Visitors to Canada Travel Insurance

$500,000

Allianz Global Assistance

Travel with confidence

Welcome to your travel insurance policy

You put all the plans in place for a good *trip*, and made *your* well-being a priority by choosing travel insurance. Allianz Global Assistance is there to support *you* should an unexpected *emergency* happen with 24/7 assistance, medical monitoring and guided care from our experienced in-house team and network of trusted *physicians* and *hospitals*. This plan will also help keep *your* travel plans safe with protection for delays and *trip* cancellations.

Take the time to get to know *your* policy before *you* leave on *your trip* and talk to *your* insurance representative if:

- there is anything *you* do not understand,
- *you* have questions about this policy,
- *your* travel arrangements change, or
- *you* have a change in health.

Please note that key terms are printed in *italics* throughout the remainder of this policy and are defined in the Definitions section on page 9 of *your* policy. Referring to the definitions will help *you* to better understand *your* policy.

This policy must be accompanied by a Confirmation of Coverage to complete the contract.

Important Notices

Please read *your* policy carefully. Travel insurance is designed to cover losses that are sudden and unforeseen. It does not cover every situation and expense. *Your* coverage is subject to certain conditions, limitations and exclusions. It is important for *you* to read and understand *your* policy before *you* travel.

- This policy contains a provision removing or restricting the right of the *insured person* to designate persons to whom or for whose benefit insurance money is to be payable.
- This policy contains a clause which may limit the amount payable.
- Costs incurred in *your country of origin* are not covered.
- *Your* insurance contains pre-existing condition exclusions for travellers of any age. These exclusions apply to medical conditions and/or *signs or symptoms* that existed on or before *your* departure date or *effective date*. Check to see how this applies in *your* coverage and how it relates to *your* departure date, purchase date and *effective date*.
- In the event of an *accident*, *injury* or *sickness*, *your* prior medical history may be reviewed when a claim is reported.
- If *you* are ineligible for coverage, *our* only liability will be to refund any premium paid. Please check *your* confirmation of coverage to ensure *you* have the coverage options *you* require. Payment will be limited to the coverage amounts *you* selected and paid for at the time of application. *You* will be responsible for any expenses that are not payable by *us*.
- If *you* have a change in *your* health between the date *you* apply for coverage and the *effective date*, *you* must contact *your* insurance representative to fully understand how *your* change in health affects *your* coverage under this policy. Failure to do so may limit the amount of *your* claim payment or result in *your* claim being denied.

Underwritten by CUMIS General Insurance Company, a member of The Co-operators group of companies.

Administered by Allianz Global Assistance, which is a registered business name of AZGA Service Canada Inc.
Allianz Global Assistance provides claims and travel assistance services on behalf of the insurance company.

Who to Contact and When

24/7 Emergency Assistance

Please contact Allianz Global Assistance before seeking *treatment*. Medical availability and quality varies around the world. Our agents are available 24/7 and equipped to provide *you* with a referral to the nearest available medical facility, advocate on *your* behalf and ensure *you* receive the right care for *your* situation.

In a serious medical *emergency*, get to a *hospital* and have someone call on *your* behalf within 24 hours of admission and before any surgery is performed.

If *you* fail to notify Allianz Global Assistance without reasonable cause, the *insurer* will only pay 80% of the eligible expenses. *You* will be responsible for paying the remaining 20%.

CALL US BEFORE SEEKING TREATMENT

Location	Number to call
In Canada or USA	Toll Free: **1-800-995-1662**
Outside Canada or USA	Toll Free: **00-800-842-08420** **Country code + 800-842-08420** Collect: **416-340-0049**

International operator assistance may be required, depending on where *you* are calling from. Collect calls will be accepted.

It is recommended *you* confirm how to call Canada from *your* destination prior to departure so *you* are prepared in the event of an *emergency*.

Medical Monitoring and Assistance

You can rely on Allianz Global Assistance 24 hours a day, 7 days a week. Allianz Global Assistance has an experienced in-house medical team and a worldwide network of trusted *physicians* and *hospitals* ready to help when an unexpected *sickness* or *injury* arises.

Allianz Global Assistance will attempt to arrange direct billing with the medical facility whenever possible. Some facilities require payment up front and *you* may have to pay for *your treatment*. Be sure to keep all *your* original, itemized receipts.

Allianz Global Assistance provides the following services during an unexpected *sickness* or *injury*:

- From the first point of contact, ensuring *you* receive the of right level of medical attention,
- A referral to the closest appropriate medical provider,
- Virtual care from qualified *physicians* in real-time via video or tele-conferencing, if appropriate for the situation,
- Monitoring the status of *your* medical case,
- Communicating with *you* and others *you* request such as *your* family, *your physician*, *travel supplier*, or consulate, and
- Coordinating Emergency Transportation arrangements related to *your* medical *emergency* as described below.

Allianz Global Assistance will make commercially reasonable efforts to provide these services during a covered unexpected *sickness* or *injury*.

Right to Cancel

Please review this policy when *you* receive it to ensure it meets *your* needs. If *you* are not completely satisfied with this policy, *you* may cancel it within 10 days of purchase for a full refund of premium (premium is the amount *you* paid for this policy), provided *you* have not left on *your trip* and have not experienced an event that would cause *you* to submit a claim.

How to navigate this policy

Consider this page *your* home base which provides *you* with an overview of this policy. From here *you* can easily explore the sections below by clicking on the topic *you* want to read more about.

Once *you* jump to *your* chosen section *you* can either continue to scroll and explore, or simply click on the

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button located on the bottom right of each page which will bring *you* back to this table of contents.

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Coverage Details

What are you covered for?

To find out what *your* coverage is, please refer to *your* confirmation of coverage and read the section titled Benefits on page 5 for details.

What is not covered?

Travel insurance does not cover everything. *Your* policy has exclusions, conditions and limitations. *You* should read *your* policy carefully so that *you* are aware of, and understand, the limits of *your* coverage.

How do I make a claim?

Notify Allianz Global Assistance as soon as possible in the event of an *emergency*.

