# Protect your most valuable asset — your ability to earn an income



WHAT HAPPENS
IF I CAN'T
WORK?



I RUN MY OWN SMALL BUSINESS. WHAT'S NEXT?





WHAT WOULD BE THE BEST COVERAGE FOR US?





I'M FREELANCE.
CAN I GET
COVERAGE?



DO YOU COVER PEOPLE IN JOBS LIKE MINE?









# Protect your income in case of disability or illness

If a long-term illness or disability prevented you from earning your regular income, would you have the financial support you would need to maintain your family's lifestyle? If you're self-employed, a contract worker or a retailer, the answer is probably no. In fact, thousands of Canadians have traditionally been unable to purchase the disability income protection they

need, either because it's too expensive, or because they work in an industry that doesn't qualify (such as construction).

At RBC Insurance®, we believe every Canadian should have access to simple, affordable income protection. That's why we offer The Fundamental Series® disability income protection product.





# Protection made easy

The Fundamental Series disability income protection product is different from traditional disability offerings. Your acceptance is guaranteed for Injury-only coverage upon satisfying a few simple qualifying statements, and you have the option to purchase Illness coverage as well. It's specifically designed to be:

- simple to apply for
- affordable, even for middle-income earners
- available to the self-employed, contract workers, farmers, construction workers, truckers and others without group disability coverage, or to individuals who may need to top up their existing coverage

You can choose coverage that protects you only when you are not at work or coverage that is in force 24 hours a day, both on and off the job. This can make it a valuable extra layer of insurance protection if you are already covered on your job site by workers' compensation.



DO YOU COVER PEOPLE IN JOBS LIKE MINE?

# Solid protection

A disability can disrupt your lifestyle. You may no longer have an income, but you and your family will continue to have bills to pay. You will want to stay in your home and maintain your usual lifestyle until you have recovered and are about to return to work. The Fundamental Series disability income protection product can help. It replaces a portion of your income if an injury prevents you from working for an extended period of time. You can also purchase Illness coverage to replace a portion of your income if an illness prevents you from working.

A monthly benefit is payable if you become *totally disabled* from an injury (or from an illness if you also purchased Illness coverage). *Totally disabled* means that:

- you are unable to perform the important duties of your regular occupation; and
- you are not engaged in any gainful occupation; and
- you are receiving a physician's care.

These benefits are payable for a maximum of 36 months. After that time, benefits may continue to be paid; however, the definition of *totally disabled* changes to mean that:

- you are unable to engage in any reasonable occupation for which you are, or may reasonably become, fit by education, training or experience; and
- you are receiving a physician's care.

# Guaranteed acceptance for Injury-only coverage

It's easy to apply. No medical examination is required, and acceptance is guaranteed by answering of a few simple questions. The insurance is available to anyone between the ages of 18 and 69.

### Guaranteed renewable

This policy is *guaranteed renewable*. In other words, once you're accepted, you are protected as long as you continue to pay the premiums (guaranteed renewal to age 75 for Injury and age 70 for Illness).



## Flexible choices to meet your needs

You can choose to have benefits payable for five years or to age 70. You can also choose the elimination period that meets your needs best. The elimination period is the amount of time you need to wait for benefits to start after you've been injured or you become ill.

For injuries, you can choose an elimination period of 0, 30 or 120 days. A 0-day elimination period means your benefits can start the very same day that you're injured. For illness, you can choose an elimination period of 30 or 120 days.

# **Special features and options**

The Fundamental Series disability income protection product has a number of other valuable benefits, beyond disability protection. These include the following:

- Partial disability benefit. If you are partially disabled, you can receive 50% of the regular benefit for up to six months.
- Waiver of premium. If you're totally disabled, your premiums are waived after 30 days (or the end of your elimination period, if longer) for as long as you're receiving benefits.

- Return-to-work assistance. You may be able to receive rehabilitation and financial assistance to help you return to work.
- Best Doctors<sup>‡</sup>. When you purchase illness coverage, you have access to the Best Doctors consultation
- Accidental medical emergency benefit. If you are injured in an accident and have to pay for emergency medical care as a result, this benefit may reimburse you up to \$10,000.
- Accidental Death & Dismemberment. This optional rider provides a benefit of up to \$500,000 if you have an accident that results in loss of life, eyesight or one or more limbs.

## **Business Overhead Expense protection**

If you run your own business, this coverage helps cover the fixed operating expenses for your office while you are disabled.

