

**Travel Insurance**

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

**1 888 881-8010** toll-free from  
the USA and Canada.

**+1 (519) 945-8346** collect to  
Canada from anywhere else in the world.

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

**Manulife Financial**  
With you every step of the way™

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NAME \_\_\_\_\_

POLICY # \_\_\_\_\_



Please remember to keep this card in your wallet during your trip.

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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 emergency. But these events can 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.

Today, with millions of customers, Manulife Financial offers a diverse range of financial protection products and wealth management services. Operating in 19 countries and territories worldwide, Manulife Financial is a financially strong company committed to customer service excellence and value.

Financial security. Comprehensive benefits. Competitive premiums. Easy-to-follow procedures. Consumer-friendly documentation. Caring assistance and claim services. They're all part of Manulife Financial.

### 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 exclusions or limitations.
- A pre-existing exclusion may apply to a medical condition and/or symptoms that existed prior to 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 illness, your prior medical history may be reviewed when a claim is reported.
- Your policy provides travel assistance. If you experience a medical emergency, you must notify our Assistance Centre immediately. For insurance coverage under the BounceBack Benefit and Trip Cancellation/Interruption, you must call our Assistance Centre within forty-eight (48) hours of the cause of claim. Your policy may limit benefits should you not contact the Assistance Centre.

PLEASE READ YOUR POLICY CAREFULLY  
BEFORE YOU TRAVEL

If you need medical attention or must make any other type of claim during your trip, call us for assistance first. The Assistance Centre is open 24 hours a day, 365 days a year.

Please note that if you do not call the Assistance Centre in an emergency, or prior to any treatment, you will have to pay 25% of the eligible medical expenses we would normally pay under this policy. If it is medically impossible for you to call, please have someone call on your behalf.

The Manufacturers Life Insurance Company

07/2009

If you need medical attention or must make any other type of claim during your trip, call us for assistance first. The Assistance Centre is open 24 hours a day, 365 days a year.

Please note that if you do not call the Assistance Centre in an emergency, or prior to any treatment, you will have to pay 25% of the eligible medical expenses we would normally pay under this policy. If it is medically impossible for you to call, please have someone call on your behalf.

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07/2009

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1 888 881-8010 toll-free from the USA and Canada

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from anywhere else in the world.

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

Please note that if ***you do not call*** the Assistance Centre in an *emergency* and prior to *treatment*, ***you will have to pay 25% of the eligible medical expenses*** we would normally pay under this policy. If it is medically impossible for *you* to call, please have someone call on *your* behalf.

### 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 the symbol ‡ throughout this document are covered by FNA. Manulife Financial has appointed Active Care Management as the provider of all assistance and claims services under this policy.

**ITALICIZED WORDS** have a specific meaning. Please refer to the "Definitions" section beginning on page 26 of this policy, to find the meaning of each italicized word.

PLANS-AT-A-GLANCE  
**MANULIFE FINANCIAL TRAVEL INSURANCE  
 PLANS-AT-A-GLANCE**

Benefits & Features	SINGLE-TRIP PLANS					MULTI-TRIP PLANS	
	Emergency Medical	Travel Canada Emergency Medical***	All-Inclusive	Quick Trip	Trip Cancellation/ Interruption	Emergency Medical	All-Inclusive
Eligible Age*	No Limit	No Limit	No Limit	55 to 74	No Limit	No Limit	No Limit
Emergency Medical	◆	◆	◆	◆		◆	◆
Trip Cancellation & Trip Interruption			◆		◆		◆
Baggage Loss, Damage & Delay			◆				◆
Flight & Travel Accident			◆				◆

**Features & Options Available**

Top-ups						◆	◆
Deductible Savings	◆			◆		◆	
Family Coverage** (under the age of 55)	◆	◆				◆	
BounceBack Benefit	◆	◆	◆	◆	◆		
Travel Companion Savings**	◆	◆	◆	◆	◆	◆	◆

\* Minimum age is 30 days old.

\*\* Family Coverage and Travel Companion savings cannot be combined.

\*\*\* The Travel Canada plan is offered at 50% off the regular Single-Trip Emergency Medical plan rates.

INSURANCE OFFERED†	COVERAGE AMOUNTS PER INSURED
Emergency Medical	Up to \$5,000,000 CDN per policy
Trip Cancellation & Trip Interruption	Single-Trip Plans – up to the sum insured to a maximum of \$3,000 per trip. Up to \$5,000 per trip to a maximum of \$7,000 per Multi-Trip All-Inclusive policy.
Baggage Loss or Damage	Up to \$1,000 per trip. Up to \$3,000 per Multi-Trip All-Inclusive policy.
Baggage Delay	Up to \$500 per trip. Up to \$1,500 per policy per Multi-Trip All-Inclusive policy.
Flight Accident	\$100,000 for death or double dismemberment or \$50,000 for single dismemberment.
Travel Accident	\$50,000 for death or double dismemberment or \$25,000 for single dismemberment.
BounceBack Benefit	Up to \$2,000.

† For all plans, if your covered expense results from an act of terrorism all benefit maximums shown in this policy may be reduced subject to the Terrorism Coverage benefit.

**ELIGIBILITY**

**To be eligible for Emergency Medical coverage you must:**

- be a resident of Canada and covered under a *government health insurance plan* for the entire duration of your trip.
- have paid the appropriate premium in full and be travelling outside your province of residence.

**To be eligible for stand-alone Trip Cancellation & Trip Interruption Insurance you must:**

- be living in Canada or travelling through Canada; and
- have paid the appropriate premium and purchased this insurance within seven (7) days of booking your trip or before any cancellation penalties are chargeable for that trip.

Under Trip Cancellation & Interruption Insurance, coverage will include travel within your province of residence.

