

**IN THE EVENT OF AN EMERGENCY,  
CALL THE ASSISTANCE CENTRE  
IMMEDIATELY**

# LeGrow's Travel

We Know Travel Best.

A Maritime Travel Company

Don't forget your  
Wallet Card!



Travel insurance.  
Because, hey,  
you never know.

Effective August 2014

**IN THE EVENT OF AN EMERGENCY, CALL:**

**1-877-737-6368**

Toll-free from the USA and Canada

**+1 (519) 251-7819**

Collect to Canada where available

Our Assistance Centre is there to help you  
24 hours a day, 365 days a year



Manulife, Manulife Financial, the Manulife Financial For Your Future logo and the Block Design are trademarks of The Manufacturers Life Insurance Company and are used by it, and by its affiliates under license.

Underwritten by The Manufacturers Life Insurance Company (Manulife Financial), and First North American Insurance Company, a wholly owned subsidiary of Manulife Financial.

*You have purchased the following insurance coverage. Please see inside for details.*

- |   |   |
|---|---|
| <input type="checkbox"/> Elite Plan               | <input type="checkbox"/> Annual Medical Plans           |
| <input type="checkbox"/> Elite Non-Medical Plan   | <input type="checkbox"/> Medical Only Plans             |
| <input type="checkbox"/> Recommended Plan         | <input type="checkbox"/> Visitors To Canada             |
| <input type="checkbox"/> Annual Recommended Plans | <input type="checkbox"/> Trip Cancellation Plus         |
| <input type="checkbox"/> Canada Plan              | <input type="checkbox"/> Trip Cancellation Only         |
| <input type="checkbox"/> Medical Plus Plan        | <input type="checkbox"/> Rental Vehicle Physical Damage |

Insured Name: \_\_\_\_\_

Policy Number: \_\_\_\_\_

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## ABOUT MANULIFE FINANCIAL

Whether you're travelling outside your province or out of the country for a few days or for a few months, Manulife Financial offers the personalized coverage you need to be financially protected against the cost of unexpected emergencies that may happen prior to or during your trip. No one expects to have a medical emergency away from home, or to have to cancel a trip due to an unforeseen emergency. But these events happen and they can be disruptive and expensive.

Since the very beginning, when Sir John A. Macdonald, Canada's first Prime Minister, became President of the company in 1887, Manulife Financial has been helping people feel financially secure.

**NOTICE REQUIRED BY THE ALBERTA INSURANCE ACT**  
**This policy contains a provision removing or restricting the right of the insured to designate persons to whom or for whose benefit insurance money is to be payable.**

### IMPORTANT NOTICE – PLEASE READ CAREFULLY

- Travel insurance is designed to cover losses arising from sudden and unforeseeable circumstances. It is important that you read and understand your policy before you travel as your coverage may be subject to certain limitations or exclusions.
- Your policy may not provide coverage for medical conditions and/or symptoms that existed before your trip. Check to see how this applies in your policy and how it relates to your departure date, date of purchase or effective date.
- In the event of an accident, injury or sickness, your prior medical history may be reviewed when a claim is made.
- If your policy provides travel assistance, you may be required to notify the designated assistance company prior to treatment. Your policy may limit benefits should you not contact the assistance company within a specified time period.

**PLEASE READ YOUR POLICY CAREFULLY BEFORE YOU TRAVEL**

If you are unable to do so because you are medically incapacitated, someone else must contact the Assistance Centre as soon as is reasonably possible.

**Failure to notify the Assistance Centre immediately will limit the benefits payable under this policy to:**

- 80% of eligible expenses based on reasonable and customary charges to a maximum of \$25,000 in the event of hospitalization; and**
  - In the event of out-patient medical consultation, a maximum of one visit per sickness or injury.**
- You will be responsible for the payment of any remaining charges.**

If you are unable to do so because you are medically incapacitated, someone else must contact the Assistance Centre as soon as is reasonably possible.

**Failure to notify the Assistance Centre immediately will limit the benefits payable under this policy to:**

- 80% of eligible expenses based on reasonable and customary charges to a maximum of \$25,000 in the event of hospitalization; and**
  - In the event of out-patient medical consultation, a maximum of one visit per sickness or injury.**
- You will be responsible for the payment of any remaining charges.**

## HELP IS JUST A PHONE CALL AWAY.

Enjoying your trip should be the first thing on your mind. Our multilingual Assistance Centre is there to help and support you 24 hours a day, 365 days a year with:

### Pre-Trip Information

- ✓ Passport and visa information
- ✓ Health hazards advisory
- ✓ Weather information
- ✓ Currency exchange information
- ✓ Consulate and embassy locations

### During A Medical Emergency

- ✓ Verifying and explaining coverage
- ✓ Referral to a doctor, hospital, or other health care providers
- ✓ Monitoring your medical emergency and keeping your family informed
- ✓ Arranging for return transportation home when medically necessary
- ✓ Arranging direct billing of covered expenses (where possible)

### Other Services

- ✓ Assistance with lost, stolen or delayed baggage
- ✓ Assistance in obtaining emergency cash
- ✓ Translation and interpreter services in a medical emergency
- ✓ Emergency message services
- ✓ Help to replace lost or stolen airline tickets
- ✓ Assistance in obtaining prescription drugs
- ✓ Assistance in obtaining legal help or bail bond

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# MARITIME TRAVEL INSURANCE POLICY

**IN THE EVENT OF AN *EMERGENCY*,  
CALL THE ASSISTANCE CENTRE  
IMMEDIATELY**

**1-877-737-6368** in the U.S. and Canada  
**+1 (519) 251-7819** collect where available

If *you* are unable to do so immediately because *you* are medically incapacitated, someone else must contact the Assistance Centre as soon as is reasonably possible.

**Failure to notify the Assistance Centre immediately will limit the benefits payable under this policy to:**

- a. **80% of eligible expenses based on *reasonable and customary charges* to a maximum of \$25,000 in the event of *hospitalization*; and**
- b. **in the event of out-patient medical consultation, a maximum of one visit per *sickness or injury*.**

***You* will be responsible for the payment of any remaining charges.**

## TABLE OF CONTENTS

Important Coverage Restrictions	Page 2
Important Information About <i>Your</i> Policy	Page 3
Medical Concierge Services Provided by StandbyMD	Page 5
Schedule of Maximum Benefits by Plan	Page 6
Travel Insurance Plans At A Glance	Page 10
General Information About <i>Your</i> Travel Insurance	Page 12
<i>Your</i> Coverage Starts	Page 12
<i>Your</i> Coverage Ends	Page 12
Automatic Extension	Page 13
To Stay Longer Than Planned	Page 13
Trip Cancellation Insurance and Trip Interruption Insurance	Page 15
I. What Does Trip Cancellation Insurance Cover?	Page 15
II. What Does Trip Interruption Insurance Cover?	Page 15
III. What Does Misconnection and Travel Delay Insurance Cover?	Page 19
IV. What Does Delayed Return Insurance Cover?	Page 20
V. What Else Does Trip Cancellation Insurance, Trip Interruption Insurance and Delayed Return Insurance cover?	Page 21
Exclusions & Limitations	Page 22
Default Protection Coverage	Page 25
Wedding Rider	Page 26
Emergency Medical Insurance	Page 27
Benefits	Page 27
Exclusions & Limitations	Page 32

Baggage Loss, Damage & Delay Insurance	Page 36
Benefits	Page 36
Exclusions & Limitations	Page 37
Personal Money Insurance	Page 38
Benefits	Page 38
Exclusions & Limitations	Page 38
Flight and Travel Accident Insurance	Page 39
Benefits	Page 39
Exclusions & Limitations	Page 40
Rental Vehicle Damage Insurance	Page 41
Benefits	Page 41
Exclusions & Limitations	Page 41
Concierge Services	Page 42
Emergency Medical Insurance For Visitors To Canada	Page 43
Benefits	Page 43
Exclusions & Limitations	Page 46
Terrorism Coverage	Page 49
What Else Do <i>You</i> Need To Know?	Page 50
Premium	Page 50
How Does This Insurance Work with Other Coverages?	Page 51
How to Make a Claim	Page 52
Definitions	Page 55
Notice on Privacy	Page 59
How to Reach <i>Us</i>	Page 60

## IMPORTANT COVERAGE RESTRICTIONS

### **YOU ARE NOT ELIGIBLE FOR ANY COVERAGE UNDER THIS POLICY IF *YOUR TRIP* IS BOOKED OR UNDERTAKEN:**

- contrary to medical advice;**
- while *you* require kidney dialysis;**
- after receiving a diagnosis of *terminal illness* with less than 6 months to live;**
- if *you* have ever had a bone marrow or organ transplant (except cornea transplant);**
- if *you* have been diagnosed with and/or received medical *treatment* for metastatic cancer in the last five years; or**
- if *you* have been prescribed or taken home oxygen for a lung condition in the last 12 months.**

### **Who can apply**

Insurance coverage is available if:

- You* have booked travel arrangements through Maritime Travel or an authorized *travel supplier*, or through an internet site made available by Maritime Travel.
- You* are insured under a Canadian provincial or territorial *government health insurance plan* (GHIP) or a Canadian university health insurance plan (UHIP) to have the full coverage under Emergency Medical Insurance; otherwise, the limit of coverage is **\$25,000**.

- For all insurance coverages offered in this policy (except the Visitors To Canada Plans), *your* policy must be purchased prior to the *effective date of your trip* and must cover the full duration of *your trip*.
- For the Annual Medical Plans and the Medical Only Plans, *you* must complete the medical *questionnaire* to determine whether *you* meet eligibility requirements for coverage if *you* are *age* 60 or older.
- For the Annual Recommended Plan and the Annual Medical Plans, application for insurance must be made prior to the purchase of *your first covered trip*.
- For the Visitors To Canada Plan, *you* must be in Canada on *your effective date* of insurance and *you* may not be covered under more than one policy during *your trip*.
- Please refer to the requirements set forth in the Travel Insurance Plans At A Glance on pages 10–11 to make sure *you* meet each stated requirement for *your* selected plan.
- When the *trip* value is to exceed **\$20,000**, *you* must complete the **“Questionnaire for Trips in Excess of \$20,000.”**

### **IF *YOU DO NOT MEET ALL OF THE ABOVE ELIGIBILITY REQUIREMENTS, YOU ARE NOT ELIGIBLE TO PURCHASE THIS INSURANCE.***

Coverage is applicable worldwide, except in countries at war or countries where political instability or hostility renders the area inaccessible by the **Assistance Centre** services. *You* may contact the Assistance Centre prior to *your* departure to confirm coverage for *your* destination.

### **IMPORTANT INFORMATION ABOUT *YOUR* POLICY:**

#### **Insurance Policy**

The policy and *confirmation* all form part of *your* insurance and must be read as a whole.

### **IMPORTANT INFORMATION ABOUT *YOUR* INSURANCE:**

This policy is underwritten by The Manufacturers Life Insurance Company (Manulife Financial), and First North American Insurance Company (FNA), a wholly owned subsidiary of Manulife Financial. ‡ – Please note that risks identified with ‡ throughout this document are covered by FNA.

Manulife Financial has appointed Active Claims Management Inc. (operating as “Active Care Management”) as the provider of all assistance and claims service under this policy.

Once *you* pay *your* premium and a policy number is issued, this policy becomes a binding contract that determines what benefits are payable to *you* by *us*.

#### **Read *your* policy**

- Please read this policy carefully before *you* travel, particularly the sections relating to the insurance coverages *you* have purchased.
- Some of the terms may limit the benefits payable to *you*. Check *your* contract form or *confirmation* for the plan(s) *you* have purchased, then refer to the plan description(s) using the Table of Contents at the beginning of this policy.
- While all of the information is important, *you* should pay particular attention to the Benefits and then the Exclusions & Limitations. These sections may limit the benefits payable to *you*.
- Throughout this policy *you* will notice that certain terms are brought to *your* attention with italics. These terms are explained in the Definitions section (page 55). Pay particular attention to these definitions as *we* have given a very specific meaning to these terms.

Please note that all eligible Emergency Medical benefits are not always paid up-front. In the event of a claim, please contact the Assistance Centre for further information.

By following the instructions in How to Make a Claim, *you* can speed up the assessment and, where applicable, payment of *your* claim.

### Carry the insurance card and policy with *you*

This policy and wallet size insurance card provide important *emergency* telephone numbers that *you* must call before receiving medical *treatment*. Carry this card with *you* at all times and bring *your* policy with *you* when travelling.

### REFUND OF PREMIUM

If *you* return *home* before the date *you* were scheduled to return *home* as per *your confirmation*, and have not had cause for a claim or started a claim, *you* may ask for a refund of the premium for the unused days. Premium refunds are only available for the **Medical Only Plan**, the **Visitors To Canada Plan** or the **Rental Vehicle Physical Damage Plan**.

Note: In addition, if the commercial rental agency declines *your* Maritime Travel Rental Vehicle Damage insurance, *we* will fully refund the premium for the Rental Vehicle Physical Damage Plan.

### 10-DAY RIGHT TO EXAMINE

Please take the time to read *your* policy and review all of *your* coverage. *You* may cancel this policy within 10 days of purchase if *you* have not departed on *your trip* and there is no claim in progress. Furthermore, *you* must not have experienced an event that could lead to a claim.

## MEDICAL CONCIERGE SERVICES PROVIDED BY StandbyMD

Maritime Travel Insurance is pleased to provide with any policy with Medical Benefits the additional value-added Medical Concierge Services to *you* when travelling to the **U.S., Mexico and the Dominican Republic**. These Medical Concierge Services include:

- *Physician* Telephonic Consultation 24/7 by a qualified *physician*
- 24/7 same-day coordination and delivery of lost/forgotten prescription maintenance medication, eye glasses or contact lenses and medical supplies
- 24/7 medical referrals to medical specialists, chiropractors, dentists, walk-in clinics, urgent care centres or *hospitals* for evaluation and medical *treatment*
- 24/7 access to *physician* house call visits in **select cities in the U.S., Mexico and the Dominican Republic**
- *Physician* co-ordination to an Emergency Room
- Consulting *physician* will “Fast Track” *you* through the Emergency Room in **select cities in the U.S., Mexico and the Dominican Republic**
- Consulting *physician* will communicate with the *hospital* to ensure continuity of care

To access this service, simply call the Assistance Centre using the phone numbers indicated on the wallet card.

### Medical Concierge Services provided by the PROGRAM

Disclaimer, Waiver, and Limitation of Liability: StandbyMD is not a medical provider. Medical providers utilized by StandbyMD are not employees, agents, nor in any way affiliated with StandbyMD, beyond accepting StandbyMD’s referrals. StandbyMD does not have any control, real or implied, over the medical judgment of participating medical providers, nor their actions or inactions. StandbyMD, upon making referrals under this policy, does not assume any responsibility for the availability, quality, results or outcome of any treatment or service, or any policyholder’s failure to obtain any treatment or service covered under these terms. Policyholders hereby forever and fully waive all rights against, hold harmless, release and forever discharge StandbyMD and its principals, parents, successors and assigns, of and from any and all claims, demands, actions, causes of action, and suits of any kind, nature, or amount which relate to, or in any way directly or indirectly flowed from the concierge medical services offered by StandbyMD. StandbyMD’s liability under these concierge medical services, if any, is limited solely to the amount of payment made to participating medical providers for the services obtained pursuant to StandbyMD’s referral. StandbyMD services are provided by Healthcare Concierge Services Inc.

**The StandbyMD program is provided by Healthcare Concierge Service, Inc. Manulife Financial and its agents are not responsible for the availability, quality, or results of services provided under the StandbyMD program.**

# SCHEDULE OF MAXIMUM BENEFITS BY PLAN

1	TRAVEL ASSISTANCE	ELITE PLAN		RECOMMENDED PLAN		ANNUAL RECOMMENDED PLAN		CANADA PLAN		MEDICAL PLUS PLAN		ELITE NON-MEDICAL PLAN	
		INCLUDED	COVERED AMOUNT	INCLUDED	COVERED AMOUNT	INCLUDED	COVERED AMOUNT	INCLUDED	COVERED AMOUNT	INCLUDED	COVERED AMOUNT	INCLUDED	COVERED AMOUNT
2	TRIP CANCELLATION AND TRIP INTERRUPTION												
	TRIP CANCELLATION		COVERED AMOUNT		COVERED AMOUNT		Up to \$1,500 per trip to a maximum of \$10,000 per year		COVERED AMOUNT		—		COVERED AMOUNT
	TRIP INTERRUPTION		UNLIMITED		UNLIMITED		Up to \$1,500 per trip to a maximum of \$10,000 per year		UNLIMITED		—		UNLIMITED
	CANCEL FOR ANY REASON		SEE PAGE 15		SEE PAGE 15		SEE PAGE 15		SEE PAGE 15		—		SEE PAGE 15
	EARLY RETURN		SAME CLASS FARE		SAME CLASS FARE		SAME CLASS FARE		SAME CLASS FARE		\$10,000		SAME CLASS FARE
	DEFAULT PROTECTION		SEE PAGE 25		SEE PAGE 25		SEE PAGE 25		SEE PAGE 25		SEE PAGE 25		SEE PAGE 25
	TERRORISM COVERAGE		SEE PAGE 49		SEE PAGE 49		SEE PAGE 49		SEE PAGE 49		SEE PAGE 49		SEE PAGE 49
	ACCOMMODATION & MEALS		\$1,500		\$600		\$600		\$600		\$600		\$1,500
	REPATRIATION OF REMAINS		REASONABLE EXPENSES		REASONABLE EXPENSES		REASONABLE EXPENSES		REASONABLE EXPENSES		REASONABLE EXPENSES		REASONABLE EXPENSES
	CREMATION/BURIAL AT DESTINATION		\$5,000		\$5,000		\$5,000		\$5,000		\$5,000		\$5,000
3	MISCONNECTION, TRAVEL DELAY & DELAYED RETURN		SEE PAGE 19-22		SEE PAGE 19-22		SEE PAGE 19-22		SEE PAGE 19-22		SEE PAGE 19-22		SEE PAGE 19-22
	ACCOMMODATION & MEALS		\$1,500		\$600		\$600		\$600		\$600		\$1,500

