



EMERGENCY MEDICAL TRAVEL INSURANCE POLICY

Standard Plan

- Special Risks MRM Inc. (“MRM”) administers this policy.
- SelectCare Worldwide provides emergency assistance and claims payment services.
- CUMIS General Insurance Company, a member of The Co-operators group of companies, insures the benefits available under this policy.

This policy must be accompanied by an insurance purchase confirmation to complete the contract.

RIGHT TO EXAMINE POLICY

Please review this policy before *you* travel to ensure it meets *your* needs. *You* have 10 days after purchase to return this policy for a full refund, provided *you* have not departed on *your trip* and a claim has not been incurred. See Refunds Section on page 9 for details.

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IMPORTANT NOTICE – PLEASE READ CAREFULLY

- Travel insurance is designed to cover losses arising from sudden and unforeseeable circumstances. It is important that *you* read and understand *your* policy before *you* travel as *your* coverage may be subject to certain limitations and exclusions. The Limitations and Exclusions section is very important.
- This policy provides *emergency* medical coverage only and is designed to cover losses from an unexpected or unforeseeable *sickness* or *injury* which requires immediate medical attention or *treatment* to prevent or alleviate existing danger to life or health, or to relieve acute symptoms, that cannot be delayed until *you* return to *your province*. If there is no *emergency*, there is no coverage.
- In the event *you* require medical attention, review the terms and conditions of this policy to ensure coverage will be provided.
- SelectCare reserves the right, as reasonably required and at its expense, to transfer *you* to any *hospital* or to transport *you* to Canada 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.
- *Your* policy may not provide coverage for medical conditions and/or symptoms that existed before *your* trip. Check to see how this applies in *your* policy and how it relates to *your* departure date, date of purchase or *effective date*.
- In the event of an accident, *injury* or *sickness*, *your* prior medical history may be reviewed when a claim is made.

Important note about the deductible

If *you* have more than one (1) payable claim under this policy, a *deductible* of \$500 will apply to every subsequent claim. This is in addition to any other *deductible you* have already chosen at time of application.

I want to stay longer. Can I extend my coverage?

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

See Extending Your Trip on page 7 for details.

Travel Assistance

Your policy provides travel assistance. You are required to notify SelectCare Worldwide prior to *treatment*. *Your* policy may limit benefits should *you* not contact the assistance company within a specific time period.

We will use *our* best efforts to provide assistance for a medical *emergency* arising anywhere in the world.

However, SelectCare, the *insurer*, MRM 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.

Extended Absence from Canada

The provincial and territorial government health insurance plans limit the time a person can be out of Canada and still remain eligible for coverage. Check *your province's* health plan for details.

To help you better understand your policy

Key terms in this policy are printed in *bold italics* and are defined in the Definitions section on page 7.

What am I covered for?

To find out what *your* coverage is, please read the section titled Benefits.

What is not covered?

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

How do I make a claim?

Notify SelectCare as soon as possible in the event of an *emergency*.

To submit a claim under this policy, *you* will need to send a completed claim form (with all original bills attached) to SelectCare. Please take care in filling out the form, as any missing information may cause delay. See Claims Procedures on page 10 for details.

WHAT TO DO IN AN EMERGENCY?

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

Limits on Coverage

If *you* fail to notify SelectCare without reasonable cause, then SelectCare will pay 75% of the claim payable. *You* will be responsible for the remaining 25% of the claim payable.

Toll free Canada/U.S.A.: **1-866-261-1723**

If unable to contact us through the toll free number call collect: **416-340-1553**.

NOTICE ON PRIVACY

Is my personal information protected?

We are committed to protecting the privacy, confidentiality and security of the personal information *we* collect, use and disclose. *Your* personal information, including *your* medical history, will be collected, used and disclosed only for the purpose of providing *you* with the requested insurance services. For a copy of *our* privacy policy, please contact *us* or visit *our* website www.cooperatorstravelinsurance.ca.