ELIGIBILITY

## GENERAL INFORMATION

### ABOUT YOUR TRAVEL INSURANCE

#### Multi-Trip Plans:

- Provide coverage for an unlimited number of *trips* taken within one (1) year, commencing with the *effective date* as shown on *your confirmation*.
- Each *trip* taken can be up to the maximum days *you* selected when *you* purchased *your* Multi-Trip plan.
- Top-up coverage can be purchased for *trips* that are longer than the maximum *trip* length selected.
- For a *trip* to be covered under the benefits of Manulife Financial Travel Insurance, it must start on or after the *effective date* and end prior to or on the *expiry date* shown on *your confirmation* of coverage.

**NOTE:** If a *trip* begins during the coverage period but will extend beyond the *expiry date*, *you* can purchase top-up coverage for any travel days that fall after the *expiry date* or *you* can purchase a new Manulife Financial Travel Insurance Multi-Trip plan for the next 365-day period as long as the total duration of the *trip* does not exceed the maximum *trip* length *you* chose when *you* purchased the Multi-Trip plan.

All Multi-Trip plans provide *you* with *emergency* medical coverage for unlimited travel within Canada but outside *your* province or territory of residence.

In the event of a claim, *you* will be required to provide proof of *your departure date* and *your* return date. Proof can include *your plane* ticket, train ticket, a stamped passport, and/or credit card or bank statement showing purchases in Canada just prior to *your departure date*.

**Top-ups:** To top up *your* Multi-Trip plan for trips longer than the maximum number of coverage days *you* have, simply call the Customer Service Centre indicated on *your confirmation* before *you* leave *home* for the additional coverage days required. The Single-Trip Emergency Medical plan can be used to top-up *our* Multi-Trip plans or another insurer's plan. It is *your* responsibility to confirm that a top-up is permitted on *your* existing plan with no loss of coverage.

The Quick Trip Plan cannot be used to top up any Multi-Trip plan.

When *you* apply for top-up coverage *you* may be required to answer questions about *your* health status.

If ***you* have purchased Family Coverage** for any *Emergency* Medical Plan, all family members to be insured under one policy must be named on *your confirmation* and must be under age fifty-five (55) and a minimum of thirty (30) days of *age*. Family Coverage is not available for Quick Trip, All-Inclusive, Trip Cancellation & Trip Interruption or BounceBack plans.

#### WHEN YOUR COVERAGE STARTS

Trip Cancellation coverage, included in Trip Cancellation & Interruption and All-Inclusive plans, starts on the date *you* pay the premium for that coverage, shown as the purchase date on *your confirmation*.

For all other Single-Trip plans, coverage starts on the latest of:

- the *departure date*; or
- the *effective date* as shown on *your confirmation*.

For Multi-Trip plans, coverage starts on the *effective date* as shown on *your confirmation* and after that date, it starts each date *you* leave *home*.

For top-ups, coverage starts on the *effective date* specified on *your confirmation*.

#### WHEN YOUR COVERAGE ENDS

Trip Cancellation coverage, included in Trip Cancellation & Interruption and All-Inclusive plans, ends on the earlier of:

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

For all other plans, *your* coverage ends on the earliest of:

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

**AUTOMATIC EXTENSION** of *emergency* medical coverage is provided beyond *your expiry date* per *your confirmation* if:

- *your common carrier* is delayed. In this case, we will extend *your* coverage for up to seventy-two (72) hours;
- *you* or *your travel companion* are hospitalized on that date. In this case, we will extend *your* coverage during the hospitalization and for up to five (5) days after discharge from the *hospital*; or
- *you* or *your travel companion* have a medical *emergency* that does not require hospitalization but prevents travel. In this case, we will extend *your* coverage for up to five (5) days.

In any case, we will not extend any coverage beyond twelve (12) months after the date *you* first leave *home*.

## TO STAY LONGER THAN PLANNED

If *you* are already on *your trip* and need to apply for an extension of *your* coverage, simply call the Assistance Centre.

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

- the total length of *your trip*, including the extension, does not exceed 183 days (212 days if *you* reside in Ontario or Newfoundland);
- *you* pay the additional premium (minimum \$25); and
- there has been no event that has resulted or may result in a claim against the policy.

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

## REFUNDS

- *You* may cancel *your* policy prior to *your departure date* (*your effective date* if *you* have purchased a Multi-Trip Emergency Medical plan).
- If *you* return *home* early, *you* may request a refund of premium (minimum \$25) for the unused coverage days of *your trip* providing there has been or will be no claim reported or initiated and that *you* have mailed *us* *your* written request with proof of the date *you* actually returned *home*.
- All travellers insured under the same policy must return together for a refund to be possible.

Refunds and cancellations are not available on the BounceBack Benefit, *Trip* Cancellation & Interruption, All-Inclusive and Multi-*Trip* plans.

## EMERGENCY MEDICAL INSURANCE

Included in all *Emergency Medical* and All-Inclusive plans.

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

*Emergency Medical Insurance* covers *you* for up to \$5,000,000 CDN of *covered expenses* incurred by *you* as a result of *medical attention* required by *you* during *your trip* if a *medical emergency* begins unexpectedly after *you* leave *home*, but only if these *covered expenses* are in excess of any amount covered by *your government health insurance plan* or any other benefit plan. The *medical attention* must be required as part of *your emergency treatment*.

In the event of an *emergency*, call the Assistance Centre immediately: 1 888 881-8010 toll-free from the USA and Canada or +1 (519) 945-8346 collect to Canada from anywhere else in the world. Please note that if ***you do not call*** the Assistance Centre in an *emergency*, ***you will have to pay 25% of the eligible medical expenses*** we would normally pay under this policy. If it is medically impossible for *you* to call, please have someone call on *your* behalf.