6

4	EMERGENCY MEDICAL												
	HOSPITAL & MEDICAL		\$5,000,000		\$5,000,000		\$5,000,000		\$5,000,000		\$5,000,000		\$5,000,000
	ACCIDENTAL DENTAL		\$5,000,000		\$5,000,000		\$5,000,000		\$5,000,000		\$5,000,000		\$5,000,000
	MEDICAL REPATRIATION		\$5,000,000		\$5,000,000		\$5,000,000		\$5,000,000		\$5,000,000		\$5,000,000
	ACCOMMODATION & MEALS		\$3,500		\$3,500		\$3,500		\$3,500		\$3,500		\$3,500
	HOSPITAL ALLOWANCE		\$2,000		\$2,000		\$2,000		\$2,000		\$2,000		\$2,000
	REPATRIATION OF REMAINS		REASONABLE EXPENSES										
	CREMATION/BURIAL AT DESTINATION		\$5,000		\$5,000		\$5,000		\$5,000		\$5,000		\$5,000
5	BAGGAGE LOSS, DAMAGE & DELAY		\$1,500		\$1,000		\$1,000		\$1,000		\$1,000		\$1,500
	PASSPORT REPLACEMENT		\$200		\$200		\$200		\$200		\$200		\$200
	BAGGAGE DELAY		\$500		\$400		\$400		\$400		\$400		\$500
	MAXIMUM PER ITEM		\$500		\$500		\$500		\$500		\$500		\$500
6	PERSONAL MONEY		\$300		\$100		\$100		\$100		\$100		\$300
7	FLIGHT & TRAVEL ACCIDENT												
	FLIGHT ACCIDENT		\$100,000		\$100,000		\$100,000		\$100,000		\$100,000		\$100,000
	TRAVEL ACCIDENT		\$50,000		\$50,000		\$50,000		\$50,000		\$50,000		\$50,000
8	RENTAL VEHICLE DAMAGE		—		—		—		—		—		—

7

BENEFIT SECTION		TRIP CANCELLATION PLUS PLAN	TRIP CANCELLATION ONLY PLAN	ANNUAL MEDICAL PLANS	MEDICAL ONLY PLAN	RENTAL VEHICLE PHYSICAL DAMAGE PLAN	VISITORS TO CANADA MEDICAL PLAN
1	TRAVEL ASSISTANCE	INCLUDED	INCLUDED	INCLUDED	INCLUDED	INCLUDED	INCLUDED
<b>2</b>	<b>TRIP CANCELLATION AND TRIP INTERRUPTION</b>						
	TRIP CANCELLATION	COVERED AMOUNT	COVERED AMOUNT	—	—	—	—
	TRIP INTERRUPTION	UNLIMITED	COVERED AMOUNT AFTER DEPARTURE	—	—	—	—
	CANCEL FOR ANY REASON	SEE PAGE 15	SEE PAGE 15	—	—	—	—
	EARLY RETURN	ECONOMY CLASS FARE	ECONOMY CLASS FARE	—	—	—	—
	DEFAULT PROTECTION	SEE PAGE 25	SEE PAGE 25	—	—	—	—
	TERRORISM COVERAGE	SEE PAGE 49	SEE PAGE 49	—	—	—	—
	ACCOMMODATION & MEALS	\$600	\$450	—	—	—	—
	REPATRIATION OF REMAINS	REASONABLE EXPENSES	REASONABLE EXPENSES	—	—	—	—
	CREMATION/BURIAL AT DESTINATION	\$5,000	\$5,000	—	—	—	—
<b>3</b>	<b>MISCONNECTION, TRAVEL DELAY &amp; DELAYED RETURN</b>	SEE PAGE 19-22	SEE PAGE 19-22	—	—	—	—
	ACCOMMODATION & MEALS	\$600	\$450	—	—	—	—

8

<b>4</b>	<b>EMERGENCY MEDICAL</b>						
	HOSPITAL & MEDICAL	—	—	\$5,000,000	\$5,000,000	—	PLAN LIMIT
	ACCIDENTAL DENTAL	—	—	\$5,000,000	\$5,000,000	—	\$2,000
	MEDICAL REPATRIATION	—	—	\$5,000,000	\$5,000,000	—	SEE PAGE 45
	ACCOMMODATION & MEALS	—	—	\$3,500	\$3,500	—	\$3,000
	HOSPITAL ALLOWANCE	—	—	\$2,000	\$2,000	—	—
	REPATRIATION OF REMAINS	—	—	REASONABLE EXPENSES	REASONABLE EXPENSES	—	\$10,000
	CREMATION/BURIAL AT DESTINATION	—	—	\$5,000	\$5,000	—	\$5,000
<b>5</b>	<b>BAGGAGE LOSS, DAMAGE &amp; DELAY</b>	\$1,000					
	PASSPORT REPLACEMENT	\$200	—	—	—	—	—
	BAGGAGE DELAY	\$400	—	—	—	—	—
	MAXIMUM PER ITEM	\$500	—	—	—	—	—
<b>6</b>	<b>PERSONAL MONEY</b>	\$100	—	—	—	—	—
<b>7</b>	<b>FLIGHT &amp; TRAVEL ACCIDENT</b>						
	FLIGHT ACCIDENT	\$100,000	—	—	—	—	—
	TRAVEL ACCIDENT	\$50,000	—	—	—	—	—
<b>8</b>	<b>RENTAL VEHICLE DAMAGE</b>	—	—	—	—	\$50,000	—

9

## TRAVEL INSURANCE PLANS AT A GLANCE

PLANS	INSURANCE BENEFITS AND FEATURES		
	Eligible Age****	Time Limits	Trip Cancellation* and Trip Interruption*
Elite	Up to Age 59	183 days	◆
	Age 60 or older	60 days	◆
Recommended	Up to Age 59	183 days	◆
	Age 60 or older	60 days	◆
Annual Recommended	Up to Age 59	15 or 30 days	◆
Canada (For travel within Canada)	No limit	183 days	◆
Medical Plus	Up to Age 59	183 days	◆
	Age 60 or older	60 days	◆
Elite Non-Medical	No limit	183 days	◆
Trip Cancellation Plus	Up to Age 29	365 days	◆
	Age 30 to 59	183 days	◆
	Age 60 or older	183 days	◆
Trip Cancellation Only	No limit	365 days	◆
Annual Medical	No limit***	Varies on plan selected	
Medical Only	No limit***	183 days	
Rental Vehicle Physical Damage	No limit (except of age to hold driver's licence and rental vehicle contract age requirement)	31 days	
Visitors To Canada	Over 30 days old and up to Age 69: \$25,000, \$50,000, \$100,000 or \$150,000	365 days	
	Age 70 to 85: \$25,000, \$50,000 or \$100,000	365 days	

\* *Default* coverage is provided in any plan that includes Trip Cancellation & Interruption Insurance.

\*\* Emergency Medical coverage is limited to a maximum of \$25,000 if *you* do not have valid coverage under a *government health insurance plan* or a Canadian university health insurance plan except for the Visitors To Canada plan.

**Family Coverage** is available to *you* if all family members to be insured under one policy are named in *your confirmation* and are under age 60, and *you* have purchased and paid for family coverage. The family coverage covers *you*, a member of *your family* (*spouse*, parent or adult son or daughter travelling with *you*) and *your child(ren)* or grandchild(ren). To be eligible for insurance under a plan that includes Emergency Medical coverage, the *child(ren)* or grandchild(ren) must be at least 31 days of age. Note: A maximum of 2 adults is permitted under family coverage.

Additionally, if *you* have an infant who is at least 31 days old and under 2 years of age who is an *immediate family* member, travelling with *you* and listed on the *confirmation* for this insurance, the infant will be covered at no extra charge under *your* policy if *you* have purchased the **Elite Plan**, the **Recommended Plan**, the **Annual Recommended Plan**, the **Medical Plus Plan**, the **Elite Non-Medical Plan**, the **Trip Cancellation Plus Plan** or the **Canada Plan**.

INSURANCE BENEFITS AND FEATURES					
Emergency Medical**	Baggage Loss, Damage & Delay	Personal Money	Flight & Travel Accident	Rental Vehicle Damage	Family Coverage (Under Age 60)
◆	◆	◆	◆		◆
◆	◆	◆	◆		
◆	◆	◆	◆		◆
◆	◆	◆	◆		
◆	◆	◆	◆		◆
◆	◆	◆	◆		◆
	◆	◆	◆		◆
	◆	◆	◆		◆
	◆	◆	◆		◆
◆					◆
◆					◆
				◆	
◆					◆
◆					◆

\*\*\* Applicants age 60 and over must complete the medical *questionnaire* to determine eligibility.

\*\*\*\* If *you* purchase any plan that includes Emergency Medical Insurance, *your child* or grandchild must be at least 31 days old to be insured.

PLANS	FAMILY PREMIUM CALCULATION
Elite, Elite Non-Medical, Recommended, Annual Recommended, Canada and Trip Cancellation Plus Plans	2.75 times the older (or only) parent's rate
Medical Plus, Annual Medical, Medical Only and Visitors To Canada Plans	2 times the older (or only) parent's rate
Trip Cancellation Only and Rental Vehicle Damage Plans	Family coverage not available

## GENERAL INFORMATION ABOUT *YOUR* TRAVEL INSURANCE

### YOUR COVERAGE STARTS

**For Trip Cancellation Insurance** included in: **Elite, Recommended, Elite Non-Medical, Medical Plus, Trip Cancellation Plus** and **Trip Cancellation Plans**, coverage starts at the date and time *you* pay the premium for that coverage (indicated as the purchase date on *your confirmation*). For Trip Cancellation Insurance included in the **Annual Recommended Plan**, coverage starts initially on the date and time *you* pay the premium for that coverage, provided *you* have already purchased *your* prepaid travel arrangements. After that date, coverage starts each time *you* purchase *your* prepaid travel arrangements. However, in order for a claim to be payable if ***you* cancel for any reason** and decide not to travel, *you* must have purchased *your* policy **within 48 hours** of booking *your trip*, or before any cancellation penalties applied.

**For the Visitors To Canada Plan**, coverage starts on the later of: i) the *effective date* of insurance as shown on *your confirmation*; or ii) the time and date *you* arrive in Canada from *home*.

**For the Annual Recommended and Annual Medical Plans**, coverage starts initially on *your* first travel date and after that date, it starts every time *you* leave *home*.

**All Annual Medical Plans** provide *you* with Emergency Medical insurance coverage for unlimited travel within Canada but outside *your* province or territory of residence, without additional premium.

**Rental Vehicle Damage Insurance** starts when *you* legally assume control of the *rental vehicle* as indicated on *your* rental contract.

**All other coverages** start on the later of: i) *your departure date*; or ii) the *effective date* as shown on *your confirmation*.

### YOUR COVERAGE ENDS

**For Trip Cancellation Insurance**, *your* coverage ends on the earlier of *your departure date* or the date *you* cancel *your trip*.

For **Rental Vehicle Damage Insurance**, *your* coverage ends at the moment *you* return *your rental vehicle* or the rental contract ends as shown on *your confirmation* or **31 days** after the rental contract started, whichever is earliest.

For the **Visitors To Canada Plan**, *your* coverage ends on the earliest of the following:

- the date *you* leave Canada to return *home*;
- when the number of days of coverage *you* purchased, as shown in *your confirmation*, expires;
- no later than 365 days after *your effective date* of insurance; or
- the first day *you* become insured under a Canadian provincial or territorial *government health insurance plan*.

**Other coverages** end on the earliest of:

- the date *you* return *home*\*; or
- when the number of days of coverage *you* purchased (as shown on *your confirmation*) expires; or
- the *expiry date* as shown on *your confirmation*.

\* If *you* have purchased the **Elite Plan**, the **Recommended Plan**, the **Annual Recommended Plan**, the **Canada Plan**, the **Medical Plus Plan**, the **Elite Non-Medical Plan**, the **Trip Cancellation Plus Plan** or the **Trip Cancellation Only Plan**, *your* coverage will not end if *you*

temporarily return to *your* province or territory of residence. In such a case, *your* policy will remain in effect up to *your* original return date except *we* will apply the *pre-existing condition* exclusion based on *your* new *departure date*, which under such circumstance, becomes the date *you* continue *your trip*.

### AUTOMATIC EXTENSION

*We* will extend *your* coverage automatically beyond the date *you* were scheduled to return *home* as per the return date indicated on *your confirmation* if:

- your common carrier* is delayed or *you* are delayed due to circumstances beyond *your* control. In these situations, *we* will extend *your* coverage for up to 72 hours; or
- you* or *your travel companion* or an *immediate family* member travelling with *you* is *hospitalized* on that date. In this case, *we* will extend *your* coverage during the *hospitalization* and for up to 5 days after discharge from the *hospital*; or
- you* or *your travel companion* or an *immediate family* member travelling with *you* has an *emergency* that does not require *hospitalization* but prevents travel (as documented by the attending *physician* at destination). In this case, *we* will extend *your* coverage for up to 72 hours.

However, if travel is medically possible before the applicable 5 days or 72 hours have passed, *we* will honour *your* claim for eligible expenses only until such earlier date.

In any case, *we* will not extend any coverage beyond 12 months after *your effective date* of insurance.

### TO STAY LONGER THAN PLANNED

#### Extensions:

If *you* have not yet departed on *your trip*, simply call *your* Maritime Travel agent to ask for the extension. If, however, *you* decide to extend *your trip* after departure, call the Assistance Centre prior to *your expiry date* at:

**1-877-737-6368 from the USA or Canada**

**+1 (519) 251-7819 from elsewhere (Call collect where available)**

*You* may be able to extend *your* coverage as long as:

- the total length of *your trip*, including any extensions, does not exceed the maximum allowed by *your government health insurance plan* or the maximum number of days allowable under the plan *you* have purchased;
- you* pay the additional premium; and
- you* have had no event that has resulted or may result in a claim.

Any extension after departure is subject to the approval of the Assistance Centre.

## ANNUAL RECOMMENDED AND ANNUAL MEDICAL PLANS

- Provide coverage for any number of *trips* taken within one year.
- Each *trip* taken can be up to the maximum days *you* have selected when *you* purchased *your* Annual Medical Plan.
- The Annual Recommended and Annual Medical Plans are issued for a maximum coverage period of 365 days commencing with the *effective date*.
- For a *trip* to be covered under the benefits of the Annual Recommended Plan or the Annual Medical Plan, it must start and end within the coverage period.

**Exception:** If a *trip* begins during the coverage period but extends beyond the *expiry date*, *you* can purchase:

- top-up coverage for any travel days that fall after the *expiry date*; or
- a new Annual Recommended Plan or Annual Medical Plan for the next 365-day period. The total duration of *your trip* cannot exceed the maximum *trip* length of the coverage duration *you* have chosen for *your* Annual Plan, unless it is topped up.

## TOP-UPS

Top-ups are available for the **Annual Recommended Plan** and the **Annual Medical Plan**. If *you* want to take a *trip* that is longer than the coverage duration *you* have chosen for *your* Annual Plan simply contact *your* travel agent before *your* coverage expires to purchase coverage for the additional days required. If *you* are topping up another insurer's plan, it is *your* responsibility to confirm with that insurer that a top-up is permitted on *your* existing plan with no loss of coverage. *You* will be able to top up *your* coverage if *you* pay the extra premium and the total length of *your trip* does not exceed the maximum allowed by *your government health insurance plan*. An extension to the *trip* length may be allowed if *you* obtain written approval from *your* Canadian *government health insurance plan*.

## TRIP CANCELLATION AND TRIP INTERRUPTION INSURANCE

Trip Cancellation and Trip Interruption Insurance is included in the **Elite Plan, Recommended Plan, Annual Recommended Plan, Canada Plan, Medical Plus Plan, Elite Non-Medical Plan, Trip Cancellation Plus Plan** and **Trip Cancellation Only Plan**.

To have full coverage under Trip Cancellation and Trip Interruption Insurance, *you* must purchase coverage for the full value of the non-refundable portion and the full duration of *your trip*.

**If *you* cancel for any reason and decide not to travel before *you* leave *home*, we will pay up to 50% of the covered amount for the prepaid portion of *your trip* that is non-refundable and non-transferable to another date. *You* must cancel *your trip* 16 days or more before *your departure date* as shown on *your confirmation* for this benefit to be valid. To cancel a *trip* before *your* scheduled *departure date*, *you* must cancel *your trip* with the travel agent or *travel supplier* immediately or, at the latest, the first business day following the cause of cancellation.**

**If *you* purchased *your* policy more than 48 hours after booking *your trip*, *your* claim will not be payable if *you* cancel for any reason and decide not to travel.**

### I. What does Trip Cancellation Insurance cover? Benefits –

If *you* are unable to travel due to a covered event listed immediately below that occurs before *you* leave *home*, **WE WILL PAY**, up to the covered amount:

1. For the prepaid unused portion of *your trip* that is non-refundable and non-transferable to another travel date.
2. The published cancellation penalties imposed by hotels for unused accommodations.
3. The change fee charged for rebooking the travel arrangements as originally booked for *your trip* when such an option is made available by Maritime Travel or an **Authorized Maritime Travel Supplier**, or through an internet site made available by Maritime Travel.
4. If *your travel companion* must cancel their *trip* due to a covered event, and *you* decide to go on *your trip* as planned, *we* will cover the cost of the next occupancy charge up to the covered amount.
5. At *your* option, the cost to catch up to *your trip*, if *you* qualify to cancel but choose instead to continue on *your trip*, providing the cost to catch up is less than the cost to cancel *your trip*.

### II. What does Trip Interruption Insurance cover? Benefits –

If *your trip* is interrupted due to a covered event listed immediately below that occurs on or after the day *you* plan to leave *home*, **WE WILL PAY**, up to the covered amount:

1. For the prepaid unused portion of *your trip* that is non-refundable and non-transferable to another travel date less the prepaid unused transportation *home*.

2. The additional cost of *your* one-way transportation by the most cost-effective itinerary (being the lesser of a one-way *fare* or change fee charged by the airline on existing tickets if this option is available) to *your* or *your* group's next destination, or to return *home*.
3. *We* will also reimburse, when no earlier transportation arrangements are available, *your* additional and unplanned hotel and meal expenses, *your* essential phone calls and taxi fares to a maximum of up to **\$150 per day**: a) to a maximum of **\$1,500** under the **Elite Plan** and the **Elite Non-Medical Plan**; b) to a maximum of **\$600** under the **Recommended Plan**, the **Annual Recommended Plan**, the **Canada Plan**, the **Medical Plus Plan** and the **Trip Cancellation Plus Plan**; and c) **\$450** under the **Trip Cancellation Only Plan**.
4. The published cancellation penalties imposed for the early return of a *rental vehicle* prior to the contracted date of return.
5. If *you* must interrupt *your trip* to attend a funeral or go to the bedside of a *hospitalized immediate family* member, *we* will reimburse *you* for the cost of a round-trip ticket *you* have paid for, up to the amount of a one-way *fare* to return *home*.