Where possible, Allianz Global Assistance will arrange to pay the provider directly.

To submit a claim under this policy, *you* will need to send a completed claim form (with all original bills and receipts from commercial organizations attached) to Allianz Global Assistance. Please take care in filling out the form, as any missing information may cause delay. See Claims Procedures on page 9 for details.

What if my travel plans change?

You must contact *your* insurance representative to make any changes to *your* insurance.

I want to stay longer. Can I purchase further coverage?

Yes, *you* can, subject to policy terms and conditions. Just call *your* insurance representative or Allianz Global Assistance (during business hours) before coverage under *your* policy expires.

See Extending Your Trip on page 12 for details.

Travel Assistance

Allianz Global Assistance will use its best efforts to provide assistance for a medical *emergency* arising anywhere in the world. However, *we*, Allianz Global Assistance and their agents will not be responsible for the availability, quantity, quality, or results of any medical *treatment* received, or for the failure of any person to provide or obtain medical services.

Eligibility

1. Coverage is NOT AVAILABLE to any individual who, as of their *effective date*:
   a) has been diagnosed with a *terminal* illness; or
   b) has been diagnosed with stage 3 or 4 cancer; or
   c) has received *treatment* for any cancer (other than basal or squamous cell skin cancer or breast cancer treated only with hormone therapy) in the past 3 months; or
   d) requires assistance with *activities of daily living* as the result of a medical condition or state of health.
2. To be eligible for coverage, *you* must, as of the *effective date*:
   a) be at least 15 days old and not more than 89 years old; and
   b) not be insured or eligible for benefits under a Canadian government health insurance plan; and
   c) be in good health at the time *you* purchase *your* policy and on the date *you* exit *your country of origin,* and know of no reason to seek *medical consultation* during the *period of coverage*.

Start of Coverage

Coverage starts on the *effective date*.

Waiting Period

Coverage for losses resulting from any *sickness* will begin 48 hours after the *effective date* if *you* purchase *your* policy:

a) after the *expiry date* of an existing Allianz Global Assistance administered policy; or
b) after *you* exit *your country of origin*.

Any *sickness* that manifests itself during the 48-hour waiting period is not covered even if expenses are incurred after the 48-hour waiting period.

End of Coverage

Coverage ends on the *expiry date*.

Insuring Agreement

In consideration of the application for insurance and payment of the appropriate premium, and subject to the terms, conditions, limitations, exclusions and other provisions of this policy, *we* will pay the *reasonable and customary* costs for eligible expenses incurred during the *period of coverage* while outside *your country of origin*, up to the amounts specified in this policy, and the amount allowed and/or paid for by any other insurance plan(s).

Payment is limited to the amounts specified herein. Some benefits are subject to advance approval by Allianz Global Assistance.

You will be responsible for any expenses that are not payable by *us*.

Summary of Benefits

Accidental Death & Dismemberment ..... up to sum insured

Emergency Hospital & Medical ..... up to sum insured

Included in the overall maximum:

Emergency Hospital ..... up to sum insured

Emergency Medical ..... up to sum insured

Emergency Transportation ..... up to sum insured

Accidental Dental $4,000

Attendant ..... up to $500

Chiropractor, osteopath, podiatrist/chiropodist, physiotherapist or acupuncturist ..... $500 per profession

Dental Emergency ..... up to $500

Emergency Return Home ..... up to $3,000

Out-of-Pocket Expenses ..... up to $1,500

Return of Deceased ..... up to $10,000

Transportation of Family/Friend ..... up to $3,000

Benefits: What's Covered

1. Emergency Hospital

We agree to pay for *hospital* accommodation, including semi-private room, and for *reasonable and customary* services and supplies necessary for *your emergency* care during confinement as a resident in-patient.

2. Emergency Medical

We agree to pay for the following services, supplies or *treatment*, resulting from a covered *sickness* or *injury*, when provided by a health practitioner who is not related to *you* by blood or marriage:

a) The *emergency* services of a legally licensed *physician*, surgeon, or anaesthetist.

b) Follow-up visits as prescribed by the attending *physician* at the time of the *emergency*. Follow-up visits must occur during the *period of coverage* and be directly related to the *emergency*. The *emergency* must occur during the *period of coverage* and have been reported to Allianz Global Assistance.

Follow-up *treatment* needed as a result of any *sickness* or *injury* that took place while *you* were in *your country of origin* during the *period of coverage* will be covered only on prior approval by Allianz Global Assistance. *On-going expenses* resulting from such *sickness* or *injury* will not be covered, unless approved in advance by Allianz Global Assistance.

Allianz Global Assistance reserves the right, as reasonably required and at its expense, to transport *you* to *your country of origin* following an *emergency*.

c) Diagnostics, lab tests and/or X-ray examinations as ordered by a *physician* for the purpose of diagnosis.

d) The services of the following legally licensed practitioners for *treatment* of a covered *sickness* or *injury*:

i. chiropractor;

ii. osteopath;

iii. podiatrist/chiropodist;

iv. physiotherapist, when ordered by the attending *physician*;

v. acupuncturist.

Not to exceed $500 per profession.

e) Private duty services of a Registered Nurse when approved in advance by Allianz Global Assistance.

Not to exceed $10,000.

f) The use of a licensed local air, land, or sea ambulance (including mountain or sea evacuation), to the nearest *hospital*, when reasonable and necessary.

g) Rental of crutches or hospital-type bed, not exceeding the purchase price; and the cost of splints, trusses, braces or other prosthetic appliances approved in advance by Allianz Global Assistance.

h) *Emergency* out-patient services provided by a *hospital*.

i) When not hospitalized as an in-patient, drugs or medications that require a *physician's* written prescription, not exceeding a 30-day supply, to a maximum of $1,000.

3. Out-of-Pocket Expenses

In the event *you* (or *your* insured *travelling companion*) are confined to *hospital* on the date on which *you* are scheduled to return home, *we* agree to reimburse up to $150 per day to a maximum of $1,500, or up to a maximum of 10 days, for the following expenses incurred by *you* or any insured *travelling companion*:

a) *commercial accommodation* and meals; and

b) child care costs for children under age 18, or physically or mentally handicapped *travelling companion(s)* who rely on *you* for assistance; and

c) essential telephone calls; and

d) taxi fares.