***We will cover benefits #5 through #11 only if they have been authorized and arranged by the Assistance Centre.***

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

The eligible *covered expenses* are:

1. **Expenses for *emergency medical attention*** – *Reasonable and customary charges* for medical care received from a *physician* in or out of a *hospital*; the cost of a semi-private *hospital* room (or an intensive or coronary care unit where *medically necessary*); the services of a licensed private duty nurse while *you* are in *hospital*; the rental or purchase (whichever is less) of a *hospital* bed, wheelchair, brace, crutch or other medical appliance; tests that are needed to diagnose or find out more about *your* condition; and drugs that are prescribed for *you* and are available only by prescription from a *physician* or dentist.
2. **Expenses for paramedical services** – Care received from a licensed chiropractor, osteopath, physiotherapist, chiropodist or podiatrist, up to \$300 per profession.
3. **Expenses for ambulance transportation** – *Reasonable and customary charges* for local licensed ambulance service to transport *you* to the nearest appropriate medical service provider in an *emergency*.
4. **Expenses for *emergency dental treatment*** –
  - If *you* need *emergency dental treatment*, we will pay: up to \$300 for the relief of dental pain; and/or

- If *you* suffer an accidental blow to the mouth, we will pay up to \$3,000 to repair or replace *your* natural or permanently attached artificial teeth (up to \$2,000 during *your trip* and up to \$1,000 after *your return home*, to continue *medically necessary treatment* in the ninety (90) days after the accident).

#### 5. Expenses to bring someone to *your* bedside –

If *you* are travelling alone and are admitted to a *hospital* for three (3) days or more because of a medical *emergency*, we will pay the return economy class airfare via the most cost-effective itinerary for someone to be with *you*. We will also pay up to \$500 for that person's hotel and meals and cover them with *Emergency Medical Insurance* under the same terms and limitations of this policy until *you* are medically fit to return *home*. For a *child* insured under this policy, this benefit is available immediately upon their *hospital* admission.

#### 6. Extra expenses for meals, hotel, phone calls and taxi –

If a medical *emergency* prevents *you* or *your travel companion* from returning *home* as originally planned, or if *your emergency medical treatment* or that of *your travel companion* requires *your* transfer to a location that is different from *your* original destination, we will reimburse *you* up to \$150 per day to a maximum of \$1,500 for *your* extra meals, hotel, essential phone calls and taxi fares. We will only reimburse *you* for these expenses if *you* have actually paid for them.

#### 7. Expenses related to *your* death –

If *you* die during *your trip* from an *emergency* covered under this insurance, we will reimburse *your* estate for:

- up to \$5,000 to have *your* body prepared where *you* die and the cost of the standard transportation container normally used by the airline, plus the return *home* of *your* body;
- up to \$5,000 to have *your* body prepared and the cost of a standard burial container, plus up to \$5,000 for *your* burial where *you* die; or
- up to \$5,000 to cremate *your* body where *you* die, plus the return *home* of *your* ashes.

In addition, if someone is legally required to identify *your* body and must travel to the place of *your* death, we will pay the return economy class airfare via the most cost-effective itinerary for that person, and up to \$300 for that person's hotel and meal expenses. We will also provide that person with *Emergency Medical Insurance* under the same terms and limitations of this policy for up to seventy-two (72) hours.

#### 8. Expenses to bring *you* home –

If *your* treating *physician* recommends that *you* return *home* because of *your emergency* or if *our* medical advisors recommend that *you* return *home* after *your emergency*, we will pay for one or more of the following:

- the extra cost of economy class airfare via the most cost-effective itinerary; and/or
- a stretcher airfare on a commercial flight via the most cost-effective itinerary, if a stretcher is *medically necessary*; and/or
- the cost of return economy class airfare via the most cost-effective itinerary for a qualified medical attendant to accompany *you*, and the attendant's reasonable fees and expenses, if this is *medically necessary* or required by the airline; and/or
- the cost of air ambulance transportation if this is *medically necessary*.

#### 9. Expenses to return *children* under *your* care –

If *you* are admitted to *hospital* for more than twenty-four (24) hours or must return *home* because of an *emergency*, we will pay for the extra cost of one-way economy class airfare to return the *children home* via the most cost-effective itinerary and the return economy class airfare via the most cost-effective itinerary for a qualified escort when the airline requires it. The *children* must have been under *your* care during *your trip* and covered under a policy underwritten by *us*.

#### 10. Expenses to return *your travel companion* –

We will cover the extra cost of one-way economy class airfare via the most cost-effective itinerary, to return *your travel companion* (who is travelling with *you* at the time of *your emergency* and insured under *our* travel insurance plan) *home*, if *you* return *home* under benefit #8 above.

#### 11. Expenses to return *your vehicle home* –

If, because of a medical *emergency*, *you* are unable to drive the *vehicle* *you* used during *your trip*, we will cover up to \$2,000 charged by a commercial agency to bring *your vehicle home*. If *you* rented a *vehicle* during *your trip*, we will cover its return to the rental agency.

#### 12. Trip break –

If *you* have requested and received prior approval from *our* Assistance Centre, *you* may return *home* to *your* province of residence to attend special events without terminating *your* coverage. There will be no refund of premium for any of the days during *your* return *home*.

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

We will not pay any expenses or benefits relating to:

1. **A pre-existing condition.** The *pre-existing condition* exclusion that applies to *you* depends on the Rate Category *you* qualified for when *you* purchased this policy. Please see the definition of “*pre-existing condition*” and “*stable*” at the end of this policy booklet.

**Rate Categories A+ and A.** We will not pay any expenses relating to:

- a *pre-existing condition* that is not *stable* in the three (3) months before *your effective date*; and/or,
- *your heart condition* if, in the three (3) months before *your effective date*, it has not been *stable* or *you* have taken any form of nitroglycerine for the relief of angina pain; and/or,
- *your lung condition* if, in the three (3) months before *your effective date*, it has not been *stable* or *you* required *treatment* with oxygen or Prednisone for *your lung condition*.

