

A member guide to the conditions covered under Canada Life Group Critical Illness policies*

* This document is based on Canada Life's terms and conditions as at the 4th November 2015. This may change in the future and will be reflected in any documentation issued to your Policyholder.

These may not be appropriate to the terms of the Policy taken out by your employer.

This can be verified by your employer.



Canada Life[™]
Group Insurance

Introduction

This guide is designed to help you to understand why critical illness decisions are made and what factors will be taken into account when arriving at those decisions.

Please note that your employer may have imposed specific eligibility criteria for membership of this policy, such as a minimum service period. This means that even if you meet the requirements for one of the conditions specified in this document, you still need to check with your employer to establish whether you are eligible to be a member of the policy.

A Group Critical Illness policy is taken out by an employer to provide a lump sum benefit for an employee (or the employee's spouse or children, if covered) who is diagnosed with one of the defined medical conditions, or undergoes one of the listed surgical procedures.

One of the reasons that Group Critical Illness claims are declined by insurers is that the individual was suffering from the insured condition before the Group Critical Illness arrangement was taken out by the employer (this is known as the Pre-Existing Condition Exclusion). Another reason why claims are declined is that the individual was suffering from a condition that lead to a claim under the insured illness – for example an individual was known to be suffering from high blood pressure before the Group Critical Illness arrangement was taken out and suffered a stroke after the Group Critical Illness arrangement was taken out.

Group Critical Illness providers follow the standard critical illness definitions and policy exclusions contained in the ABI (Association of British Insurers) Statement of Best Practice for Critical Illness Cover, where these model wordings exist. Claims will only be paid where the definition for the illness/procedure is met. Canada Life, along with most other insurers, uses the ABI definitions to ensure consistency in the market and to ensure that definitions are as clear and as understandable as possible.

Subject to meeting the policy conditions, in most cases, the benefit becomes payable if the insured person survives for a period of 14 days after diagnosis or procedure (please note that different requirements exist for the 'Total Permanent Disability' and this is detailed in the relevant section of this guide). If the insured individual dies within the 14 day period then no benefits are payable.

Canada Life Group Insurance applies two groups of exclusions to claims. These are the Pre-Existing Conditions Exclusion (PECE), which includes the Related Conditions Exclusion, and other exclusions.

Important note

This guide is only intended to provide an overview of the conditions covered under new policies written at today's date and therefore the cover offered under your employer's policy may differ from that stated here. Nothing in this guide shall override the terms and conditions stated in your employer's policy document.

An important note about exclusions

There are some situations in which illnesses/conditions suffered either at the point of entering the policy, or prior to entering the policy, would result in a claim against your employer's policy being unsuccessful.

Two of the main causes of illnesses/conditions not resulting in a claim payment being made, are the application of a Pre-Existing Condition Exclusion (PECE) or a Related Conditions Exclusion (both detailed below).

You will see reference to the Related Conditions Exclusion for many of the conditions covered.

Related Conditions Exclusion

Claims cannot be made for an illness or surgical procedure where a related condition existed at any time before the claimant was first covered under the scheme, or a benefit increase was requested by you or your employer.

If 2 years have elapsed since the claimant entered this policy, any other critical illness policy arranged by your employer or the date of any increase in benefit, the related condition exclusion will only be applied to loss of independent existence, paralysis of limbs, terminal illness or total permanent disability.

The main related conditions for each illness or surgical procedure are listed in this guide.

Why do we apply a Related Conditions Exclusion?

A Related Condition is any medical condition that is associated with or is likely to have led to the occurrence of the insured illness or surgical procedure. Where an individual is known to have an existing condition, say high blood pressure which is a known risk factor for stroke, this could lead to a claim under an insured condition, in this case stroke. As with the PECE, the use of the related conditions exclusion allows us to cover groups of individuals without prior assessment of their medical history and lifestyle, within agreed limits.

Pre-Existing Condition Exclusion (PECE)

Claims will not be paid in respect of an illness (or a repeat of that illness) which was first diagnosed, treated, or which was known to have existed, prior to entry to the policy, or to any previous Group Critical Illness policy with your employer.

For this purpose, the following are all considered to be the same illness:

- aorta graft surgery
- balloon valvuloplasty
- cardiomyopathy
- coronary artery bypass grafts
- heart attack
- heart transplant
- heart valve replacement or repair
- open heart surgery
- primary pulmonary hypertension
- pulmonary artery surgery
- stroke

Your employer may be offering this cover via a flexible benefits programme, which grants the option to increase policy benefits at specified times, such as upon marriage, or the birth of a child. If this is the case, the PECE will not only apply at the point of entry to the policy, but also at the time of selection of any benefit increase.

Why do we apply a Pre-Existing Condition Exclusion?

Pre-Existing Condition Exclusions are a common feature of Group Critical Illness schemes. The use of these exclusions allows groups of individuals to be covered without the need for evidence of health and lifestyle to be produced before the individuals are covered, up to agreed limits.

Please click on the icon for further information about exclusions



An important note about exclusions – continued

Other exclusions

Claims will not be generally paid for some insured illnesses where the condition or surgical procedure is as a direct result of:

- Alcohol or drug abuse
- Intentional self inflicted injury
- War or civil commotion

Why do we apply other exclusions?

The Group Critical Illness arrangement is designed to provide protection against the 'natural' occurrence of a critical illness not where the condition has been brought on by the individual concerned as a result of alcohol, drug abuse, self inflicted injury or as a result of incidents that arise as a result of war or civil commotion.

Second claims

If an employee suffers a second insured illness a second claim may be payable, subject to the pre-existing conditions exclusion. However, claims cannot be made for the same illness. For example, if we have paid a claim for heart attack and the person has a further heart attack, we will not pay a second claim in respect of heart attack. Some critical illnesses are regarded, for the purposes of second claims, as the same illness. For example, if we have paid a claim for heart attack we will not pay another claim for a stroke.

Please note that if your employer has chosen to provide cover for a spouse/civil partner and/or child, we would only ever pay a maximum of one claim in respect of each of them.

Core illnesses covered

The 12 'Core' illnesses below are covered on **all** policies.

Please click on the icon below for each illness to see the criteria Canada Life stipulates for consideration of a claim 

Alzheimer's disease
resulting in permanent symptoms 

Cancer
excluding less advanced cases 

Coronary artery bypass grafts
with surgery to divide the breastbone 

Creutzfeldt-Jakob disease
resulting in permanent symptoms 

Dementia/pre-senile dementia
resulting in permanent symptoms 

Heart attack
of specified severity 

Kidney failure
requiring permanent dialysis 

Major organ transplant
from another person 

Motor neurone disease
resulting in permanent symptoms 

Multiple sclerosis
with persisting symptoms 

Parkinson's disease
resulting in permanent symptoms 

Stroke
resulting in permanent symptoms 

Cover for 'Additional Illnesses' can also be provided. **Please click** on the icon to see a list of the 'Additional illnesses' covered. 

