

**SecurePak Specific™
Group Extended Health and Drug Benefits
Stop-Loss Insurance**

GROUP MASTER POLICY

**SECTION 1
INSURING AGREEMENT**

In consideration of the statements set forth in the SecurePak™ Group Extended Health Benefit Stop-Loss Insurance Application attached hereto, and in consideration of the payment of premium in accordance with Items 8 and 10 of said SecurePak™ Group Extended Health Benefit Stop-Loss Insurance Application, the Insurer agrees to insure eligible Employees of a participant Policyholder of the Program Provider and their eligible dependents, if any (herein individually named the Insured Dependent), as set forth in Item 6 of the SecurePak™ Group Extended Health Benefit Stop-Loss Insurance Application attached hereto, (herein all individually called the Insured Person) for whom application is made, for loss resulting from injury or sickness to the extent herein provided and subject to all of the exceptions, limitations and provisions of this Policy.

**SECTION 2
EFFECTIVE DATE AND POLICY TERM**

As stated in Item 5 of the Declaration Page, this Policy takes effect at 12:01 a.m., Local Time, at the address of the Policyholder, from which date all insurance years and months shall be calculated subject to Section 3 following. It continues in force for the period for which the premium has been paid.

**SECTION 3
PREMIUM AND RENEWAL**

This Policy is issued in consideration of the payment of premiums in accordance with Items 8 and 10 of the SecurePak™ Group Extended Health Benefit Stop-Loss Insurance Application.

Premium shall be payable twice monthly upon receipt of invoice for the period for which it applies (Premium Due Date).

This Policy may be renewed subject to the written consent of the Insurer for further consecutive terms, not exceeding twelve (12) consecutive months, upon payment of the premium at the rate and in the amount determined at the time of renewal by the Insurer.

The insurer reserves the right to amend this contract, including rates and benefits, in the event of statutory, regulatory, or judicial changes that result in additional risks not contemplated by this Insurance Policy.

Sample - Subject to change without notice

**SECTION 7
SUBROGATION CLAUSE**

In the event of any payment of benefits under this Policy, the Insurer shall be subrogated to all the rights of recovery therefore which any Insured Person receiving such payment, or any beneficiary to whom such payment is made, may have against any person, legal person or entity who caused the injury or sickness giving rise to claim under this Policy. Such Insured Person or beneficiary shall execute and deliver any related instruments and papers and do whatever else is necessary to secure such rights and shall do nothing after the loss to prejudice such rights.

**SECTION 8
EXCLUSIONS, LIMITATIONS & SPECIAL PROVISIONS**

As provided in the Policyholder's ClaimSecure Master Application.

Notwithstanding any provision in the Policyholder's ClaimSecure Master Application, this insurance does not cover losses or expenses caused directly or indirectly, in whole or in part, by:

1. Medical Referrals outside Canada, unless such treatment is not available in Canada and such treatment outside Canada is specifically authorized and paid for, or partially paid for, by the Insured Person's Provincial or Federal Government Health Insurance Plan;
2. Any trip or sojourn outside of the Insured Person's province or territory of residence, except as provided under paragraph 1 above;
3. Any treatment, surgery, care, service, examination or device which is not covered in the Policyholder's ClaimSecure Master Application;
4. Any treatment, surgery, care, service, examination or device which:
 - a. is not Medically Necessary,
 - b. is provided or required for cosmetic purposes,
 - c. is conducted as an experiment,
 - d. is provided or required for non-curative reasons,
 - e. or exceeds what is ordinarily provided or required by current therapeutic practice;
5. Therapeutic or elective abortion;
6. Laser Vision Surgery;
7. Services or supplies associated with:
 - a. Erectile dysfunction which are in excess of five thousand dollars (\$5,000.00) per Insured Person per Policy Period,
 - b. The diagnosis or treatment of infertility which are in excess of five thousand dollars (\$5,000.00) per Insured Person per Policy Period,
 - c. Contraception, other than oral contraceptives and contraceptive patches;
8. Homeopathic preparations, unless Federal or Provincial legislation requires a prescription for their sale;
9. Drugs which do not legally require a prescription and pharmaceutical supplies which are either experimental or not approved by the Canadian government or Provincial government regulatory body in the Insured Person's Province or territory of residence;
10. Any benefit covered under a Health Service Spending Account or a Cost Plus plan;
11. Any treatment related to or provided for drug addiction;
12. Private duty nursing costs which are in excess of twenty-five thousand dollars (\$25,000.00) per Insured Person per Policy Period;

Sample - Subject to change without notice

Group Stop-Loss Exception(s)

Policyholder Name: Company ABC
Group Stop-Loss Policy Number: 2856xxxxSL
Effective Date: xx /xx / xx

Insured Persons within the group whose current claims experience in the most recent ten (10) months (annualized) is in excess of, or trending beyond, seventy-five percent (75%) of the stop-loss attachment level of the Master Policy will be limited to 133% (1/0.75) of their individual claims amount rounded to the next higher stop-loss level.

Name	Certificate Number	Relationship (member, spouse, child)	Attachment Level

Sample - Subject to change without notice