CAA Travel Insurance



Policy

Effective March 1, 2020



ELIGIBILITY

You are not eligible for any coverage under this policy if:

- a. you have been diagnosed with a terminal illness for which a physician has estimated you have less than six months to live;
- b. you have been advised by a physician against travel at this time;
- c. you require kidney dialysis;
- d. you have ever had a bone marrow or organ transplant (except cornea transplant);
- you have been diagnosed with and/or received medical treatment for metastatic cancer in the last five years;
- you have been prescribed or taken home oxygen for a lung condition in the last 12 months.

IN THE EVENT OF AN *EMERGENCY*, PLEASE CALL *CAA ASSISTANCE* IMMEDIATELY:

At first onset of symptoms of a *medical emergency* and before *you* seek *medical treatment*, please contact *CAA Assistance*, however, if *you* are unable to do so because *you* are medically incapacitated, *you* or someone else must contact *CAA Assistance* as soon as is reasonably possible.

| COUNTRY | IOLL-FREE NUMBER |
|---------------------------------|--------------------|
| in CANADA & mainland U.S. | 1-866-672-3651 |
| Australia | 0011-800-8877-9000 |
| Costa Rica | 00 800-8877-9000 |
| Dominican Republic | 1-800-203-9591 |
| Jamaica | 1-800-204-0004 |
| Mexico | 001-800-248-8561 |
| New Zealand | 00 800-8877-9000 |
| South Africa | 00 800-8877-9000 |
| Thailand | 001-800-8877-9000 |
| UK | 00 800-8877-9000 |
| Call Collect From Anywhere Fise | +1-519-988-7041 |

Email if Calling is Not Possible orionassistance@acmtravel.ca

You must call CAA Assistance before obtaining Emergency Treatment, so that we may:

- · confirm coverage
- provide pre-approval of treatment

If it is medically impossible for *you* to call prior to obtaining *Emergency Treatment*, *we* ask *you* to call as soon as possible or have someone call on *your* behalf. Otherwise, if *you* do not call *CAA Assistance* before *you* obtain *Emergency Treatment*, *your* maximum benefit payable will be reduced to 80% of *your* medical expenses covered under this insurance, to a maximum of \$25,000 CAD.

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

10 DAY RIGHT TO EXAMINE

Please take the time to read *your policy* and review all of *your* coverage(s). If *you* have any questions, *you* may contact *us* at 1-800-263-7272. *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.

Table of Contents

| Summary of Plans Available2 |
|--|
| Family Coverage |
| Important Information About This <i>Policy</i> |
| General Conditions |
| General Exclusions |
| Emergency Medical Insurance |
| Optional Coverages |
| Visitors to Canada Insurance |
| Package Plans |
| Trip Cancellation & Interruption Insurance |
| Travel Accident Insurance36 |
| Baggage Insurance |
| Extensions and <i>Top-Ups</i> |
| Refunds |
| CAA Assistance |
| How to File a Claim45 |
| Definitions |
| General Terms of Agreement |
| Statutory Conditions |

Summary of Plans Available

Summary of Plans Available - This is a summary only - for complete details, please refer to the applicable section of the policy.

| PLAN TYPE | | | | | | INSURANCE | NSURANCE COVERAGE | | | | | |
|--|--|-------------|----------------------------------|---|----------------------|----------------------|-----------------------|----------------------|-------------|--|-------------|-------------|
| MEDICAL PLANS | COVERAGE MAXIMUM | FAMILY | MAXIMUM AGE AT APPLICATION | PRE-EXISTING MEDICAL EXCLUSION | MAXIMUM TRIP DAYS | EMERGENCY MEDICAL | VISITORS TO CANADA | INFANT PROTECTION | HOLIDAY | TRIP CANCELLATION & INTERRUPTION | TRAVEL | BAGGAGE |
| Single Trip, Canada, Multi-Trip and Top-Up | Up to \$5 Million* | ` | All Ages | ` | * | ` | Not Covered | Not Covered | Not Covered | Not Covered | Not Covered | Not Covered |
| | Up to \$25,000 | ` | 85 | ` | 365 | Not Covered | ` | Not Covered | Not Covered | Not Covered | Not Covered | Not Covered |
| Vioitor of orogin | Up to \$50,000 | ` | 85 | ` | 365 | Not Covered | ` | Not Covered | Not Covered | Not Covered | Not Covered | Not Covered |
| VISITORS TO CALIFORN | Up to \$100,000 | ` | 85 | ` | 365 | Not Covered | ` | Not Covered | Not Covered | Not Covered | Not Covered | Not Covered |
| | Up to \$150,000 | ` | 69 | ` | 365 | Not Covered | ` | Not Covered | Not Covered | Not Covered | Not Covered | Not Covered |
| NON-MEDICAL PLANS | COVERAGE MAXIMUM | FAMILY | MAXIMUM AGE AT APPLICATION | PRE-EXISTING MEDICAL EXCLUSION | MAXIMUM TRIP DAYS | EMERGENCY | VISITORS TO CANADA | INFANT PROTECTION | HOLIDAY | TRIP CANCELLATION & INTERRUPTION | TRAVEL | BAGGAGE |
| Trip Cancellation & Interruption | Trip Cancellation: Up to the <i>Sum Insured</i> Trip Interruption: Unlimited | Not Covered | All Ages | No Pre-Existing Medical Exclusion | 365 | Not Covered | Not Covered | Not Covered | Not Covered | Trip Cancellation: Up to the <i>Sum Insured</i> Trip Interruption: Unlimited | Not Covered | Not Covered |

Summary of Plans Available

| | | | | | : | | | | | | | |
|---|--------|--|-----------------------|----------------------|-----------------------|-----------------------|----------------------|---|----------------------------------|--------------------|--|---------------------------------------|
| Up to \$1,000 | ` | Trip Cancellation: Up to the <i>Sum Insured</i> Trip Interruption: Unlimited | \$750 | Not Covered | Not Covered | Not Covered | 365 | No Pre-Existing Medical Exclusion | All Ages | ` | Trip Cancellation: Up to the <i>Sum Insured</i> Trip Interruption: Unlimited | Non-Medical Vacation Package |
| Up to \$1,000 | ` | Trip Cancellation: Up to the <i>Sum Insured</i> Trip Interruption: Unlimited | \$750 | ` | Not Covered | Up to \$5 Million* | 30 | ` | 60 to 84 | ` | | Package |
| Up to \$1,000 | ` | Trip Cancellation: Up to the <i>Sum Insured</i> Trip Interruption: Unlimited | \$750 | ` | Not Covered | Up to \$5 Million* | * | ` | 29 | ` | Emergency Medical \$5 Million* Trin Canallation: In | Single Trip Vacation |
| Up to \$1,000 / Trip To Maximum of \$3,000/Year | , | \$2000, \$3000, \$4000 or \$5000/ <i>Trip</i> to Maximum \$10,000/ Year | \$750 | , | Not Covered | Up to \$5 Million* | 63 | , | 60 to 84 | , | in positions of to the <i>Sum Insured</i> Trip Interruption: Unlimited | vacation rackage and <i>Top-Up</i> |
| Up to \$1,000 / Trip To Maximum of \$3,000/Year | ` | \$2000, \$3000, \$4000 or \$5000/ <i>Trip</i> to Maximum \$10,000/ Year | \$750 | , | Not Covered | Up to \$5 Million* | * | ` | 29 | ` | Emergency Medical \$5 Million* Trin Canallation: Ila | Multi-Trip |
| BAGGAGE | TRAVEL | TRIP CANCELLATION & INTERRUPTION | HOLIDAY PROTECTION | INFANT PROTECTION | VISITORS TO CANADA | EMERGENCY MEDICAL | MAXIMUM TRIP DAYS | PRE-EXISTING MEDICAL EXCLUSION | MAXIMUM AGE AT APPLICATION | FAMILY COVERAGE | COVERAGE MAXIMUM | PACKAGE PLANS |

FAMILY COVERAGE

Family coverage, for three or more family members, is available to you if all family members to be insured under one policy are listed on the Declaration Page and you have purchased and paid for family coverage. The family coverage insures you, your spouse, your child(ren) and grandchild(ren) for the plan purchased. Please refer to Family Definition on page 48 for family member eligibility.

Pre-Existing Medical Condition Exclusion

Please refer to the following pages for complete details on the Pre-Existing Medical Condition Exclusion applicable:

- Container Exclusion applicable.
- Emergency Medical page 14
 Vacation Packages page 14 and 15
 - Visitors To Canada page 21

* Maximum \$25,000 if at time of claim: a) your GHIP coverage has lapsed; and/or

** Maximum trip days may not exceed the period for which your GHIP covers you or 365 days, whichever is the lesser. Coverage may never extend beyond 365 days from departure date or effective date. b) you did not have GHIP authorization to cover your trip days exceeding the days GHIP covers outside your province or territory of residence.

Important Information About This Policy

Canadian Life and Health Insurance Association IMPORTANT NOTICE - READ CAREFULLY BEFORE *YOU* TRAVEL

You have purchased a travel insurance policy – what's next? We want you to understand (and it is in your best interests to know) what your policy includes, what it excludes, and what is limited (payable but with limits). Please take time to read through your policy before you travel. Bolded and/ or italicized terms are defined in your policy.

- Travel insurance covers claims arising from sudden and unexpected situations (i.e.: accidents and emergencies) and typically not follow-up or recurrent care.
- To qualify for this insurance, you must meet all of the eligibility requirements.
- This insurance contains limitations and/or exclusions (e.g.: *Medical Conditions* that are not *Stable*, pregnancy, child born on *trip*, excessive use of alcohol, high risk activities).
- This insurance may not cover claims related to Pre-Existing Medical Conditions, whether disclosed or not at time of policy purchase.
- Contact CAA Assistance before seeking Treatment or your benefits may be limited or denied.
- In the event of a claim your prior medical history may be reviewed.
- If you have been asked to complete a medical questionnaire and any of your answers are not accurate or complete, your policy will be voidable.

IT IS YOUR RESPONSIBILITY TO UNDERSTAND YOUR COVERAGE. IF YOU HAVE QUESTIONS, CALL us at 1-800-263-7272 or Visit us at https://caaniagara.ca/insurance/travel

Please read this policy carefully before you travel.

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.

This *policy* covers losses resulting from unforeseen and emergent circumstances only. It contains terms, limitations, conditions and exclusions, general and specific, that may restrict benefits payable.

PLEASE READ THIS POLICY

It is *your* responsibility to read this *policy* carefully <u>before *you* travel</u>, particularly the sections relating to the insurance coverage(s) *you* have purchased. Some of the terms may limit the benefits payable to *you*.

Check *your Declaration Page* for the insurance coverage(s) *you* have purchased, then refer to the coverage description(s) using the Table of Contents at the beginning of this *policy*.

By following the instructions in the section <u>How to File a Claim</u> beginning on page 45, *you* can speed up the assessment and, where applicable, payment of *your* covered eligible expenses.

Important Information About This Policy

Throughout this *policy you* will notice that certain terms are brought to *your* attention with italics. These terms are explained in the <u>Definitions</u> section beginning on page 47. Pay particular attention to these definitions as the *Insurer* has given a very specific meaning to these terms.

CARRY THE INSURANCE CARD AND THIS POLICY WITH YOU

You will be provided with a wallet-size insurance card that provides important emergency telephone numbers that you must call in the event of a claim and before receiving medical treatment. Carry this card with you at all times and bring this policy with you when travelling.

General Conditions

These general conditions apply to all insurance coverages under this policy.

- Premium rates and policy terms and conditions are subject to change without prior notice.
- 2. The *Insurer* reserves the right to decline an application for insurance or an extension or *Top-Up*.
- This insurance must be issued in Canada and must be purchased prior to the departure date or effective date.
- Coverage may never extend beyond 365 days from the departure date or effective date.
- If insurance coverage is purchased in a manner other than as stated in this policy, this policy shall be null and void and the *Insurer's* sole liability will be limited to the refund of the premium paid.
- 6. If any benefit is duplicated under a similar benefit, another insurance coverage in this policy or another of our policies, or under similar coverage with another insurer, the maximum you are entitled to is the largest amount specified under any one benefit or insurance coverage. The total amount paid to you from all sources cannot exceed the actual expense you incur.
- 7. Where not specified, airfares are one-way and economy class.

General Exclusions

These general exclusions apply to all insurance coverages under this policy.

No coverage shall be provided under this *policy* and no payment shall be made for any claim resulting in whole or in part from, or contributed to by, or as a natural and probable consequence of any of the following:

- Any loss resulting when you are a driver, the operator, a co-driver, a crew member or any other passenger on a commercial vehicle used for the purpose of delivering goods or carrying a load. This exclusion is not applicable when the commercial vehicle is used during your trip solely for pleasure purposes and not used for delivering goods or carrying a load.
- 2. Non-compliance to prescribed *Treatment*

Situation where *vour* claim will not be paid:

- Any Medical Condition that is the result of you not following Treatment as prescribed to you, including prescribed medication.
- 3. Suicide (including any attempt thereat) or self-inflicted *injury* whether or not *you* are sane.
- 4. Illegal act

Situation where your claim will not be paid:

 Claim that results from or is related to your negligent behaviour or involvement in the commission or attempted commission of a criminal

General Exclusions

offence, negligent or illegal act.

This exclusion is not applicable to Insured Risk #30, BounceBack, under Trip Cancellation & Interruption Insurance.

- Expenses for which no charge would normally be made in the absence of insurance.
- 6. War

Situation where your claim will not be paid: Claim related to:

- an act of war whether declared or undeclared:
- 7. Travel advisory

Situations where your claim will not be paid

- An official travel advisory was issued by the Canadian government stating "Avoid all non-essential travel or Avoid all travel" regarding the country, region or city of your destination, before your effective date.
- This exclusion does not apply to claims for an emergency or a medical condition unrelated to the travel advisory.

To view the travel advisories, visit the Government of Canada Travel site.

8. Despite any provision to the contrary within this *policy* or any amendment thereto, this *policy* does not cover any liability, loss, cost or expense whatsoever which is directly or indirectly caused by, resulting from, arising out of or in connection with any *acts 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.

Emergency Medical Insurance

Eligibility and May be purchased separately or as part of a Package Plan. **Purchase** Purchase is subject to Eligibility on the inside front cover. Conditions Applicants age 60 and over must complete a Medical Questionnaire, no longer than six months before the departure date or effective date to determine eligibility. A Medical Questionnaire is not required for Single Trip Vacation Package with a Sum Insured up to \$40,000 per Insured. For Single Trip Vacation Package with a Sum Insured exceeding \$40,000 per Insured a Medical Questionnaire is required, regardless of age. • You must be a Canadian resident covered by a government health insurance plan (GHIP) for the full duration of the trip. Coverage The latest of: Starts • The date you leave your Canadian province or territory of residence; or • The departure date, start date or effective date shown on your Declaration Page. Coverage Ends The earliest of: • The date you return to your Canadian province or territory of residence; or • The return date as shown on your Declaration Page. Maximum Age No maximum age if purchased separately. • Age 84 if purchased as part of Single Trip Vacation Package, Multi-Trip Vacation Package, Top-Up to Multi-Trip Vacation Package.

| Maximum Benefit | Up to \$5 million. Maximum \$25,000 all Emergency Medical Insurance benefits if at time of claim: |
|---|---|
| | a) your GHIP coverage was lapsed; and/or |
| | b) you did not have GHIP authorization to cover your trip days exceeding the days your GHIP covers outside your province or territory of residence. |
| Maximum <i>Trip Days</i> Including Extension or | 365 Days with GHIP approval – Single Trip, Canada, Multi-Trip, Vacation Package <u>Under Age 60</u> and Multi-Trip Vacation Package <u>Under Age 60</u> . |
| Top-Up | • 30 <i>Days</i> – Single Trip Vacation Package <i>Age</i> 60 to 84. |
| | • 63 <i>Days</i> – Multi-Trip Vacation Package <u>Age</u> 60 to 84. |

PLANS AVAILABLE

SINGLE TRIP PLAN - Provides coverage for travel outside *your* Canadian province or territory of residence.

CANADA PLAN - Provides coverage <u>within Canada ONLY</u>, for travel outside *your* Canadian province or territory of residence.

MULTI-TRIP PLAN - Provides coverage for multiple individual *trips* outside *your* Canadian province or territory of residence for up to 4, 8, 15 or 30 *days* each *trip*, based on the Multi-Trip Plan duration *you* have purchased. An individual *trip* begins when *you* leave *your* province or territory of residence and ends when *you* return to *your* province or territory of residence.

If you leave Canada several times during an individual *trip* (without returning to your province or territory of residence) your Multi-Trip Plan days start again each time you leave Canada.