**Rate Category B.** We will not pay any expenses relating to:

- a *pre-existing condition* that is not *stable* in the six (6) months before *your effective date*; and/or,
- *your heart condition* if, in the six (6) months before *your effective date*, it has not been *stable* or *you* have taken any form of nitroglycerine for the relief of angina pain; and/or,
- *your lung condition* if, in the six (6) months before *your effective date*, it has not been *stable* or *you* required *treatment* with oxygen or Prednisone for *your lung condition*.

**Rate Category C.** We will not pay any expenses relating to:

- a *pre-existing condition* that is not *stable* in the twelve (12) months before *your effective date*; and/or,
- *your heart condition* if, in the twelve (12) months before *your effective date*, it has not been *stable* or *you* have taken any form of nitroglycerine for the relief of angina pain; and/or,
- *your lung condition* if, in the twelve (12) months before *your effective date*, it has not been *stable* or *you* required *treatment* with oxygen or Prednisone for *your lung condition*.

**Rate Category D.** We will not pay any expenses relating to:

- a *pre-existing condition* for which *you* have taken, received or been prescribed medication or *treatment* in the three (3) months before *your effective date*; and/or,
- *your heart condition* if, in the three (3) months before *your effective date*, *you* have taken, received or been prescribed medication or *treatment* or *you* have taken any form of nitroglycerine for the relief of angina pain; and/or,

- *your lung condition* if, in the three (3) months before *your effective date* *you* have taken, received or been prescribed medication or *treatment* or *you* required *treatment* with oxygen or Prednisone for *your lung condition*.
2. *Covered expenses* that exceed the *reasonable and customary charges* where the medical *emergency* happens.
  3. Any *emergency* when, prior to the purchase date, *you* had not met all of the eligibility requirements or truthfully and accurately answered all the questions in the *medical questionnaire* (if applicable).
  4. Expenses that exceed \$25,000 if *you* do not have valid coverage under a *government health insurance plan* during *your trip*.
  5. *Covered expenses* that exceed 75% of the cost we would normally have to pay under this insurance if *you* or someone on *your behalf* does not contact the Assistance Centre at the time of the *emergency*, unless *your medical condition* makes it impossible for *you* to call (in which case, the 25% co-insurance does not apply).
  6. Any *treatment* that is not for an *emergency*.
  7. The continued *treatment* of a *medical condition* when *you* have already received *emergency treatment* for that condition during *your trip* and *our* medical advisors determine that *your medical emergency* has ended.
  8. A *medical condition*:
    - when *you* knew or for which it was reasonable to expect before *you left home*, or before the *effective date* of coverage, that *you* would need or be required to seek *treatment* for that *medical condition*; and/or
    - for which future investigation or *treatment* was planned before *you left home*; and/or
    - which produced symptoms that would have caused an ordinarily prudent person to seek *treatment* in the three (3) months before leaving *home*; and/or
    - that had caused *your physician* to advise *you* not to travel.
  9. An *emergency* resulting from: hang-gliding, rock-climbing, *mountaineering*, 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.
  10. *Treatment* if *you* specifically purchased this insurance to obtain such *treatment* whether or not it was authorized by a *physician*.
  11. Suicide; attempted suicide; or an intentional self-inflicted injury whether sane or insane.
  12. Committing or attempting to commit a criminal act.

13. Not following recommended or prescribed therapy or *treatment*.
14. Any loss, *injury* or death related to the misuse, abuse, overdose, or chemical dependence on medication, drugs, alcohol or other intoxicant, whether sane or insane.
15. A mental or emotional disorder (other than acute psychosis) that does not require admission to a *hospital*.
16. *Your* routine pre-natal care; *your* pregnancy or childbirth; complications of *your* pregnancy or childbirth when they happen in the nine (9) weeks before or after the expected date of delivery; or *your* child born during *your* trip.
17. For insured *children* under two (2) years of *age*, any *medical condition* related to a birth defect.
18. Any benefit that must be authorized or arranged in advance by the Assistance Centre when it has given no authorization or made no arrangement for that benefit.
19. Any *emergency* that occurs or recurs after *our* medical advisors recommend that *you* return *home* following *your* *emergency treatment*, and *you* choose not to.
20. An *act of war* or *act of terrorism*. Limited coverage applies with respect to an *act of terrorism*. See Terrorism Coverage.
21. Any loss resulting from an *act of war* or an *act of terrorism* when, before *your* *effective date*, a written formal Travel Warning was issued by Foreign Affairs and International Trade Canada, advising Canadians to avoid all or non-essential travel to that country, region or city.
22. Any medical condition *you* suffer or contract in a specific country, region or city for which Foreign Affairs and International Trade Canada has issued a formal Travel Warning, before *your* *departure date*, advising Canadians to avoid all or non-essential travel to that specific country, region or city. In this exclusion "medical condition" is limited to the reason for which the formal Travel 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.

We will pay *Emergency Medical* covered expenses in excess of the *deductible amount* that *you* have selected for this policy.

## TRIP CANCELLATION & TRIP INTERRUPTION INSURANCE

*Trip Cancellation & Trip Interruption Insurance* can be purchased separately as a stand-alone plan, or as part of the All-Inclusive plans.

To be eligible to purchase stand-alone *Trip Cancellation* coverage, *you* must be living in Canada or travelling through Canada and purchase this insurance within seven (7) days of booking *your* trip or before any cancellation penalties are chargeable for that *trip*.