## COVERED EVENTS FOR I. TRIP CANCELLATION INSURANCE AND II. TRIP INTERRUPTION INSURANCE:

### Medical Condition

1. *You* or *your travel companion* develop(s) a *medical condition* which, in the written opinion of a *physician*, necessitates *you* cancelling, interrupting or delaying *your trip*.
2. A member of *your immediate family* or *your key-person*, a member of *your travel companion's immediate family* or their *key-person* develops a *medical condition* which, in the written opinion of their *physician* necessitates *you* canceling, interrupting or delaying *your trip*.
3. A *medical condition* which, in the written opinion of the attending *physician*, prevents *you* or *your travel companion* from participating in a sporting event when the purpose of *your trip* was to participate in that sporting event.
4. *You* or *your travel companion* are medically unable to receive an injection or medication that is suddenly required for entry into a country, region or city originally ticketed in *your* travel arrangements provided that such requirement was not mandatory on the date of application for insurance.
5. *You, your spouse, your travel companion* or *your travel companion's spouse* are quarantined.
6. The medical *treatment* that was the purpose of *your trip* outside of *your* province or territory of residence and had been arranged by *your government health insurance plan* or *your private health insurance plan* is cancelled or rescheduled, provided that the cancellation or reschedule is due to a reason beyond *your* control or the control of the medical facility providing the *treatment*. This benefit only applies if *you* have purchased the **Canada Plan**.

### Death

7. *You* or *your travel companion* die(s).
8. A member of *your immediate family* or *your key-person*, a member of *your travel companion's immediate family* or his *key-person* dies.
9. *Your* or *your travelling companion's* friend dies.

### Pregnancy or Adoption

10. *You, your spouse, your travel companion* or *your travel companion's spouse*:
  - a) become pregnant after the *effective date* and *your departure date* falls in the 9 weeks of the expected delivery date or any time after that date, or
  - b) are advised by the attending *physician* against travel during the first trimester of pregnancy, or
  - c) experience complications in the first 31 weeks of pregnancy and the attending *physician* advises against travel.
11. *You, your spouse, your travel companion* or *your travel companion's spouse* legally adopt(s) a *child*, provided the adoption notice was received after the *effective date*.
12. The early and unexpected birth of *your immediate family* member not travelling with *you* during *your insured trip*.

### Accommodations or Transportation

13. ‡ The person whose guest *you* will be during *your trip* is quarantined, admitted to a *hospital* in an *emergency* or dies.
14. ‡ *You, your spouse, your travel companion* or *your travel companion's spouse* are unable to occupy *your/their* principal residence because of an event that is independent of any intentional or negligent act on *your/their* part.
15. ‡ *You, your spouse, your travel companion* or *your travel companion's spouse* are unable to operate *your/their* place of business because of an event that is independent of any intentional or negligent act on *your/their* part.
16. ‡ *Your* or *your travel companion's* principal residence or place of business is burglarized within 7 days of the *departure date* or during *your trip*.
17. ‡ Fire, vandalism, burglary or a natural disaster renders *your* destination accommodations uninhabitable for the period of *your trip*.
18. ‡ Cancellation of a prepaid coach tour included in *your trip* (for any reason except supplier *default*) prior to *your* originally scheduled *departure date*, *we* will reimburse *you* up to **\$1,000** for the non-refundable prepaid airfare of the *common carrier* that *you* booked to connect with the cancelled coach tour.
19. ‡ Cancellation of a flight by an airline carrier that is providing a portion of *your trip*, *we* will reimburse *you* up to **\$1,000** for the non-refundable prepaid airfare of a domestic flight (covers flights booked for travel within Canada only) that *you* had booked to connect with the cancelled flight.

### Weather

20. ‡ Weather conditions, earthquakes or volcanic eruptions cause the scheduled *common carrier*, which *you* or *your travel companion* are travelling on, to be delayed for a period of at least 30% of *your trip*. If the delay is less than 30%, *you* may have other protection under the Misconnection & Travel Delay Benefit. See page 19.

### Employment and Education Obligations

21. ‡ *You, your spouse, your travel companion* or *your travel companion's spouse* are called to essential emergency service as a reservist, firefighter, emergency medical personnel, police force or armed forces during *your trip*.

22. ‡ *You, your spouse, your travel companion or your travel companion's spouse* involuntarily lose a permanent job (excluding contract or self-employment) due to layoff or dismissal without just cause, when actively employed with the same employer for at least 6 months prior to the insurance *effective date*.
23. ‡ *You, your spouse, your travel companion or your travel companion's spouse* are transferred by *your/their* respective employer and must move from *your/their* respective principal residence (for this benefit to apply, the person who is relocating must be an active full-time employee with that employer).
24. ‡ Cancellation of *your or your travel companion's* business meeting, conference or convention that is the main intent of *your trip* and was scheduled before *you* purchased this insurance, provided the cancellation is for a reason beyond *your* control or the control of *your* employer or the employer of *your travel companion*. This event must be between companies with unrelated ownership and, in the case of a conference or convention, *you or your travel companion* must be a registered delegate.
25. ‡ *You or your travel companion* are required to attend a university or college course exam and the date of the exam falls during *your trip*. This benefit applies if the exam date was published prior to *your* application for this insurance and was subsequently changed after *you* booked *your trip* and purchased this insurance.
26. ‡ *Your or your travel companion's* college or university classes are rescheduled to a date that falls during *your trip* due to circumstances beyond *your or your travel companion's* control. This benefit applies if both the unforeseen circumstances and the resulting rescheduling occur after *you* purchase this insurance.
27. ‡ The requirement that *you or your travel companion* attend a *professional career program* examination or a university or college course examination on a date that occurs during *your* insured *trip*, provided the examination date which was published prior to the date of *application* for insurance was subsequently changed after *your* travel arrangements were made and after *you* purchased this insurance.

### Government and Legal

28. ‡ *Your or your travel companion's* travel visa is not issued for a reason beyond *your/their* control.
29. ‡ *Your or your travel companion's* passport is not issued within the time confirmed to *you/them* in writing by Passport Canada, provided that *you or your travel companion* had personally submitted the application to an authorized passport office and that it had been reviewed and found satisfactory by Passport Canada authorized personnel. This applies only to Canadian citizens.
30. ‡ *You, your spouse, your travel companion or your travel companion's spouse* are: a) called to jury duty, or b) subpoenaed to be a witness or c) required to appear as a defendant in a civil suit.
31. ‡ Foreign Affairs and International Trade Canada issues a written formal warning after *you* purchase *your* insurance, advising or recommending that Canadian residents should not visit a destination included in *your trip*. This applies only to Canadian residents.

### Hijacking

32. ‡ *You, your spouse, your travel companion or your travel companion's spouse* are hijacked.

## III. What does Misconnection & Travel Delay Insurance cover? Benefits –

If any of the covered events listed immediately below prevent *you* from travelling as shown on *your confirmation*, **WE WILL PAY:**

If covered event #1 or #2 listed immediately below occurs before or on your originally scheduled *departure date*, we will pay:

- a) up to **\$1,000** for the additional cost of *your* one-way transportation by the most cost-effective itinerary (being the lesser of a one-way *fare* or change fee charged by the airline on existing tickets if this option is available) to *your* next destination;
- b) in addition, we will pay *your* additional and unplanned hotel and meal expenses, *your* essential phone calls and taxi fares to a maximum of **\$350 per day** to a maximum of **\$700**.

For Misconnection & Travel Delay on or after your originally scheduled *departure date*, we will pay up to a maximum of **\$1,000** under benefits a), b) and c):

- a) the unused prepaid portion of *your trip* (less the prepaid unused transportation *home*) that is non-refundable and non-transferable to another travel date (provided such expenses are not reimbursable by any other source);
- b) the additional cost of *your* one-way transportation by the most cost-effective itinerary (being the lesser of a one-way *fare* or change fee charged by the airline on existing tickets if this option is available) to *your* next destination or to return *home*.
- c) up to **\$100** for additional commercial pet care expenses if the misconnection or travel delay results in *your* returning *home* 24 hours later than originally scheduled.
- d) in addition, we will pay *your* additional and unplanned hotel and meal expenses, *your* essential phone calls and taxi fares to a maximum of:
  - i) **\$150 per day** to a maximum of **\$1,500** under the **Elite Plan** and the **Elite Non-Medical Plan**;
  - ii) **\$150 per day** to a maximum of **\$600** under the **Recommended Plan**, the **Annual Recommended Plan**, the **Canada Plan**, the **Medical Plus Plan** and the **Trip Cancellation Plus Plan**;
  - iii) **\$150 per day** to a maximum of **\$450** under the **Trip Cancellation Only Plan**.

### COVERED EVENTS FOR MISCONNECTION & TRAVEL DELAY INSURANCE

1. ‡ *You* miss *your* next connecting *common carrier* because the *common carrier* that is providing transportation for a portion of *your trip* leaves later than originally scheduled as a result of a schedule change.
2. ‡ The *common carrier* that is providing transportation for a portion of *your trip* leaves earlier than originally scheduled as a result of a schedule change and the ticket *you* have purchased for *your* prior connection via another *common carrier* becomes unusable.
3. *You or your travel companion* are delayed for at least 6 hours in arriving at *your trip* destination or returning to *your home* due to the delay or schedule change or cancellation of *your or your travel companion's common carrier*.
4. ‡ *You* miss a connection or must interrupt *your trip* because of the delay of *your or your travel companion's* private passenger *vehicle* or *common carrier*, when the delay is caused by the mechanical failure of the private passenger *vehicle* or *common carrier*, a traffic accident, an emergency police-directed road closure, weather conditions,

earthquakes or volcanic eruptions. *Your private passenger vehicle or common carrier* must have been scheduled to arrive at *your* point of boarding at least two (2) hours before the scheduled time of departure.

5. ‡ *You miss a connection or must interrupt your trip* because of a delay in clearing customs and security controls due to *your or your travel companion's* mistaken identity.

Only misconnection and delay expenses as calculated above will be payable under these circumstances.

Specifically any delays, schedule changes and cancellations caused by the following events are not covered:

1. Strike (other than an unannounced strike), labour disruption;
2. Supplier *default* or bankruptcy. Limited coverage applies with respect to *default*, see Default Protection Coverage on page 25;
3. Grounding of aircraft for failure to satisfy government safety regulations or security alerts.

For items 1 to 5 above, if *your* travel arrangements were not made through Maritime Travel, travel delay benefits will apply provided *your* travel arrangements meet the following connection times:

- a) **2 hours** between domestic airline connectors;
- b) **3 hours** between international or Canada/USA connections;
- c) **6 hours** between mixed connections such as an airline connecting to a land tour or cruise.

#### IV. What does Delayed Return Insurance cover? Benefits –

If any of the covered events listed immediately below happens after *you leave home* and makes it impossible for *you to return home* as shown on *your confirmation*, **WE WILL PAY** up to the covered amount for the length of time that *you* are prevented from travel for the following:

1. Additional and unplanned hotel and meal expenses, essential phone calls and taxi fares up to: a) **\$350 per day** to a maximum of **\$3,500** under the **Elite Plan** and the **Elite Non-Medical Plan**; b) **\$150 per day** to a maximum of **\$3,500** under the **Recommended Plan**, the **Annual Recommended Plan**, the **Canada Plan**, the **Medical Plus Plan** and the **Trip Cancellation Plus Plan**; and c) **\$150 per day** to a maximum of **\$1,750** under the **Trip Cancellation Only Plan**.
2. The additional cost of *your* one-way transportation by the most cost-effective itinerary (being the lesser of a one-way *fare* or change fee charged by the airline on existing tickets if this option is available) to return *home*.

If the delay is a result of a *medical condition*, it must be on the advice of the attending *physician* at *your* destination.

#### COVERED EVENTS FOR DELAYED RETURN INSURANCE:

1. *You* have a medical *emergency*.
2. A member of *your immediate family* has a medical *emergency* or dies at *your* destination.
3. *Your travel companion* has a medical *emergency* or dies at *your* destination.
4. The person whose guest *you* are during *your trip* is admitted to *hospital* with an *emergency* or dies.
5. *Your friend* at *your* destination dies.

#### V. What else does Trip Cancellation Insurance, Trip Interruption Insurance and Delayed Return Insurance cover?

1. In the event *your travel companion's plane* is delayed by weather conditions, earthquakes or volcanic eruptions for at least **30%** of *your trip*, and *your travel companion* decides not to go on the *trip* as booked, *we* will cover the cost of *your* next occupancy charge up to the covered amount.
2. In the event *you* die from a covered *medical condition* after the start of *your trip*, *we* will reimburse *your* estate, up to the covered amount, for *your* prepaid unused travel arrangements. *We* will also reimburse *your* estate:
  - a) the following reasonably incurred expenses for:
    - i) preparation of the deceased *insured*; and
    - ii) return transportation cost of the deceased *insured* in the *common carrier's* standard transportation container to the scheduled point of departure; or
  - b) up to **\$5,000** for burial or cremation at the place of death.

No benefit is payable for the cost of a headstone, a casket and/or funeral service expenses.

3. If *you* purchased the **Elite Plan**, the **Elite Non-Medical Plan**, the **Recommended Plan**, the **Annual Recommended Plan** or the **Canada Plan** and if *you* must interrupt *your trip*, *we* will reimburse *you* for up to **\$250** to cover the cost of prepaid unused non-refundable excursions that were not included in *your* original travel arrangements and that *you* booked onboard *your* cruise ship.
4. If *you* purchased the **Elite Plan** or the **Elite Non-Medical Plan** and the flight *you* are booked to fly on is overbooked and *you* are denied boarding as a result, *we* will pay up to **\$1,000** for the prepaid unused portion of *your trip* that is non-refundable and non-transferable to another date, provided *your trip* duration was a minimum of **7 days**.
5. If the primary reason for *your trip* was to be present at a wedding, funeral, sporting, theatrical, musical or other commercial entertainment event or conference, and *your trip* is delayed for reasons beyond *your* control, *we* will reimburse *you* for the cost of alternate transportation to get to *your* destination on time for the event, up to:
  - **\$600** if *you* have purchased the **Recommended Plan**, the **Annual Recommended Plan**, the **Canada Plan**, the **Medical Plus Plan**, the **Trip Cancellation Plus Plan** and the **Trip Cancellation Only Plan**; or
  - **\$800** if *you* have purchased the **Elite Plan** or the **Elite Non-Medical Plan**.
6. ‡ If a cruise that is included in *your trip* and insured under *your* Maritime Travel Insurance policy is cancelled due to mechanical failure, grounding, quarantine of the cruise ship, or repositioning of the cruise ship due to weather conditions, earthquakes or volcanic eruptions, and the cancellation occurs:
  - a) Before *you* leave *home*, *we* will reimburse *you* for *your* non-refundable prepaid airfare that is not part of *your* cruise package up to **\$1,000**.
  - b) After *you* leave *home* but prior to the departure of the cruise ship, *we* will reimburse *you* up to **\$1,000** for the lesser of:
    - i) the change fee charged by the airline carrier(s) to return *you home*, if such an option is available; or
    - ii) the extra cost of a one-way *fare* via the most cost-effective itinerary to return *you home*.

If *you* have purchased the **Elite Plan** or the **Elite Non-Medical Plan**, this benefit covers the cancellation of a cruise or a tour included in *your trip* and insured under *your* Maritime Travel Insurance if the cruise or tour is cancelled for any reason other than supplier *default*.

7. If *you* have purchased the **Elite Plan**, the **Recommended Plan**, the **Annual Recommended Plan**, the **Elite Non-Medical Plan**, the **Trip Cancellation Plus Plan** or the **Trip Cancellation Only Plan** and *your* or *your travel companion's* passport and/or travel visa is lost or stolen during *your trip* and *you* are unable to continue on *your trip* or to return *home* as originally planned, *we* will reimburse *you* for:
  - a) Reasonable travel and accommodation expenses until the travel documents are replaced; and
  - b) up to **\$1,000** for the additional cost of one-way transportation by the most cost-effective itinerary (being the lesser of a one-way economy transportation or the change fee charged by the airline on existing tickets if this option is available) to *your* next destination or to return *you home*.
8. If the primary reason for *your trip* was to attend a ticketed commercial event (sport, musical or other commercial entertainment) for which *you* had purchased and paid for tickets prior to booking *your trip* and purchasing this insurance, and such event is subsequently cancelled by the promoter of the event, *we* will pay, up to the covered amount, for the following:
  - a) If the event is cancelled before *you* leave *home*: 50% of the prepaid unused portion of *your trip* that is non-refundable and non-transferable to another travel date.
  - b) If the event is cancelled after *you* leave *home*:
    - i) the prepaid unused portion of *your trip* that is non-refundable and non-transferable to another travel date (less prepaid unused transportation *home*); and
    - ii) up to **\$1,000** for the additional cost of one-way transportation by the most cost-effective itinerary (being the lesser of a one-way economy transportation or the change fee charged by the airline on existing tickets if this option is available) to return *you home*.

### Exclusions & Limitations – What does Trip Cancellation & Trip Interruption Insurance **not** cover?

*We* will not cover expenses or benefits related to in whole or in part, directly or indirectly, to any of the following:

#### I. **Pre-Existing Condition Exclusions**

When reading this section, please take the time to review the definitions of “*medical condition*,” “*pre-existing condition*” and “*stable*” at the end of this booklet. The *pre-existing condition* exclusion which applies to *you* depends on the Covered Amount purchased for Trip Cancellation coverage as outlined below.

#### Trip Cancellation Covered Amount is less than \$20,000:

- *Your medical condition* or the *medical condition* of *your travelling companion* if the *medical condition* was NOT *stable* in the **3 months** before the *effective date* for this insurance.
- *Your heart condition* or the heart condition of *your travelling companion* if, during the **3 months** before the *effective date* for this insurance, *you* or *your travelling companion* have taken any form of Nitroglycerine more than once per week for the relief of angina.
- *Your lung condition* or the lung condition of *your travelling companion* if, during the **3 months** before the *effective date* for this insurance, *you* or *your travelling companion* required *treatment* with home oxygen or with Prednisone.