When *you* are outside Canada for any period of time that exceeds the Multi-Trip Plan *days you* have purchased, a *Top-Up* will be required.

If your individual trip days are entirely within Canada, but outside your province or territory of residence, a Top-Up is not required. See Automatic Extension of Coverage on page 41, item 2.

You are not required to provide advance notice of the *departure date* and *return date* of each individual *trip*. However, *you* will be required to provide evidence of *your departure date* and *return date* when filing a claim (for example, airline ticket, customs or immigration stamp or other receipt).

For an individual *trip* to be covered under the benefits of the Multi-Trip Plan, it must start and end within the period of coverage.

If an individual *trip* begins during the period of coverage 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 Multi-Trip Plan for the next 365 day period

The total duration of *your* individual *trip* cannot exceed the maximum *trip* length of the coverage duration *you* have purchased for *your* Multi-Trip Plan, unless it is topped up.

TOP-UP - A *Top-Up* can be added to *your* Multi-Trip Plan to extend the total individual *trip days* outside Canada that exceed the Multi-Trip Plan duration *you* have purchased, or to *Top-Up* another insurer's policy.

If *you* are topping up another insurer's policy, it is *your* responsibility to confirm with that insurer that a *Top-Up* is permitted on *your* existing policy with no loss of coverage.

Please note that the benefits, terms, conditions and exclusions of that other insurer's policy may not be the same as this *policy*.

CANADIAN PROVINCIAL OR TERRITORIAL GOVERNMENT HEALTH INSURANCE PLAN (GHIP) LONG STAY REQUIREMENT.

Canadian provincial and territorial government health insurance plans limit the maximum *days you* can travel outside Canada and remain covered by *your GHIP*. Please review *your GHIP* for details.

For *trips* exceeding the maximum *days* covered by *your GHIP*, *you* must obtain written authorization from *your GHIP* that *your GHIP* coverage will remain in effect for *your* entire *trip* duration. If *you* do not obtain *GHIP* authorization, then any *trip* days exceeding *your GHIP* maximum number of allowable *days* are subject to a maximum total benefit of \$25,000 for all Emergency Medical Insurance benefits.

MEDICAL QUESTIONNAIRE

The completed *Medical Questionnaire* (if applicable) is the basis of and forms part of this insurance *policy*. In the event of an accident, *injury* or *sickness*, *your* prior medical history will be reviewed as part of the claim process.

It is important that *you* immediately notify *your* CAA Travel Professional, at 1-800-263-7272 if any inaccuracy exists so that *you* can take immediate action to complete a new and accurate *Medical Questionnaire*.

If it is found that you have not answered any question asked in the Medical Questionnaire truthfully and accurately, or at time of application, you will be responsible for the first \$5,000 of any claim, in addition to any Deductible applicable to your policy. You will also be required to pay the additional premium necessary based on true and accurate answers to the Medical Questionnaire, otherwise no future coverage will be provided under this policy.

TEMPORARY RETURN TO YOUR CANADIAN PROVINCE OR TERRITORY OF RESIDENCE

Emergency Medical Insurance is not in effect while *you* are in *your* Canadian province or territory of residence. However, if *you* choose to return to *your* Canadian province or territory of residence for a short stay within *your* period of coverage, five *days* or less, *you* may do so without terminating *your* original *policy* and requiring a new *policy*. The *pre-existing medical condition* exclusion stability requirement will be effective as outlined in this *policy* for the insurance coverage described on *your Declaration Page*. No refund of premium is available for the *days* while *you* are in *your* Canadian province or territory of residence.

INSURED RISKS

This insurance provides payment for the reasonable and customary charges incurred by you for emergency medical treatment for a medical emergency occurring outside your Canadian province or territory of residence during the trip. Souther expenses must be in excess of those reimbursable by your GHIP and by any other insurance policy or health plan (group or individual) under which you are entitled to benefits.

DEDUCTIBLE

The *Insurer* will pay eligible expenses for losses incurred in excess of the Deductible amount, as shown on *your Declaration Page*, per *Insured*, per covered condition or event.

BENEFITS

The following benefits are payable as part of a covered *medical emergency* to a maximum of \$5 million per *Insured* insofar as such services are emergent, unforeseen and *medically necessary* as per the terms and conditions of this *policy*:

1. Emergency Medical Treatment:

 a. Hospital accommodation up to the semi-private room rate (or an intensive or coronary care unit where medically necessary). If coverage expires during

your hospitalization, benefits continue to a maximum of 365 days from your departure date or effective date, or until you are deemed medically able to travel in the opinion of the Medical Director of CAA Assistance, whichever is earlier;

b. Physicians' fees;

- c. Laboratory tests and X-rays prescribed by the attending physician and approved in advance by CAA Assistance. 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 CAA Assistance;
- d. Private duty nursing (other than by an immediate family member) during hospitalization when ordered by the attending physician and approved in advance by CAA Assistance;
- 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);
- Drugs requiring a prescription by a physician, excluding those necessary for the continued stabilization of a chronic medical condition;
- g. Casts, splints, trusses, braces, crutches, rental of wheelchair or other minor medical appliances when prescribed by a *physician* and approved in advance by *CAA Assistance*; and
- h. Treatment by a chiropodist, chiropractor, osteopath, physiotherapist, or podiatrist (other than an immediate family member), including X-rays, when approved in advance by CAA Assistance.

2. Emergency Dental Expenses:

Reimbursement of:

- a. emergency dental treatment (other than by an immediate family member)
 at trip destination to repair or replace sound natural teeth or permanently
 attached artificial teeth injured as the result of an accidental blow to the face,
 provided you consult a physician or dentist immediately following the injury;
- b. necessary emergency dental treatment (other than by an immediate family member), described in a. above, that must be continued upon return to your Canadian 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
- other emergency dental treatment (other than by an immediate family member) at trip destination (excluding root canal treatment), to a maximum of \$500.

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 (for example, 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. Return of Vehicle:

When approved in advance by CAA Assistance:

- a. reasonable expenses for the return of your private or rental vehicle in the event of your medical incapacitation, hospitalization, death on a trip following your hospitalization or accidental death; or
- b. repatriation of the *Insured* if private *vehicle* is stolen or inoperative due to an accident.

5. Family Transportation:

When approved in advance by CAA Assistance, 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 three 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* CAA Emergency Medical Insurance. 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*.

6. Subsistence Allowance:

When approved in advance by *CAA Assistance* and in the event that:

- a. your return date is delayed due to sickness or injury of an accompanying family member or travel companion, or yourself, or
- an accompanying family member or travel companion or you must be relocated for the purpose of obtaining treatment for a medical emergency,

you are eligible for a subsistence allowance of \$350 per day after the 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 return date, the subsistence allowance will only be paid upon submission of proof that you or the accompanying family member or travel companion was admitted and confined to a hospital for at least 72 hours within the 10 day period.

7. Medical Repatriation:

When approved in advance and arranged by CAA Assistance:

- up to the cost of a one-way economy airfare to your Canadian province or territory of residence; or
- the fare for additional airline seats to accommodate a stretcher to return you to your Canadian province or territory of residence; or
- where medically necessary, air ambulance (paid in advance) to the nearest appropriate hospital or to a hospital in your Canadian province or territory of residence for the purpose of obtaining immediate medical treatment; or
- d. repatriation to the point of departure in economy class of one travel companion or one family member in the event of your medical repatriation; and
- 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 one travel companion or one family member if you are relocated to a place other than your point of departure; and
- f. fees for a qualified medical attendant (other than an immediate family member) to accompany you to your Canadian province or territory of residence when recommended by the attending physician and approved in advance and arranged by CAA Assistance. This includes return economy airfare and overnight lodging and meals (where necessary).

8. Return Excess Baggage:

When approved in advance by *CAA Assistance*, up to \$500 for the return of *your* excess baggage. This benefit is payable if *you* are returned to *your* departure point by *us* <u>via</u> any medical repatriation or in the event of *your* death on a *trip* following *your hospitalization* or accidental death.

9. Domestic Services:

When you have been repatriated under Benefit #7, page 10 and when approved in advance by CAA Assistance, 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 10 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;
- b. 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
- d. up to \$250 for ambulance or taxi services to receive medical care.

11. Escort of Insured Child(ren):

When approved in advance by CAA Assistance in the event an Insured parent or legal guardian (on the trip) must be medically repatriated or hospitalized:

- a. organization, escort and payment up to the cost of a one-way economy airfare for the return of *Insured child(ren)* or grandchild(ren). This benefit is limited to *child(ren)* or grandchild(ren) under the *age* of 19 unless the *child(ren)* or grandchild(ren) is mentally or physically handicapped; or
- b. reimbursement for services of a caregiver (other than an immediate family member) contracted by you for your Insured child(ren) or grandchild(ren). This benefit is limited to child(ren) or grandchild(ren) under the age of 19 unless the child(ren) or grandchild(ren) is mentally or physically handicapped.

Provision of an attendant will be arranged by CAA Assistance.

12. Child Care:

When approved in advance by *CAA Assistance* in the event their parent or legal guardian is attending the bedside of an *Insured* who is *hospitalized* at their *trip* destination, **reimbursement** of up to \$1,000 for *child* care provided in *your* Canadian province or territory of residence by someone other than an *immediate family member*. This benefit is limited to *child(ren)* or grandchild(ren) under the *age* of 19 unless the *child(ren)* or grandchild(ren) is mentally or physically handicapped.

13. 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.

14. Return to *Trip* Destination:

When approved in advance by the Medical Director of *CAA Assistance*, a one-way economy airfare for *you* to be returned to *your trip* destination, within *your* period of coverage, after *you* are returned to *your* Canadian province or territory of residence for immediate *medical treatment* provided *your* attending *physician* determines that *you* require no further *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*.

15. Return of Remains:

Subject to prior approval by *CAA Assistance* in the event of *your* death on a *trip* following *your hospitalization* or accidental death, **reimbursement** of:

- a. the actual cost incurred for:
 - i. preparation of the deceased *Insured*; and
 - ii. return 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, casket, urn and/or funeral services expenses.

In addition, and subject to prior approval of *CAA Assistance*, return transportation for an *immediate family member* or close friend to identify the deceased *Insured*. The person identifying the deceased *Insured* will be covered under the same terms and conditions of *your* CAA Emergency Medical Insurance, but for no longer than three *days*. 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 \$300 per *day* to a maximum of three *days*.

16. Pet Return:

When approved in advance by *CAA Assistance*, **reimbursement** up to a maximum of \$500 for one-way transportation of *your* pet(s) (domestic dog(s), *service animal(s)* and/or cat(s) only) to *your* Canadian province or territory of residence in the event *you* are *hospitalized* at *your trip* destination and cannot return on *your return date* or *you* are returned to *your* Canadian province or territory of residence by any repatriation or death benefit provided by this *policy*.

17. Pet Care:

When approved in advance by *CAA Assistance*, **reimbursement** up to a maximum of \$300 for *emergency* veterinary services in the event *your* pet(s) (domestic dog(s), *service animal(s)* and/or cat(s) only) suffers an accidental bodily injury while accompanying *you* during *your trip*.

18. Commercial Kennel Costs:

When approved in advance by CAA Assistance, reimbursement to a maximum of \$100 per policy for commercial kennel costs for your pet(s) (domestic dog(s), service animal(s) and/or cat(s) only) when you are not able to return on your return date.

19. Prescription Assistance:

Assistance to co-ordinate replacement at *your trip* destination of lost or stolen essential prescription medication (excluding birth control pills or other non-vital prescription medication). Costs of replacement will be *your* responsibility.

20. Vision Care:

Reimbursement up to \$300 for the replacement at *your trip* destination of prescription eyeglasses due to theft, loss or breakage during *your trip* and assistance to co-ordinate the replacement.

21. Hearing Aid:

Reimbursement up to \$200 for the replacement at *your trip* destination of a hearing aid due to theft, loss or breakage during *your trip* and assistance to co-ordinate 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 *CAA Assistance* in the event that awkward time zones or telephone difficulties prevent *you* from contacting home. Leave urgent messages as a contact point for *travel companions* if *you* lose touch with one another. Phone numbers are located on the inside front cover and page 43.

24. Urgent Messages:

Transmission of urgent messages to family and/or employer by multilingual CAA Assistance co-ordinators.

CONDITIONS

In addition to the General Conditions described on page 5, Emergency Medical Insurance is subject to the following conditions:

- 1. You must call CAA Assistance before obtaining Emergency Treatment, so that we may:
 - confirm coverage
 - · provide pre-approval of treatment

If it is medically impossible for *you* to call prior to obtaining *Emergency Treatment*, *we* ask *you* to call as soon as possible or have someone call on *your* behalf. Otherwise, if *you* do not call *CAA Assistance* before *you* obtain *Emergency Treatment*, *your* maximum benefit payable will be reduced to 80% of *your* medical expenses covered under this insurance, to a maximum of \$25,000 CAD. Phone numbers are located on the inside front cover and page 43.

- In the event of an *injury* or *sickness*, *your* prior medical history will be reviewed as part of the claim process.
- A new Medical Questionnaire is required for an extension or Top-Up
 to determine eligibility and premium. Application for an extension or
 Top-Up must be made prior to the expiry date of your policy.
- 4. If the *Insurer* pays *your* health care provider or reimburses *you* for covered expenses, it will seek reimbursement from *your GHIP* and from any other medical reimbursement plan under which *you* may have coverage. *You* may not claim or receive in total more than 100% of *your* total covered expenses.
- 5. After your medical emergency treatment has started, CAA Assistance, must assess and pre-approve additional medical treatment. If you undergo tests as part of a medical investigation, obtain treatment or surgery that is not pre-approved, your claim will not be paid. This includes invasive testing, surgery, (including but not limited to cardiac catheterization, other cardiac procedures, transplant, MRI), except in extreme circumstances where such action would delay surgery required to resolve a life-threatening medical crisis.
- If we determine that you should transfer to another facility or return to your home province/territory of residence, and you choose not to, benefits will not be paid for further medical treatment.
- The *Insurer* is not responsible for the availability, quality or results of any medical treatment or transportation, or the *Insured's* failure to obtain medical treatment or hospitalization.
- 8. Recurrence or ongoing *Treatment* once *Emergency* has ended Situation where *your* claim will not be paid:
 - The continued treatment, recurrence or complication of a Medical Condition or related condition, following Emergency Treatment during your trip, if the Medical Director of CAA Assistance determine that your Emergency has ended.
- 9. Any benefits payable for acts of terrorism are excess to all other recovery sources including, but not limited to, alternative or replacement travel options offered by airlines, tour operators, cruise lines and other travel suppliers and other insurance coverage (even when such coverage is described as excess) and are payable only after you have exhausted all such other recovery sources.

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

Coverage is available for up to two *acts of terrorism* within a calendar year and the maximum payable for each *act of terrorism* is \$8 million.

If total claims resulting from one or more *acts of terrorism* exceed the applicable aggregate maximum limit stated above, then each *Insured* is entitled to his/her pro rata share of such aggregate maximum limit. If, in *our* judgment, the total of all payable claims under one or more *acts of terrorism* may exceed the applicable aggregate maximum limit, *your* prorated claim will be paid after the end of the calendar year in which *you* qualify for benefits.

EXCLUSIONS

In addition to the General Exclusions described on page 5, no coverage shall be provided under Emergency Medical Insurance and no payment shall be made for any claim resulting in whole or in part from, or contributed to by, or as a natural and probable consequence of any of the following:

1. PRE-EXISTING MEDICAL CONDITION EXCLUSIONS

Situation where no benefit will be paid:

CANADA PLAN

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

SINGLE TRIP PLAN, MULTI-TRIP PLAN, MULTI-TRIP VACATION PACKAGE PLAN AND TOP-UP(S)

UNDER AGE 60

Any sickness, injury or medical condition that is 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 Prednisone.

AGE 60-69

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

AGE 70 and Over

Any sickness, injury or medical condition that is not stable in the six months prior to each departure date.

VACATION PACKAGE PLAN

UNDER AGE 60

Any sickness, injury or medical condition that is 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 Prednisone.

AGE 60 TO 84

Any sickness, injury or medical condition that is not stable in the six months prior to each departure date.

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

A heart condition if *you* had heart bypass or valve surgery **more than eight years prior to the departure date**. This applies prior to each **departure date**.