#### Benefits – What does **Trip Cancellation & Trip Interruption Insurance** cover?

If ***you* are unable to travel due to a covered event listed below that occurs before *you* leave *home***, we will pay up to the covered amount for the prepaid unused portion of *your* trip that is non-refundable and non-transferable to another travel date. In addition, if *your* travel companion must cancel their trip due to a covered event applicable to them, 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. To cancel a trip before *your* scheduled *departure date*, *you* must cancel *your* trip with the travel supplier and notify us at 1 888 881-8010 or +1 (519) 945-8346 immediately or, at the latest, within forty-eight (48) hours of the cause of cancellation.

If ***your* trip is interrupted due to a covered event listed below that occurs on or after the day *you* plan to leave *home***, we will pay up to the covered amount for the prepaid portion of *your* trip that is non-refundable and non-transferable to another travel date except prepaid unused transportation *home*. In addition, we will pay *your* additional and unplanned hotel and meal expenses, *your* essential phone calls and taxi fares to a maximum of \$300 per day for up to two (2) days when no earlier transportation arrangements are available; and/or we will pay *your* one-way economy class airfare via the most cost-effective itinerary to *your* or *your* group's next destination, or to return *home*. We will pay for the change fee charged by the airline for *your* missed connection if this option is available, or up to \$1,000 for the cost of *your* one-way economy fare to the next destination.

The combined maximum total payable for *Trip Cancellation & Trip Interruption* expenses is \$3,000 per trip; and \$5,000 per trip and \$7,000 per policy under the Multi-*Trip* All-Inclusive plan.

***Trip Cancellation & Trip Interruption Insurance*** benefits are subject to the policy's maximums, exclusions and limitations. These benefits are payable if any of the following covered events happen:

1. *You* or *your* travel companion develop(s) a medical *emergency* or die(s).
2. A member of *your* immediate family, a member of *your* travel companion's immediate family or *your* key-person develops a medical *emergency* or dies; or the person whose guest

you will be during *your trip* is admitted to a *hospital* with an *emergency* or dies.

3. *You or your spouse*: a) become pregnant after *you book your trip* and *your departure date* falls in the nine (9) weeks before or after the expected delivery date, or b) legally adopt a child and the notice of custody is received after the *effective date* and the date of custody is scheduled in the nine (9) weeks before or after *your departure date*.
4. ‡ *Your or your travel companion's* travel visa is not issued for a reason beyond *your/their* control.
5. ‡ *You or your spouse* are called to service as a reservist, fire-fighter, military or police staff, or to jury duty or to be a defendant in a civil suit, during *your trip*; or *you or your spouse* are subpoenaed to be a witness during *your trip*.
6. ‡ *You, your spouse, your travel companion or your travel companion's spouse* are quarantined or hijacked.
7. ‡ *You or your travel companion* are unable to occupy *your/their* respective principal residence or to operate *your/their* respective business because of a natural disaster.
8. ‡ *You, your spouse, your travel companion or travel companion's spouse*: a) lose a permanent job because of lay-off or dismissal without just cause, b) are transferred by *your/their* respective employer; or c) must move from *your/their* respective principal residence.
9. ‡ *You or your travel companion* are transferred by the employer with whom *you or your travel companion* were employed at the time of application for this insurance, which requires a relocation of *your or your travel companion's* principal residence.
10. ‡ A business meeting that is the main intent of *your trip* and was scheduled before *you, or you and your travel companion* purchased this insurance, is cancelled for a reason beyond *your control* or the control of *your employer* and the meeting is between companies with unrelated ownership. Benefits are only payable to *you or you and your travel companion* (one individual) who purchased *our* insurance, if *you* are the one who planned to attend the business meeting.
11. ‡ Foreign Affairs and International Trade Canada issues a written formal Travel Warning after *you purchase your* insurance, advising Canadians to avoid all or non-essential travel to a destination included in *your trip*. This applies only to Canadian citizens.
12. ‡ Weather delays at least 30% of *your trip* and *you* choose not to travel.
13. ‡ *You* miss a connection or must interrupt *your trip* because of the delay of *your connecting private passenger vehicle or common carrier*, when the delay is caused by the mechanical failure of *your connecting private passenger vehicle or common carrier*, a traffic accident, an emergency police-directed road closure or weather conditions. *Your connecting private passenger vehicle*

or *common carrier* must have been scheduled to arrive at *your* point of boarding at least 2 hours before the scheduled time of departure.

14. The *plane* *you* are ticketed to fly on leaves earlier or later than scheduled. Note: This benefit is only covered under *Trip Interruption*.

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

For *Trip Cancellation & Trip Interruption Insurance*, we will not cover expenses or benefits relating to:

1. Any *medical condition* related to *you or your spouse* if that *medical condition* was not *stable* in the three (3) months before the *effective date*.
2. An event which, at the *effective date* of this insurance, *you* knew may eventually prevent *you* from going on or completing *your trip* as booked.
3. The *medical condition* or death of a person who is ill when the purpose of *your trip* is to visit that person.
4. Suicide, attempted suicide or *your* intentional self-inflicted injury whether sane or insane.
5. Committing or attempting to commit a criminal act.
6. Not following a prescribed therapy or *treatment*.
7. Any loss, *injury* or death related to the misuse, abuse, overdose, or chemical dependence on medication, drugs, alcohol or other intoxicant, whether sane or insane.
8. An emotional or mental disorder (except an acute psychosis) that does not require admission to a *hospital*.
9. A child who is born after *you leave home*; routine pre-natal care; pregnancy or childbirth; or complications of *your* pregnancy or childbirth when they happen in the nine (9) weeks before or after the expected date of delivery.
10. A *medical condition*:
  - when *you* knew or for which it was reasonable to expect before the *effective date* that *you* would need or be required to seek *treatment* for that *medical condition*;
  - for which future investigation or *treatment* was planned before *you left home*;
  - which caused symptoms that would have caused an ordinarily prudent person to seek *treatment* in the three (3) months before leaving *home*; or
  - that caused a *physician* to advise *you* not to go on *your trip*.
11. A travel visa that is not issued because of its late application.
12. An *act of war* or *act of terrorism*. Limited coverage applies with respect to an *act of terrorism*. See Terrorism Coverage.
13. Failure of any travel supplier which *you* contract for services. No protection is provided for failure of any travel agent, agency or broker.

