

TRAVEL INSURANCE POLICY





IMPORTANT NOTICE

Read carefully before you travel

You purchased a travel insurance contract, now what? In your best interest, we would like you to understand what your policy covers, excludes and limits (a maximum payable amount may be applicable, for example).

Please take time to read through your policy before you travel. Italicized terms are defined in the "Definitions" section of 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 use this insurance, you must meet all the eligibility requirements.
- This insurance contains limitations and exclusions (e.g. *medical conditions* that are not *stable*, certain circumstances surrounding pregnancy and the birth of a child during a *trip*, excessive use of alcohol, and any *high-risk sports or activities*).
- This insurance may not cover claims related to *pre-existing medical conditions*, whether disclosed or not at time of policy purchase.
- Contact *Blue Cross Travel Assistance* before seeking *treatment* or your claim may be 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 **1-877-986-7681**.

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INSURANCE CONTRACT

Your insurance contract consists of the insurance policy and your *insurance certificate*. **These documents contain clauses which may limit the amounts payable. We recommend that you read these documents carefully.**

INSURANCE POLICY

Your insurance policy (including endorsements, if applicable) specifies the conditions, limitations, and exclusions of your insurance coverage.

INSURANCE CERTIFICATE

Your *insurance certificate* indicates, whether at the time of purchase or after a modification request, the product, coverages, and services provided by the contract that you purchased, the dates of coverage, the *deductible* chosen (if applicable), as well as particular *medical conditions* specifically excluded from your contract. **Make sure to notify us of any element indicated on your *insurance certificate* that does not correspond with what you stated when purchasing insurance.**

WHEN TO CONTACT US

IN CASE OF EMERGENCY WHILE TRAVELLING

In the event of an emergency during a *trip*, immediately contact *Blue Cross Travel Assistance*.

The numbers for reaching us can be found on the last page of this insurance contract and on your insurance certificate.

Emergency Medical Care coverage:

Contact *Blue Cross Travel Assistance* **BEFORE** visiting a *hospital* or clinic, otherwise your claim may be denied.

Trip Cancellation or Interruption coverage:

Notify *Blue Cross Travel Assistance* within 48 hours of becoming aware of an event that results in the cancellation or modification of a covered *trip*.

Baggage coverage:

In the event of delay, theft, vandalism, or loss of your baggage, you must notify *Blue Cross Travel Assistance* as soon as possible so that we can advise you of the procedure to follow.

For any questions related to a claim, refer to the "To submit a claim" section of this policy.

TO HELP YOU UNDERSTAND THIS POLICY

- Usage of ***bold italics*** indicates names of products, coverages or optional protections.
- Usage of *italics* indicates terms that are defined in the "Definitions" section.
- "**We**" and "**Our**" refer to the *insurer*.
- "**You**" and "**Your**" refer to the *insured person*.
- "**Province**" includes territories.

INSURANCE ELIGIBILITY

To be eligible for insurance, you must meet the following conditions:

Conditions applicable to people of all ages:

- Be a Canadian resident
- Be covered under the *Health and Hospital Insurance Acts* of your province of residence for the entire duration of your *trip*
- Be over 30 days old on the departure date of your *trip*

Conditions applicable only to people aged 55 and over:

In addition to the conditions set out above, if you are 55 years old or over, **you must not:**

1. Have received medical advice not to travel
2. Suffer from a *medical condition* in a *terminal stage*
3. Suffer from kidney failure treated with dialysis
4. Have been diagnosed with or treated for metastatic cancer in the past 5 years
5. Have been prescribed or treated with home oxygen in the past 12 months

YOU ARE INSURED IF

- ✓ The insurance was purchased before the departure date of the *trip*.
- ✓ The insurance was purchased for the entire duration of the *trip*, including the departure date and the return date.
- ✓ The premium was paid in full before the *effective date of the contract*.
- ✓ You meet the criteria of the "Insurance eligibility" section.
- ✓ Your name appears in the "Covered persons" section of the *insurance certificate*.

PRODUCTS

Blue Cross travel insurance proposes various coverage combinations, as shown in the products table below.

Types of trips	Offered products		COVERAGES				SERVICES
			Emergency Medical Care	Trip Cancellation or Interruption	Accidental Death or Dismemberment	Baggage	Blue Cross Travel Assistance
Single-trip solutions	Individual	To obtain only the coverages that you would like	+	+	*	*	✓
	Package Plus	A combination of our most popular coverages for a <i>trip</i> anywhere in the world	Choose at least one of these coverages		✓	✓	✓
	Canada Package	A combination of our most popular coverages for a <i>trip</i> made exclusively in Canada	✓	+	✓	✓	✓
Multi-trip solutions	Annual Medical	For those who travel more than once a year and for frequent travellers	Combinable for comprehensive coverage	✓			✓
	Annual Package Option				✓	✓	✓

✓ Included

+ Optional

* To purchase this coverage, choose the **Emergency Medical Care** and/or **Trip Cancellation or Interruption** coverage

Single-trip solutions

INDIVIDUAL

Allows you to select one or many coverages to meet your specific needs.

The maximum coverage amount per person is as follows:

Coverages	Maximum coverage per person
Emergency Medical Care	\$5,000,000 (optional <i>deductible</i>)
Emergency Medical Care in Canada	\$5,000,000 (optional <i>deductible</i>)
Trip Cancellation or Interruption	According to the amount indicated on the <i>insurance certificate</i>
Accidental Death or Dismemberment*	\$300,000, depending on <i>age</i> and circumstances
Baggage*	\$1,500

* Available only in combination with the **Emergency Medical Care**, **Emergency Medical Care in Canada** or **Trip Cancellation or Interruption** coverages.

Your selected coverages are indicated on your *insurance certificate*.

Blue Cross Travel Assistance services are included with this product.

PACKAGE PLUS

Allows you to choose a combination of our most popular coverages for a *trip* anywhere in the world.

	Without Emergency Medical Care	Without Trip Cancellation or Interruption	All inclusive
Coverages			
Emergency Medical Care		✓	✓
Trip Cancellation or Interruption	✓		✓
Accidental Death or Dismemberment	✓	✓	✓
Baggage	✓	✓	✓
Services			
Blue Cross Travel Assistance	✓	✓	✓

Depending on the combination chosen, your selected coverages are indicated on your *insurance certificate*.

The maximum coverage amount per person is as follows:

Coverages	Maximum coverage per person
Emergency Medical Care	\$5,000,000 (optional <i>deductible</i>)
Trip Cancellation or Interruption	According to the amount indicated on the <i>insurance certificate</i>
Accidental Death or Dismemberment	\$300,000, depending on <i>age</i> and circumstances
Baggage	\$1,500

CANADA PACKAGE

Allows you to choose a combination of our most popular coverages for a *trip* made exclusively in Canada.

	Without Trip Cancellation or Interruption	All inclusive
Coverages		
Emergency Medical Care in Canada	✓	✓
Trip Cancellation or Interruption		✓
Accidental Death or Dismemberment	✓	✓
Baggage	✓	✓
Services		
Blue Cross Travel Assistance	✓	✓

Depending on the combination chosen, your selected coverages are indicated on your *insurance certificate*. The maximum coverage amount per person is as follows:

Coverages	Maximum coverage per person
Emergency Medical Care in Canada	\$5,000,000 (optional <i>deductible</i>)
Trip Cancellation or Interruption	According to the amount indicated on the <i>insurance certificate</i>
Accidental Death or Dismemberment	\$300,000, depending on <i>age</i> and circumstances
Baggage	\$1,500



NOTICE

Leaving Canada during the *coverage period* renders the **Canada Package** contract invalid in its entirety.

Multi-trip solutions

ANNUAL

Allows you to insure yourself for all *trips* taken outside of your province of residence for one year.

During that year, every *trip* that meets the following criteria will be covered, provided:

- Its duration does not exceed the chosen *maximum stay* of 4, 8, 17, 31, 60, 90, 120, 150 or 180 days per *trip*
- Its departure date and return date are included within the *coverage period*

If one of your *trips* exceeds the *maximum stay* of your **Annual**, the coverage must be extended to cover the entire duration of the *trip*.

There are three possible combinations for this product:

	Annual Medical	Annual Package Option	Annual Medical and Package Option
Coverages			
Emergency Medical Care	✓		✓
Trip Cancellation or Interruption		✓	✓
Accidental Death or Dismemberment		✓	✓
Baggage		✓	✓
Services			
Blue Cross Travel Assistance	✓	✓	✓

Depending on the combination chosen, your selected coverages are indicated on your *insurance certificate*.

The maximum coverage amount per person and per *trip* is as follows:

Coverages	Maximum coverage per person
Emergency Medical Care	\$5,000,000 maximum (optional <i>deductible</i>)
Trip Cancellation or Interruption	Choice between \$1,500, \$2,000, \$2,500 or \$5,000 per <i>trip</i>
Accidental Death or Dismemberment	\$300,000, depending on <i>age</i> and circumstances
Baggage	\$1,500



NOTICE

The **Annual** exclusively covers *trips* taken outside of your province of residence.

Specific provisions of the Annual product

The following conditions are added to the conditions, limitations, and exclusions specific to the coverages included in the **Annual**.

1. Age limit

To purchase or renew the **Annual**, you must be:

- 85 years old or under for *maximum stays* of 4, 8, 17, 31, 60, 90 or 120 days
- 80 years old or under for *maximum stays* of 150 or 180 days

2. Contract duration

The insurance is in force for a period of one year from its effective date. There is no limit to the number of *trips* made during the *coverage period*.

3. Birth of a child during the coverage period

In a single-parent or family plan, a child of the *contract holder* or their *spouse* who is born after the *effective date of the contract* becomes automatically insured as soon as they meet the conditions of the definition of *dependent child*.

4. Contract nearing expiry

We will issue a notice 30 days before the *contract expiry date*. It will provide information on how to renew or replace your **Annual** contract that is nearing expiry.

Renewal notice

If you receive a renewal notice, it means that we are offering to renew your contract for another year. To confirm the renewal, you have to:

- Pay the premium determined for the new year of insurance
- Meet the eligibility criteria in effect at the time of renewal

We reserve the right to change the conditions of your **Annual** contract at the time of renewal.

If you do not renew your **Annual** before the *contract expiry date*, the coverage will end on the *contract expiry date* indicated on the *insurance certificate*.

Expiry notice

If you receive an expiry notice, it means that the contract cannot be renewed. However, you can purchase a new contract to meet your needs, depending on the products available at that time.

The coverage will end on the *contract expiry date* indicated on the *insurance certificate*.



EMERGENCY MEDICAL CARE COVERAGE



The **Emergency Medical Care** coverage protects you from financial implications that may arise from medical services or care you receive during your *trip*.

If you have purchased the **Emergency Medical Care** coverage, make sure to read this section carefully. Some expenses or *medical conditions* are excluded from the coverage.

Covered destination(s)

The **Emergency Medical Care** coverage is available in two versions:

Versions	Authorized destination(s)
Emergency Medical Care	Valid for <i>trips</i> taken anywhere in the world, including Canada
Emergency Medical Care in Canada	Valid for <i>trips</i> taken entirely within Canadian borders

Make sure to consult your *insurance certificate* to know which of the two versions you have purchased.

