AMA TRAVEL INSURANCE POLICY

Very Important Facts.

It is important to read and understand *your policy* before *you* travel. It is *your* responsibility to review the terms, conditions, limitations and exclusions outlined in this *policy*.

- Coverage for a *medical condition* that existed before *your policy* starts requires a stability period of 3 or 6 months prior to *your departure date*, depending on your *age*, for Canadian residents.
- In order for the existing condition to be considered *stable*, *you* must not have experienced the following before *your trip*: *hospitalization* **and/or** a medical procedure or intervention and/or a *change* in *medication* **and/or** a *change* in *medical treatment* **and/or** experienced new or more frequent symptoms **and/or** are requiring investigation (other than a routine check-up).
- Any errors in answering questions on the Medical Questionnaire (if required) specifically related to a claim will result in you paying the first \$5,000 CAD of any claim and the additional premium required based on true and accurate answers. Any willful errors or omission could result in the policy being voided.
- Multi-Trip Medical Plan and Annual Premium Package: while the policy is valid for one year all terms and conditions, including pre-existing medical conditions exclusions, are effective prior to EACH departure date.
- If you need to extend your coverage, you must contact AMA prior to your original return date.
- If you have purchased cancellation or package insurance and must cancel your trip, you must do so on the date the cause of cancellation occurs. It is critical you do not delay as failure to cancel immediately may limit your claim payment.
- If at the time of buying the cancellation coverage you were aware of a situation that would prevent travel as scheduled, that situation may not be covered.
- If you have any questions before departure, we recommend you call AMA at 1.866.989.6595.

Effective Date: March 11, 2018



ARE **YOU** ELIGIBLE FOR COVERAGE?

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

- a. contrary to medical advice;
- b. while you require kidney dialysis; or
- c. after receiving a diagnosis of *terminal illness* with less than 6 months to live.
- d. if you have ever had an organ transplant (excluding cornea transplant);
- e. if you have been diagnosed with and/or received medical treatment for metastatic cancer in the last 5 years;
- f. if you have been prescribed or taken home oxygen for a lung condition in the last 12 months.

NEED HELP DURING *YOUR TRIP***?**

IN THE EVENT OF A *MEDICAL EMERGENCY*, PLEASE CALL *AMA ASSISTANCE* IMMEDIATELY:

in CANADA & mainland U.S.
Australia
Costa Rica
Dominican Republic
Jamaica
Mexico
New Zealand
South Africa
Thailand
UK
Call collect from anywhere el

COUNTRY

Call collect from anywhere else Email if calling is not possible

TOLL-FREE NUMBER 1-855-330-8330

0011-800-8877-9000 00 800-8877-9000 1-800-203-9591 1-800-204-0004 001-800-248-8561

00 800-8877-9000 00 800-8877-9000 001-800-8877-9000 00 800-8877-9000 +1-519-988-7039

orionassistance@acmtravel.ca

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

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

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

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

CARRY THE <u>INSURANCE CARD</u> AND THIS <u>POLICY</u> WITH <u>YOU</u> AT ALL TIMES

You will be provided with a wallet-size insurance card that provides important emergency telephone numbers that you must call in the event of a claim and before receiving medical treatment.

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10 DAY RIGHT TO EXAMINE

Please take the time to read *your policy* and review all of *your* coverage(s). If *you* have any questions, *you* may contact AMA at 1.866.989.6595. *You* may cancel this *policy* within 10 *days* of purchase if *you* have not departed on *your trip* and there is no claim in progress. Furthermore, *you* must not have experienced an event that could lead to a claim.

FREQUENTLY ASKED QUESTIONS

When should I read my policy?

Please read the *policy* as soon as *you* purchase it and before *you* travel. It contains valuable information about what is covered and what is not covered. If *you* have any questions, please call 1.866.989.6595 or *your* AMA Agent to discuss any concerns *you* have.

Before YOUR TRIP

Do I have to have Alberta Health Care to buy this coverage?

Yes. When purchasing any product that contains Emergency Medical Insurance, it is mandatory that *you* have valid Canadian Government Health Insurance Plan (*GHIP*) coverage. If *you* are new to Alberta and still covered under another Canadian provincial or territorial plan, *you* are eligible to purchase coverage prior to leaving Alberta. Contact Alberta Health Care to apply for provincial coverage.

When does my Emergency Medical Coverage begin?

The day you leave Alberta or the departure date or effective date on your Declaration Page. Be sure it is effective as soon as you are exiting the province.

When does my Emergency Medical Insurance end?

The day you return to Alberta or the return date on your Declaration Page. Be sure it covers you for the whole trip.

What does Emergency Medical Insurance cover?

- Up to \$5,000,000 for unexpected and emergency medical treatment over and above benefits from your Government Health Insurance Plan.
- Hospitalization, air and ground ambulance, return of vehicle, family transportation to bedside, and much more. See policy for complete list.

What isn't covered with Emergency Medical Insurance?

• Pre-existing medical conditions that are not stable.

What does Stable mean?

Stable means that you have **not** experienced the following for any sickness, injury or medical condition before your trip: hospitalization **and/or** a medical procedure or intervention **and/or** a change in medication **and/or** a change in medical treatment **and/or** experienced new or more frequent symptoms **and/or** are requiring investigation (other than a routine check-up).

- Known situations that treatment would be expected at time of travel.
- Elective treatment, alcohol or drug related situations, complications of pregnancy within 9 weeks of due date, any costs for a child born during *your trip* and others.
- See *policy* page 20-22 for complete list of exclusions.

Are pre-existing medical conditions covered?

For Emergency Medical Insurance, pre-existing medical conditions
that are stable three or six months, depending on your age, prior to
each departure date will be covered at destination (see page 65 for
definition of stable). For Visitors to Canada Medical Plan, please see
page 50, Exclusion #1.

- If you are topping up your AMA Multi-Trip Medical Plan you must meet the stability requirement based on the departure date of your current trip.
- If you are topping up another insurer's policy, you must meet the stability requirement based on the effective date of your AMA Top-Up policy.

What if I have a *change* to my medication or condition before I travel?

 Contact your AMA Agent or 1.866.989.6595 to discuss how it will affect your coverage.

When does my cancellation coverage begin?

The day the policy was purchased.

When does my cancellation coverage end?

The time a claim happens or when you leave on your trip.

When does my interruption coverage begin?

The time you leave home. Be sure the travel dates on your Declaration Page match your departure date.

What if I need to cancel my trip?

- If you have purchased cancellation or package insurance and must cancel your trip, you must do so on the date the cause of cancellation occurs. It is critical you do not delay as failure to cancel immediately may limit your claim payment.
- Call your AMA Agent or 1.866.989.6595 as soon as possible.
- If after hours, leave a message with contact numbers for someone to return *your* call.
- Non-refundable penalties with the tour operator may change the closer *you* get to travel date, so it is important to call.

What does Trip Cancellation and Trip Interruption Insurance cover?

- 33 unexpected situations that cause cancellation prior to departure as well as misconnections, interruptions or delays to *your* planned *trip*.
- Payment for non-refundable amounts prior to departure or extra out of pocket expenses due to travel delays, up to the sums insured.
- See policy for list of insured risks.

What isn't covered with cancellation insurance?

- Known (nor be aware of), situations at the time of purchasing your policy that could prevent travel as booked.
- Cancel for Any Other Reason if you didn't purchase your travel arrangements with AMA Travel, CAA Travel or amatravel.ca and purchase the policy within 48 hours of booking that trip.
- Please refer to page 34-36 for a complete list of conditions and exclusions.

During YOUR TRIP

When does my delay coverage begin?

The time that an insured risk prevents *you* from returning to *your* Canadian province or territory of residence as scheduled.

What to do during a travel delay?

When you have a cancellation/package policy.

- 1. You must call AMA Assistance immediately. Phone numbers are located on the inside front cover of this policy.
- 2.Gather information regarding the delay ask the airline agent for proof of delay due to weather or mechanical, tow truck receipt for car breakdown, etc.
- Keep original receipts for extra accommodations and meals, taxis or essential phone calls.
- 4. Covered expenses for cancellation, interruption or delay claims are reimbursed with completed claim form and original receipts.

What if it is a delay outside of my control?

- Airline or carrier delays, weather, vehicle breakdown or accidents, illness or hospitalization on the final day of your trip may qualify for an automatic extension of 5 days without additional premium.
- If you or a travel companion is hospitalized, the automatic extension covers the time in hospital plus 5 days.
- Call AMA Assistance at one of the phone numbers located on the inside front cover of this policy to report the delay.

What if I want to extend my trip?

- You must call 1.866.989.6595 or your AMA Agent (during regular business hours) before your original return date on your Declaration Page.
- Outside regular business hours please call 1.866.989.6595 and follow the after-hours emergency assistance instructions.
- If there has been a claim on your trip, authorization will be required from Orion Travel Insurance Company. Your AMA Agent will help with that so be sure to call a few days prior to expiry of your original return date.

DEDUCTIBLES

Which coverages have Deductible options?

- Emergency Medical Insurance (Single Trip Medical Plan, Multi-Trip Medical Plan, Canada Medical Plan and Top-Up)
- · Visitors to Canada Medical Plan

What currency are the Deductible options in?

All Deductibles are stated in U.S. dollars.

How does the claim process work when I have purchased a policy with a *Deductible*?

The *Insurer* will pay eligible expenses in excess of *your Deductible* amount, as shown on *your* Declaration Page, per *Insured*, per covered condition or event. *You* will be required to pay *your Deductible* amount directly to the medical or service provider. For benefits that are reimbursable, the *Insurer* will reimburse *you* for *your* eligible expenses less *your Deductible* amount. If the *Insurer* has paid eligible

expenses on *your* behalf *you* will be required to reimburse the *Insurer* for the amount of *your Deductible*.

What happens if my claim for eligible expenses is below my Deductible amount?

You will be required to pay the full amount of your claim to the medical or service provider. For benefits that are reimbursable, the *Insurer* will not make reimbursement as your claim amount is below your Deductible amount. If the *Insurer* has paid eligible expenses on your behalf, you will be required to reimburse the *Insurer* for these expenses.

During A MEDICAL EMERGENCY

- If it is a life threatening emergency, call 911 or local emergency number.
- Call AMA Assistance and stay in touch by providing any and all numbers where you can be reached.
- 3. Always show the wallet card at the *hospital* or clinic to begin the billing process.
- 4. Wherever possible, *AMA Assistance* will arrange medical bills to be sent directly to the *Insurer*.
- There may be incidental expenses that you will have to pay out of your pocket. Keep original receipts to submit for reimbursement.
- 6. AMA Assistance will submit bills to Government Health Insurance Plans on your behalf. Complete and return your claim forms promptly to assist with that process.

After YOUR TRIP

What if I want a refund of my coverage?

• Emergency Medical Insurance:

Single Trip Medical Plans and Top-Ups are fully refundable prior to *effective date*. Partial refunds are available provided there is no claim on the *policy* and proof of early return is provided.

Multi-Trip Medical Plans and Annual Premium Packages are not refundable after effective date.

• Cancellation or Package Insurance:

All plans with cancellation components are not refundable after the issue date.

(If the tour is cancelled prior to departure and the tour operator refunds all monies in cash, contact *your* AMA Agent for refund of the insurance premium)

What if I need to make a claim?

Please refer to page 55 on how to file a claim.

Are my travel insurance premiums tax deductible?

Please keep *your* original *emergency* medical receipts or ask *your* AMA Agent for a breakdown of the package premiums that included medical coverage for *your* review with Canada Revenue Agency.

PLEASE READ THE ENTIRE *POLICY* FOR THE FULL LIST OF BENEFITS, LIMITATIONS, REASONS FOR CANCELLATION AND EXCLUSIONS.

SUMMARY OF PLANS AVAILABLE

PLAN NAME	EMERGENCY MEDICAL INSURANCE	TRIP CANCELLATION AND TRIP INTERRUPTION INSURANCE	TRAVEL ACCIDENT INSURANCE	BAGGAGE INSURANCE
	Pages 11-22	Pages 26-36	Pages 37-38	Pages 39-41
Single Trip Medical Plan	<i>></i>	Not Covered	Not Covered	Not Covered
Multi-Trip Medical Plan	, ·	Not Covered	Not Covered	Not Covered
Top-Up	<i>></i>	Not Covered	Not Covered	Not Covered
Canada Medical Plan	>	Not Covered	Not Covered	Not Covered
Single Trip Premium Package	>	>	>	*
Annual Premium Package	<i>></i>	/	/	1
Non-Medical Premium Package	Not Covered	>	<i>></i>	*
Canada Package Plan	>	>	,	<i>></i>
Trip Cancellation and Trip Interruption Insurance	Not Covered	>	Not Covered	Not Covered

SUMMARY OF COVERAGE

Summary of Coverage – This is a summary only – for complete details, please refer to the applicable section of the policy.

PLAN TYPE

MEDICAL PLANS	FAMILY COVERAGE	MAXIMUM AGE AT APPLICATION	PRE-EXISTING MEDICAL CONDITION EXCLUSION	MAXIMUM TRIP DAYS	EMERGENCY MEDICAL	TRIP CANCELLATION AND TRIP INTERRUPTION	TRAVEL ACCIDENT	BAGGAGE LOSS, DAMAGE & DELAY	BOUNCE	RENTAL VEHICLE DAMAGE	VISITORS TO CANADA
Single Trip Medical Plan, Multi-Trip Medical Plan, Top-Up and Canada Medical Plan	>	All Ages	***	183*	Up to \$5 Million**	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered
PACKAGE PLANS	FAMILY COVERAGE	MAXIMUM AGE AT APPLICATION	PRE-EXISTING MEDICAL CONDITION EXCLUSION	MAXIMUM TRIP DAYS	EMERGENCY MEDICAL	TRIP CANCELLATION AND TRIP INTERRUPTION	TRAVEL	BAGGAGE LOSS, DAMAGE & DELAY	BOUNCE	RENTAL VEHICLE DAMAGE	VISITORS TO CANADA
Single Trip Premium	/	59	1	183	Up to \$5 Million**	Up to Sum Insured	Up to \$150,000***	Up to \$1,500	Not Covered	Not Covered	Not Covered
Package '	`	60 to 84	>	09	Up to \$5 Million**	Up to Sum Insured	Up to \$150,000***	Up to \$1,500	Not Covered	Not	Not Covered
Annual Premium Package	Not Available	Age 59 and under	>	183*	Up to \$5 Million**	Up to \$2,500 per <i>trip</i> to a maximum of \$10,000 per year	Up to \$150,000***	Up to \$1,500	Not Covered	Not Covered	Not Covered
Non-Medical Premium Package	1	All Ages	Not Applicable	183	Not Covered	Up to Sum Insured	Up to \$150,000***	Up to \$1,500	Not Covered	Not Covered	Not Covered
Canada Package Plan	>	All Ages	* * *	183	Up to \$5 Million**	Up to <i>Sum Insured</i> for Cancellation/ Unlimited for	Up to \$150,000***	Up to \$1,500	Not Covered	Not	Not

OTHER PLANS	FAMILY COVERAGE	MAXIMUM AGE AT APPLICATION	PRE-EXISTING MEDICAL CONDITION EXCLUSION	MAXIMUM TRIP DAYS	EMERGENCY MEDICAL	TRIP CANCELLATION AND TRIP INTERRUPTION	TRAVEL ACCIDENT	BAGGAGE LOSS, DAMAGE & DELAY	BOUNCE BACK	RENTAL VEHICLE DAMAGE	VISITORS TO CANADA
Trip Cancellation and Trip Interruption	Not Covered	All Ages	Not Applicable	365	Not Covered	Up to Sum Insured	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered
BounceBack Insurance	Not Covered	All Ages	`	365	Not Covered	Not Covered	Not Covered	Not Covered	Up to \$2,000	Not Covered	Not Covered
Rental Vehicle Damage Insurance	Not Covered	All Ages	Not Covered	50	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered	Up to \$60,000	Not Covered
	/	85	/	365	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered	Up to \$25,000
Visitors to Canada	>	85	/	365	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered	Up to \$50,000
Medical Plan	>	85	/	365	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered	Up to \$100,000
	>	69	>	365	Not	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered	Up to \$150,000

FAMILY COVERAGE

Family Coverage is available to you if all family members to be insured under one policy are listed on the Declaration Page and you have purchased and paid for family coverage. The family coverage covers you, your spouse and child(ren), while travelling together, for the plan purchased.