We will only reimburse these expenses if *you* or *your travelling companion* have actually paid for them.

Expenses must be supported by original receipts from commercial organizations.

4. Transportation of Family or Friend

We agree to pay up to a maximum of $3,000 for the cost to transport one *family member* or close friend to *your*

bedside by round-trip economy class (using the most direct route) if:

a) *you* are hospitalized due to a covered *sickness* or *injury*, and the attending *physician* advises that *your family member* or close friend's attendance is necessary; or

b) the local authorities legally require the attendance of *your family member* or close friend to identify *your* remains in the event of *your* death due to a covered *sickness* or *injury*.

Benefits are payable only when approved in advance by Allianz Global Assistance.

In addition, *we* agree to reimburse up to a maximum of $1,000 for the following expenses incurred by *your family member* or close friend after arrival:

a) *commercial accommodation* and meals; and

b) essential telephone calls; and

c) taxi fares.

Expenses must be supported by original receipts from commercial organizations.

5. **Return of Deceased (Repatriation)**

In the event of *your* death due to a covered *sickness* or *injury*, *we* agree to reimburse:

a) up to $10,000 for costs incurred to prepare and return *your* remains in a standard transportation container to *your country of origin*; or

b) up to $4,000 for cremation or burial of *your* remains at the place of death.

The cost of a coffin or urn is not covered.

6. **Dental**

We agree to reimburse:

a) up to $4,000 for *emergency treatment* or services to whole or sound natural teeth (including capped or crowned teeth) which are damaged as a result of an *accidental* blow to the face; and

b) up to $500 for the immediate relief of acute dental pain caused by other than a direct blow to the face and for which *you* have not previously received *treatment* or advice.

Reimbursement will not exceed the minimum fee specified in the Canadian Dental Association schedule of fees of the province or territory where *treatment* was received.

Treatment relating to any dental claim must begin within 48 hours after the onset of the *emergency* and must be completed within the *period of coverage* and prior to *your* return to *your country of origin*.

Treatment must be performed by a legally qualified dentist or oral surgeon.

7. **Emergency Transportation**

When necessary, *we* agree to transport *you* to *your country of origin* when immediate *medical consultation* is required due to a covered *emergency sickness* or *injury*. Any *emergency* transportation such as air ambulance, one-way economy airfare, stretcher and/or a medical attendant must be pre-approved and arranged by Allianz Global Assistance.

8. **Emergency Return Home for *You* and One Family Member**

If a covered *sickness* or *injury* requires *you* to be returned home during the *period of coverage*, *we* agree to reimburse up to $3,000 for the additional cost of one-way economy transportation by the most direct route for *you* and one insured *family member* to *your country of origin* when approved and arranged by Allianz Global Assistance.

Your coverage under this policy ceases once *you* have been returned to *your country of origin* under this benefit.

9. **Accidental Death & Dismemberment**

We agree to pay up to a maximum of the sum insured indicated on *your* confirmation of coverage, for loss of life, limb or sight resulting directly from *accidental injury*, occurring during the *period of coverage*, except while boarding, riding in, or alighting from an aircraft.

The total *aggregate limit* for all losses under Accidental Death & Dismemberment is $10 million.

Benefits are payable according to the following schedule:

a) 100% of sum insured resulting from the same *accidental injury* for loss of:
   i. life; or
   ii. entire sight of both eyes; or
   iii. both hands; or
   iv. both feet; or
   v. one hand and entire sight of one eye; or
   vi. one foot and entire sight of one eye.

b) 50% of sum insured resulting from the same *accidental injury* for loss of:
   i. entire sight of one eye; or
   ii. one hand; or
   iii. one foot.

Loss of hand or hands, or foot or feet means severance through or above the wrist joint or ankle joint, respectively.

Loss of eye or eyes means total and irrecoverable loss of the entire sight.

Only one amount is payable (the largest) if *you* suffer more than one of these losses.

Exposure and Disappearance

If *you* are exposed to the elements or disappear as a result of an *accident*, a loss will be covered if:

a) as a result of such exposure, *you* suffer one of the losses specified in the schedule of losses above; or

b) *your* body has not been found within 52 weeks from the date of the *accident*. It will be presumed, subject to evidence to the contrary, that *you* suffered loss of life.

Specific Conditions

1. In the event of a medical *emergency*, *you* must notify Allianz Global Assistance within 24 hours of admission to a *hospital* and before any surgery is performed.

   Limits on Coverage

   If *you* fail to do so without reasonable cause, then *we* will pay 80% of the claim payable. *You* will be responsible for the remaining 20% of the claim payable.

   You will be responsible for any expenses that are not payable by *us*.

2. *We* reserve the right, as reasonably required and at *our* expense, to transfer *you* to any *hospital* or to transport *you* to *your country of origin* following an *emergency*.

   If *you* refuse to be transferred or transported when declared medically fit to travel, any continuing costs incurred after *your* refusal will not be covered and the payment of such costs becomes *your* sole responsibility.

   Coverage ceases upon *your* refusal and no coverage will be provided to *you* for the remainder of the *period of coverage*.

3. Costs incurred outside of Canada other than in *your country of origin* are covered provided the majority of the *period of coverage* is spent in Canada.

4. *Your* policy will remain in effect while *you* are in *your country of origin*, however costs incurred in *your country of origin* are not covered.

5. If *you* have been returned to *your country of origin* under the Emergency Return Home benefit, this policy will expire.

6. **Act of Terrorism - Limits on Coverage and Aggregate Limit**

   When an *act of terrorism* directly or indirectly causes a loss that would otherwise be payable under this plan, other than Accidental Death & Dismemberment, subject to all other policy limits, coverage will be provided as follows:

   a) As a result of any one or a series of *acts of terrorism* occurring within a 72-hour period, the *aggregate limit* payable shall be limited to $2.5 million for all eligible insurance policies issued by *us* and administered by Allianz Global Assistance, including this policy.

   b) As a result of any one or a series of *acts of terrorism* occurring in any calendar year, the *aggregate limit* payable shall be limited to $5 million for all eligible policies issued by *us* and administered by Allianz Global Assistance, including this policy.

