



## **AIR MILES Travel Insurance**

# **Canada Comprehensive Policy**

Effective March 2023

Underwritten by

The Manufacturers Life Insurance Company (Manulife) and First North American Insurance Company, a wholly owned subsidiary of Manulife.

### **NOTICE REQUIRED BY PROVINCIAL LEGISLATION**

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

### **Important Notice - Read Carefully Before You Travel**

You have purchased a travel insurance policy - what's next? We want you to understand (and it is in your best interest to know) what your policy includes, what it excludes, and what is limited (payable but with limits). Please take time to read through your policy before you travel. **Italicized terms are defined in your policy.**

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

**It is your responsibility to understand your coverage. If you have questions, call 1 866 298-6581.**



IN THE EVENT OF AN EMERGENCY, CALL:

**1-888-491-2285**

Toll-free from the USA and Canada

**+1 (519) 251-7427**

Collect to Canada where available

NAME \_\_\_\_\_

POLICY # \_\_\_\_\_



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**THIS POLICY IS UNDERWRITTEN** by The Manufacturers Life Insurance Company (Manulife) and First North American Insurance Company (FNAIC), a wholly owned subsidiary of Manulife. Claim payment and administrative services are provided by the administrator, Active Claims Management Inc. Manulife has appointed Active Claims Management (2018) Inc., operating as “Active Care Management,” “ACM,” “Global Excel Management,” and/or “Global Excel” as the provider of all assistance and claims services. Please note that risks identified with ‡ throughout this document are covered by FNAIC.

**10-Day Free Look to Review this Policy**

You have 10 days from *your* insurance purchase date to review this policy. If it does not meet *your* needs, *you* may terminate this insurance coverage and receive a premium refund if:

- (i) *you* have not departed on *your trip*; and
- (ii) there is no claim in progress.

To request a premium refund, simply contact *your* AIR MILES® Rewards Program Travel Specialist from whom *you* purchased the insurance.

**After the 10-Day Free Look, refund of premium is not available.**



Everyone wants to have a carefree trip and should be able to travel with confidence in their travel insurance purchase. Most people travel every day without a problem, but if something does happen, the member companies of the Travel Health Insurance Association of Canada (THiA) want you to know your rights. THiA's Travel Insurance Bill of Rights and Responsibilities builds on the golden rules of travel insurance:

- Know your health • Know your trip
- Know your policy • Know your rights

For more information, go to [www.thiaonline.com](http://www.thiaonline.com)

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If *you* need medical attention or must make any other type of claim during *your trip*, call *us* for assistance first. The Assistance Centre is open 24 hours a day, each day of the year. Immediate access to the Assistance Centre is also available through its Manulife TravelAid mobile app. Before *you* travel download the free assistance & claim mobile app, Manulife TravelAid.

Please note that if *you* do not call the Assistance Centre in an *emergency*, or prior to any *treatment*, *you* will have to pay 25% of the eligible medical expenses *we* would normally pay under this policy. If it is medically impossible for *you* to call, please have someone call on *your* behalf.



If *you* need medical attention or must make any other type of claim during *your trip*, call *us* for assistance first. The Assistance Centre is open 24 hours a day, each day of the year. Immediate access to the Assistance Centre is also available through its Manulife TravelAid mobile app. Before *you* travel download the free assistance & claim mobile app, Manulife TravelAid.

Please note that if *you* do not call the Assistance Centre in an *emergency*, or prior to any *treatment*, *you* will have to pay 25% of the eligible medical expenses *we* would normally pay under this policy. If it is medically impossible for *you* to call, please have someone call on *your* behalf.



## IMPORTANT INFORMATION ABOUT YOUR TRAVEL INSURANCE

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

**To be eligible for insurance under this policy, you must meet all the eligibility requirements outlined on Page 4 of this policy.**

**A pre-existing condition exclusion applies** to *your* coverage. It is ***your responsibility*** to review and understand the *pre-existing condition* exclusion that applies to *you*:

- *Trip Cancellation & Trip Interruption Insurance*: please review the *pre-existing condition* exclusions listed on Page 9 of this policy booklet.
- *Emergency Medical Insurance*: please review the *pre-existing condition* exclusions listed on Page 12 of this policy booklet.