Underwriter Information and Authorization

The *insurer* is expressly authorized by *your* application to disclose *your* personal health information and that of insured family members, to MRM and SelectCare Worldwide for the purposes of discussing any aspect of assessing risk under *your* policy for underwriting purposes and the adjudication of any claim.

PLANS AVAILABLE

a) Cover My Conditions Plan

If *you* purchased the **Cover My Conditions Plan**:

- *You* received a Medical Statement.
- If *your* medical condition changes before *your* policy *effective date*, *you* must notify *your* broker in writing and obtain a new insurance purchase confirmation.
- If *you* do not correct the information or it has been determined that *you* have a *pre-existing condition(s)* not indicated on the medical statement, *your* policy may become void and no benefits will be payable; *your* premium will be refunded.

b) Take a Risk Plan

If *you* purchased the **Take a Risk Plan**:

- *You* declared *you* have *pre-existing conditions*, but **DO NOT WANT** the conditions covered.
- A Medical Statement is not part of *your* insurance purchase confirmation.
- This plan provides coverage for a new *sickness* or new *injury* that first manifest itself during the policy period only subject to limitations and exclusions.
- No coverage is provided for any loss or expense caused directly or indirectly by any *pre-existing conditions* which existed prior to the *effective date*.

SUMMARY OF BENEFITS

Emergency Medical Travel Insurance	Limits
Overall maximum	\$5 million
Included in the overall maximum:	
<i>Hospital</i> confinement and	
Medical Services	up to overall maximum
Emergency Return Home (regular flight or air ambulance)	
Outside Canada	\$300,000
Within Canada (outside <i>your province</i>)	\$25,000
Chiropractor, osteopath, chiropodist, podiatrist	
or physiotherapist	50% up to \$500 per profession
Prescription Medication	up to a 30-day supply, to a
.....maximum of \$500, except during <i>hospitalization</i>	
Dental Accident	\$2,000
Out-of-Pocket Expenses.....	\$100
Transportation of Relative.....	\$2,000
Repatriation or burial/ cremation at place of death...	\$5,000
Return of Travelling Companion	\$2,000
Meals and Commercial	
Accommodation	\$1,500
Vehicle Return	\$2,000
Pet Return.....	\$500
Emergency Round Trip	\$2,000
Trip-Break for Single-Trip Plans.....	up to 15 days

HOW THIS POLICY WORKS- INSURING AGREEMENT

In consideration of *your* complete and truthful application for insurance and payment of the appropriate premium and subject to the terms and conditions of this policy, *we* will pay the *reasonable and customary* costs for covered expenses incurred by *you* as a result of a medical *emergency* during *your trip*, up to a maximum aggregate of \$5,000,000 per *insured* per *trip*, but only if these covered expenses are in excess of *your deductible*, any amount covered by *your* Government Health Insurance Plan or any other benefit plan.

You will be responsible for expenses that are not payable by the *insurer*.

ELIGIBILITY FOR COVERAGE

To be eligible for coverage *you* must, as the *effective date*:

- a) be a Canadian resident insured and covered under *your* Government Health Insurance Plan (GHIP) during the full length of *your trip* outside *your province*;
- b) know of no reason why *you* would require medical attention during *your trip*.

In addition to the preceding requirements, **you** are **not eligible** for coverage, if as of the *effective date*:

Cover My Conditions Plan:

- i) **you** failed to meet the medical eligibility requirements on **your** application for this coverage.

Take a Risk Plan:

- i) **you** have received *treatment* for any cancer (other than basal or squamous cell cancer or breast cancer treated only with hormone therapy) in the last 3 months; or
- ii) **you** have received or are awaiting a bone marrow, heart, kidney, liver, or lung transplant; or
- iii) **you** have been diagnosed with or received *treatment* for a kidney disease requiring dialysis; or
- iv) **you** have ever been diagnosed with an *auto-immune disorder*.

Start of Coverage

Coverage starts on the *effective date*.

