

The Well Woman Insurance Plan with Return of Premium Benefit from BMO Insurance

Important Notes About Your Coverage

Thank you for your interest in the Well Woman insurance plan from BMO Insurance. We have prepared this Summary to help you better understand the benefits and main provisions of this plan. The complete terms of the plan, including exclusions and limitations (outlined below) are found in the Policy issued by BMO Life Assurance Company.

Schedule of Benefits

CASH benefits if you are diagnosed with one of the 7 covered female cancers	Two levels of Coverage	
	Enhanced Plan	Basic Plan
Diagnosis Benefit: CASH paid to you if you are diagnosed with a covered female cancer.	\$12,000	\$6,000
Monthly Income Benefit: Monthly CASH paid if you are diagnosed with a covered female cancer.	\$12,000 (\$1,000/ month for 12 months)	\$6,000 (\$500/ month for 12 months)
Hospital Cash Benefit: Daily CASH paid to you for every day you spend in the hospital within 2 years of diagnosis.	\$200 a day for up to 100 days. Up to \$20,000	\$100 a day for up to 100 days. Up to \$10,000
Surgery Benefit: CASH paid in the event of surgery related to the diagnosed cancer within 2 years of diagnosis	\$6,000	\$3,000
Total Cash Benefits:	Up to \$50,000	Up to \$25,000

COVERED FEMALE CANCERS means cancer of the breast, fallopian tube, cervix, ovary, uterus, vagina or vulva.

DIAGNOSE/DIAGNOSIS means that you have been diagnosed by a licensed physician in Canada or the U.S. (or other jurisdiction approved by us) with a covered female cancer. You must survive this diagnosis for a period of 30 days.

Specific terms - Certain terms used in this summary have specific meanings under the plan and are defined in the policy that will be sent to you, if the policy is issued.

Monthly Cost: Well Woman Insurance Plan with Return of Premium Benefit

Your age at issue	Enhanced Plan	Basic Plan
18-25	\$11.90	\$7.43
26-30	\$18.49	\$10.72
31-35	\$27.66	\$15.10
36-40	\$37.92	\$19.91
41-45	\$48.19	\$24.74
46-50	\$57.83	\$29.45
51-55	\$86.70	\$43.90

Your monthly cost will not increase due to age. As a policyholder, your premium will not increase just because you get older. You will never be singled out for a premium increase. However, we may change the premium for all or selected classes of insureds.

Eligibility:

- This plan is available to women who are between the ages of 18 and 55. Coverage expires at age 70
- Residents of Canada only
- You must sign a Declaration of Health confirming that:
 - o You have never been diagnosed with a covered female cancer or with any other cancer
 - o You have not previously been declined insurance for female cancer coverage for reasons other than family history.

Benefits:

Subject to exclusions and limitations, the following benefits are available under this plan:

Diagnosis Benefit – this benefit will be paid to you if you are diagnosed by a licensed physician in Canada or the U.S. (or other jurisdiction approved by us) with a covered female cancer (cancer of the breasts, fallopian tubes, cervix, ovaries, uterus, vagina or vulva). You must survive for a period of 30 days after the diagnosis.

Income Benefit – if the Diagnosis Benefit has become payable, we will pay you the Income Benefit each month for 12 months.

Hospital Cash Benefit – we will pay you the daily Hospital Cash Benefit for each day you are hospitalized for treatment or surgery as a result of the diagnosed female cancer. Benefit is payable for up to 100 days.

Surgery Benefit – if you undergo surgery within two years of the diagnosis of the covered female cancer, we will pay you the Surgery Benefit.

Return of Premium Benefit – your coverage includes the Return of Premium Benefit (ROP). This is risk-free coverage.

If you never make a claim, we will refund all the premiums you have paid when you surrender your policy if the following two conditions are met

- You must have paid premiums for 20 years (or if you were between 51 and 55 when the policy was issued, until your age 70);
- You have not been paid any other benefit under the policy.

Your policy terminates and coverage ends when we refund you all the premiums paid. The ROP will automatically be paid

- When this policy terminates on your 70th birthday or
- On your death provided the policy has been in force for 20 years and no other benefit, including the ROP benefit, has been paid.

Exclusions and Limitations:

Expiry of Coverage

Coverage under this plan expires when you turn 70.

No Benefit will be payable:

- (a) if, prior to the effective date of your policy, you have previously been diagnosed with a Covered Female Cancer or with any other Cancer;
- (b) for any Covered Female Cancer contracted or diagnosed within the first six months following the effective date of your policy;
- (c) if you have any signs and/or symptoms and/or medical consultations or tests within six months prior to or following the effective date of your policy which subsequently lead to a diagnosis of a Covered Female Cancer, regardless of when the diagnosis is made;
- (d) if you have had an abnormal cervical 'smear' or 'PAP' test result within the last two years prior to the effective date of your policy, you will not be covered for Cancer of the cervix until subsequent test results have been normal for a period of two consecutive years;
- (e) for in situ Cancer, that is early Cancer that has not spread to neighbouring tissue;
- (f) if you have failed to follow relevant medical advice which you have received prior to the effective date of your policy, or which you received during the first six months following the effective date;
- (g) the Surgery Benefit will not be payable:
 - (i) if your stay in the Hospital for Surgery is less than 24 consecutive hours unless the Surgery is for a lumpectomy, mastectomy or breast reconstruction;
 - (ii) for diagnostic surgery including biopsy or aspiration.
- (h) if you give false, incorrect or incomplete information required to assess your eligibility for coverage under the policy.

If we deny your claim due to exclusions (b), (c), (d) or (f) above, all of your premiums will be refunded to you.

No benefit may be payable if you give false, incorrect or incomplete information required to assess your eligibility for coverage under this policy.

Terms and Conditions

The information above is a summary. For complete details on the terms and conditions of the Well Woman Insurance Plan, please refer to the policy which will be sent to you, if issued. In the event of a conflict, the policy will govern.