Specific coverage provisions

To the "General provisions applicable to all coverages", the following are added:

1. Supporting documents

To submit a claim, you will be required to provide us with one or more of the following documents:

- A duly completed claim form
- A medical certificate issued by the *physician* who treated you at your destination and which certifies that the services being claimed have been provided or that the *medical emergency* occurred
- Receipts and proof of payment for the medical care and services provided
- The itemized billing for the care and services provided
- Proof of your travel dates

2. Settlement between insurer and service provider

When a claim is the subject of a direct agreement between us and the service provider you have dealt with, you must provide any original documents required for payment of this claim, including the travel insurance claim form. Otherwise, you become responsible for the amounts owing or the amounts that we are unable to recover.

Failure to provide the required proof will result in the denial of your claim.

IN CASE OF A MEDICAL EMERGENCY WHILE TRAVELLING



Your state of health permitting, when a *medical emergency* occurs during a *trip*, you must inform *Blue Cross Travel Assistance* **before** going to a *hospital* or to a *clinic*, otherwise, your claim may be denied. This gives us an opportunity to:

- Confirm your coverage
- Pre-approve a *treatment*

If you are unable to call the assistance service yourself because of your state of health, a relative or a member of the medical staff must do so on your behalf within **24 hours** following the start of the *medical emergency*. Therefore, we strongly recommend you keep your contract number and our telephone number easily accessible in the event you need to reach us due to an emergency.

The numbers for reaching us can be found on the last page of this insurance policy and on your insurance certificate.

Beginning and end of coverage

Coverage versions	Effective date	Termination date
Emergency Medical Care	The coverage becomes effective at the latest of the following dates: <ul style="list-style-type: none"> • The <i>effective date of the contract</i> indicated on your <i>insurance certificate</i>, or • The departure date of the <i>trip</i>. 	The termination date of the <i>Emergency Medical Care</i> corresponds to the <i>contract expiry date</i> indicated on your <i>insurance certificate</i> . If your return takes place before the <i>contract expiry date</i> , the termination date of the coverage becomes the return date of the <i>trip</i> , whether the return is planned or premature (except for the "Trip break" - see page 36).
Emergency Medical Care IN CANADA		The termination date of the <i>Emergency Medical Care in Canada</i> corresponds to the <i>contract expiry date</i> indicated on your <i>insurance certificate</i> . If your return takes place before the <i>contract expiry date</i> , the termination date of the coverage becomes the return date of the <i>trip</i> , whether the return is planned or premature (except for the "Trip break" - see page 36). Leaving Canada during the <i>coverage period</i> renders the coverage invalid in its entirety.



What is covered

Each *insured person* on the contract is covered up to a maximum of \$5,000,000 per *trip*.

This coverage pays for *customary and reasonable expenses* incurred as a result of a *medical emergency* arising from an *accident* or an *illness* that occurs during the course of your *trip*, during the *coverage period*.

Eligible *treatments* are those declared *urgent* and necessary for the stabilization of your *medical condition*. The benefits provided under the contract are granted in addition to and not in replacement of government programs: what is reimbursable by the government is not reimbursed by the *insurer*.

If a *deductible* amount appears on your *insurance certificate*, the benefits for this coverage are granted once this *deductible* is paid.



NOTICE

Failure to contact *Blue Cross Travel Assistance* before a medical consultation or *hospitalization* as a result of an *accident* or *illness* could result in the denial of your claim.

Benefits

Hospitalization, medical and paramedical expenses

Hospitalization	<i>Hospitalization</i> costs in a semi-private or private room.
Physicians	The difference between the fees charged by a <i>physician</i> who treats you at your destination and the benefits allowed under government programs.
Nurses	Fees for the private care of a licensed practical nurse (not your relative) during the period of <i>hospitalization</i> , when this care is medically required and prescribed by the <i>physician</i> treating you at your destination.
Health professional services	The fees of the following legally authorized health professionals, when such care is medically required and approved by <i>Blue Cross Travel Assistance</i> , up to a maximum of \$400 per profession, per <i>trip</i> : <ul style="list-style-type: none"> - Physiotherapist - Osteopath - Chiropractor - Podiatrist or chiropodist (combined) <i>Urgent</i> dermatological care offered in an outpatient clinic is also covered up to a maximum of \$400 per <i>trip</i> .
Tests and diagnostics	The costs of laboratory tests and X-rays when they are prescribed by the <i>physician</i> treating you at your destination for diagnostic purposes.
Prescribed medication as part of emergency treatment	The cost of purchasing medication prescribed by the <i>physician</i> treating you at your destination, except when required for the continuous stabilization of a chronic <i>medical condition</i> .
Medical devices	The cost of buying or renting crutches, canes, or splints, the cost of renting wheelchairs, orthopaedic devices or other medical devices, when prescribed by the <i>physician</i> treating you at your destination.
Incidental expenses	The expenses inherent in a <i>hospitalization</i> (telephone, television, parking, etc.), upon submission of supporting documents, up to \$100 per day, maximum \$500 per <i>hospitalization</i> .



Emergency dental treatment

The fees of a dental surgeon for dental care required as a result of external trauma (not as a result of the voluntary introduction of food or of an object into the mouth), only when there is damage to natural and healthy teeth or for reduction of fracture or dislocation of the jaw, up to \$2,000 per *accident* and per *insured person*. In all cases, the *treatment* must begin during the term of the contract and end within 6 months of the date of the *accident*. In addition, you must send us an X-ray, taken after the *accident* but before the *treatment* begins, demonstrating the suffered damage.

For all other emergency dental *treatments*, except root canal therapy, the fees of a dental surgeon up to \$500 per *trip* and per *insured person*.

Transportation expenses

Ambulance or taxi service

Ground or air transportation costs to get you to the nearest suitable medical facility, as well as transfer costs between *hospitals* when the *physician* treating you at your destination and *Blue Cross Travel Assistance* determine that available facilities are inadequate.

Repatriation to your province of residence

When, because of an *illness* or *accident*, *Blue Cross Travel Assistance* authorizes your repatriation, the following expenses are covered:

- **Costs related to your medical repatriation**

The costs related to a means of transportation deemed adequate by the *insurer*, so that you are repatriated to your province of residence to receive immediate medical care, after receiving authorization from the *physician* treating you at your destination.

- **Costs related to the repatriation of your travelling companion or an immediate family member**

The costs for the simultaneous repatriation of your *travelling companion*, or any *immediate family member*, who is also covered under this travel insurance policy, if this person cannot return to their point of departure by the means of transportation initially planned for the return.

- **Costs for an accompanying person**

The costs of hiring an accompanying person for the return of children covered under this contract when necessary.

- **Baggage return costs**

Up to a maximum of \$500 for excess costs related to the return of your baggage.

- **Pet return costs**

Up to a maximum of \$500 for the cost of returning your pet.



Transportation expenses to visit or identify the insured person	<p>Some expenses are reimbursed if a <i>family member</i> or a friend not travelling with you must:</p> <ol style="list-style-type: none">Get to the <i>hospital</i> where you are hospitalized for a period of at least 3 days (the need for this visit must be certified in writing by the <i>physician</i> treating you at your destination), orGet to the destination, if necessary, for the purpose of identifying the remains of the <i>insured person</i> <p>The <i>insurer</i> agrees to reimburse the following expenses for one designated person:</p> <ul style="list-style-type: none">- The total round-trip transportation costs in economy class by the least expensive route- Up to \$1,200 for:<ul style="list-style-type: none">• Childcare, accommodation, and meals in a commercial establishment, up to a maximum of \$300 per day• The cost for purchasing our travel insurance
Additional transportation expenses	<p>Some additional transportation expenses are reimbursed when you or a <i>travelling companion</i> covered under this policy must postpone your/their return by <i>public transportation</i> due to:</p> <ol style="list-style-type: none">A <i>hospitalization</i> not requiring repatriation, if this <i>hospitalization</i> must continue beyond your scheduled return date, orA <i>medical emergency</i> not requiring repatriation, if this <i>medical emergency</i> is ongoing during the 48 hours preceding your scheduled return date and if <i>Blue Cross Travel Assistance</i> determines that you are unable to travel because of this <i>medical emergency</i> <p>The <i>insurer</i> agrees to reimburse one of the following costs, up to a maximum of \$500 per <i>trip</i> and per <i>insured person</i>:</p> <ul style="list-style-type: none">- Additional transportation costs caused by a date or a schedule change of the initial return ticket, or- The purchase of a return ticket by the same means of <i>public transportation</i>, in economy class, allowing you to return to your province of residence once the <i>medical emergency</i> has ended if it is established that the date of the initial return ticket cannot be changed
Expenses for the return or disposal of remains	<p>In the event of death, the following expenses are covered up to \$10,000:</p> <ul style="list-style-type: none">- The cost of preparing the remains and returning them to the point of departure in the province of residence, excluding the cost of the coffin, or- The cost of cremation or burial on site, excluding the cost of the urn, coffin, tombstone, and any other related products or services
Vehicle return expenses	<p>The <i>insurer</i> agrees to reimburse up to \$5,000 for the cost of returning your personal road vehicle to your residence or rental vehicle to the nearest appropriate rental agency when an <i>illness</i> or <i>accident</i> renders you incapable of:</p> <ol style="list-style-type: none">Returning to your residence using the personal road vehicle you used to get to your destination, orReturning the rented vehicle to the nearest rental agency <p>In all cases, you must present a medical certificate issued by the <i>physician</i> treating you at your destination in the locality where your inability to use the vehicle is determined.</p>



The return of the vehicle must be carried out by a commercial agency or another person designated and authorized by *Blue Cross Travel Assistance*, otherwise only the following additional *customary and reasonable expenses* are reimbursable, subject to the submission of official receipts:

- Air transportation to reach the vehicle to be returned (economy class)
- Meals
- Accommodation in a commercial establishment

Subsistence allowance

Expenses for subsistence allowance

The *insurer* agrees to reimburse a maximum of \$300 per day per *insured person*, up to \$3,000 for the following expenses:

- Accommodation costs in a commercial establishment
- Meals
- Essential phone calls
- Taxi transportation
- Childcare costs for *dependent children* who accompany you on the *trip*

These expenses will be reimbursed only when it has been determined by the *insurer* that you must postpone your return as a result of:

- a) An *illness* or an *accident* that you experience, or
- b) An *illness* or an *accident* that an *immediate family member* who is accompanying you experiences, or
- c) An *illness* or an *accident* that a *travelling companion* experiences

Medical follow-up in Canada

Expenses for medical follow-up in Canada further to a repatriation

When you are repatriated at the *insurer's* expense further to a *hospitalization* that occurred during a *trip* outside of your province of residence, we agree to reimburse the following expenses when incurred within 15 days of your repatriation:

- Up to \$1,000 for the cost of staying in a semi-private room in a *hospital* or a convalescent and physical rehabilitation centre
- Up to \$50 per day, maximum 10 days, for the fees of a licensed practical nurse or orderly from a specialized agency when care is required at your home
- Up to \$150 for the cost of renting the following medical equipment: crutches, standard walker, canes, trusses, orthopaedic corsets, and oxygen
- Up to \$250 for transportation (ambulance and taxi) costs incurred to receive care

Limitations and reductions of coverage

Benefit paid under Trip Cancellation or Interruption coverage

When the *additional transportation expenses* benefit is also payable under the ***Trip Cancellation or Interruption*** coverage, the fees are then covered under the ***Trip Cancellation or Interruption*** coverage only.