**ITALICIZED WORDS** have a specific meaning. Please refer to the “Definitions” section of this policy to find the meaning of each italicized word.

**IN THE EVENT OF AN EMERGENCY, YOU MUST CALL THE ASSISTANCE CENTRE IMMEDIATELY**

**1 888 491-2285** toll-free from the USA and Canada, **+1 (519) 251-7427** collect where available.

Our Assistance Centre is there to help *you* 24 hours a day, every day of the year.

Our Assistance Centre can also be contacted through the Manulife TravelAid mobile app. Download the app through the Google Play™ store or the Apple App Store®. For more information, visit [active-care.ca](http://active-care.ca)

Please note that **if you do not call** the Assistance Centre in an *emergency*, **you will have to pay 25% of the eligible medical expenses** we would normally pay under this policy. If it is medically impossible for *you* to call, please have someone call on *your* behalf.

## MANULIFE FLIGHT ASSISTANCE

Manulife has contracted Blink Parametric (Blink) to use their technology to monitor and track all flights that *you* register with them at [flightassistancemanulife.com](http://flightassistancemanulife.com). If *your* airline provider delays *your* flight at least 3 hours beyond the scheduled departure time or cancels *your* flight, Blink administers payment of the covered benefits. See page 20 for full details.

**Important:** *You* must register *your* mobile/cell phone number and the flight information for each flight in *your* journey for each insured person, at least 1 hour before the scheduled departure time. Blink will contact *you* at the phone number *you* provide in *your* registration.

This service is provided by Blink and its availability is subject to change without notice.

## INTRODUCTION

### Policy Contract

This is *your* insurance policy, a contract detailing terms and conditions of the insurance coverage *you* purchased. Coverage under this policy is issued on the basis of information provided in *your* application (including the *questionnaire* if required). *Your* entire contract with *us* consists of: this policy; *your* application for this policy (including the completed and signed *questionnaire*, if required); the *confirmation* issued in respect of that application; and any other amendments or endorsements resulting from extensions of coverage.

### How to contact us

Prior to travelling, or when travelling and *you* require *emergency* assistance, call 1 888 491-2285 toll-free from the USA and Canada +1 (519) 251-7427 collect where available. For coverage information or general enquiries, please contact the AIR MILES Travel Insurance Customer Service Centre at 1 866 298-6581.

## SCHEDULE OF BENEFITS

Canada Comprehensive Policy	
Eligible Age*	No Limit
Medical Concierge Services	Included
Trip Cancellation & Trip Interruption	
Trip Cancellation	Covered Amount Selected (covered amount insured)
Trip Interruption	Unlimited
Cancel For Any Reason	See Page 5
Early Return Transportation - Accommodation & Meals	Same class <i>fare</i> - \$350 per day/Maximum \$3,500
Misconnection & Travel Delay	See Page 7
Special Events	\$800
Delayed Return Transportation - Accommodation & Meals	See Page 8 \$350 per day/Maximum \$3,500
Default Protection	See Page 10
Act of Terrorism Coverage	See Page 16
Emergency Medical**	
Hospital & Medical	\$5,000,000
Accidental Dental	See Page 11
Medical Repatriation	\$5,000,000
Accommodation & Meals	\$500/day maximum \$5,000
Expenses for Childcare	\$50/day maximum \$500
Expenses Related to <i>Your</i> Death	See Page 12
Act of Terrorism Coverage	See Page 16
Baggage Loss, Damage & Delay	
Passport Replacement	\$300
Baggage Delay	\$600
Maximum Per Item	\$500
Personal Money	\$300
Flight & Travel Accident	
Flight Accident	\$250,000
Travel Accident	\$50,000

\* *Your child* must be at least 31 days old to be insured.

\*\* *Emergency Medical* coverage is limited to a maximum of \$25,000 if *you* do not have valid coverage under a *government health insurance plan* for the entire duration of *your trip*.