INFANT PROTECTION

If you have an infant under the age of two years who is an immediate family member travelling with you and listed on the Declaration Page for this insurance, the infant will be covered at

no charge under *your policy* for Emergency Medical Insurance only if you have purchased either the Single Trip Premium Package, Annual Premium Package or the Canada Package Plan. *Infants* are not covered for Trip Cancellation and Trip Interruption, Travel Accident Insurance or Baggage insurance.

For more information about the benefits, conditions and exclusions of *Infant* Protection, refer to the terms of Emergency Medical Insurance beginning on page 11.

* Maximum trip days may not exceed the period for which your GHIP covers you or 365 days, whichever is the lesser.

You must obtain written authorization from your GHIP covering trip days exceeding 183 days. Coverage may never extend beyond 365 days from departure date or effective date.

- ** Maximum \$25,000 if you are a Canadian resident without GHIP coverage at time of claim.
- *** Maximum benefit for which *you* are covered for: Flight Accident is up to \$100,000. Travel Accident is up to \$50,000.
- **** No pre-existing medical condition exclusion applies to the Canada Medical Plan and Canada Package Plan.

IMPORTANT INFORMATION ABOUT THIS *Policy*

PLEASE READ THIS POLICY:

THIS POLICY COVERS LOSSES RESULTING FROM UNFORESEEN AND EMERGENT CIRCUMSTANCES ONLY. IT CONTAINS TERMS, LIMITATIONS, CONDITIONS AND EXCLUSIONS, GENERAL AND SPECIFIC, THAT MAY RESTRICT BENEFITS PAYABLE.

CANADIAN LIFE AND HEALTH INSURANCE ASSOCIATION IMPORTANT NOTICE

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

This *policy* contains a provision removing or restricting the right of the *Insured* to designate persons to whom or for whose benefit insurance money is to be payable.

- The Medical Questionnaire (if applicable), policy and Declaration Page all form part of your insurance and must be read as a whole.
- Check your Declaration Page for the insurance coverage(s) you have purchased, then refer to the coverage description(s) using the Table of Contents at the beginning of this policy.
- While all of the information is important, *you* should pay particular attention to the <u>Conditions</u> and <u>Exclusions</u>. These sections may limit the benefits payable to *you*.
- By following the instructions in the section <u>How to File a Claim</u> beginning on page 55, you can speed up the assessment and, where applicable, payment of your covered eligible expenses.
- Throughout this *policy you* will notice that certain terms are brought to *your* attention with italics. These terms are explained in the <u>Definitions</u> section beginning on page 60. Pay particular attention to these definitions as the *Insurer* has given a very specific meaning to these terms.

GENERAL CONDITIONS FOR ALL COVERAGES

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

1. Premium rates and *policy* terms and conditions are subject to change without prior notice.

- 2. The *Insurer* reserves the right to decline an application for insurance or an extension or *Top-Up*.
- 3. This insurance must be issued in Canada and must be purchased prior to the *departure date* or *effective date* and for the full duration of the *trip*.
- 4. Coverage may never extend beyond 365 days from the departure date or effective date.
- If insurance coverage is purchased in a manner other than as stated in this policy, this policy shall be null and void and the *Insurer's* sole liability will be limited to the refund of the premium paid.
- 6. If any benefit is duplicated under a similar benefit, another insurance coverage in this *policy* or another of *our* policies, or under similar coverage with another insurer, the maximum *you* are entitled to is the largest amount specified under any one benefit or insurance coverage. The total amount paid to *you* from all sources cannot exceed the actual expense *you* incur.
- 7. Where not specified, airfares are one-way and economy class.

GENERAL EXCLUSIONS FOR ALL COVERAGES

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

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

- Any loss resulting when you are a driver, the operator, a co-driver, a crew member or any other passenger on a commercial vehicle used for the purpose of delivering goods or carrying a load. This exclusion is not applicable when the commercial vehicle is used during your trip solely for pleasure purposes and not used for delivering goods or carrying a load.
- 2. Noncompliance with prescribed *medical treatment* or therapy.
- 3. Suicide (including any attempt thereat) or self-inflicted *injury* whether or not *you* are sane.
- Commission or attempted commission of a criminal, criminal-like, illegal or negligent act by you. This exclusion is not applicable to BounceBack Insurance.
- 5. Expenses for which no charge would normally be made in the absence of insurance.
- 6. Any act of war.
- 7. Any loss resulting from a specific or related medical condition which you contracted in a country during your trip when, before your effective date, a Travel Advisory Notice was issued by Global Affairs Canada, advising Canadian residents to avoid non-essential travel or to, avoid all travel, to that country, region or city. "Medical condition" is limited to the reason for the Travel Advisory for this exclusion.
- 8. Despite any provision to the contrary within this policy or any amendment thereto, this policy does not cover any liability, loss, cost or expense whatsoever which is directly or indirectly caused by, resulting from, arising out of or in connection with any acts of terrorism perpetrated by biological, chemical, nuclear or radioactive means, regardless of any other cause contributing concurrently or in any other sequence to the liability, loss, cost or expense.

EMERGENCY MEDICAL INSURANCE

Eligibility and Purchase Conditions	 May be purchased separately or as part of a Package Plan. Purchase is subject to Eligibility on inside front cover. Applicants who are age 55 and over purchasing this coverage separately must complete a Medical Questionnaire, no longer than six months before the departure date or effective date to determine eligibility. You must be a Canadian resident covered by a government health insurance plan (GHIP) for the full duration of the trip.
Coverage Starts	The latest of: The date you leave your Canadian province or territory of residence; or The departure date or effective date shown on your Declaration Page.
Coverage Ends	The earliest of: The date you return to your Canadian province or territory of residence; or The return date as shown on your Declaration Page.
Maximum Age	 No maximum age if purchased separately. Age 59 if purchased as part of an Annual Premium Package. Age 84 if purchased as part of Single Trip Premium Package.
Maximum Benefit	Up to \$5 million. Maximum \$25,000 for Canadian residents without <i>GHIP</i> coverage at time of claim.
Maximum <i>Trip</i> Days Including Extension or Top-Up	365 Days with GHIP approval - Single Trip Medical Plan, Canada Medical Plan, Multi-Trip Medical Plan and Annual Premium Package <u>Age 59 and under</u> . 183 Days – Single Trip Premium Package <u>Age 59 and under</u> , and Canada Package Plan. 60 Days – Single Trip Premium Package <u>Age 60 to 84</u> .

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

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

MULTI-TRIP MEDICAL PLANS - Provides coverage for multiple individual *trips* outside *your* Canadian province or territory of residence, within the 365 *day* term of the Plan. Each *trip* outside of Canada provides coverage for up to 4, 8, 15, 30 or 60 *days* based on the Plan *you* have purchased. Coverage is unlimited when *your* individual *trip days* are entirely within Canada.

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

When you are outside Canada for any duration that exceeds your Plan days you have purchased, a Top-Up will be required.

If your trip days are entirely within Canada, but outside your Canadian province or territory of residence, a *Top-Up* is not required. See Automatic *Extension* of coverage on page 52, item #2.

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

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

Multi-Trip Medical Plans: while the *policy* is valid for one year, all terms and conditions, including *pre-existing medical condition* exclusions, are effective prior to EACH *departure date*.

If an individual *trip* begins during the *period of coverage* but extends beyond the *return date*, *you* can purchase:

- Top-Up coverage for any travel days that fall after the return date; or
- a new Multi-Trip Medical Plan for the next 365 day period

The total duration of *your* individual *trip*, from the *departure date* of that *trip* cannot exceed the coverage duration *you* have purchased for *your* Multi-Trip Medical Plan, unless it is topped up.

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

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

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

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

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

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

MEDICAL QUESTIONNAIRE

Applicants who are age 55 years and over purchasing Emergency Medical Insurance separately must complete a Medical Questionnaire, no longer than six months before the departure date to determine eligibility. A Medical Questionnaire is required for applicants purchasing a Package Plan or Trip Cancellation and Trip Interruption Insurance where the Sum Insured exceeds \$20,000, regardless of age.

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

It is important that *you* immediately notify *your* AMA agent at 1.866.989.6595 if any inaccuracy exists so that *you* can take immediate action before *you* travel to complete a new and accurate *Medical Questionnaire*.

Any errors in answering questions on the *Medical Questionnaire* (if required) specifically related to a claim will result in *you* paying the first \$5,000 CAD of the claim and the additional premium required based on true and accurate answers. Any willful errors or omissions could result in the *policy* being voided.

TEMPORARY RETURN TO YOUR CANADIAN PROVINCE OR TERRITORY OF RESIDENCE

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

DEDUCTIBLE

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

INSURED RISKS

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

BENEFITS

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

Please note that all eligible benefits are not always paid up-front. Please refer to Payment To Medical Providers on page 55.

1. Emergency Medical Treatment:

- a. Hospital accommodation up to the semi-private room rate (or an intensive or coronary care unit where medically necessary). If coverage expires during your hospitalization, benefits continue to a maximum of 365 days from your departure date or effective date, or until you are deemed medically able to travel in the opinion of the Medical Director of AMA Assistance, whichever is earlier;
- b. Physicians' fees;
- c. Laboratory tests and X-rays prescribed by the attending *physician* and approved in advance by *AMA Assistance*.

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

- d. Private duty nursing (other than by an *immediate family member*) during *hospitalization* when ordered by the attending *physician* and approved in advance by *AMA Assistance*;
- e. Local licensed ground ambulance service to the nearest hospital, physician or medical service provider in the event of a medical emergency (also covers local taxi fare in lieu of local ground ambulance service where an ambulance is medically necessary);
- f. Drugs requiring a prescription by a physician, excluding those necessary for the continued stabilization of a chronic medical condition;
- g. Casts, splints, trusses, braces, crutches, rental of wheelchair or other minor medical appliances when prescribed by a physician and approved in advance by AMA Assistance; and
- h. Treatment by a chiropodist, chiropractor, osteopath, physiotherapist, or podiatrist (other than an immediate family member), including X-rays, when approved in advance by AMA Assistance.

2. Emergency Dental Expenses:

Reimbursement of:

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

3. Hospital Allowance:

You are entitled to a hospital allowance of up to \$50 per day to a maximum of \$2,000 for your incidental expenses (for example, long distance calls, television rental) while hospitalized for at least 48 hours. This benefit will be paid as a lump sum after your release from hospital and upon approval of your claim.

4. Return of Vehicle:

When approved in advance by AMA Assistance:

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

5. Family Transportation:

When approved in advance by AMA Assistance, a return economy

airfare for an *immediate family member* or a close friend to attend *your* bedside (upon the recommendation of the attending *physician*) provided the *hospitalization* lasts at least 3 consecutive *days*. This benefit is provided immediately if *you* are mentally or physically handicapped, or under 26 years of *age* and dependent for support on the visiting *immediate family member*.

The person attending *your* bedside will be covered under the same terms and conditions of *your* AMA Emergency Medical Insurance. Reasonable out-of-pocket expenses incurred for commercial accommodation and meals, essential taxis and telephone calls by the attending *immediate family member* or close friend will be **reimbursed** to a maximum of \$1,500, subject to a limit of \$300 per *day*.

6. Subsistence Allowance:

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

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

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

7. Medical Repatriation:

When approved in advance and arranged by AMA Assistance:

- a. up to the cost of a one-way economy airfare to *your* Canadian province or territory of residence; or
- b. the fare for additional airline seats to accommodate a stretcher to return you to your Canadian province or territory of residence; or
- c. where medically necessary, air ambulance (paid in advance) to the nearest appropriate hospital or to a hospital in your Canadian province or territory of residence for the purpose of obtaining immediate medical treatment; or
- d. repatriation to the point of departure in economy class of one travel companion or one family member in the event of your medical repatriation; and
- e. up to \$900 subsistence allowance, subject to a limit of \$300 per *day*, will also be provided for commercial accommodation and meals, essential taxis and telephone calls for one *travel companion* or one *family* member if *you* are relocated to a place other than *your* point of departure; and
- f. fees for a qualified medical attendant (other than an *immediate family member*) to accompany *you* to *your* Canadian province or territory of residence when recommended by the attending *physician* and approved in advance and arranged by *AMA Assistance*. This includes return economy airfare and overnight lodging and meals (where necessary).

8. Return Excess Baggage:

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

9. Domestic Services:

When *you* have been repatriated under Benefit #7, page 15 and when approved in advance by *AMA Assistance*, **reimbursement** up to a maximum of \$250 per *policy* for domestic services such as housekeeping to *your* principal residence.

10. Medical Follow-up in Canada:

When *you* have been repatriated under Benefit #7, page 15 after being *hospitalized* during *your trip*, the following is covered in *your* Canadian province or territory of residence within 15 *days* of the repatriation:

- a. semi-private room in a *hospital* or rehabilitation centre or convalescent home up to \$1,000;
- b. home nursing care when medically required up to \$50 per *day* for up to 10 *days*;
- c. up to \$150 for the rental of crutches, standard walker, canes, trusses, orthopaedic corset, oxygen; and
- d. up to \$250 for ambulance or taxi services to receive medical care.