   The amount payable for each eligible claim under (a) and (b) above are in excess of all other sources of recovery and shall be reduced on a pro rata basis, so that the total amount paid for all such claims shall not exceed the respective *aggregate limit* which will be paid after the end of the calendar year and after completing the adjudication of all claims relating to the *act(s) of terrorism*.

7. General Provisions of this policy apply. Refer to page 12.

Exclusions: What's not Covered

VTC1 Pre-existing Conditions Exclusion

a) **If *you* are 59 years of age or under on the *effective date*:**

   Benefits are not payable for costs incurred due to or resulting from *your* medical condition or related condition that was not *stable* at any time during the 90 days immediately before the *effective date*.

b) **If *you* are 60 to 89 years of age on the *effective date*:**

   Benefits are not payable for costs incurred due to or resulting from *your* pre-existing medical condition or related condition that was not *stable* at any time during the 180 days immediately before the *effective date*.

VTC2 Benefits are not payable for costs incurred due to any *treatment*, investigation or hospitalization which is a continuation of, or subsequent to, *emergency treatment* of a *sickness* or *injury*, unless approved in advance by Allianz Global Assistance.

VTC3 Benefits are not payable for any costs incurred due to any *sickness* for which *signs or symptoms* occurred within 48 hours after the *effective date*, except when applying for coverage:

a) before the *expiry date* of *your* existing Allianz Global Assistance administered policy; or

b) prior to the date *you* exit *your country of origin*.

VTC4 Benefits are not payable for costs incurred due to any loss incurred outside of Canada when *you* have not spent the majority of the *period of coverage* in Canada.

VTC5 Benefits are not payable for costs incurred due to any loss incurred inside *your country of origin*.

VTC6 Benefits are not payable for costs or losses incurred while sane or insane due to:

a) *your* emotional or mental disorders resulting from any cause, including but not limited to anxiety or depression; or

b) *your* suicide or attempted suicide; or

c) *your* intentionally self-inflicted injury.

VTC7 Benefits are not payable for costs incurred due to pregnancy, abortion, miscarriage, childbirth or complications thereof.

VTC8 Benefits are not payable for costs incurred due to loss, death or *injury*, if at the time of the loss, death or *injury,* evidence supports that the medical condition causing the loss was in any way contributed to by:

- **a)** *your* intoxication or abuse of alcohol; or
- **b)** *your* use of prohibited drugs or any other intoxicant; or
- **c)** *your* non-compliance with prescribed *treatment* or medical therapy; or
- **d)** *your* misuse of medication.

VTC9 Benefits are not payable for costs incurred due to *injury* resulting from training for or participating in:

- **a)** motorized speed contests; or
- **b)** stunt activities; or
- **c)** *professional* sport activities; or
- **d)** high-risk activities.

VTC10 Benefits are not payable for costs incurred due to *sickness* or *injury* resulting from a motor vehicle *accident* where *you* are entitled to receive benefits pursuant to any policy or legislative plan of motor vehicle insurance, except when such benefits are exhausted.

VTC11 Benefits are not payable for costs incurred due to any *sickness, injury* or medical condition when a *trip* is undertaken for the purpose of securing medical *treatment* or advice.

VTC12 Benefits are not payable for costs incurred due to *your* travelling against the advice of a *physician* or any loss resulting from *your sickness* or medical condition that was diagnosed by a *physician* as *terminal* prior to the *effective date* of this policy.

VTC13 Benefits are not payable for costs incurred due to any *treatment* which can be reasonably delayed until *you* return to *your country of origin* (whether or not *you* intend to return) by the next available means of transportation, unless approved in advance by Allianz Global Assistance.

VTC14 Benefits are not payable for costs incurred due to any *medical consultation* that is non-*emergency*, on-going, elective or the consequence of a prior elective procedure.

VTC15 Benefits are not payable for costs incurred due to hospitalization or services rendered in connection with general health examinations for check-up purposes, *treatment* of an on-going condition, regular care of a chronic condition, home health care, investigative testing, rehabilitation, or on- going care or *treatment* in connection with drugs, alcohol or any other substance abuse.

VTC16 Benefits are not payable for costs incurred due to any rehabilitation or convalescent care.

VTC17 Benefits are not payable for costs incurred due to dental or cosmetic surgery.

VTC18 Benefits are not payable for costs incurred due to naturopathic or holistic *treatment*.

VTC19 Benefits are not payable for costs that exceed the *reasonable and customary* rate for the area where the *treatment* or services are being performed.

VTC20 Benefits are not payable for costs incurred due to *treatment* or services that contravene, or are prohibited by, legislation under a provincial or territorial hospital/medical plan.

VTC21 Benefits are not payable for costs incurred due to, contributed to by, or resulting from any *sickness* or *injury* when such *sickness* or *injury* occurs in a city, region, or country for which Global Affairs Canada issued a written warning to avoid all travel, or to avoid non-essential travel, to that city, region, or country, before the later of:

- **a)** the *effective date* of *your* policy, or
- **b)** the date *you* depart for the destination under advisory,

and such *sickness* or *injury* is due to, contributed to by, or resulting from the reason for the warning.

VTC22 Benefits are not payable for costs incurred due to any:

- **a)** *act of war*; or
- **b)** kidnapping; or
- **c)** act of terrorism caused directly or indirectly by *nuclear, chemical or biological* means; or
- **d)** riot, strike or civil commotion; or
- **e)** unlawful visit in any country.

VTC23 Benefits are not payable for costs incurred due to any nuclear occurrence, however caused.

VTC24 Benefits are not payable for costs incurred due to the participation by *you*, a *family member* or *travelling companion* in:

- **a)** protests; or
- **b)** armed forces activities; or
- **c)** a commercial sexual transaction; or
- **d)** the commission or attempted commission of any criminal offence; or
- **e)** the contravention of any statutory law or regulation in the area where the loss occurred.