WARNING – EXCLUSIONS



A) Exclusions due to pre-existing medical conditions

No amount is payable, under the terms of this coverage, if the loss sustained or the costs incurred result directly or indirectly from one of the following causes:

For people aged 54 and under, during the 3 months preceding the effective date of coverage:

- a) Any *medical condition* that affects you and that is not *stable*, except for a *minor ailment*
- b) Any heart condition for which you have used nitroglycerin more than once in a 7-day period for the relief of chest pain
- c) Any pulmonary condition for which you have been treated with home oxygen or have required corticosteroid therapy

For people aged 55 to 59 travelling less than 18 days, during the 6 months preceding the effective date of coverage:

- a) Any *medical condition* that affects you and that is not *stable*, except for a *minor ailment*
- b) Any heart condition for which you have used nitroglycerin more than once in a 7-day period for the relief of chest pain
- c) Any pulmonary condition for which you have been treated with home oxygen or have required corticosteroid therapy

For people aged 55 to 59 travelling 18 days or more and for people aged 60 or over:

A) The following specific *medical conditions* are excluded unless the *insurance certificate* stipulates otherwise:

- a) **During your life**, any *illness* which relates to one of the following *medical conditions* for which you have been diagnosed or treated:

i) Cardiovascular condition

- | | | | |
|-------------------|----------------------------|-------------------------|-------------------------------------|
| - Angina | - Bypass | - Defibrillator | - Pacemaker |
| - Angioplasty | - Cardiomyopathy | - Myocardial infarction | - Pulmonary hypertension |
| - Aortic aneurysm | - Congestive heart failure | (Heart attack) | - Valvulopathy or valve replacement |
| - Arrhythmia | | - Myocarditis | |

ii) Transplant of one of the following organs:

- | | | |
|---------------|---------|------------|
| - Bone marrow | - Liver | - Pancreas |
| - Heart | - Lung | |

- b) **During the 24 months preceding the effective date of coverage:**

- **Any chronic pulmonary condition** (chronic obstructive pulmonary disease (COPD), asthma, emphysema, chronic bronchitis or pulmonary fibrosis) for which you have been hospitalized or prescribed any type of corticosteroid tablet, including prednisone
- Any treatment or diagnosis of **kidney failure**

- c) **During the 12 months preceding the effective date of coverage**, any *illness* which relates to one of the following conditions:

- **Cancer** (except for basal cell carcinoma, squamous cell skin cancer or breast cancer treated only with hormone therapy) for which you have been diagnosed or treated
- **Gastrointestinal condition** (cirrhosis, hepatitis C, intestinal obstruction, diverticulitis, Crohn's disease, pancreatitis, ulcerative colitis) for which you have been diagnosed or treated



B) Also excluded when occurring during the **6 months preceding the effective date of coverage**:

- i) Any *medical condition* that affects you and that is not *stable*, except for a *minor ailment*
- ii) Any heart condition for which you have used nitroglycerin more than once in a 7-day period for the relief of chest pain
- iii) Any pulmonary condition for which you have been treated with home oxygen or have required corticosteroid therapy

If you choose to make use of the "Trip break" (see page 35)

Any *medical condition* that affects you and that is not *stable* in the **3 months** (if you are 54 years of age or under) or in the **6 months** (if you are 55 years of age or more) preceding the date of return to your destination.

B) Other exclusions

No amount is payable, under the terms of this coverage, if the loss suffered or costs incurred result directly or indirectly from one of the following situations:

1. Treatment received without approval from Blue Cross Travel Assistance

- a) Costs incurred during a medical consultation or *hospitalization* when you failed to communicate with *Blue Cross Travel Assistance* in advance, as mentioned in the "In case of a medical emergency while travelling" section of this coverage.
- b) Costs incurred as a result of a situation where you chose to receive a *treatment* or undergo surgery without receiving prior approval from *Blue Cross Travel Assistance* and/or when we do not consider such care to be *urgent*.
- c) Once your *treatment* has started, costs incurred when you failed to communicate with *Blue Cross Travel Assistance* to assess and approve any additional *treatment*.
- d) Fees exceeding \$10,000 for emergency air evacuation to the nearest suitable medical facility, when transportation has not been scheduled by *Blue Cross Travel Assistance*.

2. Foreseeable treatment

Costs related to a *medical condition* for which it is expected that, or it is reasonable to believe that, *treatments* will be required during the *trip*.

3. Pending treatment or failure to comply with a prescribed treatment

A condition for which medical advice has not been followed or investigations, *treatments*, examinations, or recommended interventions have not been carried out.

4. Non-urgent, experimental, or optional treatment

No benefit will be paid for a non-*urgent*, experimental, or optional *treatment*. For example, the costs of the following consultations or *treatments* are excluded:

- *Routine check-ups*
- Any *treatments* required for the continuous stabilization of a chronic *medical condition*, including the renewal of a prescription
- Aesthetic care or *treatment*
- Rehabilitation care
- Convalescent care
- Care given for the convenience of the patient
- Clinical research
- Experimental drugs

The mere fact that *treatments* provided in your province of residence are of inferior quality or take longer to obtain than those which can be obtained outside your province of residence does not constitute, within the meaning of this exclusion, a *medical emergency*.



5. Continued treatment once the medical emergency is over

Continuing a *treatment* if we determine that the *medical emergency* is over.

6. Treatment received further to your transfer or repatriation refusal

If we determine that you should be transferred to another facility or that you must be repatriated to receive *treatment*, and you choose not to consent, no benefit will be paid for this *treatment* or for subsequent *treatments* related to this *medical condition*.

7. Abusive or unreasonable billing

Any invoiced amount that is not considered a *customary and reasonable expense*.

8. Trip without continuous coverage from a public health insurance plan

No benefits will be paid if you are not covered under the *Health and Hospital Insurance Acts* of your province of residence for the entire duration of your *trip*. It is your responsibility to ensure that you have such coverage.

9. Treatments not covered under government programs

Treatments received outside your province of residence and that are not insured under government programs.

10. Medical expenses incurred after an extension

Expenses incurred during the extension period of your contract if they are linked to a *medical condition* that occurred during the *coverage period* preceding your extension request.

11. Expenses incurred during a "Trip Break"

Expenses incurred during days spent in your province of residence while the "Trip break" is ongoing.

12. Trip undertaken for medical purposes

No benefits will be paid if your *trip* is undertaken for the purpose of receiving a diagnosis, a *treatment*, surgery, a medical assessment, palliative care, or any other form of therapy.

13. Pregnancy, childbirth, or related complications

a) Expenses related to routine prenatal and postnatal care.

b) Expenses related to pregnancy, childbirth, or their complications:

- When the care required results from a *high-risk pregnancy*, or
- When care is required during the 9 weeks preceding or following the expected delivery date

14. Child born during the trip

When the expenses related to your pregnancy are excluded, care or *treatment* provided to your child born during the *trip* is also excluded.

15. Mental health disorders

Any *medical condition* resulting from a mental health or psychiatric disorder unless you must be hospitalized for this condition.

16. Suicide and intentional injury

Suicide, attempted suicide, or intentional injury, whether it is due to a psychological disorder or not.

17. Use of alcohol, drugs, and other intoxicating substances

Any *medical condition* resulting from or in any way related to:

- Your chronic use of alcohol, drugs, or other intoxicating substances, including withdrawal symptoms
- Your excessive use of alcohol, drugs, or other intoxicating substances
- Driving a motor vehicle while you are impaired by any drug, whether it is legal or not, or with a blood alcohol level greater than 80 mg per 100 ml of blood (0.08).

18. Illegal act

Your participation in any criminal or illegal act or any attempt to commit such acts, under any law.

19. Act of war and civil unrest

Costs related to:

- Any act of war, whether war is declared or not
- A revolt
- A revolution
- Your voluntary participation in a riot or insurrection.

20. High-risk sports or activities

Any *medical condition* resulting from your participation in *high-risk sports or activities*.

TRIP CANCELLATION OR INTERRUPTION COVERAGE

When a sufficiently serious event directly affects you or your *travelling companion* and forces you to cancel, interrupt, extend, or modify the planned *trip*, the **Trip Cancellation or Interruption** coverage can cover the following:

- Insured *travel expenses*
- New occupancy charges when a *travelling companion* withdraws from the *trip*
- Additional transportation expenses
- Vehicle return expenses
- Expenses for the return or disposal of remains
- Subsistence allowance

If you have purchased this coverage, make sure to read the following carefully. The benefits offered vary according to your choice of protection and are subject to exclusions and limitations.



NOTICE

Coverage purchased with or without insured travel expenses

If this coverage appears on your *insurance certificate* and you have chosen to insure the prepayments of your travel expenses, the maximum insured amount will be indicated on the "Trip Cancellation" line. You therefore have access to all the benefits included in this coverage.

If this coverage appears on your *insurance certificate*, but you have chosen not to insure the prepayments of your travel expenses, the amount that will be indicated on the "Trip Cancellation" line will be zero dollars (\$0). You therefore have access to the following benefits only: additional transportation expenses, expenses for the return or disposal of remains, vehicle return expenses and subsistence allowance.

Specific coverage provisions

To the "General provisions applicable to all coverages", the following is added:

Supporting documents

When submitting a claim, you will be required to provide us with one or more of the following documents:

- A duly completed claim form
- A medical certificate giving a full diagnosis, issued by the *physician* who treated you where the *medical condition* occurred. Depending on the case, medical supervision must have begun before the scheduled departure date or return date of the *trip*
- A supporting document (for example, a letter from the airline, a police report, or a loss report) confirming that a sufficiently serious, unforeseen, and non-excluded event is the cause of your claim
- Receipts and proof of payment of your *travel expenses*
- The following original or electronic documents:
 - The unused transportation ticket
 - The original invoice from your *travel provider*
 - Official receipts for your new return transportation
 - Any proof of reimbursement or credit received from your *travel provider*

Failure to provide the required proof will result in your claim being denied.

IN CASE OF TRIP CANCELLATION, INTERRUPTION, OR MODIFICATION

When a covered event occurs, you must contact *Blue Cross Travel Assistance* within the following 48 hours so we can advise you of the procedure to follow.



**The numbers for reaching us can be found on the last page of this insurance policy
and on your insurance certificate.**

Beginning and end of coverage

With or without insured travel expenses	Effective date	Termination date
<p>You have chosen TO INSURE the <i>prepayments</i> of your <i>travel expenses</i> before the departure date.</p>	<p>When a <i>prepayment</i> has already been made, the coverage takes effect on the date the contract is purchased.</p> <p>When the contract purchase date is earlier than that of a <i>prepayment</i>, the coverage takes effect on the date of your first <i>prepayment</i> for this <i>trip</i>.</p> <p>Under the Annual, the coverage takes effect on the date the contract is purchased when the first <i>prepayment</i> has already been made for a given <i>trip</i>. For any <i>trip</i> booked after the contract purchase date, the coverage takes effect on the date of the first <i>prepayment</i> for that <i>trip</i>.</p>	<p>The termination date of the coverage corresponds to the <i>contract expiry date</i> indicated on your <i>insurance certificate</i>.</p> <p>If your return takes place before the <i>contract expiry date</i>, the termination date of the coverage becomes the return date of the <i>trip</i>, whether the return is planned or premature (except for the "Trip break").</p>
<p>You have chosen NOT TO INSURE the <i>prepayments</i> of your <i>travel expenses</i>.</p>	<p>The coverage takes effect on the departure date of the <i>trip</i>.</p> <p>Under the Annual, the coverage takes effect on the departure date of each <i>trip</i>.</p>	

What is covered

This coverage includes the benefits described below when an *accident*, *illness*, or any other event:

- Directly affects you, or
- Directly affects your *travelling companion*

The *accident*, *illness*, or event in question must meet all the following criteria:

- a) Be fortuitous and unforeseen on the date the coverage takes effect
- b) Be out of the affected person's control
- c) Be serious enough to require you to cancel, interrupt, extend, or modify the planned *trip*

Coverage purchased with or without insured travel expenses

It is possible to purchase this coverage and to insure:

- All the *prepayments* of your *travel expenses*, or
- A portion of the *prepayments* of your *travel expenses*, or
- No *travel expenses*

If the amount indicated on the "Trip Cancellation" line of your *insurance certificate* corresponds to zero dollars (\$0), it means that you have chosen not to insure your *travel expenses*. Therefore, only the benefits provided for additional transportation expenses, expenses for the return or disposal of remains, vehicle return expenses and subsistence allowance are covered.