11. Escort of Insured Child(ren):

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

- a. organization, escort and payment up to the cost of a one-way economy airfare for the return of *Insured child(ren)* or grandchild(ren). This benefit is limited to *child(ren)* or grandchild(ren) under the *age* of 18 unless the *child(ren)* or grandchild(ren) is mentally or physically handicapped person(s) of any *age* who resides with *you*, all of whom depend on *you* for support; or
- b. **reimbursement** for services of a *caregiver* (other than an *immediate family member*) contracted by *you* for *your Insured child(ren)* or grandchild(ren). This benefit is limited to *child(ren)* or grandchild(ren) under the *age* of 18 unless the *child(ren)* or grandchild(ren) is mentally or physically handicapped person(s) of any *age* who resides with *you*, all of whom depend on *you* for support.

Provision of an attendant will be arranged by AMA Assistance.

12. Child Care:

When approved in advance by *AMA Assistance* in the event their parent or legal guardian is attending the bedside of an *Insured* who is *hospitalized* at their *trip* destination, **reimbursement** of up to \$1,000 for child care provided in *your* Canadian province or territory of residence by someone other than an *immediate family member*. This benefit is limited to *child(ren)* or grandchild(ren) under the age of 18 unless the *child(ren)* or grandchild(ren) is mentally or physically handicapped.

13. Non-Medical Emergency Evacuation:

Emergency mountain, sea or other remote location evacuation of *you* to the nearest accessible point by professional services up to \$5,000.

14. Return to Trip Destination:

When approved in advance by the Medical Director of AMA Assistance, a one-way economy airfare for you to be returned to your trip destination, within your period of coverage, after you are returned to your Canadian province or territory of residence for immediate medical treatment provided your attending physician determines that you require no further treatment for your medical emergency. Once you return to your trip destination, a recurrence of the sickness or injury which caused the initial medical emergency, or any problems or complications related thereto, will not be covered under this policy.

15. Return of Remains:

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

- a. the actual cost incurred for:
 - i. preparation of the deceased *Insured*; and
 - return of the deceased *Insured* in the *common carrier's* standard transportation container to *your home* province or territory; or

b. up to \$10,000 for burial or cremation at the place of death.

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

In addition, and subject to prior approval of AMA Assistance, return transportation for an immediate family member or close friend to identify the deceased Insured. The person identifying the deceased Insured will be covered under the same terms and conditions of your AMA Emergency Medical Insurance, but for no longer than three days. Reasonable out-of-pocket expenses incurred for commercial accommodation and meals, essential taxis and telephone calls by the attending immediate family member or and telephone calls by the attending immediate family member or close friend will be **reimbursed** to a maximum of \$300 per day to a maximum of three days.

16. Pet Return:

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

17. Pet Care:

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

18. Commercial Kennel Costs:

When approved in advance by AMA Assistance, **reimbursement** to a maximum of \$300 per *policy* for commercial kennel costs for your pet(s) (domestic dog(s), service animals and/or cat(s) only) when you are not able to return on your return date.

19. Prescription Assistance:

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

20. Vision Care:

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

21. Hearing Aid:

Reimbursement up to \$200 for the replacement at *your trip* destination of a hearing aid due to theft, loss or breakage during *your trip* and assistance to co-ordinate the replacement. Does not include batteries or ear molds.

22. Terrorism Coverage:

You are entitled to **reimbursement** of covered expenses when an act of terrorism directly or indirectly causes you a loss for which benefits would otherwise be payable in accordance with the terms and conditions of this policy.

23. Message Centre:

Leave urgent messages with AMA Assistance in the event that awkward time zones or telephone difficulties prevent you from contacting home. Leave urgent messages as a contact point for travel companions if you lose touch with one another. Phone numbers are located on the inside front cover and page 54.

24. Urgent Messages:

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

CONDITIONS

In addition to the General Conditions described on page 9 and 10, Emergency Medical Insurance is subject to the following conditions:

- In the event of a medical emergency, you must call AMA Assistance immediately otherwise your benefits under this policy may be limited. Phone numbers are located on the inside front cover and page 54.
- 2. In the event of an *injury* or *sickness*, *your* prior medical history will be reviewed as part of the claim process.
- 3. If the *Insurer* pays *your* health care provider or reimburses *you* for *covered expenses*, it will seek reimbursement from *your GHIP* and from any other medical reimbursement plan under which *you* may have coverage. *You* may not claim or receive in total more than 100% of *your* total *covered expenses*.

- 4. AMA Assistance must approve in advance any surgery or invasive procedure (including, but not limited to, cardiac catheterization), prior to the *Insured* undergoing such procedure. It remains your responsibility to inform your attending physician to call AMA Assistance for approval in advance, except in extreme circumstances where such action would delay surgery required to resolve a life-threatening medical crisis.
- During a medical emergency (whether prior to admission or during a covered hospitalization), the Insurer reserves the right to:
 - a. transfer you to one of our preferred health care providers; and/
 - b. return you to your Canadian province or territory of residence, for the medical treatment of your sickness or injury. If you choose to decline the transfer or return when declared medically able by the Medical Director of AMA Assistance, the Insurer will be released from any liability for expenses incurred for such sickness or injury after the proposed date of transfer or return.
- 6. The *Insurer* is not responsible for the availability, quality or results of any *medical treatment* or transportation, or the *Insured's* failure to obtain *medical treatment* or *hospitalization*.
- 7. Once you are deemed medically able to return to your Canadian province or territory of residence (with or without a medical escort) either in the opinion of the Medical Director of AMA Assistance or by virtue of discharge from hospital, your medical emergency is considered to have ended, whereupon any further consultation, treatment, recurrence or complication related to the medical emergency will no longer be eligible for coverage under this policy.
- 8. Any benefits payable for acts of terrorism are excess to all other recovery sources including, but not limited to, alternative or replacement travel options offered by airlines, tour operators, cruise lines and other travel suppliers and other insurance coverage (even when such coverage is described as excess) and are payable only after you have exhausted all such other recovery sources.

Any benefits payable are subject to an overall aggregate maximum limit relating to all in-force travel policies issued by *us*, including this *policy*. Coverage is available for up to two *acts of terrorism* within a calendar year and the maximum payable for each *act of terrorism* is \$8 million.

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

EXCLUSIONS

In addition to the General Exclusions described on page 10, no coverage shall be provided under Emergency Medical Insurance and no payment shall be made for any claim resulting in whole or in part from, or contributed to by, or as a natural and probable consequence of any of the following:

1. Pre-existing Medical Condition Exclusions

CANADA MEDICAL PLAN AND CANADA PACKAGE PLAN

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

SINGLE TRIP MEDICAL PLAN, MULTI-TRIP MEDICAL PLAN AND TOP-UP TO MULTI-TRIP MEDICAL PLANS

Age 54 and Under

Any sickness, injury or medical condition that is not **stable** in the **3 months prior to each departure date**.

A lung condition if, **during the 3 months prior to each departure date**, you required treatment with Prednisone.

Age 55 to 69

Any sickness, injury or medical condition that is not stable in the 3 months prior to each departure date.

Age 70 and Over

Any sickness, injury or medical condition that is not **stable** in the **6 months prior to each departure date**.

SINGLE TRIP PREMIUM PACKAGE, ANNUAL PREMIUM PACKAGE AND TOP-UP TO ANNUAL PREMIUM PACKAGES

Age 69 and Under

Any medical condition that was not stable in the **3 months** before your effective date. In addition to the "stable" requirement, we will not cover any expenses relating to your lung condition if, in the **3 months** before your effective date, you required treatment with Prednisone.

Age 70 to 84

Any medical condition that was not stable in the **6 months** before your effective date. In addition to the "stable" requirement, we will not cover any expenses relating to your lung condition if, in the **6 months** before your effective date, you required treatment with Prednisone.

All Ages

If you are topping up your AMA Multi-Trip Medical Plan you must meet the stability requirement based on the departure date of your current trip.

If you are topping up another insurer's policy you must meet the stability requirement based on the *effective date* of your AMA Top-Up.

- 2. Any hospital/medical expenses exceeding a maximum of \$25,000 if you are not covered by GHIP at the time of the claim.
- 3. For *Insured child(ren)* under two years of *age*: Any *sickness* or *medical condition* related to a birth defect.
- 4. Alcohol related *sickness*, death or *injury* or the abuse of medication, drugs, alcohol or any other toxic substance.
- 5. A disorder, disease, condition or symptom that is emotional, psychological or mental in nature unless same results in hospitalization and this fact is substantiated by hospital records. This exclusion does not apply to major psychiatric illness such as psychosis, schizophrenia and major affective mood disorders.
- Expenses incurred as a result of asymptomatic or symptomatic HIV infection, Acquired Immune Deficiency Syndrome (AIDS), AIDS related conditions (ARC) or the presence of HIV, including any associated diagnostic tests or charges.
- 7. A sickness, injury or related condition during a trip undertaken:
 - a. with the knowledge that *you* will require or seek *treatment* or surgery for that *sickness, injury* or related condition; or
 - b. for the purpose of obtaining treatment or surgery.
- 8. A sickness, injury or related condition for which:
 - a. future investigation or *treatment* (except routine monitoring) is planned before *your trip*; or
 - b. it was reasonable to expect *treatment* or *hospitalization* during *your trip*.
- 9. a. Your routine prenatal care or childbirth at any time during your trip;
 - b. Complications, conditions or symptoms of pregnancy during the nine weeks prior to or after and including the expected delivery date; and
 - c. Any costs for a child born during your trip.
- 10. Death or injury sustained:
 - a. while performing as a pilot or crew member, or travelling as a passenger on, any aircraft: flying machines or devices that are supported chiefly by their buoyancy in air, and includes, but is not limited to, any plane, balloon, kite balloon, airship, glider, hang glider, paraglider, parasail, parachute, kite and wingsuit. Travelling as a passenger on a common carrier is not subject to this exclusion;
 - b. while participating in any maneuvers or training exercises of the armed forces; or
 - c. during your professional participation in any sport; or
 - d. during *your* participation in any motorized or mechanically assisted *speed contests*.
- 11. Treatment, surgery, medication, services or supplies that are not medically necessary, or that you elect to have provided outside your Canadian province or territory of residence when medical evidence indicates that you could return to your Canadian province or territory of residence to receive such treatment. The delay to receive treatment in your Canadian province or territory

- of residence has no bearing on the application of this exclusion.
- 12. For *policy extensions* and *Top-Ups: sickness* or *injury* which first appeared, was diagnosed or received *medical treatment* after the *departure date* and prior to the *effective date* of the insurance *extension* or *Top-Up*.
 - If you are topping up your AMA Multi-Trip Medical Plan you must meet the stability requirement based on the *departure date* of your current *trip*.
 - If you are topping up another insurer's policy you must meet the stability requirement based on the *effective date* of your AMA Top-Up.
- 13. The replacement cost of an existing prescription, whether by reason of loss, renewal or inadequate supply, or the purchase of drugs and medications (including vitamins) which are commonly available without a prescription or which are not legally registered and approved in Canada. *AMA Assistance* will assist *you* with replacement (see Benefit #19, page 18).
- 14. a. Cardiac catheterization, angioplasty and/or cardiovascular surgery including any associated diagnostic test(s) or charges unless approved in advance by AMA Assistance prior to being performed, except in extreme circumstances where such surgery is performed as a medical emergency immediately upon admission to hospital; and/or
 - b. Magnetic resonance imaging (MRIs), computerized axial tomography (CAT) scans, sonograms, ultrasounds or biopsies unless approved in advance by *AMA Assistance*.
- 15. Services in connection with alternative *medical treatments* or general health examinations, regular care of a chronic condition, the continuing care and/or *medical treatment* of an acute *sickness* or *injury* after the initial *medical emergency* has ended (as determined by the Medical Director of *AMA Assistance*) or a medical consultation where the *physician* observes no *change* in a previously noted condition, symptom or problem.
- 16. Medical care or surgery that is cosmetic in nature.
- 17. Cataract surgery or services provided by a naturopath or an optometrist or in a convalescent home, nursing home, rehabilitation centre or health spa, excluding Benefit #10, page 16.
- 18. Air ambulance services unless approved in advance and arranged by *AMA Assistance*.
- 19. Upgrading charges or cancellation penalties for airline tickets, unless approved in advance by *AMA Assistance*.
- Damage to or loss of sunglasses (non-prescription), contact lenses, or prosthetic teeth or limbs, and resulting prescription thereof.
- 21. Emergency Medical Insurance benefits in *your* Canadian province or territory of residence except for Benefits #9 and #10, page 16.
- 22. Any loss resulting from an act of terrorism when, before your effective date, a Travel Advisory Notice was issued by Global Affairs Canada, advising Canadian residents to avoid non-essential travel or to avoid all travel to that country, region or city.

PACKAGE PLANS

SINGLE TRIP PREMIUM PACKAGE, ANNUAL PREMIUM PACKAGE, TOP-UP TO ANNUAL PREMIUM PACKAGE, CANADA PACKAGE PLAN AND NON-MEDICAL PREMIUM PACKAGE

INSURANCE COVERAGE	SINGLE TRIP PREMIUM PACKAGE, ANNUAL PREMIUM PACKAGE AND CANADA PACKAGE PLAN	NON- MEDICAL PREMIUM PACKAGE	BENEFIT MAXIMUM
Emergency Medical Insurance	1	Not Covered	Up to \$5 million
Trip Cancellation	✓	✓	Up to \$2,500 per <i>trip</i> to a maximum of \$10,000 per year for the Annual Premium Package. Up to the <i>Sum Insured</i> purchased for all other Package Plans.
Trip Interruption	√	√	Up to \$2,500 per <i>trip</i> to a maximum of \$10,000 per year for the Annual Premium Package. Unlimited for all other Package Plans.
Flight Accident	1	1	Up to \$100,000 for death or double dismemberment or \$50,000 for single dismemberment.
Travel Accident	1	1	Up to \$50,000 for death or double dismemberment or \$25,000 for single dismemberment.
Baggage Insurance	1	1	Up to \$1,500 per Insured and maximum \$3,000 per family.
Baggage Delay	1	1	Up to \$500
• Lost/ Stolen Birth Certificate/ Driver's License	√	√	Up to \$50 for one or both
Lost/Stolen Travel Visa or Passport	√	√	Reasonable and customary costs for replacement Up to \$200 for travel and accommodation expenses while waiting for replacement
Infant Protection	1	Not Covered	Up to \$5 million
Travel Voucher	1	1	Up to \$750

Eligibility and Purchase Conditions	 Subject to Eligibility and Purchase Conditions of individual insurance coverages. Must be purchased for the full duration of the trip. Purchase is subject to Eligibility on inside front cover. A Medical Questionnaire is not required for Single Trip Premium Package with a Sum Insured up to \$20,000 per Insured. For Single Trip Premium Package with a Sum Insured exceeding \$20,000 per Insured, a Medical Questionnaire is required, regardless of age.
Coverage Starts	Please refer to individual insurance coverages.
Coverage Ends	Please refer to individual insurance coverages.
Maximum Age	 Age 59 for Annual Premium Package or Top-Up to Annual Premium Package. Age 84 for Single Trip Premium Package. No maximum age for Non-Medical Premium Package and Canada Package Plan.
Maximum Benefit	Please refer to individual insurance coverages.
Maximum Trip Days Including Extension or Top-Up	365 Days with GHIP approval – Annual Premium Package Age 59 and under. 183 Days – Canada Package Plan, Non-Medical Premium Package and Single Trip Premium Package Age 59 and under. 60 Days – Single Trip Premium Package Age 60 to 84.