A heart condition if, during the six 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 treated 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).
- We will not pay a benefit if you are not covered under the Government Health Insurance Plan (GHIP) of your province or territory of residence for the entire duration of the trip. It is your responsibility to check that you do have this coverage. If GHIP is not in force, this insurance is subject to a maximum of \$25,000.
- For Insured child(ren) under two years of age: Any sickness or medical condition related to a birth defect.
- 4. Abuse of alcohol, drugs or intoxicants

Situations where *your* claim will not be paid:

- Any Medical Condition, including symptoms of withdrawal, arising from, or in any way related to, your chronic use of alcohol, drugs or other intoxicants (including cannabis), whether prior to or during your trip.
- Any Medical Condition arising during your trip from, or in any way related to, the abuse of alcohol resulting in a blood alcohol level of more than 80 mg of alcohol per 100 ml of blood, drugs or other intoxicants (including cannabis).
- 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.
- 6. Travelling for the purpose of obtaining Treatment

Situation where no benefit will be paid:

- A trip made for the purpose of obtaining a diagnosis, Treatment, surgery, investigation, palliative care, or any alternative therapy, as well as any directly or indirectly-related complication.
- 7. Travelling when *Treatment* could be expected

Situation where no benefit will be paid:

- Any future investigation or treatment (except routine monitoring) is planned before your trip; or
- Any Medical Condition or symptoms for which it is reasonable to believe or expect that Treatments will be required during your trip.
- Claims related to expectant mother's complications of pregnancy, delivery

Situation where your claim will not be paid:

- · Claim related to routine pre-natal or post-natal care
- Claim related to pregnancy, delivery, or complications of either, arising 9 weeks before the expected date of delivery or 9 weeks after.
- 9. Child born during the trip

Situation where your claim will not be paid:

- Claim related to your child born during the trip.
- 10. Sports and High Risk Activities

Accident that occurs while you are participating in:

 a. any performance as a pilot or crew member of, or travelling as a passenger on, any aircraft: flying machines or flying devices that

are supported chiefly by their buoyancy in air, and includes, but is not limited to, any airplane, balloon, kite balloon, airship, glider, hang glider, paraglider, parasail, parachute, kite and wingsuit (if *you* purchased an Adventurous Air Activities Rider, balloon, parasail and helicopter excursions are not subject to this exclusion). Travelling as a passenger on a *common carrier* is not subject to this exclusion;

- any participation in any maneuvers or training exercises of the armed forces.
- c. any sporting activity for which you are paid;
- d. any competition, speed event or other high-risk activity involving the use of a motor vehicle on land, water or air, including training activities, whether on approved tracks or elsewhere.
- 11. We will not pay a benefit with respect to non-Emergency, experimental or elective Treatment (e.g. cosmetic surgery, chronic care, rehabilitation including any expenses for directly or indirectly related complications), or that you elect to have provided outside your Canadian province or territory of residence when medical evidence indicates that you could return to your Canadian province or territory of residence to receive such treatment. The delay to receive treatment in your Canadian province or territory of residence has no bearing on the application of this exclusion.
- 12. For policy extensions and Top-Ups, sickness or injury which first appeared, was diagnosed or received medical treatment after the departure date and prior to the effective date of the insurance extension or Top-Up.
- 13. The replacement cost 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. CAA Assistance will assist you with replacement (see Benefit #19, page 12).
- 14. a. Cardiac catheterization, angioplasty and/or cardiovascular surgery including any associated diagnostic test(s) or charges unless approved in advance by CAA Assistance prior to being performed, except in extreme circumstances where such surgery is performed as a medical emergency immediately upon admission to hospital; and/or
 - Magnetic resonance imaging (MRIs), computerized axial tomography (CAT) scans, sonograms, ultrasounds or biopsies unless approved in advance by CAA Assistance.
- 15. Recurrence or ongoing *Treatment* once *Emergency* has ended Situation where *your* claim will not be paid:
 - The continued treatment, recurrence or complication of a Medical Condition or related condition, following Emergency Treatment during your trip, if the Medical Director of CAA Assistance determine that your Emergency has ended.
- 16. 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 11.
- 17. Air ambulance services unless approved in advance and arranged by CAA Assistance.
- Upgrading charges or cancellation penalties for airline tickets, unless approved in advance by CAA Assistance.
- Damage to or loss of sunglasses (non-prescription), contact lenses, or prosthetic teeth or limbs, and resulting prescription thereof.
- 20. Emergency Medical Insurance benefits in *your* Canadian province or territory of residence except for Benefits #9 and #10, page 11.

21. Travel advisory

Situations where your claim will not be paid

- Any loss resulting from an act of terrorism when an official travel advisory was issued by the Canadian government stating "Avoid all non-essential travel or Avoid all travel" regarding the country, region or city of your destination, before your effective date.
- This exclusion does not apply to claims for an emergency or a medical condition unrelated to the travel advisory.

To view the travel advisories, visit the Government of Canada Travel site.

22. Travel against medical advice

• Any claim incurred after a *Physician* advised *you* not to travel.

OPTIONAL COVERAGES

The following optional coverages *Pre-Existing Medical Condition Coverage*, and **Adventurous Air Activities Rider**, may only be purchased in conjunction with Emergency Medical Insurance. These coverages are subject to the General Conditions, General Exclusions, Emergency Medical insurance Conditions and Exclusions (except as noted in the Conditions sections of the applicable Optional Coverage), and Definitions sections of this *policy*. The deductible (stated in U.S. currency) specified for Emergency Medical Insurance on *your Declaration Page* is applicable to the Optional Coverages.

Pre-Existing Medical Condition Coverage

Subject to all terms and conditions of this *policy*, this coverage is payable as part of a covered *medical emergency* up to a maximum of \$200,000 per *Insured*, per *trip*, for eligible *hospital* and medical related expenses for *sickness* or *injury* incurred as a result of a *Pre-Existing Medical Condition* that was not *stable* and existed prior to the *departure date* of *your trip*.

Conditions

Coverage is subject to the maximum benefits limits and to the terms, conditions and exclusions as described in this *policy*, **not including Emergency Medical Insurance Exclusion #1.**

Exclusion

No coverage shall be provided and no payment shall be made for any claim resulting in whole or in part from, or contributed to by, or as a natural and probable consequence of the following:

 Conditions and/or symptoms which arose or worsened on the departure date or at any time within the seven days prior to the departure date, other than a minor ailment

Pre-Existing Medical Condition that do not meet the criteria set out above are not covered.

Adventurous Air Activities Rider

Subject to all terms and conditions of this *policy*, *you* will be **reimbursed** for expenses incurred as a result of an *injury* or *sickness* while participating in activities that includes balloon, parasailing and helicopter excursions.

Conditions

Coverage is subject to the maximum benefits limits and to the terms, conditions and exclusions as described in this *policy*, **not including the Emergency Medical Insurance Exclusion 10.a** when specifically mentions balloon, parasailing and helicopter excursions.

| Eligibility and Purchase Conditions | May be purchased by: a. a visitor to Canada; b. the holder of a Canadian work visa or student visa; c. an immigrant to Canada; or d. a Canadian not covered by a government health insurance plan (<i>GHIP</i>). Purchase is subject to Eligibility on the inside front cover. Must be purchased prior to or within 7 days of arrival in Canada. Applications made after arrival in Canada are subject to Exclusion #2 on page 21. |
|---|---|
| Coverage | The latest of: |
| Starts | Your arrival date in Canada; or |
| | The departure date, start date or effective date shown on your Declaration Page. |
| Coverage Ends | The earliest of: |
| | For non-Canadian residents: the date you leave Canada to return to your country of permanent residence. |
| | The return date as shown on your Declaration Page. |
| Maximum Age | Age 85 for Sums Insured \$25,000, \$50,000 or \$100,000. |
| | Age 69 for Sum Insured \$150,000. |
| Maximum Benefit | Up to <i>Sum Insured</i> chosen - \$25,000, \$50,000, \$100,000 or \$150,000. |
| Maximum Trip Days | 365 <i>Days</i> . |

INSURED RISKS

This insurance provides payment for the *reasonable and customary charges* incurred by *you* for *emergency medical treatment* of an unforeseen and emergent *sickness* or *injury* while in Canada or during a temporary visit to another country (excluding *your* country of permanent residence) as part of *your trip*. Such expenses must be in excess of those reimbursable by any other insurance policy or health plan (group, individual or government) under which *you* are entitled to benefits.

DEDUCTIBLE

The *Insurer* will pay eligible expenses for losses incurred in excess of the Deductible amount, as shown on *your Declaration Page*, per *Insured*, per covered condition or event.

BENEFITS

The following benefits are payable as part of a covered *medical emergency* to a maximum of the *Sum Insured* insofar as such services are unforeseen, emergent and *medically necessary*, as per the terms and conditions of this *policy*.

1. Emergency Medical Treatment:

a. Hospital accommodation up to the semi-private room rate (or an intensive or coronary care unit where medically necessary). If coverage expires during your hospitalization, benefits continue to a maximum of 365 days from your departure date or effective date or until you are medically able for discharge in the opinion of the Medical Director of CAA Assistance, whichever is earlier;

b. Physicians' fees;

- c. Laboratory tests and X-rays prescribed by the attending *physician* and approved in advance by *CAA Assistance*. 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 *CAA Assistance*;
- d. Private duty nursing (other than by an immediate family member) during hospitalization when ordered by the attending physician and approved in advance by CAA Assistance;
- 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, limited to a 30 day supply per prescription unless you are hospitalized, excluding those necessary for the continued stabilization of a chronic medical condition:
- g. Casts, splints, trusses, braces, crutches, rental of wheelchair or other minor medical appliances when prescribed by a *physician* and approved in advance by *CAA Assistance*; and
- h. Treatment by a chiropodist, chiropractor, osteopath, physiotherapist, or podiatrist, (other than an immediate family member) to a maximum of \$300 per profession listed, when approved in advance by CAA Assistance.

2. Emergency Dental Expenses:

Reimbursement of:

- a. emergency dental treatment (other than by an immediate family member)
 at trip destination to repair or replace sound natural teeth or permanently
 attached artificial teeth injured as the result of an accidental blow to the
 face, to a maximum of \$2,000, provided you consult a physician or dentist
 immediately following the injury; and
- b. other emergency dental treatment (other than by an immediate family member) for the relief of acute pain (excluding root canal treatment and dental conditions for which you previously received treatment or advice), to a maximum of \$200.

3. Family Transportation:

When approved in advance by *CAA Assistance*, 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 five 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* CAA Visitors to Canada Insurance. 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*.

4. Subsistence Allowance:

When approved in advance by CAA Assistance and in the event that:

- a. your return date is delayed due to sickness or injury of an accompanying family member or travel companion, or yourself, or
- an accompanying family member or travel companion or you must be relocated for the purpose of obtaining treatment for a medical emergency,

you are eligible for a subsistence allowance of \$350 per day after the original return date or relocation date to a maximum of \$3,500 for commercial accommodation

and meals. 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 *you* or the accompanying *family* member or *travel companion* was admitted and confined to a *hospital* for at least 72 hours within the 10 *day* period.

5. Medical Repatriation:

When approved in advance and arranged by CAA Assistance:

- a. up to the cost of a one-way economy airfare to your country of permanent residence; or
- the fare for additional airline seats to accommodate a stretcher to return you to your country of permanent residence; or
- c. where medically necessary, air ambulance (paid in advance) to the nearest appropriate hospital or to a hospital in your country of permanent residence for the purpose of obtaining immediate medical treatment. If you are a Canadian resident without GHIP, 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 CAA Assistance.

6. Return of Remains:

Subject to prior approval by *CAA Assistance*, in the event of *your* death on a *trip* following *your hospitalization* or accidental death, **reimbursement** of:

- a. the actual cost incurred for:
 - i. preparation of the deceased Insured; and
 - ii. return 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, casket, urn and/or funeral services expenses.

In addition, and subject to prior approval of *CAA Assistance*, return transportation for an *immediate family member* or close friend to identify the deceased *Insured*. The person identifying the deceased *Insured* will be covered under the same terms and conditions of *your* CAA Visitors to Canada Insurance, but for no longer than three *days*. 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 \$150 per *day* to a maximum of \$450.

CONDITIONS

In addition to the General Conditions described on page 5, Visitors to Canada Insurance is subject to the following conditions:

- Receiving Emergency Treatment without notifying CAA Assistance
 Proceeding with investigation, treatment or surgery without our preapproval and which we do not consider Emergency Treatment. Phone
 numbers are located on the inside front cover and page 43.
- A temporary visit to another country is permitted (excluding your country of permanent residence) as part of your trip however, this temporary visit must not exceed 49% of the trip's total duration.
- It is a condition precedent to receiving payment under this policy that, at the time of application, you know of no reason that may require you to seek medical attention.
- If we determine that you should transfer to another facility or return to your home province/territory of residence, and you choose not to,

benefits will not be paid for further *medical treatment*.

- Recurrence or ongoing *Treatment* once *Emergency* has ended Situation where *vour* claim will not be paid:
 - The continued treatment, recurrence or complication of a Medical Condition or related condition, following Emergency Treatment during your trip, if the Medical Director of CAA Assistance determine that your Emergency has ended.
- The *Insurer* is not responsible for the availability, quality or results of any medical treatment or transportation, or the *Insured's* failure to obtain medical treatment or hospitalization.
- 7. CAA Assistance must approve in advance any surgery or invasive procedure (including, but not limited to, cardiac catheterization), prior to the *Insured* undergoing such procedure. It remains *your* responsibility to inform *your* attending *physician* to call CAA Assistance for approval in advance, except in extreme circumstances where such action would delay surgery required to resolve a life-threatening medical crisis.

EXCLUSIONS

In addition to the General Exclusions described on page 5, no coverage shall be provided under Visitors to Canada Insurance and no payment shall be made for any claim resulting in whole or in part from, or contributed to by, or as a natural and probable consequence of any of the following:

1. PRE-EXISTING MEDICAL CONDITION EXCLUSIONS

Situation where your claim will not be paid:

UNDER AGE 60

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

- Any sickness 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.
- For Insured child(ren) under two years of age: Any sickness or medical condition related to a birth defect.
- 4. Abuse of alcohol, drugs or intoxicants

Situations where *your* claim will not be paid:

- Any Medical Condition, including symptoms of withdrawal, arising from, or in any way related to, your chronic use of alcohol, drugs or other intoxicants (including cannabis), whether prior to or during your trip.
- Any Medical Condition arising during your trip from, or in any way related to, the abuse of alcohol resulting in a blood alcohol level of more than 80 mg of alcohol per 100 ml of blood, drugs or other intoxicants (including cannabis).

- 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.
- 6. Travelling for the purpose of obtaining *Treatment* Situation where no benefit will be paid:
 - A trip made for the purpose of obtaining a diagnosis, Treatment, surgery, investigation, palliative care, or any alternative therapy, as well as any directly or indirectly-related complication.
- 7. Travelling when Treatment could be expected

Situation where no benefit will be paid:

- Any future investigation or treatment (except routine monitoring) is planned before your trip; or
- Any Medical Condition or symptoms for which it is reasonable to believe or expect that Treatments will be required during your trip.
- Claims related to expectant mother's complications of pregnancy, delivery

Situation where *your* claim will not be paid:

- Claim related to routine pre-natal or post-natal care
- Claim related to pregnancy, delivery, or complications of either, arising 9 weeks before the expected date of delivery or 9 weeks after.
- 9. Child born during the trip

Situation where your claim will not be paid:

- Claim related to your child born during the trip.
- 10. Sports and High Risk Activities

Accident that occurs while you are participating in:

- a. any performance as a pilot or crew member of, or travelling as a passenger on, any aircraft: flying machines or flying devices that are supported chiefly by their buoyancy in air, and includes, but is not limited to, any airplane, balloon, kite balloon, airship, glider, hang glider, paraglider, parasail, parachute, kite and wingsuit. Travelling as a passenger on a common carrier is not subject to this exclusion;
- any participation in any maneuvers or training exercises of the armed forces.
- any sporting activity for which you are paid;
- d. any competition, speed event or other high-risk activity involving the use of a motor vehicle on land, water or air, including training activities, whether on approved tracks or elsewhere
- 11. We will not pay a benefit with respect to non-Emergency, experimental or elective Treatment (e.g. cosmetic surgery, chronic care, rehabilitation including any expenses for directly or indirectly related complications), or that you elect to have provided outside your country of permanent residence when medical evidence indicates that you could return to your country of permanent residence to receive such treatment. The delay to receive treatment in your country of permanent residence has no bearing on the application of this exclusion.
- 12. For policy extensions: Sickness or injury which first appeared, was diagnosed or received medical treatment after the departure date and prior to the effective date of the insurance extension. No extension is permitted if you have not been continuously insured under a CAA Visitors to Canada Insurance policy with no gap in coverage.
- 13. 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.