There are certain circumstances where benefits are not payable. The policy contains exclusions related to:

- flying in a non-commercial aircraft
- professional athletic and underwater activities

# I'M FREELANCE. CAN I GET COVERAGE?



- dangerous sports (e.g. sky diving, bungee jumping)
- impaired driving
- self-inflicted harm or attempted suicide
- committing a criminal offence
- drugs and narcotics
- riots or acts of war
- pregnancy and childbirth
- infections related to AIDS and HIV
- subjective conditions (e.g. fibromyalgia, chronic fatigue syndrome)
- mental and nervous disorders
- participation in the armed forces

This policy also contains limitations related to:

- back and neck injuries
- degenerative disc disease
- soft tissue injuries

This list is a summary only. Please review the policy itself for the complete terms and conditions, including the limitations and exclusions.

# **Key definitions**

### Business income means:

- a) your share of pre-tax profits or losses from an incorporated business which was partly or wholly owned by you and in which you were working on a full- or parttime basis; or
- b) your share of business income, less your share of the business expenses that are deductible for federal income tax purposes, from an unincorporated business which was partly or wholly owned by you and in which you were working on a full- or part-time basis.

Cost of goods sold means the direct costs attributable to the production of the goods sold by the business. It includes the cost of materials and supplies but not the cost of labour. If you are a driver, cost of goods sold includes the cost of fuel used by the business.

*Employment income* means your salary, wages, commissions, fees and any regular annual or periodic bonus earned from employment, minus any employment expenses that are deductible from employment income under the Income Tax Act of Canada.

*Gross revenue* means your share of business revenue, before business expenses and taxes, from an incorporated or unincorporated business which was partly or wholly owned by you and in which you are working on a full-time or part-time basis. *Gross revenue* is reduced by the sum of the following: a) *cost of goods sold*; and

b) any salaries, wages or bonuses paid as employee wages to individuals employed with the business but not including any amounts paid to you.

*Guaranteed renewable* means that once issued we cannot change or cancel the policy without your consent, up until you turn age 75 for Injury coverage and until you turn age 70 for Illness coverage.

# *Partially disabled* or *partial disability* means that:

- a) you are not totally disabled; and
- b) you are engaged in your *regular occupation* or any gainful occupation; and
- c) due directly to a continuing injury or illness (if Illness coverage was purchased), you are unable to perform either:
  - i) one or more important duties of your *regular occupation*; or
  - ii) the important duties of your *regular occupation* at least one-half of the time normally required; and
- d) you are receiving a physician's care.

**Reasonable occupation** means any occupation in which you could reasonably expect to earn an annual income equal to or greater than the Reasonable Occupation Income shown in the same row of the Benefit Determination Chart in your policy that shows your Maximum Eligible Monthly Benefit.

**Regular occupation** means the occupation or occupations in which you are regularly engaged for compensation at the time you become disabled.

# *Totally disabled* or *total disability* means that:

- a) due directly to an injury or illness (if Illness coverage was purchased), you are unable to perform the important duties of your *regular occupation*; and
- b) you are not engaged in any gainful occupation; and
- c) you are receiving a physician's care.

After disability benefits have been payable for 36 months during any period of disability, then *total disability* means that:

- a) due directly to an injury or illness (if Illness coverage was purchased), you are unable to engage in any *reasonable occupation* for which you are, or may reasonably become, fit by education, training or experience; and
- b) you are receiving a physician's care.

Definitions of you, your, injury, disability, physician and other related terms can be found in your policy.

# What to expect when you make a claim

We understand that when something unfortunate happens, dealing with the aftermath can be stressful. That's why we try to support you and make things as easy as possible.

# In general

- You will need to complete a claim form and return it to us. If you don't have the form, we will send you one upon your request. Your physician will have to complete the relevant section of this form.
- Also, a form may have to be completed by your employer.
- It is possible that more information will be required, such as details regarding occupational duties, financial information or further medical documentation. We will advise you as to what additional information is required.
- If you have your insurance policy or policy number handy when you call, it will make it easier for us to provide assistance. But if you don't have it, we will still be able to assist you.

# Monthly Pre-Authorized Debit Agreement

The Payor(s) agree(s) that:

- 1. (a) RBC Life is authorized to make scheduled monthly withdrawals to pay the premium in accordance with the premium schedule set out in the policy, including the initial premium, against the account at the financial institution provided in the application for insurance, or that the Payor(s) may later designate.
  - (b) RBC Life is not required to provide notification before the initial premium is debited, or if the amount of withdrawal should vary.
  - (c) Unless otherwise indicated in the application, such withdrawals shall be dated on the day of the month on which the premium is due under the policy.
  - (d) The financial institution indicated in the application is authorized now or at any subsequent time to honour any requests made by RBC Life to withdraw premiums or fees from the account indicated below, which may include a redraw within 30 days should any withdrawal not clear the account.
  - (e) Notification of any change to the information provided below shall be given to RBC Life by the Payor(s) a minimum of five days prior to the next scheduled withdrawal. The Payor(s) agrees that from time to time they may authorize RBC Life to deduct such payments from another account upon the Payor's oral or written instructions.