14. Any loss resulting from an *act of war* or an *act of terrorism* when, before *your effective date*, a written formal Travel Warning was issued by Foreign Affairs and International Trade Canada, advising Canadians to avoid all or non-essential travel to that country, region or city.
15. Any medical condition *you* suffer or contract in a specific country, region or city for which Foreign Affairs and International Trade Canada, has issued a formal Travel Warning, before *your effective date*, advising Canadians to avoid all or non-essential travel to that specific country, region or city. In this exclusion "medical condition" is limited to the reason for which the formal Travel Warning was issued and includes complications arising from such medical condition.

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

If *you* cancel *your trip* before the *departure date*, *you* must advise *your* travel supplier and call *us* at 1 888 881-8010 or +1 (519) 945-8346 immediately or, at the latest, within forty-eight (48) hours of the cause of cancellation. Only the sums that are non-refundable and non-transferable on the date the insured risk occurs shall be considered for the purposes of the claim. Any delays in notifying *us* will limit *your* benefit to the non-refundable amount that would have been payable on the date the cause for claim occurred.

## BAGGAGE LOSS, DAMAGE & DELAY INSURANCE

Included in All-Inclusive plans.

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

Baggage Loss, Damage & Delay Insurance covers the loss of, damage to, and delay of the baggage and effects that belong to *you* and that *you* use during *your trip*. More specifically, this insurance provides *you* with reimbursement for the following expenses:

1. †Up to \$100 in total per *trip* for the replacement of a lost or stolen passport, driver's licence, birth certificate or travel visa.
2. †Up to \$500 in total per *trip* for necessary toiletries and clothing when *your* checked luggage is delayed by the carrier for at least ten (10) hours while *you* are en route. The maximum payable for this benefit under the Multi-Trip All-Inclusive plan is \$1,500 per policy.
3. †Up to \$300 per *trip* for any item or set of items which is lost or damaged during *your trip* to a maximum of \$1,000. The maximum payable for this benefit under the Multi-Trip All-Inclusive plan is \$3,000 per policy. Jewellery or cameras (including camera equipment) are, respectively, each considered a single item.

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

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

1. Animals, perishable items, bikes that are not checked as baggage with the *common carrier*; household items and furniture; artificial teeth or limbs, hearing aids, eyeglasses of any type, contact lenses; money, 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.
2. Damage or loss resulting from wear and tear, deterioration, defect, mechanical breakdown, *your* imprudence or omission.
3. Unaccompanied baggage, personal property left in an unattended vehicle, unlocked trunk, and any jewellery or camera placed in the custody of a *common carrier*.
4. In instances of theft, losses unreported to authorities.
5. Any loss resulting from an *act of war* or an *act of terrorism* on a *trip* while *you* are at a destination when, prior to *your departure date* for that destination, a written formal Travel Warning was issued by Foreign Affairs and International Trade Canada, advising Canadians avoid all or non-essential to travel to that country, region or city anytime during *your* coverage period.

See other conditions under How to Make a Claim.

## FLIGHT & TRAVEL ACCIDENT INSURANCE

Included in All-Inclusive plans.

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

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

1. If an accidental bodily *injury* causes *you* to die, to become completely and permanently blind in both eyes or to have two of *your* limbs fully severed above *your* wrist or ankle joints, in the twelve (12) months after the accident, *we* will pay: \$100,000 under Flight Accident Insurance; or \$50,000 under Travel Accident Insurance.
2. If an accidental bodily *injury* causes *you* to become completely and permanently blind in one eye or have one of *your* limbs fully severed above *your* wrist or ankle joint in the twelve (12) months after the accident, *we* will pay: \$50,000 under Flight Accident Insurance; or \$25,000 under Travel Accident Insurance.
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 and Travel Accident Insurance, the accident giving rise to *your injury* must happen: a) while *you* are travelling on a commercial passenger *plane* from which a ticket was issued to *you* for *your* entire airline *trip*; b) while *you* are making a flight connection, and riding over land or water at the expense of the airline or 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.

#### 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*, 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. Suicide, attempted suicide, or an 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. Not following recommended or prescribed therapy or *treatment*.
6. Any loss, *injury* or death related to the misuse, abuse, overdose, or chemical dependence on medication, drugs, alcohol or other intoxicant, whether sane or insane.
7. A mental or emotional disorder (other than acute psychosis) that does not require admission to a *hospital*.
8. 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*.
9. An *act of war* or *act of terrorism*.
10. Any loss resulting from an *act of war* or an *act of terrorism* when, before *your effective date*, a written formal Travel Warning was issued by Foreign Affairs and International Trade Canada, advising Canadians to avoid all or non-essential travel to that country, region or city.
11. Any medical condition *you* suffer or contract in a specific country, region or city for which Foreign Affairs and International Trade Canada, has issued a formal Travel Warning, before *your effective date*, advising Canadians to avoid all or non-essential travel to that specific country, region or city. In this exclusion "medical condition" is limited to the reason for which the formal Travel Warning was issued and includes complications arising from such medical condition.

## BOUNCEBACK BENEFIT

Available for purchase with Single-*Trip* plans (not applicable to Top-ups).