- 14. a. Cardiac catheterization, angioplasty and/or cardiovascular surgery including any associated diagnostic test(s) or charges unless approved in advance by CAA Assistance prior to being performed, except in extreme circumstances where such surgery is performed as a medical emergency immediately upon admission to hospital; and/or
 - Magnetic resonance imaging (MRIs), computerized axial tomography (CAT) scans, sonograms, ultrasounds or biopsies unless approved in advance by CAA Assistance.
- 15. Recurrence or ongoing *Treatment* once *Emergency* has ended Situation where *vour* claim will not be paid:
 - The continued treatment, recurrence or complication of a Medical Condition or related condition, following Emergency Treatment during your trip, if the Medical Director of CAA Assistance determine that your Emergency has ended.
- 16. Cataract surgery or services provided by a naturopath or an optometrist or in a convalescent home, nursing home, rehabilitation centre or health spa.
- 17. Air ambulance services unless approved in advance and arranged by CAA Assistance.
- 18. Upgrading charges or cancellation penalties for airline tickets, unless approved in advance by CAA Assistance.
- Damage to or loss of hearing devices, eyeglasses, sunglasses, contact lenses, or prosthetic teeth or limbs, and resulting prescription thereof.
- 20. Medical services in *your* country of permanent residence.
- 21. Any act of terrorism.
- 22. Travel against medical advice
 - Any claim incurred after a Physician advised you not to travel.

Package Plans

SINGLE TRIP VACATION PACKAGE, MULTI-TRIP VACATION PACKAGE, TOP-UP TO MULTI-TRIP VACATION PACKAGE AND NON-MEDICAL VACATION PACKAGE PLANS

| Insurance Coverage | Single Trip and Multi-Trip Vacation Package | Non- Medical Vacation Package | Benefit Maximum |
|---|---|--|--|
| Emergency Medical Insurance | • | | Up to \$5 million |
| Trip Cancellation & Interruption Insurance | • | • | Prior to departure: Up to the Sum Insured After departure: Unlimited |
| Travel Accident Insurance | • | • | Up to \$100,000 Flight Accident Up to \$10,000 <i>Common Carrier</i> Up to \$5,000 24-Hour Accident |
| Baggage & Personal Effects Insurance | • | • | Up to \$1,000 |
| Baggage Delay | • | • | Up to \$500 |
| Lost Documents | • | • | Up to \$50 (\$200 for passport) |
| Infant Protection | • | | Up to \$5 million |
| Holiday Protection | • | • | Up to \$750 |

Package Plans

| Eligibility and Purchase Conditions | Subject to Eligibility and Purchase Conditions of individual insurance coverages. |
|---|---|
| | Must be purchased for the full duration of the trip. |
| | Purchase is subject to Eligibility on the inside front cover. |
| | Applicants age 60 and over purchasing a Multi-Trip Vacation Package and/or Top-Up must complete a Medical Questionnaire, no longer than six months before the departure date or effective date. Not applicable to Single Trip Vacation Package and Non-Medical Vacation Package with Sum Insured up to \$40,000 per Insured. Applicants purchasing a Sum Insured exceeding \$40,000 per Insured must complete a Medical Questionnaire (see page 8), regardless of age, to determine eligibility and premium. |
| | |
| Coverage Starts | Please refer to individual insurance coverages. |
| Coverage Starts | Please refer to individual insurance coverages. |
| Coverage Starts Coverage Ends | Please refer to individual insurance coverages. Please refer to individual insurance coverages. |
| | • |
| Coverage Ends | Please refer to individual insurance coverages. Age 84 for Single Trip Vacation Package, Multi-Trip |
| Coverage Ends | Please refer to individual insurance coverages. Age 84 for Single Trip Vacation Package, Multi-Trip Vacation Package or Top-Up to Multi-Trip Vacation Package. |
| Coverage Ends Maximum Age | Please refer to individual insurance coverages. Age 84 for Single Trip Vacation Package, Multi-Trip Vacation Package or Top-Up to Multi-Trip Vacation Package. No maximum age for Non-Medical Vacation Package. Please refer to individual insurance coverages. 365 Days with GHIP approval – Single Trip Vacation Package Under Age 60 and Multi-Trip Vacation Package Under Age 60. |
| Coverage Ends Maximum Age Maximum Benefit Maximum Trip Days Including Extension or | Please refer to individual insurance coverages. Age 84 for Single Trip Vacation Package, Multi-Trip Vacation Package or Top-Up to Multi-Trip Vacation Package. No maximum age for Non-Medical Vacation Package. Please refer to individual insurance coverages. 365 Days with GHIP approval – Single Trip Vacation Package Under Age 60 and Multi-Trip Vacation Package Under Age 60. 365 Days – Non-Medical Vacation Package. |
| Coverage Ends Maximum Age Maximum Benefit Maximum Trip Days Including Extension or | Please refer to individual insurance coverages. Age 84 for Single Trip Vacation Package, Multi-Trip Vacation Package or Top-Up to Multi-Trip Vacation Package. No maximum age for Non-Medical Vacation Package. Please refer to individual insurance coverages. 365 Days with GHIP approval – Single Trip Vacation Package Under Age 60 and Multi-Trip Vacation Package Under Age 60. |

DEDUCTIBLE

No Deductible applies if *you* have purchased as part of a Non-Medical Vacation Package.

If you have purchased as part of a Vacation Package or Multi-Trip Vacation Package Plan or *Top-Up* to the Multi-Trip Vacation Package Plan, the *Insurer* will pay eligible expenses for losses incurred in excess of the Deductible amount, as shown on *your Declaration Page*, per *Insured*, per covered condition or event.

The Deductible selected will apply to each coverage included in the Package Plan.

MULTI-TRIP VACATION PACKAGE PLAN

Provides coverage for multiple individual *trips* outside *your* Canadian province or territory of residence for up to 8, 15 or 30 *days*, based on the Multi-Trip Annual Vacation Package Plan duration *you* have purchased. An individual *trip* begins on the date *you* leave *your* province or territory of residence and ends when *you* return to *your* province or territory of residence.

If you leave Canada several times during an individual *trip* (without returning to your province or territory of residence) your Multi-Trip Plan days start again each time you leave Canada.

When you are outside Canada for any period of time that exceeds the Multi-Trip Plan days you have purchased, a *Top-Up* will be required.

If your individual *trip days* are entirely within Canada, but outside *your* province or territory of residence, a *Top-Up* is not required. See Automatic Extension of Coverage on page 41, item 2.

You are not required to provide advance notice of the departure date and return date of each individual trip. However, you will be required to provide evidence of your departure date and return date when filing a claim (for example, airline ticket, customs or immigration stamp or other receipt).

The Multi-Trip Vacation Package Plan includes all the benefits included with the Single Trip Vacation Package Plan, however benefit maximum amounts payable

Package Plans

per *policy* apply to the Trip Cancellation and Baggage benefits. The combined benefit maximum total payable for Trip Cancellation expenses is either \$2,000, \$3,000, \$4,000 or \$5,000 per *trip* (depending on *your* choice) per *trip* and \$10,000 per *policy* year. Baggage delay benefits, available after 10 hours of *your* checked baggage being delayed, are payable up to a benefit maximum total of \$500 per *trip* and \$1,500 per *policy* year and baggage damage or loss is payable up to a benefit maximum total of \$1,000 per *trip* and \$3,000 per *policy* year.

If your prepaid travel arrangements for your trip exceed the maximums stated above, you must purchase a separate Trip Cancellation & Interruption Insurance policy to cover the difference between the amount covered under the Multi-Trip Vacation Package Plan and the total amount of your prepaid travel arrangements.

For an individual *trip* to be covered under the benefits of the Multi-Trip Vacation Package, it must start and end within the period of coverage.

If an individual *trip* begins during the period of coverage 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 Multi-Trip Vacation Package Plan for the next 365 day period

The total duration of *your* individual *trip* cannot exceed the maximum *trip* length of the coverage duration *you* have purchased for *your* Multi-Trip Vacation Package unless it is topped up.

TOP-UP TO MULTI-TRIP VACATION PACKAGE PLAN

A *Top-Up* must be added to *your* Multi-Trip Vacation Package Plan for the total individual *trip days* outside Canada that exceed either 8, 15 or 30 *days*, based on the Multi-Trip Vacation Package Plan duration *you* have purchased.

CONDITIONS

In addition to the General Conditions described on page 5, Package Plans are subject to the following condition:

Single Trip Vacation Package, Multi-Trip Vacation Package, Top-Up
to Multi-Trip Vacation Package and Non-Medical Vacation Package are
subject to the terms, insured risks, benefits, conditions, exclusions,
limitations and definitions specified in this policy for each of the
insurance coverages listed in the chart on page 23 and 24, in addition to
the General Terms of Agreement and the Statutory Conditions.

EXCLUSIONS

In addition to the General Exclusions described on page 5, Package Plans are subject to the exclusions described within each applicable insurance coverage.

INFANT PROTECTION

Provides automatically, at no extra charge, Emergency Medical Insurance to infants who:

- a. do not occupy a seat on the airplane; and
- are travelling with a parent or legal guardian who has purchased the Single Trip Vacation Package Plan, Multi-Trip Vacation Package Plan or Top-Up to Multi-Trip Vacation Package Plan.

For more information about the benefits, conditions and exclusions of *Infant* Protection, refer to the terms of Emergency Medical Insurance beginning on page 6.

HOLIDAY PROTECTION

If the death or hospitalization of an immediate family member, close friend, business associate or key employee, who has not accompanied you on the trip, prompts you to return earlier than your return date and you consequently miss at least 70% of your scheduled package tour, the Insurer will issue a redeemable certificate to a maximum of \$750.

Package Plans

Holiday Protection Limitations

- Eligibility to receive the benefit under Holiday Protection is dependent upon approval and payment of a valid trip interruption claim under the Trip Cancellation & Interruption Insurance of this policy.
- 2. The redeemable certificate is:
 - a. payable only to you;
 - valid until the expiry date indicated on the redeemable certificate (for example, a period of 180 days from the date of your early return from your interrupted trip);
 - c. nontransferrable; and
 - d. not redeemable in cash.
- 3. The replacement trip must:
 - a. begin before the expiry date on the redeemable certificate; and
 - b. be purchased through a CAA Travel Agency.

Trip Cancellation & Interruption Insurance

| • May be purchased by Canadian residents separately or as part of a Package Plan. |
|---|
| May be purchased by non-Canadian residents separately or as part of Non-Medical Vacation Package Plan provided that you are living in, travelling through or visiting Canada during your trip. Some insured risks are limited to Canadian residents only. |
| Purchase is subject to Eligibility on the inside front cover. |
| Applicants purchasing a Sum Insured exceeding \$40,000 per Insured must complete a Medical Questionnaire (see page 8), regardless of age, to determine eligibility and premium. |
| • Cancellation benefits start on the date and time of purchase of this coverage. |
| • Interruption benefits start on the departure date. |
| overage Ends The earliest of: |
| The date on which there was cause for cancellation prior to departure; or |
| • The return date as shown on your Declaration Page. |
| • No maximum <i>age</i> if purchased separately or as part of Non-Medical Vacation Package. |
| • Age 84 for Single Trip Vacation Package, Multi-Trip Vacation Package or <i>Top-Up</i> to Multi-Trip Vacation Package. |
| aximum Trip Cancellation (prior to departure): Up to the Sum Insured |
| Trip Interruption (after departure): Unlimited |
| • 365 Days – if purchased separately or as part of Single Trip Vacation Package <u>Under Age 60</u> , Multi-Trip Vacation Package <u>Under Age 60</u> or Non-Medical Vacation Package. |
| • 30 Days – Single Trip Vacation Package <u>Age 60 to 84</u> . |
| • 63 <i>Days</i> – Multi-Trip Vacation Package <u>Age</u> 60 to 84. |

DEDUCTIBLE

No Deductible applies if *you* have purchased separately or as part of a Non-Medical Vacation Package.

If you have purchased as part of a Vacation Package or Multi-Trip Vacation Package Plan, the *Insurer* will pay eligible expenses for losses incurred in excess of the Deductible amount, as shown on your *Declaration Page*, per *Insured*, per covered condition or event.

INSURED RISKS

Any of the following occurrences that prevents *you* from departing or returning on *your return date*:

- Death, sickness, injury, or quarantine of you, your travel companion, immediate family member, business partner, key employee or caregiver or your travel companion's immediate family member, business partner, key employee or caregiver.
- 2. Death or *emergency hospitalization* of a close friend during the 10 *days* prior to the *departure date* or during the *trip.*
- A pregnancy diagnosed after booking the trip if the attending physician advises you, your spouse, your travel companion or a travel companion's spouse not to travel.
- Complications of your pregnancy or that of your spouse, your travel companion
 or your travel companion's spouse within the first 31 weeks of pregnancy or
 complications following the full-term birth of a child by the aforementioned.
- Side effects and/or adverse reactions experienced by you or your travel companion to vaccinations required for your trip.
- 6. Death, hospitalization or quarantine of the host at your principal trip destination.
- 7. Based on your or your travel companion's medical history, you or your travel companion are unable to be immunized or take preventative medication that is required for entry into a country or region that is on your travel itinerary (provided the requirement became effective after the purchase of the travel arrangements and this insurance).
- 8. The legal adoption of a *child(ren)* by *you* or *your travel companion*, when the actual date of adoption is scheduled to take place during *your trip.*
- 9. Cancellation of a planned business meeting, conference or convention when the sole purpose of the trip was to attend the meeting, conference or convention and the cancellation of the meeting is beyond the control of the Insured or the Insured's employer, and the meeting is between companies with unrelated ownership, and in the case of a conference or convention, you must be a registered delegate. Benefits are only payable to the Insured(s) who are attending the business meeting, conference or convention.
- You or your travel companion's passport is not issued within the time confirmed in writing by Passport Canada.
- 11. Your, or your travel companion's, post-secondary school exam has been unexpectedly rescheduled after the purchase of this insurance whereby the date of the exam conflicts with your trip.
- 12. Your principal residence or that of a travel companion is rendered uninhabitable, or your place of business or that of a travel companion is rendered inoperative as the result of a disaster or event independent of any intentional act or negligence on your/their part.
- 13. You or your travel companion's principal residence or place of business is burglarized within seven days prior to your departure date or during your trip.
- 14. You, your travel companion or the spouse or child(ren) of either are selected for jury duty, subpoenaed to appear as a witness in court or required to appear as a defendant in a civil suit, whereby the date of the hearing conflicts with the trip.

- 15. The relocation of *your* principal residence or that of a *travel companion* by reason of an unforeseen transfer initiated by the employer with whom *you*, *your spouse*, a *travel companion* or a *travel companion*'s *spouse* are employed at the beginning of the *trip*. This risk does not apply to self-employed persons or contractual employees.
- 16. You or your travel companion are summoned to police, fire or military (whether active or reserve) service.
- 17. You or your travel companion's passport and/or visa is lost or stolen en route to or from your trip destination or at your trip destination.
- 18. Refusal of your visa application or that of a travel companion for the destination country provided that documentation shows eligibility to apply, the refusal is not due to late application, and that the application is not a subsequent attempt for a visa that had been previously refused. This risk applies to Canadian residents only.
- 19. Involuntary loss of permanent employment by *you*, *your spouse*, a *travel companion*, a *travel companion*'s *spouse*, *your* parent or legal guardian (if *you* are under 19 years of *age* or are mentally or physically handicapped of any *age*), due to lay off or dismissal without just cause provided *you* had no knowledge of such loss when this insurance was purchased. This risk does not apply to self-employed persons or contractual employees.
- 20. Seizure or destruction by terrorists at the airport, common carrier or hotel forming part of your and your travel companion's trip and resulting in a Travel Advisory Notice issued by Global Affairs Canada notifying Canadian residents to avoid all non-essential travel or to avoid all travel to such destination when the Travel Advisory Notice corresponds to the scheduled date and destination of your trip.
- 21. A hijacking in which you, your travel companion or the spouse or child(ren) of either are a victim.
- 22. A direct, violent attack perpetrated against you, an immediate family member or a travel companion.
- 23. A new and unexpected Travel Advisory, issued by Global Affairs Canada, after the purchase of this insurance and prior to the departure of *your trip*, or during *your trip*, that warns Canadian residents to avoid all non-*essential travel* or avoid all travel to a specific region of any country included in *your trip*. This risk applies to Canadian residents only.
- 24. An involuntary change in the schedule of an airline flight, tour or cruise ship that is providing transportation for a portion of your trip, which causes you to miss a connection or to interrupt your trip.
- 25. A missed departure or connection resulting from:
 - a. weather (including road closure resulting from weather); or
 - b. volcanic eruption; or
 - c. earthquake; or
 - d. delay of a connecting common carrier due to weather or mechanical failure; or
 - e. delay of a vehicle aboard which *you* are a passenger due to an emergency road closure by the police; or
 - f. an accident involving a vehicle or a common carrier aboard which you are a passenger on your way to the scheduled point of departure or return; or
 - g. an unannounced strike by your common carrier for which you hold a valid ticket on

provided that the *common carrier* or vehicle mentioned above was scheduled to arrive at the scheduled point of departure or return at least two hours in advance of the scheduled time of departure or return.