## MEDICAL CONCIERGE SERVICES

Manulife AIR MILES Travel Insurance is pleased to provide you with value-added medical concierge services.

### What services are available?

StandbyMD has an International network of medical providers and partners who provide services across time zones and who assure a quick and streamlined access to healthcare 24 / 7 / 365 all over the world.

StandbyMD allows you to access multiple levels of personalized care ranging from:

- Teleconsultations for eligible cases (telephone / chat / videoconference access to a qualified physician who can assess your symptoms and provide treatment options)
- A network of visiting physicians (in 141 countries and over 4,500 cities)
- In-network clinics close to the patient
- In-network ERs located close to the patient only if necessary

In addition, when you travel within Canada or to the United States, StandbyMD offers the following services:

- Same-day co-ordination and delivery of lost/forgotten prescription maintenance medication, eyeglasses or contact lenses and medical supplies.

**How does this service work?** StandbyMD's risk assessment algorithm triages patients according to their symptoms, profiles and location.

Based on the information provided they are instantly referred to the most appropriate level of care their specific situation requires.

StandbyMD uses a worldwide network of providers that offer high-quality care at preferred rates and direct billing solutions, minimizing the likelihood of paying out-of-pocket.

The StandbyMD program will assist with co-ordinating payment of eligible expenses subject to the terms and conditions of the policy. To access this service, simply call the Assistance Centre using the phone numbers indicated on the wallet card.

**Disclaimer, Waiver, and Limitation of Liability:** StandbyMD is not intended to be a substitute for professional medical advice, it is provided for the purpose of assisting you in finding medical providers. The advice provided by StandbyMD is a recommendation only, and entirely voluntary.

You still retain the right to choose for yourself, your own level of care regardless of StandbyMD's recommendation. Medical providers utilized by StandbyMD are not employees, agents, nor in any way affiliated with StandbyMD, beyond accepting StandbyMD's referrals. StandbyMD does not have any control, real or implied, over the medical judgment of participating medical providers, nor their actions or inactions. StandbyMD, upon making referrals under this policy does not assume any responsibility for:

- the availability,
- their quality,
- the results or outcome of any treatment or service.

**Policyholders hereby specifically waive any and all rights to proceed legally against StandbyMD or anyone related to StandbyMD\*** in any and all claims, demands, actions, causes of action, and suits of any kind, nature, or amount which relate to, or in any way directly or indirectly flow from the medical concierge services that StandbyMD is offering.

StandbyMD's liability under these medical concierge services, if any, is limited solely to the amount of payment made to participating medical providers for the services that a policyholder obtained after they received a referral from StandbyMD.

\*Related persons include principals, parents, successors and assigns of StandbyMD.

## ELIGIBILITY

### You are NOT eligible for coverage if:

- a) you have been advised by a *physician* not to travel; and/or
- b) you have been diagnosed with a terminal illness with less than 6 months to live; and/or
- c) you have a kidney condition requiring dialysis; and/or
- d) you have used home oxygen during the 12 months prior to the date of application.

### TO BE ELIGIBLE FOR INSURANCE UNDER THIS POLICY

The AIR MILES Canada Comprehensive Policy is available if:

1. You have booked travel arrangements through the AIR MILES Reward Program with an AIR MILES Travel Specialist or through the AIR MILES website [www.airmiles.ca](http://www.airmiles.ca).
2. You are a resident of Canada and insured under a Canadian provincial or territorial *government health insurance plan*. If, at time of claim, it is discovered that you no longer have a *government health insurance plan*, the limit of coverage is **\$25,000**.
3. Your policy must be purchased prior to your *departure date* and must cover the full duration of your *trip*.
4. The total duration of the *trip* must not exceed 183 days, for all *ages*.
5. When the *trip* value is to exceed **\$15,000**, you must complete a *medical questionnaire*.
6. Your *trip* is entirely within Canada.