DEDUCTIBLE

No Deductible applies to the Package Plans.

ANNUAL PREMIUM PACKAGE

Provides coverage for multiple individual *trips* outside *your* Canadian province or territory of residence, within the 365 *day* term of each Plan. Each *trip* outside of *your* Canadian province or territory of residence provides coverage for up to 9, 16 or 30 *days*, based on the Annual Premium Package duration *you* have purchased.

The Annual Premium Package includes all the benefits included with the Single Trip Premium Package, however benefit maximum amounts payable per *policy* apply to the Trip Cancellation and Trip Interruption Insurance. The combined benefit maximum total payable for Trip Cancellation and Trip Interruption expenses is \$2,500 per *trip* and \$10,000 per *policy* year.

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

Please refer to page 11 for complete details on the Emergency Medical Insurance covered under the Annual Premium Package.

CONDITIONS

In addition to the General Conditions described on page 9 and 10, Package Plans are subject to the following condition:

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

EXCLUSIONS

In addition to the General Exclusions described on page 10, Package Plans are subject to the exclusions described in each of the included insurance coverages.

INFANT PROTECTION

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

- a. do not occupy a seat on the plane; and
- b. are travelling with a parent or legal guardian who has purchased the Single Trip Premium Package, Annual Premium Package, *Top-Up* to Annual Premium Package or Canada Package Plan.

For more information about the benefits, conditions and exclusions of *Infant* Protection, refer to the terms of Emergency Medical Insurance beginning on page 11.

TRAVEL VOUCHER

If you miss 70% of your trip because you had to interrupt your trip due to the admission to hospital or death of your immediate family member or your key-person not travelling with you, a \$750 Travel Voucher will be issued to you.

TRAVEL VOUCHER LIMITATIONS

- Eligibility to receive the benefit under the Travel Voucher is dependent upon approval and payment of a valid trip interruption claim under the Trip Cancellation and Trip Interruption Insurance of this policy.
- 2. The redeemable certificate:
 - a. is payable only to *you*, is non-transferrable and not redeemable in cash; and
 - b. must be used within 180 days of your early return.

TRIP CANCELLATION AND TRIP INTERRUPTION INSURANCE

Eligibility and Purchase Conditions	 May be purchased separately or as part of a Package Plan. Purchase is subject to Eligibility on inside front cover. A Medical Questionnaire is not required for a Sum Insured up to \$20,000 per Insured. For a Sum Insured exceeding \$20,000 per Insured, a Medical Questionnaire is required, regardless of age.
Coverage Starts	The latest of: Cancellation benefits start on the date and time of purchase of this coverage; Interruption benefits start on the departure date or effective date shown on your Declaration Page.
Coverage Ends	The earliest of: The date on which there was cause for cancellation prior to departure; or The date you return to your Canadian province or territory of residence; or The return date as shown on your Declaration Page.
Maximum Age	No maximum age if purchased separately or as part of Non-Medical Premium Package. Age 59 if purchased as part of an Annual Premium Package. Age 84 if purchased as part of Single Trip Premium Package.
Maximum Benefit	Up to Sum Insured.
Maximum <i>Trip</i> Days Including Extension or Top-Up	 365 Days – If purchased separately or as part of Annual Premium Package <u>Age 59 and under</u>, (with <u>GHIP</u> approval). 183 Days – Canada Package Plan, Non-Medical Premium Package and Single Trip Premium Package <u>Age 59 and under</u>. 60 Days – Single Trip Premium Package <u>Age 60 to 84</u>.

Trip Cancellation and Trip Interruption Insurance is included in the Single Trip Premium Package, the Annual Premium Package, the Non-Medical Premium Package Plan and the Canada Package Plan.

To have full coverage under Trip Cancellation and Trip Interruption Insurance, *you* must purchase coverage **within 48 hours** of making *your* initial deposit for the full value of the non-refundable portion of *your travel arrangements* for the full duration of *your trip*. Your trip must involve travel to, from or within Canada.

DEDUCTIBLE

No *Deductible* applies to Trip Cancellation and Trip Interruption Insurance.

INSURED RISKS TRIP CANCELLATION AND TRIP INTERRUPTION INSURANCE

Sickness, Injury, Quarantine and Death

1. You or your travel companion develop(s) a medical condition.

- Your immediate family member or your key-person, your travel companion's immediate family member or their key-person, develops a medical condition or your friend or your travelling companion's friend is admitted to hospital with an emergency.
- 3. A *medical condition* which, in the written opinion of the attending *physician*, prevents *you* or *your travel companion* from participating in a sporting event when the purpose of *your trip* was to participate in that sporting event.
- 4. You or your travel companion are medically unable to receive an injection or medication that is suddenly required for entry into a country, region or city originally ticketed in your travel arrangements provided that such requirement was not mandatory on the date of application for insurance.
- 5. You, your spouse, your travel companion or your travel companion's spouse are quarantined.
- 6. The person whose guest *you* will be during *your trip* is quarantined, admitted to a *hospital* in an *emergency* or dies.
- 7. You or your travel companion die(s).
- 8. Your immediate family member or your key-person, your travel companion's immediate family member or their key-person, dies.
- 9. Your or your travel companion's friend dies.
- 10. You are required to interrupt your trip to attend a funeral or go to the bedside of a hospitalized immediate family member.

Pregnancy or Adoption

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

Accommodations or Transportation

- 14. You, your spouse, your travel companion or your travel companion's spouse are unable to occupy your/their principal residence because of an event that is independent of any intentional or negligent act on your/their part.
- 15. You, your spouse, your travel companion or your travel companion's spouse are unable to operate your/their place of business because of an event that is independent of any intentional or negligent act on your/their part.
- 16. Your or your travel companion's principal residence or place of business is burglarized within seven days of the departure date or during your trip.
- Fire, vandalism, burglary or other disaster renders your trip destination accommodations uninhabitable for the period of your trip.

- 18. Cancellation of a pre-paid coach tour included in *your trip* (for any reason except *default*) prior to *your* originally scheduled *departure date*: *we* will **reimburse** *you* up to \$2,500 for the non-refundable prepaid airfare of the *common carrier* that *you* booked to connect with the cancelled coach tour.
- 19. Cancellation of a flight by an airline carrier that is providing a portion of *your trip*: we will **reimburse** *you* up to \$1,000 for the non-refundable prepaid airfare of a domestic flight (covers flights booked for travel within Canada only) that *you* had booked to connect with the cancelled flight.
- 20. An unannounced strike by *your common carrier* for which *you* hold a valid ticket on.
- 21. Your primary reason for the *trip* is to attend a wedding, funeral or school graduation ceremony, or other commercial entertainment event for which *you* have purchased tickets, and the scheduled time of arrival is delayed for a reason beyond *your* control.

Weather

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

Employment and Education Obligations

- 23. You, your spouse, your travel companion or your travel companion's spouse are called to essential emergency service as a reservist, firefighter, emergency medical personnel, police force or armed forces during your trip.
- 24. You, your spouse, your travel companion or your travel companion's spouse involuntarily lose a permanent job (excluding contract or self-employment) due to layoff or dismissal without just cause, when actively employed with the same employer for at least six months prior to the application for insurance.
- 25. You, your spouse, your travel companion or your travel companion's spouse are transferred by your/their respective employer and must move from your/their respective principal residence (the person who must relocate must be a full-time active employee with that same employer for this benefit to apply).
- 26. Cancellation of your or your travel companion's business meeting, conference or convention that is the main intent of your trip and was scheduled before you purchased this insurance, provided the cancellation is for a reason beyond your control or the control of your employer. This event must be between companies with unrelated ownership and, in the case of a conference or convention, you or your travel companion must be a registered delegate.
- 27. The requirement that *you* or *your travel companion* attend a university or college course examination on a date that occurs during *your trip*, provided that the examination date which was published prior to *your* application for insurance, was subsequently changed after *your travel arrangements* were made and after *you* purchased this insurance.
- 28. The rescheduling of university or college classes of *you* or *your travel companion* to a date that occurs during *your trip* due to circumstances beyond *your* or *your travel companion's* control provided that both the unusual circumstances and the resulting rescheduling occurred after *you* purchased this insurance.

Government and Legal

- 29. Your or your travel companion's travel visa is not issued for a reason beyond your/their control.
- 30. Your or your travel companion's passport is not issued within the time confirmed to you/them in writing by Passport Canada. This applies only to Canadian citizens.
- 31. You, your spouse, your travel companion or your travel companion's spouse are, during your trip, a) called to jury duty, or b) subpoenaed to be a witness, or c) required to appear as a defendant in a civil suit.
- 32. Global Affairs Canada issues a Travel Advisory Notice after *you* purchase *your* insurance, advising or recommending that Canadian residents should avoid non-essential travel or avoid all travel to that country, region or city included in *your trip*. This applies only to Canadian residents.

Hijacking

33. You, your spouse, your travel companion or your travel companion's spouse are hijacked.

BENEFITS

TRIP CANCELLATION AND TRIP INTERRUPTION INSURANCE

1. TRIP CANCELLATION (before departure)

IF YOU MUST CANCEL

If cancelling a *trip* as the result of the occurrence of any one of the insured risks 1-33 before *your* scheduled *departure date*, please advise *your* AMA Travel Agent or the *travel supplier* with whom *you* booked *your travel arrangements* within 72 hours of the occurrence of the insured risk forcing cancellation prior to the *departure date*. Only the sums that are non-refundable on the *day* the insured risk occurs, or within the 72 hour period following the event forcing cancellation, shall be considered for the purpose of the claim.

If you are unable to travel due to an insured risk listed immediately above that occurs before you leave home, we will **reimburse** you, subject to the *Sum Insured* and to all terms and conditions of this *policy*:

- 1. For the prepaid unused portion of *your trip* that is non-refundable and non-transferable to another travel date.
- 2. The published cancellation penalties imposed by hotels for unused accommodations.
- The change fee charged for rebooking the travel arrangements as originally booked for your trip when such an option is made available;
- 4. In addition, if *your travel companion* must cancel his/her *trip* due to an insured risk applicable to him/her, and *you* decide to go on *your trip* as planned, *we* will cover the cost of the next occupancy charge up to the *Sum Insured*.
- 5. At *your* option, the cost to catch up to *your trip*, if *you* qualify to cancel but choose instead to continue on *your trip*, providing the cost to catch up is less than the cost to cancel *your trip*.
- 6. Up to \$800 for alternative *travel arrangements* on a scheduled *common carrier* to the planned *trip* destination to allow arrival in time for an event covered under insured risk #21.

Exclusive Benefit

When your booking is made with AMA Travel, CAA Travel or on amatravel.ca.

CANCEL FOR ANY OTHER REASON

If you cancel for any other reason and decide not to travel before you leave home, we will provide coverage as follows:

• You may cancel up to 24 hours immediately before the scheduled <u>departure date</u> (as shown on your Declaration Page) and you will be **reimbursed** for **50%** of the Sum Insured for the prepaid portion of your trip that is non-refundable and non-transferable to another date.

If you purchased your policy more than 48 hours after making your initial deposit, your claim will not be payable if you cancel for any other reason and decide not to travel.

2. TRIP INTERRUPTION OR DELAY

IN THE EVENT YOU MUST INTERRUPT OR DELAY

Please call AMA Assistance immediately to ensure that you do not incur expenses which are not covered. Phone numbers are located on the inside front cover and page 54.

If your trip is interrupted due to an insured risk listed immediately above that occurs on or after the day you plan to leave your Canadian province or territory of residence, we will **reimburse** you, subject to the Sum Insured and all terms and conditions of this policy:

- For the fully prepaid unused portion of your trip that is nonrefundable and non-transferable to another travel date less the prepaid unused transportation to your Canadian province or territory of residence.
- The additional cost of your one-way transportation by the most cost-effective itinerary (being the lesser of a one-way fare or change fee on existing tickets) to your or your group's next trip destination, or to return to your Canadian province or territory of residence.
- 3. We will also **reimburse**, when no earlier transportation arrangements are available, *your* additional and unplanned hotel and meal expenses, *your* essential phone calls and taxi fares to a maximum of up to \$250 per *day*: to a maximum of \$2,500.
- The published cancellation penalties imposed for the early return of a rental vehicle prior to the contracted date of return.
- The published cancellation penalties imposed by hotels for unused accommodations.
- 6. The option to purchase a round-trip ticket and **reimbursement** for the cost of the round-trip ticket, up to the amount of a one-way *fare* back to *your* Canadian province or territory of residence to attend a funeral or the bedside of a *hospitalized immediate family member*.

INSURED RISKS MISCONNECTION & TRAVEL DELAY

Special Note: Misconnection & Travel Delay coverage is intended to help *you* with the extra expense *you* incur to catch up to *your trip* if *you* experience a misconnection or travel delay. *You* need to make reasonable efforts to continue on *your trip*.

- 1. You miss your next connecting common carrier because the common carrier that is providing transportation for a portion of your trip leaves later than originally scheduled as a result of a schedule change.
- The common carrier that is providing transportation for a portion of your trip leaves earlier than originally scheduled as a result of a schedule change and the ticket you have purchased for your prior connection via another common carrier becomes unusable.
- 3. You or your travel companion are delayed for at least four hours in arriving at your trip destination or returning to your Canadian province or territory of residence due to the delay or schedule change or cancellation of your or your travel companion's common carrier.
- 4. You miss a connection or must interrupt your trip because of the delay of your or your travel companion's private passenger vehicle when the delay is caused by the mechanical failure of the private passenger vehicle, a traffic accident, an emergency policedirected road closure, weather conditions, earthquakes or volcanic eruptions. You or your travel companion must have calculated the departure with the private vehicle to include enough travel time to comply with the travel supplier's required check-in procedure.
- 5. You miss a connection or must interrupt your trip because of a delay in clearing customs and security controls due to your or your travel companion's mistaken identity.
- 6. You miss a connection or must interrupt your trip because your cruise ship is delayed or the itinerary is modified due to the emergency medical problem of another passenger.