Please click on the icon for information on how to make a claim 

Core illness definitions

Alzheimer's disease – resulting in permanent symptoms

Definition

A definite diagnosis of Alzheimer's disease by a Consultant Neurologist, Psychiatrist or Geriatrician. There must be permanent clinical loss of the ability to do all of the following:

- Remember,
- Reason, and
- Perceive, understand, express and give effect to ideas.

Note: For the above definition, the following is not covered:

- Other types of dementia.

What is it?

A serious progressive deterioration in mental functions, such as memory, language, orientation and judgement.

What can you claim for?

A definite diagnosis of Alzheimer's disease meeting all the conditions described.

Related conditions that will affect a claim

Circulatory brain disorder, disease of the central nervous system, mild cognitive impairment, Parkinson's disease, epilepsy, depression, dementia, aphasia, amnesic memory disorder, psychosis, major head trauma.

[\(click here for details\)](#)

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

Click here to return
to the list of illnesses



Core illness definitions

Cancer – excluding less advanced cases

Definition

Any malignant tumour positively diagnosed with histological confirmation and characterised by the uncontrolled growth of malignant cells and invasion of tissue.

The term malignant tumour includes leukaemia, sarcoma and lymphoma except cutaneous lymphoma (lymphoma confined to the skin).

Note: For the above definition, the following are not covered:

- All cancers which are histologically classified as any of the following:
 - pre-malignant,
 - non-invasive,
 - cancer in situ,
 - having either borderline malignancy; or
 - having low malignant potential.
- All tumours of the prostate unless histologically classified as having a Gleason score of 7 or above or having progressed to at least clinical TNM classification T2bNOMO.
- Chronic lymphocytic leukaemia unless histologically classified as having progressed to at least Binet Stage A.
- Any skin cancer (including cutaneous lymphoma) other than malignant melanoma that has been histologically classified as having caused invasion beyond the epidermis (outer layer of skin).

What is it?

Cancer is the general term for any malignant tumour. Tumours are abnormal and uncontrolled growths of cells and can be either benign or malignant. Benign tumours are usually slow growing and fairly stable whereas malignant tumours are fast growing and have the ability to spread into neighbouring tissue and destroying it. It can also spread to start new tumours in other parts of the body.

Whilst there have been significant advances in cancer treatment, each type of cancer responds differently to treatment and some have a better outlook than others.

Prostate cancer is commonly graded using a Gleason score. A low score means that the cancer is at an early slow growing stage, whereas an aggressive cancer will have a high score.

Leukaemia is a cancer of the blood cells. There are several types of leukaemia, some rapidly progressive (Acute) and some slower to develop (Chronic).

There are different types of skin cancer, the most common ones being confined to the surface of the skin and generally treated effectively with a high success rate.

What can you claim for?

A confirmed diagnosis of an invasive malignant tumour, unless specifically excluded in our definition.

Related conditions that will affect a claim

Malignant, borderline malignant or pre-malignant tumour or condition, leukaemia or lymphomas, plus polyposis coli, carcinoma-in-situ, papilloma of the bladder or gallbladder, chronic inflammatory bowel disease, Barrett's oesophagus.

[\(click here for details\)](#)

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

[Click here to return to the list of illnesses](#)



Core illness definitions

Coronary artery bypass grafts – with surgery to divide the breastbone

Definition

The undergoing of surgery requiring median sternotomy (surgery to divide the breastbone) on the advice of a Consultant Cardiologist to correct narrowing or blockage of one or more coronary arteries with bypass grafts.

What is it?

Surgery to correct one or more narrowed or blocked coronary arteries (these supply blood to the heart muscle), by opening the chest to expose the heart.

What can you claim for?

Open heart surgery to correct a narrowed or blocked coronary artery following the advice of a Consultant Cardiologist.

Related conditions that will affect a claim

Coronary artery anomalies, coronary vasospasms and myocardial bridging. All obstructive or occlusive arterial disease such as arteriosclerosis, coronary artery dissection or haematoma, coronary ectasia, diabetes mellitus. Any blood pressure or cholesterol readings **above** those set out in the following cardiovascular risk table.

[\(click here for details\)](#)

Cardiovascular Risk Table

If you have had:

- 2 or more recorded blood pressure readings, either the diastolic or systolic, taken at least 7 days apart or;
- 2 or more recorded cholesterol readings taken at least 7 days apart;

that exceeded the levels shown in the table below, in the two years prior to joining the scheme, or the date of increase in benefit, these will be treated as related conditions.

Age bands (at date of reading)	Up to 50	51-60	61 and over
Blood Pressure	160/90	170/95	175/95
Total Cholesterol	5.5 mmol/l	6.5 mmol/l	7.5 mmol/l

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

[Click here to return
to the list of illnesses](#)



Core illness definitions

Creutzfeldt-Jakob disease – resulting in permanent symptoms

Definition

A definite diagnosis of Creutzfeldt-Jakob disease by a Consultant Neurologist. There must be permanent clinical loss of the ability to do all of the following:

- Remember,
- Reason; and
- Perceive, understand, express and give affect to ideas.

What is it?

A very rare and incurable brain disease causing brain damage, leading to progressive dementia and gradual loss of muscle control.

What can you claim for?

A definite diagnosis of Creutzfeldt-Jakob disease by a Consultant Neurologist, resulting in permanent damage to the nervous system.

Related conditions that will affect a claim

Circulatory brain disorder, disease of the central nervous system, mild cognitive impairment, Parkinson's disease, epilepsy, depression, dementia, aphasia, amnesic memory disorder, psychosis, major head trauma.

[\(click here for details\)](#)

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

Click here to return
to the list of illnesses



Core illness definitions

Dementia/pre-senile dementia – resulting in permanent symptoms

Definition

A definite diagnosis of dementia or pre-senile dementia by a Consultant Neurologist, Psychiatrist or Geriatrician. There must be permanent and progressive clinical loss of the ability to do all of the following:

- Remember,
- Reason; and
- Perceive, understand, express and give affect to ideas.

Note: For the above definition, the following is not covered:

- Dementia secondary to alcohol or drug abuse.

What is it?

A serious progressive deterioration in mental functions, such as memory, language, orientation and judgement.

What can you claim for?

A definite diagnosis of dementia or pre-senile dementia by a Consultant Neurologist, Psychiatrist or Geriatrician with supportive evidence.

Related conditions that will affect a claim

Circulatory brain disorder, disease of the central nervous system, mild cognitive impairment, Parkinson's disease, epilepsy, depression, aphasia, amnesic memory disorder, psychosis, stroke, brain tumour, hydrocephalus, Creutzfeld-Jacob disease and major head trauma.

[\(click here for details\)](#)

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

Click here to return
to the list of illnesses



Core illness definitions

Heart attack – of specified severity

Definition

Death of heart muscle, due to inadequate blood supply, that has resulted in all of the following evidence of acute myocardial infarction:

- Typical clinical symptoms (for example, characteristic chest pain).
- New characteristic electrocardiographic changes.
- The characteristic rise of cardiac enzymes or Troponins recorded at the following levels or higher:
 - Troponin T > 200 ng/L (0.2 ng/ml or 0.2 ug/L)
 - Troponin I > 500 ng/L (0.5 ng/ml or 0.5 ug/L).