**IF YOU DO NOT MEET ALL OF THE ABOVE ELIGIBILITY REQUIREMENTS, YOU ARE NOT ELIGIBLE TO PURCHASE THIS INSURANCE.**

## GENERAL INFORMATION ABOUT YOUR TRAVEL INSURANCE

Coverage must be for the entire time that you are away from *home* and you must pay the required premium before you leave *home*.

**Under Trip Cancellation Insurance - Cancel for Any Reason,** the cancel for any reason benefit does not apply if you did not purchase your policy within **72** hours of your initial *trip* booking or before any cancellation penalties became applicable.

**Family coverage** is available to you if all family members to be insured under one policy are:

- a. named in your *confirmation*,
- b. all insureds are under *age* 60,
- c. you have purchased and paid for family coverage, and
- d. travelling together.

Family Coverage (a maximum of 2 adults) can include:

- i) you (either as a parent or grandparent) and your *children/grandchildren*;
- ii) you and your *spouse* and your *children* or *grandchildren*; or
- iii) three generations of a single family (grandparent[s], parent[s] and their *children*).

*Children* and/or *grandchildren* must be at least 31 days of *age* to be insured under the coverage purchased.

**Family Coverage Calculation:** Family coverage is available at 3 times the older (or only) parent's or grandparent's rate.

Additionally, If *you* have an infant who is at least 31 days old and under 2 years old for the **entire duration** of *your trip* who is an *immediate family member*, travelling with *you* and listed on the *confirmation* for this insurance, the infant will be covered at no charge under *your Canada Comprehensive Policy*.

#### THE DATE YOUR COVERAGE STARTS / YOUR EFFECTIVE DATE OF COVERAGE

**For Trip Cancellation Insurance**, coverage starts at the date and time *you* pay the premium for that coverage.

**For Emergency Medical Insurance**, coverage starts when *you* leave *home*.

**For Trip Interruption Insurance; Baggage Loss, Damage & Delay Insurance and Flight & Travel Accident Insurance**, coverage starts on *your departure date*.

#### THE DATE YOUR COVERAGE ENDS / YOUR COVERAGE EXPIRY DATE

**For Trip Cancellation Insurance**, coverage ends on *your departure date* as shown on *your confirmation*.

**For Emergency Medical Insurance**, coverage ends on the earlier of:

- a) the date *you* return *home*\*; or
- b) on the expiry date as shown on *your confirmation*.

**For Trip Interruption Insurance; Baggage Loss, Damage & Delay Insurance and Flight & Travel Accident Insurance**, coverage ends on the earlier of:

- a) the date when *you* return to *your departure point*\*; or
- b) *your* expiry date as shown on *your confirmation*.

\**Your* insurance coverage will not end if *you* temporarily return to *your province* or territory of residence. In such a case, *your policy* will remain in effect up to *your original return date* except we will apply the *pre-existing condition* exclusion based on *your new departure date* upon continuing *your trip*.

## ADDITIONAL INFORMATION

### AUTOMATIC EXTENSION

We will extend *your coverage* automatically beyond the date *you* were scheduled to return *home* as per the return date indicated on *your confirmation* if:

- *your common carrier* is delayed or *you* are delayed due to circumstances beyond *your control*. In these situations, we will extend *your coverage* for up to 72 hours; or
- *you* or *your travel companion* or an *immediate family member* travelling with *you* is hospitalized on that date. In this case, we will extend *your coverage* during the hospitalization and for up to 5 days after discharge from the *hospital*; or
- *you* or *your travel companion* or an *immediate family member* travelling with *you* has an *emergency* that does not require hospitalization but prevents travel (as documented by the attending *physician* at destination). In this case, we will extend *your coverage* for up to 72 hours.

However, if travel is medically possible before the applicable 5 days or 72 hours have passed, we will honour *your claim* for eligible expenses only until such earlier date.

In any case, we will not extend any coverage beyond 12 months after *your effective date* of insurance.

## TO STAY LONGER THAN PLANNED

### Extensions:

To obtain an extension of *your coverage*, simply call *your* AIR MILES Reward Program Travel Specialist to request the extension.