Waiting Period

If **you** purchase **your** policy after **you** have exited **your** province, or Canada, any *sickness* that manifests itself during the first 5 days after the *effective date* is not covered even if related expenses are incurred after the 5-day waiting period.

End of Coverage

Coverage ends on the *termination date*.

EMERGENCY MEDICAL TRAVEL INSURANCE

Coverage may be purchased on a Single-trip or Multi-trip basis. Refer to **your** confirmation of coverage for the coverage **you** have selected.

Multi-Trip Annual Plan Coverage

Provides Emergency Medical Travel Insurance for unlimited travel within Canada but outside **your** province; and allows **you** to depart from any province/territory and return to any province/territory.

Coverage for each separate *trip* commences and becomes effective immediately upon **your** departure from **your** province or territory of residence and expires when **you** return to **your** province or territory of residence.

If **you** incur a claim, **you** will need to provide proof of **your** date of departure from and return to:

- a) **your** province or territory of residence, for trips within Canada; and
- b) Canada, for trips outside Canada.

The maximum number of days for each *trip* outside Canada is as shown on **your** confirmation of coverage, and will be counted starting the date **you** exit Canada.

Trips within Canada are limited only to the maximum number of days allowed by **your** provincial or territorial health insurance plan.

If **your** health changes after **your** Multi-Trip Annual Plan policy *effective date*, **your** eligibility will not be affected but coverage for the medical condition(s) which changed will be subject to **your** Pre-existing Medical Conditions Exclusion.

BENEFITS

Covered expenses and benefits are subject to the policy's maximums, exclusions and limitations.

1. EMERGENCY HOSPITAL and MEDICAL SERVICES Outside Canada

The *insurer* agrees 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 RETURN HOME by regular flight or air ambulance

The *insurer* agrees to transport **you** to the nearest appropriate medical facility or to a Canadian *hospital* due to a covered *emergency sickness* or *injury*. Any *emergency* transportation such as air ambulance, one-way airfare, stretcher, and/or a medical attendant, must be pre-approved and arranged by SelectCare.

The maximum benefit payable is:

- \$300,000 if **your** *emergency* occurs outside Canada
- \$25,000 if **your** *emergency* occurs within Canada

SUPPLEMENTARY BENEFITS

3. **PROFESSIONAL SERVICES** - 50% of the costs for the services of a chiropractor, chiropodist, podiatrist, osteopath and physiotherapist are covered up to \$500 when referred by a *physician* following a covered *injury*.
4. **PRESCRIPTION MEDICATION** – drugs or medications that require a *physician's* written prescription, not exceeding a 30-day supply, to a maximum of \$500, except during *hospitalization* as an in-patient.
5. **DENTAL ACCIDENT** - up to \$2,000 when **your** sound natural teeth are damaged as the result of a direct accidental blow to the mouth.
6. **OUT-OF-POCKET EXPENSES** - up to \$100 for additional out-of-pocket expenses (i.e., telephone, television rental) when **you** are hospitalized for a covered *emergency*.
Expenses must be supported by an original receipt.
7. **TRANSPORTATION OF RELATIVE** - up to \$2,000 for the cost of one round-trip economy class fare to transport a relative to **your** bedside if **you** are *hospitalized* for a covered *critical injury* or *sickness*.
Your relative must arrange their own insurance coverage.
8. **REPATRIATION** - in the event of **your** death from a covered *injury* or *sickness*, **we** will pay up to \$5,000 to return **your** body to Canada or for the cost of burial or cremation at the place of death. The cost of the coffin or urn is excluded.
9. **RETURN OF TRAVELLING COMPANION / DEPENDENT CHILDREN** If **you** return home under Benefits #2 or #8, up to \$2,000 for the cost of returning **one** travelling companion and dependents (who are under age 19 living at home and reliant on **you** for their sole means of support) travelling with **you** at the time of the *emergency* if their return home is not covered under any other policy; and, if necessary, up to \$1,000 for the cost of the services of a caregiver (other than a travelling companion or relative) to escort **your** dependents (who are under age 16) to their home.