	You have chosen to insure your travel expenses	You have chosen NOT to insure your travel expenses
Benefits included in the coverage		
Insured travel expenses	✓	
New occupancy charges	✓	
Unused portion of insured travel expenses	✓	
Additional transportation expenses	✓	✓
Expenses for the return or disposal of remains	✓	✓
Vehicle return expenses	✓	✓
Subsistence allowance	✓	✓

Benefits

Benefits paid in case of trip cancellation (BEFORE the trip)	
Insured travel expenses	The <i>insurer</i> agrees to reimburse your insured and non-refundable <i>travel expenses</i> when you cannot make the planned <i>trip</i> .
New occupancy charges when a travelling companion withdraws from the trip	The <i>insurer</i> agrees to reimburse the additional new occupancy charges you incur when you go on the <i>trip</i> as planned after a <i>travelling companion</i> withdraws from going.

Benefits paid in case of trip interruption or modification (DURING the trip)	
Unused portion of insured travel expenses	The <i>insurer</i> agrees to reimburse the unused and unreplaced portion of insured <i>travel expenses</i> when you miss a portion of the planned <i>trip</i> .
Additional transportation expenses	The <i>insurer</i> agrees to reimburse all extra costs associated with economy class transportation (including schedule change costs) so that you may get to your destination or return to your departure point when you must interrupt, extend, or modify the planned <i>trip</i> .
Expenses for the return or disposal of remains	In the event of death of the <i>insured person</i> , the following expenses are covered up to \$10,000: a) The cost of preparing the remains and returning them to the point of departure in the province of residence, excluding the cost of the coffin, or b) The cost of cremation or burial on site, excluding the cost of the urn, coffin, tombstone, and any other related products or services



Vehicle return expenses

The *insurer* agrees to reimburse up to \$5,000 for the cost of returning your personal road vehicle to your residence or rental vehicle to the nearest appropriate rental agency when you are unable to:

- a) Return to your residence with the personal road vehicle you used to get to your destination, or
- b) Return the rented vehicle to the nearest rental agency

The return of the vehicle must be carried out by a commercial agency or another person designated and authorized by *Blue Cross Travel Assistance*, otherwise only the following additional *customary and reasonable expenses* are reimbursable, on the condition that official receipts are submitted:

- Air transportation (economy class) to reach the vehicle to be returned
- Meals
- Accommodation in a commercial establishment

Subsistence allowance

The *Insurer* agrees to reimburse up to \$300 per day per *insured person*, maximum \$3,000, for the following expenses:

- Accommodation in a commercial establishment
- Meals
- Essential phone calls
- Taxi transportation
- Childcare costs for *dependent children* who accompany you on a *trip*

These costs are reimbursed if they are incurred after the departure date of the *trip*:

- a) As a result of an itinerary or schedule change to your planned *trip* to get to your destination, or
- b) During the transportation period to return to your departure point when you are unable to return by the planned means, or
- c) During the period the planned *trip* is extended

Limitations and reductions of coverage

1. Coverage of your travel expenses

The coverage amount mentioned on the "Trip Cancellation" line of your *insurance certificate* represents the authorized reimbursement limit.

Any claim will be limited to the portion of the *travel expenses* that is not refundable on the date of the event requiring you to cancel, interrupt, extend, or modify the planned *trip*.

If you have chosen to insure only a portion of your *travel expenses*, the following benefits are reduced proportionally to the amount of insurance purchased in comparison to the sum of all *prepayments* made for this *trip*:

- Unused portion of insured *travel expenses*
- New occupancy charges

2. Travelling companions

When an event affects multiple people planning, leaving, and returning together to go on the same *trip*, the claim will then be limited to the amount which corresponds to the claims of the *immediate family members* plus a maximum of 6 other *travelling companions*.

3. Travel credit

A travel credit issued by a *travel provider* is considered a reimbursement whether you accept that travel credit or not. A credited *trip* or a *trip* for which a travel credit was refused can under no circumstance be the subject of a claim.

4. Provider default

When the loss incurred is directly or indirectly caused by a *travel provider* default, the reimbursement of your insured *travel expenses* is limited to the amount indicated on your *insurance certificate*, up to a maximum of \$7,500 per *insured person*.

In addition, the total amount that the *insurer* will be required to pay for all claims in the event of a *travel provider* default must not exceed:

- \$2,000,000 per event
- \$5,000,000 per calendar year

5. Terrorism

When the loss incurred is directly or indirectly caused by an *act of terrorism*, the reimbursable amount is reduced by 50%.

In addition, the total amount that we will be required to pay for all claims in the event of an *act of terrorism* may not exceed:

- \$5,000,000 per act or series of acts of terrorism occurring within a 72-hour period
- \$10,000,000 per calendar year

6. Benefits payable under the Emergency Medical Care coverage

When one or more of the following benefits are also payable under the **Emergency Medical Care** coverage, the following costs are then covered only under the **Emergency Medical Care** coverage:

- Vehicle return expenses
- Subsistence allowance
- Expenses for the return or disposal of remains

7. Additional transportation expenses paid by the insurer

When the *insurer* reimburses an amount under the additional transportation expenses benefit so that you may get to your destination or return to your departure point, the total amounts related to the replaced means of transportation are not reimbursable under the unused portion of insured travel expenses benefit.



WARNING – EXCLUSIONS

A) Exclusions due to pre-existing medical conditions

No amount is payable under this coverage if the loss sustained or the costs incurred result directly or indirectly from one of the following causes:

1. Any *medical condition* that affects you and **that is not stable during the 3 months preceding the effective date of the coverage**, except for a *minor ailment*.
2. Any heart condition for which, during the **3 months preceding the effective date of the coverage**, you have used nitroglycerin more than once in a 7-day period for the relief of chest pain.
3. Any pulmonary condition for which, during the **3 months preceding the effective date of the coverage**, you have been treated with home oxygen or required corticosteroid therapy.

B) Other exclusions

Unless otherwise specified, the following exclusions apply to you and to your *travelling companion*.

No amount is payable under the terms of this coverage if the *trip* cancellation, interruption, or modification results directly or indirectly from one of the following causes:

1. Trip cancellation, interruption, or modification without the approval of Blue Cross Travel Assistance

Failure to communicate with *Blue Cross Travel Assistance* within 48 hours of an event that forces you to cancel, interrupt, or modify your *trip*, as mentioned in the "In case of trip cancellation, interruption, or modification" section of this coverage.

2. Known, predictable, or ignored circumstances

A situation, event or *medical condition* that you have knowledge of or that you have ignored on the date the coverage takes effect and at which time you could reasonably be expected to think that it might cause you to cancel, interrupt or modify the planned *trip*.

Under the **Annual**, for a *trip* that is booked while the contract is already in effect, this same exclusion applies on the date of the first *prepayment* for this *trip*.

3. Illness of a third party

- a) *Illness* that does not require the *hospitalization* of the host at the destination
- b) *Illness* or *hospitalization* of anyone other than the following:
 - A *travelling companion*
 - A *family member*
 - A person who takes care of your business or residence while you are on the *trip*

- c) A *trip* undertaken for the purpose of visiting or looking after a sick or injured person, when the *medical condition* or the subsequent death of this person represents the event that causes the cancellation, interruption, extension, or modification of the *trip*

4. Law and government

- a) Any event that has not prompted a *Canadian government travel advisory* in a country or region that constitutes a destination or a stage of a *trip*
- b) Any event in a country or region that constitutes a destination or a stage of a *trip* and for which a *Canadian government travel advisory* is in effect on the date the coverage takes effect
- c) Any event for which the *Canadian government travel advisory* has been lifted more than 7 days before the scheduled departure date
- d) Noncompliance with the entry and departure rules for a country that constitutes a destination or a stage of a *trip*, visa or passport application outside the prescribed timeframe, visa or passport application subsequent to a first refusal, or ineligibility for a visa or passport pursuant to the applicable rules and legislation
- e) Refused entry at customs or at security checkpoints, except for mistaken identity

5. Weather conditions

Trip cancellation before the scheduled departure date if adverse weather conditions caused a carrier delay of less than 30% of the total duration of the *trip*.



6. Employment and occupation

- a) Summons of a law enforcement officer to appear as a witness or defendant in a trial scheduled to be heard during the period of the *trip*.
- b) Cancellation of a *business meeting* by the employer.
- c) Loss of employment if the held position is:
 - Temporary, or
 - Contractual, or
 - Permanent for less than a year

7. Missed transportation

Any means of transportation missed when it was not planned to arrive at the transfer point within the time recommended by the carrier, except for stopovers planned by the carrier.

8. Life events

- Financial difficulties
- Conjugal difficulties
- Disagreement with a *travelling companion*
- Inability to get the desired accommodation
- Aversion for the *trip* or transportation

9. Trip undertaken for medical purposes

Trip undertaken for the purpose of receiving a diagnosis, a *treatment*, surgery, assessment, palliative care, or any other form of medical services.

10. Pregnancy diagnosed before the effective date of the coverage

- a) *High-risk pregnancy*
- b) Preterm birth when the planned *trip* takes place in whole or in part in the 9 weeks preceding or following the expected delivery date
- c) Pregnancy complications arising during the 9 weeks preceding or following the expected delivery date

11. Pregnancy diagnosed after the effective date of the coverage

Pregnancy diagnosis after the effective date of the coverage when the departure date or the return date of the *trip* is in the first 31 weeks of pregnancy and the pregnancy is not considered a *high-risk pregnancy*.

12. Mental health disorders

Situation, event, or *medical condition* resulting from a mental health or psychiatric disorder, unless the condition requires *hospitalization*.

13. Suicide and intentional injury

Suicide, attempted suicide, or intentional injury of the *insured person*, whether it is due to a psychological disorder or not.

14. Use of alcohol, drugs, and other intoxicating substances

Situation, event, or *medical condition* arising from or in any way relating to:

- Chronic use of alcohol, drugs, or other intoxicating substances, or relating to such use in any way, including withdrawal symptoms
- Excessive use of alcohol, drugs, or other intoxicating substances
- Driving a motor vehicle while under the influence of any drug, whether legal or not, or with a blood alcohol level greater than 80 mg per 100 ml of blood (0.08)

15. Illegal act

Participation in any criminal or illegal act or any attempt to commit such acts, under any law.

16. Act of war and civil unrest

Situation, event, or medical condition resulting from:

- Any act of war, whether war has been declared or not
- A revolt
- A revolution
- Voluntary participation in a riot or insurrection

17. High-risk sports or activities

Situation, event, or *medical condition* resulting from participation in *high-risk sports or activities*.

18. Pandemic

Situation, event, or *medical condition* resulting from a *pandemic*, whether the risk is known or unknown on the date the coverage takes effect.