If, however, *you* are already on *your trip* and need to apply for an extension of *your coverage*, simply call *your* AIR MILES Reward Program Travel Specialist before the *expiry date* of *your existing coverage* at:

**1-844-399-ONYX or 1-844-399-6699**

*You* may be able to extend *your coverage* as long as:

- the total length of *your trip* does not exceed the maximum allowed by *your government health insurance plan*;
- *you* pay the additional premium; and
- *you* have had no event that has resulted or may result in a claim.

Any extension after departure is subject to the approval of the Assistance Centre.

## TRIP CANCELLATION AND TRIP INTERRUPTION INSURANCE

To have full coverage under *Trip Cancellation* and *Trip Interruption Insurance*, *you* must book *your travel arrangements* through the AIR MILES Reward Program and purchase coverage for the full value of the non-refundable portion and the full duration of *your trip*. Any reimbursements for unused travel arrangements available under this coverage will be based and limited to that portion of travel arrangements that have been booked through the AIR MILES Reward Program.

### IMPORTANT CONDITION ON YOUR TRIP CANCELLATION COVERAGE CANCEL FOR ANY REASON

If *you* **DO NOT** qualify for cancellation benefits under **Covered Events for Trip Cancellation**, and *you* want to cancel *your trip* for any other reason, consider submitting a claim under this “**Cancel for any Reason**” benefit.

**Cancel for any Reason coverage is available only:**

- a) if *you* purchased *your policy* within **72 hours** of booking *your trip*, or
- b) before any cancellation penalties became applicable.

**CANCEL FOR ANY REASON BENEFIT** - If *you* decide not to travel, *you* can cancel *your trip* for any reason **10 days or more** before *your scheduled departure date*, and *you* will be reimbursed 50% of the non-refundable portion of *your trip*.

### I. What does Trip Cancellation Insurance cover? Benefits –

If *you* are unable to travel due to a covered event listed immediately below that occurs before *you* leave *home*, **WE WILL PAY**, up to the covered amount *you* purchased:

1. For the prepaid unused portion of *your trip* that is non-refundable and non-transferable to another travel date including published AIR MILES Reward Program service fees.
2. The published cancellation penalties imposed by hotels for unused accommodations.
3. The change fee charged for rebooking the travel arrangements as originally booked for *your trip* when such an option is made available by the AIR MILES Reward Program.

4. In addition, if *your travel companion* must cancel his/her *trip* due to a covered event applicable to him/her, and *you* decide to go on *your trip* as planned, we will cover the cost of the next occupancy charge up to the covered amount.
5. At *your* option, the cost to catch up to *your trip*, if *you* qualify to cancel but choose instead to continue on *your trip*, providing the cost to catch up is less than the cost to cancel *your trip*.

### **What are the conditions that apply to Trip Cancellation Insurance?**

If *you* cancel *your trip* before *your departure date*, *you* must advise an AIR MILES Rewards Program Travel Specialist within 72 hours of the cause of cancellation. Only the sums that are non-refundable on the date the reason for cancellation (covered event) occurs shall be considered for the purposes of the claim. Any delays in notifying an AIR MILES Rewards Program Travel Specialist will limit *your* benefit to the non-refundable amount that would have been payable on the date the cause for claim occurred.

*Trip Cancellation* for a *medical condition* must be recommended by the attending *physician* in the locality where the *medical condition* occurred. See other conditions under In the Event of a Claim.

### **II. What does Trip Interruption Insurance cover? Benefits –**

**If *your trip* is interrupted due to a covered event listed immediately below that occurs on or after the day *you* plan to leave home, WE WILL PAY**, the following:

1. For the prepaid unused portion of *your trip* that is non-refundable and non-transferable to another travel date less the prepaid unused transportation *home*.
2. The additional cost of *your* one-way same class transportation by the most cost-effective itinerary (being the lesser of a one-way *fare* or change fee charged by the airline on existing tickets if this option is available) to *your* or *your group's* next destination, or to return *home*.
3. We will also reimburse, when no earlier transportation arrangements are available, *your* additional and unplanned hotel and meal expenses, *your* essential phone calls and taxi fares to a maximum of up to **\$350 per day** to a maximum of **\$3,500**.
4. The published cancellation penalties imposed for the early return of a *rental vehicle* prior to the contracted date of return.
5. The published cancellation penalties imposed by hotels for unused accommodations.
6. If *you* must interrupt *your trip* to attend a funeral or go to the bedside of a hospitalized *immediate family* member, we will reimburse *you* for the cost of a round-trip ticket *you* have paid for, up to the amount of a one-way *fare* to return *home*.