The evidence must show a definite acute myocardial infarction.

Note: For the above definition, the following is not covered:

- other acute coronary syndromes
- angina without myocardial infarction.

What is it?

A heart attack is caused by the death of a portion of heart muscle when its blood supply is cut off. This is usually due to a blood clot in the coronary artery. Typically there is chest pain. Severe heart attacks can lead to complications such as heart failure.

Diagnosis is carried out using an electrocardiogram (ECG) test and blood tests. The ECG test measures changes in the electrical activity of the beating heart caused by the heart attack. The blood tests measure levels of certain diagnostic enzymes that leak out of the damaged heart muscle.

What can you claim for?

A heart attack confirmed by a Cardiologist, supported by medical evidence. The heart attack must have taken place at a time when you were covered under the policy.

Related conditions that will affect a claim

Familial Hyperlipidaemia, coronary artery anomalies, coronary vasospasms and myocardial bridging, all obstructive or occlusive arterial disease such as arteriosclerosis, coronary artery dissection or haematoma, coronary ectasia, diabetes mellitus. Any blood pressure or cholesterol readings **above** those set out in the following cardiovascular risk table. ([click here for details](#))

Cardiovascular Risk Table

If you have had:

- 2 or more recorded blood pressure readings, either the diastolic or systolic, taken at least 7 days apart or;
- 2 or more recorded cholesterol readings taken at least 7 days apart;

that exceeded the levels shown in the table below, in the two years prior to joining the scheme, or the date of increase in benefit, these will be treated as related conditions.

Age bands (at date of reading)	Up to 50	51-60	61 and over
Blood Pressure	160/90	170/95	175/95
Total Cholesterol	5.5 mmol/l	6.5 mmol/l	7.5 mmol/l

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

[Click here to return to the list of illnesses](#)



Core illness definitions

Kidney failure – requiring permanent dialysis

Definition

Chronic and end-stage failure of both kidneys to function, as a result of which regular dialysis is permanently required.

What is it?

The kidneys perform a vital job of removing waste products from the blood. Where the kidneys cannot do their job, waste products build up in the body and dialysis is required to perform their role.

What can you claim for?

The permanent, irreversible failure of both kidneys to function, requiring regular dialysis.

Related conditions that will affect a claim

Polycystic kidney disease, pyelonephritis or glomerulonephritis, diabetes mellitus or any chronic renal disorder. Any blood pressure or cholesterol readings **above** those set out in the following cardiovascular risk table.

[\(click here for details\)](#)

Cardiovascular Risk Table

If you have had:

- 2 or more recorded blood pressure readings, either the diastolic or systolic, taken at least 7 days apart or;
- 2 or more recorded cholesterol readings taken at least 7 days apart;

that exceeded the levels shown in the table below, in the two years prior to joining the scheme, or the date of increase in benefit, these will be treated as related conditions.

Age bands (at date of reading)	Up to 50	51-60	61 and over
Blood Pressure	160/90	170/95	175/95
Total Cholesterol	5.5 mmol/l	6.5 mmol/l	7.5 mmol/l

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

[Click here to return to the list of illnesses](#)



Core illness definitions

Major organ transplant – from another person

Definition

The undergoing as a recipient of a transplant from another person of bone marrow or of a complete heart, kidney, liver, lung or pancreas, or inclusion on an official UK waiting list for such a procedure.

Note: For the above definition, the following is not covered:

- Transplant of any other organs, parts of organs, tissues or cells.

What is it?

Some organs can be so damaged that transplanting a new organ is the best or only form of treatment.

What can you claim for?

Either being placed on an official UK waiting list or actually receiving transplanted organ as follows:

- heart
- lung
- kidney
- pancreas
- liver
- bone marrow

Related conditions that will affect a claim

Cystic fibrosis, leukaemia, diabetes mellitus, aplastic or hypoplastic anaemia, immunological defects or disease, cardiomyopathy, coronary artery disease, cardiac failure, chronic lung disease, chronic kidney disease, chronic liver disease, chronic pancreatitis or pulmonary hypertension.

[\(click here for details\)](#)

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

Click here to return
to the list of illnesses



Core illness definitions

Motor neurone disease – resulting in permanent symptoms

Definition

A definite diagnosis of one of the following motor neurone diseases by a Consultant Neurologist.

- Amyotrophic lateral sclerosis (ALS)
- Primary lateral sclerosis (PLS)
- Progressive bulbar palsy (PBP)
- Progressive muscular atrophy (PMA)

There must also be permanent clinical impairment of motor function.

What is it?

Motor neurone disease is a progressive degenerative disease that attacks the central nervous system, leading to weakness and wasting of muscles, causing loss of mobility, and difficulties with speech, swallowing and breathing.

What can you claim for?

A definite diagnosis of motor neurone disease by a Consultant Neurologist together with evidence of permanent disability.

Related conditions that will affect a claim

Any chronic neurological symptoms that would be attributable to or known to motor neurone disease.

[\(click here for details\)](#)

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

[Click here to return to the list of illnesses](#)



Core illness definitions

Multiple sclerosis – with persisting symptoms

Definition

A definite diagnosis of multiple sclerosis by a Consultant Neurologist. There must be current clinical impairment of motor or sensory function, which must have persisted for a continuous period of at least six months.

What is it?

A disease of the brain and spinal cord that causes muscle weakness and lack of coordination. It also causes visual problems, effects on sensation and impaired mobility. Typically there are variable periods of remissions and relapses. During remissions the symptoms will be greatly reduced or disappear.

What can you claim for?

A definite diagnosis of multiple sclerosis by a Consultant Neurologist where there has been impairment of motor or sensory symptoms for a continuous period of at least six months.

Related conditions that will affect a claim

Any form of neuropathy, encephalopathy or myelopathy (disorders of function of the nerves); abnormal sensation (numbness) of extremities, trunk or face; weakness or clumsiness of a limb; double vision; partial blindness; ocular palsy; vertigo (dizziness); difficulty of bladder control; optic neuritis, spinal cord lesion and abnormal MRI scan.

[\(click here for details\)](#)

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

Click here to return
to the list of illnesses



Core illness definitions

Parkinson's disease – resulting in permanent symptoms

Definition

A definite diagnosis of Parkinson's disease by a Consultant Neurologist. There must be permanent clinical impairment of motor function with associated tremor and muscle rigidity.

Note: For the above definition, the following is not covered:

- Parkinsonian syndromes/Parkinsonism.

What is it?

A progressive degenerative disorder of the central nervous system affecting movements such as walking, talking and writing. It is characterised by tremor, rigidity and loss of muscular coordination.

What can you claim for?

A definite diagnosis of Parkinson's disease by a Consultant Neurologist together with evidence of permanent disability.

Related conditions that will affect a claim

Tremor, rigidity of limbs, slurred speech, dementia, extra pyramidal disease. Secondary parkinsonism.

[\(click here for details\)](#)

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

Click here to return
to the list of illnesses



Core illness definitions

Stroke – resulting in permanent symptoms

Definition

Death of brain tissue due to inadequate blood supply or haemorrhage within the skull resulting in permanent neurological deficit with persisting clinical symptoms.