VTC25 Benefits are not payable for costs incurred due to being an occupant of an aircraft, either as passenger or crew, except while being transported under the terms of the Emergency Transportation or Emergency Return Home benefits, or while boarding or alighting from an aircraft.

Claims Procedures

If *you* require medical care while travelling, it is critical that *you* contact Allianz Global Assistance before seeking *treatment*. In a severe medical *emergency*, get to a *hospital* immediately and have a *family member* or friend call Allianz Global Assistance on *your* behalf within 24 hours of admission and before any surgery is performed. For more details, refer to Medical Monitoring and 24/7 Emergency Assistance on page 2.

Claims for out-of-pocket expenses can be submitted through the secure Allianz Global Assistance. Claims Portal: www.allianzassistanceclaims.ca for the most efficient claims experience.

IMPORTANT:

Notice of Claim. Claims should be reported as soon as reasonably possible, within 30 days of occurrence, and in no event later than one (1) year after the date of occurrence.

Proof of Loss. Written proof of loss should be submitted as soon as reasonably possible, within 90 days of occurrence , and in no event later than one (1) year after the date of occurrence.

All eligible claims must be supported by receipts from commercial organizations and medical documentation regarding *your treatment*. Other documentation may be required and/or requested by Allianz Global Assistance.

Any expenses for documentation or required reports are *your* responsibility.

Incomplete information when submitting *your* claim will cause delay.

When submitting *your* Hospital & Medical claim, please include:

1. A fully completed and signed claim form with all original bills and receipts.
2. Medical records including an emergency room report and diagnosis from the medical facility or a Medical Certificate completed by the treating *physician*. Any fee for completion of the certificate is not a benefit under this insurance.
3. For physiotherapy visits, a letter from the referring *physician* recommending a referral to the physiotherapist.
4. Any other documentation that may be required and/or requested by Allianz Global Assistance.

When submitting *your* Accidental Death & Dismemberment claim, please include:

1. A fully completed and signed claim form by either *you*, or in the case of *your* death, by the appointed executor/ executrix.
2. The police report including any witness statements.
3. The coroner's report.
4. The death certificate (in the event of death).
5. The Medical Certificate completed by the attending *physician* or *hospital* medical records.
6. Any other documents requested by Allianz Global Assistance after initial review of the claim.

A-Z Definitions

Accident(al) means a sudden, unexpected, unforeseeable, unavoidable external event and excludes disease or infections.

Act of terrorism means an act, including but not limited to the use of force or violence and/or the threat thereof or commission or threat of a dangerous act, of any person or group(s) or government(s), committed for political, religious, ideological, social, economic or similar purposes including the intention to intimidate, coerce or overthrow a government (whether de facto or de jure) or to influence, affect or protest against any government and/or to put the civilian population, or any section of the civilian population, in fear.

Act of war means any loss or damage arising directly or indirectly from, occasioned by, happening through or in the consequence of: war; invasion; acts of foreign enemies; hostilities or warlike operations (whether war is declared or not) by any government or sovereign, using military personnel or other agents; civil war; rebellion; revolution; insurrection; civil commotion assuming the proportions of or amounting to an uprising; military or usurped power.

Activities of daily living means eating, bathing, using the toilet, changing positions (including getting in and out of a bed or chair) and dressing.

Aggregate limit means the total number or the maximum value of insured losses resulting from any one *accident* or event causing loss.

Commercial accommodation means an establishment providing short-term accommodation for paying guests, licensed under the law of its jurisdiction, which provides proof of commercial transaction.

Country of origin means the country in which *you* maintained a permanent residence prior to entry into Canada or the country which issued *your* passport. For Canadian passport holders without a permanent residence, country of origin means the country *you* departed from before arriving in Canada.

Dependent children means *your* unmarried children who are:

a) financially dependent on *you*; and

b) at least 15 days old and no more than 21 years old.

Effective date means the later of:

a) the date and time the completed application is accepted by Allianz Global Assistance or its representative; or

b) the date indicated as the effective date on *your* confirmation of coverage; or

c) the first time *you* exit *your country of origin*.

If *you* purchase *your* policy after *you* have exited *your country of origin*, any *sickness* that manifests itself during the first 48 hours after the effective date is not covered even if related expenses are incurred after the 48-hour waiting period.

Emergency means a sudden, unforeseen *sickness* or *injury* occurring during the *period of coverage* while *you* are outside *your country of origin*, which requires immediate intervention by a *physician* or legally licensed dentist and cannot reasonably be delayed. An *emergency* is deemed to no longer exist when medical evidence indicates that *you* are able to continue *your trip* or return to *your* place of ordinary residence or *country of origin*. Costs incurred in *your country of origin* are not covered.

Expiry date means the earlier of:

a) the date indicated as the expiry date on *your* confirmation of coverage; or

b) the date *you* become eligible for coverage under a Canadian government insurance health plan.

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

Heart condition includes angina or chest pain, arrhythmia, arteriosclerosis, atrial fibrillation, congenital heart defect, congestive heart failure, cardiomyopathy, carotid artery occlusion, heart attack (myocardial infarction), heart murmur, irregular heart rate or beat, any other condition relating to the heart or cardiovascular system.

High-risk activity(ies) mean(s) any skiing out of bounds, heliskiing, ski jumping, sky-diving, sky-surfing, scuba diving (except if certified by internationally recognized and accepted program such as NAUI or PADI, or if diving depth does not exceed 30 metres), white water rafting (except grades 1 to 4), street luge, skeleton activity, *mountaineering*, or participation in any rodeo activity.

Hospital means a facility incorporated or licensed as a hospital by the jurisdiction where such services are provided and which has accommodation for resident in-patients, a laboratory, a registered graduate nurse and *physician* always on duty and an operating room where surgical operations are performed by a *physician*. In no event shall this include a convalescent or nursing home, home for the aged, health spa, or an institution for the care of drug addicts, alcoholics or persons suffering from mental disorders.