#### Benefits – What does the BounceBack Benefit cover?

If *you* have purchased the BounceBack Benefit with *your* Single-*Trip* Emergency Medical plan, Quick *Trip* plan or Single-*Trip* All-Inclusive plan and have to return *home* from *your trip* before *your* scheduled return date because of the following reasons:

- a member of *your immediate family*, who is not travelling with *you*, is admitted to a *hospital* due to an *emergency* or dies after *you* leave *home*,
- a natural disaster causes *your* principal residence to become uninhabitable after *you* leave *home*;

we will reimburse *your* actual expenses up to \$2,000 for *your* economy class airfare to return *home* from *your trip* destination via the most cost-effective itinerary and, within *your* period of coverage, return *you* back to that *trip* destination. In the case of a death of an *immediate family* member, we will pay the lesser amount of the cost of *your* economy return transportation to return *home* or to the place of residence of the deceased. Expenses and benefits are subject to the policy's maximums, exclusions and limitations.

For coverage under the BounceBack Benefit, *you* must call 1 888 881-8010 toll-free from the U.S. and Canada or +1 (519) 945-8346 collect to Canada from anywhere else in the world, within forty-eight (48) hours of the cause of claim. *Your* policy may limit benefits should *you* not contact *us*.

#### Exclusions & Limitations – What does the BounceBack Benefit not cover?

We will not pay any benefits or expenses relating to:

1. A reason that, at the time *you* purchased the BounceBack Benefit, *you* could reasonably have expected would require *you* to return *home* prior to *your* scheduled return date.
2. A *pre-existing condition* of an *immediate family* member for which *treatment* was received in the three (3) months before the purchase of this insurance, resulting in hospitalization or death of the *immediate family* member while *you* are on *your trip*.
3. *Your* return back to *your trip* destination after the planned date of return indicated on *your confirmation*.
4. An *act of war* or *act of terrorism*. Limited coverage applies with respect to an *act of terrorism*. See Terrorism Coverage.

## TERRORISM COVERAGE

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, Trip Cancellation & Trip Interruption Insurance and BounceBack Benefit coverage**, we will provide benefits to you for your covered expenses subject to the maximums shown in the benefits section and this provision;
- 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, Trip Cancellation & Trip Interruption Insurance and BounceBack Benefit** 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 prorated 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 (CDNS)
Emergency Medical	\$35,000,000
Trip Cancellation & Trip Interruption	\$2,500,000

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

### Exclusion to this Terrorism Coverage

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, results from, arises out of or is in connection with any *acts of terrorism* perpetrated by or is involving the utilization of 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 *medical questionnaire* if required). Your entire contract with us consists of: this policy, your application for this policy (including the completed *medical 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*. Despite any other provisions of this contract, this contract is subject to the statutory conditions contained in the Insurance Act respecting contracts of sickness and accident 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 policy number appears and we have received your completed application (including the *medical questionnaire* if required) 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.

## HOW TO MAKE A CLAIM

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

**1 888 881-8010** toll-free from the USA and Canada

**+1 (519) 945-8346** collect to Canada  
 from anywhere else in the world.

The Assistance Centre is ready to assist *you* twenty-four (24) hours a day, 365 days a year.

Please note that **if *you* do not call** the Assistance Centre in an *emergency* and prior to receiving *treatment*, ***you will have to pay 25% of the eligible medical expenses*** we would normally pay under this policy (25% co-insurance).

If it is medically impossible for *you* to call when the *emergency* happens, the 25% 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. For all other insurance coverage *you* must call *our* Assistance Centre within forty-eight (48) hours of the cause of *your* claim. **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, eligible expenses 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 due to illness or *injury* during *your trip*, *your* proof of claim must be sent to *us* within ninety (90) days of *your* loss.

**If *you* are making an *Emergency Medical Insurance* claim, we will need:**

- original itemized receipts for all bills and invoices;
- proof of payment by *you* and by any other benefit plan;
- medical records including complete diagnosis by the attending *physician* or documentation by the *hospital*, which must support that the *treatment* was *medically necessary*;
- proof of the accident if *you* are submitting a claim for dental expenses resulting from an accident;
- proof of travel (including departure and return dates); and
- *your* historical medical records (if we determine applicable).

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, 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 each 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 \$100,000, *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.

If **you** are making a **Trip Cancellation & Trip Interruption Insurance claim**, we will need proof of the cause of the claim, including:

- 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
- a report from the police or other responsible authority documenting the reason for the delay if *your* claim is due to a misconnection.

We will also need, as applicable:

- complete original unused transportation tickets and vouchers;
- original passenger receipts for the new tickets *you* had to purchase;
- 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;
- the entire medical file of any person whose health or medical condition is the reason for *your* claim; and
- any other invoice or receipt supporting *your* claim.

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 *common 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:

1. We will need: a) police, autopsy or coroner's report; b) medical records; and c) death certificate, as applicable.

2. If *your* body is not found within twelve (12) months of the accident, we will presume that *you* died as a result of *your* injuries.

If **you** are making a **BounceBack Benefit claim**, we will need proof of the cause of the claim, including:

- copy of the death certificate if that is the reason for the claim;
- a medical certificate completed by the attending *physician*, if the claim is for medical reasons; or
- a property damage report.

We will also need, as applicable:

- original passenger receipts for any new tickets *you* had to purchase;
- original receipts for the travel arrangements *you* had paid in advance; and
- any other invoice or receipt supporting *your* claim.

**To whom will we pay your benefits, 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. Except for the *deductible amount* (in U.S. dollars), 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. Legal action to recover a claim must start within the twelve (12) months of the date the insurance monies would have been payable if it were a valid claim and be undertaken before courts of the province where *you* resided at the time this policy was issued.

For the purposes of determining the validity of a claim under this policy, we may obtain and review the medical records of *your* attending *physician*(s), including the records of *your* 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.

## DEFINITIONS

When italicized in this policy, the term:

**Act of terrorism** means any activity occurring within a seventy-two (72) hour period, save and except for 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 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;
- intimidate, coerce or instill fear in the civilian population or any segment thereof;
- 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 *your* age at *your* application date.