10. **MEALS & COMMERCIAL ACCOMMODATION** - up to \$200 a day up to a maximum of \$1,500 when the return portion of an *insured trip* is delayed beyond the scheduled date due to an *emergency* or death of *your family member* or a travelling companion with whom *you* are travelling during an *insured trip*.

11. **VEHICLE RETURN** - If, as a result of a covered *sickness* or *injury*, *you* are unable to return to Canada with the *vehicle* used for *your trip*, the *insurer* agrees to reimburse up to a maximum of \$2,000 for the cost of a commercial agency to return the *vehicle*. :

- a) to *your province* or to the nearest commercial rental agency, if *you* were travelling within continental North America; or
- b) the nearest commercial rental agency if *you* were travelling outside continental North America.

This benefit is payable only when approved in advance and arranged by SelectCare, and applies to one *vehicle* only.

12. **PET RETURN** - If *you* are returned to Canada under the Emergency Return Home benefit, or if *you* are *hospitalized* due to a covered *sickness* or *injury*, the *insurer* agrees to reimburse up to \$500 for the cost of returning *your* accompanying dog or cat to your home in Canada.

13. **EMERGENCY ROUND TRIP** – up to \$2,000 for one round-trip economy airfare to return *you* to *your* original destination provided the return back is within *your* current policy period, after *you* have returned to *your province* if *your* immediate return home was required due to:

- a) the *hospitalization* of a *family member* for a minimum period of five (5) consecutive days, or
- b) the death of a *family member*, or
- c) a disaster which renders *your* principal residence in Canada uninhabitable.

Benefits are only payable for one economy class round-trip ticket by the most direct route once during *your* trip and must be approved in advance by SelectCare.

You are not eligible for this benefit if:

- a) your *family member* was *hospitalized*, or in a long-term care facility, or diagnosed with a *terminal illness* during the 180 days prior to *your effective date*; or
- b) the *hospitalization* or death resulted from a *pre-existing condition* for which *treatment* was received in the three (3) months prior to *your effective date*; or
- c) any medical event which occurred prior to *your effective date*, for which it is reasonable to expect *you* would have to return home early from *your trip*; or
- d) *your* Single-trip or Multi-Trip Annual Plan is **30** days or less; or
- e) the eligible *emergency* necessitating *your* return occurs less than **10** days from the *termination date* specified on *your* insurance purchase confirmation.

14. **TRIP BREAK DURING SINGLE TRIP COVERAGE** – during the *insured trip* *you* may return **once** to *your province* for up to 15 consecutive days without terminating this policy.

There is no coverage under this plan in *your province*. Refunds are not payable for any days *you* spend in *your province* during the Trip-Break. *You* must meet the eligibility

requirements of this policy when *you* exit *your province* in order to continue *your* coverage.

Cost of the round-trip is not a covered benefit.

15. AUTOMATIC EXTENSION OF COVERAGE

- a) **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.
- b) **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*. Any fees associated with changes to *your* travel plans are *your* responsibility.
- c) **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 SelectCare administered policy.

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

SPECIFIC CONDITIONS

- 1. In the event of a medical *emergency*, *you* must notify SelectCare Worldwide 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 SelectCare will pay 75% of the claim payable. *You* will be responsible for the remaining 25% of the claim payable.

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

The *deductible* is shown on *your* confirmation of coverage.

- 2. SelectCare reserves the right, as reasonably required and at its expense, to transfer *you* to any *hospital* or to transport *you* to Canada 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. **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, 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 the *insurer*, 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 the *insurer*, 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*.