Note: For the above definition, the following are not covered:

- Transient ischaemic attack (TIA).
- Traumatic injury to brain tissues or blood vessels.
- Death of tissue of the optic nerve or retina/eye stroke.

What is it?

The sudden death of some brain tissue due to a lack of oxygen when the blood flow in the brain is impaired by blockage or rupture of an artery to the brain. Strokes vary in severity from short periods of weakness to life threatening problems.

What can you claim for?

Death of brain tissue due to a blood supply interruption in the brain together with confirmation of permanent neurological problems.

Related conditions that will affect a claim

Any disease or disorders of the heart, including arrhythmia, valve disorder, cardiac tumour and obstructive or occlusive arterial disease such as arteriosclerosis. Transient ischaemic attack (TIA), intracranial aneurysm or vascular disorder, such as dissection. Anticoagulation treatment, thrombophilia and diabetes mellitus. Any blood pressure or cholesterol readings **above** those set out in the following cardiovascular risk table.

[\(click here for details\)](#)

Cardiovascular Risk Table

If you have had:

- 2 or more recorded blood pressure readings, either the diastolic or systolic, taken at least 7 days apart or;
- 2 or more recorded cholesterol readings taken at least 7 days apart;

that exceeded the levels shown in the table below, in the two years prior to joining the scheme, or the date of increase in benefit, these will be treated as related conditions.

Age bands (at date of reading)	Up to 50	51-60	61 and over
Blood Pressure	160/90	170/95	175/95
Total Cholesterol	5.5 mmol/l	6.5 mmol/l	7.5 mmol/l

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

[Click here to return to the list of illnesses](#)



Additional illnesses covered

If the Additional Illnesses cover is selected, **all** of the conditions below will be covered. The illnesses are only covered where specifically requested.

Please click on the icon below for each illness to see the criteria Canada Life stipulates for consideration of a claim



Aorta graft surgery
for disease



Loss of hands or feet
permanent physical severance



Aplastic anaemia
with permanent bone marrow failure



Loss of independent existence
permanent and irreversible



Bacterial meningitis
resulting in permanent symptoms



Loss of speech
total, permanent and irreversible



Balloon valvuloplasty



Open heart surgery
with surgery to divide the breastbone



Benign brain tumour
resulting in permanent symptoms



Paralysis of limbs
total and irreversible



Blindness
permanent and irreversible



Primary pulmonary hypertension
of specified severity



Cardiomyopathy
of specified severity



Progressive supranuclear palsy
resulting in permanent symptoms



Coma
with associated permanent symptoms



Pulmonary artery surgery
with surgery to divide the breastbone



Deafness
permanent and irreversible



Respiratory failure
resulting in breathlessness even when resting



Encephalitis
resulting in permanent symptoms



Rheumatoid arthritis
of specified severity



Heart valve replacement or repair
with surgery to divide the breastbone



Terminal Illness
where death is expected within 12 months



HIV infection
caught in the EU from a blood transfusion, physical assault or at work in an eligible occupation



Third degree burns
covering 20% of the body surface area



Liver failure
irreversible



Traumatic brain injury
resulting in permanent symptoms



Please click on the icon for information on how to make a claim



Additional illness definitions

Aorta graft surgery – for disease

Definition

Undergoing surgery for disease to the aorta with excision and surgical replacement of a portion of the diseased aorta with a graft. The term aorta includes the thoracic and abdominal aorta but not its branches.

Note: For the above definition, the following are not covered:

- Any other surgical procedure, for example the insertion of stents or endovascular repair.
- Surgery following traumatic injury to the aorta.

What is it?

The aorta is the main artery of the body, carrying blood from the left ventricle of the heart to all the main arteries.

It may become weakened by an aneurysm or by damage caused by narrowing due to fatty deposits.

A graft is a piece of synthetic tubing.

What can you claim for?

Surgery in the chest (thorax) or stomach region (abdomen) to replace a section of the aorta using a graft.

Related conditions that will affect a claim

Marfan's syndrome, Ehlers-Danlos syndrome, bicuspid aortic valve, congenital malformation of the heart or aorta, coarctation of aorta, known previous aneurysms/dissection/ectasia of aorta, arteriosclerosis of aorta.

[\(click here for details\)](#)



Additional illness definitions

Aplastic anaemia – with permanent bone marrow failure

Definition

Permanent bone marrow failure which results in all of anaemia, neutropenia and thrombocytopenia, requiring treatment with at least one of the following:

- Blood transfusion.
- Marrow stimulating agents.
- Immunosuppressive agents.
- Bone marrow transplant.

What is it?

A severe form of anaemia in which the body's bone marrow fails to produce new blood cells.

What can you claim for?

Permanent bone marrow failure resulting in anaemia, neutropenia, thrombocytopenia, and requiring specific treatment.

Related conditions that will affect a claim

Any history of symptoms or abnormal blood tests that would be attributable to or known to aplastic anaemia.

[\(click here for details\)](#)

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

Click here to return
to the list of illnesses



Additional illness definitions

Bacterial meningitis – resulting in permanent symptoms

Definition

A definite diagnosis of bacterial meningitis by an appropriate consultant resulting in significant permanent neurological deficit with persisting clinical symptoms.

Note: For the above definition, the following is not covered:

- All other forms of meningitis including viral meningitis.

What is it?

Meningitis is an inflammation of the membrane that surrounds the brain and spinal cord, usually caused by an infection with a virus or a bacterium. Viral meningitis is usually mild however bacterial meningitis can cause brain damage and can be fatal.

What can you claim for?

Bacterial meningitis confirmed by an appropriate consultant, that has caused significant permanent damage to the nervous system.

Related conditions that will affect a claim

Chronic ear disease, cerebral shunt related to hydrocephalus, immunodeficiency syndromes.

[\(click here for details\)](#)

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

Click here to return
to the list of illnesses



Additional illness definitions

Balloon valvuloplasty

Definition

The actual insertion, on the advice of a Consultant Cardiologist, of a balloon catheter through the orifice of one of the valves of the heart, and the inflation of the balloon to relieve valvular abnormalities.

What is it?

Balloon valvuloplasty is a procedure in which a narrowed heart valve is stretched open using a procedure that does not require open heart surgery. It is performed to improve valve function and blood flow by enlarging the valve opening.

A thin tube (catheter) that has a small deflated balloon at the tip is inserted through the skin in the groin area into a blood vessel, and then is threaded up to the opening of the narrowed heart valve. The balloon is inflated, which stretches the valve open. This procedure cures many valve obstructions. It is also called balloon enlargement of a narrowed heart valve.

Related conditions that will affect a claim

Rheumatic fever, carcinoid syndrome, bicuspid valve, mitral valve prolapse, myxomatous or calcified heart valve, cardiomyopathy, Ehlers-Danlos syndrome, Marfan's syndrome.

[\(click here for details\)](#)

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

[Click here to return to the list of illnesses](#)



Additional illness definitions

Benign brain tumour – resulting in permanent symptoms

Definition

A non-malignant tumour or cyst originating from the brain, cranial nerves or meninges within the skull, resulting in permanent neurological deficit with persisting clinical symptoms.

