





Read carefully before you travel

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

Please take time to read through your policy before you travel. Italicized terms are defined in the "Definitions" section of your policy.

- Travel insurance covers claims arising from sudden and unexpected situations (i.e.: accidents and emergencies) and typically not follow-up or recurrent care.
- To use this insurance, you must meet all the eligibility requirements.
- This insurance contains limitations and exclusions (e.g. *medical conditions* that are not *stable*, certain circumstances surrounding pregnancy and the birth of a child during a *trip*, excessive use of alcohol, and any *high-risk sport*, *activity*, *or behaviour*).
- This insurance may not cover claims related to *pre-existing medical conditions*, whether disclosed or not at time of policy purchase.
- Contact Blue Cross Travel Assistance before seeking treatment or your claim may be denied.
- In the event of a claim your prior medical history may be reviewed.
- If you have been asked to complete a medical questionnaire and any of your answers are not accurate or complete, your policy will be voidable.

It is your responsibility to understand your coverage. If you have questions, call **1-800-USEBLUE** (873-2583).

You can also visit our website: sk.bluecross.ca

TABLE OF CONTENTS

Important notice

Insurance contract ______2 How to reach us......2 Insurance eligibility3 Top-up Insurance Product 4 Coverage Emergency Medical Care.....5 Coverage description5 • In case of emergency while travelling5 To extend a trip14 To modify your contract15 To cancel your contract16 If you return earlier from your trip16

To submit a claim......16

General provisions applicable	
to all coverages	18
Accuracy of the information provided	18
Applicable law and jurisdiction	18
Contract modification by the insurer	18
Contract validity	18
Coordination of benefits	18
Currency and interest	18
False declaration, failure to disclose,	
fraud or attempted fraud	18
Health care quality and access	18
Insurance premium	18
Repatriation of the insured person	19
Return to province of residence	
at the request of the insurer	19
Right of subrogation	19
Definitions	20
Protection and use of your personal	
nformation	25
Legal notice	25

INSURANCE CONTRACT

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

INSURANCE POLICY

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

INSURANCE CERTIFICATE

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

TO HELP YOU **UNDERSTAND** THIS POLICY

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

HOW TO REACH US

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

- IN CASE OF EMERGENCY WHILE TRAVELLING -

Emergency location	Number to call
Canada or United States	1-833-729-0186
Elsewhere in the world	Collect: 306-518-0145

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

INSURANCE ELIGIBILITY

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

Conditions applicable to people of all ages:

- Hold medical coverage with another insurance company or with another member of the Canadian Blue Cross® Insurer Association who authorizes the holder to insure the second part of a trip with another insurer
- Be a Canadian resident
- Be covered under the *Health and Hospital Insurance Acts* of your province of residence for the entire duration of your *trip*
- Be over 30 days old on the departure date of your trip

Conditions applicable only to people aged 55 and over:

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

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

YOU ARE INSURED IF

- ✓ You are insured for emergency medical care with another insurance company or with another member of the Canadian Blue Cross[®] Insurer Association for the initial part of your *trip*.
- ✓ The insurance company that covers the initial part of your trip authorizes you to purchase an extension with another insurer.
- ✓ Your Blue Cross Top-up Insurance covers you:
 - From the day following the termination date of the coverage you hold with another insurance company or with another member of the Canadian Blue Cross® Insurer Association.
 - Until the return date to your province of residence.
- ✓ The contract has been purchased and paid in full:
 - Before the departure date if you extend a coverage you hold with another insurer, or
 - Before the departure date or termination date of a coverage you hold with a member of the Canadian Blue Cross® Insurer Association.
- ✓ You meet the criteria of the "Insurance eligibility" section.
- ✓ Your name appears in the "Covered persons" section of the insurance certificate.



TOP-UP INSURANCE PRODUCT

Blue Cross *Top-up Insurance* is intended to cover the additional days of your *trip* that are not covered by the contract you hold with another insurance company or with another member of the Canadian Blue Cross[®] Insurer Association.

This product includes the following coverage:

Coverage	Maximum coverage per person
Emergency Medical Care	\$5,000,000 (optional <i>deductible</i>)

Blue Cross Travel Assistance services are also included with this product.