- (f) This Agreement will terminate in respect of all policies included in it upon 10 days written notice by RBC Life or by the Payor(s). The Payor(s) may obtain further information on their right to cancel a PAD Agreement by visiting the Canadian Payments Association website at www.cdnpay.ca.
- (g) In the event that a PAD is disputed, the Payor(s) agrees to contact RBC Life. For recourse purposes, this PAD is considered a Personal PAD.
  - The Payor(s) has certain recourse rights if any debits do not comply with this Agreement. For example, the Payor(s) has the right to receive reimbursement for any PAD that is not authorized or is not consistent with this PAD Agreement. To obtain more information on recourse rights, the Payor(s) may contact their financial institution or visit www.cdnpay.ca.
- (h) The names and signatures of all persons required to authorize withdrawals from the account are indicated in the application or insurance.



# **Exclusions**

Your coverage is subject to the following exclusions:

- a) Benefits are not payable for a disability, or any other loss covered by this policy or rider, that results, directly or indirectly, from any injury that occurs while you are:
  - i. traveling or flying in any kind of aircraft, other than as a fare paying passenger in a certified passenger aircraft provided by a commercial airline on a regular scheduled or non-scheduled special or chartered flight, operated by a properly certified pilot, flying between duly established and maintained commercial airports;
  - ii. participating in any type of professional athletics activity or international athletic competition;
  - iii. participating in any type of professional underwater activities, including scuba diving and underwater salvage or welding repair or maintenance;
  - iv. engaging in any of the following activities: mountaineering, indoor or outdoor rock climbing, caving, parachuting, sky diving, hang gliding, bungee jumping, racing (for example, but not limited to, automobile, motorcycle or horse racing) or racing any water device (e.g. seadoo);
  - operating a vehicle while under the influence of any drugs (other than as prescribed and taken in accordance with the instructions of a physician), or while your blood alcohol level is greater than 80 milligrams per 100 milligrams of blood (0.08); or
  - vi. incarcerated.
- b) Benefits are also not payable for any period of disability, or any other loss covered by this policy or rider, that results, directly or indirectly, from:
  - i. illness or disease (if you purchased Injury-only coverage);
  - ii. intentionally self-inflicted harm or attempted suicide, including inhaling gas or absorbing fumes, whether you are sane or insane;
  - iii. any injury that occurs while you are committing or attempting to commit a criminal offence, under the laws in the jurisdiction where the offence took place;
  - iv. the use of any drug, poisonous substance, intoxicant or narcotic, other than as prescribed by and taken in accordance with the instruction of a physician;
  - engaging in an illegal occupation, a riot or insurrection or any form of public disturbance or an act of declared or undeclared war;
  - vi. normal pregnancy and childbirth; however, a disability due to complications of pregnancy that are life threatening to the mother or fetus will be covered for the term the complications alone directly cause disability or loss to the mother. These complications include but are not limited to toxemia, pernicious vomiting, postpartum hemorrhage and extra-uterine pregnancy;
  - vii, any type of opportunistic infection or sickness if you had Acquired Immune Deficiency Syndrome (AIDS) and/or had tested positive for Human Immunodeficiency Virus (HIV or any subtypes) or had symptoms of the above which were diagnosed or which manifested themselves prior to the applicable effective date;

- viii, any subjective condition, including, but not limited to, chronic fatigue syndrome, chronic pain syndrome, fibromyalgia, Epstein Barr syndrome, fibrositis, environmental illness, multiple chemical sensitivity or any other syndrome of a condition characterized predominantly by symptoms that cannot be confirmed with objective medical tests:
- any psychiatric, psychological, emotional, behavioural or nervous disorder, including but not limited to, depression, anxiety, stress or burnout, or any disorder related to substance abuse or dependency;
- service in the armed forces, the reserves or any other military organization.

# Limitations

# Back and neck injuries

Benefits for back and neck injuries will be considered for payment only where substantiated by diagnostic medical tests. Benefits for soft tissue injuries of the back, neck and surrounding tissues will be limited as described in the soft tissue injuries limitation below.