### **COVERED EVENTS FOR I. TRIP CANCELLATION INSURANCE AND II. TRIP INTERRUPTION INSURANCE:**

#### **Medical**

1. *You* or *your travel companion* develop(s) a *medical condition*.
2. A member of *your immediate family* or *your key-person*, a member of *your travel companion's immediate family* or their *key-person* develops a *medical condition*.
3. A *medical condition* which, in the written opinion of the attending *physician*, prevents *you* or *your travel companion* from participating in a sporting event when the purpose of *your trip* was to participate in that sporting event.
4. *You* or *your travel companion* are medically unable to receive an injection or medication that is suddenly required for entry into a country, region or city originally ticketed in *your* travel arrangements provided that such requirement was not mandatory on the date of application for insurance.
5. *You*, *your spouse*, *your travel companion* or *your travel companion's spouse* are quarantined.

6. ‡ *Sickness or injury* of *your* service animal, provided *you* are an individual with a disability (physical, psychiatric or mental disability), and travel arrangements have been made for the service animal to accompany *you* on *your trip*. For this benefit to apply, the travel arrangement cost for *your* service animal must be included in the covered amount insured.
7. The medical *treatment* that was the purpose of *your trip* outside of *your* province or territory of residence and had been arranged by *your government health insurance plan* or *your* private health insurance plan is cancelled or rescheduled, provided that the cancellation or reschedule is due to a reason beyond *your* control or the control of the medical facility providing the treatment.

#### **Death**

8. *You* or *your travel companion* die(s).
9. A member of *your immediate family* or *your key-person*, a member of *your travel companion's immediate family* or their *key-person* dies.
10. *Your* or *your travel companion's* friend dies.
11. ‡ Death of *your* service animal, provided *you* are an individual with a disability (physical, psychiatric or mental disability), and travel arrangements have been made for the service animal to accompany *you* on *your trip*. For this benefit to apply, the travel arrangement cost for *your* service animal must be included in the covered amount insured.

#### **Pregnancy or Adoption**

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

#### **Accommodations**

15. The person whose guest *you* will be during *your trip* is quarantined, admitted to a *hospital* in an *emergency* or dies.
16. ‡ *You*, *your spouse*, *your travel companion* or *your travel companion's spouse* are unable to occupy *your/their* principal residence because of an event that is independent of any intentional or negligent act on *your/their* part.
17. ‡ *You*, *your spouse*, *your travel companion* or *your travel companion's spouse* are unable to operate *your/their* place of business because of an event that is independent of any intentional or negligent act on *your/their* part.
18. ‡ *Your* or *your travel companion's* principal residence or place of business is burglarized within 7 days of the *departure date* or during *your trip*.
19. ‡ Fire, vandalism, burglary or a natural disaster renders *your* destination accommodations uninhabitable for the period of *your trip*.