OPTIONAL PROTECTION: PANDEMIC

Optional Protection: Pandemic reimburses *travel expenses* normally not covered due to exclusion 18 (pandemic) applicable under your **Trip Cancellation or Interruption** coverage. The level of protection varies depending on whether or not a *Canadian government travel advisory* in relation to a *pandemic* is in effect on the date coverage takes effect (see points A and B under “What is covered”).



NOTICE

To be valid, this optional protection **MUST BE PURCHASED WITHIN 5 DAYS OF THE FIRST PREPAYMENT OR AT LEAST 45 DAYS PRIOR TO THE DEPARTURE DATE OF THE TRIP** and at the same time as the **Trip Cancellation or Interruption** coverage.

Unless otherwise specified, all of the rules under the **Trip Cancellation or Interruption** coverage remain applicable, with the addition of provisions specific to this optional protection.

What is covered

A

If a Canadian government travel advisory in relation to a pandemic IS IN EFFECT on the date the coverage takes effect

The *pandemic* is known and foreseeable.

Expenses reimbursed by the *insurer* under **Optional Protection: Pandemic** are limited to those incurred during a return that has been delayed due to a *pandemic*, as described in the table below.

All other expenses related to a pandemic are excluded.

Expenses incurred during a return delayed due to a pandemic	You have chosen to insure your travel expenses	You have chosen NOT to insure your travel expenses
<p>When the return date for the <i>trip</i> must be delayed due to a diagnosis, positive screening test or contact tracing in relation to a <i>pandemic</i>, the <i>insurer</i> agrees to reimburse the following expenses:</p> <ul style="list-style-type: none"> - A maximum of \$250 per day per <i>insured person</i>, up to \$2,500, for accommodations in a commercial establishment and meals, subject to a reimbursement limit of \$5,000 per <i>trip</i> for all the <i>insured persons</i> under the same contract - A maximum of \$500 per <i>insured person</i> for changing the date of or replacing the original return ticket, subject to a reimbursement limit of \$1,000 per <i>trip</i> for all the <i>insured persons</i> under the same contract 	✓	✓

B

If no Canadian government travel advisory in relation to a pandemic is in effect on the date the coverage takes effect

The *pandemic* is unforeseeable.

The **Optional Protection: Pandemic** allows the benefits under the **Trip Cancellation or Interruption** coverage to apply as normal. If applicable, the *insurer* agrees to reimburse these expenses if an unforeseeable event related to a *pandemic* forces you to cancel, interrupt, extend or modify your planned *trip*:

Benefits included in the Trip Cancellation or Interruption coverage	You have chosen to insure your travel expenses	You have chosen NOT to insure your travel expenses
Insured travel expenses	✓	
New occupancy charges	✓	
Unused portion of insured travel expenses	✓	
Additional transportation expenses	✓	✓
Expenses for the return or disposal of remains	✓	✓
Vehicle return expenses	✓	✓
Subsistence allowance	✓	✓

! WARNING – EXCLUSIONS

Exclusions

The “Exclusions due to pre-existing medical conditions” and the “Other exclusions” under the **Trip Cancellation or Interruption** coverage apply to the **Optional Protection: Pandemic**, with the exception of exclusion 18 (pandemic).

Also, the “Other exclusions” 2 and 4b are modified as follows:

2. Known, predictable, or ignored circumstances

A situation, event or *medical condition* that you have knowledge of on the date the coverage takes effect and at which time you could reasonably be expected to think that it might cause you to cancel, interrupt or modify the planned *trip*.

Under the **Annual**, for a *trip* that is booked while the contract is already in effect, this same exclusion applies on the date of the first *prepayment* for this *trip*.

When the **Optional Protection: Pandemic** is purchased and on the date the coverage takes effect a *Canadian government travel advisory* in relation to a *pandemic* is in effect in a country or region that constitutes a destination or a stage of the *trip*, this exclusion does not invalidate the

optional protection, but reduces the protection it offers, **as described under point A of the “What is covered” section for this optional protection.**

4. Law and government

b) Any event in a country or region that constitutes a destination or a stage of a *trip* and for which a *Canadian government travel advisory* is in effect on the date the coverage takes effect.

When the **Optional Protection: Pandemic** is purchased and on the date the coverage takes effect a *Canadian government travel advisory* in relation to a *pandemic* is in effect in a country or region that constitutes a destination or a stage of the *trip*, this exclusion does not invalidate the optional protection, but reduces the protection it offers, **as described under point A of the “What is covered” section for this optional protection.**



ACCIDENTAL DEATH OR DISMEMBERMENT COVERAGE

The **Accidental Death or Dismemberment** coverage insures you in the event of death or loss of use of one or more limbs as a result of an *accident* that occurs during your *trip*.

If you have purchased this coverage, make sure to read the following carefully. Certain limitations and exclusions apply.



Beginning and end of coverage

Effective date	Termination date
<p>The coverage becomes effective at the latest of the following dates:</p> <ul style="list-style-type: none"> • The <i>effective date of the contract</i> indicated on your <i>insurance certificate</i>, or • The departure date of the <i>trip</i>. 	<p>The termination date of the coverage corresponds to the <i>contract expiry date</i> indicated on your <i>insurance certificate</i>.</p> <p>If your return takes place before the <i>contract expiry date</i>, the termination date of the coverage becomes the return date of the <i>trip</i>, whether the return is planned or premature (except for the "Trip break").</p>

What is covered

This coverage insures you in the event of accidental loss of life or of complete and definitive loss of use of one or more limbs or vision in one or both eyes.

The loss must result directly from an *accident* sustained during the *coverage period* and it must occur within 12 months following the date of the *accident*.

Depending on the loss sustained and the circumstances of the *accident*, the *insurer* will pay an amount of up to \$300,000.

Benefit paid following an accident

This benefit is paid when the death or dismemberment occurs as a result of an *accident* while you are travelling, on the condition that this *trip* is not the subject of a claim for an air flight *accident* under this coverage.

The amount paid is established as follows:

Accidental loss of	Under 18 years old	18 to 64 years old	65 years old and over
Life in public transportation other than an aircraft	\$40,000	\$200,000	\$40,000
Life, or Use of more than one limb, or Vision in both eyes	\$20,000	\$100,000	\$20,000
Use of a single limb, or Vision in one eye	\$10,000	\$50,000	\$10,000

Benefit paid following an air flight accident

This benefit is paid when the death or dismemberment occurs as a result of an *accident* while you are:

- Travelling as a paying passenger on an *aircraft* going to or from your destination
- Travelling as a passenger on a scheduled helicopter shuttle service between airports to connect with the required flight going to or from your destination
- Travelling as a passenger on land or sea transportation paid by the airline
- Travelling on an *aircraft* declared missing
- Waiting at the airport for the departure of the flight required to go to or from your destination

The amount is established as follows:

Accidental loss of	All ages
Life, or Use of more than one limb, or Vision in both eyes	\$300,000
Use of a single limb, or Vision in one eye	\$150,000

Payment of the benefit

Accidental loss of life of an insured person

The benefit is paid directly to the *contract holder* if they are living. In the event of the death of the *contract holder*, it is paid to their estate.

Accidental loss of use of one or more limbs or vision in one or both eyes

The benefit is paid to the *insured person* who was the victim of the *accident*, to their representative, or to their legal guardian, if they are a minor.

Limitations and reductions of coverage

If you sustain more than one loss, the *insurer* pays for only one loss, namely the one entitling you to the highest amount.



WARNING – EXCLUSIONS

No amount is payable, under the terms of this coverage, if the death or dismemberment results directly or indirectly from one of the following causes:

1. High-risk sports or activities

Your participation in *high-risk sports or activities*.

2. Use of alcohol, drugs, and other intoxicating substances

- Your chronic use of alcohol, drugs, or other intoxicating substances, including withdrawal symptoms.
- Your excessive use of alcohol, drugs, or other intoxicating substances.
- Driving a motor vehicle while you are under the influence of any drug, whether legal or illegal, or with a blood alcohol level greater than 80 mg per 100 ml of blood (0.08).

3. Suicide and intentional injury

Suicide, attempted suicide, or intentional injury, whether it is due to a psychological disorder or not.

4. Act of war and civil unrest

- Any act of war, whether war is declared or not

- A revolt
- A revolution
- Your voluntary participation in a riot or insurrection

5. Illegal act

Your participation in any criminal or illegal act or any attempt to commit such acts, under any law.

6. Terrorism

Act of terrorism.



BAGGAGE COVERAGE

The **Baggage** coverage insures you if your baggage is delayed for more than 12 hours or if it is lost, stolen, or damaged during your *trip*.

If you have purchased this coverage, make sure to read the following. Certain limitations and exclusions apply.

Specific coverage provisions

To the "General provisions applicable to all coverages", the following are added:

1. Supporting documents

Depending on the circumstances, you will be asked to provide us, within 90 days following the date of the event, one or more of the following documents:

- A duly completed claim form
- A written report stating the loss, theft, or damage
- An invoice or official receipt attesting to the value of the property concerned

The following may also be required, in the event of baggage delay of more than 12 hours:

- Proof of delay of checked baggage issued by the carrier
- Receipts for purchase of essential items
- Sports equipment rental receipts

Failure to provide the required proof will result in the denial of your claim.

2. Coverage extension upon return

If baggage is checked with a public carrier and delivery is delayed after the termination date of the coverage, coverage remains in effect until the baggage is delivered by the public carrier.

IN CASE OF DELAY, THEFT, VANDALISM, OR LOSS OF BAGGAGE

In case of baggage delay on the way to your destination, you must:

- Obtain a written report from the carrier
- Advise *Blue Cross Travel Assistance* as soon as possible so that we can advise you of the procedure to follow

In case of theft, vandalism, or loss of your baggage, you must:

- Advise *Blue Cross Travel Assistance* as soon as possible so that we can advise you of the procedure to follow
- Have taken all reasonable precautions to protect, safeguard, or recover your property
- Promptly notify the police and obtain a written statement attesting to your baggage theft
- Obtain a written statement from the hotel manager, tour guide, or transportation organization

The numbers for reaching us can be found on the last page of this insurance policy and on your insurance certificate.

Failure to report a loss to the authorities nullifies any claim.

Beginning and end of coverage

Effective date	Termination date
<p>The coverage becomes effective at the latest of the following dates:</p> <ul style="list-style-type: none"> • The <i>effective date of the contract</i> indicated on your <i>insurance certificate</i>, or • The departure date of the <i>trip</i>. 	<p>The termination date of the coverage corresponds to the <i>contract expiry</i> date indicated on your <i>insurance certificate</i>.</p> <p>If your return takes place before the <i>contract expiry date</i>, the termination date of the coverage becomes the return date of the <i>trip</i>, whether the return is planned or premature (except for the "Trip break").</p>



What is covered

The maximum amount that the *insurer* agrees to reimburse for the following three benefits is \$1,500 per *trip*, per *insured person*.

Benefits	
<p>Benefit paid for lost, stolen, or damaged baggage</p>	<p>Up to the insured amount further to theft, loss, or damage to your baggage occurring during the <i>coverage period</i>.</p>
<p>Benefit paid in case of delay of checked baggage</p>	<p>Up to \$500 when the arrival of your checked baggage with the carrier is delayed over 12 hours at your destination for:</p> <ul style="list-style-type: none"> - The purchase of essential toiletries and clothing - The rental of delayed sports equipment
<p>Benefit paid for replacing official documents</p>	<p>Up to \$250 for the cost of replacing the following official documents when they are lost or stolen during the <i>trip</i>:</p> <ul style="list-style-type: none"> - Passport - Driver's license - Birth certificate - Visa

Limitations and reductions of coverage

1. Liability limit of insurer

We can choose to:

- Repair damaged property, or
- Replace damaged or lost goods with goods of the same value or quality

In all cases, the *insurer's* responsibility is limited to the value of the item at the time the loss or damage occurs.