## Degenerative disc disease

Degenerative disc disease is deemed to be a disease or sickness for the purposes of the sickness exclusion in section 6.02. If Illness coverage was purchased, benefits for any period of disability that results, directly or indirectly, from degenerative disc disease will be limited to 20 days per period of disability up to a policy lifetime maximum of 120 days.

## **Soft tissue injuries**

If any portion of any period of disability results, directly or indirectly, from a soft tissue injury, benefits will be limited

- a) If your Occupational Class as shown on the Policy Schedule is Class "5" or "6," benefits are limited to 20 days for each period of disability.
- b) If your Occupational Class as shown on the Policy Schedule is Class "4," benefits are limited to 40 days for each period of disability.
- c) If your Occupational Class as shown on the Policy Schedule is Class "3," benefits are limited to 60 days for each period of disability.
- d) If your Occupational Class as shown on the Policy Schedule is Class "1" or "2," benefits for a disability that results, directly or indirectly, from a *soft tissue injury* are not limited for each period of disability. However, when you have received payments for a cumulative total of 36 months for all such periods of disability, no further benefits will be payable for soft tissue injuries.

Soft tissue injury means a contusion, a sprain or a strain, and the following conditions:

- a) Bursitis
- b) Carpal tunnel syndrome
- c) Epicondylitis (medial & lateral)
- d) Patellofemoral syndrome
- e) Palmar fasciitis

- f) Plantar fasciitis
- g) Rotator cuff injury
- h) Tarsal tunnel syndrome
- i) Tendonitis

# Collection and use of personal information

# **Collecting your personal information**

We (RBC Life Insurance Company) may from time to time collect information about you such as:

- information establishing your identity (for example, name, address, phone number, date of birth, etc.) and your personal background;
- information related to or arising from your relationship with and through us;
- information you provide through the application and claim process for any of our insurance products and services; and
- information for the provision of products and services.

We may collect information from you, either directly or through representatives. We may collect and confirm this information during the course of our relationship. We may also obtain this information from a variety of sources including hospitals, doctors and other health care providers, the MIB, Inc., the government (including government health insurance plans) and other governmental agencies, other insurance companies, financial institutions, motor vehicle reports and your employer.

## **Using your personal information**

This information may be used from time to time for the following purposes:

- to verify your identity and investigate your personal background;
- to issue and maintain insurance products and services you may request;
- to evaluate insurance risk and manage claims;
- to better understand your insurance situation;
- to determine your eligibility for insurance products and services we offer;
- to help us better understand the current and future needs of our clients;
- to communicate to you any benefit, feature and other information about products and services you have with us;
- to help us better manage our business and your relationship with us; and
- as required or permitted by law.

For these purposes, we may make this information available to our employees, our agents and service providers, and third parties, who are required to maintain the confidentiality of this information. In the event our service provider is located outside of Canada, the service provider is bound by, and the information may be disclosed in accordance with, the laws of the jurisdiction in which the service provider is located. Third parties may include other insurance companies, the MIB, Inc. and financial institutions. We may also use this information and share it with RBC® companies

We may also use this information and share it with RBC® companies (i) to manage our risks and operations and those of RBC companies, (ii) to comply with valid requests for information about you from regulators, government agencies, public bodies or other entities who have a right to issue such requests, and (iii) to let RBC companies know your choices under "Other uses of your personal information" for the sole purpose of honouring your choices.

If we have your social insurance number, we may use it for tax related purposes and share it with the appropriate government agencies.

Please note that this paragraph is not applicable if this form is submitted by an independent representative or a representative that is attached to a firm other than RBC Insurance<sup>®</sup>.

# Other uses of your personal information

- We may use this information to promote our products and services, and promote products and services of third parties we select, which may be of interest to you. We may communicate with you through various channels, including telephone, computer or mail, using the contact information you have provided.
- We may also, where not prohibited by law, share this information with RBC companies for the purpose of referring you to them or promoting to you products and services which may be of interest to you. We and RBC companies may communicate with you through various channels, including telephone, computer or mail, using the contact information you have provided. You acknowledge that as a result of such sharing they may advise us of those products or services provided.
- If you also deal with RBC companies, we may, where not prohibited by law, consolidate this information with information they have about you to allow us and any of them to manage your relationship with RBC companies and our business.

You understand that we and RBC companies are separate, affiliated corporations. RBC companies include our affiliates which are engaged in the business of providing any one or more of the following services to the public: deposits, loans and other personal financial services; credit, charge and payment card services; trust and custodial services; securities and brokerage services; and insurance services.