Injury means bodily harm, which is directly caused by or resulting from an *accident*, being a sudden and unforeseen event, excluding bodily harm that results from deliberate or voluntary action and independent of *sickness* and all other causes.

Insured person means an eligible person named on the application, who has been accepted by Allianz Global Assistance or its authorized representative, and has paid the required premium for a specific plan of insurance.

Lung condition includes chronic obstructive pulmonary disease (COPD), bronchial asthma, asthma, chronic bronchitis, emphysema, tuberculosis, pulmonary fibrosis.

Medical consultation means any medical services obtained from a licensed medical practitioner for a *sickness*, *injury* or medical condition, including but not limited to any or all of: history taking, medical examination, investigative testing, advice or *treatment*, and during which a diagnosis of the condition need not have been definitively made. This does not include regular medical check-ups where no medical *signs or symptoms* existed between check-ups or were found during the check-up.

Mountaineering means the ascent or descent of a mountain requiring the use of specified equipment including crampons, pick axes, anchors, bolts, carabiners and lead-rope or top rope anchoring equipment.

Nuclear, **chemical** or **biological** means the use of any nuclear weapon or device or the emission, discharge, dispersal, release or escape of any solid, liquid or gaseous chemical agent and/or biological agent, including the resultant contamination where:

- **Nuclear** means any occurrence causing bodily *injury*, *sickness*, disease, or death, or loss of or damage to property, or for loss of use of property, arising out of or resulting from the radioactive, toxic, explosive, or other hazardous properties of source, special nuclear, or by- product material.
- **Chemical agent** means any compound which, when suitably disseminated, produces incapacitating, damaging or lethal effects on people, animals, plants or material property.

- **Biological agent** means any pathogenic (disease producing) micro-organism(s) and/or biologically produced toxin(s) (including genetically modified organisms and chemically synthesized toxins) which cause illness and/or death in humans, animals or plants.

On-going expenses means any *treatment*, investigation or hospitalization which is a continuation of, or subsequent to, *emergency treatment* of a medical condition.

Period of coverage means the period from the effective date to the expiry date as indicated on *your* confirmation of coverage and for which premium has been paid. As selected and paid for at the time of application, the maximum period of coverage cannot exceed 365 days.

Physician means a person other than *you*, who is legally qualified and licensed to practice medicine or perform surgery in the location where the services are performed, and who is not related to *you* by blood or marriage.

Pre-existing condition means a *sickness*, *injury* or medical condition, whether or not diagnosed by a *physician*:

a) for which *you* exhibited *signs or symptoms*; or

b) for which *you* required or received *medical consultation*; and

c) which existed prior to the *effective date* of *your* coverage.

Professional means *you* are considered professional by the governing body of the sport, earn the majority of *your* income from such activity, and are paid for *your* participation whether *you* win or lose.

Reasonable and customary means the services customarily provided or the costs customarily incurred for covered losses, which are not in excess of the standard practice or fee in the geographical area where the services are provided or costs are incurred for comparable *treatment*, services or supplies for a similar *sickness* or *injury*.

Sickness means any illness or disease.

Signs or symptoms means any evidence of disease experienced by *you* or recognized through observation.

Spouse means a person who is legally married to *you*, or has been living with *you* in a common-law relationship for a period of at least 12 consecutive months.

Stability period

a) if *you* are age 59 or under, is the 90 days immediately before the *effective date*.

b) if *you* are age 60 to 89, is the 180 days immediately before the *effective date*.

Stable describes any medical condition or related condition, including any *heart condition* or *lung condition*, for which:

a) there has been no new *treatment*; and

b) there has been no change in *treatment* or change in *treatment* frequency or type; and

c) there have been no *signs or symptoms* or new diagnosis; and

d) there have been no test results showing deterioration; and

e) there has been no hospitalization; and

f) there has been no referral to a specialist (made or recommended) and *you* are not awaiting surgery or the results of further investigations performed by any medical professional.

The following are considered stable:

a) Routine (not prescribed by a *physician*) adjustment of insulin to control diabetes provided the insulin was not first prescribed during the *stability period*.

b) Change from a brand name medication to a generic medication provided the medication was not first prescribed during the *stability period* and there is no increase or decrease in dosage.

c) A minor ailment, which describes a *sickness* or *injury* during the *stability period* which ended more than 30 days prior to the *effective date* and which did not require:

i. *treatment* for a period longer than 15 consecutive days; or

ii. more than one follow-up visit to a *physician*; or

iii. hospitalization, surgery, or referral to a specialist.

The following conditions are not considered stable:

a) any *lung condition* for which *you* were prescribed or are taking prednisone;

b) any *heart condition* for which *you* were prescribed or are taking nitroglycerin.

Terminal applies to a medical condition for which a *physician* gave a prognosis of eventual death or for which palliative care was received prior to the *effective date*.

Travelling companion means a person who has prepaid shared accommodation or transportation with *you*. (Maximum of 5 persons including *you*.)

Treatment means medical, therapeutic or diagnostic procedure prescribed, performed or recommended by a *physician* including, but not limited to, prescribed medication, investigative testing or surgery.

Trip means a period during which *you* are travelling outside of *your country of origin* and for which coverage is in effect.

We, **us** and **our** means CUMIS General Insurance Company, a member of The Co-operators group of companies and/or AZGA Service Canada Inc. operating as Allianz Global Assistance.

You or **your** means the *insured person*.

Legal Information

General Provisions

Assignment

Any benefits payable or which may become payable under this policy cannot be assigned by *you,* and *we* are not responsible for and will not be bound by any assignment into which *you* have entered.

Automatic Extension of Coverage

1. **Delay of conveyance.** Coverage will be automatically extended for up to 72 hours in the event of a delay, due to circumstances beyond *your* control, of the conveyance in which *you* are riding or are scheduled to ride as a passenger. The delay must occur prior to the coverage *expiry date* and the conveyance must be due to arrive prior to the coverage *expiry date*.

   Conveyance means a vehicle, airline, bus, train, or government-operated ferry system.

2. **Medically unfit to travel.** Coverage will be automatically extended for up to 5 days if medical evidence supports that *you* are medically unfit to travel due to a covered *sickness* or *injury* on or before the coverage *expiry date*.