- 26. When your primary reason for the trip is to attend a wedding, funeral or school graduation ceremony, or other commercial entertainment event for which you have purchased tickets, and the scheduled time of arrival is delayed for a reason beyond your control.
- 27. Undelivered *travel services* due to the *default* of a *travel supplier* with whom *you* have booked *your travel arrangements*. Under Trip Cancellation, only Benefit #1.g applies. Under Trip Interruption, Benefits #2.d and #2.g apply.
- 28. Your commercial accommodation at your trip destination is rendered uninhabitable due to a disaster or event independent of any intentional act or negligence, after your trip is booked.
- 29. If a cruise or a tour that is included in your trip and insured under your CAA Travel Insurance policy is cancelled for any reason except default, 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 or tour up to \$2,500.
 - b. After you leave home, but prior to the cruise or tour departure, we will reimburse you up to \$2,500 for the lesser of:
 - the change fee charged by the airline carrier(s) to return you home, if such an option is available to you; or
 - ii) the extra cost of a one-way fare via the most cost effective itinerary to return you home.

30. BounceBack

In the event *you* have to return to *your* Canadian province or territory of residence from *your trip* destination before *your return date* because of one of the following reasons:

- a. an immediate family member, who is not travelling with you, is admitted
 to a hospital due to an emergency or dies after you leave your Canadian
 province or territory of residence; or
- a disaster or event independent of any intentional act or negligence on your part which causes your principal residence to become uninhabitable after you leave your Canadian province or territory of residence,

we will reimburse you up to a maximum of \$2,000 for the cost of your roundtrip economy class transportation expenses to return you to your Canadian province or territory of residence from your trip destination 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 round-trip economy class transportation expenses to return to your Canadian province or territory of residence or the place of residence of the deceased.

This benefit applies to Canadian residents only.

BENEFITS

1. TRIP CANCELLATION (before departure)

In the event of a *trip* cancellation please advise *your* CAA Travel Professional (if *travel arrangements* were booked through CAA) or *your* travel agent or *your travel supplier* on the *day* the insured risk occurs or on the next business *day* after the insured risk occurs prior to the *departure date*. Only the sums that are nonrefundable on the *day* the insured risk occurs shall be considered for the purpose of the claim.

In the event you must cancel your trip, the following benefits will apply to you and to your travel companion(s) named as Insured(s), subject to the Sum Insured and to all terms and conditions of this policy:

Important Restriction to Trip Cancellation benefits a. and b.:

Cancel for Any Reason benefit(s) a. and b. are covered only if *you* purchase *your policy* within 72 hours of booking *your travel arrangements* or before cancellation penalties come into effect. Subject only to to the General Exclusions and Conditions described on page 5 and 6.

- a. reimbursement of 75% of the nonrefundable portion of your fully prepaid travel arrangements booked through CAA (Canadian Automobile Association), if you elect to cancel your trip 3 hours or more prior to the scheduled departure date and time for any reason; or
- b. reimbursement of 50% of the nonrefundable portion of your fully prepaid travel arrangements, if you elect to cancel your trip 3 hours or more prior to the scheduled departure date and time for any reason; or
- c. reimbursement of the nonrefundable portion of the fully prepaid travel arrangements up to the maximum amount indicated as the Sum Insured on your Declaration Page if your trip is cancelled due to an insured risk. This benefit does not apply to Insured Risk #24; or
- d. reimbursement of the nonrefundable portion of the fully prepaid private accommodation services booked through an approved online platform up to the maximum amount indicated as the Sum Insured on your Declaration Page if your trip is cancelled due to an insured risk. This benefit does not apply to Insured Risk #24; or
- reimbursement of expenses to cover the upgrade occupancy charges if your travel companion(s) cancels prior to departure due to an insured risk and you elect to continue with the trip as ticketed; or
- f. reimbursement of reasonable transportation costs for you to travel to your trip destination by the most direct route if you miss the contracted departure due to the occurrence of an insured risk. This benefit does not apply to Insured Risk #24; or
- g. reimbursement up to \$1,000 for the extra cost of a one-way economy airfare via the most cost effective route to your next trip destination or a change fee charged by the airline involved when such an option is available to you in the event of a schedule change covered under Insured Risk #24; or
- h. reimbursement of the nonrefundable portion of the amount you have prepaid for undelivered travel services, up to a maximum of \$4,000 per Insured, in the event of the default of the travel supplier with whom you have booked your travel arrangements.
- 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.
- j. reimbursement of up to \$2,500 for your nonrefundable prepaid airfare when it is not part of your cruise or tour package, or up to \$2,500 for the airline's change fee if the cruise line or tour operator cancels your cruise or tour package for any reason except default. Your entire prepaid travel arrangements (cruise or tour package and airfare) must be insured.
- k. reimbursement of up to \$800 for alternate travel arrangements on a scheduled common carrier to the planned trip destination to allow arrival in time for the event under Insured Risk #26.

2. TRIP INTERRUPTION OR DELAY (after departure)

In the event of a Trip Interruption or Delay, please call *CAA Assistance* immediately to ensure that *you* do not incur expenses which are not covered. Phone numbers are located on the inside front cover and page 43.

In the event you must interrupt or delay your trip, the following benefits will apply to you and to your travel companion(s) named as Insured(s), subject to the Sum Insured and to all terms and conditions of this policy:

- a. reimbursement of the extra cost of a one-way economy fare to the departure point or to the trip destination point. Unused nonrefundable prepaid travel arrangements excluding the cost of the original ticket (arranged at the time of application for insurance) will be refunded up to a maximum amount indicated as the Sum Insured on your Declaration Page. This benefit does not apply to Insured Risk #24; or
- b. reimbursement up to \$1,000 for the extra cost of a one-way economy airfare via the most cost effective route to your next trip destination or a change fee charged by the airline involved, when such an option is available to you, in the event of a schedule change covered under Insured Risk #24; or
- reimbursement of any additional fees incurred to change the dates of your original return ticket; or
- d. reimbursement to a maximum of \$3,500, subject to a limit of \$350 per day, for reasonable and necessary commercial lodging and meals, commercial vehicle rental, essential telephone calls and taxi transportation when, due to the occurrence of an insured risk:
 - i. you miss part of a trip;
 - ii. your, or your travel companion's, return to the point of departure is delayed beyond the return date;
 - iii. you must return earlier than the return date; or
 - iv. your commercial accommodation is closed due to a default.

This benefit does not apply to Insured Risk #24.

- e. reimbursement to a maximum of \$800, subject to a limit of \$400 per day, for unforeseen, reasonable and necessary commercial lodging and meals, essential telephone calls and taxi transportation when a schedule change covered under Insured Risk #24 causes you to miss a connection or interrupt your trip.
- f. **reimbursement**, subject to prior approval by *CAA Assistance*, in the event of *your* death on a *trip* following *your hospitalization* or accidental death of:
 - a. the actual cost incurred for:
 - i. preparation of the deceased *Insured*, and
 - ii. return 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, casket, urn and/or funeral service expenses.

In addition, and subject to prior approval of *CAA Assistance*, return transportation for an *immediate family member* or close friend to identify the deceased *Insured*. 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 \$300 per *day* to a maximum of three *days*.

g. **reimbursement** of the nonrefundable portion of the amount *you* have prepaid

for undelivered *travel services* plus reimbursement of the extra cost of a oneway economy fare to the departure point or the *trip* destination point up to a maximum of \$4,000 per *Insured*, in the event of the *default* of the *travel supplier* with whom *you* have booked *your travel arrangements*.

- reimbursement to a maximum of \$100 per policy for commercial kennel costs for your pet(s) (domestic dog(s), service animal(s) and/or cat(s) only) when you are not able to return on your return date.
- i. Return of Vehicle:

When approved in advance by CAA Assistance:

- reasonable expenses for the return of your private or rental vehicle due to an insured risk; or
- ii. repatriation of the *Insured* if private *vehicle* is stolen or inoperative due to an accident.
- 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.
- k. reimbursement, under Insured Risk #29, of up to \$2,500 for:
 - the change fee charged by the airline carrier(s) to return you home, if such an option is available to you; or
 - ii. the extra cost of a one-way air fare via the most cost effective itinerary to return you home if the cruise line or tour operator cancels your cruise or tour after you leave home but prior to the cruise or tour departure for any reason except default. Your entire prepaid travel arrangements (cruise or tour and airfare) must be insured.
- reimbursement of up to a maximum of \$2,000, for Insured Risk 30.a. and b. BounceBack, for the cost of your round-trip economy class transportation to return you to your Canadian province or territory of residence from your trip destination and, within your period of coverage, return you back to that trip destination.

In the case of death of an *immediate family member*, we will pay the lesser amount of the cost of *your* one-way economy fare to return *you* to *your* Canadian province or territory of residence or the place of residence of the deceased.

BounceBack benefits 30.a and b. apply to Canadian residents only.

CONDITIONS

In addition to the General Conditions described on page 5, Trip Cancellation & Interruption Insurance is subject to the following conditions:

- You must not know (nor be aware of) any reason, circumstance, event, activity or medical condition affecting you, an immediate family member, a travel companion or an immediate family member of a travel companion which may eventually prevent you from starting and/or completing your covered trip as booked at the time of purchase of this insurance.
- If sickness or injury delays your return more than 10 days beyond the return date, the benefit for the extra cost of a one-way ticket home will only be paid upon submission of proof that you were admitted and confined to a hospital for at least 72 hours within the 10 day period.
- If a disaster or event independent of any intentional act or negligence renders your commercial accommodation uninhabitable, this benefit is only applicable if your commercial accommodation arrangements are not eligible for reimbursement by the travel supplier.
- 4. The *physician* recommending cancellation, interruption or delay of the *trip* must be actively and personally attending to *your* care.

- 5. Benefits in the event of *default* are payable provided that:
 - a. you have contracted with a travel supplier who defaults;
 - as a result of the default, you do not receive part or all of the travel services for which you have contracted; and
 - c. you 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.

Any benefits payable are subject to an overall aggregate maximum limit relating to all in-force travel policies issued by *us*, including this *policy*, as follows:

- \$1 million maximum with respect to the default of any one travel supplier occurring in a calendar year;
- \$3 million maximum with respect to defaults of all travel suppliers occurring in a calendar year.

If total claims resulting from the *default* of one or more *travel suppliers* exceed, in *our* judgment, the applicable aggregate maximum limit, then each *Insured* is entitled to his/her pro rata share of such aggregate maximum limit.

6. Any benefits payable for acts of terrorism are excess to all other recovery sources including, but not limited to, alternative or replacement travel options offered by airlines, tour operators, cruise lines and other travel suppliers and other insurance coverage (even when such coverage is described as excess) and are payable only after you have exhausted all such other recovery sources.

Any benefits payable are subject to an overall aggregate maximum limit relating to all in-force travel policies issued by *us*, including this *policy*. Coverage is available for up to two *acts of terrorism* within a calendar year and the maximum payable for each *act of terrorism* is \$2.5 million.

If total claims resulting from one or more *acts of terrorism* exceed the applicable aggregate maximum limit stated above, then each *Insured* is entitled to his/her pro rata share of such aggregate maximum limit.

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

EXCLUSIONS

In addition to the General Exclusions described on page 5, no coverage shall be provided under Trip Cancellation & Interruption Insurance and no payment shall be made for claims resulting in whole or in part from, or contributed to by, or as natural and probable consequence of any of the following:

- A trip undertaken for the purpose of visiting a sick or injured person when the trip is cancelled, interrupted or delayed due to such person's medical condition or death.
- 2. Abuse of alcohol, drugs or intoxicants

Situations where *vour* claim will not be paid:

 Any Medical Condition, including symptoms of withdrawal, arising from, or in any way related to, your chronic use of alcohol, drugs or other intoxicants (including cannabis), whether prior to or during your trip.

- Any Medical Condition arising during your trip from, or in any way related to, the abuse of alcohol resulting in a blood alcohol level of more than 80 mg of alcohol per 100 ml of blood, drugs or other intoxicants (including cannabis).
- 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.
- 4. Travelling for the purpose of obtaining *Treatment*

Situation where no benefit will be paid:

- A trip made for the purpose of obtaining a diagnosis, Treatment, surgery, investigation, palliative care, or any alternative therapy, as well as any directly or indirectly-related complication.
- 5. Travelling when *Treatment* could be expected

Situation where no benefit will be paid:

- Any future investigation or treatment (except routine monitoring) is planned before your trip; or
- Any Medical Condition or symptoms for which it is reasonable to believe or expect that Treatments will be required during your trip.
- a. a pregnancy diagnosed after your departure date unless your attending physician advises you that you cannot travel during the trip;
 - b. routine prenatal care or childbirth at any time during your trip;
 - c. any costs for your child(ren) born during your trip.
 - d. complications, conditions or symptoms of pregnancy during the nine weeks prior to or after and including the expected delivery date.
- Failure or neglect to obtain required vaccinations or inoculations, excluding Insured Risk #7, page 27.
- Non-presentation of required travel documents, (for example, visa, passport, inoculation/vaccination reports), excluding Insured Risks #7, #10 page 27, and #17, page 28.
- A return earlier or later than the return date unless recommended by the attending physician.
- 10. Payment for repatriation when the original ticket may be used. Original tickets will become the property of CAA Travel Insurance in the event of a repatriation.
- 11. Reimbursement of the cost of the original ticket is not covered when refunding unused prepaid travel arrangements and/or when reimbursing the extra cost of a one-way economy airfare back to the departure point.
- 12. In the event of default, any loss or expense, incurred by you:
 - which is recovered or recoverable from any other source, including any federal, provincial or other compensation fund, or from any other source that is legally responsible or under contract to reimburse your,
 - 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;
 - arising as a consequence of the bankruptcy or insolvency of a retail travel agent, agency or broker;
 - d. arising as a result of the default of a foreign travel supplier if the

Trip Cancellation & Interruption Insurance

travel services to be provided by such foreign travel supplier are not part of a package travel arrangement;

- e. if you have not purchased CAA *Trip* Cancellation & Interruption Insurance in connection with your travel arrangements; and
- f. for travel services that were actually provided.
- 13. Sports and High Risk Activities

Accident that occurs while you are participating in:

- a. any performance as a pilot or crew member of, or travelling as a
 passenger on, any aircraft: flying machines or flying devices that
 are supported chiefly by their buoyancy in air, and includes, but is
 not limited to, any airplane, balloon, kite balloon, airship, glider, hang
 glider, paraglider, parasail, parachute, kite and wingsuit. Travelling
 as a passenger on a common carrier is not subject to this exclusion;
- any participation in any maneuvers or training exercises of the armed forces.
- c. any sporting activity for which you are paid;
- d. any competition, speed event or other high-risk activity involving the use of a motor vehicle on land, water or air, including training activities, whether on approved tracks or elsewhere.

14. Travel advisory

Situations where your claim will not be paid

- Any loss resulting from an act of terrorism when an official travel advisory was issued by the Canadian government stating "Avoid all non-essential travel or Avoid all travel" regarding the country, region or city of your destination, before your effective date.
- To view the travel advisories, visit the Government of Canada Travel site.
- 15. Any nonrefundable pre-paid *travel services* when the *trip* was paid for through a points or rewards program.
- 16. Additional Exclusions to Insured Risk 30, BounceBack:
 - a. A pre-existing medical condition of an immediate family member for which treatment was received in the three months before the purchase of this insurance, resulting in hospitalization or death of the immediate familiy member while you are on your trip.
 - b. A reason that you could reasonably have expected would require you to return to your Canadian province or territory of residence prior to your return date at the time you purchased this insurance.
 - c. Your return back to your trip destination after the return date indicated on your Declaration Page.
- 17. Additional Exclusions to Benefit 1. d.

We will not cover:

- a. private rentals agreements (e.g., family or friends rentals);
- b. any damage to the property
- any arrangements, payments or bookings made outside of the approved online platform;
- d. lost or stolen personal effects.