#### Trip Cancellation Covered Amount is \$20,000 or more:

- *Your medical condition* or the *medical condition* of any person who is the cause of *your claim*, if that *medical condition* was NOT *stable* in the **3 months** before the *effective date* for this insurance.
  - *Your heart condition* or the heart condition of any person who is the cause of *your claim* if, during the **3 months** before the *effective date* for this insurance, *you* or that person have taken any form of Nitroglycerine more than once per week for the relief of angina.
  - *Your lung condition* or the lung condition of any person who is the cause of *your claim* if, during the **3 months** before the *effective date* for this insurance, *you* or that person have required *treatment* with home oxygen or with Prednisone for *your/their lung condition*.
- II. *We* will not cover expenses or benefits related to in whole or in part, directly or indirectly, to any of the following events which are applicable to all coverages detailed in this section, including **Trip Cancellation, Trip Interruption, Misconnection & Travel Delay and Delayed Return Insurance**:
    1. Any reason, circumstance, event or *medical condition* affecting *you* or anyone, which *you* were aware of on or before the *effective date* for this insurance, and which may eventually prevent *you* from starting and/or completing *your trip* as booked when *you* purchase this insurance coverage.
    2. Death of a person who is ill when the purpose of *your trip* is to visit that person.
    3. *Your* suicide or attempted suicide or *your* intentional self-inflicted injury, whether sane or insane.
    4. *Your* committing or attempting to commit a criminal act.
    5. Any *medical condition, injury, sickness* or death related directly or indirectly to *your* abuse of medication(s), drug(s), alcohol, or any other toxic substance(s).
    6. *Your* disorder, *your* disease, *your* condition or *your* symptom that is emotional, psychological or mental in nature unless same results in *hospitalization* and this fact is substantiated by *hospital* records. This exclusion does not apply to major psychiatric illness such as psychosis, schizophrenia and major affective mood disorders.
    7. A *medical condition*:
      - that occurs during a *trip* when *you* knew that *treatment* may be sought or required for that condition; and/or
      - for which it was reasonable to expect before *you* left *home* that *you* would need *treatment* during *your trip*; and/or
      - for which future investigation or *treatment* was planned before *you* left *home*; and/or
      - which caused symptoms that would have caused an ordinarily prudent person to seek *treatment* in the 3 months before leaving *home*, and/or
      - that caused a *physician* to advise *you* not to go on *your trip*.
    8. A *child* who is born after *you* leave *home*; routine prenatal care; pregnancy or childbirth; or complications of *your* pregnancy or childbirth when they happen in the 9 weeks before or after the expected date of delivery.

9. Travel arrangements, expenses and or losses related to travel arrangements that were not booked through Maritime Travel or an **Authorized Maritime Travel Supplier**, or through an internet site made available by Maritime Travel and that have not been insured with Trip Cancellation and Interruption Insurance with a Maritime Travel Insurance Policy.
10. Any *medical condition* if the answers provided in the *questionnaire* for *trips* covered for \$20,000 or more are not truthful and accurate. This exclusion applies to the total covered amount purchased.
11. Any non-emergency, investigative or elective *treatment* such as cosmetic surgery, chronic care, rehabilitation, or any directly or indirectly related complications.
12. Fraud, concealment, or deliberate misstatement in relation to any matter affecting this insurance or in connection with the making of any claim hereunder.
13. An *act of war* or *act of terrorism*. Limited coverage applies with respect to an *act of terrorism*. See Terrorism Coverage provision.
14. Any loss resulting from:
  - a specific or related *medical condition* which *you* contracted in a foreign country during *your trip*; and/or
  - an *act of war* or an *act of terrorism*,
 when, before the *effective date* for this insurance, a written formal warning was issued by Foreign Affairs and International Trade Canada, advising Canadians not to travel to that country, region or city. For this exclusion, *medical condition* is limited to the reason for which the formal warning was issued and includes complications arising from such *medical condition*.
15. *Your* cancelling for any reason and deciding not to travel if *you* did not purchase this insurance within 48 hours of booking *your trip* or before any cancellation penalties applied.

### What are the other conditions that apply to Trip Cancellation Insurance?

If *you* cancel *your trip* before *your departure date*, *you* must advise a Maritime Travel agent within 72 hours of the cause of cancellation. Only the sums that are non-refundable on the date the reason for cancellation (covered event) occurs shall be considered for the purposes of the claim. Any delays in notifying a Maritime Travel agent will limit *your* benefit to the non-refundable amount that would have been payable on the date the cause for claim occurred.

Trip Cancellation for a *medical condition* must be recommended by the attending *physician* in the locality where the *medical condition* occurred.

See other conditions under How to Make a Claim.

### Default Protection Coverage

Default Protection Coverage is included in the **Elite Plan**, the **Recommended Plan**, the **Annual Recommended Plan**, the **Canada Plan**, the **Medical Plus Plan**, the **Elite Non-Medical Plan**, the **Trip Cancellation Plus Plan** and the **Trip Cancellation Only Plan**.

We will provide Default Protection Coverage subject to the benefit limits and exclusions listed below.

If *you* have purchased **Trip Cancellation & Interruption Insurance** and *you*:

- a) have directly contracted with a *travel supplier* who *defaults*; and
- b) as a result of the *default*, do not receive part or all of the *travel services* for which *you* have contracted; and

- c) cannot recover all of the cost of such undelivered *travel services* either from the *travel supplier*, any federal, provincial or other compensation fund, or from any other source that is legally responsible or under contract to reimburse *you* for the cost of such undelivered *travel services*,

then, we will reimburse *you* as follows:

- i) for *default* prior to *your departure date*: the non-refundable portion of the amount that *you* prepaid for such undelivered *travel services* up to the covered amount for the Trip Cancellation coverage that *you* purchased in connection with *your trip*; or
- ii) for *default* after *your departure date*:
  - the non-refundable portion of the amount that *you* prepaid for such undelivered *travel services* up to the covered amount for Trip Interruption coverage that *you* purchased in connection with *your trip* except prepaid unused transportation *home* and subject to the following benefit limits;
  - *your* additional and unplanned hotel and meal expenses, *your* essential phone calls and taxi fares up to a maximum of **\$200 per day** for up to **3 days**; and
  - up to the covered amount for the extra cost of *your* economy class transportation via the most cost-effective itinerary to *your* next destination or to return *you home*.

### Benefit Limits for Default Protection Coverage

The amount payable to *you* in respect of any one *trip* will not exceed **\$5,000 CDN**; and will not exceed **\$10,000 CDN** for all persons who are covered under the same Maritime Travel Insurance policy. Any benefits payable shall also be subject to an overall maximum aggregate payable limit specified below relating to all in-force travel policies issued by *us*, including this policy.

If total claims otherwise payable for this type of coverage under all travel policies issued by *us*, resulting from the *default* of one or more *travel suppliers* occurring within an applicable time period, exceed the maximum aggregate payable limit, then the amount paid on each claim shall be reduced on a pro rata basis so that the total amount paid in respect of all such claims shall be the maximum aggregate payable limit. The maximum aggregate limits are:

- a) **\$1,000,000 CDN** with respect to the *default* of any one (1) *travel supplier*; and
- b) **\$5,000,000 CDN** with respect to all *defaults* of all *travel suppliers* occurring in the same calendar year.

If, in *our* judgment, the total of all payable claims on account of the *default* of one or more *travel suppliers* exceeds the applicable limits, *your* pro-rated claim may be paid after the end of the calendar year in which *you* qualify for benefits.

### Exclusions for Default Protection Coverage

We will not cover any loss concerning, caused by or resulting from any of the following:

- a) Loss or damage, incurred by *you*, which is or can be recovered from any other source, including any federal, provincial or other compensation fund;
- b) Loss arising as a result of a *default* if, at the time of booking, the *travel supplier* is bankrupt, insolvent or in receivership or has sought protection from creditors under any bankruptcy, insolvency or similar legislation;

- c) Loss arising as a consequence of the bankruptcy or insolvency of a retail travel agent, agency or broker;
- d) Loss arising as a result of the *default* of a foreign *travel supplier* if the *travel services* to be provided by such foreign *travel supplier* are not part of a package tour sold to *you*;
- e) Losses incurred by an individual who has not purchased coverage for **Trip Cancellation & Interruption Insurance** coverage under the Maritime Travel Insurance policy, in connection with *your trip* which resulted in such losses;
- f) Insurance purchased or *trips* booked after the *default*; or
- g) *Travel services* that were actually provided.

## WEDDING RIDER

This rider forms part of the Maritime Travel Insurance policy issued to *you*, subject to payment of the additional premium applicable to this coverage. This benefit can only be purchased as a rider to an issued individual Maritime Travel Insurance Plan that contains Trip Cancellation & Interruption coverage.

This rider represents the terms and conditions of coverage, and, provided there is no contradiction between this Rider's Condition, is subject to the Conditions and Exclusions for Trip Cancellation & Interruption, General Limitations on Coverage, Exclusions, Limitations, Definitions and General Provisions stated in the Maritime Travel Insurance policy.

### PERIOD OF COVERAGE

The period of coverage begins on the date and time *you* pay the premium for *your* Trip Cancellation & Interruption Coverage and this Rider for the insured *trip*.

#### Coverage under this rider ends on the earlier of:

- a) *your departure date*; or
- b) the date *you* cancel *your trip*.

### BENEFIT:

If *you* are unable to travel due to the covered event listed immediately below that occurs before *you* leave *home*, we will pay, up to the covered amount, the pre-paid and non-refundable travel expenses incurred by *you* when the primary reason for *your trip* was to attend a wedding.

### COVERED EVENT

1. The bride or groom, whose wedding *you* are attending, cancels their wedding due to the bride or groom's *medical condition* or death.

### Exclusions & Limitations:

1. All exclusions and limitations that pertain to Trip Cancellation and Interruption Insurance applies to the Wedding Rider.
2. The maximum number of *Travel companions* is 24.

### WHAT ELSE DO YOU NEED TO KNOW?

The Wedding Rider applies to Trip Cancellation expenses only. No expenses for trip interruption or delayed return are covered under this Wedding Rider.

## EMERGENCY MEDICAL INSURANCE

Emergency Medical Insurance is included in the **Elite Plan**, the **Recommended Plan**, the **Annual Recommended Plan**, the **Canada Plan**, the **Medical Plus Plan**, the **Annual Medical Plans** and the **Medical Only Plan**.

For the **Annual Medical Plans** and the **Medical Only Plan**, *you* must complete the medical *questionnaire* to determine whether *you* meet eligibility requirements for coverage if *you* are *age* 60 or older.

### Emergency Medical Plans Deductible

The Annual Medical Plans and the Medical Only Plan have an optional *deductible* that will apply to each claim made under this plan if *you* selected this option. The amount of the *deductible* (in U.S. dollars) is shown on *your* Maritime Travel Insurance Emergency Medical Plan *confirmation*.

### What does Emergency Medical Insurance cover? Benefits –

Emergency Medical Insurance covers *you* for up to **\$5,000,000 CDN** for the *covered expenses* incurred by *you* for *emergency* medical *treatment* required by *you* during *your trip* if a *medical condition* begins unexpectedly after *you* leave *home*. **Such expenses must be in excess of those reimbursable by the government health insurance plan (GHIP) in your province or territory of residence, your Canadian university health insurance plan (UHIP), and by any other insurance contract or health plan (group or individual) under which you are entitled to benefits.** The *medical attention* must be required as part of *your emergency treatment* and ordered by a *physician* (or a dentist in the case of dental *treatment*).

**IN THE EVENT OF AN EMERGENCY, THE ASSISTANCE CENTRE MUST BE CONTACTED IMMEDIATELY AT:**

**1-877-737-6368** in the U.S. and Canada  
**+1 (519) 251-7819** collect where available

If *you* are unable to do so immediately because *you* are medically incapacitated, someone else must contact the Assistance Centre as soon as is reasonably possible.

**Failure to notify the Assistance Centre immediately will limit the benefits payable under this policy to:**

- a. **80% of eligible expenses based on reasonable and customary charges to a maximum of \$25,000 in the event of hospitalization; and**
- b. **in the event of out-patient medical consultation, a maximum of one visit per sickness or injury.**

**You will be responsible for the payment of any remaining charges.**

*Covered expenses* and benefits are subject to the policy's maximums, exclusions and limitations.

More specifically the *covered expenses* are:

#### 1. **Emergency Medical Treatment:**

- a) *Hospital* accommodation up to the semi-private room rate (or an intensive or coronary care unit where *medically necessary*). We will also cover the expense of a cruise ship cabin or hotel room (that is not already included in *your* travel arrangements) if the use of such facility is recommended as a substitute for a *hospital* room during *your* recovery from a covered medical *emergency*.

- b) *Physicians' fees.*
- c) When approved in advance by the Assistance Centre, laboratory tests and x-rays prescribed by the attending *physician*. Note: This policy does not cover magnetic resonance imaging (MRI), cardiac catheterization, computerized axial tomography (CAT) scans, sonograms, ultrasounds or biopsies unless such services are approved in advance by the Assistance Centre.
- d) Private duty nursing (other than by a relative) during *hospitalization* when ordered by the attending *physician* and approved in advance by the Assistance Centre.
- e) Local, licensed ground ambulance service to the nearest *hospital, physician* or medical service provider in the event of a medical *emergency* (also covers local taxi fare in lieu of local ground ambulance service where an ambulance is *medically necessary*).
- f) Drugs requiring a prescription by a *physician*, excluding those necessary for the continued stabilization of a chronic *medical condition*.

**To file a claim, you must provide original receipts issued by the pharmacist, physician or hospital, indicating the total cost, prescription number, name of medication, quantity, date and name of the prescribing physician.**

- g) When approved in advance by the Assistance Centre, casts, splints, trusses, braces, crutches, rental of wheelchair or other minor medical appliances when prescribed by a *physician*.
  - h) *Emergency treatment* by a chiroprapist, chiropractor, osteopath, physiotherapist, or podiatrist (other than a relative), including x-rays, when approved in advance by the Assistance Centre.
2. **Emergency Dental Expenses:** Reimbursement of:

- a) *emergency dental treatment* at *trip* destination to repair or replace sound natural teeth or permanently attached artificial teeth damaged as a result of an *injury*, provided *you* consult a *physician* or dentist immediately following the *injury*;
- b) necessary *emergency dental treatment* (described in a. above) that must be continued upon return to *your* province or territory of residence, provided *treatment* is completed within **180 days** from the date of the accident, to a maximum of **\$2,000**; and
- c) other *emergency dental treatment* at *trip* destination (excluding root canal treatment), to a maximum of **\$500**.

**To file a claim under a. or b. above, you must provide an accident report from the physician or dentist.**

- 3. **Hospital Allowance:** *You* are entitled to a *hospital* allowance of up to **\$50 per day** to a maximum of **\$2,000** for *your* incidental expenses (long distance calls, television rental) while *hospitalized* for at least 48 hours. This benefit will be paid as a lump sum after *your* release from *hospital* and upon approval of *your* claim.
- 4. **Expenses to return your vehicle home:** If, because of a covered medical *emergency, hospitalization, death* or repatriation, *you* are unable to drive *home* the *vehicle* *you* used during *your trip*, *we* will cover the reasonable costs incurred to return *your vehicle home*. If *you* rented a *vehicle* during *your trip*, *we* will cover the reasonable costs incurred for its return to the rental agency.

When approved in advance by the Assistance Centre, repatriation of the *insured* if the private *vehicle* is stolen or inoperative due to an accident.

- 5. **Bedside Visit:** When approved in advance by the Assistance Centre, a return economy airfare for an *immediate family* member or a close friend to attend *your* bedside (upon the recommendation of

the attending *physician*) provided the *hospitalization* lasts at least 3 consecutive days. This benefit is provided immediately if *you* are mentally or physically handicapped, or under 26 years of *age* and dependent for support on the visiting *immediate family* member.

The person attending *your* bedside will be covered under the same terms and conditions of *your* Maritime Travel Insurance Policy. Reasonable out-of-pocket expenses incurred for commercial accommodation and meals, essential taxis and telephone calls by the attending *immediate family* member or close friend will be reimbursed to a maximum of **\$1,500**, subject to a limit of **\$300 per day**. **To file a claim, you must supply original receipts from commercial organizations.**

- 6. **Subsistence Allowance:** When approved in advance by the Assistance Centre and in the event that:
  - a) *your* scheduled return is delayed due to *your sickness* or *injury* or the *sickness* or *injury* of an accompanying *immediate family* member or *travelling companion*, or

b) *you* or an accompanying *immediate family* member or *travelling companion* must be relocated for the purpose of obtaining medical *treatment* for a covered medical *emergency*,

*you* are eligible for a subsistence allowance of **\$350** per day after the original scheduled return date or relocation date to a maximum of **\$3,500** for commercial accommodation and meals, laundry, essential taxis and telephone calls. If *sickness* or *injury* delays *your* return more than 10 days beyond the scheduled return date, the subsistence allowance will only be paid upon submission of proof that *you* or an accompanying *immediate family* member or *travelling companion* was admitted and confined to a *hospital* for at least 72 hours within the 10-day period.

**To file a claim, you must supply original receipts from commercial organizations as well as the local attending physician's written diagnosis of the medical emergency.**

- 7. **Medical Repatriation:** When approved in advance and arranged by the Assistance Centre:
  - a) up to the cost of a one-way *fare* on a commercial airline to *your* province or territory of residence; or
  - b) the costs for additional airline seats to accommodate a stretcher to return *you* to *your* province or territory of residence; or
  - c) where *medically necessary*, medical air evacuation (paid in advance) to the nearest appropriate *hospital* or to a *hospital* in *your* province or territory of residence, when the attending *physician* or the Medical Director of the Assistance Centre recommends that *you* be so transported for the purpose of obtaining immediate medical *treatment*; and
  - d) repatriation to *your home* in economy class of 1 *travelling companion* or 1 *immediate family* member in the event of *your* medical repatriation.
  - e) up to **\$900** subsistence allowance, subject to a limit of **\$300 per day**, will also be provided for commercial accommodation and meals, essential taxis and telephone calls for 1 *travelling companion* or 1 *immediate family* member if *you* are relocated to a place other than *your home*. **To file a claim, you must supply original receipts from commercial organizations.**
- 8. **Return Excess Baggage:** When approved in advance by the Assistance Centre, up to **\$500** for the return of *your* excess baggage if *you* are returned to *your home* by any medical repatriation or death benefit provided by this policy.