4. General Provisions of this policy apply. Refer to page 6.

LIMITATIONS AND EXCLUSIONS

1. Pre-existing Medical Conditions Exclusion

- a) For **Cover My Conditions Plans**, benefits are not payable for costs incurred related to or resulting from any *pre-existing condition*:
- that was not *stable* at any time during the 180 days immediately before the *effective date* unless *you* paid the additional premium required to reduce the *stability* to 90 days;
 - listed under "Exclusions" on *your* insurance purchase confirmation;
 - listed under "Notes" on *your* insurance purchase confirmation as an excluded condition; or
 - listed under "Notes" on *your* insurance purchase confirmation, that was not *stable* at any time during the 180 days immediately before the *effective date*.
- b) For **Take a Risk Plans**, benefits are not payable for costs incurred related to or resulting from:
- any *pre-existing condition*;
 - any *heart condition* and/or cerebrovascular (stroke) if *you* have any type of diabetes;
 - any *lung condition* if *you* have been prescribed or used home oxygen or prednisone for a *lung condition* in the 12 months before the *effective date*;
 - any *heart condition* if *you* were diagnosed with or had an episode of congestive heart failure before the *effective date*;
 - any *heart condition* if *you* have ever had *heart surgery*.
2. Benefits are not payable for costs incurred related to an unrepaired aneurysm which was diagnosed before the *effective date*.
3. Benefits are not payable for costs incurred related to major medical or surgical procedures which are not approved in advance by SelectCare, including but not limited to:
- cardiac catheterization, angioplasty and/or cardiovascular surgery including any associated diagnostic testing or charges, except in extreme circumstances where such surgery is performed as an *emergency* immediately upon *hospital* admission;
 - magnetic resonance imaging (MRIs), computerized axial tomography (CAT) scans, sonograms, ultrasounds or biopsies.

- 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.
- Benefits are not payable for costs or losses incurred while sane or insane related to:
 - your* emotional or mental disorders resulting from any cause, including but not limited to anxiety or depression; or
 - your* suicide, attempted *suicide*; or
 - your intentional self-inflicted* injury.
- Benefits are not payable for costs incurred related to:
 - routine pre-natal or post-natal care; or
 - elective treatment; or
 - pregnancy, childbirth or complications thereof after the 31st week of pregnancy; or
 - high-risk pregnancy*; or
 - a child born during a *trip*.
- Benefits are not payable for costs incurred related 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:
 - your* abuse of alcohol; or
 - your* use of prohibited drugs or any other intoxicant; or
 - your* non-compliance with prescribed *treatment* or medical therapy before or after the *effective date*; or
 - your* use of medication or drugs that have not been approved by the appropriate government authority; or
 - your* misuse of medication.
- Benefits are not payable for costs incurred related to injury resulting from training for, competing or participating in:
 - motorized speed contests; or
 - stunt activities; or
 - professional* sport activities; or
 - high-risk activities*.
- Benefits are not payable for costs incurred related 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.
- Benefits are not payable for any costs incurred when a *trip* is undertaken for the purpose of securing medical *treatment*.
- Benefits are not payable for costs incurred related 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.
- Benefits are not payable for costs incurred related to any *treatment* which can be reasonably delayed until *you* return to Canada (whether or not *you* intend to return) by the next available means of transportation, unless approved in advance by SelectCare.
- Benefits are not payable for costs incurred related to a recurrence or complication of the *sickness, injury* or medical condition that resulted in *you* being returned home if *you* elect to resume *your trip* after being returned to Canada.
- Benefits are not payable for costs incurred related to any medical condition that is non-*emergency*, elective or the consequence of a prior elective procedure.