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

- 1. Strike (other than an unannounced strike), labour disruption;
- 2. Grounding of aircraft for failure to satisfy government safety regulations or security alerts.

BENEFITS

MISCONNECTION & TRAVEL DELAY

The maximum benefit amount for Misconnection & Travel Delay will be reduced by any amounts paid or payable by any common carrier responsible for *your* misconnection or travel delay.

If any of the insured risks listed immediately above prevent you from travelling as shown on your Declaration Page we will reimburse you:

- a) If the insured risk #1 or #2 listed above occur as a result of a schedule change implemented by the airline prior to your originally scheduled departure date, we will reimburse up to \$1,000 for the following:
 - i. the unused prepaid portion of *your trip* (less the prepaid unused transportation to *your* Canadian province or territory

- of residence) that is non-refundable and non-transferable to another travel date (provided such expenses are not reimbursable by any other source); plus
- ii. the additional cost of your one-way transportation by the most cost-effective itinerary (being the lesser of a one-way fare or change fee on existing tickets) to your next trip destination or to return to your Canadian province or territory of residence.
- b) For insured risks #3 through #6 listed above, we will **reimburse** you up to \$2,500 for the following:
 - i. the unused prepaid portion of *your trip* (less the prepaid unused transportation to *your* Canadian province or territory of residence) that is non-refundable and non-transferable to another travel date (provided such expenses are not reimbursable by any other source); plus
 - ii. the additional cost of your one-way transportation by the most cost-effective itinerary (being the lesser of a oneway fare or change fee on existing tickets) to your next trip destination or to return to your Canadian province or territory of residence.
- Additional and unplanned hotel and meal expenses, essential phone calls and taxi fares to a maximum of \$250 per day, to a maximum of \$2,500.
- 3. Up to \$100 for additional pet care expenses if the misconnection or travel delay results in *your* returning to *your* Canadian province or territory of residence 24 hours later than originally scheduled.

INSURED RISKS DELAYED RETURN

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

BENEFITS

DELAYED RETURN

If any of the insured risks listed immediately above happens after you leave home and makes it impossible for you to return to your Canadian province or territory of residence as shown on your Declaration Page, we will reimburse you for the length of time that you are prevented from travel for the following:

- 1. Additional and unplanned hotel and meal expenses, essential phone calls and taxi fares to a maximum of \$250 per *day*, to a maximum of \$2,500.
- The additional cost of your one-way transportation by the most cost-effective itinerary (being the lesser of a one-way fare or change fee on existing tickets) to return to your Canadian province or territory of residence.
 - If the delay is a result of a *medical condition*, it must be on the advice of the attending *physician* at *your trip* destination.

OTHER TRIP CANCELLATION AND TRIP INTERRUPTION INSURED RISKS AND BENEFITS

- 1. In the event *your travel companion's plane* is delayed by weather conditions, earthquakes or volcanic eruptions for at least 30% of *your trip*, and *your travel companion* decides not to go on the *trip* as booked, we will **reimburse** *you* the cost of *your* next occupancy charge up to the *Sum Insured*.
- 2. In the event you die from a covered medical condition on a trip following your hospitalization or accidental death, we will reimburse your estate, up to the Sum Insured, for your prepaid unused travel arrangements. We will also reimburse your estate the following reasonably incurred expenses for:
 - a) i) the preparation of the deceased *Insured*; and
 - ii) return transportation cost of the deceased *Insured* in the *common carrier* standard transportation container to the scheduled point of departure; or
 - b) up to \$10,000 for cremation or burial of the deceased *Insured* at the location where death occurs.

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

In addition, subject to prior approval by AMA Assistance, the return economy transportation for an immediate family member or close friend to identify the deceased Insured. The person identifying the deceased Insured will be covered under the same terms and conditions of the deceased Insured's AMA Emergency Medical Insurance (applicable only if the deceased Insured had purchased Emergency Medical Insurance for this trip), but for no longer than three days. Reasonable out-of-pocket expenses incurred for commercial accommodation and meals, essential taxis and telephone calls by the attending immediate family member or close friend will be **reimbursed** to a maximum of \$300 per day to a maximum of three days. To file a claim, original receipts from commercial organizations must be supplied.

- 3. Up to \$250 to cover unused non-refundable prepaid costs for excursions booked onboard *your* cruise ship that are not included as part of *your* original *trip* cost if *you* must cancel the balance of *your trip*.
- 4. If you miss 70% of your trip because you had to interrupt your trip due to the admission to hospital or death of your immediate family member or your key-person not travelling with you, a \$750 Travel Voucher will be issued to you. The voucher is non-transferable and must be used within 180 days of the early return date and must be used at the AMA travel agency that originally booked the interrupted trip.
- 5. If you purchased a Single Trip Premium Package, Annual Premium Package or a Non-Medical Premium Package and the flight you are booked to fly on is overbooked and you are denied boarding as a result, we will **reimburse** up to \$1,000 for the prepaid unused portion of your trip that is non-refundable and non-transferable to another date, provided your trip duration was a minimum of seven days.
- 6. If a cruise or a tour that is included in *your trip* and insured under *your* AMA Travel Insurance *policy* is cancelled for any reason except *default*, and the cancellation occurs:
 - a) Before you leave home, we will reimburse you for your nonrefundable prepaid airfare that is not part of your cruise or tour up to \$2,500.
 - b) After you leave home but prior to the cruise or tour departure,

we will **reimburse** you up to \$2,500 for the lesser of:

- the change fee charged by the airline carrier(s) to return you to your Canadian province or territory of residence, if such an option is available; or
- ii) the extra cost of a one-way fare via the most cost-effective itinerary to return you to your Canadian province or territory of residence.
- 7. If your or your travel companion's passport and/or travel visa is lost or stolen during your trip and you are unable to continue on your trip or to return to your Canadian province or territory of residence as originally planned, we will reimburse you for:
 - a) reasonable travel and accommodation expenses until the travel documents are replaced; and
 - b) up to \$1,000 for the additional cost of one-way transportation by the most cost-effective itinerary (being the lesser of a oneway economy transportation or the change fee charged by the airline on existing tickets if this option is available) to your next destination or to return you to your Canadian province or territory of residence.
- 8. **Reimbursement** up to a maximum amount of \$5,000 per *Insured* in respect of any one *trip*:
 - for default prior to your departure date: the non-refundable portion of the amount that you prepaid for such undelivered travel services up to the Sum Insured for the Trip Cancellation coverage that you purchased in connection with your trip; or
 - ii) for default after your departure date:
 - the non-refundable portion of the amount that *you* prepaid for such undelivered *travel services* up to the *Sum Insured* for Trip Interruption coverage that *you* purchased in connection with *your trip* except prepaid unused transportation to *your* Canadian province or territory of residence and subject to the following benefit limits;
 - your additional and unplanned hotel and meal expenses, your essential phone calls and taxi fares up to a maximum of \$200 per day for up to three days; and
 - up to the *Sum Insured* for the extra cost of *your* economy class transportation via the most cost-effective itinerary to *your* next destination or to return *you* to *your* Canadian province or territory of residence.
- Reimbursement of covered expenses when an act of terrorism directly or indirectly causes you a loss for which benefits would otherwise be payable in accordance with the terms and conditions of this policy.

CONDITIONS

In addition to the General Conditions described on page 9 and 10, Trip Cancellation and Trip Interruption Insurance is subject to the following conditions:

- You must not know (nor be aware of) any reason, circumstance, event or medical condition affecting you, an immediate family member, a travel companion or an immediate family member of a travel companion which may eventually prevent you from starting and/or completing your trip as booked when you purchase this insurance.
- 2. Trip Cancellation, interruption or delay of the *trip* for a *medical condition* must be recommended by the attending *physician* in the locality where the *medical condition* occurred.

- 3. Benefits in the event of default are payable provided that:
 - a. you have contracted with a travel supplier who defaults;
 - b. as a result of the *default*, *you* do not receive part or all of the *travel services* for which *you* have contracted; and
 - c. you cannot recover all of the cost of such undelivered travel services either from the travel supplier, any federal, provincial or other compensation fund, or from any other source that is legally responsible or under contract to reimburse you for the cost of such undelivered travel services.

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

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

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

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

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

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

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

EXCLUSIONS

In addition to the General Exclusions described on page 10, no coverage shall be provided under Trip Cancellation and Trip Interruption Insurance and no payment shall be made for any claim resulting in whole or in part from, or contributed by, or as a natural and probable cause of any of the following:

- 1. Death of a person who is ill when the purpose of *your trip* is to visit that person.
- 2. Alcohol related *sickness*, death or *injury* or the abuse of medication, drugs, alcohol or any other toxic substance.
- 3. Your disorder, your disease, your condition or your symptom that is emotional, psychological or mental in nature unless same results in hospitalization and this fact is substantiated by hospital records. This exclusion does not apply to major psychiatric illness such as psychosis, schizophrenia and major affective mood disorders.

4. A medical condition:

- that occurs during a *trip* when *you* knew that *treatment* may be sought or required for that condition; and/or
- for which it was reasonable to expect before *you* left *your* Canadian province or territory of residence that *you* would need *treatment* during *your trip*; and/or
- for which future investigation or treatment was planned before you left your Canadian province or territory of residence; and/or
- which caused symptoms that would have caused an ordinarily prudent person to seek treatment in the three months before leaving your Canadian province or territory of residence, and/or
- that caused a physician to advise you not to go on your trip.
- 5. *Travel arrangements* and expenses or losses related to *travel arrangements* not insured by this *policy*.
- 6. A travel visa that is not issued because of a late application.
- 7. Any loss resulting from an act of terrorism when, before the effective date for this insurance, a Travel Advisory Notice was issued by Global Affairs Canada, advising Canadians to avoid non-essential travel or to avoid all travel to that country, region or city.
- 8. In the event of *default*, any loss or expense, incurred by *you*:
 - a. which is recovered or recoverable from any other source, including any federal, provincial or other compensation fund, or from any other source that is legally responsible or under contract to reimburse you;
 - b. if at the time of booking, the travel supplier is bankrupt, insolvent or in receivership or has sought protection from creditors under any bankruptcy, insolvency or similar legislation;
 - arising as a consequence of the bankruptcy or insolvency of a retail travel agent, agency or broker;
 - d. arising as a result of the default of a foreign travel supplier if the travel services to be provided by such foreign travel supplier are not part of a package travel arrangement;
 - e. if you have not purchased AMA Trip Cancellation and Trip Interruption Insurance in connection with your travel arrangements;
 - f. Insurance purchased or trips booked after default; or
 - g. for travel services that were actually provided.
- 9. Any nonrefundable pre-paid *travel services* when the *trip* was paid for through a points or rewards program.

TRAVEL ACCIDENT INSURANCE

Travel Accident Insurance is included in the Single Trip Premium Package, the Annual Premium Package, the Non-Medical Premium Package and the Canada Package Plans. May not be purchased separately.

DEDUCTIBLE

No Deductible applies to Travel Accident Insurance.

INSURED RISKS

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

Death or dismemberment as a result of *injury* sustained during the *trip* while *you* are travelling as a passenger, not as pilot or crew member, aboard multi-engine aircraft operated by, and licensed to, a regularly scheduled airline on a regularly scheduled trip operated between licensed airports and holding a valid Canadian Air Transport Board license, Charter Air Carrier license, or its foreign equivalent, and operated by a certified pilot.

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

B. Travel Accident Insurance - maximum benefit up to \$50,000

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

BENEFITS

Subject to all terms and conditions of this *policy*, the greatest of the following benefits is payable for all losses resulting within 12 months from the date of a single accident described as an insured risk and as a direct result thereof:

- 1. 100% of the maximum benefit for loss of life, dismemberment of two limbs, loss of sight in both eyes or loss of speech or hearing;
- 2. 50% of the maximum benefit for dismemberment of one limb or loss of sight in one eye.

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

CONDITIONS

In addition to the General Conditions described on page 9 and 10, Travel Accident Insurance is subject to the following conditions:

 The amount payable in respect of any one accident will not exceed \$100,000 per *Insured*. The benefit for dismemberment of two

- limbs is payable only if such dismemberment results from a single accident.
- 2. If you have more than one accidental bodily injury during your trip, we will pay the applicable insured sum only for the one accident that entitles you to the largest benefit amount.
- 3. If other accidental death or dismemberment policies which we have previously issued to you are concurrently in-force with this policy, making the aggregate indemnity in excess of \$150,000, the present insurance shall be void. If you are entitled to similar benefits through any other insurance plan, the benefits payable under this policy shall be pro-rated.

EXCLUSIONS

In addition to the General Exclusions described on page 10, no coverage shall be provided under Travel Accident Insurance and no payment shall be made for any claim resulting in whole or in part from, or contributed by, or as a natural and probable consequence of any of the following:

- 1. Death or injury sustained:
 - a. while performing as a pilot or crew member of, or travelling as a passenger on, any aircraft: flying machines or flying devices that are supported chiefly by their buoyancy in air, and includes, but is not limited to, any plane, balloon, kite balloon, airship, glider, hang glider, paraglider, parasail, parachute, kite and wingsuit. Travelling as a passenger on a common carrier is not subject to this exclusion;
 - b. while participating in any maneuvers or training exercises of the armed forces;
 - c. during your professional participation in any sport; or
 - d. during *your* participation in any motorized or mechanically assisted *speed contests*.
- 2. A criminal act or an attempt to commit such an act by you, an immediate family member, a travel companion or your beneficiary.
- 3. Alcohol related *sickness*, death or *injury* or the abuse of medication, drugs, alcohol or any other toxic substance.
- 4. Your disorder, your disease, your condition or your symptom that is emotional, psychological or mental in nature unless same results in hospitalization and this fact is substantiated by hospital records. This exclusion does not apply to major psychiatric illness such as psychosis, schizophrenia and major affective mood disorders.
- A loss caused directly or indirectly from an existing disease or bodily infirmity, even if the proximate cause of its activation or reactivation is the result of an accidental bodily *injury*.
- 6. Any act of terrorism.

BAGGAGE INSURANCE

Baggage Insurance is included in the Single Trip Premium Package, the Annual Premium Package, the Non-Medical Premium Package and the Canada Package Plans. May not be purchased separately.

Our overall maximum aggregate liability under all AMA Travel Insurance policies purchased for any one *trip* is \$1,500 per *Insured* and a maximum of \$3,000 per *family*.

DEDUCTIBLE

No Deductible applies to Baggage Insurance.

INSURED RISKS

Baggage Insurance covers loss of, or damage to, the baggage and personal effects *you* own and that *you* use during the *trip* by reason of theft, burglary, fire or transportation hazards during the *trip*.