When you buy Blue Cross *Top-up Insurance*, you must ensure that:

- The insurance company that covers the initial part of your *trip* authorizes you to purchase a top-up from another insurer.
- You know the exact number of days covered under your other insurance plan.
- You know the exact dates of your trip.
- You understand that the coverage you purchase from Blue Cross, as well as the applicable exclusions and limitations, may differ from the coverage you hold for the initial part of your *trip*.



EMERGENCY MEDICAL CARE COVERAGE



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

Specific coverage provisions

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

1. Supporting documents

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

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

2. Settlement between insurer and service provider

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

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

IN CASE OF EMERGENCY WHILE TRAVELLING —

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

- Confirm your coverage
- Pre-approve a treatment

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

Contact Blue Cross Travel Assistance before going to a hospital or to a clinic, otherwise your claim may be denied.

Emergency location	Number to call
Canada or United States	1-833-729-0186
Elsewhere in the world	Collect: 306-518-0145



Beginning and end of coverage

Effective date	Termination date
Coverage begins on the day following the termination date of the coverage you hold with the other insurance company or with the other member of the Canadian Blue Cross® Insurer Association.	The termination date corresponds to the <i>contract expiry date</i> indicated on your <i>insurance certificate</i> . If your return takes place before the <i>contract expiry date</i> , the termination date of the coverage becomes the return date of the <i>trip</i> , whether the return is planned or premature (except for the "Trip break" - see page 15).

What is covered

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

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

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

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



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

Benefits

Hospitalization, medical and paramedical expenses	
Hospitalization	Hospitalization costs in a semi-private or private room.
Physicians	The difference between the fees charged by a <i>physician</i> who treats you at your destination and the benefits allowed under government programs.
Nurses	Fees for the private care of a licensed practical nurse (not your relative) during the period of <i>hospitalization</i> , when this care is medically required and prescribed by the <i>physician</i> treating you at your destination.
Health professional services	The fees of the following legally authorized health professionals, when such care is medically required and approved by <i>Blue Cross Travel Assistance</i> , up to a maximum of \$400 per profession, per <i>trip</i> : - Physiotherapist - Osteopath - Chiropractor - Podiatrist or chiropodist (combined) <i>Urgent</i> dermatological care offered in an outpatient clinic is also covered up to a maximum of \$400 per <i>trip</i> .
Tests and diagnostics	The costs of laboratory tests and X-rays when they are prescribed by the <i>physician</i> treating you at your destination for diagnostic purposes.



Prescribed medication as part of emergency treatment	The cost of purchasing medication prescribed by the <i>physician</i> treating you at your destination, except when required for the continuous stabilization of a chronic <i>medical condition</i> .
Medical devices	The cost of buying or renting crutches, canes, or splints, the cost of renting wheelchairs, orthopaedic devices or other medical devices, when prescribed by the <i>physician</i> treating you at your destination.
Incidental expenses	The expenses inherent in a <i>hospitalization</i> (telephone, television, parking, etc.), upon submission of supporting documents, up to \$100 per day, maximum \$500 per <i>hospitalization</i> .
Emergency dental treatment	The fees of a dental surgeon for dental care required as a result of external trauma (not as a result of the voluntary introduction of food or of an object into the mouth), only when there is damage to natural and healthy teeth or for reduction of fracture or dislocation of the jaw, up to \$2,000 per accident and per insured person. In all cases, the treatment must begin during the term of the contract and end within 6 months of the date of the accident. In addition, you must send us an X-ray, taken after the accident but before the treatment begins, demonstrating the suffered damage. For all other emergency dental treatments, except root canal therapy, the fees of a dental surgeon up to \$500 per trip and per insured person.