15. Benefits are not payable for costs incurred related to any rehabilitation or convalescent care.
16. Benefits are not payable for costs incurred related to dental or cosmetic surgery.
17. Benefits are not payable for costs incurred related to naturopathic or holistic *treatment*.
18. Benefits are not payable for costs that exceed the *reasonable and customary* rate for the area where the *treatment* or services are being performed.
19. Benefits are not payable for costs incurred related to *treatment* or services that contravene, or are prohibited by, legislation under a provincial or territorial hospital/medical plan.
20. Benefits are not payable for costs incurred related to any *sickness* or *injury* when such *sickness* or *injury* occurs in a city, region, or country for which the Department of Foreign Affairs and International Trade of the Canadian Government issued a written warning prior to the *effective date* to avoid all travel, or to avoid non-essential travel, to that city, region, or country, and such *sickness* or *injury* is related to or due to the reason for the warning.
21. Benefits are not payable for costs incurred related to any fraudulent, dishonest or criminal act by *you*, or any person acting with *you*, or *your* authorized representative, whether acting alone or in collusion with others.
22. Benefits are not payable for costs incurred related 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.
23. Benefits are not payable for costs incurred related to any nuclear occurrence, however caused.
24. Benefits are not payable for costs incurred related 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.
25. Benefits are not payable for costs incurred related to air travel other than as a passenger in a commercial aircraft licensed to carry passengers for hire, except while being transported under the terms of the Emergency Return Home benefit.

GENERAL PROVISIONS

Assignment

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

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 more than one SelectCare administered policy is in effect 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 *us* at the time of application, and indicated on *your* insurance purchase confirmation.

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 SelectCare 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 SelectCare.

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

Contract

The application, completed medical questionnaire, insurance purchase confirmation, 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** insurance contract.

We reserve the right to decline any application or any request for extensions of 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.

SelectCare 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 pursuant to the no-fault benefits schedule 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.

If *you* are retired with an extended health plan provided by a former employer, with a lifetime limit of up to \$50,000, SelectCare will not coordinate benefits with that provider, except in the event of *your* death.

Currency

All amounts stated in the policy including premium are in Canadian dollars. At the option of SelectCare, benefits may be paid in the currency of the country where the loss occurred.

Extending Your Trip

If *you* decide to apply for additional coverage before *you* have left *your province*, contact the agent where coverage was originally purchased.

If *you* decide to apply for additional coverage after *you* have left *your province*, *you* may apply for a new term of coverage if *you*:

- a) make *your* application prior to the *expiry date* of *your* policy; and
- b) are in good health; and
- c) have no reason to seek *treatment* during the new term of coverage.

If *you* have incurred a claim, *we* will review *your* file before deciding on granting an extension.

Each policy or term of coverage is considered a separate contract.

We reserve the right to decline any request for new terms of coverage.

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 in which *you* normally reside.

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 the *insurer* for the recovery of insurance money payable under this policy is absolutely barred unless commenced within the time set out in the Insurance Act or any other applicable legislation.

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 the option of the *insurer*, 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* insurance purchase confirmation.

Rights of Examination

The claimant shall provide SelectCare 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 SelectCare 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 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.

Time

Expiry time of coverage is the time within the time zone where *you* were residing when the application was made.

DEFINITIONS

The following words, when used in this policy, have the following meaning:

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.

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

Auto-immune disorder means acquired immune deficiency syndrome (AIDS) or human immunodeficiency virus (HIV), Grave's disease, Lou Gehrig's disease, multiple sclerosis, myasthenia gravis, sarcoidosis any location, scleroderma, systematic lupus erythematosus.

Deductible means the amount in Canadian dollars which the **insured** must pay per claim before any remaining covered expenses are reimbursed under this policy.

Important Note:

If **you** have more than one (1) payable claim under **our** Emergency Medical Travel Insurance, a **deductible** of \$500 will apply to every subsequent claim. This is in addition to any other **deductible** **you** have already chosen at time of application.

Effective Date means the later of:

- a) the date and time the completed application is accepted by MRM; or
- b) the date indicated as the **effective date** on **your** insurance purchase confirmation; or
- c) the date and time **you** exit **your province**; or
- d) for Multi-trip Plans, the date **you** exit **your province** for each **trip**.

Important Note:

The maximum number of days for each **trip** outside Canada is as shown on **your** confirmation of coverage, and will be **counted** starting the date **you** exit Canada.

Emergency means an unexpected or unforeseeable **sickness** or **injury** which requires immediate medical attention or **treatment** to prevent or alleviate existing danger to life or health, or to relieve acute symptoms, that cannot be delayed until **you** return to **your province**.