Note: For the above definition, the following are not covered:

- Tumours in the pituitary gland,
- Tumours originating from bone tissue
- Angiomas and cholesteatoma.

What is it?

An abnormal growth of cells within the brain, which is not malignant because they do not spread to other areas of the body. Large benign brain tumours can interfere with brain function and require treatment such as surgery, chemotherapy or radiation therapy.

What can you claim for?

A definite diagnosis of a brain tumour which has resulted in permanent damage to the nervous system.

Related conditions that will affect a claim

Pre-existing benign brain tumour, neurofibromatosis (Von Recklinghausen's disease), haemangioma (Von Hippel-Lindau disease), pituitary gland tumours, angioma/haemangioma/meningioma, any malformation of the arteries or veins of the brain.

[\(click here for details\)](#)

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

Click here to return
to the list of illnesses



Additional illness definitions

Blindness – permanent and irreversible

Definition

Permanent and irreversible loss of sight to the extent that even when tested with the use of visual aids, vision is measured at 3/60 or worse in the better eye using a Snellen eye chart.

What is it?

The permanent loss of sight in both eyes.

What can you claim for?

Loss of sight that is permanent and irreversible in both eyes.

Related conditions that will affect a claim

Stroke, transient ischaemic attack (TIA), head trauma, brain tumour, glaucoma, pituitary gland tumour, optic neuropathy, papilloedema, retrobulbar neuritis, sarcoidosis, malignant exophthalmus, diabetes mellitus, uveitis, retinal detachment, macular degeneration or registered blind.

[\(click here for details\)](#)

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

Click here to return
to the list of illnesses



Additional illness definitions

Cardiomyopathy – of specified severity

Definition

A definite diagnosis by a Consultant Cardiologist of cardiomyopathy resulting in permanently impaired ventricular function such that the ejection fraction is 40% or less for at least six months when stabilised on therapy advised by the Consultant.

The diagnosis must also be evidenced by:

- electrocardiographic changes; and
- echocardiographic abnormalities.

The evidence must be consistent with the diagnosis of cardiomyopathy.

Note: For the above definition, the following are not covered:

- All other forms of heart disease and/or heart enlargement.
- Myocarditis; and
- Cardiomyopathy related to alcohol or drug abuse.

What is it?

An abnormal heart condition, in which the heart muscle is either thickened, stretched thin, stiffened or replaced with fatty tissue, depending on the cause. The condition may lead to heart failure, irregular heart beat or risk of blood clotting. Where the symptoms are not well controlled, a heart transplant may be necessary.

What can you claim for?

A definite diagnosis of cardiomyopathy by a Consultant Cardiologist which must meet the degree of severity described.

Related conditions that will affect a claim

Any disease or disorders of the heart. This will include congenital malformations, heart valve defects, any obstructive or occlusive arterial disease such as arteriosclerosis or Takotsubo Syndrome. Muscular dystrophy, acromegaly, amyloidosis, haemochromatosis, any previous chemotherapy or diabetes mellitus. Any blood pressure or cholesterol readings **above** those set out in the following cardiovascular risk table. [\(click here for details\)](#)

Cardiovascular Risk Table

If you have had:

- 2 or more recorded blood pressure readings, either the diastolic or systolic, taken at least 7 days apart or;
- 2 or more recorded cholesterol readings taken at least 7 days apart;

that exceeded the levels shown in the table below, in the two years prior to joining the scheme, or the date of increase in benefit, these will be treated as related conditions.

Age bands (at date of reading)	Up to 50	51-60	61 and over
Blood Pressure	160/90	170/95	175/95
Total Cholesterol	5.5 mmol/l	6.5 mmol/l	7.5 mmol/l

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

[Click here to return to the list of illnesses](#)



Additional illness definitions

Coma – with associated permanent symptoms

Definition

A state of unconsciousness with no reaction to external stimuli or internal needs which:

- requires the use of life support systems for a continuous period of at least 96 hours; and
- with associated permanent neurological deficit with persisting clinical symptoms.

Note: For the above definition, the following are not covered:

- Medically induced coma.
- Coma secondary to alcohol or drug abuse.

What is it?

A state of deep and often prolonged unconsciousness where there is no response to external stimulation or control of bodily functions. It is usually the result of a brain tumour or other damage to the brain or due to a head injury.

What can you claim for?

Coma which lasts for at least 96 hours with life support needed throughout, resulting in permanent damage to the nervous system.

Related conditions that will affect a claim

Self inflicted injury or misuse of drugs or alcohol, diabetes mellitus, medically induced coma.

[\(click here for details\)](#)

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

Click here to return
to the list of illnesses



Additional illness definitions

Deafness – permanent and irreversible

Definition

Permanent and irreversible loss of hearing to the extent that the loss is greater than 95 decibels across all frequencies in the better ear using a pure tone audiogram.

What is it?

The permanent loss of hearing in both ears.

What can you claim for?

Permanent and irreversible loss of hearing in both ears as specified in the left hand column.

Related conditions that will affect a claim

Stroke, transient ischaemic attack (TIA), head trauma, brain tumour, chronic ear infection, acoustic nerve tumour, presbycusis, otosclerosis, congenital deafness.

[\(click here for details\)](#)

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

Click here to return
to the list of illnesses



Additional illness definitions

Encephalitis – resulting in permanent symptoms

Definition

A definite diagnosis of Encephalitis by a Consultant Neurologist resulting in permanent neurological deficit with persisting clinical symptoms.

Note: For the above definition, the following is not covered:

- Encephalitis in the presence of HIV.

What is it?

Encephalitis is an inflammation of the brain. It usually results from an infection, most often by a virus, but sometimes by bacteria, a fungus, or parasites. In rare cases, it is caused by brain injury, a drug or vaccine reaction, or poison.

What can you claim for?

A definite diagnosis of encephalitis by a Consultant Neurologist resulting in permanent damage.

Related conditions that will affect a claim

Bacterial meningitis, HIV Immuno deficiency syndromes, Lyme disease.

[\(click here for details\)](#)

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

Click here to return
to the list of illnesses



Additional illness definitions

Heart valve replacement or repair – with surgery to divide the breastbone

Definition

The undergoing of surgery requiring median sternotomy (surgery to divide the breastbone) on the advice of a Consultant Cardiologist to replace or repair one or more heart valves.

What is it?

The heart valves control the flow of blood into and out of the chambers of the heart. Any damage to the valves will reduce the capacity of the heart to function.

What can you claim for?

Surgery to repair or replace one or more heart valves as advised by a Consultant Cardiologist, where the surgery involves open heart surgery involving dividing the breastbone.

Related conditions that will affect a claim

Endocarditis, congenital malformation of the heart, cardiomyopathy, any obstructive or occlusive arterial disease, rheumatic fever, Marfan's syndrome, Ehlers–Danlos syndrome, carcinoid syndrome, bicuspid aortic valve, mitral valve prolapse, myxomatous or calcified heart valve.