Travel Accident Insurance

| Eligibility and Purchase | May be purchased by Canadian residents only as part of a Package Plan. May not be purchased separately. | |
|------------------------------------|--|--|
| Conditions | May be purchased by non-Canadian residents only as part of Non-Medical Vacation Package Plan provided that <i>you</i> are living in, travelling through or visiting Canada during <i>your trip</i> . May not be purchased separately. | |
| | Purchase is subject to Eligibility on the inside front cover. | |
| Coverage | The latest of: | |
| Starts | The date you leave your Canadian province or territory of residence; or | |
| | The departure date, start date or effective date shown on your Declaration Page. | |
| Coverage Ends | The earliest of: | |
| | The date on which there was cause for cancellation prior to departure; or | |
| | For non-Canadian residents: the date you leave Canada to return to your country of permanent residence; or | |
| | • The <i>return date</i> as shown on <i>your Declaration Page</i> . | |
| Maximum Age | No maximum <i>age</i> if purchased as part of Non-Medical Vacation Package. | |
| | Age 84 for Single Trip Vacation Package, Multi-Trip Vacation Package or <i>Top-Up</i> to Multi-Trip Vacation Package. | |
| Maximum Benefit | Up to \$100,000 Flight Accident Insurance | |
| | Up to \$10,000 Common Carrier Accident Insurance | |
| | Up to \$5,000 24-Hour Accident Insurance | |
| Maximum <i>Trip</i> <i>Days</i> | 365 Days – If purchased as part of Single Trip Vacation Package <u>Under Age 60</u> or Multi-Trip Vacation Package <u>Under Age 60</u> or Non-Medical Vacation Package. | |
| | • 30 <i>Days</i> – Single Trip Vacation Package <u>Age</u> 60 to 84. | |
| | • 63 Days – Multi-Trip Vacation Package Age 60 to 84. | |

DEDUCTIBLE

No Deductible applies if you have purchased as part of a Non-Medical Vacation Package.

If you have purchased as part of a Vacation Package or Multi-Trip Vacation Package Plan, the *Insurer* will pay eligible expenses for losses incurred in excess of the Deductible amount, as shown on *your Declaration Page*, per *Insured*, per covered condition or event.

INSURED RISKS

A. Flight Accident Insurance - maximum benefit up to \$100,000

Death or dismemberment as a result of *injury* sustained during the *trip* while *you* are:

1. Travelling as a passenger, not as pilot or crew member, aboard a fixed wing multi-engined transport aircraft with an authorized take-off weight greater than 35,000 lbs. (15,900 kg) operated between licensed airports by a scheduled or charter airline of Canadian or foreign registry holding a valid National Transportation Agency License, Regular Specific Point or Charter Air Carrier License or its foreign equivalent, insofar as the aircraft is being used at the time as a conveyance in the capacity authorized by the airline's Scheduled, Regular Specific Point or Charter Air Carrier License.

Travel Accident Insurance

Travelling as a passenger, not as pilot or crew member, aboard a fixed wing multi-engined aircraft operated by the Canadian Armed Forces or its British or American counterparts.

B. Common Carrier Accident Insurance - maximum benefit up to \$10,000

Death or dismemberment as a result of *injury* sustained during the *trip* while *you* are:

- On airport premises immediately prior to boarding or after disembarking from an aircraft described in section A. Flight Accident Insurance above, or while travelling as a passenger in an airport limousine, bus or other ground vehicle provided or arranged for by the airline or airport authority for the purpose of boarding or disembarking from an aircraft described in section A. Flight Accident Insurance above.
- Travelling as a passenger, not as pilot, driver or crew member, aboard a common carrier which is involved in an accident.

C. 24-Hour Accident Insurance - maximum benefit up to \$5,000

Death or dismemberment as a result of *injury* sustained during the *trip* while *you* are in any situation other than those listed in sections A. Flight Accident Insurance and B. *Common Carrier* Accident Insurance above and not otherwise excluded from coverage under this *policy*.

BENEFITS

Subject to all terms and conditions of this *policy*, the greatest of the following benefits is payable for all losses resulting within 100 *days* from the date of a single accident described as an insured risk and as a direct result thereof:

- 100% of the Sum Insured for loss of life, dismemberment of two limbs or loss of sight in both eyes;
- 2. 50% of the Sum Insured for dismemberment of one limb or loss of sight in one eve.

Loss in reference to dismemberment means the actual, complete severance at or above the wrist or ankle joint. Loss of sight means the complete and irrecoverable loss of eyesight, which loss cannot be substantially corrected or remedied through simple *medical treatment* or corrective lenses.

Exposure and Disappearance

If *you* are unavoidably exposed to the elements due to an accident resulting in the disappearance, sinking or damaging of a *common carrier* aboard which *you* are a passenger and if, as a result of such exposure, *you* sustain a loss for which benefits would otherwise be payable, such loss will be covered by this *policy*.

If you disappear due to an accident resulting in the disappearance, sinking or damaging of a common carrier aboard which you are a passenger and if your body is not found within 52 weeks of such accident, the *Insurer* shall presume that you sustained loss of life as a result of *injury* covered by this *policy*, subject to there being no evidence to the contrary.

CONDITIONS

In addition to the General Conditions described on page 5, Travel Accident Insurance is subject to the following conditions:

- 1. If other accidental death, dismemberment or loss of sight policies which we have previously issued to you are concurrently in-force with this policy, making the aggregate indemnity in excess of \$100,000, the present insurance shall be void and all premiums shall be returned to the Insured or to his or her estate. If you are entitled to similar benefits through any other insurance plan, the benefits payable under this policy will be prorated.
- Death or dismemberment must occur within 100 days from the date of the accident in order for benefits to be payable.
- Should more than one loss be sustained from an insured risk as the direct result of a single accident, only the largest of the benefits is payable.

Travel Accident Insurance

- The benefit for dismemberment of two limbs is payable only if such dismemberment results directly from a single accident.
- 5. The total benefits payable for one or more accidents occurring during the same *trip* shall not exceed the *Sum Insured*.

EXCLUSIONS

In addition to the General Exclusions described on page 5, no coverage shall be provided under Travel Accident Insurance and no payment shall be made for any claim resulting in whole or in part from, or contributed to by, or as a natural and probable consequence of any of the following:

- 1. Abuse of alcohol, drugs or intoxicants
 - Situations where your claim will not be paid:
 - Any Medical Condition, including symptoms of withdrawal, arising from, or in any way related to, your chronic use of alcohol, drugs or other intoxicants (including cannabis), whether prior to or during your trip.
 - Any Medical Condition arising during your trip from, or in any way related to, the abuse of alcohol resulting in a blood alcohol level of more than 80 mg of alcohol per 100 ml of blood, drugs or other intoxicants (including cannabis).
- 2. Illegal act

Situation where your claim will not be paid:

- Claim that results from or is related to your negligent behaviour or involvement in the commission or attempted commission of a criminal offence, negligent or illegal act
- Claims related to expectant mother's complications of pregnancy, delivery Situation where your claim will not be paid:
 - Claim related to routine pre-natal or post-natal care
 - Claim related to pregnancy, delivery, or complications of either, arising 9 weeks before the expected date of delivery or 9 weeks after.
- 4. Child born during the trip

Situation where *your* claim will not be paid:

- Claim related to your child born during the trip
- 5. Sports and High Risk Activities

Accident that occurs while you are participating in:

- a. any performance as a pilot or crew member of, or travelling as a
 passenger on, any aircraft: flying machines or flying devices that
 are supported chiefly by their buoyancy in air, and includes, but is
 not limited to, any airplane, balloon, kite balloon, airship, glider, hang
 glider, paraglider, parasail, parachute, kite and wingsuit. Travelling
 as a passenger on a common carrier is not subject to this exclusion;
- any participation in any maneuvers or training exercises of the armed forces.
- c. any sporting activity for which you are paid;
- d. any competition, speed event or other high-risk activity involving the use of a motor vehicle on land, water or air, including training activities, whether on approved tracks or elsewhere
- e. while making a parachute jump for any purpose other than to save your life.
- 5. Any act of terrorism.

Baggage Insurance

| Eligibility and Purchase | May be purchased by Canadian residents only as part of a Package Plan. May not be purchased separately. | |
|------------------------------------|---|--|
| Conditions | May be purchased by non-Canadian residents only as part of Non-Medical Vacation Package Plan provided that <i>you</i> are living in, travelling through or visiting Canada during <i>your trip</i> . May not be purchased separately. | |
| | Purchase is subject to Eligibility on the inside front cover. | |
| Coverage | The latest of: | |
| Starts | The date you leave your Canadian province or territory of residence; or | |
| | The departure date, start date or effective date shown on your Declaration Page. | |
| Coverage Ends | The earliest of: | |
| | The date on which there was cause for cancellation prior to departure; or | |
| | For non-Canadian residents: the date you leave Canada to return to your country of permanent residence; or | |
| | The return date as shown on your Declaration Page. | |
| Maximum Age | No maximum <i>age</i> if purchased as part of Non-Medical Vacation Package. | |
| | Age 84 for Single Trip Vacation Package, Multi-Trip Vacation Package or <i>Top-Up</i> to Multi-Trip Vacation Package. | |
| Maximum Benefit | Up to \$1,000 Sum Insured. | |
| Maximum <i>Trip</i> <i>Days</i> | 365 Days – If purchased as part of Single Trip Vacation Package <u>Under Age 60</u> , Multi-Trip Vacation Package <u>Under Age 60</u> or Non-Medical Vacation Package. | |
| | • 30 <i>Days</i> – Single Trip Vacation Package <u>Age</u> 60 to 84. | |
| | • 63 <i>Days</i> – Multi-Trip Vacation Package <i>Age</i> 60 to 84. | |

INSURED RISKS

Loss of, or damage to the baggage and personal effects you own and/or use during the trip by reason of theft, burglary, fire or transportation hazards during the trip.

DEDUCTIBLE

No Deductible applies if you have purchased as part of a Non-Medical Vacation Package.

If you have purchased as part of a Vacation Package or Multi-Trip Vacation Package Plan, the *Insurer* will pay eligible expenses for losses incurred in excess of the Deductible amount, as shown on your *Declaration Page*, per *Insured*, per covered condition or event.

BENEFITS

Subject to all terms and conditions of this *policy*, the following benefits are payable to a maximum of the *Sum Insured*:

- The actual cash value or \$500, whichever is less, in respect of any one item or set of items. Jewellery or cameras (including camera equipment) are respectively considered a single item.
- Reimbursement of the cost of replacing one or more of the following documents, to a maximum of \$50, in the event of loss or theft: driver's license, birth certificate or travel visa, plus a maximum of \$200 in the event of loss or theft of a passport.
- Reimbursement up to \$500 to purchase essential necessities in the event that your checked baggage is delayed by the common carrier for more than 10 hours while en route or before returning to your scheduled point of departure.

Baggage Insurance

4. Reimbursement up to \$100 per day, to a maximum of \$500 for the commercial rental of golf clubs or ski equipment or for the purchase of reasonable golf accessories or ski accessories in the event your checked golf clubs or ski equipment are delayed by the common carrier for more than 10 hours while you are en route before returning to your scheduled point of departure.

CONDITIONS

In addition to the General Conditions described on page 5, Baggage Insurance is subject to the following conditions:

- In the event of loss due to theft, burglary, robbery or malicious mischief, you must promptly notify and obtain supporting documentary evidence from the police, or if the police are unavailable, the hotel manager, tour guide or transportation authority immediately upon discovery. Failure to report the loss as stated above shall invalidate any claim under this insurance for such loss.
- You must notify CAA Assistance of a loss within 24 hours of the loss occurrence.
- In the event of loss you must take all precautions to protect, save or recover the property immediately.
- 4. The *Insurer* reserves the right to repair or replace damaged or lost property with other property of like quality and value and shall not be liable beyond the actual cash value of such property at the time of loss or damage.
- The maximum Sum Insured per Insured shall in no event exceed \$1,000
 in the aggregate of all coverages in this and other Baggage Insurance
 policies issued by the Insurer, regardless of actual loss or damage.
- 6. In the event of loss of an article which is part of a pair or set, the measure of loss shall be at a reasonable and fair proportion of the total value of the pair or set, giving consideration to the importance of such article and with the understanding that such loss shall not be construed to mean total loss of the pair or set.
- When, after a reasonable period of time, lost property is not found, any claim therefore will be adjusted and paid.

EXCLUSIONS

In addition to the General Exclusions described on page 5, no coverage shall be provided under Baggage Insurance and no payment shall be made for any claim resulting in whole or in part from, or contributed to by, or as a natural and probable consequence of any of the following:

- Damage to or loss of hearing devices, eyeglasses, sunglasses, contact lenses, or prosthetic teeth or limbs, and resulting prescription thereof.
- Normal wear and tear, gradual deterioration, vermin, defect or mechanical breakdown.
- Animals, perishables, bicycles except while checked as baggage with a common carrier, household effects and furnishings, money, tickets, securities and documents (unless stated otherwise in this policy), professional or occupational items, antiques and collector items, breakage of brittle or fragile articles, property illegally acquired, kept, stored or transported.
- Damage to or loss of covered items sustained due to any process or while being worked upon; radiation; or confiscation by any government authority.
- Unaccompanied baggage or personal effects; baggage or personal effects left unattended or in an unlocked vehicle; or baggage or personal effects shipped under a freight contract.
- 6. Any act of terrorism.

Extensions and Top-Ups

AUTOMATIC EXTENSION OF COVERAGE

Coverage will be extended automatically without additional premium if:

- Your return to the point of departure is delayed beyond your return date solely because of the following reasons:
 - a. delay of the means of transportation provided the scheduled carrier was due to arrive at the departure point by the return date, and provided that the journey is completed in a reasonable amount of time; or
 - b. if driving, delay due to inclement weather provided the return journey commences prior to the *return date*; or
 - c. the personal means of transportation in which you are travelling is involved in an accident or mechanical breakdown that prevents you from returning to your Canadian province or territory of residence or your country of permanent residence on or before the return date provided your return journey commences prior to the return date; or
 - d. delay due to a sudden, unforeseen and emergent sickness or injury of you, your accompanying family member or travel companion.

You must notify CAA Assistance of the delay prior to the return date.

You will be required to provide proof of the reason for your delay in the event that you have to file a claim.

Coverage is extended for a period of five days, or for the period of hospitalization plus five days after discharge from the hospital or until deemed medically able to travel by the Medical Director of CAA Assistance. This benefit does not include any costs associated with flight change arrangements, with the exception of emergency repatriation that is approved in advance by the Medical Director of CAA Assistance.

You have a Multi-Trip Plan or Multi-Trip Vacation Package Plan <u>Under Age 60</u> and your trip days are entirely within Canada. The Multi-Trip Vacation Package Plan <u>Age 60-84</u> provides coverage for up to 63 trip days entirely within Canada.

Coverage may never extend beyond 365 days from the departure date or the effective date.

VOLUNTARY EXTENSION OR TOP-UP OF COVERAGE

We will extend or Top-Up the number of trip days on your coverage beyond your return date, provided that:

- You make application for the extension or Top-Up prior to the expiry date of your policy AND complete a new Medical Questionnaire to determine eligibility and premium for the extension or Top-Up.
- There is no cause for a claim against this policy. (If you have a medical claim on your Multi-Trip Plan or Multi-Trip Vacation Package Plan, you are still entitled to a Top-Up for subsequent trips, but the cause of the first claim will be deemed a pre-existing medical condition that must qualify for the stability requirements for your age).
- The extension or Top-Up is requested, approved by us and you have paid any additional required premium for such extension or Top-Up prior to the effective date of the Top-Up or extension.
- If you are topping up another insurer's policy, you must confirm with that insurer
 that a Top-Up is permitted on your existing policy with no loss of coverage.
- The total period of coverage for any single covered trip, including the extension or Top-Up requested, does not exceed the applicable periods for the insurance coverages indicated in the chart on page 41.

Extensions and Top-Ups

| INSURANCE COVERAGE | MAXIMUM TRIP DAYS INCLUDING EXTENSION OR TOP-UP |
|---|---|
| Emergency Medical Insurance: Single Trip Plan Canada Plan Multi-Trip Plan Top-Up to Multi-Trip Plan Vacation Package Plans Under Age 60: Single Trip Vacation Package Multi-Trip Vacation Package Top-Up to Multi-Trip Vacation Package | 365 <i>Days</i> with <i>GHIP</i> approval. |
| Vacation Package Plans <u>Age 60 to 84</u> : Single Trip Vacation Package | 30 <i>Days.</i> |
| Vacation Package Plans <u>Age 60 to 84:</u> Multi-Trip Vacation Package Top-Up to Multi-Trip Vacation Package | 63 Days. |
| Non-Medical Vacation Package Plan Trip Cancellation & Interruption Insurance Visitors to Canada Insurance* | 365 <i>Days</i> . |

Visitors to Canada Insurance may only be extended if you have not experienced any change in your health and you have been continuously covered under a CAA Visitors to Canada Insurance policy with no gap in coverage.