Transportation expenses

Ambulance or taxi service

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

Repatriation to your province of residence

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

- Costs related to your medical repatriation

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

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

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

- Costs for an accompanying person

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

- Baggage return costs

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

- Pet return costs

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



Transportation expenses to visit or identify the insured person

Some expenses are reimbursed if a family member or a friend not travelling with you must:

- a) Get to the *hospital* where you are hospitalized for a period of at least 3 days (the need for this visit must be certified in writing by the physician treating you at your destination), or
- b) Get to the destination, if necessary, for the purpose of identifying the remains of the *insured* person

The *insurer* agrees to reimburse the following expenses for the designated person:

- The total round-trip transportation costs in economy class
- Up to \$1,200 for:
 - Childcare, accommodation, and meals in a commercial establishment, up to a maximum of \$300 per day
 - The cost for purchasing a Blue Cross travel insurance contract

Additional transportation expenses

Some additional transportation expenses are reimbursed when you or a travelling companion covered under this policy must postpone your/their return by public transportation due to:

- a) A hospitalization not requiring repatriation, if this hospitalization must continue beyond your scheduled return date, or
- b) A medical emergency not requiring repatriation, if this medical emergency is ongoing during the 48 hours preceding your scheduled return date and if Blue Cross Travel Assistance determines that you are unable to travel because of this *medical emergency*

The insurer agrees to reimburse one of the following costs, up to a maximum of \$500 per trip and per insured person:

- Additional transportation costs caused by a date or a schedule change of the initial return ticket, or
- The purchase of a return ticket by the same means of *public transportation*, in economy class, allowing you to return to your province of residence once the medical emergency has ended if it is established that the date of the initial return ticket cannot be changed

Expenses for the return or disposal of remains

In the event of death, the following expenses are covered up to \$10,000:

- The cost of preparing the remains and returning them to the point of departure in the province of residence, excluding the cost of the coffin, or
- The cost of cremation or burial on site, excluding the cost of the urn, coffin, tombstone, and any other related products or services

Vehicle return expenses

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

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

In all cases, you must present a medical certificate issued by the physician treating you at your destination in the locality where your inability to use the vehicle is determined.



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

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

Subsistence allowance

Expenses for subsistence allowance

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

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

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

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

Medical follow-up in Canada

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

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



WARNING - EXCLUSIONS

A) Exclusions due to pre-existing medical conditions

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

For people aged 54 and under, during the 3 months preceding the departure date of your trip:

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

For people aged 55 to 75 travelling less than 32 days, during the 6 months preceding the departure date of your trip:

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

For people aged 55 to 75 travelling 32 days or more and for people aged 76 or over:

- A) The following specific medical conditions are excluded unless the insurance certificate stipulates otherwise:
 - a) During your life, any illness which relates to one of the following medical conditions for which you have been diagnosed or treated:
 - i) Cardiovascular condition

failure

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

- ii) Kidney failure
- iii) Transplant of one of the following organs:
 - Bone marrow - Liver
 - Heart - Lung
- Pancreas
- b) During the 24 months preceding the departure date of your trip, any chronic pulmonary condition (asthma, emphysema, chronic bronchitis or pulmonary fibrosis) for which you have been hospitalized or have used cortisone tablets.
- c) During the 12 months preceding the departure date of your trip, any illness which relates to one of the following conditions:
 - Cancer (except basal cell carcinoma) for which you have been diagnosed or treated
 - Gastrointestinal condition (cirrhosis, hepatitis C, intestinal obstruction, diverticulitis, Crohn's disease, pancreatitis, ulcerative colitis) for which you have been diagnosed or treated



- B) Also excluded when occurring during the 6 months preceding the departure date of your trip:
 - i) Any medical condition that affects you and that is not stable, except for a minor ailment
 - ii) Any heart condition for which you have used nitroglycerin more than once in a 7-day period for the relief of chest pain
 - iii) Any pulmonary condition for which you have been treated with home oxygen or have required corticosteroid therapy

If you choose to make use of the "Trip break" (see page 15)

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

B) Other exclusions

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

1. Treatment received without approval from **Blue Cross Travel Assistance**

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

2. Foreseeable treatment

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

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

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

4. Non-urgent, experimental, or optional treatment

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

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

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

5. Continued treatment once the medical emergency is over

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

6. Treatment received further to your transfer or repatriation refusal

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



7. Abusive or unreasonable billing

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

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

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

9. Treatments not covered under government programs

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

10. Medical expenses incurred after an extension Expenses incurred during the extension period

Expenses incurred during the extension period of your Blue Cross *Top-up Insurance* contract if they are linked to a *medical condition* that occured during the *coverage period* preceding your extension request.