2. Maximum reimbursement per item or per category of items

Category	Description	Maximum reimbursement
Jewelry	Includes jewelry, watches, silver, gold, or platinum items.	\$300 for all items in this category
Electronic devices or cameras	Includes cameras, video or audio devices, tablets, telephones, readers, electronic watches, and any other electronic device, as well as their accessories and equipment.	\$300 for all items in this category
Items that are part of a set	Includes items that are part of a set, such as a golf club set.	\$300 for the set*
Other items	Other items that do not fall under the previous categories.	\$300 for each item

* When an item that is part of a set is lost, the set is considered as a single item and the value of the lost or stolen item is assessed in proportion to its importance within the set. The loss of this item does not constitute the total loss of the set.

3. Property covered by a carrier

This coverage covers only the *insured person*. A carrier or other service provider that covers the same property cannot benefit from this coverage.



WARNING – EXCLUSIONS

No amount is payable, under the terms of this coverage, if the loss incurred is related to the following property or situations:

1. Loss or damage related to the following property

- a) Vehicles and their accessories:
 - Automobiles, motorcycles, boats, engines, or other vehicles and their accessories and equipment
 - Bicycles, unless checked as baggage with a carrier
- b) Furniture or home furnishings
- c) Personal items:
 - Prostheses and orthoses
 - Glasses and contact lenses
 - Medication
 - Cosmetics
- d) Financial assets:
 - Cash
 - Commercial papers
 - Financial securities
- e) Tickets and documents
- f) Professional equipment or goods
- g) Goods brought in for the purpose of trading
- h) Antiques or collectibles
- i) Food or perishable items
- j) Animals
- k) Any other items not usually included in baggage

2. Breakage of fragile or breakable items

Breakage of fragile or breakable items, except in case of fire or theft.

3. Confiscation or damage caused by order of a government or public agency

Loss or damage caused by confiscation or damage by order of a government or a public agency.

4. Confiscation or damage related to illegal transportation or trade

Loss or damage that occurred during illegal transportation or trade.

5. Act of war and civil unrest

- Any act of war, whether war has been declared or not
- A revolt
- A revolution
- Voluntary participation in a riot or insurrection

6. Wear, deterioration, mechanical failure, and vermin

Loss or damage caused by wear, deterioration, mechanical failure, moths or vermin, or during work or treatment carried out on the good.

7. Theft without break-in committed in a vehicle

Theft committed in a car, trailer, or other vehicle left unattended, except if it was locked or if it was equipped with a locked compartment and the theft involved a break-in (with visible marks).

8. Neglect, recklessness, or disappearance

Loss or damage caused by neglect or a reckless act on your part or disappearance of an item in circumstances which do not allow a reasonable conclusion of theft.

9. Items expressly insured under another contract

Loss or damage to an item expressly insured under another contract at the time this coverage is in effect.



Blue Cross Travel Assistance services take care of you during your *trip*. They are included with all our travel insurance products and are available 24 hours a day, 7 days a week.

IN CASE OF EMERGENCY WHILE TRAVELLING

In the event of an emergency during a *trip*, immediately contact *Blue Cross Travel Assistance*.

The numbers for reaching us can be found on the last page of this insurance policy and on your insurance certificate.

Long-distance charges incurred to reach our offices and get assistance while you are on your *trip* are refundable. Your roaming charges are not.



NOTICE

As soon as a covered event occurs, either before or during the *trip*, make sure you communicate with *Blue Cross Travel Assistance*, otherwise benefits could be denied.

The services are provided by *Blue Cross Travel Assistance*. All expenses incurred under its services, if they are covered by the coverages included in your contract, will be paid or reimbursed by the *insurer*.

Services offered before departure

Blue Cross Travel Assistance can provide information on visas and required vaccines before the departure on your *trip*.

Travel medical assistance

If you must consult a *physician* or be hospitalized further to an *accident* or a sudden *illness*, you or a person accompanying you must call *Blue Cross Travel Assistance* immediately.

Depending on your destination, *Blue Cross Travel Assistance* will refer you to an appropriate facility and, when required, funds may be advanced to the *hospital*.

Medical assistance also includes the following services:

- Confirming medical insurance coverage to facilitate your care at the clinic or *hospital*
- Following up on the medical file and communicating with the *physician* treating you at your destination
- Coordinating repatriation when medically required
- Coordinating the safe return home of your *dependent children* if you are hospitalized
- Taking the necessary steps to bring in a *family member* if you must stay in *hospital* for at least 3 days
- Coordinating the return of your personal road vehicle if you are unable to drive it back to your residence because of an *illness* or an *accident*.

General travel assistance

For any other emergency, contact *Blue Cross Travel Assistance* to access services such as:

- Toll-free telephone assistance 24 hours a day, 7 days a week
- Coordination of claims, if applicable
- Interpreter services for emergency calls

- Assistance in the event of loss or theft of identification documents
- Information on embassies and consulates
- Referrals to a lawyer in the event of a serious *accident*
- Settling of formalities in the event of death and repatriation of remains

TO EXTEND A TRIP

If you wish to extend your *trip* beyond the dates specified in the contract or beyond the *maximum stay* included under your **Annual** contract, you must extend your insurance coverage.

To remain valid, the contract must cover the entire duration of the *trip*, including the return date, except when the extension request is refused by the *insurer*.

An extension purchased from another insurer nullifies your coverage with us for the entire duration of this *trip*, except when the extension request is refused by the *insurer*.

1. How to extend your insurance coverage

To extend your insurance coverage:

- You must contact the authorized agent who sold you the original contract before the end of the *coverage period* of your contract or before a *trip* exceeds the *maximum stay* of your **Annual**
- You must still be eligible for insurance
- Your health must not have changed since your departure date
- You must pay the required additional premium

The numbers for reaching us can be found on the last page of this insurance policy and on your *insurance certificate*.

2. Insurer approval

The sale of the extension is conditional on the approval of the *insurer*. Such approval could be refused if:

- You have a claim for the initial period of the *trip* in progress, whether it is already made or not, or
- The Canadian government issues a travel advisory recommending not to travel to the region or country that is the destination of your *trip*, or
- The Canadian or provincial government recommends that travellers return home

When an extension is refused by the *insurer*, coverage ends at the *contract expiry date* indicated on the *insurance certificate* or when the *maximum stay* of the **Annual** is surpassed.



NOTICE

When requesting an extension, you must notify us of any claim made or to come in connection with costs incurred since the start of your *trip*. If you fail to do so, no claim for the *coverage period* prior to your extension request will be accepted if it is submitted after the extension has been granted.

An extension may result in a change to the terms of the contract, including to the exclusions due to *pre-existing medical conditions* and the rate for the entire duration of the *trip*.

When an extension requires that a new contract be issued, specifically when a *trip* exceeds the *maximum stay* under the **Annual**, only the coverage offered by the new contract applies to the *trip*, including its conditions, limitations, and exclusions.

3. Situations which lead to the automatic extension of coverages

The coverages included in your contract are automatically extended, free of charge:

- Up to 24 hours when returning to your place of residence is postponed due to a carrier delay, a traffic accident, or mechanical failure of the private vehicle used to return from your *trip*.
- For the duration of your *hospitalization* and the 24-hour period following your discharge from the *hospital*.
- For the period you are restricted from boarding and the following 24-hour period when the return to your place of residence is postponed due to a diagnosis, a positive screening test or contact tracing in relation to a *pandemic*.
- Up to 72 hours when the return to your place of residence is postponed due to a *medical emergency* that affects you. The *medical condition* must have started within 24 hours prior to the scheduled return date and must require emergency *treatments*.

TRIP BREAK

Applicable to *Individual, Package Plus, and Canada Package* products

You can come back to your province of residence and then return to your destination without terminating your insurance contract. During this period, no insurance coverage is valid and no premium refund is granted for the days spent in your province of residence.

Before returning to the destination of your *trip*, you must ensure that you still meet the insurance eligibility criteria.

In addition, when you are leaving for your destination, a health condition that is not *stable* will be considered a *pre-existing medical condition* and will therefore be excluded for the remaining duration of your contract, in accordance with the "Exclusions due to pre-existing medical conditions" section of the **Emergency Medical Care** coverage.

TO MODIFY YOUR CONTRACT

To make a change to your contract (for example, changing the insured amount under **Trip Cancellation or Interruption**), you must contact the authorized agent who sold you the original contract.

Any changes to the contract must be included in the new version of your *insurance certificate* to be valid and applicable.

When a modification requires that a new contract be issued, only the coverage offered by the new contract applies to the *trip*, including its conditions, limitations, and exclusions.

TO CANCEL YOUR CONTRACT

You can request the cancellation and full refund of your contract to the authorized agent who sold you the insurance:

- a) Before the *effective date of the contract*, or
- b) After the *effective date of the contract*, during the 10 days following the date of purchase, **unless**:
 - You have made or intend to make a claim related to the contract, or
 - The contract is for a period of 10 days or less, or
 - The contract was purchased within 11 days before the *trip* and includes the **Trip Cancellation or Interruption** coverage

IF YOU RETURN EARLIER FROM YOUR TRIP

If you return from your *trip* before the *contract expiry date* and you have not submitted and do not intend to submit a claim under this contract, you can ask the authorized agent who sold you the insurance to terminate it and get a partial refund of your premium.

When authorized, reimbursement is for unused contract days, less an administrative fee of \$25.

- Upon submission of proof of your return date, unused days are counted from the day after this date.
- In the absence of proof of your return date, unused days are counted from the day after the date on which we receive your request.

The proof in question must clearly demonstrate that you were in your province of residence on the date indicated at the time of the request (for example, your transportation ticket for the return to your province of residence or a baggage tag issued by the carrier on which your name, the date, and the place of return appear).

No premium refund is granted if:

- You have a contract that includes the **Trip Cancellation or Interruption** coverage, or
- You hold an **Annual** contract, or
- You have submitted or intend to submit a claim related to the contract, or
- You are repatriated at our expense

TO SUBMIT A CLAIM

1. How to get a claim form

Our claim forms are available on our website or can be obtained by contacting our customer service.

The contact information specific to claims can be found on the second-last page of this insurance policy.

2. How to submit your claim

Our responsibility is engaged only if you contacted *Blue Cross Travel Assistance* within the prescribed time frame, as stipulated in the **Emergency Medical Care** and **Trip Cancellation or Interruption** coverages and if you inform us, for the other coverages, of the damage, the loss suffered, or the event within 30 days following the incident.

In all cases, you must send us the completed claim form within 90 days of the event as well as all supporting documents and itemized invoices for services received or purchases made.

The contact information specific to claims can be found on the second-last page of this insurance policy.

3. Providing the necessary information

To process your claim, supporting documents may be required. A list of these documents can be found in the "Supporting documents" section for each of the coverages.

Proof demonstrating the duration of the *trip* might also be required.

Finally, we reserve the right to require, at our expense, medical examinations related to a claim and, if the law authorizes us, to have an autopsy performed in the event of death.

4. Processing times for your claim

We have 30 business days following receipt of all the documents necessary for the assessment of your file to:

- Pay the benefit or advise you that payment has been made to the care or service provider
- Deny your claim in writing and provide the reasons justifying this decision

5. Claim settlement

Payment will be made through a cheque made out to the service provider, *contract holder*, or the assignee thereof, after receipt and evaluation of the relevant proof and necessary information relating thereto, in accordance with the established procedures. However, in all cases, we reserve the right to pay the service provider directly.