9. **Domestic Services:** When *you* have been repatriated under Benefit #7, page 29 and when approved in advance by the Assistance Centre, **reimbursement** up to a maximum of **\$250** per policy for domestic services such as housekeeping to *your* principal residence.
10. **Medical Follow-up in Canada:** When *you* have been repatriated under Benefit #7, page 29 after being *hospitalized* during *your trip*, the following is covered in *your* Canadian province or territory of residence within 15 days of the repatriation:
- semi-private room in a *hospital* or rehabilitation centre or convalescent home up to **\$1,000**;
  - home nursing care when medically required up to **\$50** per day for up to 10 days;
  - up to **\$150** for the rental of crutches, standard walker, canes, trusses, orthopaedic corset, oxygen; and
  - up to **\$250** for ambulance or taxi services to receive medical care.
11. **Qualified Medical Attendant:** When approved in advance and arranged by the Assistance Centre and if recommended by the attending *physician*, fees for a qualified medical attendant (other than a relative) to accompany *you* to *your* province or territory of residence when recommended by the attending *physician* and approved in advance and arranged by the Assistance Centre. This includes return economy airfare and overnight lodging and meals (where necessary).
12. **Escort of Insured Children or Grandchildren:** When approved in advance by the Assistance Centre in the event an *Insured* parent, grandparent or legal guardian (on the *trip*) must be medically repatriated or *hospitalized*:
- organization, escort and payment up to the cost of a one-way economy airfare for the return of *your* accompanying *child(ren)* or grandchildren. This benefit is limited to *child(ren)* or grandchildren under the *age* of 19 unless the *child(ren)* or grandchild is mentally or physically handicapped; or
  - reimbursement for services of a caregiver (other than a relative) contracted by *you* for *your* accompanying *child(ren)* or grandchildren. This benefit is limited to *child(ren)* or grandchildren under the *age* of 19 unless the *child(ren)* or grandchild is mentally or physically handicapped. Provision of an attendant will be arranged by the Assistance Centre.
13. **Child Care:** When approved in advance by the Assistance Centre in the event their parent or legal guardian is attending the bedside of an *insured* who is *hospitalized* at their destination, outside *your* province or territory of residence, reimbursement of up to **\$1,000** for child care provided by someone other than a relative at *home* for the *child(ren)*. This benefit is limited to *child(ren)* or grandchildren under the *age* of 19 unless the *child(ren)* or grandchild is mentally or physically handicapped.
14. **Non-Medical Emergency Evacuation:** Emergency mountain, sea or other remote location evacuation of *you* to the nearest accessible point by professional services up to **\$5,000**.
15. **Return to Trip Destination:** When approved in advance by the Medical Director of the Assistance Centre, a one-way economy airfare for *you* to be returned to *your trip* destination after *you* are returned to *your* province or territory of residence for immediate medical *treatment* provided *your* attending *physician* determines that *you* require no further medical *treatment* for *your* medical *emergency*. Once *you* return to *your trip* destination, a recurrence of the *sickness* or *injury* which caused the initial medical *emergency*, or any problems or complications related thereto, will not be covered under this policy.
16. **Death:** If *you* should die during *your trip* from a covered medical *emergency*, we will reimburse *your* estate:
- the following reasonably incurred expenses for:
    - preparation of the deceased *insured*; and
    - return transportation cost of the deceased *insured* in the *common carrier's* standard transportation container to the scheduled point of departure; or
  - up to **\$5,000** for burial or cremation at the place of death.
- No benefit is payable for the cost of a headstone, casket and/or funeral service expenses.
- When approved in advance by the Assistance Centre, the return *fare* for an *immediate family* member or close friend to identify the *insured's* remains. We will also pay up to **\$300** for that person's commercial accommodation and meals and provide him/her with Maritime Emergency Medical Insurance coverage, under the same terms and limitations of this policy for up to 3 days.
- If the cost of the repatriation of the deceased *insured* exceeds the stated limits, payment will be made on *your* behalf with the condition that funds will be repaid to *us* within 30 days by *your* family or *your* estate.
- To file a claim, original receipts from commercial organizations must be supplied.**
17. **Additional Expenses For Pets Due to Interrupted Return:** When approved in advance and arranged by the Assistance Centre, **reimbursement** of:
- up to a maximum of **\$500** for one-way transportation of *your* pet(s) (domestic dog(s) and/or cat(s) only) to *your* province or territory of residence in the event *you* are *hospitalized* at *your trip* destination and cannot return on *your* scheduled return date or *you* are returned to *your* province or territory of residence by any repatriation or death benefit provided by this policy; or
  - up to **\$100** for additional kennel fees in the event *you* are medically unable to return to *your* province or territory of residence on *your* scheduled return date.
18. **Pet Care:** When approved in advance and arranged by the Assistance Centre, **reimbursement** up to a maximum of **\$300** for emergency veterinary services in the event *your* pet(s) (domestic dog(s) and/or cat(s) only) suffers an accidental bodily injury while accompanying *you* during *your trip*.
19. **Prescription Drugs:** We will pay up to a maximum of **\$50** if *you* have misplaced or have forgotten *your* prescription medication during *your trip* and it is necessary for *you* to continue taking the prescribed medication. Charges for vitamins, vitamin preparations, over-the-counter drugs, contraception or birth control are not covered.
20. **Vision Care: Reimbursement** up to **\$300** for the replacement at *your* destination of prescription eyeglasses (excluding prescription sunglasses) due to theft, loss or breakage during *your trip* and assistance to coordinate the replacement.
21. **Hearing Aid: Reimbursement** up to **\$200** for the replacement at *your* destination of a hearing aid due to theft, loss or breakage during *your trip* and assistance to coordinate the replacement. Does not include batteries or ear molds.
22. **Terrorism Coverage:** *You* are entitled to reimbursement of *covered expenses* when an *act of terrorism* directly or indirectly causes *you* a loss for which benefits would otherwise be payable in accordance with the terms and conditions of this policy.

23. **Message Centre:** Leave urgent messages with the Assistance Centre in the event that awkward time zones or telephone difficulties prevent you from contacting *home*. Leave urgent messages as a contact point for *travelling companions* if you lose touch with one another. Call 1-877-737-6368 within North America or from anywhere else in the world at +1 (519) 251-7819 (call collect where available).
24. **Urgent Messages:** Transmission of urgent messages to family and/or employer by the multilingual co-ordinators of the Assistance Centre.

## Exclusions & Limitations – What does Emergency Medical Insurance not cover?

We will not cover expenses or benefits related, in whole or in part, directly or indirectly, to any of the following:

### 1. **Pre-Existing Medical Condition Exclusions**

When reading this section, please take the time to review the definitions of “*medical condition*,” “*pre-existing condition*” and “*stable*” at the end of this booklet. The *pre-existing condition* exclusion which applies to you depends on your age as outlined below.

#### Canada Plan

No pre-existing *medical condition* exclusion applies to the Canada Plan.

#### Annual Medical Plan and Medical Only Plan UNDER AGE 60

Any *sickness, injury or medical condition* that was not *stable* in **the three months prior to each *departure date***.

A lung condition if, **during the three months prior to each *departure date***, you required *treatment* with home oxygen or with Prednisone.

#### AGE 60 AND OVER

**PLAN A+** – Any *sickness, injury or medical condition* that was not *stable* in **the three months prior to each *departure date***.

**PLAN A** – Any *sickness, injury or medical condition* that was not *stable* in **the three months prior to each *departure date***.

**PLAN B** – Any *sickness, injury or medical condition* that was not *stable* in **the six months prior to each *departure date***.

**PLAN C** – Any *sickness, injury or medical condition* that was not *stable* in **the twelve months prior to each *departure date***.

#### Annual Recommended Plan UNDER AGE 60

Any *sickness, injury or medical condition* that was not *stable* in **the three months prior to each *departure date***.

A lung condition if, in **the three months prior to each *departure date***, you required *treatment* with home oxygen or with Prednisone.

#### Elite Plan, Recommended Plan and Medical Plus Plan UNDER AGE 75

Any *sickness, injury or medical condition* that was not *stable* in **the three months prior to each *departure date***.

A lung condition if, in **the three months prior to each *departure date***, you required *treatment* with home oxygen or with Prednisone.

#### AGE 75 AND OVER

Any *sickness, injury or medical condition* that was not *stable* in **the twelve months prior to each *departure date***.

A lung condition if, during **the twelve months prior to each *departure date***, you required *treatment* with home oxygen or with Prednisone.

A heart condition if you had heart bypass and/or valve surgery more than 10 years ago. This applies prior to each ***departure date***.

A heart condition if, during **the twelve months prior to each *departure date***:

- you were prescribed or taking **THREE OR MORE** medications for your heart (other than aspirin/entrophen and cholesterol medication);
- you were diagnosed or required *treatment* for **ALL THREE** of the following: any heart condition, diabetes (treated with oral medication or insulin) and high blood pressure; or
- you were prescribed or taking medication for **HEART FAILURE** (causing water on your lungs or swelling in your legs).

2. Expenses that exceed \$25,000, if you do not have valid coverage under a *government health insurance plan* or a Canadian university health insurance plan.
3. For *children* under 2 years of age: Any *medical condition* related to a birth defect.
4. Any *medical condition, injury, sickness* or death related directly or indirectly to your abuse of medication(s), drug(s), alcohol, or any other toxic substance(s).
5. Non-compliance with prescribed medical *treatment* or therapy.
6. Your suicide or attempted suicide or your intentional self-inflicted injury, whether sane or insane.
7. Disorder, disease, condition or symptom that is emotional, psychological or mental in nature unless same results in *hospitalization* and this fact is substantiated by *hospital* records. This exclusion does not apply to major psychiatric illness such as psychosis, schizophrenia and major affective mood disorders.
8. Expenses incurred as a result of asymptomatic or symptomatic HIV infection, Acquired Immune Deficiency Syndrome (AIDS), AIDS related conditions (ARC) or the presence of HIV, including any associated diagnostic tests or charges.
9. Pregnancy, routine prenatal care or childbirth in the normal course, and complication of pregnancy or childbirth in the 9 weeks of the expected delivery date or any time after that date.

10. A *child* who is born after *you* leave *home*.
11. A *sickness, injury* or related *medical condition* during a *trip* undertaken:
  - a. with the knowledge that *you* will require or seek *medical attention* or surgery for that *sickness, injury* or *medical condition*; or
  - b. for the purpose of obtaining *medical attention* or surgery.
12. A *sickness, injury* or related *medical condition* for which:
  - a. future investigation or related *medical treatment* (except routine monitoring) is planned before *your trip*; or
  - b. it was reasonable to expect *medical treatment* or *hospitalization* during *your trip*.
13. *Medical treatment, surgery, medication, services* or supplies that are not *medically necessary*, or that *you* elect to have provided outside *your province* or territory of residence when medical evidence indicates that *you* could return to *your province* or territory of residence to receive such *medical treatment*. The delay to receive *medical treatment* in *your province* or territory of residence has no bearing on the application of this exclusion.
14. *Your* participation in organized *professional* sporting activities.
15. *You* driving a motorcycle, moped or scooter unless *you* hold a valid Canadian driver's licence.
16. Rock climbing, *mountaineering*, underwater activities (unless *you* hold an open water diving certificate) or *your* riding, driving or participating in motorized *speed contests*.
17. Piloting an aircraft or air travel on any air-supported device other than as a fare-paying passenger on a flight operated by a *common carrier*.
18. Fraud, concealment, or deliberate misstatement in relation to any matter affecting this insurance or in connection with the making of any claim hereunder.
19. *Your* participation in a crime or malicious act.
20. Participation in a riot or insurrection.
21. *Your* participation in any maneuvers or training exercises in the armed forces.
22. Except as is covered under Benefit #19, page 31. Prescription Assistance, the replacement of an existing prescription, whether by reason of loss, renewal or inadequate supply, or the purchase of drugs and medications (including vitamins) which are commonly available without a prescription or which are not legally registered and approved in Canada.
23. a. Cardiac catheterization, angioplasty and/or cardiovascular surgery including any associated diagnostic test(s) or charges unless approved in advance by the Assistance Centre prior to being performed, except in extreme circumstances where such surgery is performed as a *medical emergency* immediately upon admission to *hospital*.
- b. Magnetic resonance imaging (MRIs), computerized axial tomography (CAT) scans, sonograms, ultrasounds or biopsies unless approved in advance by the Assistance Centre.

24. Services in connection with alternative *medical treatments* or general health examinations, regular care of a chronic condition, the continuing care and/or *medical treatment* of an acute *medical condition, injury* or *sickness* after the initial *medical emergency* has ended (as determined by the Medical Director of the Assistance Centre) or a medical consultation where the *physician* observes no *change* in a previously noted condition, symptom or problem.
25. Any non-emergency, investigative or elective *treatment* such as cosmetic surgery, chronic care, rehabilitation, or any directly or indirectly related complications.
26. Medical repatriation services unless approved in advance and arranged by the Assistance Centre.
27. Damage to or loss of sunglasses (prescription or otherwise), contact lenses, or prosthetic teeth or limbs, and resulting prescription thereof.
28. Cataract surgery or services provided by a naturopath or an optometrist or in a convalescent home, nursing home, rehabilitation centre or health spa, excluding Benefit #10, page 30.
29. For policy extensions and top-ups: any *medical condition, injury* or *sickness* which first appeared, was diagnosed or for which *you* received *medical treatment* after the scheduled *departure date* and prior to the *effective date* of the insurance extension or top-up.
30. Any loss resulting from:
  - a specific or related *medical condition* which *you* contracted in a foreign country during *your trip*; and/or
  - an *act of war* or an *act of terrorism*,
 when, before the *effective date* for this insurance, a written formal warning was issued by Foreign Affairs and International Trade Canada, advising Canadians not to travel to that country, region or city. For this exclusion, *medical condition* is limited to the reason for which the formal warning was issued and includes complications arising from such *medical condition*.

### What are the other conditions that apply to Emergency Medical Insurance?

If *your* current or former employer provides *you* with an extended health insurance plan with a lifetime maximum coverage of **\$50,000** or less, *we* will not coordinate payment with that coverage. If *your* lifetime maximum is more than **\$50,000**, *we* will coordinate payment.

Neither *we* nor *our* agents or administrators are responsible for the availability, quality or result of any *medical treatment* or transportation, or for *your* failure to obtain *medical treatment*.

See other conditions under How to Make a Claim.

## ‡ BAGGAGE LOSS, DAMAGE & DELAY INSURANCE

Baggage Loss, Damage & Delay Insurance is included in the Elite Plan, the Recommended Plan, the Annual Recommended Plan, the Canada Plan, the Medical Plus Plan, the Elite Non-Medical Plan and the Trip Cancellation Plus Plan.

Our overall maximum aggregate liability under all Maritime Travel Insurance policies purchased for any one *trip* with respect to a single insured person or family will not exceed **\$3,000** under the **Elite Plan** or the **Elite Non-Medical Plan** and **\$2,000** under the **Recommended Plan, Annual Recommended Plan, Canada Plan, Medical Plus Plan** or the **Trip Cancellation Plus Plan**.

### What does Baggage Loss, Damage & Delay Insurance cover? Benefits –

Baggage Loss, Damage & Delay Insurance covers the theft of, loss of, damage to, and delay of the baggage and effects that belong to *you* and that *you* use during *your trip*. More specifically, *we* will pay for the following expenses based upon *your* selected plan:

#### 1. Baggage Theft, Loss or Damage

Up to **\$500 per trip** for any item or set of items that are lost, stolen, or damaged during *your trip*, up to a maximum of **\$1,500** under the **Elite Plan** or the **Elite Non-Medical Plan**; and up to a maximum of **\$1,000** under the **Recommended Plan, Annual Recommended Plan, the Canada Plan, the Medical Plus Plan** or the **Trip Cancellation Plan**.

*We* also apply a combined maximum limit of **\$500** for: jewellery; watches; cameras, including related equipment; binoculars; articles consisting in whole or in part of silver, gold or platinum; furs and fur-trimmed items; cell phones, computers and other digital or electronic items. In addition, original receipts must accompany *your* claim.

#### 2. Replacement Cost of Lost/Stolen Passport or Travel Visa

If *you* have purchased the **Elite Plan, Recommended Plan, Annual Recommended Plan, Medical Plus Plan, Elite Non-Medical Plan** or the **Trip Cancellation Plus Plan** and if *your* passport and/or travel visa is lost or stolen during *your trip*, while *you* are travelling outside Canada, *we* will reimburse *you* :

- The *reasonable and customary charges* for a replacement passport and/or travel visa; and
- Up to a maximum of **\$200** with respect to the travel and accommodation expenses *you* actually incur while waiting to receive the replacement passport and/or travel visa.

#### 3. Replacement Cost of Lost/Stolen Birth Certificate or Driver's Licence

If *your* driver's licence or birth certificate is lost or stolen while *you* are on *your trip*, *we* will reimburse *you* up to an aggregate total of **\$50** for the cost of replacing one or both of these items.

#### 4. Baggage Delay

If *your* checked baggage is misdirected or delayed by the *common carrier* for at least **10 hours** while *you* are on *your trip*, *we* will reimburse up to an aggregate total of **\$500** under the **Elite Plan** or the **Elite Non-Medical Plan** and up to **\$400** under the **Recommended Plan, the Annual Recommended Plan, the Canada Plan, the Medical Plus Plan** or the **Trip Cancellation Plus Plan** for:

- The purchase of necessary toiletries and personal clothing while on *your trip*;

- The rental cost of sporting equipment if the purpose of *your trip* was to participate in a sporting event and *your* sporting equipment was included in the delayed checked baggage;
- The rental cost of a wheelchair that *you* use during *your trip*.

The Baggage Delay benefits are payable only when the delay happens before *your* return *home*.