BENEFITS

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

1. Baggage Theft, Loss or Damage

Reimbursement of up to a maximum of \$500 for any item or set of items that are lost, stolen, or damaged during *your trip*. Jewellery or cameras (including camera equipment) are respectively considered as a single item.

2. Replacement of Lost/Stolen Passport or Travel Visa

If you have coverage with a Single Trip Premium Package, the Annual Premium Package or a Non-Medical Premium Package and if your passport and/or travel visa is lost or stolen while travelling outside Canada on your trip we will **reimburse** you:

- a) The reasonable and customary costs for the replacement of your passport and/or travel visa; and
- b) Up to a maximum of \$200 with respect to the travel and accommodation expenses *you* reasonably incurred while waiting to receive the replacement passport and/or travel visa.

3. Replacement of Lost/Stolen Birth Certificate or Driver's License

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

4. Baggage Delay

If your checked baggage is misdirected or delayed more than 10 hours by the *common carrier* while on *your trip*, we will **reimburse** up to an aggregate total of \$500 for:

- a) The purchase of essential items of personal clothing and necessary toiletries while on *your trip*; and
- b) The rental cost of sporting equipment if the purpose of *your trip* was to participate in a sporting event and *your* sporting equipment was included in the misdirected checked baggage.

c) The rental cost of a wheelchair for use during your trip.

This benefit does not apply to baggage delayed after *you* have returned to *your* Canadian province or territory of residence.

CONDITIONS

In addition to the General Conditions described on page 9 and 10, Baggage Insurance is subject to the following conditions:

- 1. In the event of loss due to theft, burglary, robbery or malicious mischief, you must promptly notify and obtain supporting documentary evidence from the police, or if the police are unavailable, the hotel manager, tour guide or transportation authority immediately upon discovery. Failure to report the loss as stated above shall invalidate any claim under this insurance for such loss.
- 2. You must notify AMA Assistance of a loss within 24 hours of the loss occurrence.
- 3. In the event of loss *you* must take all precautions to protect, save or recover the property immediately.
- 4. The *Insurer* reserves the right to repair or replace damaged or lost property with other property of like quality and value and shall not be liable beyond the actual cash value of such property at the time of loss or damage.
- 5. In the event of loss of an article which is part of a pair or set, the measure of loss shall be at a reasonable and fair proportion of the total value of the pair or set, giving consideration to the importance of such article and with the understanding that such loss shall not be construed to mean total loss of the pair or set.
- 6. When, after a reasonable period of time, lost property is not found, any claim therefore will be adjusted and paid.

EXCLUSIONS

In addition to the General Exclusions described on page 10, no coverage shall be provided under Baggage Insurance and no payment shall be made for any claim resulting in whole or in part from, or contributed by, or as a natural or probable consequence of any of the following:

- 1. Animals, perishable items, bikes that are not checked as baggage with the common carrier, household items and furnishings, artificial teeth or limbs, hearing aids, sunglasses, contact lenses, money, tickets (except for administrative fees required to reissue such tickets), securities, documents, items related to your occupation, antiques or collector items, items that are fragile, items that are obtained illegally, or articles that are insured on a valued basis by another insurer.
- 2. *Physical damage or loss* resulting from wear and tear, deterioration, defect or mechanical breakdown.
- 3. Unaccompanied baggage, any items that are left unattended, personal property left in an unattended vehicle, unlocked trunk and any jewellery or cameras placed in the custody of a *common carrier*.

- 4. In instances of theft or losses unreported to authorities.
- Computer software, including any expenses incurred for the restoration of any lost or corrupted data.
- Property damage caused by the confiscation, detention, requisition or destruction of *your* baggage and personal effects by customs or other authorities.
- 7. Articles purchased during *your trip* without original receipts attached to the claim.
- Property caused by breaking or scratching of fragile articles other than cameras or binoculars, unless caused by fire or accident to the vehicle in which they are being carried.
- Property insured under any homeowner's or tenant's insurance policy.
- 10. Any loss reimbursed by the common carrier, hotel or travel supplier including any services rendered by such common carrier, hotel or travel supplier.
- 11. Any act of terrorism.

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BOUNCEBACK INSURANCE

Eligibility and Purchase Conditions	May be purchased by Canadian residents only, and in conjunction with another AMA Travel Insurance plan. Purchase is subject to Eligibility on inside front cover.
Coverage Starts	The departure date or effective date shown on your Declaration Page.
Coverage Ends	The return date as shown on your Declaration Page.
Maximum Age	No maximum age.
Maximum Benefit	Up to \$2,000.
Maximum Trip Days	• 365 <i>Days</i> .

DEDUCTIBLE

No Deductible applies to BounceBack Insurance.

INSURED RISKS

If you have purchased BounceBack Insurance and have to return to your Canadian province or territory of residence from your trip destination before your return date because of one of the following reasons:

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

we will **reimburse** you for your round-trip transportation expenses to return you to your Canadian province or territory of residence from your trip destination and, within your period of coverage, return you back to that *trip* destination.

BENEFITS

Specifically, we will **reimburse** your actual expenses up to a maximum of \$2,000 for the cost of your economy class transportation to your Canadian province or territory of residence via the most cost effective itinerary. In the case of a death of an immediate family member, we will pay the lesser amount of the cost of your round-trip transportation expenses to return to your Canadian province or territory of residence or the place of residence of the deceased. Expenses and benefits are subject to this policy's maximums, exclusions and limitations.

CONDITIONS

BounceBack Insurance is subject to the General Conditions described on page 9 and 10.

EXCLUSIONS

In addition to the General Exclusions described on page 10, no coverage shall be provided under BounceBack Insurance and no payment shall be made for any claim resulting in whole or in part from, or contributed to by, or as a natural and probable consequence of any of the following:

- 1. A pre-existing medical condition of an immediate family member for which treatment was received in the 3 months before the purchase of this insurance, resulting in hospitalization or death of the immediate family member while you are on your trip.
- 2. A reason that *you* could reasonably have expected would require *you* to return to *your* Canadian province or territory of residence prior to *your return date* at the time *you* purchased the BounceBack Insurance.
- 3. Your return back to your trip destination after the return date indicated on your Declaration Page.
- 4. Any act of terrorism.

RENTAL VEHICLE DAMAGE Insurance

Eligibility and Purchase Conditions	 May be purchased by Canadian residents only. Purchase is subject to Eligibility on inside front cover. Must be purchased for the total duration you are in possession of the rental vehicle.
Coverage Starts	The latest of: The time you take control of the rental vehicle; or The departure date or effective date shown on your Declaration Page.
Coverage Ends	The earliest of: • The time the commercial rental agency assumes control of the rental vehicle at their place of business or elsewhere; or • The expiry of the rental agreement or the time when such agreement is terminated; or • The return date as shown on your Declaration Page.
Maximum Age	• No maximum age.
Maximum Benefit	Up to \$60,000.
Maximum <i>Trip</i> Days	• 50 <i>Days</i> .

DEDUCTIBLE

No Deductible applies to Rental Vehicle Damage Insurance.

INSURED RISKS

This coverage provides insurance protection against *physical damage* or loss of a vehicle rented by you from a commercial rental agency.

BENEFITS

Subject to all terms and conditions of this *policy*, *you* will be indemnified up to a maximum of \$60,000 for:

- 1. Physical damage or loss of a vehicle rented by you and operated by you or by a person otherwise permitted to operate such a rental vehicle under the rental agreement, while covered under this policy, but limited to the amount of loss which would have been waived had you purchased a collision damage waiver from the commercial rental agency, less any amount:
 - a. assumed, waived or paid by the commercial rental agency or its insurer; and
 - b. payable by your personal or business vehicle insurance policy or other insurance policy.

- Reasonable costs of towing expenses, general average salvage, fire department charges, customs duties and loss of use of the rental vehicle.
- 3. Unused *days* under *your* rental agreement if the rental *vehicle* is damaged and deemed inoperable during the term of *your* rental agreement.
- 4. *Our* defending in *your* name, on *your* behalf and at *our* cost, any civil action brought against *you* on account of the loss or damage to the rental *vehicle*.
- 5. *Our* payment of all costs assessed against *you* in any civil action we defend and any interest accruing after the judgment upon that part of the judgment that is within the limit of *our* liability.

CONDITIONS

In addition to the General Conditions described on page 9 and 10, Rental Vehicle Damage Insurance is subject to the following Conditions:

- 1. You must hold a valid driver's license and must meet the age requirements of the rental agreement.
- Prior to accepting the rental vehicle, you shall examine it and file a written report of existing damages with the commercial rental agency.
- 3. You must take all reasonable and necessary steps to protect the rental *vehicle* and prevent damage to it.
- 4. Prior to or upon returning the rental *vehicle* to the *commercial* rental agency, you shall file a written report with such agency detailing all *physical damage or loss* which has occurred during the term of the rental agreement.
- 5. You shall immediately file a report of physical damage or loss for which you may be liable with AMA Assistance.
- No evidence of physical damage or loss shall be removed and no repairs other than those necessary to protect the rental vehicle from further damage or loss shall be undertaken without the prior consent of AMA Assistance.

EXCLUSIONS

In addition to the General Exclusions described on page 10, no coverage shall be provided under Rental Vehicle Damage Insurance and no payment shall be made for any claim in whole or in part from, or contributed to by, or as a natural and probable consequence of any of the following:

- 1. Physical damage or loss of the rental vehicle when:
 - a. the driver is under the influence due to abuse of medication, drugs, alcohol or any other toxic substance. Alcohol abuse includes having a blood alcohol level in excess of 80 milligrams of alcohol per 100 millilitres of blood;
 - b. *you* are engaged in the business of renting *vehicles* in any manner whatsoever;
 - a collision damage waiver is purchased from the commercial rental agency;
 - d. any term or condition of the rental agreement is not met or a restriction thereof is violated;
 - e. such rental vehicle is used to transport passengers for compensation or hire or for commercial delivery, transporting contraband or illegal trade; and
 - f. such rental *vehicle* is rented from an organization other than a duly authorized *commercial rental agency*; or more than one such rental *vehicle* is in *your* care, custody or control at any one time (if the *Insured* is a corporation or a company: when more than one such rental *vehicle* is in the care, custody or control of an individual authorized by the *Insured*).
- 2. Any form of third-party vehicle liability or personal accidental *injury*.
- 3. A loss in any jurisdiction where such insurance coverage is prohibited by law.
- 4. Your failure to preserve or protect the rental vehicle or your neglect or abuse of the rental vehicle.
- a. mechanical failure or breakdown of any part of the rental vehicle, rusting, corrosion, wear and tear, gradual deterioration, inherent defect, or freezing;
 - b. the conversion or a dishonest act committed by you or any other party of interest, your employees or agents, or any person to whom the rental vehicle may be entrusted (bailees for hire excepted).
- Physical damage or loss sustained during your participation in a speed test or speed contest.
- 7. *Physical damage or loss* which is covered under *your* personal or business vehicle insurance policy.
- 8. Any act of terrorism.

VISITORS TO CANADA MEDICAL PLAN

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

DEDUCTIBLE

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

INSURED RISKS

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

BENEFITS

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

1. Emergency Medical Treatment:

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

b. Physicians' fees;

- c. Laboratory tests and X-rays prescribed by the attending *physician* and approved in advance by *AMA Assistance*. Note: This *policy* does not cover magnetic resonance imaging (MRI), cardiac catheterization, computerized axial tomography (CAT) scans, sonograms, ultrasounds or biopsies unless such services are approved in advance by *AMA Assistance*;
- d. Private duty nursing (other than by an *immediate family member*) during *hospitalization* when ordered by the attending *physician* and approved in advance by *AMA Assistance*;
- e. Local licensed ground ambulance service to the nearest hospital, physician or medical service provider in the event of a medical emergency (also covers local taxi fare in lieu of local ground ambulance service where an ambulance is medically necessary);
- f. Drugs requiring a prescription by a *physician*, limited to a 30 *day* supply per prescription unless *you* are *hospitalized*, excluding those necessary for the continued stabilization of a chronic *medical condition*;
- g. Casts, splints, trusses, braces, crutches, rental of wheelchair or other minor medical appliances when prescribed by a physician and approved in advance by AMA Assistance; and
- h. Treatment by a chiropodist, chiropractor, osteopath, physiotherapist, or podiatrist, (other than an immediate family member) to a maximum of \$300 per profession listed, when approved in advance by AMA Assistance.

2. Emergency Dental Expenses:

Reimbursement of:

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

3. Family Transportation:

When approved in advance by AMA Assistance, a return economy airfare for an immediate family member or a close friend to attend your bedside (upon the recommendation of the attending physician) provided the hospitalization lasts at least five consecutive days. This benefit is provided immediately if you are

mentally or physically handicapped, or under 26 years of age and dependent for support on the visiting *immediate family member*.

The person attending *your* bedside will be covered under the same terms and conditions of *your* AMA Visitors to Canada Medical Plan. Reasonable out-of-pocket expenses incurred for commercial accommodation and meals, essential taxis and telephone calls by the attending *immediate family member* or close friend will be **reimbursed** to a maximum of \$450, subject to a limit of \$150 per *day*.

4. Subsistence Allowance:

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

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

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

5. Medical Repatriation:

When approved in advance and arranged by AMA Assistance:

- a. up to the cost of a one-way economy airfare to *your* country of permanent residence; or
- b. the *fare* for additional airline seats to accommodate a stretcher to return *you* to *your* country of permanent residence; or
- c. where medically necessary, air ambulance (paid in advance) to the nearest appropriate hospital or to a hospital in your country of permanent residence for the purpose of obtaining immediate medical treatment. If you are a Canadian resident without GHIP, your country of permanent residence will be deemed as Canada under this Medical Repatriation benefit and if you must be medically repatriated during a temporary visit to another country, you will be returned to your Canadian province or territory of residence if approved in advance and arranged by AMA Assistance.

6. Return of Remains:

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

- a. the actual cost incurred for:
 - i. preparation of the deceased *Insured*; and
 - ii. return of the deceased *Insured* in the *common carrier's* standard transportation container to the scheduled point of departure; or
- b. up to \$5,000 for burial or cremation at the place of death.

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

In addition, and subject to prior approval of AMA Assistance, return transportation for an immediate family member or close friend to identify the deceased Insured. The person identifying the deceased Insured will be covered under the same terms and conditions of your AMA Visitors to Canada Medical Plan, but for no longer than 3 days. Reasonable out-of-pocket expenses incurred for commercial accommodation and meals, essential taxis and telephone calls by the attending immediate family member or close friend will be **reimbursed** to a maximum of \$150 per day to a maximum of \$450.