3. **Hospitalization.** Coverage will be automatically extended during the period of *hospital* confinement, plus 72 hours after release to travel home, if *you* are hospitalized at the end of *your trip* as a result of a covered *injury* or *sickness*. This coverage will be extended to *your travelling companion(s)* remaining with *you* when reasonable and necessary, under their respective Allianz Global Assistance administered policy.

Additional premium will not be required for any automatic extension of coverage.

Extending Your Trip

You can extend *your* coverage before *you* depart on *your trip*. If *you* decide to extend *your trip* after *you* have departed *your country of origin*, *you* may apply for a new *period of coverage* provided *you* meet the Eligibility requirements on page 4 of this policy.

Each policy or *period of coverage* is considered a separate contract and all limitations and exclusions will apply.

Benefit Payments

Unless otherwise stated, all provisions in this policy apply to each *insured person* during one *period of coverage*. Benefits are only payable under one policy for each *insured person* during the *period of coverage*.

If an *insured person* is recorded by *us* as having coverage under more than one of *our* policies at the same time, benefits will only be paid under one insurance policy, the one with the greatest sum insured. Benefits are only payable for the plans and the specific sum insured selected, paid for and accepted by Allianz Global Assistance at the time of application, and indicated on *your* confirmation of coverage. Any benefits payable do not include interest charges. Benefits payable as a result of *your* death will be payable to *your* named beneficiary or to *your* Estate.

Claim Submission

You or the claimant, if other than *you,* shall be responsible for providing Allianz Global Assistance with the following:

1. receipts from commercial organizations for all medical costs incurred and itemized accounts of all medical services which have been provided; and
2. any payment made by any other insurance plan or contract, including a government hospital/ medical plan; and
3. substantiating medical documentation, at the request of Allianz Global Assistance.

Failure to provide substantiating documents shall invalidate all claims under this insurance.

Contract

The application, confirmation of coverage, this policy, any document attached to this policy when issued, and any amendment to the policy agreed upon in writing after it is issued, constitute the entire contract. Each policy or term of coverage is considered a separate contract.

***We* reserve the right to decline any application for coverage.**

No condition of this policy shall be deemed to have been waived, either in whole or in part, unless the waiver is clearly expressed in writing and signed by *us*.

Coordination of Benefits

Amounts payable under this plan are in excess of any amounts available or collectible under any existing coverage concurrently in force held by or available to *you*.

Other coverage includes but is not limited to:

- homeowners insurance;
- tenants insurance;
- multi-risk insurance;
- any credit card, third-party liability, group or individual basic or extended health insurance;
- any private or legislative plan of motor vehicle insurance providing hospital, medical or therapeutic coverage.

We will coordinate all benefits in accordance with the Canadian Life and Health Insurance Association guidelines.

Reimbursement will not be made for any costs, services or supplies that are payable to *you* under a motor vehicle insurance policy or legislative plan under any Insurance Act, or for which *you* receive benefits from any other party pursuant to any policy or legislative plan of motor vehicle insurance, until such benefits are exhausted.

You may not claim or receive in total more than 100% of the loss caused by the insured event.

Currency

All amounts stated in the policy, including premium, are in Canadian currency. If currency conversion is necessary, *we* will use the exchange rate on the date the service was rendered to *you*. At *our* option, benefits may be paid in the currency of the country where the loss occurred.

General Terms

Policy terms and conditions are subject to change with each new policy purchased, without prior notice, to reflect actual experience in the marketplace.

Governing Law

This policy will be governed by the laws of the Canadian province or territory where the policy was issued.

Language

The parties request that the policy and all related documentation be drawn in English. Les parties demandent que la présente police ainsi que toute documentation pertinente soient rédigées en anglais.

Limit on Liability

It is a condition precedent to liability under this policy that at the time of application and on the *effective date*, *you* are in good health and know of no reason to seek medical attention.

Limitation of Action

Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the *Insurance Act* (for actions or proceedings governed by the laws of Alberta and British Columbia), *The Insurance Act* (for actions or proceedings governed by the laws of Manitoba), the *Limitations Act, 2002* (for actions or proceedings governed by the laws of Ontario), *The Limitations Act* (for actions or proceedings governed by the laws of Saskatchewan), or other applicable legislation. For those actions or proceedings governed by the laws of Quebec, the prescriptive period is set out in the *Quebec Civil Code*.

Misrepresentation or Nondisclosure

Your failure to disclose or misrepresentation of any material fact, or fraud, either at the time of application or at the time of claim, shall render the entire contract null and void at *our* option, and any claim submitted thereunder shall not be payable.

Where there is an error as to *your* age, provided that *your* age is within the insurable limits of this policy, the premiums will be adjusted according to *your* correct age.

Premiums

The total premium amount is due and payable at the time of application. The premium is calculated using the most current rates for *your* age on the *effective date* of this policy as indicated on *your* confirmation of coverage.

Rights of Examination

The claimant shall provide *us* with the opportunity to examine *you* when and so often as it reasonably requires while a claim is pending. In the case of *your* death, *we* may require an autopsy, subject to any laws of the applicable jurisdiction relating to autopsies.

Right to be Reimbursed (Subrogation)

As a condition to receiving benefits under the policy, *you* agree to:

a) reimburse *us* for all *emergency* medical and *hospital* costs paid under the *policy* from any amounts *you* receive from a third party responsible (in whole or in part) for *your injury* or *sickness* whether such amounts are paid under a judgment or settlement agreement;

b) whenever reasonable, initiate a legal action against the third party to recover *your* damages, which include *emergency* medical and *hospital* costs paid under the policy;

c) include all *emergency* medical and *hospital* costs paid under the policy in any settlement agreement *you* reach with the third party;

d) act reasonably to preserve *our* right to be reimbursed for any *emergency* medical or *hospital* costs paid under the policy;

e) keep *us* informed of the status of any legal action against the third party; and

f) advise *your* counsel of *our* right to reimbursement under the policy.