Any amount that we pay or that is paid on our behalf releases us, up to this amount, from any obligation.

If a claim is the subject of a direct agreement between us and the service provider you have dealt with, you must provide any original documents needed for the payment of this claim, including the travel insurance claim form. Failure to do so renders you responsible for the amounts owing or those we are unable to recover.

6. Appealing a claim denial decision

If your claim has been denied, you can dispute this denial or request a review of our decision.

Should you wish to do so, you must send us, within 12 months of the denial, a written request stating your point of view or provide new documents that could change our decision.

Upon receipt of your request for review:

- a) We will acknowledge receipt in writing.
- b) We will inform you of the avenues of recourse.
- c) We will communicate our decision to you, in writing or by telephone, within 4 months.

Your request and your supporting documents must be sent to the following address:

Blue Cross - Travel Claims

1981 McGill College Avenue, Suite 400
Montreal, Quebec H3A 0H6

GENERAL PROVISIONS APPLICABLE TO ALL COVERAGES

Accuracy of the information provided

Your contract is established based on the information that you have provided us. When you purchase it, your answers must be accurate and complete, otherwise your contract may be cancelled and/or the claim may be denied.

If you see an error on your *insurance certificate*, you must immediately notify the authorized agent who sold the contract to you.

Applicable law and jurisdiction

The contract is governed exclusively by the laws of the Canadian province where you normally reside.

Any dispute relating to the conclusion, interpretation, or execution of the contract will be submitted exclusively to the competent courts of the Canadian province where you normally reside, and the parties agree to abide by its jurisdiction.

Contract modification by the insurer

The conditions of the contract cannot be amended unless agreed upon in writing by the *contract holder* and the *insurer*.

Should we choose not to or fail to call for the execution or observance of a particular contract provision, this shall not be interpreted as a waiver of our right to call for the execution or observance of any provision.

We reserve the right to modify the conditions of your **Annual** contract at the time of its renewal.

Contract validity

The insurance is valid only if it is purchased and the premium is paid in full before the *effective date of the contract*.

Travel insurance must be purchased before the departure date and for the entire duration of the *trip*, including the departure date and the return date.

If the contract requires an extension and such extension is refused by the *insurer*, the validity of the contract is maintained until the *contract expiry date* indicated on the *insurance certificate*.

Coverage limitation due to coordination of benefits

The *insurer* is «secondary payer». Benefits provided for in the contract only cover excess costs not covered by:

- Another travel insurance policy or coverage (individual or group);
- A law or public health insurance plan;
- Any other responsible party (for example, a carrier, a car or home insurance policy or a compensation program or fund). If you may be entitled to similar services from another responsible party, you are required to submit your claim within the stipulated time. The *insurer* reserves the right to reduce your benefits if you refuse or neglect to do so.

Benefits payable by the *insurer* are reduced so that the total of the sums paid does not exceed the amount that is the subject of the claim.

Currency and interest

All amounts indicated in the policy as well as the amounts payable are in Canadian dollars. No interest will be paid on the amounts payable under this contract.

False declaration, failure to disclose, fraud, or attempted fraud

In case of a claim, we verify the information provided, including your medical history.

If you or someone acting on your behalf misrepresents the facts, fails to disclose required information or attempts to commit fraud, whether it is upon enrollment, when submitting a claim, or at any other time during the life of the contract, the contract will be considered null and void.

Health care quality and access

We make every necessary effort to get you the best available medical and *hospital* care. Neither we nor *Blue Cross Travel Assistance* can be held responsible for the quality of the care administered or the possible unavailability thereof.

Insurance premium

Your premium is calculated based on:

- Your *age*
- The duration of your *trip*, or the *maximum stay* under your **Annual**
- The chosen product and coverages included in your contract
- The insured coverage amount, if applicable
- The answers you provided in your health declaration, if applicable
- The selected *deductible* amount, if applicable

Repatriation of the insured person

No premium refund for early return will be issued when you are repatriated at the expense of the *insurer*.

In the absence of medical contraindications, we can call for your repatriation or your transfer to a different treatment facility.

If you refuse this repatriation or transfer, we may terminate your insurance, and no premium refund will be granted. The termination notice will be sufficient.

Return to province of residence at the request of the insurer

In the absence of medical contraindications, when the Canadian or provincial government recommends that travellers return home while you are already travelling, we may require your return to the province of residence within a time frame that we deem reasonable.

Right of subrogation

If you acquire a right to sue a third party under this contract, the *insurer* is subrogated to your rights to a maximum of the expenses reimbursed by the *insurer*.

You must always take the necessary measures to uphold your right to sue and must collaborate with the *insurer* in the exercise of its right of subrogation by, for example, providing it the required documents.

If you reach an agreement or accept payment from a third party liable for the insured event without our written consent, we will then be released from any obligation to you.

DEFINITIONS

The *insurer* is solely responsible for defining and interpreting the terms used in this insurance policy.

Accident means an event due to an external cause and of a violent nature which causes, directly and independently of any other cause, bodily injury while the insurance is in effect. The accident is always unforeseen, sudden, unintentional and does not in any way mean *illness* or infection.

Act of terrorism means an act or threat made with or without the use of force or violence, including hijacking or kidnapping of an individual or group for the purpose of intimidating or terrorizing a government, group, association or population for religious, political or ideological purposes.

An act of terrorism does not mean, in any case, an act of war, a revolt, a revolution, a riot or an insurrection.

Age refers to the age at the time of purchase or renewal of your contract.

Aircraft refers to a multi-engine transport-type aircraft with a maximum authorized take-off weight greater than 10,000 lb (4,540 kg), and that is:

- Used for the transportation of passengers
- Used between licensed airports for authorized flights
- Operated by an air carrier holding a valid license delivered by the Canadian Transportation Agency or its foreign equivalent

Blue Cross Travel Assistance means CanAssistance, the company appointed by the *insurer* to offer assistance services to *insured persons*.

Business meeting means a private meeting organized in advance between non-affiliated companies pertaining to your full-time occupation or profession and which represents the only reason for the *trip* (written proof of meeting arrangements is required). In no case can a business meeting include legal proceedings.

Canadian government travel advisory means the following recommendations from the Canadian government:

- Avoid all non-essential travel
- Avoid all travel

Travel advice and advisories by destination can be consulted at any time at <https://travel.gc.ca/>

Contract expiry date means the date the coverage ends. This date is indicated on the *insurance certificate*.

Contract holder means the person named as such on the *insurance certificate*.

Coverage period means the period between the *effective date of the contract* and the *contract expiry date* indicated on the *insurance certificate*.

Customary and reasonable expenses 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.

Deductible means the part of the eligible expenses in the contract for which you are responsible and that you must pay when claiming under the **Emergency Medical Care** coverage. The deductible applies per *trip* and per *insured person* once the benefits covered by government programs are paid. If you have decided to include a deductible on your contract, the amount will be indicated on your *insurance certificate*.

Dependent child means a child of the *contract holder*, their *spouse*, or both and who is over 30 days old at the departure date or at the time of adoption, who is unmarried and depends on the *contract holder* for support.

Also, to be considered a dependent child, the child must be:

- 20 years of age or under, or
- 21 to 24 years of age and attends an educational institution as a full-time student, or
- Physically or mentally disabled, no matter the age

For **international adoption**, a child who is over 30 days old, not a Canadian resident and who is in the process of being adopted abroad by a Canadian resident is considered to be a dependent child from the moment the required documents have been completed and when the competent authorities of the country where the adoption takes place hand over the child, definitively and without appeal, to the physical, visual and exclusive custody of the adoptive parents or of the person who will accompany the child until their arrival in Canada. A child in the process of adoption does not have to be a beneficiary of the *Health Insurance Act* or the *Hospital Insurance Act* of a Canadian province.

Effective date of the contract means the date the coverage begins. This date is indicated on the *insurance certificate*.

Family member means the *spouse*, father, mother, grandparents, grandchildren, parents-in-law, a child (not only a *dependent child*) of the *insured person* and/or the *spouse*, a brother, a sister, a half-brother, a half-sister, a brother-in-law, a sister-in-law, a son-in-law, a daughter-in-law, an uncle, an aunt, a nephew, a niece.

High-risk pregnancy means:

- Multiple pregnancy
- Pregnancy resulting from in vitro fertilization
- Pregnancy requiring follow-ups in a clinic specializing in high-risk pregnancies
- Pregnancy for which a medical leave of absence was prescribed to you for a reason other than preventive withdrawal due to the nature of your work
- Pregnancy for which the *physician* established one the following diagnoses: preeclampsia, eclampsia, gestational hypertension, placenta previa, cervical incompetence

High-risk sports or activities means:

1. All sports or activities for which the safety instructions, warning signs or prohibited areas are not observed.
2. All **extreme sports** or activities involving stunts, aerobatics, or improvised installations.
3. All **motor sports** in the context of competition or training, including on an approved circuit or elsewhere.
4. All **sports practiced as a paid professional**.
5. All **high-level sports competitions**, including the Olympics and national and international championships.
6. All **aerial sports**, including:
 - Hang-gliding
 - Parasailing
 - Bungee jumping
 - Skydiving or free fall
7. All **combat sports**, including:
 - Boxing
 - Judo
 - Karate
8. All **sports authorizing tackling or body checking**, including:
 - American football
 - Hockey
 - Rugby

9. All **high-risk water sports**, including:

- Canoeing, kayaking, or rafting on rapids of grades 4 to 6 according to the International Scale of River Difficulty
- Canyoning
- Kitesurfing
- Scuba diving practiced:
 - Without adequate certification (except for an initiation activity supervised by a certified person), or
 - At a depth of over 30 meters, or
 - In an environment with a high degree of risk (wreck, cave, under ice, at night, etc.)

10. All **high-risk mountain or climbing sports**, including:

- Climbing
- Mountaineering of grades 4 and 5 according to the scale of the Yosemite Decimal System - YDS
- Off-track snow sports or with jumps or acrobatics
- Snow sports using an airfoil
- Off-track mountain biking or with jumps or acrobatics

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 means admission and stay in a *hospital* as a bedridden patient to receive acute care for a minimum period of 18 hours. Day surgery will always be considered a hospitalization, regardless of its duration. Hospitalization under no circumstance means convalescent care or physical or mental health rehabilitation.

Illness indicates a deterioration of health or a disorder of the organism observed by a *physician*.

Immediate family member means the *spouse*, father, mother, and children (not just dependent) of the *insured person*, the *spouse* or both.

Insurance certificate means the document certifying the existence of a contract and which specifies among other things: the *insured persons*, the contract number, the dates of coverage, the product and coverages purchased, the *deductible* and the associated amounts.

Insured person(s) means any person indicated as an insured on the *insurance certificate*.

Insurer means:

1. In Ontario and Quebec:

- Canassurance Hospital Service Association (non-profit mutual benefit society) for the **Emergency Medical Care** coverage
- Canassurance Insurance Company for all other coverages

2. Elsewhere in Canada:

- Canassurance Insurance Company

Maximum stay, under the **Annual**, means the number of days covered per *trip*. The maximum stay includes the departure date and the return date.

Medical condition means a health issue, *illness*, or injury (including symptoms of undiagnosed conditions).