You may choose not to have this information shared or used for any of these "Other uses" by contacting us as set out below, and in this event, you will not be refused insurance products or services just for that reason. We will never use or share your health information for these purposes. We will respect your choices and, as mentioned above, we may share your choices with RBC companies for the sole purpose of honouring your choices regarding "Other uses of your personal information."

### Your right to access your personal information

You may obtain access to the information we hold about you at any time and review its content and accuracy, and have it amended as appropriate; however, access may be restricted as permitted or required by law. To request access to such information, to ask questions about our privacy policies or to request that the information not be used for any or all of the purposes outlined in "Other uses of your personal information" you may do so now or at any time in the future by contacting us at:

RBC Life Insurance Company P.O. Box 515, Station A, Mississauga, Ontario L5A 4M3

Telephone: 1-800-663-0417 Facsimile: 905-813-4816

# Our privacy policies

You may obtain more information about our privacy policies by asking for a copy of our "Financial fraud prevention and privacy" brochure about privacy, by calling us at the toll free number shown above or by visiting our website at www.rbc.com/privacysecurity.

# Receipt

| For your records   |   |           |     |
|--|---|-----------|-----|
| RECEIPT & INFORMATION NOTICE (This section must be completed and left with the applicant.)   |   |           |     |
| Loss of Income — Injury and Illness  |   |           |     |
| What you are applying for?   INJURY Only Coverage   ILLNESS Only Coverage   INJURY & ILLNESS Coverage  |   |           |     |
| INJURY coverage applied for:   |   |           |     |
| Coverage Type  | ☐ 24-hour ☐ Non-occupational                                    |           |     |
| Benefit Period   | ☐ 5 years or ☐ to age 70  |           |     |
| Elimination Period   | □ 0 days □ 30 days □ 120 days                                   |           |     |
| Monthly Benefit Amount   | □\$1,000 □\$2,000 □\$3,000 □\$4,000 □\$5,000 □\$6,000 □Other    | \$        | (A) |
| ILLNESS coverage applied for:  |   |           |     |
| Benefit Period   | ☐ 5 years or ☐ to age 70  |           |     |
| Elimination Period   | ☐ 30 days ☐ 120 days  |           |     |
| Monthly Benefit Amount   | □\$1,000 □\$2,000 □\$3,000 □\$4,000 □\$5,000 □\$6,000 □Other    | \$        | (B) |
| Accidental Death & Dismemberment   |   |           |     |
| What you are applying for? ☐ AD&D ☐ AD&D with AMER   |   |           |     |
| Benefit Amount   | □\$100,000 □\$200,000 □\$300,000 □\$400,000 □\$500,000          | \$        | (C) |
| BUSINESS OVERHEAD EXPENSE  |   |           |     |
| What you are applying for?  INJURY Only Coverage  INJURY & ILLNESS Coverage  |   |           |     |
| INJURY coverage applied f  | or:   |           |     |
| Monthly Benefit Amount   | □\$1,000 □\$2,000 □\$3,000 □\$4,000 □\$5,000 □\$6,000 □ Other L | \$        | (D) |
| ILLNESS coverage applied for:  |   |           |     |
| Monthly Benefit Amount   | □\$1,000 □\$2,000 □\$3,000 □\$4,000 □\$5,000 □\$6,000 □Other    | \$        | (E) |
| Monthly Premium (A+B+C   | +D+E)   | \$        |     |
| We will withdraw the first premium upon receipt of your application using the PAD information you provided us. Injury coverage will become effective on the date of the application if initial premium is honoured on presentation. Illness coverage is underwritten and effective the date specified on the policy.  Advisor Signature.  Print Name Here. |   |           |     |
| Advisor Signature  | Print Name Here   | Telephone |     |

## Protection from a name you can trust

RBC Insurance, through its operating entities, provides a wide range of travel, life, health, home, auto, wealth and reinsurance products and solutions, as well as creditor and business insurance services, to individual and group clients. With more than four million clients globally, RBC Insurance is one of the largest Canadian bank-owned group of insurance companies and among the fastest growing insurance organizations in the country.

If you have any questions about your policy or would like more information about The Fundamental Series disability income protection product or other RBC Insurance products, please speak with your Insurance Advisor.



This is a brief overview of the benefits, key definitions, and exclusions and limitations. Please refer to the policy for complete details. In the event of any inconsistencies between this and the policy's wording, the actual policy will prevail.

Underwritten by RBC Life Insurance Company.