11. Expenses incurred during a "Trip Break"

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

12. Trip undertaken for medical purposes

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

13. Pregnancy, childbirth, or related complications

- a) Expenses related to routine prenatal and postnatal care.
- b) Expenses related to pregnancy, childbirth, or their complications:
 - When the care required results from a *high-risk pregnancy*, or
 - When care is required during the 9 weeks preceding or following the expected delivery date.

14. Child born during the trip

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

15. Mental health disorders

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

16. Suicide and intentional injury

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

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

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

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

18. Illegal act

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

19. Act of war and civil unrest

Costs related to:

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

20. Participation in a high-risk sport, activity, or behaviour

Any medical condition resulting from your participation in a high-risk sport, activity, or behaviour.

21. Medical condition that arose during the period covered with the other insurer or with another member of the Canadian Blue Cross® Insurer Association

a) Expenses related to a *medical condition* that arose during the period covered by the other insurance company or by another member of the Canadian Blue Cross® Insurer Association, whether or not the latter agrees to reimburse these costs.

b) Expenses related to a *medical condition* that began during the period covered by the other insurance company or by another member of the Canadian Blue Cross® Insurer Association if, on the effective date of the Blue Cross *Top-up Insurance* contract you:

- are hospitalized due to this medical condition
- refused to be repatriated
- should have already been hospitalized or repatriated to your province of residence according to our standards.

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

IN CASE OF EMERGENCY WHILE TRAVELLING

Emergency location	Number to call
Canada or United States	1-833-729-0186
Elsewhere in the world	Collect: 306-518-0145

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



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

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

Services offered before departure

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

Travel medical assistance

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

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

In the following U.S. states, you will be directed to a facility that is a member of the following networks:

State of Florida	Clinic or hospital member of the Preferred Patient Care network
State of South Carolina	Clinic or hospital member of the Preferred Personal Care network
State of Arizona	Clinic or hospital member of the Preferred Personal Care network

Medical assistance also includes the following services:

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

General travel assistance

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

- Toll-free telephone assistance 24 hours a day, 7 days a week
- Coordination of claims, if applicable
- Interpreter services for emergency calls
- Assistance in the event of loss or theft of identification documents
- Information on embassies and consulates
- Referrals to a lawyer in the event of a serious accident
- Settling of formalities in the event of death and repatriation of remains

TO EXTEND A TRIP

If you wish to extend your *trip* beyond the dates specified in the contract, you must extend your insurance coverage.

To remain valid, the contract must cover you from the day following the termination date of the coverage held with the other insurance company or with the other member of the Canadian Blue Cross® Insurer Association until the day you return to your province of residence, except when the extension request is refused by the *insurer*.

An extension purchased from another insurer nullifies your Blue Cross *Top-up Insurance* for the entire duration of this *trip*, except when the extension request is refused by the *insurer*.

1. How to extend your insurance coverage

To extend your insurance coverage:

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

To extend a contract purchased directly from Blue Cross	
Canada or United States	1-306-244-1192 (long distance charges will apply) 1-833-729-0186 (toll free)
Elsewhere in the world	306-518-0145 (collect)

2. Insurer approval

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

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

When an extension is refused by the *insurer*, coverage ends at the *contract expiry date* indicated on the *insurance certificate*.



When requesting an extension, you must notify us of any claim made or to come in connection with costs incurred since the start of your *trip* whether the event took place while you were covered by Blue Cross or by the insurance company covering the initial part of your *trip*. If you fail to do so, no claim for the *coverage period* prior to your extension request will be accepted if it is submitted after the extension has been granted.

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

3. Situations which lead to the automatic extension of the Emergency Medical Care coverage

The coverage is automatically extended, free of charge:

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

TRIP BREAK

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

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

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

TO MODIFY YOUR CONTRACT

To make a change to your contract (for example, to add an *insured person* to your contract), you must contact the authorized Blue Cross agent who sold you the original contract.