[\(click here for details\)](#)

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

Click here to return
to the list of illnesses



Additional illness definitions

HIV infection – caught in the EU from a blood transfusion, physical assault or at work in an eligible occupation

Definition

Infection by Human Immunodeficiency Virus (HIV) resulting from:

- a blood transfusion given as part of medical treatment,
- a physical assault; or an incident occurring in the course of performing normal duties of employment from the eligible occupations listed below:
 - a medical practitioner,
 - a person employed in a medical facility,
 - a prison officer,
 - a dentist; or
 - a member of the fire, police or ambulance emergency services,

after the start of the insured person's cover under the Policy and satisfying all of the following:

- The incident must have been reported to appropriate authorities and have been investigated in accordance with the established procedures.
- Where HIV infection is caught through a physical assault or as a result of an incident during the course of performing normal duties of employment, the incident must be supported by a negative HIV antibody test taken within 5 days of the incident.
- There must be a further HIV test within 12 months confirming the presence of HIV or antibodies to the virus.
- The incident causing infection must have occurred in the EU.

Note: For the above definition, the following is not covered:

- HIV infection resulting from any other means, including sexual activity or drug abuse.

What is it?

HIV is a virus that attacks cells of the immune system, weakening a person's ability to fight everyday infections or the HIV virus itself.

What can you claim for?

HIV Infection acquired as a result of a blood transfusion, an assault or carrying out duties in certain eligible occupations. Certain criteria must also be met as described.

Related conditions that will affect a claim

No benefit will be payable in respect of a member who, at any time prior to the date of entry into the scheme, has been infected with any Human Immunodeficiency Virus (HIV) or has demonstrated any antibodies to such virus.

[\(click here for details\)](#)



Additional illness definitions

Liver failure - irreversible

Definition

A definite diagnosis of irreversible end stage liver failure due to cirrhosis by a Consultant Physician resulting in all of the following:

- Permanent jaundice;
- Ascites, and
- Encephalopathy.

Note: For the above definition, the following is not covered:

- liver failure secondary to alcohol or drug abuse.

What is it?

Liver failure is the inability of the liver to perform its normal synthetic and metabolic function as part of normal physiology.

What can you claim for?

A definite diagnosis of irreversible end stage liver failure resulting from cirrhosis with symptoms as described.

Related conditions that will affect a claim

Chronic liver disease and hepatitis, primary sclerosing cholangitis, cirrhosis of the liver, portal hypertension, hepatic steatosis, autoimmune hepatitis.

[\(click here for details\)](#)

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

Click here to return
to the list of illnesses



Additional illness definitions

Loss of hands or feet – permanent physical severance

Definition

Permanent physical severance of any combination of two or more hands or feet at or above the wrist or ankle joints.

What is it?

The loss of two or more hands or feet. Hands must be severed at the wrist or higher and feet must be severed at the ankle or higher.

What can you claim for?

The permanent loss of both hands or both feet or a combination of a hand and a foot, completely severed at or above the wrist or ankle.

Related conditions that will affect a claim

Peripheral vascular disease, bone cancer, soft tissue cancer, diabetes mellitus.

[\(click here for details\)](#)

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

Click here to return
to the list of illnesses



Additional illness definitions

Loss of independent existence – permanent and irreversible

Definition

Total, permanent and irreversible disablement resulting in the inability to perform, even with the use of appropriate assistive devices, at least three of the following six activities without the direct assistance of another person.

- **Feeding/eating** – cutting meat, buttering bread, getting food and drink to the mouth using fingers or utensils.
- **Dressing** – dressing oneself including fastening of zips and buttons, getting clothes from wardrobes and drawers.
- **Bathing/grooming** – turning on taps, getting in and out of the bath or shower, washing face, hands and body, drying oneself, combing hair.
- **Continence** – moving into and out of the bathroom, getting on and off the toilet unaided, recognising the need or urge to void bladder or bowel in time to get to the toilet.
- **Mobility** – the ability to move indoors from one room to another in the insured person's own home.
- **Transfer** – getting into and out of bed, transferring from one place to another, for example, chair to bed, chair to standing, chair to chair.

What is it?

The inability to carry out basic everyday activities, even with the use of special equipment, without the help of other people.

What can you claim for?

Being unable to do at least three out of the six basic daily activities described and there being no prospect of there ever being any improvement.

Related conditions that will affect a claim

Multiple sclerosis, muscular dystrophy, motor neurone disease, Parkinson's disease, progressive supranuclear palsy or any disease or disorder of the central nervous system including the spinal cord or column. Back, neck or joint pain, arthritis, diabetes mellitus.

[\(click here for details\)](#)



Additional illness definitions

Loss of speech – total, permanent and irreversible

Definition

Total permanent and irreversible loss of the ability to speak as a result of physical injury or disease.

What is it?

The loss of the ability to speak resulting from injury or an underlying disease.

What can you claim for?

The permanent and irreversible loss of speech as a result of injury or disease.

Related conditions that will affect a claim

Stroke, transient ischaemic attack (TIA), brain injury, brain tumour, motor neurone disease, muscular dystrophy, throat tumour, laryngeal polyps, Alzheimer's disease, Parkinson's disease.

[\(click here for details\)](#)

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

Click here to return
to the list of illnesses



Additional illness definitions

Open heart surgery - with surgery to divide the breastbone

Definition

The undergoing of surgery requiring median sternotomy (surgery to divide the breastbone) on the advice of a Consultant Cardiologist to correct a structural abnormality of the heart.

What is it?

Open heart surgery is used to bypass blocked arteries in the heart, repair or replace heart valves, fix atrial fibrillation, and transplant hearts.

Some of these are covered under separate insured surgical procedures including aorta graft surgery, heart valve replacement and repair, coronary artery bypass grafts and major organ transplant.

What can you claim for?

Surgery to correct a structural abnormality of the heart, on the advice of a Consultant Cardiologist that involves dividing the breastbone.

Related conditions that will affect a claim

Endocarditis, congenital malformation of the heart, cardiomyopathy, any obstructive or occlusive arterial disease, rheumatic fever, Marfan's syndrome, Ehlers–Danlos syndrome, carcinoid syndrome, bicuspid aortic valve, mitral valve prolapse, myxomatous or calcified heart valve, tumours of the heart such as myxomas. Any blood pressure or cholesterol readings **above** those set out in the following cardiovascular risk table.

[\(click here for details\)](#)

Cardiovascular Risk Table

If you have had:

- 2 or more recorded blood pressure readings, either the diastolic or systolic, taken at least 7 days apart or;
- 2 or more recorded cholesterol readings taken at least 7 days apart;

that exceeded the levels shown in the table below, in the two years prior to joining the scheme, or the date of increase in benefit, these will be treated as related conditions.

Age bands (at date of reading)	Up to 50	51-60	61 and over
Blood Pressure	160/90	170/95	175/95
Total Cholesterol	5.5 mmol/l	6.5 mmol/l	7.5 mmol/l

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

[Click here to return to the list of illnesses](#)



Additional illness definitions

Paralysis of limbs – total and irreversible

Definition

Total and irreversible loss of muscle function to the whole of any two limbs.

