benefit for a loss suffered by your spouse or dependent child which becomes payable after your death will be paid as follows:

- A benefit for any loss, except loss of life, will be paid to your spouse if living, otherwise to your spouse's estate. If you had no spouse on the date of your death, benefits will be paid equitably to each surviving dependent child.
- Dependent child accidental death benefits will be paid to your spouse if living, otherwise to the estate of your late dependent child.
- Spouse accidental death benefits will be paid to the estate of your spouse.

6 What is not covered

We will not pay benefits if injury or death results directly or indirectly from any of the following:

- **Self-inflicted injury** – suicide, attempted suicide, or intentionally self-inflicted injury, unless medical evidence establishes that the injuries are related to a mental health illness;
- **Intoxication** – operating a vehicle while your blood alcohol level is more than 80 milligrams of alcohol per 100 milliliters of blood. A vehicle includes any form of ground, air, or marine transportation that can be put into motion by any means, including muscular power. We do not take into account whether or not the vehicle is in motion;
- **Drugs** – the use of any medication, narcotics, toxic substances, or drugs of any nature, unless administered by or taken as prescribed or as recommended by an authorized health care professional or licensed physician;
- **Poison** – any voluntary gas inhalation or poison voluntarily taken, administered, or inhaled;
- **Criminal offence or imprisonment** – attempt, provocation, or commission of a criminal offense or assault, or participation in a riot or civil commotion; or any period of incarceration or confinement in a similar institution, unless medical evidence establishes that the injuries or losses are related to a mental health illness;
- **Infection** – contracting an infection, unless the infection was directly caused by an external visible wound received in an accident;
- **Disease** – an injury caused or contributed to by disease, bodily or mental infirmity, or related medical or surgical treatment of such disease;
- **Terrorism, war, or insurrection** – declared or undeclared war, or any act of war, riot or insurrection or terror; or military service in the armed forces of any country at war, or any conduct, act or thing incidental thereto;
- **Pilot and Crew Member** – riding as a passenger in, alighting from, or boarding an aircraft while operating, learning to operate, or serving as a member of a crew of an aircraft or while crop dusting, crop spraying, seeding, skywriting, racing, testing, exploration, or any other purpose except transportation. However, if you have purchased the optional pilot and crew member coverage, the optional coverage amount selected under the pilot and crew optional coverage is not subject to this exclusion.

7 When your coverage ends

Your insurance will end on the earliest of the following:

- the date the group policy terminates, unless you are exercising the waiver of premium benefit;
- the date any premium due has not been paid, subject to the grace period;
- the last day prior to the group policy anniversary date that is on or immediately following your 70th birthday;
- the last day of the period for which premiums have been paid, which is on or immediately following the date you cease to be a member of an eligible association;
- the first of the month on or immediately following the date we receive written notice from you requesting the insurance be terminated;
- the date you enter military service of any country at war, whether declared or undeclared. We will make a pro-rated refund of premiums paid, for the period from the date of the entry to the end of the period for which premiums have been paid; or
- the date of your death for Member Only coverage or for Family coverage with no eligible spouse or eligible dependent children.

Your spouse or dependent child insurance will end immediately on the earliest of the following:

- the date your coverage terminates as outlined above;
- the September 1st date coinciding with or immediately following your death;
- the date your spouse or dependent child ceases to qualify as a spouse or dependent child under their respective definition in Section 9;
- the date you request in writing that your spouse or dependent child coverage be terminated;
- the date your spouse or dependent child enters military service of any country at war, whether declared or undeclared. We will make a pro-rated refund of premiums paid, for the period from the date of the entry to the end of the period for which premiums have been paid; or
- the date of your spouse or dependent child's death.

8 General provisions

Entire contract

This certificate, together with any applications for insurance submitted by you and any *Certificate Schedules*, riders, amendments, or endorsements to this certificate executed by us, constitutes the entire contract between the parties.

This certificate is subject in all respects to the terms and conditions of the group policy. If there is any conflict between the terms and conditions of this certificate and the group policy, the terms of the group policy take precedence to the extent permitted by applicable law. The certificate will govern any matter requiring determination. It supersedes any previously issued certificate.

Certificate Schedule

The *Certificate Schedule* is a separate document issued to you accompanying this certificate outlining the benefits for which you have been approved, along with any applicable provisions, and forms part of this certificate.

Currency

All payments by us or to us under this certificate must be in Canadian dollars.

Facility of payment

If for any reason, you are not competent to give a valid release for payments to which you are entitled, we may, at our discretion, make payment, to the extent permitted by law, to any person related to you, or to any other individual appearing to us to be equitably entitled to such payment. Any payment made by us in good faith pursuant to this provision fully discharges us to the extent of such payment.

Non-waiver

If we waive our rights in a specific instance or fail to insist on performance of any of the provisions of this certificate, that will not be construed as a subsequent waiver of the performance of, or any subsequent breach of, the same provision.

Governing law

This certificate will be subject to the laws of the Canadian province or territory in which you resided at the time of application for insurance.

Provincial variations

We reserve the right to adjust the provisions described in this certificate to meet the minimum requirements of law within your province or territory.

Non-participating

This certificate is non-participating and is not eligible to share in our divisible surplus. It has no cash value and receives no dividends.

Assignment

The insurance coverage evidenced by this certificate may not be assigned.

Limitation of action

No legal action may be taken on claims until 60 days after due proof of claim has been submitted.

Limitation period

Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the *Limitations Act, 2002*, in Ontario, if applicable, or such other applicable legislation of your province or territory.

Requesting copies of documents

Upon request and on reasonable notice, you may, at any time, obtain copies of:

- your application for insurance;
- any written statements or other record, not otherwise part of the application for insurance, that you have provided to us as evidence of insurability; and
- the group policy.