Medical emergency/Urgent means a sudden and unforeseen *medical condition* requiring immediate *treatment*. An emergency no longer exists when the evidence reviewed by *Blue Cross Travel Assistance* indicates that no further *treatment* is required at destination or that you are able to return to your province of residence for further *treatment*.

Minor ailment means a non-chronic *medical condition*, which ends at least 30 consecutive days before the effective date of the coverage, and which does not require:

- Consumption of medication for a period of more than 15 days (consecutive or not), or
- More than one follow-up visit to the *physician*, or
- *Hospitalization*, or
- Surgery, or
- Consultation with a medical specialist

Pandemic means a *disease* outbreak that spreads across continents or the world and that the World Health Organization (WHO) declares to be a pandemic.

Physician means a person without any relation to the *insured person* who is a medical graduate authorized to prescribe and administer medical *treatment* in the jurisdiction where the services are provided.

Pre-existing medical condition means any existing *medical condition* when the coverage comes into effect.

Prepayment means a non-refundable amount paid for *travel expenses* in connection with planning a *trip* and to secure, before the departure date, the availability of a product or service.

Public transportation refers to any means of public transportation (air, sea, land) operated by an authorized transporter holding a valid permit issued by the competent authorities and for which a transportation tariff is requested.

Routine check-up means a periodic consultation scheduled in advance with a *physician* during which no new symptoms or worsening of existing symptoms are reported and no new abnormalities are observed by the *physician*.

Spouse means the person to whom the *contract holder* is married or with whom the *contract holder* has lived permanently for at least one year. Dissolution of marriage by divorce or annulment as well as de facto separation of more than 3 months cancels this status.

Stable means a *pre-existing medical condition* that has remained unchanged for several months prior to the date the coverage takes effect.

For a *pre-existing medical condition* to be considered stable, it must meet all the following criteria:

1. No new medical diagnosis has been made
2. No new symptoms appeared and there was no worsening or increase in the frequency of existing symptoms
3. No *hospitalization* has taken place
4. No new medication was prescribed or recommended
5. No change of dosage¹ was made to a medication already prescribed or recommended (dose increased or decreased, or consumption stopped)
6. No new *treatment* or medical test is pending or has been prescribed, ongoing or recommended
7. No ongoing *treatment* has been changed or discontinued
8. No prescribed or recommended *treatment*, nor medical advice has been ignored

¹ We do not consider the following elements as a *change of dosage* of existing medication:

- Routine insulin or Coumadin® adjustment
- Replacement of a medication by an equivalent generic brand if its dosage remains unchanged
- Decrease in dosage of cholesterol medication
- Adjustment to hormone replacement therapy *treatment*
- Change in consumption of non-prescribed medication such as: Aspirin®, vitamins, minerals, etc.
- Use of cream or ointment prescribed for skin irritation

Terminal stage means the period when death seems inevitable, in the near future, when there is no *treatment* to fight the *illness* or when the *illness* resists any curative *treatment*.

Travel expenses means the following expenses, when made for the purpose of planning and carrying out a *trip*:

- *Public transportation* ticket
- Accommodation at destination (when subject to the conditions of a rental contract)
- All inclusive travel package
- Guided tours, excursions, and other similar activities
- Theater or concert tickets and other recreational activities
- Car rental from a rental agency
- Convention, conference, or seminar registration fee
- Any other expense made in relation to your *trip* and deemed relevant by the *insurer*

Travel provider means a package tour operator, a travel wholesaler, an airline, a cruise line, or a hotel. When two or more travel providers are owned by a single person or corporation, they are considered as a single travel provider under the terms of this policy.

Travelling companion means an *immediate family member* and up to 6 other people. To qualify as such, a travelling companion must:

- Have planned the *trip* with you
- Have the same travel dates as you
- Have the same *trip* departure and return points as you

Treatment means a medical procedure prescribed, performed, or recommended by a *physician* for a *medical condition*. Without being limited to the following, here are a few examples: prescribed medication, investigative testing, surgery, etc.

Trip generally means temporarily being away from your province or your territory of residence.

Trip also means temporarily being away from your usual place of residence inside of your province of residence if it includes at least a 2-night stay in a commercial accommodation establishment located more than 100 kilometres from your usual place of residence.

For the **Trip Cancellation or Interruption** coverage, the trip begins when you leave your usual place of residence and ends when you return to it.

The **Annual** covers trips made only outside the province or the territory of residence.

PROTECTING YOUR PERSONAL INFORMATION

Consent

Extent of consent

By purchasing a Blue Cross travel insurance product, you consent to the collection, use, retention, and disclosure of your personal information by the insurer in accordance with the terms of this contract and our privacy policy as amended from time to time and available on our website at the addresses listed below (hereinafter our "**Privacy Policy**") or otherwise in accordance with applicable privacy laws. For the purposes of this contract, "**personal information**" means any information about the insured that can directly or indirectly identify the insured.

Withdrawal of consent

You may withdraw your consent at any time, subject to any legal restrictions. However, if you withdraw this consent, you understand that we will be unable to provide you with coverage for your Blue Cross travel insurance policy. We therefore reserve the right to terminate this contract immediately.

Privacy Policy

Our Privacy Policy is constantly evolving and will apply to the various interactions we may have with you during the term of this contract, such as when you interact with us on our website, send us new personal information via web or paper forms or over the phone, deposit documents on our secure deposit sites, or by any other means.

We regularly update our Privacy Policy, which is written in a simple, clear, and transparent manner. We want to help you better understand our privacy practices. We invite you to review the policy and come back to us with any questions you may have about it. A link to our Privacy Policy is listed below, along with our contact information.

Confidentiality of your personal information

Protecting the privacy of our policyholders is important to us. Our teams place great importance on our security and privacy policies and procedures. Our excellent privacy training and awareness programs are mandatory for all our employees. We are committed to enforcing our Privacy Policy at all times in a manner consistent with applicable privacy and confidentiality laws.

Collection of your personal information

At the time you apply for insurance and at any time thereafter when collection of your personal information is required, we may collect and retain your personal information to determine your eligibility, administer your insurance policy, recommend products and services to you, and for any other purpose specified in our Privacy Policy.

We may collect personal information about you, such as:

- Identification information (e.g., name, mailing address, telephone number, date of birth, email address, etc.)
- Authentication information (e.g., username, IP address, password, etc.)
- Financial information (e.g., employment, bank name, bank account number, transaction amount, etc.)
- Medical information (e.g., medical records, medical history, health checkup information, lifestyle information, information about a medical procedure you may have undergone, etc.)
- Information about your products and services (e.g., insurance policy number, names and contact information of beneficiaries, claim information, etc.)
- Information about communications arising from your relationship with us
- Any other information necessary to provide products and services

We may collect your personal information directly from you or through our representatives. We may also collect such personal information from other sources, including but not limited to any physician, healthcare professional, hospital, clinic, pharmacy, other medical or related facility, insurance company, the government, regulatory authorities, or other body, institution, or person with records or information about you or your

health. In all cases, we undertake to obtain your consent prior to the collection of your personal information, whether it is collected by us directly or through a third party (except to the extent that collection from a third party is permitted by law).

Use of your personal information

In order for us to administer your insurance policy, depending on your type of coverage and the various interactions we may have with you during the term of this policy, personal information that you provide to us or that is collected from a third party may be used to:

- Verify your identity
- Understand and meet your needs and preferences
- Determine the suitability of our products and services
- Provide the products and services described in the policy for which you are eligible
- Assess the insurance risk
- Process a transaction for the purchase of a service or product
- Process and pay your claims and settlements
- Provide you with our medical and travel assistance services
- Provide you with personalized promotional offers and special discounts
- Communicate with you
- Respond to a request you have made to us
- Fulfill internal administrative purposes
- Ensure quality of service and protect both parties in the event of a disagreement
- Detect and prevent security breaches and fraud and conduct investigations where required; and
- As permitted or required by law

Disclosure of your personal information

We may disclose your personal information to our representatives and to certain third parties to whom it is necessary to disclose it for the purposes for which it is collected, including but not limited to our employees, officers, directors, agents, consultants, and subsidiaries, other Canadian Blue Cross organizations, our reinsurers, partners, subcontractors, and service providers, or any third party authorized by law or regulation.

Third parties may include other insurance companies, the government, regulatory agencies, and financial institutions. Medical information may also be disclosed to your physician or other specialized healthcare provider, if applicable, in accordance with applicable laws.

We limit the information we provide to authorized individuals to only that information that is necessary for them to perform their duties.

Also note that your personal information may be saved and disclosed outside your province of residence. For example, your personal information may be stored on cloud-based solutions, which may require the transfer of data outside your province of residence or even Canada.

Retention of your personal information

In general, our goal is to retain your personal information only for as long as necessary to fulfill the purpose for which we obtained it. However, you should understand that in order for us to comply with legal or regulatory requirements, we may be required to retain your personal information for longer periods. To this end, we have established a data retention schedule that is available to all our employees. The retention schedule helps our team better manage your personal information and ensure it is retained in accordance with legislation and regulations applicable to Blue Cross.

At the end of the retention period, as set out in our data retention schedule, your personal information is securely destroyed and/or anonymized in accordance with applicable laws, industry best practices, and security practices adopted by Blue Cross from time to time.

Your privacy rights

Access to your personal information

Upon receipt of a written request from you, we will provide you with access to your personal information to verify its accuracy or completeness and, if necessary, you may request that your personal information be updated and/or corrected.

You may also request a copy of your personal information in our possession. A reasonable fee may be charged to cover reproduction and handling costs. You will be informed of the costs before the documents are reproduced.

Correction of your personal information

If you believe that the personal information we have about you is inaccurate or incomplete, you may make a written request to correct that personal information. We will make the necessary changes.

How to contact us

For any additional information about the handling or management of your personal information, you can review our Privacy Policy on our website or write to us at:

Canassurance Hospital Service Association¹

c/o Chief Privacy Officer

1981 McGill College Avenue, Suite 105

Montreal, Quebec H3A 0H6

By email:

privacyofficer@qc.bluecross.ca

Via the secure website:

<https://qc.bluecross.ca/depot>

Privacy policy:

<https://qc.bluecross.ca/privacy-policy>

¹ The Canassurance Hospital Service Association is the ultimate parent company of Canassurance Insurance Company. To facilitate our interactions with our customers, all requests from all our customers regarding personal information collected by any of the Canassurance Blue Cross group of insurers may be sent to a single address, as indicated above.

LEGAL NOTICE

Any notice addressed to the *insurer* can be transmitted to:

Canassurance Hospital Service Association/Canassurance Insurance Company

PO Box 910, Branch B, Montreal, Quebec H3B 3K8

In witness whereof, the *insurer* has signed this contract, which must be validated by an authorized representative.



Sylvain Charbonneau
President and CEO

CLAIMS

Get a claim form

Website

<https://canassistance.com/en/policyholder/claims>

Phone

1-800-387-2538 | 514-286-6690

Submit a claim

Via the secure website

<https://canassistance.com/en/policyholder/depot>

By mail

Blue Cross - Travel Insurance Claims

PO BOX 3888, Station B

Montreal, QC H3B 3L7

TO REACH US

Travel Assistance

Canada / USA	1-800-361-6068
Mexico	800-062-3174
Dominican Republic	1-800-203-9666
Elsewhere	1-800-7328-7473
Elsewhere, collect	514-286-8411

Extend your contract

Canada / USA	1-877-986-7681
Elsewhere, collect	514-286-7681

Blue Cross Canassurance

1981 McGill College Avenue
Suite 105
Montreal, Quebec
H3A 0H6

qc.bluecross.ca



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