Family Member means spouse, parent, legal guardian, step-parent, grandparent, grandchild, in-law, natural or adopted child, stepchild, brother, sister, stepbrother, stepsister, aunt, uncle, niece or nephew.

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.

Heart surgery includes ablation, angioplasty, heart bypass operation, implanted defibrillator, implanted pacemaker, valve replacement (repair), valvuloplasty.

High-risk activity(ies) includes skiing or snowboarding out of bounds, ski jumping, skydiving, 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 meters), white water rafting (except grades 1 to 4), street luge, skeleton activity, **mountaineering**, or participation in any rodeo activity.

High-risk pregnancy means a pregnancy involving a medical condition that puts the mother, the developing fetus or both at a higher than normal risk of developing medical complications during or after the pregnancy and birth. These medical conditions include pre-eclampsia, eclampsia, hypertension, Rh incompatibility, gestational diabetes, or placenta previa.

Hospital means a facility equipped to perform surgery, on an **emergency** in-patient and out-patient basis, but in no event shall this include a nursing home, rest home, convalescent home, rehabilitation centre, home for the aged, or a place for the **treatment** of alcohol or drug addiction.

Hospitalization or **hospitalized** means admitted to a hospital as an in-patient.

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 means person(s) named on the application form for which insurance coverage is in effect under this policy.

Insured trip or **trip** means the time **you** spend outside **your province** and for which coverage is in effect. Coverage on a trip begins on **your effective date** and ends on **your termination date**.

Insurer means CUMIS General Insurance Company, a member of The Co-operators group of companies.

Lung condition means asbestosis, bronchial asthma, bronchiectasis, chronic asthma, chronic bronchitis, chronic obstructive pulmonary disease (COPD), emphysema, pulmonary embolism, pulmonary fibrosis, tuberculosis.

Minor Ailment means any **sickness** or **injury** which does not require:

- i) the use of medication for a period greater than 15 days;
- ii) more than one follow-up visit to a **physician**;
- iii) **hospitalization**, surgical intervention, or referral to a specialist; and
- iv) which ends at least thirty (30) days prior to **your effective date**.

A chronic condition or any complication thereof is not considered a minor ailment; it is a **pre-existing condition**.

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.

Physician means a person, other than a relative, who is legally qualified and licensed to practice medicine or perform surgery. The following are not considered to be physicians: naturopath, herbalist and homeopath.

Pre-existing condition means a medical or physical condition, symptom, illness or disease, whether diagnosed or not, for which *treatment* has been received or taken, or which exhibited *signs or symptoms*, at any time preceding *your effective date* and includes a medically recognized complication or *recurrence* of a medical condition but does not include a *minor ailment*.

Professional means *you* are considered professional by the governing body of the sport and are paid for *your* participation whether *you* win or lose.

Province means *your* province or territory of residence in Canada.

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

Recurrence means the appearance of *signs or symptoms* caused by or related to a medical condition which was previously diagnosed by a *physician* or for which *treatment* was previously received.

Representative means the broker or agent or other location where *we* have made acceptance of payment arrangements.

Sickness means illness, disease, or any symptom related to that illness and/or disease.

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

Stable (stability) as indicated on *your* medical statement summary (if applicable), means that during the specified period:

- 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 the results of further investigations performed by any medical professional.

Exceptions:

- i) the routine adjustment of Coumadin, warfarin, or insulin (as long as the medication is not first prescribed or stopped during the 90 days prior to the *effective date*);
- ii) change from a brand name medication to a generic medication provided the medication was not first prescribed during 90 days prior to the *effective date* and there is no increase or decrease in dosage;
- iii) a *minor ailment*.

Termination date means the earliest of:

- a) the date and time *you* return to *your province or*
- b) the date indicated as the *termination date* on *your* insurance purchase confirmation; or
- c) for Multi-trip Plans, the date *you* reach the maximum number of days permitted for each *trip*, as selected and paid for at the time *you* applied for coverage.