What is it?

The total loss of movement caused by damage to the nervous system caused by injury or disease.

What can you claim for?

The total and irreversible loss of movement in any two legs or arms or one arm and one leg.

Related conditions that will affect a claim

Diseases of the central nervous system including multiple sclerosis, motor neurone disease, Parkinson's disease, stroke, transient ischaemic attack (TIA), brain tumour, Alzheimer's disease. Tumours, infections, lesions and malformations of the spinal cord. Muscular dystrophy.

[\(click here for details\)](#)

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

Click here to return
to the list of illnesses



Additional illness definitions

Primary pulmonary hypertension - of specified severity

Definition

A definite diagnosis of primary pulmonary hypertension. There must be substantial right ventricular enlargement established by investigations including cardiac catheterisation, resulting in the permanent loss of ability to perform physical activities to at least Class 3 of the New York Heart Association (NYHA) classifications of functional capacity*.

*NYHA Class 3: Heart disease resulting in marked limitation of physical activities where less than ordinary activity causes fatigue, palpitation, breathlessness or chest pain.

What is it?

A slowly progressive and rare lung disorder in which the blood pressure in the pulmonary artery carrying blood to the lungs is abnormally high for no apparent reason. The high blood pressure puts a strain on the heart and lungs and heart function reduces.

There are four stages in the New York Heart Association classification where 1 is the least severe and 4 is the most severe where the person is normally bed-bound.

What can you claim for?

A definite diagnosis of primary pulmonary hypertension by a Consultant Cardiologist, which must meet the functional severity described.

Related conditions that will affect a claim

There are no related conditions applicable.

[\(click here for details\)](#)



Additional illness definitions

Progressive supranuclear palsy – resulting in permanent symptoms

Definition

A definite diagnosis, by a Consultant Neurologist, of progressive supranuclear palsy. There must be permanent clinical impairment of eye movement and motor function with associated tremor, rigidity of movement and postural instability.

What is it?

Progressive supranuclear palsy is a brain disorder that causes serious and progressive problems with control of gait and balance, along with complex eye movement and thinking problems.

The disease begins slowly and continues to get worse (progressive), and causes weakness (palsy) by damaging certain parts of the brain above pea-sized structures called nuclei that control eye movements (supranuclear).

What can you claim for?

A definite diagnosis of progressive supranuclear palsy by a Consultant Neurologist, resulting in permanent symptoms as described.

Related conditions that will affect a claim

Motor neurone disease.

[\(click here for details\)](#)

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

[Click here to return to the list of illnesses](#)



Additional illness definitions

Pulmonary artery surgery – with surgery to divide the breastbone

Definition

The undergoing of surgery requiring median sternotomy (surgery to divide the breastbone) on the advice of a Consultant Cardiothoracic Surgeon for a disease of the pulmonary artery to excise and replace the diseased pulmonary artery with a graft.

What is it?

Surgery to correct a diseased pulmonary artery with a graft by opening the chest. The pulmonary artery conveys deoxygenated blood from the heart to the lungs for oxygenation.

What can you claim for?

Open heart surgery to replace the diseased pulmonary artery with a graft following advice of a Consultant Cardiothoracic Surgeon.

Related conditions that will affect a claim

Pulmonary valve disorder, Fallot's tetralogy, patent ductus arteriosus, congenital malformation of the heart and its vessels.

[\(click here for details\)](#)

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

Click here to return
to the list of illnesses



Additional illness definitions

Respiratory failure – resulting in breathlessness even when resting

Definition

Advanced stage chronic lung disease resulting in:

- Breathlessness at rest; and
- The need for continuous daily oxygen treatment (PaO₂ < 7.3kPa when clinically stable as prescribed under British Thoracic Society and NICE guidelines) for at least 12 months.

What is it?

Lung disease damages the lungs so that the body cannot absorb enough oxygen, leading to breathlessness, lack of mobility and ultimately lung and heart failure.

What can you claim for?

Respiratory failure resulting from chronic lung disease and evidenced by breathlessness when not moving. You will need to have had continuous daily oxygen treatment as specified for a period of at least 12 months.

Related conditions that will affect a claim

Chronic obstructive or restrictive pulmonary disease, emphysema. Any disease or disorder of the respiratory system including lung, bronchi and trachea. Tuberculosis or chronic inflammatory diseases. Autoimmune disorders affecting the lung, such as sarcoidosis.

[\(click here for details\)](#)

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

Click here to return
to the list of illnesses



Additional illness definitions

Rheumatoid arthritis – of specified severity

Definition

A definite diagnosis of chronic rheumatoid arthritis by a Consultant Rheumatologist resulting in all of the following:

- there must be morning stiffness in the affected joints of at least one-hour duration,
- there must be arthritis of at least three joint groups with joint destruction and either soft tissue swelling or fluid observed by a physician,
- the arthritis must involve two or more of the following sites:
 - wrists or ankles
 - hands and fingers
 - feet and toes
- the arthritis must affect both sides of the body,
- presence of rheumatoid factor or anti CCP (anticyclic citrullinated protein) antibodies, unless all other criteria are met,
- there must be subcutaneous nodules (nodular swelling beneath the skin),
- there must be radiographic changes typical of active rheumatoid arthritis plus evidence of clinical deformity.

The symptoms must have been present for at least six months before a claim can be submitted and in the opinion of our Medical Officer(s) all appropriate treatments such as disease modifying agents have been prescribed for at least six months.

What is it?

An auto-immune disease that causes inflammation of the joints as the joint tissue is attacked by the immune system. Joint damage can result in stiffness, deformities and lack of mobility.

What can you claim for?

A definite diagnosis of rheumatoid arthritis by a Consultant Rheumatologist that meets all of the features described.

Related conditions that will affect a claim

Inflammatory polyarthropathy, psoriatic arthropathy.
([click here for details](#))



Additional illness definitions

Terminal illness – where death is expected within 12 months

Definition

A definite diagnosis by the attending Consultant of an illness that satisfies both of the following:

- the illness either has no known cure or has progressed to the point where it cannot be cured, and
- in the opinion of the attending Consultant the illness is expected to lead to death within 12 months.

What is it?

A disease that cannot be cured or adequately treated and that is reasonably expected to result in the death of the sufferer within a relatively short period of time (in the case of the Canada Life Group Critical Illness arrangement the period is defined as within 12 months). The term is commonly used for progressive diseases such as cancer and advanced heart disease.

What can you claim for?

Any terminal illness where your Consultant and our Medical Officer both agree that death is likely to occur within 12 months.

Related conditions that will affect a claim

All covered Critical Illnesses.

[\(click here for details\)](#)

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

Click here to return
to the list of illnesses



Additional illness definitions

Third degree burns – covering 20% of the body surface area

Definition

Burns that involve damage or destruction of the skin to its full depth through to the underlying tissue and covering at least 20% of the body's surface area.

What is it?

- First-degree burns affect only the outer layer of the skin.
- Second-degree burns affect both the outer and underlying layer of skin.
- Third-degree burns extend into deeper tissues and involve the full thickness of the skin.

What can you claim for?