CONDITIONS

In addition to the General Conditions described on page 9 and 10, Visitors to Canada Medical Plan is subject to the following conditions:

- 1. In the event of a medical emergency, you must call AMA Assistance immediately otherwise your benefits under this policy may be limited. Phone numbers are located on the inside front cover and page 54.
- A temporary visit to another country is permitted (excluding your country of permanent residence) as part of your trip however, this temporary visit must not exceed 49% of the trip's total duration.
- 3. It is a condition precedent to receiving payment under this *policy* that, at the time of application, *you* know of no reason that may require *you* to seek *medical attention*.
- 4. During a *medical emergency* (whether prior to admission or during a covered *hospitalization*), the *Insurer* reserves the right to:
 - a. transfer you to one of our preferred health care providers; and/ or
 - return you to your country of permanent residence, (if you are a Canadian resident without GHIP, your country of permanent residence will be deemed as Canada)

for the *medical treatment* of *your sickness* or *injury*. If *you* choose to decline the transfer or return when declared medically able by the Medical Director of *AMA Assistance*, the *Insurer* will be released from any liability for expenses incurred for such *sickness* or *injury* after the proposed date of transfer or return.

- 5. Once you are deemed medically able to return to your country of permanent residence (with or without a medical escort) either in the opinion of the Medical Director of AMA Assistance or by virtue of discharge from hospital, your medical emergency is considered to have ended, whereupon any further consultation, treatment, recurrence or complication related to the medical emergency will no longer be eligible for coverage under this policy.
- 6. The *Insurer* is not responsible for the availability, quality or results of any *medical treatment* or transportation, or the *Insured's* failure to obtain *medical treatment* or *hospitalization*.
- 7. AMA Assistance must approve in advance any surgery or invasive procedure (including, but not limited to, cardiac catheterization), prior to the *Insured* undergoing such procedure. It remains your responsibility to inform your attending physician to call

AMA Assistance for approval in advance, except in extreme circumstances where such action would delay surgery required to resolve a life-threatening medical crisis.

EXCLUSIONS

In addition to the General Exclusions described on page 10, no coverage shall be provided under Visitors to Canada Medical Plan and no payment shall be made for any claim resulting in whole or in part from, or contributed to by, or as a natural and probable consequence of any of the following:

1. Pre-existing Medical Condition Exclusions

AGE 59 AND UNDER

Any *sickness* or *injury* for which *you* experienced symptoms, were diagnosed, were *treated*, required *hospitalization* or for which *you* were prescribed or took medication during the **3 months prior to** the *departure date*.

AGE 60 TO 85

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

- Any sickness or onset of new symptoms that occur during the first 48 hours following the effective date if you purchase this policy after your arrival in Canada.
- 3. For *Insured child(ren)* under two years of *age*: Any *sickness* or *medical condition* related to a birth defect.
- 4. Alcohol related *sickness*, death or *injury* or the abuse of medication, drugs, alcohol or any other toxic substance.
- A disorder, disease, condition or symptom that is emotional, mental or psychological in nature unless same results in hospitalization and this fact is substantiated by hospital records.
- Expenses incurred as a result of asymptomatic or symptomatic HIV infection, Acquired Immune Deficiency Syndrome (AIDS), AIDS related conditions (ARC) or the presence of HIV, including any associated diagnostic tests or charges.
- 7. A sickness, injury or related condition during a trip undertaken:
 - with the knowledge that you will require or seek treatment or surgery for that sickness, injury or related condition; or
 - b. for the purpose of obtaining treatment or surgery.
- 8. A sickness, injury or related condition for which:
 - a. future investigation or *treatment* (except routine monitoring) is planned before *your trip*; or
 - b. it was reasonable to expect *treatment* or *hospitalization* during *your trip*.
- a. Your routine prenatal care or childbirth at any time during your trip;
 - Complications, conditions or symptoms of pregnancy during the nine weeks prior to or after and including the expected delivery date;

- c. Any costs for your child(ren) born during your trip.
- 10. Death or injury sustained:
 - a. while performing as a pilot or crew member of, or travelling as a passenger on, any aircraft: flying machines or flying devices that are supported chiefly by their buoyancy in air, and includes, but is not limited to, any *plane*, balloon, kite balloon, airship, glider, hang glider, paraglider, parasail, parachute, kite and wingsuit. Travelling as a passenger on a *common carrier* is not subject to this exclusion;
 - b. while participating in any maneuvers or training exercises of the armed forces:
 - c. during your professional participation in any sport; or
 - d. during *your* participation in any motorized or mechanically assisted *speed contest*.
- 11. Treatment, surgery, medication, services or supplies that are not medically necessary, or that you elect to have provided outside your country of permanent residence when medical evidence indicates that you could return to your country of permanent residence to receive such treatment. The delay to receive treatment in your country of permanent residence has no bearing on the application of this exclusion.
- 12. For *policy extensions: Sickness* or *injury* which first appeared, was diagnosed or received *medical treatment* after the *departure date* and prior to the *effective date* of the insurance *extension*. No *extension* is permitted if *you* have not been continuously insured under an AMA Visitors to Canada Medical Plan *policy* with no gap in coverage.
- 13. The replacement of an existing prescription, whether by reason of loss, renewal or inadequate supply, or the purchase of drugs and medications (including vitamins) which are commonly available without a prescription or which are not legally registered and approved in Canada.
- 14. a. Cardiac catheterization, angioplasty and/or cardiovascular surgery including any associated diagnostic test(s) or charges unless approved in advance by *AMA Assistance* prior to being performed, except in extreme circumstances where such surgery is performed as a *medical emergency* immediately upon admission to *hospital*; and/or
 - b. Magnetic resonance imaging (MRIs), computerized axial tomography (CAT) scans, sonograms, ultrasounds or biopsies unless approved in advance by AMA Assistance.
- 15. Services in connection with alternative *medical treatments* or general health examinations, regular care of a chronic condition, the continuing care and/or *medical treatment* of an acute *sickness* or *injury* after the initial *medical emergency* has ended (as determined by the Medical Director of *AMA Assistance*) or a medical consultation where the *physician* observes no *change* in a previously noted condition, symptom or problem.
- 16. Medical care or surgery that is cosmetic in nature.
- 17. Cataract surgery or services provided by a naturopath or an optometrist or in a convalescent home, nursing home, rehabilitation centre or health spa.

- Medical repatriation unless approved in advance and arranged by *AMA Assistance*.
- 19. Upgrading charges or cancellation penalties for airline tickets, unless approved in advance by *AMA Assistance*.
- Damage to or loss of hearing devices, eyeglasses, sunglasses, contact lenses, or prosthetic teeth or limbs, and resulting prescription thereof.
- 21. Medical services in *your* country of permanent residence.
- 22. Any act of terrorism.

EXTENSIONS AND **TOP-UPS**

AUTOMATIC EXTENSION OF COVERAGE

Coverage will be extended automatically without additional premium if:

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

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

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

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

2. You have a Multi-Trip Medical Plan or Annual Premium Package and your trip days are entirely within Canada.

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

VOLUNTARY EXTENSION OR TOP-UP OF COVERAGE

An extension is required to extend the number of days on a Single Trip Medical Plan, Single Trip Premium Package or an existing Top-Up. A Top-Up is required to extend the number of days that exceed the period purchased for your Multi-Trip Medical Plan (4, 8, 15, 30 or 60 days outside of Canada), or for your Annual Premium Package (9, 16 or 30 days).

Call your AMA Agent or 1.866.989.6595 before your original return date on your Declaration Page.

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

- 1. You make application for the extension or Top-Up prior to the return date of your policy and you complete a new Medical Questionnaire to determine eligibility and premium for a new Top-Up. A new Medical Questionnaire is not required when extending the number of days for a Single Trip Medical Plan or an existing Top-Up.
- 2. There is no cause for a claim against this *policy*. (If *you* have a medical claim on *your* Multi-Trip Medical Plan or Annual Premium Package *you* are still entitled to a *Top-Up* for subsequent *trips*, but the cause of the first claim will be deemed a *pre-existing medical condition* that must qualify for the stability requirements for *your age*).
- 3. It is approved by *us* and *you* have paid any additional required premium prior to the *effective date* of the *extension* or *Top-Up*.
- 4. If *you* are topping up another insurer's policy, *you* must confirm with that *Insurer* that a *Top-Up* is permitted on *your* existing policy with no loss of coverage.

INSURANCE COVERAGE	MAXIMUM TRIP DAYS INCLUDING EXTENSION OR TOP-UP
Emergency Medical Insurance: Single Trip Medical Plan Canada Medical Plan Top-Up to Multi-Trip Medical Plan Top-Up to Annual Premium Package Age 59 and under	Maximum trip days may not exceed the period for which your GHIP covers you or 365 days, whichever is the lesser. You must obtain written authorization from your GHIP covering trip days exceeding 183 days.
Single Trip Premium Package Age 60 to 84	60 Days.
Single Trip Premium Package <u>Age 59</u> and under Non-Medical Premium Package Canada Package Plan <u>All Ages</u>	183 <i>Days</i> .
Trip Cancellation and Trip Interruption Insurance BounceBack Insurance* Visitors to Canada Medical Plan**	365 <i>Days</i> .
Rental Vehicle Damage Insurance	50 Days.

^{*} BounceBack Insurance must be extended in conjunction with another AMA Travel Insurance coverage.

^{**} Visitors to Canada Medical Plan may only be extended if you have not experienced any change in your health and you have been continuously covered under an AMA Visitors to Canada Medical Plan policy with no gap in coverage.

AMA ASSISTANCE

COUNTRY

UK

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

WHAT TO DO IF YOU NEED AMA ASSISTANCE

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

in CANADA & mainland U.S.	1-855-330-8330
Australia	0011-800-8877-9000
Costa Rica	00 800-8877-9000
Dominican Republic	1-800-203-9591
Jamaica .	1-800-204-0004
Mexico	001-800-248-8561
New Zealand	00 800-8877-9000
South Africa	00 800-8877-9000
Thailand	001-800-8877-9000

Call collect from anywhere else Email if calling is not possible

+1-519-988-7039 orionassistance@acmtravel.ca

TOLL-FREE NUMBER

00 800-8877-9000

When contacting AMA Assistance, please provide your name, your policy number, your location and the nature of your emergency. Do not let phone systems around the world prevent you from calling. If you can't make a call, Email AMA Assistance at the Email address above.

WHAT HAPPENS WHEN YOU CALL AMA ASSISTANCE FOR A MEDICAL EMERGENCY?

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

AMA Assistance will work closely with you to:

 direct you to an appropriate physician or hospital at your trip destination, wherever possible;

•

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

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

WHY ARE YOU REQUIRED TO CALL AMA ASSISTANCE?

- If AMA Assistance is not notified, you may receive medical treatment or services which are not considered medically necessary as defined by this policy and benefits will be limited to:
 - a. in the event of hospitalization, 80% of eligible expenses based on reasonable and customary costs to a maximum of \$25,000; and
 - b. in the event of out-patient medical consultation, a maximum of one visit per *sickness* or *injury*.

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

- AMA Assistance must approve certain benefits in advance. Check the benefits section of your coverage(s) to see which benefit(s) this applies to.
- 3. Trip Cancellation claims must be reported within 72 hours of the event forcing cancellation. If *you* do not call, *you* may sustain reduced benefits due to cancellation penalties that are imposed by the *travel supplier*. Benefits payable apply to those charges which are in effect on the *day* of the loss or within the 72 hour period following the event forcing cancellation.
- 4. Trip Interruption claims must be reported immediately to ensure that you do not incur expenses which are not covered benefits.
- 5. If you pay eligible expenses directly to a health service provider without prior approval by AMA Assistance, these services will be reimbursed to you on the basis of the reasonable and customary costs that would have been paid directly to such provider by the Insurer. Medical charges that you pay may be higher than this amount, therefore you will be responsible for any difference between the amount you paid and the reasonable and customary costs reimbursed by the Insurer.

LIMITATION ON AMA ASSISTANCE SERVICES

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

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

HOW TO FILE A CLAIM

PAYMENT TO MEDICAL PROVIDERS

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

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

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

SUBMITTING YOUR CLAIM

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

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

AMA Travel Insurance

c/o Active Care Management Inc.

P.O. Box 308, Station A Windsor, Ontario N9A 6K7

• Phone Numbers: Located on page 54

• Email: orionclaims@acmtravel.ca

• Fax Numbers: Toll Free: 1-877-432-9226 and Local: +1-519-251-5165

EMERGENCY MEDICAL INSURANCE and VISITORS TO CANADA MEDICAL PLAN

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

TRIP CANCELLATION AND TRIP INTERRUPTION INSURANCE

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

- A completed Trip Cancellation and Trip Interruption Claim Form (available by contacting AMA Assistance at the phone numbers on page 54). We need proof of the cause of the claim, including:
 - a. if your claim is for medical reasons, a medical certificate completed by the attending physician stating why travel was not possible as booked and a copy of the entire medical file of any person whose health or medical condition is the reason for your claim; or
 - a report from the police, airline, cruise, tour operator or other responsible authority documenting the reason for the delay if your claim is due to misconnection.

- 2. Original invoices and receipts.
- 3. Original tickets.
- 4. Other supporting documentation as requested.
- 5. For *default* coverage: written notice of claim must be submitted within 60 *days* of the *day* on which the *travel supplier* announces that it is in *default*:
 - a. copies of receipts and proofs of payment to travel suppliers;
 - b. copies of unused transportation or accommodation documents; and
 - c. where appropriate, evidence of claim to or reimbursement from any federal, provincial or other compensation fund or any other source (including credit card companies) that is legally responsible or under contract to reimburse you for the cost of the undelivered travel services.

TRIP CANCELLATION

- For cancellation due to a disaster or event independent of any intentional act or negligence, accident on the way to departure, jury duty, subpoena, transfer or involuntary loss of employment: a legal certificate (police report, the summons and/or subpoena, record of employment) confirming the circumstances of the cancellation and a letter from your employer (if applicable).
- 2. For penalties: a copy of the *travel supplier's* or the airline's publication confirming the cancellation penalties imposed.

TRIP INTERRUPTION

- 1. For out of pocket expenses: an explanation of expenses in the event of a late return, along with original receipts.
- 2. For death or repatriation: a death certificate accompanied by receipts from the funeral home, airline, etc.

TRAVEL VOUCHER

In addition to the items required under Trip Cancellation and Trip Interruption Insurance, you must also submit:

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

TRAVEL ACCIDENT INSURANCE

For forms and instructions, contact AMA Assistance at the phone number(s) on page 54.