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

Vehicle means any one of a private or rental automobile or mobile home that *you* were driving but does not include any trailers, motorcycles or towed vehicle.

We, us, and our means SelectCare Worldwide and CUMIS General Insurance Company, a member of The Co-operators group of companies.

You or your means the applicable insured.

REFUNDS:

- If *you* are not completely satisfied with this policy, *you* may return it by registered mail to *us* within 10 days of purchase, provided *you* have not started any *trips* during the 10-day review and any premium paid will be refunded in full.
- If *you* wish to cancel *your* policy more than ten (10) days after purchase, requests for a pro-rata premium refund will be considered, in the case of non-departure or early return, if the policy is signed by *you* and returned to *us* and no claim has been paid or is pending.
- A refund will be calculated from the post-date of written notification to *us*, subject to a short rate cancellation premium, an administration fee of \$25.00 per application, and a minimum refund amount of \$10.00

per policy per *insured*.

- Termination shall not be dated before the post-date of *your* request.
- No refund will be paid for Multi-Trip Annual Plans.

CLAIMS PROCEDURES

SEND YOUR CLAIMS TO:

SelectCare Worldwide

2100 - 250 Yonge Street

Toronto, Ontario, Canada M5B 2L7

Collect worldwide: 416-340-1553

Toll free Canada/U.S.A.: 1-866-261-1723

1. **Notice of Claim.** Claims must be reported within 30 days of occurrence.
2. **Proof of Claim.** Written proof of claim must be submitted within 90 days of occurrence.
3. Any costs incurred for documentation or required reports are *your* or the claimant's responsibility.
4. To submit *your* claim, fill out the claim form completely and include all original bills. Incomplete information will cause delay.
5. All eligible claims must be supported by original receipts from commercial organizations.

When submitting *your* Emergency 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*.
3. Any fee for completion of the certificate is not a benefit under this insurance.
4. Completed appropriate provincial government health insurance plan forms; see claim form for details.
5. For Multi-trip Plans, proof of original departure from and return to Canada and/or *your province*.
6. Any other documentation that may be required and/or requested by SelectCare.

Important Note

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

Limits on Coverage

If *you* fail to notify SelectCare without reasonable cause, then SelectCare will pay 75% of the claim payable. *You* will be responsible for the remaining 25% of the claim payable.

Toll free Canada/U.S.A.: **1-866-261-1723**

If unable to contact us through the toll free number call collect: **416-340-1553**.

STATUTORY CONDITIONS

Despite any other provision contained in the contract, this contract is subject to the statutory conditions in the Insurance Act respecting contracts of accident and sickness insurance. For Québec residents, notwithstanding any other provisions herein contained, this contract is subject to the mandatory provisions of the Civil Code of Québec respecting contracts of Accident and Sickness Insurance.

Administered by:

SPECIAL RISKS MRM INC.

811, rue Basile-Routhier

Repentigny, Québec, Canada J6A 7V2

Emergency Assistance and Claims Services Provider:

SelectCare Worldwide

2100 – 250 Yonge Street

Toronto, Ontario M5B 2L7

Underwritten by:

CUMIS General Insurance Company

P.O. Box 5065, 151 North Service Road

Burlington, Ontario L7R 4C2

EMERGENCY PROCEDURES

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

Limits on Coverage

If *you* fail to notify SelectCare without reasonable cause, then SelectCare will pay 75% of the claim payable. *You* will be responsible for the remaining 25% of the claim payable.

We are here to help. *Our* service is available 24 hours a day, 7 days a week. SelectCare Worldwide also provides support and recommendations for non-medical emergencies, providing *you* with access to resources to help resolve any unexpected difficulties *you* encounter during *your trip*.

SELECTCARE WORLDWIDE

Toll free Canada/U.S.A.: 1-866-261-1723

If unable to contact us through the toll free

number call collect: 416-340-1553