### Exclusions & Limitations – What does Baggage Loss, Damage & Delay Insurance not cover?

For Baggage Loss, Damage & Delay Insurance, *we* will not cover expenses or benefits relating to:

- Animals, perishable items, bikes that are not checked as baggage with the *common carrier*, household items and furniture, artificial teeth or limbs, hearing aids, sunglasses, contact lenses, money, tickets (except for administrative fees required to reissue such tickets), securities, documents, items related to *your* occupation, antiques or collector items, items that are fragile, items that are obtained illegally, or articles that are insured on a valued basis by another insurer.
- Damage or loss resulting from wear and tear, deterioration, defect, mechanical breakdown, *your* imprudence or omission.
- Unaccompanied baggage, any items that are left unattended, personal property left in an unattended *vehicle*, unlocked trunk and any jewellery or cameras placed in the custody of a *common carrier*.
- Instances of theft or losses that are not reported to authorities.
- Computer software, including any expenses incurred for the restoration of any lost or corrupted data.
- Property damage caused by the confiscation, detention, requisition or destruction of *your* baggage and personal effects by customs or other authorities.
- Articles purchased during *your trip* if *you* do not submit original receipts along with *your* claim.
- Property damage caused by breaking or scratching of fragile articles other than cameras or binoculars, unless caused by fire or accident to the *vehicle* in which they are being carried.
- Property insured under any homeowner's or tenant's package policy.
- Any loss resulting from an *act of war* or an *act of terrorism* while *you* are at destination, when, before *your effective date*, a written formal warning was issued by Foreign Affairs and International Trade Canada, advising Canadians not to travel to that country, region or city.

In addition to the Exclusions & Limitations above, there is also no coverage, and no benefits will be payable, for claims presented under this section when reimbursed:

- By the *common carrier*, hotel or *travel supplier*, including any services rendered by such *common carrier*, hotel or *travel supplier*; or
- As specified under any other insurance coverage *you* may have for the loss of or damage to property.

See other conditions under How to Make a Claim.

## ‡ PERSONAL MONEY INSURANCE

Personal Money Insurance is included in the Elite Plan, the Recommended Plan, the Annual Recommended Plan, the Canada Plan, the Medical Plus Plan, the Elite Non-Medical Plan and the Trip Cancellation Plus Plan.

### What does Personal Money Insurance cover?

#### Benefits –

If *your* personal money is lost or stolen during *your trip*, we will reimburse *you* up to **\$100** (**\$300** under the **Elite Plan** and the **Elite Non-Medical Plan**) for:

1. Theft or loss of *your* personal money;
2. Financial loss or legal liability for payment following theft or fraudulent use of *your* traveller's cheques, letters of credit, travel tickets, passport, prepaid accommodation vouchers and entertainment tickets;

Provided that:

1. *You* have not failed to comply with any conditions applied by the issuing authority (including validating traveller's cheques and reporting missing negotiable documents to the issuing authority within the prescribed time period); and
2. *You* have reported the loss to the police immediately and have obtained their written report within 24 hours of the theft or loss.

### Exclusions & Limitations: What does Personal Money Insurance not cover?

We will not cover expenses or benefits related, in whole or in part, directly or indirectly, to any of the following:

1. **THE FIRST \$25 OF EACH AND EVERY CLAIM.**
2. Delay, detention or confiscation by customs personnel.
3. Shortages due to error, omission, depreciation, or fluctuations in value.
4. Money that was not in *your* possession at the time the loss occurred.

## FLIGHT & TRAVEL ACCIDENT INSURANCE

Flight & Travel Accident Insurance is included in the Elite Plan, the Recommended Plan, the Annual Recommended Plan, the Canada Plan, the Medical Plus Plan, the Elite Non-Medical Plan and the Trip Cancellation Plus Plan.

### What does Flight & Travel Accident Insurance cover?

#### Benefits –

We will cover the following Flight & Travel Accident Insurance benefits:

1. If an accidental bodily *injury*, sustained during *your trip*, causes *you*, in the 12 months after the accident, to die, to become completely and permanently blind in both eyes, to suffer complete and irrecoverable loss of speech or hearing, to have two of *your* limbs fully severed above *your* wrist or ankle joint, to become completely and permanently blind in one eye and have one of *your* limbs fully severed above *your* wrist or ankle joint, we will pay:
  - a) For Flight Accident Insurance: **\$100,000**,
  - b) For Travel Accident Insurance: **\$50,000**.
2. If an accidental bodily *injury*, sustained during *your trip*, causes *you*, in the 12 months after the accident, to become completely and permanently blind in one eye or to have one of *your* limbs fully severed above *your* wrist or ankle joint, we will pay:
  - a) For Flight Accident Insurance: **\$50,000**,
  - b) For Travel Accident Insurance: **\$25,000**.
3. If *you* have more than one accidental bodily *injury* during *your trip*, we will pay the applicable insured sum only for the one accident that entitles *you* to the largest benefit amount.

For Flight Accident Insurance, the accident giving rise to *your injury* must happen: a) while *you* are travelling on a commercial passenger *plane* for which a ticket was issued to *you* for *your* entire airline trip; b) if making a flight connection, while riding over land or water at the expense of the airline, riding in a limousine or bus provided by the airport authority, or in a scheduled helicopter shuttle service between airports; or c) while *you* are at an airport for the departure or arrival of the flight covered by this insurance.

### Benefit Limits for Flight and Travel Accident Coverage

The amount payable to *you* in respect of any one accident will not exceed **\$100,000 CDN** per person and will not exceed **\$500,000 CDN for all persons** who are covered under the same Maritime Travel Insurance policy, regardless of how many valid policies have been purchased. Any amount purchased in excess of **\$500,000** shall be refunded upon request.

Any benefits payable shall also be subject to an overall maximum aggregate payable limit specified below relating to all in-force travel policies issued by *us*, including this policy.

If total claims otherwise payable for this type of coverage under all Flight and Travel Accident Insurance policies issued by *us*, resulting from any one accident or resulting from more than one incident occurring during a calendar year, exceed the maximum aggregate payable limit, then the amount paid on each claim shall be reduced on a pro rata basis so that the total amount paid in respect of all such claims shall be the maximum aggregate payable limit. The maximum

aggregate limits are:

- a) **\$12,000,000 CDN** with respect to any one (1) accident; and
- b) **\$24,000,000 CDN** with respect to all accidents occurring in the same calendar year.

If, in *our* judgment, the total of all payable claims on account of one or more accidents exceeds the applicable limits, *your* pro-rated claim may be paid after the end of the calendar year in which *you* qualify for benefits.

### Exclusions & Limitations – What does Flight & Travel Accident Insurance not cover?

For Flight & Travel Accident Insurance, *we* will not cover expenses or benefits relating to:

1. Hang-gliding, rock climbing, *mountaineering*, underwater activities (unless *you* hold an open water diving certificate), parachuting or skydiving; participating in a motorized *speed contest*; or *your professional* participation in a sport, snorkeling or scuba-diving when that sport, snorkeling or scuba-diving is *your* principal paid occupation.
2. Piloting an aircraft, learning to pilot an aircraft, or acting as a member of an aircraft crew.
3. *Your* suicide or attempted suicide or *your* intentional self-inflicted *injury* whether sane or insane.
4. A criminal act or an attempt to commit such an act by *you* or *your* beneficiary.
5. Any *medical condition*, *injury*, *sickness* or death related directly or indirectly to *your* abuse of medication(s), drug(s), alcohol, or any other toxic substance(s).
6. *Your* disorder, *your* disease, *your* condition or *your* symptom that is emotional, psychological or mental in nature unless same results in *hospitalization* and this fact is substantiated by *hospital* records. This exclusion does not apply to major psychiatric illness such as psychosis, schizophrenia and major affective mood disorders.
7. A loss caused directly or indirectly from an existing disease or bodily infirmity, even if the proximate cause of its activation or reactivation is the result of an accidental bodily *injury*.
8. An *act of war* or *act of terrorism*.
9. Any loss resulting from:
  - a specific or related *medical condition* which *you* contracted in a foreign country during *your trip*; and/or
  - an *act of war* or an *act of terrorism*,

when, before *your effective date*, a written formal warning was issued by Foreign Affairs and International Trade Canada, advising Canadians not to travel to that country, region or city. For this exclusion, *medical condition* is limited to the reason for which the formal warning was issued and includes complications arising from such *medical condition*.

See other conditions under How to Make a Claim.

## ‡ RENTAL VEHICLE DAMAGE INSURANCE

### What does Rental Vehicle Damage Insurance cover? Benefits –

*We* will cover the following Rental Vehicle Damage Insurance benefits:

1. Up to **\$50,000** for the liability imposed upon *you* by law or assumed by *you* under the *rental vehicle* agreement, and resulting from physical loss or damage to a *rental vehicle* while it is under *your* care, custody and control, or that of a person who is permitted to operate the *rental vehicle* under the rental agreement, and for a maximum of 31 consecutive days.
2. Benefits include: a) *our* investigation, negotiation or settlement of *your* claim on *your* behalf and as *we* deem appropriate; b) *our* defending in *your* name, on *your* behalf and at *our* cost, any civil action brought against *you* on account of the loss or damage to the *rental vehicle*; c) *our* payment of all costs assessed against *you* in any civil action *we* defend and any interest accruing after judgment upon that part of the judgment that is within the limit of *our* liability; and d) *our* payment of towing costs, general average, salvage, fire department charges, customs duties and reasonable costs for loss of use of the *rental vehicle* for which *you* are responsible.
3. This coverage only applies if *you* booked *your rental vehicle* through Maritime Travel or through an **Authorized Maritime Travel Supplier**.
4. Only one *rental vehicle* may be covered under this policy.
5. If the commercial rental agency requires it, *you* must examine the *rental vehicle* and record, in writing, all existing damages before accepting the *rental vehicle*, and keep a copy of that damage record in case *you* have a claim.

### Exclusions & Limitations – What does Rental Vehicle Damage Insurance not cover?

For Rental Vehicle Damage Insurance, *we* will not cover expenses or benefits for:

1. Contents of the *rental vehicle*, liability other than for loss of or damage to the *rental vehicle*, or expenses assumed or waived by the *rental vehicle* agency or its insurers or payable under any other insurance.
2. Loss or damage arising from, caused by or contributed to by driving or operation of the *rental vehicle* by *you* or any other person while a) under the influence of intoxicating substances; b) participating in a *speed test* or *contest*; c) carrying passengers for compensation or hire; d) being used for commercial delivery, transporting contraband or illegal trade; or e) in violation of the terms of the *rental vehicle* agreement.
3. Loss or damage arising from, caused by, or contributed to by: a) the mechanical failure or breakdown of any part of the *rental vehicle*, rusting, corrosion, wear and tear, gradual deterioration, inherent defect, or freezing; b) the conversion or any dishonest act committed by *you* or any other party of interest, *your* employees or agents, or any person to whom the property may be entrusted (bailees for hire excepted); c) *your* failure to preserve or protect the property, or *your* neglect or abuse of the property; or d) contamination by radioactive material.
4. An *act of war* or *act of terrorism*.

See other conditions under How to Make a Claim.

## CONCIERGE SERVICES

### When It Applies

If *you* have purchased the **Elite Plan** or the **Elite Non-Medical Plan**, *you* are entitled to the concierge services as described below.

### Concierge Services

For *your* convenience, the following services are available to *you* before or after departure by calling the *Emergency Assistance Provider*:

1. Location information about news, weather, shopping, museums, seasonal activities and event planning;
2. Sightseeing tours and tour guide information and reservation;
3. Hotel, airline, car rental and rail information and reservations;
4. Dining information and reservations;
5. Flower and gift delivery;
6. Golf course information and reservations;
7. Personal trainers and spa and fitness centre information and reservations;
8. Yacht and fishing charters information and reservations;
9. Ordering theatre, concert, movie and sporting event tickets;
10. Nightlife recommendations;
11. World news and share prices.

Through their extensive online resources and expertise, the *Emergency Assistance Provider* can make exceptional recommendations to fulfill *your* needs. Access is available **24 hours a day, 365 days per year** at the following numbers:

**1-877-737-6368** toll-free from the USA and Canada or

**+1 (519) 251-7819** collect where available

Concierge service is free of charge; however, *you* are responsible for all purchases, services, and related charges arranged on *your* behalf.

## EMERGENCY MEDICAL INSURANCE FOR VISITORS TO CANADA

### What does Emergency Medical Insurance for Visitors To Canada cover? Benefits –

Visitors To Canada Plans offer Emergency Medical Insurance coverage up to the coverage amounts chosen (available Visitors To Canada coverage amounts: **\$25,000, \$50,000, \$100,000 or \$150,000 CDN**) for the *covered expenses* incurred by *you* for *emergency medical treatment* required in Canada during *your* coverage period if a *medical condition* begins unexpectedly after *you* arrive in Canada. The Visitors To Canada Plans also provide coverage while travelling outside Canada as long as *your* side trip originates and terminates in Canada and does not exceed **49%** of *your* total number of coverage days. *Your* side trip cannot be to *your home*. **Such covered expenses must be in excess of those reimbursable by any other insurance contract or health plan (government, group or individual) under which you are entitled to benefits.** The *medical attention* must be required as part of *your emergency treatment* and ordered by a *physician* (or a dentist in the case of dental *treatment*).

Coverage is not available for persons less than 31 days old or over 85 years of *age*.

There is a **\$50 deductible** applied to each claim made under this insurance.

### IN THE EVENT OF AN EMERGENCY, THE ASSISTANCE CENTRE MUST BE CONTACTED IMMEDIATELY AT:

**1-877-737-6368** in the U.S. and Canada

**+1 (519) 251-7819** collect where available

If *you* are unable to do so immediately because *you* are medically incapacitated, someone else must contact the Assistance Centre as soon as is reasonably possible.

**Failure to notify the Assistance Centre immediately will limit the benefits payable under this policy to:**

- a. **80%** of eligible expenses based on *reasonable and customary charges* to a maximum of **\$25,000** in the event of *hospitalization*; and
- b. in the event of out-patient medical consultation, a maximum of one visit per *sickness or injury*.

***You* will be responsible for the payment of any remaining charges.**

Covered expenses and benefits are subject to the policy's maximums, exclusions and limitations.

More specifically the *covered expenses* are:

1. **Emergency Medical Treatment:**

- a) *Hospital* accommodation up to the semi-private room rate (or an intensive or coronary care unit where *medically necessary*). We will also cover the expense of a cruise ship cabin or hotel room (that is not already included in *your* travel arrangements) if the use of such facility is recommended as a substitute for a *hospital* room during *your* recovery from a covered medical *emergency*.
- b) *Physicians' fees*.
- c) When approved in advance by the Assistance Centre, laboratory tests and x-rays prescribed by the attending *physician*.

Note: This policy does not cover magnetic resonance imaging (MRI), cardiac catheterization, computerized axial tomography (CAT) scans, sonograms, ultrasounds or biopsies unless such services are approved in advance by the Assistance Centre.

- d) Private duty nursing (other than by a relative) during *hospitalization* when ordered by the attending *physician* and approved in advance by the Assistance Centre.
- e) Local, licensed ground ambulance service to the nearest *hospital*, *physician* or medical service provider in the event of a medical *emergency*.
- f) Drugs requiring a prescription by a *physician*, excluding those necessary for the continued stabilization of a chronic *medical condition*.

**To file a claim, you must provide original receipts issued by the pharmacist, physician or hospital, indicating the total cost, prescription number, name of medication, quantity, date and name of the prescribing physician.**

- g) When approved in advance by the Assistance Centre, casts, splints, trusses, braces, crutches, rental of wheelchair or other minor medical appliances when prescribed by a *physician*.
- h) *Emergency treatment* by a chiroprapist, chiropractor, osteopath, physiotherapist, or podiatrist (other than a relative), including x-rays, when approved in advance by the Assistance Centre.

2. **Emergency Dental Expenses:** Reimbursement of:

- a) *emergency dental treatment*, to a maximum of **\$2,000**, to repair or replace sound natural teeth or permanently attached artificial teeth damaged as a result of an *injury*, provided *you* consult a *physician* or dentist immediately following the *injury*;
- b) other *emergency dental treatment* (excluding root canal treatment), to a maximum of **\$200**.

**To file a claim under a. above, you must provide an accident report from the physician or dentist.**

3. **Bedside Visit:** When approved in advance by the Assistance Centre, a return economy airfare for an *immediate family* member or a close friend to attend *your* bedside (upon the recommendation of the attending *physician*) provided the *hospitalization* lasts at least 5 consecutive days. This benefit is provided immediately if *you* are mentally or physically handicapped, or under 26 years of *age* and dependent for support on the visiting *immediate family* member. The person attending *your* bedside will be covered under the same terms and conditions of *your* Maritime Travel Insurance Policy. Reasonable out-of-pocket expenses incurred for commercial accommodation and meals, essential taxis and telephone calls by the attending

*immediate family* member or close friend will be reimbursed to a maximum of **\$450**, subject to a limit of **\$150 per day**. To file a claim, *you* must supply original receipts from commercial organizations.

4. **Subsistence Allowance:** In the event that:

- a) *you* are delayed beyond *your expiry date* due to *your* covered medical *emergency* or the *injury* or the *sickness* of an accompanying *immediate family* member or *travelling companion*; or
- b) *you* or an accompanying *immediate family* member or *travelling companion* must be relocated for the purpose of obtaining medical *treatment* for a covered medical *emergency*,

*we* will reimburse *you* up to **\$300 per day** after *your expiry date* or relocation date to a maximum of **\$3,000** for a subsistence allowance for commercial accommodation and meals, laundry, essential taxi or *rental vehicle* charges and telephone calls. If *sickness* or *injury* delays *your* return more than 10 days beyond the return date, the subsistence allowance will only be paid upon submission of proof that the accompanying family member or *travel companion* was admitted and confined to a *hospital* for at least 72 hours within the 10-day period.

**To file a claim, you must supply original receipts from commercial organizations as well as the local attending physician's written diagnosis of the medical emergency.**

5. **Medical Repatriation:** When approved in advance and arranged by the Assistance Centre:

- a) up to the cost of a one-way economy airfare to *your home*; or
- b) the costs for additional airline seats to accommodate a stretcher to return *you* to *your home*;
- c) where *medically necessary*, medical air evacuation (paid in advance) to the nearest appropriate *hospital* or to a *hospital* in *your home*,

when the attending *physician* or the Medical Director of the Assistance Centre recommends that *you* be so transported for the purpose of obtaining immediate medical *treatment*. If *you* are a Canadian resident without a *government health insurance plan*, *your* country of permanent residence will be deemed as Canada under this Medical Repatriation benefit and if *you* must be medically repatriated during a temporary visit to another country, *you* will be returned to *your* Canadian province or territory of residence if approved in advance and arranged by the Assistance Centre.