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

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

TO CANCEL YOUR CONTRACT

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

- a) Before the effective date of the contract, or
- b) After the effective date of the contract, during the 10 days following the date of purchase, unless:
 - You have made or intend to make a claim related to the contract, or
 - The contract is for a period of 10 days or less

IF YOU RETURN EARLIER FROM YOUR TRIP

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

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

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

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

No premium refund is granted if:

- You have submitted or intend to submit a claim related to the contract, or
- You are repatriated at our expense

TO SUBMIT A CLAIM

1. How to get a claim form

Our claim forms are available on our website or can be obtained by contacting our customer service:	
Canada	1-833-729-0186

2. How to submit your claim

Our responsibility is engaged only if you contacted *Blue Cross Travel Assistance* within the prescribed time frame, as stipulated in the *Emergency Medical Care* coverage.

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

3. Providing the necessary information

To process your claim, supporting documents may be required. A list of these documents can be found in the "Supporting documents" section of the *Emergency Medical Care* coverage.

A proof demonstrating the duration of the *trip* and a proof that you hold a valid insurance coverage with another insurance company for the inital part of your *trip* might also be required.

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

4. Processing times for your claim

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

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

5. Claim settlement

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

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

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

6. Appealing a claim denial decision

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

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

Upon receipt of your request for review:

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

Your request and your supporting documents must be sent to the travel claims department at one of the following addresses:

Saskatchewan Blue Cross

Travel claims PO Box 3888, Station B Montreal, Quebec H3B 3L7

GENERAL PROVISIONS APPLICABLE TO ALL COVERAGES

Accuracy of the information provided

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

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

Applicable law and jurisdiction

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

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

Contract modification by the insurer

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

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

Contract validity

The Blue Cross *Top-up Insurance* is valid only when purchased and paid in full:

- Before the departure date if you extend a coverage you hold with another insurer, or
- Before the departure date or, before the terminaison date of a coverage you hold with a member of the Canadian Blue Cross[®] Insurer Association.

The Blue Cross **Top-up Insurance** must cover you from the day following the termination date of a similar coverage that you hold with another insurance company or with another member of the Canadian Blue Cross® Insurer Association until the day you return to your province of residence. There must be no interruption in coverage between the two contracts.

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

Coordination of benefits

Benefits provided under the contract cover only the excess costs not covered by another individual or group insurance contract or by a law or public insurance plan.

If you are entitled to similar benefits under another individual or group insurance contract or with an air carrier, the benefits reimbursed will be coordinated so that the total amount paid does not exceed the amount that is the subject of the claim.

Currency and interest

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

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

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

If you or someone acting on your behalf misrepresents the facts, fails to disclose required information or attempts to commit fraud, whether it is upon enrollment, when submitting a claim, or at any other time during the life of the contract, the contract will be considered null and as not having existed.

Health care quality and access

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

Insurance premium

Your premium is calculated based on:

- Your age
- The duration of your trip
- The answers you provided in your health declaration, if applicable
- The selected deductible amount, if applicable.

Repatriation of the insured person

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

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

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

Return to province of residence at the request of the insurer

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

Right of subrogation

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

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

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

DEFINITIONS

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

High-risk pregnancy means:

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

High-risk sport, activity, or behaviour means:

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

7. All **combat sports**, including:

- Boxing
- Judo
- Karate

8. All sports authorizing tackling or body checking, including:

- American football
- Hockey
- Rugby

9. All high-risk water sports, including:

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

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

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

Hospital means an institution that is licensed as an accredited hospital that is staffed and operated for the care and *treatment* of in-patients and out-patients. *Treatment* must be supervised by *physicians* and there must be registered nurses on duty 24 hours a day. Diagnostic and surgical capabilities must also exist on the premises or in facilities controlled by the establishment.

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

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

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

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

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

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

Insurer means Canassurance Insurance Company Inc.

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

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

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

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

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

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

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

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

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

Stable means a *pre-existing medical condition* that has remained unchanged for several months prior to the departure date of your *trip*.