Your obligations under this section of the policy in no way restricts *our* right to bring a subrogated claim in *your* name against the third party and *you* agree to cooperate with *us* fully should *we* choose to exercise *our* right of subrogation.

Sanctions

Benefits are not payable under this policy for any losses or expenses incurred due to or as a result of *your* travel to a sanctioned country for any business or activity that would violate any Canadian or any other applicable national economic or trade sanction law or regulation.

Time

Expiry time of coverage is the time within the Canadian time zone where the coverage was purchased.

Premium Refunds

A full refund will be provided for policies which are returned within 10 days of purchase, as described in the section titled Right To Examine Policy.

Refunds are payable when:

1. The entire *trip* is cancelled prior to the *effective date*.
2. *You* return to *your country of origin* prior to the *expiry date*, without intending to return to Canada. Refunds are not payable for time spent in *your country of origin* between visits to Canada.
3. *You* become insured under a Canadian provincial or territorial health/medical plan.

When submitting *your* premium refund request, please include:

1. A fully completed and signed Refund Request Form; and
2. A copy of *your* confirmation of coverage; and
3. Confirmation of *your* early departure such as boarding pass or itinerary, or any other written proof of *your* early return to *your country of origin*; and
4. Any other documentation to support *your* refund request.

Important Notes

Premium refunds, regardless of method of payment, must be obtained from the agent where coverage was originally purchased unless purchased directly from Allianz Global Assistance.

There will be no refund of premium if a claim has been made.

Refunds are payable from the date Allianz Global Assistance receives the request.

Refunds for partial cancellations will be calculated by multiplying the daily premium by the actual number of days the policy was in effect; if this amount is less than the minimum premium required for the plan purchased, the minimum premium will be used. This amount is then subtracted from the total premium paid. The refund will be calculated based on the date the refund request is received by Allianz Global Assistance. A refund fee may apply.

Refund amounts less than the minimum premium will not be issued.

Privacy Notice

Protecting your personal information

Protecting *your* personal information is a top priority. This Privacy Notice explains how and what types of personal data will be collected, why it is collected and to whom it is shared or disclosed. PLEASE READ THIS NOTICE CAREFULLY.

CUMIS General Insurance Company (the "insurer") and the insurer's insurance administrator, Allianz Global Assistance, and the insurer's agents, representatives and reinsurers (for the purpose of this Privacy Notice collectively "We" "Us" and "Our") require *Your* personal information.

Personal information we collect

We will collect *your* personal information including but not limited to:

- Surname, First name
- Address
- Date of Birth
- Telephone numbers
- Email addresses
- Credit/debit card and bank account information
- Employment details including termination notices and accepted offers of employment
- Sensitive personal information such as: Medical information relating to *Your* health status, excluding genetic test results

How will we obtain and use your personal information?

This personal information is collected for the following insurance purposes when offering and providing insurance and related services:

- To identify and communicate with *you*
- To consider any application for insurance
- If approved, to issue a Policy or Certificate of Insurance
- To administer insurance and related benefits
- To evaluate insurance risk, manage and coordinate claims, re-price medical expenses and negotiate payment of claims expenses
- To adjudicate claims and to determine eligibility for insurance benefits
- To provide assistance services

- For fraud prevention and debt collection purposes
- As required or permitted by law

We reserve our right to collect personal information, necessary for insurance purposes, from the following individuals:

- Individuals who apply for insurance products
- Certificate holder and/or Policyholders
- Insureds and/or Claimants
- *Family members*, friends or *travelling companions* of a Certificate or Policyholder, Insured or Claimant, in cases where *you*, for medical or other reasons, cannot communicate directly with Us.

Who will have access to your personal information?

We disclose information for insurance purposes, to and with, third parties such as, but not necessarily limited to, other Allianz group companies, health care practitioners and facilities in Canada and abroad, government and private health insurers, *family members* and friends/ *travelling companions* of the Certificate holder or Policyholder, Insured or Claimant and agencies. We may also use and disclose information from Our existing files for insurance purposes. Our employees who require this information for the purposes of administering your insurance will have access to this file. Upon *Your* request and authorization, We may also disclose this information to other persons. From time to time, and if permitted by applicable law, We may also collect, use or disclose personal information in order to offer additional or upgraded products and services (the "optional purposes"). In some instances We may additionally maintain or communicate or transfer information to health care and other service providers located outside of Canada. As a result, personal information may be accessible to regulatory authorities in accordance with the law of these other jurisdictions.

What are your rights in respect of your personal data?

When permitted by applicable law and regulations *you* have the right to:

- Access *your* personal data held about *you*
- Withdraw consent at any time where *your* personal data is processed
- Update or correct *your* personal information so that it is always accurate
- Delete *your* personal information from our records, if it is no longer needed for the purposes indicated above
- File a complaint with Us and/or relevant data protection authority

You may exercise these rights by contacting the Privacy Officer at privacy@allianz-assistance.ca.

How long do we keep your personal data?

We will retain the personal information We collect for a specified period of time and in a storage method appropriate with legal and Our internal corporate requirements. Personal information will be securely destroyed following the expiration of the appropriate retention period. Individuals have a right to request to access or correct personal information We have on file by contacting the Privacy Officer at privacy@allianz-assistance.ca or by writing to:

Privacy Officer

Allianz Global Assistance
700 Jamieson Parkway
Cambridge, Ontario N3C 4N6 Canada

How can you contact us?

For information about how to obtain access to written information about Our policies and procedures with respect to service providers outside of Canada, please contact the Privacy Officer at privacy@allianz-assistance.ca.

For a complete copy of Our Privacy Policy, please visit www.allianz-assistance.ca.

How often do we update this privacy notice?

We regularly review this Privacy Notice. We will ensure the most recent version is available on Our website, www.allianz-assistance.ca.

Contact Information

Administrator:

Allianz Global Assistance
700 Jamieson Parkway
Cambridge, Ontario N3C 4N6
1-800-670-4426

Insurer:

CUMIS General Insurance Company
P.O. Box 5065, 151 North Service Road
Burlington, Ontario L7R 4C2
1-800-263-9120