**Change in medication** means the medication dosage or frequency has been reduced, increased, 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 twenty-one (21) or, if a full-time student, under the *age* of twenty-six (26), also, an unmarried dependent son or daughter of any *age* if mentally or physically handicapped. In addition, the *child* must be a minimum *age* of thirty (30) days old to be covered under this policy.

**Common carrier** means a conveyance, (bus, taxi, train, boat, plane 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* and application for this policy, once *you* have completed, signed and submitted them 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 expense** 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 and/or not covered under *your government health insurance plan* or any other plan.

**Deductible amount** means the amount of *covered expenses* that *you* are responsible for paying per person per *emergency* medical claim. *Your deductible amount* in U.S. dollars applies to the amount remaining after any *covered expenses* are paid by *your government health insurance plan*. The *deductible amount* is shown on *your confirmation* and applies to each claim.

**Departure date** means the date *you* leave *home*.

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

- For *Trip Cancellation* also included in All-Inclusive plans, coverage starts at the date and time *you* pay the premium for that coverage, indicated as purchase date on *your confirmation*.
- Multi-*Trip* coverage starts on the *effective date* as shown on *your confirmation* and each date *you* leave *home*.
- All other coverages start on *the latest of*:
  - *your departure date*; or
  - *the effective date* as shown on *your confirmation*.

**Emergency** means a sudden and unforeseen occurrence of a *medical condition* 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*, *your* coverage ends on *your departure date* or expiry date, whichever is first and as shown on *your confirmation*.
- All other coverages end on the earliest of these dates:
  - the date *you* return *home*;
  - on the *expiry date*, as shown on *your confirmation*; or,
  - when the number of days of coverage *you* purchased expires.

**Government health insurance plan** means the health insurance coverage that the provincial or territorial governments provide to residents of Canada.

**Home** means *your* Canadian province or territory of residence. If *you* requested coverage to start when *you* leave Canada, *home* means Canada. In the case of *Trip Interruption, Flight and Travel Accident, and Baggage Insurance*, 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.

**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*.

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

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

**Key-person** means someone to whom a dependent'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 *your trip* from a licensed *physician*, physiotherapist, chiropractor, osteopath, chiroprapist or podiatrist.

**Medical condition** means *injury*, illness or disease; 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.

**Medical questionnaire** means all the medical questions that are included in *your* application for coverage under this policy.

**Medically necessary** in reference to a given service or supply, means such service or supply:

- is appropriate and consistent with the diagnosis according to accepted community standards of medical practice;
- is not experimental or primarily investigative in nature;
- could not be omitted without adversely affecting *your* condition or quality of medical care;
- cannot be delayed until *your* return to *your* Canadian province or territory of residence; and

- is delivered in the most cost-effective manner possible, at the most appropriate level of care and not primarily by reason of convenience.

**Mountaineering** means the ascent or descent of a mountain requiring the use of specified equipment including crampons, pick axes, anchors, bolts, carabineers 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 license, Charter Air Carrier license, or its foreign equivalent, and operated by a certified pilot.

**Pre-existing condition** means a *medical condition* that existed before *your effective date*.

**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 sickness or *injury*.

**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 have been no new symptoms, and existing symptoms have not become more frequent or more severe or there have been no test results showing deterioration; and/or
- a *physician* has not determined that the condition has become worse; and/or
- a *physician* (or other medical professional) has not prescribed or recommended a *change in medication* taken for that condition; and/or
- a *physician* (or other medical professional) has not prescribed or recommended a change in *treatment* for that condition; and/or
- there has been no admission to a *hospital* and/or *you* are not awaiting results of further investigation for that *medical condition*.

**Travel companion** means someone who shares *trip* arrangements and accommodations with *you*. No more than three (3) individuals (including the insured) will be considered *travel companions* on any one *trip*.

**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 sickness, *injury* or symptom.

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

**Vehicle** includes any private or rental passenger automobile, boat, mobile home, camper truck or trailer home 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 insurance and coverage for the risks identified with the symbol ‡ 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 the insured(s) on the *confirmation*, for which insurance coverage was applied for and the appropriate premium has been received by *us*.

## 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 *your* application and *medical questionnaire* 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* consent to the use of personal information to offer *you* products and services is optional and if *you* wish to discontinue such use, *you* may advise *us* by calling 1 800 268-3763 or e-mailing *us* at [travel@manulife.com](mailto:travel@manulife.com).

*Your* file is secured in *our* offices. *You* may request to review the personal information it contains and make corrections by writing to: Privacy Officer, Affinity Markets, Manulife Financial, P. O. Box 4262, Stn A, Toronto, ON M5W 5T4.

**In the event of an *Emergency*,**  
call the Assistance Centre immediately

**1 888 881-8010** toll-free from the USA and Canada

**+1 (519) 945-8346** collect to Canada  
from anywhere else in the world.

## HELP IS JUST A PHONE CALL AWAY

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

### **Pre-Trip Information**

- ✓ Passport and travel 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 *physician, hospital,* or other healthcare provider
- ✓ 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 with obtaining prescription drugs
- ✓ Assistance in obtaining legal help or bail bond

**IMPORTANT TELEPHONE NUMBERS:** For coverage information, general enquiries, to apply for an extension or a refund of premium, please call the Customer Service Centre at the number provided in *your confirmation*.

Written correspondence should be mailed to:

Manulife Financial Travel Insurance  
c/o Active Care Management  
PO Box 1237 Stn A  
Windsor, ON N9A 6P8

*You* may also call the Assistance Centre directly for specific information on how to make a claim or to inquire about *your* claim status at: **1 888 881-8013** or **+1 (519) 945-9246**.