The first copy will be provided at no cost, but a fee may be charged for subsequent copies. All requests for copies of documents should be directed to us.

Clerical error

Clerical error by the OMA or by us in administering this certificate will not:

- invalidate coverage that is otherwise in force;
- render insurance valid which would, but for such error, not validly be in force; or
- continue coverage otherwise validly terminated.

We or the OMA will not refund premiums for any period which is more than 12 months prior to the date we or the OMA receive proof in writing of your right to a refund.

Changes and amendments

We may at any time, by agreement with the OMA, amend the provisions of this certificate. You will be provided with written notification of any changes to this certificate. Your consent is not required. No such amendment will in any way affect our liability in respect of any loss that occurs prior to the start date of the amendment.

We may also change the benefits, terms, and conditions of this certificate at any time, in response to changes in provincial, territorial, or federal legislation or regulations, retroactive to the date of such changes.

Misstatement of age

If due to the misstatement of your age or the age of any of your eligible family members:

- we would not have issued the insurance coverage because the true age at issue does not meet the eligibility requirements in effect when the coverage was issued, then we may declare the insurance void and our liability will be limited to the refund of all premiums paid for the coverage.
- the coverage has been in effect longer than it would have been based on the true age at issue, we will terminate the coverage effective on the date the coverage would have ceased according to the true age and, if we accepted a premium for a period beyond that date, our liability will be limited to the refund of all premiums paid for the period during which coverage would not have been in effect.

Otherwise, if the amount of insurance for any insured person in accordance with the terms and conditions of this certificate has been affected by a misstatement of age, the amount of insurance will be adjusted to the amount to which an insured person would have been entitled as determined using the true age, and an equitable premium adjustment will be made.

If the amount of premium applicable to you has been affected by such misstatement of age, the amount of premium applicable to you will be adjusted to the amount determined by the true age, and an equitable premium adjustment will be made.

We may request proof of age for any person insured under this certificate. If a date of birth is misstated, it will be corrected, and the following may occur:

- rates may be adjusted;
- the date coverage starts may change;
- the amount and type of coverage may be reduced or cancelled; and/or
- any rights or benefits provided under this certificate may be changed.

Misrepresentation, adjustments, and incontestability

Any failure to disclose or misrepresentation of a fact material to the insurance could render your insurance voidable by us.

Where there are multiple people insured under the certificate, we may either cancel the entire certificate, modify, or cancel only the coverage of the individuals insured to whom the failure to disclose relates.

In addition, we have the right to subtract any claims we've paid from any premiums we refund. However, after coverage has been in force for a period of 2 years, we can't cancel any coverage, unless a fraud is committed.

Sample

9 Words and phrases used in this certificate

Some of the terms used in this certificate have a specific meaning. It's very important this certificate is read and understood with these specific meanings in mind. Please familiarize yourself with these terms and their associated meaning whenever consulting this certificate.

accident or accidental – an unintentional, sudden, unexpected, and unforeseeable event caused by an external event inflicting bodily injury.

age – is yours or your spouse's, or your dependent child's age in completed years on the start date of the coverage and on each subsequent policy anniversary date.

amount of insurance – is the amount of insurance you select, and which is stated on your most recently signed application on file with us, which was accepted by us.

application date – the date we receive the application for insurance at our office.

certificate – is this certificate of insurance issued by us to you as evidence that we have granted you insurance under the group policy.

dependent child – is your natural child, legally adopted child, or stepchild who is a resident of Canada and who:

- is not married or in any other formed union recognized by law;
- may or may not reside with you but is fully dependent on you and your spouse for support;
- is in your care and custody, residing with you and being fully dependent on you for support;
- is under age 18, or under age 25 if a full-time student at an accredited institution of learning, or any age if physically or mentally disabled and remains fully dependent on you or your spouse for support.

eligible association – is, with respect to its own members, the OMA, the New Brunswick Medical Society, the Medical Society of Prince Edward Island, the Newfoundland and Labrador Medical Association, and Doctors Nova Scotia.

eligible family member – your spouse or dependent child as defined in this certificate, who are insured under Family coverage.

group policy – is group policy #95001 issued by us to the OMA, and any associated amendments made to it.

immediate family member – the spouse, children (natural, adopted or step-relations), parents, siblings, grandparents, grandchildren, or in-laws of an insured person.

injury – sudden bodily harm caused by external means, independent of any sickness or disease.

insured or insured person – means you or your spouse and/or each dependent child who is eligible for insurance under the group policy and for whom such coverage is in effect.

OMA – is the Ontario Medical Association.

physician – is a physician or surgeon who is licensed as such in Canada or the United States or any such other region as we may approve, and who is practicing within the scope of the physician's licensed authority. The treating physician may not be you or an immediate family member, or anyone who resides with you.

policy anniversary date – is September 1st of each year.

sickness – means sickness or disease which first manifests itself on or after the start date of the insurance under this certificate.

spouse – is your spouse by marriage or under any other formal union recognized by law, or a person of the opposite or same sex who has been publicly represented as your spouse. Only one person at a time can be covered as your spouse under this certificate.

total disability – means you are unable to perform the essential duties of your regular occupation due to sickness or injury, are under the care of a licensed physician, and you are not engaged in any other gainful occupation. Your regular occupation is the occupation(s) you regularly engaged in immediately before the start of total disability.

you or your – is the person who is named on the *Certificate Schedule*.

we, our, or us – is The Manufacturers Life Insurance Company (Manulife).

Sample

Underwritten by The Manufacturers Life Insurance Company (Manulife)

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