Refunds

A refund of premium may be available **provided no claim has been paid, incurred or reported under this policy**. Please refer to the individual insurance coverages outlined below for the refund type(s) available for the coverage(s) **you** have purchased.

- Full refunds must be requested and approved prior to the departure date or
 effective date of the trip.
- Partial refunds must be requested and approved prior to the return date of
 the trip. Proof of early return (for example, customs or immigration stamp,
 gas receipts) or trip interruption is required. Any refund is calculated from the
 postmarked date of written request or the actual date you visited or called CAA
 to request the refund.

Emergency Medical Insurance (Single Trip, *Top-Up*, Canada Plan) Full or Partial refund.

Visitors to Canada Insurance

Full Refund if:

 you request cancellation prior to the effective date and, if this policy was purchased as a requirement to obtain or maintain a Super Visa, you provide proof from Citizenship and Immigration Canada that your Super Visa was denied.

Partial Refund if:

- you become eligible and/or covered under a GHIP during your policy coverage period; or
- you return to your country of permanent residence prior to your scheduled return date.

and you provide:

proof of the date you became eligible and/or covered under a GHIP, or

Refunds

- proof of your departure from Canada and return to your country of permanent residence (airline ticket/boarding pass or customs/immigration entry stamp); or
- proof of your early return to your country of permanent residence from Citizenship and Immigration Canada if this policy was purchased for a Super Visa.

Multi-Trip Plan (Emergency Medical Insurance) and Multi-Trip Vacation Package Plan

Non-refundable after the effective date.

Trip Cancellation & Interruption Insurance, Single Trip Vacation Package, Non-Medical Vacation Package

Full refund if:

COUNTRY

- a. you cancel your trip before any cancellation penalties are in effect; or
- b. the carrier/travel supplier cancels the entire trip and all penalties are waived; or
- the carrier/travel supplier changes your trip dates and you are not able to travel and all penalties are waived; or
- d. client financing through travel supplier is declined.

CAA Assistance

CAA Assistance is available 24 hours per day, 365 days per year.

WHAT TO DO IF YOU NEED CAA ASSISTANCE

Have your policy number or Declaration Page with you at all times and contact CAA Assistance at the telephone number(s) listed below.

TOLL-FREE NUMBER

| 1-866-672-3651 |
|--------------------|
| 0011-800-8877-9000 |
| 00 800-8877-9000 |
| 1-800-203-9591 |
| 1-800-204-0004 |
| 001-800-248-8561 |
| 00 800-8877-9000 |
| 00 800-8877-9000 |
| 001-800-8877-9000 |
| 00 800-8877-9000 |
| +1-519-988-7041 |
| |

Email if Calling is Not Possible orionassistance@acmtravel.ca

When contacting CAA Assistance, please provide your name, your policy number, your location and the nature of your emergency.

WHAT HAPPENS WHEN YOU CALL CAA ASSISTANCE?

Prior to receiving all relevant medical information, we will handle your emergency assuming you are eligible for benefits under this policy and you will be reminded that any services rendered are subject to the terms and conditions of this policy. If it is later determined that a policy term, limitation, condition or exclusion, general and specific, applies to your claim, you will be required to reimburse us for any payments we have made on your behalf.

CAA Assistance

CAA Assistance will work closely with you to:

- direct you to an appropriate physician or hospital at your trip destination, wherever possible;
- provide multilingual interpreters to communicate with physicians and hospitals;
- monitor your care so that only appropriate, medically necessary treatment is given and to ensure that your medical needs are met;
- contact your family and physician on your behalf;
- pay *hospitals*, *physicians* and other medical providers directly, whenever possible;
- approve and arrange air ambulance transportation when *medically necessary*;
- inform you of any expenses not covered by this policy or to explain this policy's terms and provisions as they relate to your medical emergency.

Where a claim is payable we will arrange, wherever possible, to have any medical expenses billed directly to us.

WHY ARE YOU REQUIRED TO CALL CAA ASSISTANCE?

- You must call CAA Assistance before obtaining Emergency Treatment, so that we may:
 - · confirm coverage
 - provide pre-approval of treatment

If it is medically impossible for *you* to call prior to obtaining *Emergency Treatment*, *we* ask *you* to call as soon as possible or have someone call on *your* behalf. Otherwise, if *you* do not call *CAA Assistance* before *you* obtain *Emergency Treatment*, *your* maximum benefit payable will be reduced to 80% of *your* medical expenses covered under this insurance, to a maximum of \$25,000 CAD.

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

- If we determine that you should transfer to another facility or return to your home province/territory of residence, and you choose not to, benefits will not be paid for further medical treatment.
- CAA Assistance must approve certain benefits in advance. Check the benefits section of your coverage(s) to see which benefit(s) this applies to.
- 4. Trip Cancellation claims must be reported within one business day of the event forcing cancellation. If you do not call, you may sustain reduced benefits due to cancellation penalties that are imposed by the travel supplier. Benefits payable apply to those charges which are in effect on the day of the loss.
- 5. Trip Interruption claims must be reported immediately to ensure that *you* do not incur expenses which are not covered benefits.
- 6. If you pay eligible expenses directly to a health service provider without prior approval by CAA Assistance, these services will be reimbursed to you on the basis of the reasonable and customary charges that would have been paid directly to such provider by the Insurer. 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 the Insurer.

LIMITATION ON CAA ASSISTANCE SERVICES

CAA Assistance reserves the right to suspend, curtail or limit services in any area or country in the event that war, political instability or hostility renders the area inaccessible by CAA Assistance. CAA Assistance will use its best efforts to provide services during any such occurrence.

You may contact CAA Assistance prior to your departure to confirm coverage for your trip destination.

How to File a Claim

PAYMENT TO MEDICAL PROVIDERS

CAA Assistance will pay hospitals, physicians and other medical providers directly, whenever possible. While most medical providers will agree to accept direct payment from us, there are some providers who will require that you pay them directly.

Where direct payment cannot be arranged, we will **reimburse** eligible expenses on the basis of *reasonable and customary charges*.

Please note that some benefits are **reimbursable** on *your* return. Check the particular benefit section for the insurance coverage(s) *you* have purchased to see which benefit(s) this applies to.

SUBMITTING YOUR CLAIM

You must substantiate your claim by providing the documents described in the applicable insurance coverage(s) below. (The *Insurer* is not responsible for charges levied in relation to any such documents).

Indicate *your policy* number on all correspondence and send the claim form and all required documents to:

CAA Travel Insurance

Active Care Management Inc.
PO Box 308 Station A
Windsor. Ontario N9A 6K7

Email: orionclaims@acmtravel.ca

Phone Numbers: Located on the inside front cover and page 43

EMERGENCY MEDICAL INSURANCE and VISITORS TO CANADA INSURANCE

- A completed Medical Expenses Claim Form (provided by CAA Assistance upon notification of claim).
- For accidental dental expenses you must provide an accident report from the physician or dentist.
- 3. Original itemized bills from the licensed medical provider(s) stating the patient's name, diagnosis, date and type of treatment, and the name, address and telephone number of the provider, as well as the original transaction documents proving that payment was made to the provider. (For Canadians covered by GHIP, copies of itemized bills are accepted only if the Insured has already dealt directly with GHIP).
- Original prescription drug receipts from the pharmacist, physician or hospital indicating the name of the prescribing physician, prescription number, name of preparation, date, quantity and total cost.
- For out of pocket expenses: an explanation of expenses accompanied by the original receipts.

HOLIDAY PROTECTION

In addition to the items required under 1 Cancellation & Interruption Insurance, *you* must also submit:

- 1. Satisfactory evidence that you have booked and paid for a replacement trip.
- An itemized CAA Travel Agency invoice, for the replacement trip, showing fares, deposits, travel dates, final payment and date thereof.
- 3. A copy of the CAA Travel Insurance *policy* for the replacement *trip* and the name of the CAA travel professional.

TRIP CANCELLATION & INTERRUPTION INSURANCE

Benefits under this insurance coverage are payable to *you* unless *you* authorize and direct the *Insurer*, in writing, to pay the eligible claim amount to a third party.

 A completed Trip Cancellation & Interruption Claim Form (available by contacting the CAA Assistance at the phone numbers on page 43). We need proof of the cause of the claim, including:

How to File a Claim

- a. if your claim is for medical reasons, a medical certificate completed by the attending physician stating why travel was not possible as booked and a copy of the entire medical file of any person whose health or medical condition is the reason for your claim; or
- a report from the police or other responsible authority documenting the reason for the delay if *vour* claim is due to misconnection.
- 2. Original invoices and receipts.
- 3. Original tickets.
- Other supporting documentation as requested.

TRIP CANCELLATION

- For cancellation due to a disaster or event independent of any intentional act or negligence, accident on the way to departure, jury duty, subpoena, transfer or involuntary loss of employment: a legal certificate (police report, the summons and/or subpoena, record of employment) confirming the circumstances of the cancellation and a letter from *your* employer (if applicable).
- 2. <u>For penalties:</u> a copy of the *travel supplier's* or the airline's publication confirming the cancellation penalties imposed.
- 3. For <u>default</u> coverage: written notice of claim must be submitted within 60 days of the <u>day</u> on which the <u>travel supplier</u> announces that it is in <u>default</u>:
 - a. copies of receipts and proofs of payment to travel suppliers:
 - b. copies of unused transportation or accommodation documents; and
 - c. where appropriate, evidence of claim to or reimbursement from any federal, provincial or other compensation fund or any other source (including credit card companies) that is legally responsible or under contract to reimburse you for the cost of the undelivered travel services.

TRIP INTERRUPTION

- For out of pocket expenses: an explanation of expenses in the event of a late return, along with original receipts.
- For death or repatriation: a death certificate accompanied by receipts from the funeral home, airline, etc.
- For default coverage: written notice of claim must be submitted within 60 days of the day on which the travel supplier announces that it is in default:
 - a. copies of receipts and proofs of payment to travel suppliers;
 - b. copies of unused transportation or accommodation documents; and
 - c. where appropriate, evidence of claim to or reimbursement from any federal, provincial or other compensation fund or any other source (including credit card companies) that is legally responsible or under contract to reimburse you for the cost of the undelivered travel services.
- Other supporting documentation as requested.

TRAVEL ACCIDENT INSURANCE

For forms and instructions, contact CAA Assistance at the phone number(s) on page 43.

BAGGAGE INSURANCE

- A completed claim form available by contacting CAA Assistance at the phone number(s) on page 43.
- 2. For loss:
 - a. a report by the police or the hotel manager, tour guide or transportation authorities in whose custody the insured property was at the time of loss;
 - adequate proof of loss, (original purchase receipts, original replacement receipts or original replacement estimates on store stationery or letterhead) ownership and itemized value.

How to File a Claim

- a Property Irregularity Report when luggage is lost or damaged while in the custody of the airline or common carrier.
- 3. For baggage delay *you* must supply proof of delay of checked baggage from the *common carrier* and original receipts of purchase:
 - a. original itemized receipts for expenses actually incurred;
 - b. a copy of the baggage claim ticket;
 - c. a copy of your airline or common carrier ticket;
 - d. verification of the delay of checked baggage from the airline or *common* carrier including the reason and the duration of the delay; and
 - e. a copy of the delivery receipt.

BOUNCEBACK BENEFIT

For forms and instructions, contact *CAA Assistance* at the phone number(s) on page 43.

Definitions

ACM or **Active Care Management Inc.** means the company appointed by the *Insurer* to provide the assistance and claims services under the *policy*.

Act(s) 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, or a threat to commit, a dangerous act; or
- commission, 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; or
- intimidate, coerce or put 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 to express (or express opposition to) a philosophy or ideology.

Act(s) 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 refers to *your age* on the date of insurance application. For *Top-Up*, *age* refers to *your age* on the date of *Top-Up* application.

Approved online platform means a registered business in the sharing accommodation space. Approved platforms are Airbnb, HomeAway Family Companies, Trip advisor rentals and priceline.com.

Business meeting means a meeting between companies with unrelated ownership which has been arranged in advance, which is relevant to *your* full-time profession or occupation and which required the undertaking of the *trip. Business meeting* includes a conference for which *you* have paid registration fees when the cancellation is due to circumstances beyond *your* control. (Proof of registration will be required in the event of a claim.)

CAA Assistance means the claims and assistance provider, appointed by *us* from time to time to perform all assistance services and administer claims on *our* behalf under this *policy*.

Caregiver means a person you have entrusted with the care of your dependent(s) on a permanent, full-time basis and whose services cannot reasonably be replaced.

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, stopped and/or new medications have been prescribed. Exceptions:

- an adjustment to the insulin or Coumadin (Warfarin) dosage you are currently taking provided it is not newly prescribed or stopped and there has been no change to your medical condition; and
- a change from a brand name medication to a generic brand medication (insofar as the dosage is not modified).

Child(ren) means unmarried, dependent persons under 26 years of *age* (under *age* 19 for Escort of *Insured Children* benefit), who reside with *you* OR who are full-time students in residence at a post-secondary institution OR mentally or physically handicapped persons of any *age* who reside with *you*, all of whom depend on *you* for support and whose name appears on *your Declaration Page* as *Insured(s)*.

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

Day means 24 consecutive hours beginning at 12:01 a.m.

Declaration Page means *your* most recent computer printout, printed form, electronic copy, invoice or *policy* document that sets out the insurance coverage(s) *you* have purchased.

Default means the complete or substantially complete cessation of business by a *travel supplier* as a direct or indirect result of bankruptcy or insolvency thereof.

Departure date means the *departure date*, start date or *effective date* shown on *your Declaration Page*.

Effective date means:

- a. for Trip Cancellation Insurance the date of application;
- b. for Visitors to Canada Insurance the latest of the following:
 - i. your arrival date in Canada; or
 - ii. the departure date, start date or effective date shown on your Declaration Page;
 - : for all other insurance coverages the latest of the following:
 - i. the date you leave your Canadian province or territory of residence; or
 - ii. the departure date, start date or effective date shown on your Declaration Page.

Emergency means sudden and unforeseen *Medical Condition* that requires immediate *Treatment*. An *emergency* no longer exists when the evidence indicates that no further *Treatment* is required at destination or *you* are able to return to *your* province/territory of residence for further *Treatment*.

Essential travel means *your* reason for travel is due to the death or *terminal illness* of an *immediate family member*.

Family means you and/or your spouse (legal or common-law, regardless of sex) and your child(ren), step-child(ren) or grandchild(ren) (provided they are under 26 years of age OR of any age if mentally or physically handicapped), when your names appear on your Declaration Page respectively as the Insured(s).

GHIP means a Canadian provincial or territorial government health insurance plan.

Hospital means an institution that is licensed as an accredited hospital that is staffed and operated for the care and treatment of in-patients and out-patients. Treatment must be supervised by Physicians and there must be registered nurses

on duty 24 hours a *day*. Diagnostic and surgical capabilities must also exist on the premises or in facilities controlled by the establishment.

A *Hospital* is not an establishment used mainly as a clinic, extended or palliative care facility, rehabilitation facility, addiction treatment centre, convalescent, rest or nursing home, home for the aged or health spa.

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

Immediate family member means spouse (legal or common-law, regardless of sex), natural, adopted, foster or step-child(ren), brother, sister, step-brother, step-sister, parent, step-parent, grandparent, grandchild(ren), aunt, uncle, nephew, niece, son-in-law, daughter-in-law, parent-in-law, brother-in-law, sister-in-law, legal guardian, legal ward or key employee of the Insured.

Infant means a *child(ren)* under two years of *age*.

Injury means accidental bodily harm which results in loss unrelated to *sickness* or any other cause and which occurs while this coverage is in effect. The *injury* must be sufficiently serious to prompt a reasonably prudent person to consult a *physician* for the purpose of *medical treatment* and for the *physician* to certify in writing the necessity of cancelling, interrupting or delaying the *trip*.

Insured(s) means the person(s) named on *your Declaration Page* upon which a CAA Travel Insurance *policy* number appears.

Insurer means Orion Travel Insurance Company.

Key employee means an employee whose continued presence is critical to the ongoing affairs of the business during *your* absence.

Medical Condition means any disease, illness or *injury* (including symptoms of undiagnosed conditions).

Medical emergency means the unforeseen and emergent occurrence of symptoms for a *sickness* or *injury* which, unless *treated* immediately by a *physician*, may lead to death or to serious impairment of *your* health.

Medical Questionnaire (where applicable) means the form relating to *your* medical history which *you* must fill out correctly at the time of application for insurance and at the time of application for extension and *Top-Up* and which forms part of the insurance *policy*. The answers *you* provide on this form are material to the determination of the terms of coverage and/or the premium that applies to *you*.