BAGGAGE INSURANCE

- 1. A completed claim form available by contacting *AMA Assistance* at the phone number(s) on page 54.
- 2. For loss:
 - a. a report by the police or the hotel manager, tour guide or

- transportation authorities in whose custody the insured property was at the time of loss;
- adequate proof of loss, (original purchase receipts, original replacement receipts or original replacement estimates on store stationery or letterhead) ownership and itemized value.
- c. a Property Irregularity Report when luggage is lost or damaged while in the custody of the airline or *common carrier*.
- 3. For baggage delay you must supply proof of delay of checked baggage from the common carrier and original receipts of purchase:
 - a. original itemized receipts for expenses actually incurred;
 - b. a copy of the baggage claim ticket;
 - c. a copy of your airline or common carrier ticket;
 - d. verification of the delay of checked baggage from the airline or common carrier including the reason and the duration of the delay; and
 - e. a copy of the delivery receipt.

BOUNCEBACK INSURANCE

For forms and instructions, contact *AMA Assistance* at the phone number(s) on page 54.

RENTAL VEHICLE DAMAGE INSURANCE

- 1. A completed claim form available by contacting *AMA Assistance* at the phone number(s) on page 54.
- 2. An official police accident report.
- 3. A copy of the signed rental agreement.
- 4. A copy of the commercial rental agency's damage report.
- 5. A complete copy (front and back) of driver's license.
- 6. A copy of damage or repair estimate.
- 7. A copy of personal or business vehicle insurance policy.
- 8. Proof of settlement (denial or payment) from personal or business vehicle insurance policy.

REFUNDS

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

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

Emergency Medical Insurance (Single Trip Medical Plan, Top-Up, Canada Medical Plan)

Full or Partial refund.

For a partial refund on:

- Top-Up(s) Proof of your return to Canada is required
- Single Trip Medical or Canada Medical Plans Proof of return to your province or territory of residence is required

Multi-Trip Medical Plan and Annual Premium Package Non-refundable after the *effective date*.

Trip Cancellation and Trip Interruption Insurance, Single Trip Premium Package, Non-Medical Premium Package and Canada Package Plan

Full refund if:

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

BounceBack Insurance

Full refund only.

Rental Vehicle Damage Insurance

Full or Partial Refund. (A full refund will be made if the insurance is rejected by the *commercial rental agency* at *trip* destination).

Visitors to Canada Medical Plan

Full Refund if:

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

Partial Refund if:

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

and you provide:

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

DEFINITIONS

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

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

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

and the effect or intention of the above is to:

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

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

Age refers to *your age* on the date of insurance application. For *Top-Up*, *age* refers to *your age* on the date of *Top-Up* application.

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

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

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

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

Change in medication means the medication dosage or frequency has been reduced, increased, stopped and/or new medications have been prescribed. Exceptions:

• an adjustment to the insulin or Coumadin (Warfarin) dosage you are

currently taking provided it is not newly prescribed or stopped and there has been no *change* to *your medical condition*; and

• a change from a brand name medication to a generic brand medication (insofar as the dosage is not modified).

Child(ren) means unmarried, dependent persons under 26 years of age (under age 18 for Escort of *Insured Child(ren)* benefit), who reside with you OR who are full-time students in residence at a post-secondary institution OR mentally or physically handicapped persons of any age who reside with you, all of whom depend on you for support and whose name appears on the *Declaration Page* as *Insured(s)*.

Commercial rental agency means a *vehicle* rental agency licensed under the law of its jurisdiction.

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

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

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

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

Deductible means the amount *you* agree to pay toward the cost of any eligible claim *you* make under this policy. The *Deductible* is shown on *your Declaration Page* and **is stated in U.S. currency**.

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

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

Effective date means:

- a. for Trip Cancellation Insurance the date and time of purchase of this coverage;
- b. for Rental Vehicle Damage Insurance the latest of:
 - i. the time you take control of the rental vehicle; or
 - ii. the *departure date*, start date or *effective date* shown on *your Declaration Page*;
- c. for Visitors to Canada Medical Plan the latest of the following:
 - i. your arrival date in Canada; or
 - ii. the departure date, start date or effective date shown on your Declaration Page;
- d. for all other insurance coverages the latest of the following:
 - i. the date *you* leave *your* Canadian province or territory of residence; or
 - ii. the departure date, start date or effective date shown on your Declaration Page.

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

Extension means the coverage *you* purchase from *us* to extend *your trip days* beyond the duration covered under *your* existing Single Trip Medical Plan or *Top-Up*.

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

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

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

Home means, in the case of Emergency Medical Insurance, *your* Canadian province or territory of residence. In the case of Trip Cancellation and Trip Interruption benefits, Flight & Travel Accident, Baggage Loss, Damage & Delay and Rental Vehicle Damage Insurances, it means the place *you* leave from on the first *day* of coverage and are scheduled or ticketed to return to on the last *day* of coverage.

Hospital means a medical facility which is legally accredited to provide medical, diagnostic and surgical treatment to in-patients during the acute phase of their *sickness* or *injury*, which is primarily engaged in the aforesaid activities and which operates under the supervision of a staff of *physicians* and has a registered nurse continuously on duty. The *hospital* must not be licensed as a home for the aged, rest home, nursing home, convalescent *hospital*, health spa, rehabilitation centre or treatment facility for drug or alcohol abuse and/or addiction.

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

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

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

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

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

Insurer means Orion Travel Insurance Company.

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

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

Medical condition means *injury*, *sickness* or disease, complication of pregnancy within the first thirty-one (31) weeks of pregnancy, or acute psychosis.

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

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

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

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

- a. is appropriate and consistent with the diagnosis according to accepted community standards of medical practice;
- b. is not experimental or investigative in nature;
- c. cannot be omitted without adversely affecting your condition or quality of medical care;
- d. cannot be delayed until your return to your Canadian province or territory of residence or, for non-Canadian residents your country of permanent residence; and
- e. is delivered in the most cost effective manner possible, at the most appropriate level of care and not primarily by reason of convenience.

Period of coverage means the period of time between *your effective date* and *return date*.

Physical damage or loss, in reference to a rental *vehicle*, means damage or loss for which *you* are liable and which is the result of collision, fire, theft, hail, windstorm, earthquake, flood, mischief, riot or civil commotion. Loss or damage to tires is not considered *physical damage* or loss unless resulting from other loss or damage covered herein.

Physician means a medical practitioner licensed to prescribe and administer *medical treatment* or a surgeon licensed to perform surgery:

- a. who was thus licensed at the time of treatment and who remains so;
- b. whose legal and professional standing, within the jurisdiction where *treatment* was rendered, is equivalent to that of a doctor of medicine (M.D.) licensed to practice in any province or territory of Canada; and
- c. who is not an immediate family member.

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

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

Pre-existing medical condition means any sickness, injury or medical condition for which medical advice, diagnosis, care, medication was prescribed or taken (including change of medication) or for which further consultation or treatment was recommended or received prior to the departure date as shown on your Declaration Page.

For Canadian residents, see page 20 for pre-existing *medical condition* exclusions and stability periods. For Visitors to Canada Medical Plan, see page 50 for pre-existing medical exclusions.

Professional means a person who is engaged in a specific activity as his/her principal main occupation and for which he/she receives remuneration.

Reasonable and customary costs means costs incurred for approved, eligible medical services or supplies that do not exceed the standard fee of other providers of similar standing in the same geographical area, for the same *treatment* of a similar *sickness* or *injury*.

Return date means:

- a. for the Multi-Trip Medical Plan or Annual Premium Package the earliest of:
 - i) the date on which you are scheduled to return from any individual covered trip (up to 4, 8, 15, 30 or 60 days for the Multi-Trip Medical Plan or up to 9, 16 or 30 days for the Annual Premium Package, depending on the duration of the plan you purchased) to your Canadian province or territory of residence;
 - ii) the date you actually return to your Canadian province or territory of residence;
 - iii) one year from the departure date or effective date as shown on your Declaration Page.
- b. for Visitors to Canada Medical Plan the earliest of:
 - for non-Canadian residents: the actual date you leave Canada to return to your country of permanent residence;
 - ii) the date on which you are scheduled to return to your country of permanent residence as shown as the return date on your most recent Declaration Page.

- c. for Rental Vehicle Damage Insurance the earliest of:
 - the time the commercial rental agency assumes control of the rental vehicle at their place of business or elsewhere;
 - ii) the expiry of the rental agreement or the time when such agreement is terminated;
 - iii) the *return date* as shown specifically for the Rental Vehicle Damage Insurance on *your* most recent *Declaration Page*.
- d. for All Other Insurance Coverages the earliest of:
 - i) the date you actually return to your Canadian province or territory of residence;
 - ii) the return date on which you are scheduled to return to your Canadian province or territory as shown on your most recent Declaration Page;
 - iii) for non-Canadian residents: the date on which *you* are scheduled to return to *your* departure point as shown as the *return date* on *your* most recent *Declaration Page*.

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

Sickness means a disease or disorder of the body which results in loss while this coverage is in effect. The *sickness* must be sufficiently serious to prompt a reasonably prudent person to consult a *physician* for the purpose of *medical treatment* and for the *physician* to certify in writing the necessity of cancelling, interrupting or delaying the *trip*.

Speed contest means an organized activity in which speed is a determining factor.

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

Stable means that you have **not** experienced the following for any sickness, injury or medical condition before your trip: hospitalization **and/or** a medical procedure or intervention **and/or** a change in medication **and/or** a change in medical treatment **and/or** experienced new or more frequent symptoms **and/or** are requiring investigation (other than a routine check-up).

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

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

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

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

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

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

Travel supplier means a licensed company in the business of providing transportation and/or accommodation to the public, and specifically excluding travel agents or professionals, agencies or brokers.

Treated means that you have been hospitalized, have been prescribed (including prescribed as needed), have taken or are currently taking medication.

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

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

Vehicle

- a. Return of Vehicle Benefit: Vehicle under the Return of Vehicle benefit includes any private or rental automobile, boat, motorcycle, camper truck, mobile home or trailer home (not including any commercial trailers which you use during your trip exclusively for the transportation of passengers (other than for hire).
- b. Rental Vehicle Damage Insurance: Vehicle under Rental Vehicle Damage Insurance means a private passenger vehicle, mini-van, self-propelled mobile home, camper truck or trailer that you use or rent including a station wagon or on-road sports utility vehicle. Vehicle does not include a truck, van, bus, sport utility vehicle while you use it off road, off-road vehicle, motorcycle, motorbike, recreational vehicle, all-terrain vehicle, camper, trailer or automobile that is over 20 years old, limousine, or exotic vehicle of these or similar makes: Aston Martin, Bentley, Ferrari, Porsche or Rolls Royce.

We, us or our means Orion Travel Insurance Company.

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

GENERAL TERMS OF AGREEMENT

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

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

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

PREMIUM

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

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

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

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

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

All premium amounts are stated in Canadian currency.

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

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

DEDUCTIBLE

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

No *Deductible* applies to the Package Plans, Trip Cancellation and Trip Interruption Insurance, Travel Accident Insurance, Baggage Insurance, BounceBack Insurance and Rental Vehicle Damage Insurance.

All Deductibles are stated in U.S. currency.

Where Coverage is applicable

Coverage is applicable worldwide, except in countries at war or countries where political instability or hostility renders the area inaccessible by *AMA Assistance* services. *You* may contact *AMA Assistance* prior to *your* departure to confirm coverage for *your trip* destination. Phone numbers are located on the inside front cover and page 54.

Payment of Benefits

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

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

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

Rights of Subrogation

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

Co-ordination of Benefits

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

Misrepresentation and Non-disclosure

The entire coverage under this *policy* shall be voidable if the *Insurer* determines, whether before or after loss, *you* have concealed, misrepresented or failed to disclose any material fact or circumstance concerning this *policy* or *your* interest therein, or if *you* refuse to disclose information or permit the use of such information, pertaining to any of the *Insured* persons under this *policy* of insurance.

Any errors in answering questions on the Medical Questionnaire (if required) specifically related to a claim will result in you paying the first \$5,000 CAD of the claim and the additional premium required based on true and accurate answers. Any willful errors or omissions could result in the policy being voided.

Arbitration

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

Applicable Law

This policy of insurance is governed by the law of the Canadian

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

Your Privacy Matters

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

Notice on Privacy and Confidentiality

The specific and detailed information requested on the application form is required to process the application. To protect the confidentiality of this information, Orion Travel Insurance Company will establish a "financial services file" from which this information will be used to process the application, offer and administer services and process claims relative to the insurance applied for.

Access to this file will be restricted to those Orion Travel Insurance Company employees, AMA employees, mandataries, administrators or agents who are responsible for the assessment of risk (underwriting), marketing and administration of services and the investigation of claims, and to any other person you authorize or as authorized by law. These people, organizations, and service providers may be in jurisdictions outside Canada, and subject to the laws of those foreign jurisdictions. Your file is secured in our offices or those of our administrator or agent. You may request to review the personal information it contains and make corrections by writing to: Privacy Officer, Orion Travel Insurance Company, 60 Commerce Valley Drive East, Thornhill, Ontario L3T 7P9, or by calling 1.800.268.3750 ext. 25043. For AMA's privacy statement, visit www.amatravel.ca/privacy-policy for details.

Dispute Resolution

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

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

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

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

Phone: 905.747.4900 Toll Free: 1.855.674.6684 Fax: 905.771.3357

Email: orioninfo@OrionTi.ca

STATUTORY CONDITIONS

The Contract

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

Waiver

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

Copy of Application

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

Material Facts

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

Notice and Proof of Claim

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

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

Failure to Give Notice or Proof

Failure to give notice of claim or furnish proof of claim, within the time prescribed by this statutory condition, does not invalidate the claim if the notice or proof is given or furnished as soon as reasonably possible and in no event later than one year from the date of the accident or the date the claim arises under the contract, on account of *sickness* or *injury* if it is shown that it was not reasonably possible to give notice or furnish proof within the time so prescribed.

Insurer to Furnish Forms Proof of Claim

AMA Assistance, shall furnish forms for proof of claim within 15 days after receiving notice of claim, but where the claimant has not received the forms within that time, the claimant may submit his or her proof of claim in the form of a written statement of the cause or nature of the accident, sickness, injury or insured risk giving rise to the claim and of the extent of the loss.

Rights of Examination

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

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

When Money Payable

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

Limitation of Arbitration Proceedings

An arbitration procedure may be commenced against the *Insurer* for recovery under this contract.

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

Insurance Act Statutory Conditions

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

This *policy* is effective March 11, 2018 and is underwritten by Orion Travel Insurance Company.

NOTES

NOTES

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

1.855.330.8330 in the U.S. and Canada

+1.519.988.7039 collect where available

orionassistance@acmtravel.ca email if calling is not possible

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

Please contact **AMA Assistance** for emergency assistance, medical management, co-ordination of benefits and to arrange direct billing with a healthcare provider.

Aetna participating providers may file directly: **Provider Service 1.800.414.0596.**



Payor ID: 60054 Group #: 863962-41-100

Address: P.O. Box 30259 Tampa, FL 33630-3259

Effective date: March 11, 2018



WB00150(03/18)