6. **Death:** If *you* should die during *your* coverage period from a covered medical *emergency*, *we* will reimburse *your* estate the reasonable costs actually incurred for:

- a) preparation of *your* remains and for the return transportation cost of the deceased *insured* in the *common carrier's* standard transportation container to *your home* up to the maximum amount specified in the Schedule of Benefits; or
- b) up to **\$5,000** for burial or cremation at the place of death.

No benefit is payable for the cost of a headstone, casket and/or funeral service expenses.

- c) When approved in advance by the Assistance Centre, the return transportation cost for an *immediate family* member or close friend to identify the *insured's* remains. *We* will also pay up to a maximum of **\$150** per day to a maximum of **\$450** for that person's commercial accommodation and meals.

**To file a claim, original receipts from commercial organizations must be supplied.**

7. **Message Centre:** Leave urgent messages with the Assistance Centre in the event that awkward time zones or telephone difficulties prevent *you* from contacting *home*. Leave urgent messages as a contact point for *travelling companions* if *you* lose touch with one another. Call 1-877-737-6368 within North America or collect from anywhere else in the world at +1 (519) 251-7819.
8. **Urgent Messages:** Transmission of urgent messages to family and/or employer by the multilingual co-ordinators of the Assistance Centre.

## Exclusions & Limitations – What does Emergency Medical Insurance for Visitors To Canada **not** cover?

*We* will not cover expenses or benefits related, in whole or in part, directly or indirectly, to any of the following:

### 1. THE FIRST \$50 OF EACH AND EVERY CLAIM.

2. Charges in excess of: i) \$150,000 if *you* have purchased the Visitors To Canada Plan with coverage amount of \$150,000; ii) \$100,000 if *you* have purchased the Visitors To Canada Plan with coverage amount of \$100,000; iii) \$50,000 if *you* have purchased the Visitors To Canada Plan with coverage amount of \$50,000; or iv) \$25,000 if *you* have purchased the Visitors To Canada Plan with coverage amount of \$25,000.

### 3. Pre-Existing Medical Condition Exclusions

When reading this section, please take the time to review the definitions of “*medical condition*” and “*pre-existing condition*” at the end of this booklet.

*We* will not pay any expenses relating to:

#### UNDER AGE 60

Any *sickness* or *injury* for which *you* experienced symptoms, were diagnosed, required *treatment* or required *hospitalization* or for which *you* took medication during **the three months prior to the effective date.**

#### AGE 60 TO 85

Any *sickness* or *injury* for which *you* experienced symptoms, were diagnosed, required *treatment* or required *hospitalization* or for which *you* took medication during **the 12 months prior to the effective date.**

4. Expenses related to a *medical condition* for which *you* were *hospitalized* for more than **72 hours**, or for which *hospitalization* was recommended by *your* medical practitioner, in the **12-month** period before *your* *effective date* of insurance.
5. Any illness, *sickness*, disease or onset of new symptoms that occur during the **first 48 hours** following the *effective date* if *you* purchase this policy after *your* arrival in Canada.
6. A *child* who is born after *you* leave *home*, any person who is less than 31 days old or 85 years of *age* or over on the *effective date* of insurance.
7. For *children* under 2 years of *age*: any *sickness* or *medical condition* related to a birth defect.
8. Any *medical condition*, *injury*, *sickness* or death related directly or indirectly to *your* abuse of medication(s), drug(s), alcohol, or any other toxic substance(s).
9. Expenses incurred as a result of asymptomatic or symptomatic HIV infection, Acquired Immune Deficiency Syndrome (AIDS), AIDS related conditions (ARC) or the presence of HIV, including any associated diagnostic tests or charges.

10. *Your* suicide or attempted suicide or *your* intentional self-inflicted injury, whether sane or insane.
11. Disorder, disease, condition or symptom that is emotional, psychological or mental in nature unless same results in *hospitalization* and this fact is substantiated by *hospital* records. This exclusion does not apply to major psychiatric illness such as psychosis, schizophrenia and major affective mood disorders.
12. Pregnancy, routine prenatal care or childbirth in the normal course, and complication of pregnancy or childbirth in the 9 weeks of the expected delivery date or any time after that date.
13. Any related *medical condition*, *injury* or *sickness* during *your* coverage period undertaken:
  - a. with the knowledge that *you* will require or seek *medical attention* or surgery for that *sickness*, *injury* or related *medical condition*; or
  - b. for the purpose of obtaining *medical attention* or surgery.
14. A *sickness*, *injury* or related *medical condition* for which:
  - a. future investigation or medical *treatment* (except routine monitoring) is planned before *your* coverage period; or
  - b. it was reasonable to expect medical *treatment* or *hospitalization* during *your* coverage period.
15. Medical *treatment*, surgery, medication, services or supplies that are not *medically necessary*, or that *you* elect to have provided outside *your home* when medical evidence indicates that *you* could return to *your home* to receive such medical *treatment*. The delay in receiving medical *treatment* in *your home* has no bearing on the application of this exclusion.
16. *Your* participation in organized *professional* sporting activities.
17. *You* driving a motorcycle, moped, or scooter unless *you* hold a valid driver’s licence.
18. Rock climbing, *mountaineering*, underwater activities (unless *you* hold an open water diving certificate) or *your* riding, driving or participating in motorized *speed contests*.
19. Piloting an aircraft or air travel on any air-supported device other than as a fare-paying passenger on a flight operated by a *common carrier*.
20. Fraud, concealment, or deliberate misstatement in relation to any matter affecting this insurance or in connection with the making of any claim hereunder.
21. *Your* participation in a crime or malicious act.
22. Participation in a riot or insurrection.
23. *Your* participation in any maneuvers or training exercises in the armed forces.
24. The replacement of an existing prescription, whether by reason of loss, renewal or inadequate supply, or the purchase of drugs and medications (including vitamins) which are commonly available without a prescription or which are not legally registered and approved in Canada.

## TERRORISM COVERAGE

25. a. Cardiac catheterization, angioplasty and/or cardiovascular surgery including any associated diagnostic test(s) or charges unless approved in advance by the Assistance Centre prior to being performed, except in extreme circumstances where such surgery is performed as a medical *emergency* immediately upon admission to *hospital*; and/or
- b. Magnetic resonance imaging (MRIs), computerized axial tomography (CAT) scans, sonograms, ultrasounds or biopsies unless approved in advance by the Assistance Centre.
26. Services in connection with alternative medical *treatments* or general health examinations, regular care of a chronic condition, the continuing care and/or medical *treatment* of an acute *sickness* or *injury* after the initial medical *emergency* has ended (as determined by the Medical Director of the Assistance Centre) or a medical consultation where the *physician* observes no *change* in a previously noted condition, symptom or problem.
27. Medical care or surgery that is cosmetic in nature.
28. Cataract surgery or services provided by a naturopath or an optometrist or in a convalescent home, nursing home, rehabilitation centre or health spa.
29. Medical repatriation services unless approved in advance and arranged by the Assistance Centre.
30. Damage to or loss of sunglasses (prescription or otherwise), contact lenses, or prosthetic teeth or limbs, and resulting prescription thereof.
31. For policy extensions: any *medical condition, injury* or *sickness* which first appeared, was diagnosed or for which *you* received medical *treatment* after the scheduled *departure date* and prior to the *effective date* of the insurance extension.
32. An *act of war* or *act of terrorism*.
33. Any loss resulting from:
  - a specific or related *medical condition* which *you* contracted in a foreign country during *your* coverage period; and/or
  - an *act of war* or an *act of terrorism*,

when, before *you* left *home*, the government of *your home* country issued a formal travel warning which recommended that citizens of *your* country not travel to that country, region or city. For this exclusion, *medical condition* is limited to the reason for which the formal warning was issued and includes complications arising from such *medical condition*.

Where an *act of terrorism* directly or indirectly causes *you* a loss for which benefits would otherwise be payable in accordance with the terms and conditions of this policy, this insurance will provide coverage as follows:

- For all **Emergency Medical Insurance** and **Trip Cancellation & Interruption Insurance** coverage, *we* will provide benefits to *you* for *your covered expenses*, subject to the maximums shown in the benefits section and this provision; and
- The benefits payable, as described directly above, are in excess of all other potential sources of recovery, including alternative or replacement travel options offered by airlines, tour operators, cruise lines and other *travel suppliers* and other insurance coverage (even where such other coverage is described as excess) and will only become available after *you* have exhausted all such other sources.

Any benefits payable pursuant to *our* **Emergency Medical Insurance** and **Trip Cancellation & Interruption Insurance** shall be subject to an overall maximum aggregate payable limit relating to all in force travel policies issued by *us*, including this policy. If total claims otherwise payable for a type of coverage under all travel policies issued by *us*, resulting from one or more *acts of terrorism* occurring within an applicable time period, exceed this maximum aggregate payable limit, then the amount paid on each claim shall be reduced on a pro rata basis so that the total amount paid in respect of all such claims shall be the maximum aggregate payable limit.

Coverage is only available for up to two (2) *acts of terrorism* within a calendar year and the maximum aggregate payable limit for each *act of terrorism* is:

Type of Coverage	Maximum Aggregate for Each Act of Terrorism (CDN\$)
Emergency Medical Insurance	<b>\$35,000,000</b>
Trip Cancellation & Trip Interruption	<b>\$2,500,000</b>

If, in *our* judgment, the total of all payable claims under one or more *acts of terrorism* may exceed the applicable limits, *your* pro-rated claim may be paid after the end of the calendar year in which *you* qualify for benefits.

### Exclusion to this Terrorism Coverage provision

Notwithstanding any provision to the contrary within this policy or any endorsement thereto, this policy does not cover any liability, loss, cost or expense of whatsoever nature which is directly or indirectly caused by, resulting from, arising out of or in connection with any *act of terrorism* perpetrated by biological, chemical, nuclear or radioactive means, regardless of any other cause contributing concurrently or in any other sequence to the liability, loss, cost or expense.

## WHAT ELSE DO YOU NEED TO KNOW?

Coverage under this policy is issued on the basis of information provided in *your* application (including the *questionnaire* if required). *Your* entire contract with *us* consists of: this policy; *your* application for this policy (including the completed and signed *questionnaire*, if required); the *confirmation* issued in respect of that application; and any other amendments or endorsements resulting from extensions or top-ups of coverage.

**This insurance is void in the case of fraud or attempted fraud, or if *you* conceal or misrepresent any material fact in *your* application for this policy, extension or top-up of coverage for benefits under this policy.**

This policy is non-participating. *You* are not entitled to share in *our* divisible surplus. Neither *we* nor *our* agents or administrators are responsible for the availability, quality or results of any medical *treatment* or transportation, or for *your* failure to obtain medical *treatment*.

The right of any person to designate persons to whom or for whose benefit insurance money is payable is restricted.

This policy shall be governed by and construed in accordance with the laws of the province or territory of residence of the *insured*. For Visitors to Canada, this policy shall be governed by the laws of the Canadian province or territory where this policy was issued.

**Despite any other provision contained in the contract, the contract is subject to the applicable statutory conditions in the Insurance Act, as applicable in *your* province of residence, respecting contracts of accident and sickness insurance.**

### Premium

The required premium is due and payable at the time of purchase and will be determined according to the schedule of premium rates then in effect. Premium rates and policy terms and conditions are subject to change without prior notice.

Upon payment of premium, this document becomes a binding contract provided it is accompanied by a *confirmation* upon which a contract number appears and *we* have received *your* completed application (including the *questionnaire*, if applicable) prior to *your* departure date. If the premium is insufficient for the period of coverage selected, *we* will:

1. charge and collect any underpayment; or
2. shorten the policy period by written endorsement if an underpayment in premium cannot be collected.

If *you* have purchased an annual plan or if *you* have purchased insurance for a period of coverage of 183 days or more, *you* have 10 days from the date of purchase to review this policy. If it does not meet *your* needs, *you* may cancel it and get the premium refunded by notifying *us*. *Your* ability to cancel the policy may be affected if *you* have already departed on *your* trip.

Coverage will be null and void if the premium is not received, if a cheque is not honoured for any reason, if credit card charges are invalid or if no proof of *your* payment exists.

### How does this insurance work with other coverages that *you* may have?

The plans outlined in this policy are second-payor coverages. If there are other third-party liability, group or individual, basic or extended health insurance plans or contracts including any private or provincial or territorial auto insurance plan providing *hospital*, medical or therapeutic coverage or any other third-party liability insurance in force concurrently herewith, amounts payable hereunder are limited to that portion of *your* expenses, incurred outside the province or territory of residence, that are in excess of the amounts for which *you* are insured under such coverage.

Total benefits paid to *you* by all insurers cannot exceed *your* actual expenses. *We* will coordinate the payment of benefits with all insurers who provide *you* with benefits similar to those provided under this insurance (except if *your* current or former employer provides *you* with an extended health insurance plan with a lifetime maximum coverage of \$50,000 or less) to a maximum of the largest amount specified by any such insurer.

In addition, *we* have full rights of subrogation. In the event of a payment of a claim under this policy, *we* will have the right to proceed, in *your* name, but at *our* expense, against third parties who may be responsible for giving rise to a claim under this policy. *You* will execute and deliver such documents as are necessary and cooperate fully with *us* to allow *us* to fully assert *our* rights. *You* must do nothing to prejudice such rights.

If *you* are insured under more than one insurance policy underwritten by *us*, the total amount *we* pay to *you* cannot exceed *your* actual expenses; and the maximum *you* are entitled to is the largest amount specified for the benefit in any one policy. If the total amount of all accident insurance *you* have under policies issued by *us* is more than \$250,000, *our* aggregate liability will not exceed that amount, and any excess insurance will be void and the premiums paid for such excess insurance will be refunded.

## HOW TO MAKE A CLAIM

### **In the event of an *emergency*, call the Assistance Centre immediately, prior to receiving *treatment*:**

1-877-737-6368 toll-free from the USA and Canada or +1 (519) 251-7819 collect where available.

The Assistance Centre is ready to assist *you* 24 hours a day, 365 days a year.

If *you* are unable to do so immediately because *you* are medically incapacitated, someone else must contact the Assistance Centre as soon as is reasonably possible.

### **Failure to notify the Assistance Centre immediately will limit the benefits payable under this policy to:**

- a. in the event of *hospitalization*, 80% of eligible expenses based on *reasonable and customary charges* to a maximum of \$25,000; and**
- b. in the event of *out-patient medical consultation*, a maximum of one visit per *sickness or injury*.**

### ***You will be responsible for the payment of any remaining charges.***

If it is medically impossible for *you* to call when the *emergency* happens, the co-insurance will not apply. In this case, *we* ask that *you* call as soon as *you* can or that someone call on *your* behalf. Do not assume that someone will contact the Assistance Centre for *you*. It is *your* responsibility to verify that the Assistance Centre has been contacted.

If *you* choose to pay eligible expenses directly to a health service provider without prior approval by the Assistance Centre, these services will be reimbursed to *you* on the basis of the *reasonable and customary charges* that *we* would have paid directly to such provider.

Medical charges that *you* pay may be higher than this amount; therefore *you* will be responsible for any difference between the amount *you* paid and the *reasonable and customary charges* reimbursed by *us*. Some benefits are not covered if they have not been authorized and arranged by the Assistance Centre.

To make a claim for benefits under this policy, *your* written proof of claim and *your* fully completed Maritime Travel Insurance claim form(s) must be submitted to *us* within 90 days (30 days for Rental Vehicle Damage) after the event, but not more than 12 months after the date of such event or loss. More information on the documentation that must be submitted with *your* written proof of claim is provided below.

Written claims correspondence should be mailed to:

Maritime Travel Insurance  
c/o Manulife Financial  
PO BOX 1237 Station A  
Windsor, ON N9A 6P8

***You may also call the Assistance Centre* directly to inquire about *your* claim status at: 1-855-841-4792.**

For coverage information or general enquiries, please contact the **Maritime Travel Insurance Customer Service Centre at 1-888-595-5311.**

**If *you* are making a Trip Cancellation & Interruption Insurance claim,** *we* will need proof of the cause of the claim, including: a) a medical certificate completed by the attending *physician* and stating why travel was not possible as booked, if the claim is for medical reasons; or b) a report from the police or other responsible authority documenting the reason for the delay if *your* claim is due to a misconnection, or c) if claiming due to cancellation of ticketed commercial event, the cancellation notice issued by the promoter of the event and the unused ticket for such event. *We* will also need, as applicable: a) complete original unused transportation tickets and vouchers; b) original passenger receipts for the new tickets *you* had to purchase; c) original receipts for the travel arrangements *you* had paid in advance and for the extra hotel, meal, telephone and taxi expenses *you* may have had; d) any other invoice or receipt supporting *your* claim; and e) the entire medical file of any person whose health or *medical condition* is the reason for *your* claim.

**If *you* are making a Default Protection claim,** *we* must receive written notice of the claim within 60 days of the day on which the *travel supplier* announces that it is in *default*. *You* must submit proof of loss (including original receipts, proofs of payment to *travel suppliers*, proof of payment for insurance, unused transportation or accommodation documents and, where appropriate, evidence of claim to or reimbursement from any federal, provincial or other compensation fund, or other insurance, or any other source (including credit card companies) that is legally responsible or under contract to reimburse *you* for the cost of such undelivered *travel services*) no later than 30 days immediately after such filing deadline.

**If *you* are making an Emergency Medical Insurance claim,** *we* will need: a) original itemized receipts for all bills and invoices; b) proof of payment by *you* and by any other benefit plan; c) medical records including complete diagnosis by the attending *physician* or documentation by the *hospital*, which must support that the *treatment* was *medically necessary*; d) proof of the accident if *you* are submitting a claim for dental expenses resulting from an accident; e) proof of travel (including departure and return dates); and f) *your* historical medical records (if *we* determine applicable). **If *you* are making an Emergency Medical Insurance claim under a Visitors To Canada Plan,** *we* would also need a copy of *your* airfare ticket and passport or receipts confirming travel dates and entry into Canada.