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

- 1. No new medical diagnosis has been made
- 2. No new symptoms appeared and there was no worsening or increase in the frequency of existing symptoms
- 3. No hospitalization has taken place
- 4. No new medication was prescribed or recommended
- 5. No change of dosage¹ was made to a medication already prescribed or recommended (dose increased or decreased, or consumption stopped)
- 6. No new treatment or medical test is pending or has been prescribed, ongoing or recommended
- 7. No ongoing treatment has been changed or discontinued
- 8. No prescribed or recommended treatment, nor medical advice has been ignored
- ¹ We do not consider the following elements as a *change of dosage* of existing medication:
- Routine insulin or Coumadin® adjustment
- Replacement of a medication by an equivalent generic brand if its dosage remains unchanged
- Decrease in dosage of cholesterol medication
- Change to hormone replacement therapy treatment
- Change in consumption of non-prescribed medication such as: Aspirin®, vitamins, minerals, etc.
- Use of cream or ointment prescribed for skin irritation

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

Travelling companion means the person who:

- plans the trip with you
- has the same travel dates as you
- has the same trip departure and return point as you

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

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

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

PROTECTION AND USE OF YOUR PERSONAL INFORMATION

By purchasing a Blue Cross travel insurance product, you consent to the collection, use, and disclosure of your personal information by Canassurance Insurance Company® for evaluation of your enrollment request, confirmation of coverage, and assessment of your claims.

Personal information provided and collected in your insurance file will remain confidential and in a secure location. This information will be accessible only to authorized personnel and representatives who must use it for the purposes mentioned above.

Upon receipt of your written request, we will give you access to your insurance file and, if necessary, you can ask that your information be updated and/or corrected.

For any additional information regarding the collection, use, and disclosure of your personal information, or the management of that information, you can visit our website or write to us at:

Canassurance Hospital Service Association and its subsidiaries¹

c/o Privacy Officer 1981 McGill College Avenue, Suite 105 Montreal, Quebec H3A 0H6

By email, no matter the province:

privacyofficer@qc.bluecross.ca

¹ Canassurance Insurance Company and CanAssistance Inc.

LEGAL NOTICE

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

Canassurance Insurance Company

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

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

Svlvain Charbonneau President and CFO

Elin Charlem

IMPORTANT

In case of medical EMERGENCY, you MUST contact Blue Cross Travel Assistance immediately. You can call TOLL FREE 24 hours a day, 7 days a week. You will obtain all the advice and help you need.

IMPORTANT

En cas d'URGENCE médicale, VOUS DEVEZ appeler immédiatement l'Assistance voyage Croix Bleue. Vous pouvez communiquer avec nous SANS FRAIS, 24 heures sur 24 et ce 7 jours sur 7. Vous obtiendrez les conseils et l'aide qui vous sont nécessaires.

IMPORTANTE

En caso de EMERGENCIA médica, TIENE que llamar Blue Cross Travel Assistance immediatamente. Se puede communicar con nosotros SIN PAGAR 24 horas por dia y 7 dias por semana para lograr los consejos y la ayuda que necesita.

Assistance

Canada / USA / États-Unis 1-833-729-0186

Collect / À frais virés

306-518-0145





GET IN TOUCH

sk.bluecross.ca

1-800-USEBLUE® (873.2583) within Saskatchewan 1-800-667-6853 within Canada

or

Contact your local insurance broker

OUR OFFICES

Saskatoon

516 2nd Avenue North PO Box 4030 Saskatoon, SK S7K 2C5

Regina

100, 1870 Albert Street Regina, SK S4P 4B7

®/MD Registered trademarks of the Canadian Association of Blue Cross Plans, licensed to the Canassurance Hospital Service Association, an independent member carrying on business as Canassurance Insurance Company® in Ontario, Quebec, and the Atlantic provinces.

^{®†} Blue Shield is a registered trade-mark of the Blue Cross Blue Shield Association.







Cut out this card and carry it with you at all times for the duration of your contract. In case of emergency or should you require medical attention, please call one of the numbers listed on this card as soon as possible.



International Assistance Assistance internationale

TRAVEL INSURANCE / ASSURANCE VOYAGE

POLICY HOLDER / TITULAIRE

CONTRACT / CONTRAT



TRAVEL INSURANCE / ASSURANCE VOYAGE

Assistance

Extension / Prolongation

Canada / USA / États-Unis 1-833-729-0186

Elsewhere, collect Ailleurs, à frais virés 306-518-0145

Partner of / Partenaire de





[®] Saskatchewan Blue Cross and 1-800-USEBLUE are registered trade-marks of the Canadian Association of Blue Cross Plans, used under licence by Medical Services Incorporated, an independent licensee.