Medical treatment means any reasonable procedure which is medical, therapeutic or diagnostic in nature, which is *medically necessary* and which is prescribed by a *physician. Medical treatment* includes: medical advice, consultation, investigation, *treatment*, care, service, *hospitalization*, investigative testing, surgery, prescription medication (including prescribed as needed) or other *treatment* directly related to the *sickness*, *injury* or symptom.

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. cannot be omitted without adversely affecting your condition or quality of medical care;
- d. cannot be delayed until your return to your Canadian province or territory of residence or, for non-Canadian residents your country of permanent 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.

Minor ailment means a *medical condition* that does not require: use of medication

for a period greater than 30 *days*; more than one follow-up visit to a *physician* or other registered medical practitioner; *hospitalization*; surgical intervention; or, consultation with a medical specialist. A chronic infection or the complication of a chronic infection is not a *minor ailment*.

Physician means a person who is not you or a member of *your immediate family member* or *your traveling companion*, licensed in the jurisdiction where the services are provided, to prescribe and administer *medical treatment*.

Policy means this document, any riders or amendments to this document, the application, any *Medical Questionnaire(s)* (if applicable), and *your Declaration Page*, all of which form the entire *policy* and must be read as a whole.

Pre-existing Medical Condition means any *medical condition(s)* that exists prior to the *departure date* or *effective date* of *your trip* for which *you* have received a diagnosis and/or had *medical treatment* and/or been *hospitalized* and/or been prescribed or taken medication and/or had a *change* in *medication* and/or had a *change* in *medical treatment* and/or experienced new or more frequent symptoms and/or are requiring investigation (other than a routine check-up).

Private Accommodation Services means services that connect travellers and hosts through an *Approved Online Platform* (mobile application or website) that acts as an intermediary and processes the payment from the traveler to the host.

Professional means a person who is engaged in a specific activity and receives remuneration.

Reasonable and customary charges means charges incurred for goods and services that are comparable to what other providers charge for similar goods and services in the same geographical area.

Return date means:

- a. for the Multi-Trip Annual Plan and Multi-Trip Vacation Package Plan the earliest of:
 - the date on which you are scheduled to return from any single covered trip (up to 4, 8, 15 or 30 days, depending on the duration of the plan you purchased) to your Canadian province or territory of residence;
 - ii) the date you actually return to your Canadian province or territory of residence;
 - iii) one year from the *departure date*, start date, or *effective date* as shown on *your Declaration Page*.
- b. for Visitors to Canada Insurance the earliest of:
 - for non-Canadian residents: the actual date you leave Canada to return to your country of permanent residence;
 - ii) the date on which you are scheduled to return to your country of permanent residence as shown as the return date on your most recent Declaration Page.
- c. for All Other Insurance Coverages the earliest of:
 - the date you actually return to your Canadian province or territory of residence:
 - ii) the *return date* on which *you* are scheduled to return to *your* Canadian province or territory as shown on *your* most recent *Declaration Page*;
 - iii) for <u>non-Canadian residents</u>: the date on which *you* are scheduled to return to *your* departure point as shown as the *return date* on *your* most recent *Declaration Page*.

Service Animal(s) means any dog(s) that is individually trained to do work or perform tasks for the benefit of an *Insured* with a disability, including a physical, sensory, psychiatric, intellectual or other mental disability. The work or tasks performed by a service animal must be directly related to the *Insured's* disability.

Sickness means a disease or disorder of the body which results in loss while this coverage is in effect. The sickness must be sufficiently serious to prompt

a reasonably prudent person to consult a *physician* for the purpose of *medical treatment* and for the *physician* to certify in writing the necessity of cancelling, interrupting or delaying the *trip*.

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 the person to whom *you* are legally married or with whom *you* have resided for at least 12 months and whom *you* present publicly as *your spouse* (regardless of sex).

Stable means:

- there has not been any new Treatment prescribed or recommended, or change(s) to existing Treatment including a stoppage in Treatment, and
- there has not been any change to any existing prescribed drug (including an increase, decrease, or stoppage to prescribed dosage), or any recommendation or starting of a new prescription drug, and
- 3. the Medical Condition has not become worse, and
- 4. there has not been any new, more frequent or more severe symptoms, and
- 5. there has been no hospitalization or referral to a specialist, and
- there have not been any tests, investigation or *Treatment* recommended, but not yet complete, nor any outstanding test results, and
- 7. there is no planned or pending treatment, and

All of the above conditions must be met for a *Medical Condition* to be considered *Stable*.

Sum Insured means the maximum amount payable, providing premium has been paid, as indicated on *your Declaration Page*.

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

Top-Up means the coverage *you* purchase from *us* to extend *your trip days* beyond the duration covered under the Multi-Trip Plan, Multi-Trip Vacation Package Plan or another insurer's policy.

Travel arrangements mean *travel services* whose reservation and booking has been made by a CAA Travel Consultant, or a travel agent, or a *travel supplier* on *your* behalf prior to the *departure date* of *your trip*.

Travel companion means a person accompanying *you* on the *trip*, who shares accommodation or transportation with *you* and who has paid such accommodation or transportation in advance of departure. A maximum of six persons will be considered *travel companions* (including the *Insured*).

Travel services means transportation, sleeping accommodation or other services for the use of a traveller, tourist or sightseer provided by a *travel supplier* but does not include taxes or insurance.

Travel supplier means a licensed: tour operator and/or travel wholesaler and/or cruiseline and/or companies in the business of providing commercial transportation and/or commercial accommodation to the public.

Treated/Treatment means a procedure prescribed, performed or recommended by a *Physician* for a *Medical Condition*. This includes but is not limited to prescribed medication, investigative testing and surgery.

Trip for Canadian residents means travel outside *your* Canadian province or territory of residence; for non-Canadian residents *trip* means travel outside *your* country of permanent residence.

Vehicle means any private or rental automobile, motorcycle, mobile home or trailer.

We, us or our means Orion Travel Insurance Company.

You, your and yourself means the person(s) shown as the "Insured(s)" on your Declaration Page upon which a CAA Travel Insurance policy number appears.

General Terms of Agreement

These general terms of agreement apply to all CAA Travel Insurance coverages described herein.

This *policy* is issued in consideration of *your* application, and the premium paid in advance of travel dates, for coverage(s) shown on *your Declaration Page* upon which a CAA Travel Insurance *policy* number appears.

Active Care Management Inc. has been appointed by the Insurer as provider of all assistance and claims services under this policy.

Premium:

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 the *Insurer*.

Enrollment and premium collection are handled by CAA and the *Insurer*. The required premium is due and payable at the time of application and will be determined according to the schedule of premium rates then in effect.

If the premium is incorrect for the period of coverage selected, we will:

- a. charge and collect any underpayment; or
- shorten the coverage period by written amendment if an underpayment in premium cannot be collected; or
- c. refund any overpayment of premium.

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.

By paying the premium for this insurance, *you* agree that *we* and *CAA Assistance* have:

- a. your consent to verify your Canadian government health insurance (GHIP) card number (where applicable) and other information required to process your claim, with the relevant government and other authorities;
- b. your authorization to physicians, hospitals and other medical providers (where applicable) to provide to us and CAA Assistance any and all information they have regarding you while under observation or treatment, including your medical history, diagnoses and test results:
- c. your agreement to the collection, use, and if necessary disclosure of the information available under a. and b. above from and to other sources, as may be required for the consideration and, if applicable, processing of your claim for coordination of benefits obtainable from other sources; and
- d. the right to collect from you any amount we have paid on your behalf to medical providers or any other parties in the event that you are found to be ineligible for coverage or that your claim is invalid or benefits are reduced in accordance with any provisions of this policy.

Deductible

The *Insurer* will pay eligible expenses for losses incurred in excess of the Deductible amount, as shown on *your Declaration Page*, per *Insured*, per covered condition or event.

If you have purchased a Vacation Package or Multi-Trip Vacation Package Plan, the Deductible will apply to each coverage included in the Package Plan.

No Deductible applies to the Non-Medical Vacation Package Plan or Trip Cancellation & Interruption Insurance if purchased separately.

All Deductible amounts are stated in U.S. currency.

General Terms of Agreement

Where Coverage is applicable:

Coverage is applicable worldwide, except in countries at war or countries where political instability or hostility renders the area inaccessible by *CAA Assistance* services. *You* may contact *CAA Assistance* prior to *your* departure to confirm coverage for *your trip* destination. Phone numbers are located on the inside front cover.

Payment of Benefits

All payments under this *policy* are payable to *you* or on *your* behalf. Benefits for loss of life are made to *your* estate.

You do not have the right to designate persons to whom for whose benefit insurance money is to be payable.

Any benefits paid will be payable in Canadian funds. Where benefits are payable in foreign currency, the rate of exchange is based on the rate effective on the date when the benefit is paid. No sum payable shall bear interest. All benefit limits indicated are in Canadian currency.

Rights of Subrogation

We have the right to proceed at our own expense in your name against third parties who may be responsible for giving rise to a claim under this policy or who may be responsible for providing indemnity or benefits similar to this insurance. We have full rights of subrogation. You will co-operate fully with us and not do anything to prejudice such rights. If you institute a demand or action for a covered loss, you shall immediately notify the Insurer so that the Insurer may safeguard its rights.

Co-ordination of Benefits

If, at the time of loss, you have insurance from another source, or if any other party is responsible for benefits also provided under this policy, the Insurer will pay eligible expenses only in excess of those covered by that other insurer or other responsible party, including credit cards, private or provincial auto plans or any other insurance, whether collectable or not. If, however, that other insurance is also "excess only", the Insurer will co-ordinate payment of all eligible claims with that other insurer. All co-ordination follows guidelines set by the Canadian Life and Health Insurance Association. In no case will the Insurer seek to recover against employment related plans if the lifetime maximum for all in-country and out-of-country benefits is \$100,000 or less. If your lifetime maximum is greater than \$100,000, the Insurer will co-ordinate benefits only above this amount.

General misrepresentation

You must be accurate and complete in your dealings with us at all times.

Misrepresentation of your health/medical information

This *policy* is issued on the basis of information in *your* application or provided in connection with *your* application (including answers to the *medical declaration*, if required). When completing the application and answering the medical questions, *your* answers must be complete and accurate. In the event of a claim, *we* will review *your* medical history. If any of *your* answers are found to be incomplete or inaccurate:

- vour coverage will be voidable
- which means your claim would not be paid

Misrepresentation of material facts other than *your* health/medical information

We will not pay a claim if you, any person insured under this policy or anyone acting on your behalf attempt to deceive us or makes a fraudulent, false or exaggerated statement or claim.

General Terms of Agreement

Arbitration

The *Insured(s)* and *Insurer* hereto agree that any dispute, controversy or claim arising out of or relating to this *policy*, including any question regarding its existence, interpretation, validity, breach, termination or claim made pursuant to it, shall be submitted to an arbitrator in the Canadian province or territory in which this *policy* was issued. The laws of the Canadian province or territory in which the *policy* was issued shall apply in the determination of any such dispute, controversy or claim. The decision of the arbitrator shall be final and no party may appeal the decision to any court.

Applicable Law

This *policy* of insurance is governed by the law of the Canadian province or territory of residence of the *Insured*. For Visitors to Canada Insurance, this *policy* of insurance will be governed by the law of the Canadian province or territory where this *policy* was issued.

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, Orion Travel Insurance Company will establish a "financial services file" from which this information will be used to process the application, offer and administer services and process claims relative to the insurance applied for.

Access to this file will be restricted to those Orion Travel Insurance Company 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, Orion Travel Insurance Company, 60 Commerce Valley Drive East, Thornhill, Ontario L3T 7P9, or by calling 1-800-268-3750 ext. 25043.

Dispute Resolution

At Orion Travel Insurance Company (Orion), we have a very defined escalation process to ensure that our customers have every possible recourse should underwriting, pricing, sales, claims or service issues arise. Our Customer Complaints office is in place to ensure the decision is fair, equitable and developed within company standards.

Orion is also a member of the General Insurance Ombudservice, an independent dispute resolution service. Customers are encouraged to first attempt to resolve their complaint directly with Orion before accessing the General Insurance Ombudservice.

You may contact our Customer Complaints Office by phone, fax, email or by regular post:

Attention: Customer Complaints Office Orion Travel Insurance Company 60 Commerce Valley Drive East Thornhill, Ontario L3T 7P9

Phone: 905-747-4900 Toll Free: 1-855-674-6684 Fax: 905-771-3357 Email: orioninfo@OrionTi.ca

Statutory Conditions

The Contract

The application, this *policy*, any document attached to this *policy* when issued, and any amendment to the contract agreed upon in writing after this *policy* is issued, constitute the entire contract, and no agent has authority to change the contract or waive any of its provisions.

Waiver

The *Insurer* shall be deemed not to have waived any condition of this contract, either in whole or in part, unless the waiver is clearly expressed in writing and signed by the *Insurer*.

Copy of Application

The *Insurer* shall, upon request, furnish to the *Insured* or to a claimant under the contract a copy of the application/*Declaration Page*

Material Facts

No statement made by the *Insured* at the time of application for this contract shall be used in defence of a claim under or to avoid this contract unless it is contained in the application or any other written statements or answers furnished as evidence of insurability.

Notice and Proof of Claim

The Insured, or a beneficiary entitled to make a claim, or the agent of any of them shall:

- a. give written notice of claim to the Insurer.
 - i. by delivery thereof, or by sending it by registered mail to CAA Assistance; or
 - ii. by delivery thereof to an authorized agent of CAA Assistance, not later than 30 days from the date a claim arises under the contract on account of an accident, sickness, injury or insured risk;
- b. within 90 days from the date a claim arises under the contract on account of an insured risk, furnish to CAA Assistance such proof as is reasonably possible in the circumstances of the happening of the accident or the commencement of the sickness or injury, and the loss occasioned thereby, the right of the claimant to receive payment, his or her age, and the age of the beneficiary; and
- c. if so required by CAA Assistance, furnish a satisfactory certificate as to the cause or nature of the insured risk for accident, sickness, injury or insured risk for which the claim may be made under the contract and as to the duration and/ or extent of loss.

Failure to Give Notice or Proof

Failure to give notice of claim or furnish proof of claim, within the time prescribed by this statutory condition, does not invalidate the claim if:

- a. the notice or proof is given or furnished as soon as reasonably possible and in no event later than one year from the date of the accident or the date the claim arises under the contract, on account of sickness or injury if it is shown that it was not reasonably possible to give notice or furnish proof within the time so prescribed; or
- b. in the case of death of the person *insured*, if a declaration of presumption of death is necessary, the notice or proof is given or furnished no later than one year after the date a court makes a declaration.

Insurer to Furnish Forms Proof of Claim

CAA Assistance, shall furnish forms for proof of claim within 15 days after receiving notice of claim, but where the claimant has not received the forms within that time, the claimant may submit his or her proof of claim in the form of a written statement

Statutory Conditions

of the cause or nature of the accident, *sickness*, *injury* or insured risk giving rise to the claim and of the extent of the loss.

Rights of Examination

As a condition precedent to recovery of insurance money under this contract:

- a. the claimant shall afford to the *Insurer* or *CAA Assistance*, as the case may be, an opportunity to examine the person of the person *Insured* when and so often as it reasonably requires while the claim hereunder is pending; and
- b. in the case of death of the person *Insured*, the *Insurer* or *CAA Assistance*, as the case may be, may require an autopsy subject to any law of the applicable jurisdiction relating to autopsies.

When Money Payable

All money payable under this contract shall be paid by the *Insurer* within 60 days after it has received proof of claim and all required documentation.

Limitation of Arbitration Proceedings

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 Limitations Act, 2002.

Insurance Act Statutory Conditions

Despite any other provision of this contract, this contract is subject to the statutory conditions in the Insurance Act respecting contracts of accident and sickness insurance.

This *policy* is effective March 1, 2020 and is underwritten by Orion Travel Insurance Company.



Questions about your policy?

Visit your nearest **CAA Branch**Call us at **1-800-263-7272**

Visit us online at www.caaniagara.ca/travelinsurance

Service Providers: 1-866-672-3651

Address: 535 Griswold Street, Ste 111-609 Detroit, MI 48226

Please contact *CAA Assistance* for emergency assistance, medical management, coordination of benefits and to arrange direct billing with a healthcare provider.





CAA Travel Insurance is underwritten by Orion Travel Insurance Company.

Certain exclusions, limitations and restrictions apply. Subject to change without notice.

©CAA trademarks are owned by, and use is granted by, the Canadian Automobile Association.

Orion trademark owned by, and use is granted by, Orion Travel Insurance Company.