### **If *you* are making a Baggage Loss, Damage & Delay Insurance claim, the following conditions apply:**

1. In the event of theft, burglary, robbery, malicious mischief, disappearance or loss of an item covered under this insurance, *you* must obtain written documented evidence from the police immediately or, if the police are unavailable, the hotel manager, tour guide or transportation authorities. *You* must also take all precautions to protect, save or recover the property immediately, and advise *us* as soon as *you* return *home*. *Your* claim will not be valid under this insurance if *you* do not comply with these conditions.
2. If the property *you* have checked with a *common carrier* is delayed, *we* will continue to provide coverage until the property is delivered by the carrier.
3. *We* cover the current actual cash value of *your* property when it is lost or damaged. *We* also reserve the option to repair or replace *your* property with other of similar kind, quality and value. *We* may also ask *you* to submit damaged items for an appraisal of the damage. If a lost or damaged article is part of a set, *we* will cover a reasonable and fair proportion of the total value of the set, but not the total value of the set.

4. If *you* need to make a claim under this insurance, *we* will need:
- copies of reports from the authorities as proof of loss, damage or delay; and
  - proof that *you* owned the articles, and receipts for their replacement.

If *you* are making a **Flight & Travel Accident Insurance claim**, the following conditions apply:

- We* will need: a) police, autopsy or coroner's report; b) medical records; and c) death certificate, as applicable.
- If *your* body is not found within 12 months of the accident, *we* will presume that *you* died as a result of *your* injuries.

If *you* are making a **Rental Vehicle Damage Insurance claim**, the following conditions apply:

- We* will need: a) *your rental vehicle* invoice, b) *your* rental agreement with the record of the damages that existed when *you* picked up the *rental vehicle*, c) the police report and *rental vehicle* agency report, and d) an estimate of repair costs or the repair bill.
- You* must not undertake any repairs other than those that are immediately necessary for the protection of the *rental vehicle* from further loss or damage, nor remove any physical evidence of the loss or damage without *our* consent.

#### Who will *we* pay *your* benefits to if *you* have a claim?

Except in the case of *your* death, *we* will pay the *covered expenses* under this insurance to *you* or the provider of the service. Any sum payable for loss of life will be payable to *your* estate. *You* must repay *us* any amount paid or authorized by *us* on *your* behalf if *we* determine that the amount is not payable under *your* policy. All amounts shown throughout this contract are in Canadian dollars. If currency conversion is necessary, *we* will use *our* exchange rate on the date *you* received the service outlined in *your* claim. *We* will not pay for any interest under this insurance.

#### Is there anything else *you* should know if *you* have a claim?

If *you* disagree with *our* claim decision, the matter may be submitted to arbitration under the arbitration law in the Canadian province or territory where *you* reside at the time of application for this policy, or for the Visitors To Canada Plans, where *your* policy was issued in Canada.

Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act, or other applicable legislation.

For the purposes of determining the validity of a claim under this policy, *we* may obtain and review the medical records of the attending *physician(s)*, including the records of the regular *physician(s)* at home. These records may be used to determine the validity of a claim whether or not the contents of the medical records were made known to *you* before *you* incurred a claim under this policy. In addition, *we* have the right, and *you* shall afford *us* the opportunity, to have *you* medically examined when and as often as may reasonably be required while benefits are being claimed under this policy. If *you* die, *we* have the right to request an autopsy, if not prohibited by law.

When italicized in this policy, the term:

**Act of terrorism** means any activity, occurring within a 72-hour period, save and except an *act of war*, against persons, organizations, property (whether tangible or intangible) or infrastructure of any nature by an individual or a group based in any country that involves the following or preparation for the following:

- use, or a threat to use, force or violence; or
- commission of, or a threat to commit, a dangerous act; or
- commission of, or a threat to commit, an act that interferes with or disrupts an electronic, information or mechanical system;

and the effect or intention of the above is to:

- intimidate, coerce or overthrow a government (whether de facto or de jure) or to influence, affect or protest against its conduct or policies; or
- intimidate, coerce or instill fear in the civilian population or any segment thereof; or
- disrupt any segment of the economy; or
- further political, ideological, religious, social or economic objectives or to express (or express opposition to) a philosophy or ideology.

**Act of war** means hostile or warlike action, whether declared or not, in a time of peace or war, whether initiated by a local government, foreign government or foreign group, civil unrest, insurrection, rebellion or civil war.

**Age** means the *age* as calculated at time of application.

**Change** means *you* have experienced an increase in symptoms, developed new symptoms, required investigation, required a *change* in frequency or dosage of medication, required a *change* in *treatment*, were *hospitalized*, required medical consultation (other than a routine examination) or had a deterioration of an existing condition.

**Change in medication** means the medication dosage or frequency has been reduced, increased, or stopped and/or new medication(s) has/have been prescribed. **Exceptions:** the routine adjustment of Coumadin, warfarin or insulin, (as long as they are not newly prescribed or stopped) and there has been no *change* in *your* *medical condition*; and a change from a brand name medication to a generic brand medication of the same dosage.

**Child, Children** means an unmarried, dependent son or daughter or *your* grandchild(ren) under the *age* of 21 or, if a full-time student, under the *age* of 26. Also, an unmarried dependent son or daughter of any *age*, if mentally or physically handicapped. In addition, a *child* must be at least 31 days old to be covered under any plan that includes Emergency Medical insurance.

**Common carrier** means a conveyance (bus, taxi, train, boat, airplane or other *vehicle*) which is licensed, intended and used to transport paying passengers.

**Confirmation** means the document or set of documents confirming *your* insurance coverage under this policy and, where applicable, *your* *trip* arrangements. It includes the medical *questionnaire*, if required, and application for this policy, once *you* have completed and submitted it with the required premium to *us*. It may also include tickets or receipts issued by an airline, travel agent, tour operator, rental agency, cruise line or other accommodation or travel provider with whom *you* made arrangements for *your* *trip*.

**Covered expenses** means *reasonable and customary charges you incur for supplies and services which are eligible expenses under the Emergency Medical Insurance provisions and which are either in excess of or not covered under your government health insurance plan, a Canadian university health insurance plan or any other plan.*

**Deductible** means the amount of a *covered expense* that you are responsible for paying, per person per claim, under Emergency Medical Insurance coverage.

**Default** means the inability of a *travel supplier* to provide *travel services* for which you have contracted with the *travel supplier*, because of complete or substantially complete cessation of business by the *travel supplier* resulting directly or indirectly from bankruptcy or insolvency thereof.

**Departure date** means the later of the date shown as such on *your confirmation* or the date you actually depart on *your trip*. For the Visitors To Canada Plans, it means the date you leave *home*.

**Effective date** means the date on which *your coverage* starts.

- For Trip Cancellation Insurance, coverage starts at the date and time you pay the premium for that coverage (indicated as the purchase date on *your confirmation*).
- Rental Vehicle Damage Insurance starts when you legally assume control of the *rental vehicle* as indicated on *your rental contract*.
- For the Visitors To Canada Plan, coverage starts on the later of:
  - i) the *effective date* of insurance as shown on *your confirmation*; or
  - ii) the time and date you arrive in Canada from *home*.
- All other coverages start on the later of: i) *your departure date*; or ii) the *effective date* as shown on *your confirmation*.

**Emergency** means a sudden and unforeseen occurrence of a *medical condition* or *sickness* that begins during the period of insurance and requires immediate *treatment*. An *emergency* no longer exists when the Assistance Centre determines that you are able to continue *your trip* or return *home*.

**Expiry date** means the date *your coverage* ends.

- For Trip Cancellation Insurance, *your coverage* ends on the earlier of *your departure date* or the date you cancel *your trip*.
- Rental Vehicle Damage Insurance ends at the moment the agency reassumes control of the *rental vehicle* or the rental contract ends, or 31 days after the contract started, whichever is earliest.
- For the Visitors To Canada Plan, *your coverage* ends on the earliest of the following:
  - a) the date you leave Canada to return *home*;
  - b) when the number of days of coverage you purchased, as shown in *your confirmation*, expires;
  - c) no later than 365 days after *your effective date* of insurance; or
  - d) the first day you become insured under a Canadian provincial or territorial *government health insurance plan*.
- Other coverages end on the earliest of these dates:
  - a) the date you return *home*;
  - b) the *expiry date*, as shown on *your confirmation*; or
  - c) when the number of days you purchased expires.

**Fare** means the lowest single seat *fare* from any **ATC** or **IATA Air Carrier**. For the **Elite Plan** and the **Elite Non-Medical Plan**, *fare* means the same ticket class that you originally purchased (subject to availability) for *your trip*.

**Government health insurance plan** means the health insurance coverage that a Canadian provincial or territorial government provides to its residents; or for the Visitors To Canada Plans, coverage that governments of *your home* or *your country* of residence provide to you.

**Home** means, in the case of Emergency Medical Insurance, *your* Canadian province or territory of residence. In the case of Trip Interruption, Flight and Travel Accident, Baggage, Personal Money and Rental Vehicle Damage Insurances, it means the place you leave from on the first day of coverage and are scheduled or ticketed to return to on the last day of coverage. For the Visitors To Canada Plan, it means *your country* of residence or origin or *your place* of departure before arriving in Canada.

**Hospital** means a facility that is licensed as a *hospital* where in-patients receive medical care and diagnostic and surgical services under the supervision of a staff of *physicians* with 24-hour care by registered nurses. A clinic, an extended or palliative care facility, a rehabilitation establishment, an addiction centre, a convalescent, rest or nursing home, home for the aged or health spa is not a *hospital*.

**Hospitalization** or **hospitalized** means you are admitted to a *hospital* and are receiving *medical attention* on an in-patient basis.

**Immediate family** means *spouse*, parent, legal guardian, step-parent, grandparent, grandchild, in-law, natural or adopted *child*, stepchild, brother, sister, stepbrother, stepsister, aunt, uncle, niece or nephew.

**Injury** means sudden bodily harm that you sustain and that is caused by external and purely accidental means, directly and independently of *sickness* or disease and all other causes.

**Insured(s)** means the person(s) named on the contract form or the *confirmation* document upon which a Maritime Travel Insurance policy number appears.

**Key-person** means someone to whom a dependant's full-time care is entrusted and who cannot reasonably be replaced, a business partner, or an employee who is critical to the ongoing affairs of *your business*, during the *trip*.

**Medical attention** means *treatment* required for the immediate relief of an acute symptom or that, according to a *physician*, cannot be delayed until you return *home*. It must be ordered by and received during the *trip* from a licensed *physician*, physiotherapist, chiropractor, osteopath, chiropodist or podiatrist.

**Medical condition** means *injury*, illness, disease or symptom; complication of pregnancy within the first thirty-one (31) weeks of pregnancy; a mental or emotional disorder that requires admission to a *hospital*, or acute psychosis.

**Medically necessary** in reference to a given service or supply, means such service or supply: a) is appropriate and consistent with the diagnosis according to accepted community standards of medical practice; b) is not experimental or investigative in nature; c) could not be omitted without adversely affecting *your condition* or quality of medical care; d) cannot be delayed until you return *home*; and e) is delivered in the most cost-effective manner possible, at the most appropriate level of care and not primarily for reasons of convenience.

**Minor infection** means an infection that ends **30 days** prior to the *effective date* of coverage and does not require: use of medication for a period greater than **15 days**; more than one follow-up visit to a *physician*; *hospitalization*; surgical intervention; or consultation with a medical specialist. A chronic infection or the complication of a chronic infection is not a *minor infection*.

**Mountaineering** means the ascent or descent of a mountain requiring the use of specialized equipment including crampons, pickaxes, anchors, bolts, carabiners and lead-rope or top-rope anchoring equipment.

**Physician** means a medical doctor who is duly licensed in the jurisdiction in which he/she operates and who gives medical care within the scope of his/her licensed authority. A *physician* must be a person other than *you* or a member of *your immediate family*.

**Plane** means a multi-engine aircraft operated by and licensed to a regularly scheduled airline on a regularly scheduled trip operated between licensed airports and holding a valid Canadian Air Transport Board licence, Charter Air Carrier licence, or its foreign equivalent, and operated by a certified pilot.

**Pre-existing condition** means a *medical condition*, other than a *minor infection*, that exists before *your effective date* of insurance.

**Professional** means a person who engages in a specific activity as his/her principal paid occupation and for which he/she receives remuneration.

**Professional career program** means a registered course where a formal examination takes place at a set date and time.

**Questionnaire** means the document *you* must fill out truthfully and accurately to confirm *your* eligibility and rate category for the **Annual Medical** and the **Medical Only Plans**.

**Reasonable and customary charges** means costs that do not exceed the standard fee of other providers of similar standing in the same geographical area, when providing the same *treatment* of a similar *medical condition*, *sickness* or *injury* or for other comparable services or supplies for similar circumstances.

**Rental vehicle** means a private passenger automobile, mini-van, self-propelled mobile home, camper truck or trailer that *you* use during *your trip* and rent, under a written contract, from a commercial rental agency licensed under the laws of its jurisdiction. *We* do not mean any of the following: truck, van, bus, sport utility vehicle while *you* use it off road, automobile designed and manufactured primarily for off-road use while it is being used off road, motorcycle, moped, motorbike, recreational vehicle, all-terrain vehicle, camper, trailer, automobile that is more than 20 years old, limousine, or exotic vehicle of these or similar makes: Aston Martin, Bentley, Ferrari, Porsche or Rolls Royce.

**Sickness** means a disease or disorder of the body which results in loss while this coverage is in effect.

**Speed contest** means an organized activity of a competitive nature in which speed is a determining factor in the outcome of the event.

**Spouse** means someone to whom one is legally married, or with whom one has been living in a conjugal relationship for at least one full year before the *effective date* of this insurance.

**Stable** means a *medical condition* for which:

- there has not been any new symptom(s); and
- existing symptom(s) have not become more frequent or severe; and
- a *physician* has not determined that the *medical condition* has become worse; and
- no test findings have shown that the *medical condition* may be getting worse; and
- a *physician* has not provided, prescribed, or recommended any new medication, any *change in medication*; and
- a *physician* has not provided, prescribed or recommended any new *treatment* or any *change in treatment*; and
- there has been no admission to a *hospital* or specialty clinic; and
- a *physician* has not advised a visit to a specialist or to have further testing, and there has been no testing for which the results have not yet been received.

**Terminal illness** means a *medical condition* for which a *physician* has estimated that *you* have less than 6 months to live.

**Travel companion** means the person(s) who is(are) travelling with *you* on *your trip*. No more than five (5) individuals (including the *insured*) will be considered *travel companions* on any one *trip*.

**Travel services** means transportation, sleeping accommodation or other service provided or arranged by a *travel supplier* for *your* use (but does not include taxes or insurance).

**Travel supplier** means a tour operator, travel wholesaler, airline, cruise line, provider of ground transport or provider of travel accommodation or provider of other services to *you* that is:

- a) contracted to provide *travel services* to *you*; and
- b) licensed, registered or is otherwise legally authorized in the particular location of the *travel supplier* to operate and provide *travel services* as shown on *your confirmation*.

**Treatment** means a medical, therapeutic or diagnostic procedure prescribed, performed or recommended by a licensed medical practitioner, including but not limited to prescribed medication, investigative testing and surgery related to any *medical condition*, *sickness*, *injury* or symptom.

**Trip** means the period of time between *your effective date* of insurance and *expiry date* as shown on *your confirmation*.

**Vehicle** includes any private or rental automobile, boat, motorcycle, camper truck, mobile home or trailer home (not including any commercial trailers) which *you* use during *your trip* exclusively for the transportation of passengers (other than for hire).

**We, us, our** means First North American Insurance Company (FNA) in connection with Baggage and Personal Money Insurance and coverage for the risks identified with ‡ throughout this document; and The Manufacturers Life Insurance Company (Manulife Financial) in connection with all other coverages under this policy. The participation of the insurers is several and not joint and none of them will under any circumstances participate in the interest and liabilities of any of the others.

**You, your** means the person(s) named as *insured(s)* on the *confirmation*, for whom insurance coverage was applied for and for whom the appropriate premium was received by *us*.

In this policy, words and terms denoting the singular shall be interpreted to mean the plural and vice versa, unless the context clearly indicates otherwise.

## NOTICE ON PRIVACY

**Your privacy matters.** *We* are committed to protecting the privacy of the information *we* receive about *you* in the course of providing the insurance *you* have chosen. While *our* employees need to have access to that information, *we* have taken measures to protect *your* privacy. *We* ensure that other professionals, with whom *we* work in giving *you* the services *you* need under *your* insurance, have done so as well. To find out more about how *we* protect *your* privacy, please read *our* Notice on Privacy and Confidentiality.

**Notice on Privacy and Confidentiality.** The specific and detailed information requested on the application form is required to process the application. To protect the confidentiality of this information, Manulife Financial will establish a “financial services file” from which this information will be used to process the application, offer and administer services and process claims. Access to this file will be restricted to those Manulife Financial employees, mandataries, administrators or agents who are responsible for the assessment of risk (underwriting), marketing and administration of services and the investigation of claims, and to any other person *you* authorize or as authorized by law. These

people, organizations and service providers may be in jurisdictions outside Canada, and subject to the laws of those foreign jurisdictions. *Your* file is secured in *our* offices or those of *our* administrator or agent. *You* may request to review the personal information it contains and make corrections by writing to: Privacy Officer, Affinity Markets, Manulife Financial, 2 Queen Street East, Toronto, Ontario M5C 3G7

## HOW TO REACH US

**In the event of an *emergency*, call:**

**1-877-737-6368**

Toll-free from the U.S. and Canada

**+1 (519) 251-7819**

**Collect** to Canada where available

If *you* are unable to do so immediately because *you* are medically incapacitated, someone else must contact the Assistance Centre as soon as is reasonably possible.

**Failure to notify the Assistance Centre immediately will limit the benefits payable under this policy to:**

- a. **80% of eligible expenses based on *reasonable and customary charges* to a maximum of \$25,000 in the event of *hospitalization*; and**
- b. **in the event of out-patient medical consultation, a maximum of one visit per *sickness or injury*.**

***You* will be responsible for the payment of any remaining charges.**

If *you* are unable to call *us* collect, please make sure *you* obtain the receipt(s) for the cost of placing the call(s) and submit those receipts with *your* claim.

**If making a claim, *you* can contact *us* at:**

### **MARITIME TRAVEL INSURANCE**

c/o Manulife Financial  
PO BOX 1237 Station A  
Windsor, ON N9A 6P8  
Telephone: **1 855-841-4792**

### **ASSURANCE VOYAGE MARITIME**

a/s Financière Manuvie  
a/s Administration des Soins Actifs  
C. P.1237, succ. A  
Windsor (Ontario) N9A 6P8  
Téléphone : **1 855 841-4792**