Burns that damage or destroy the full thickness of the skin and affect at least 20% of the body surface.

Related conditions that will affect a claim

There are no related conditions applicable.

[\(click here for details\)](#)

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

Click here to return
to the list of illnesses



Additional illness definitions

Traumatic brain injury – resulting in permanent symptoms

Definition

Death of brain tissue due to traumatic injury resulting in permanent neurological deficit with persisting clinical symptoms.

What is it?

A physical assault or injury to the head that leaves the person with brain damage that is expressed in permanent neurological or physical disability.

What can you claim for?

A head injury from sudden trauma that has caused death of brain tissue resulting in permanent neurological or physical disability.

Related conditions that will affect a claim

There are no related conditions applicable.

[\(click here for details\)](#)

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

Click here to return
to the list of illnesses



Total Permanent Disability (TPD)

Total permanent disability is not a 'Core' or 'Additional' illness but is a separate condition that must have been specifically selected by your employer in order to be a policy feature. Please check with them if you are not sure whether this cover is provided.

Total permanent disability means a total permanent and irreversible disability arising from injury or disease. The disability must reasonably be expected to last throughout life, regardless of when policy cover ends and cannot be reasonably improved upon by medical treatment and/or surgical procedures used by the NHS at the time of the claim.

Benefit will only be payable under the policy as a result of Total Permanent Disability upon survival for more than six months from the date of total permanent disability having suffered total permanent disability throughout this period.

The type of TPD cover offered will be on 1 of 3 bases -

a) Total permanent disability – a disability which results in a member being unable before the greater age of 65 and state pensionable age to do their own occupation ever again (Own occupation basis)

Loss of the physical or mental ability through an illness or injury before the greater age of 65 and state pensionable age to the extent that the member is unable to do the material and substantial duties of their own occupation ever again. The material and substantial duties are those that are normally required for, and/or form a significant and integral part of, the performance of the person's own occupation that cannot reasonably be omitted or modified.

Own occupation means the member's trade, profession or type of work done for profit or pay. It is not a specific job with any particular employer and is irrespective of location and availability.

The relevant specialists must reasonably expect that the disability will last throughout life with no prospect of improvement, irrespective of when the cover ends or the member expects to retire.

For the above definition, disabilities for which the relevant specialists cannot give a clear prognosis are not covered.

b) Total permanent disability – a disability which results in a member being unable before the greater age of 65 and state pensionable age to do a suited occupation ever again (Suited occupation basis)

Loss of the physical or mental ability through an illness or injury before the greater of age 65 and state pensionable age to the extent that the member is unable to do the material and substantial duties of a suited occupation ever again. The material and substantial duties are those that are normally required for, and/or form a significant and integral part of, the performance of a suited occupation that cannot reasonably be omitted or modified.

A suited occupation means any work the member could do for profit or pay taking into account their employment history, knowledge, transferable skills, training, education and experience, and is irrespective of location and availability.

The relevant specialists must reasonably expect that the disability will last throughout life with no prospect of improvement, irrespective of when the cover ends or the member expects to retire.

For the above definition, disabilities for which the relevant specialists cannot give a clear prognosis are not covered.

Please click on the icon for further information about Total Permanent Disability (TPD)



Total Permanent Disability (TPD) – continued

c) Total permanent disability – a disability which results in an insured person being unable before the greater of age 65 and state pensionable age to look after themselves ever again

Loss of the physical ability through an illness or injury before the greater of age 65 and state pensionable age to do at least 3 of the 6 tasks listed below ever again.

The relevant specialists must reasonably expect that the disability will last throughout life with no prospect of improvement, irrespective of when the cover ends or the insured person expects to retire.

The insured person must need the help or supervision of another person and be unable to perform the task on their own, even with the use of special equipment routinely available to help and having taken any appropriate prescribed medication.

The tasks are:

- **Washing** – the ability to wash in the bath or shower (including getting into and out of the bath or shower) or wash satisfactorily by other means.
- **Getting dressed and undressed** – the ability to put on, take off, secure and unfasten all garments and, if needed, any braces, artificial limbs or other surgical appliances.
- **Feeding yourself** – the ability to feed yourself when food has been prepared and made available.
- **Maintaining personal hygiene** – the ability to maintain a satisfactory level of personal hygiene by using the toilet or otherwise managing bowel and bladder function.
- **Getting between rooms** – the ability to get from room to room on a level floor.
- **Getting in and out of bed** – the ability to get out of bed into an upright chair or wheelchair and back again.

For the above definition, disabilities for which the relevant specialists cannot give a clear prognosis are not covered.

Excluded related conditions for all types of total permanent disability cover.

The related conditions which would be considered in relation to pre-existing conditions exclusions are multiple sclerosis, muscular dystrophy, motor neurone disease, Parkinson's disease, progressive supranuclear palsy or any disease or disorder of the central nervous system including the spinal cord or column. Also back, neck or joint pain, arthritis and diabetes mellitus.

Any questions?

Please ring the Canada Life Claims Helpline on **0117 916 4463**

Claims information

This guide has been designed to provide you with guidance when considering whether to submit a Critical Illness claim to your employer.

The section below provides an overview of how a claim should be made, but if you require any further assistance, please speak with your employer or contact the Canada Life Claims Helpline on **0117 916 4463**

How to claim

Your employer may not provide cover for all of the conditions listed in this guide. Please check with them if you are in any doubt as to whether a condition from which you are suffering, is covered.

If a claim is to be made, it would be submitted by your employer in their capacity as the policyholder (there is no contractual relationship between Canada Life and yourself as a member of their policy). If you need your employer to submit a claim, please contact them as soon as possible after one of the conditions listed (and for which your employer provides cover) has been diagnosed.

Once your employer has agreed to submit the claim, a Personal Statement needs to be completed.

This is available to download from www.canadalife.co.uk/group, providing Canada Life's claims assessors with some brief details of the claim. It also includes the 'claimant's consent' under the Access to Medical Reports Act granting Canada Life the authority to obtain further information from your medical attendants. Canada Life needs this to ask them directly for further information required to assess the claim.

Important note: the distinction between Core and Additional conditions

Your employer may have chosen to offer cover for just Core illnesses or they may have instead opted to insure the list of Additional Illnesses also detailed in this guide as well. Please check with your employer if you are not sure whether you are covered for the Additional Illnesses.

Important note

This guide is only intended to provide an overview of the conditions covered under new policies written at today's date and therefore the cover offered under your employer's policy may differ from that stated here. Nothing in this guide shall override the terms and conditions stated in your employer's policy document.

Our forms are available to download from our website: www.canadalife.co.uk/group

Canada Life Limited, registered in England no. 973271. Registered Office: Canada Life Place, Potters Bar, Hertfordshire EN6 5BA.

CLFIS (UK) Limited, registered in England no. 04356028 is an associate company of Canada Life Limited. Registered Office: Canada Life Place, Potters Bar, Hertfordshire EN6 5BA.

Canada Life Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority.

GRP843 – 1115R



Canada Life Limited
3 Rivergate, Temple Quay, Bristol BS1 6ER
Telephone 0345 223 8000