#### **Weather**

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

## **Employment and Education Obligations**

21. ‡ *You, your spouse, your travel companion or your travel companion's spouse* are summoned to essential emergency service as a reservist, firefighter, emergency medical personnel, police force or armed forces during *your trip*.
22. ‡ *You, your spouse, your travel companion or your travel companion's spouse* involuntarily lose a permanent job (excluding contract or self-employment) due to layoff or dismissal without just cause.
23. ‡ *You, your spouse, your travel companion or your travel companion's spouse* are transferred by *your /their* respective employer and must move from *your/their* respective principal residence (for this benefit to apply, the person who is relocating must be an active full-time employee with that employer).
24. ‡ Cancellation of *your or your travel companion's* business meeting, conference or convention that is the main intent of *your trip* and was scheduled before *you* purchased this insurance, provided the cancellation is for a reason beyond *your* control or the control of *your employer or your travel companion's* employer. This event must be between companies with unrelated ownership and, in the case of a conference or convention, *you or your travel companion* must be a registered delegate.
25. ‡ *You or your travel companion* are required to attend a university or college course exam and the date of the exam falls during *your trip*. This benefit applies if the exam date was published prior to *your* application for this insurance and was subsequently changed after *you* booked *your trip* and purchased this insurance.
26. ‡ *Your or your travel companion's* college or university classes are rescheduled to a date that falls during *your trip* due to circumstances beyond *your or your travel companion's* control. This benefit applies if both the unforeseen circumstances and the resulting rescheduling occur after *you* purchase this insurance.
27. ‡ The requirement that *you or your travel companion* attend a professional career program examination or a university or college course examination on a date that occurs during *your insured trip*, provided the examination date which was published prior to the date of application for insurance was subsequently changed after *your* travel arrangements were made and after *you* purchased this insurance.

## **Government and Legal**

28. ‡ *Your or your travel companion's* travel visa is not issued for a reason beyond *your/their* control, provided the documentation shows *you or your travel companion* were eligible to apply, that the refusal is not due to a late application, and the application is not a subsequent attempt for a visa that had been previously refused.
29. ‡ *Your or your travel companion's* passport is not issued within the time confirmed to *you/them* in writing by Passport Canada, provided that *you or your travel companion* had personally submitted the application to an authorized passport office and that it had been reviewed and found satisfactory by Passport Canada authorized personnel. This applies only to Canadian citizens.
30. ‡ *You, your spouse, your travel companion or your travel companion's spouse* are; a) called to jury duty, or b) subpoenaed to be a witness, or c) required to appear as a defendant in a civil suit.
31. ‡ The Government of Canada issues an "Avoid Non-Essential Travel" or an "Avoid All Travel" travel advisory after *you* purchase *your* insurance, advising or recommending that Canadian residents should not visit a destination included in *your trip*.

## **Hijacking**

32. ‡ *You, your spouse, your travel companion or your travel companion's spouse* are hijacked.

**If you do not qualify for cancellation benefits under "Covered Events for I. Trip Cancellation Insurance and II. Trip Interruption Insurance", you may still qualify for benefits under the "Cancel for any Reason" coverage provision described on Page 5.**

## **III. What does Misconnection & Travel Delay Insurance cover? Benefits –**

**If any of the covered events listed immediately below prevent you from travelling as shown on your confirmation, WE WILL PAY:**

If covered event #1 or #2 listed immediately below occurs before or on your originally scheduled departure date, we will pay:

- a) up to **\$1,000** for the additional cost of *your* one-way transportation by the most cost-effective itinerary (being the lesser of a one-way fare or change fee charged by the airline on existing tickets if this option is available) to *your* next destination;
- b) in addition, we will pay *your* additional and unplanned hotel and meal expenses, *your* essential phone calls and taxi fares to a maximum of **\$350 per day** to a maximum of **\$700**.

For Misconnection & Travel Delay on or after your originally scheduled departure date, we will pay up to a maximum of **\$1,000** under benefits a), b) and c):

- a) the unused prepaid portion of *your trip* (less the prepaid unused transportation *home*) that is non-refundable and non-transferable to another travel date (provided such expenses are not reimbursable by any other source);
- b) the additional cost of *your* one-way transportation by the most cost-effective itinerary (being the lesser of a one-way fare or change fee charged by the airline on existing tickets if this option is available) to *your* next destination or to return *home*;
- c) up to **\$100** for additional pet care expenses for *your* pet boarded at a commercial pet boarding facility if the misconnection or travel delay results in *your* returning *home* 24 hours later than originally scheduled;
- d) in addition to benefits a), b) and c) above, we will pay *your* additional and unplanned hotel and meal expenses, *your* essential phone calls and taxi fares to a maximum of **\$350 per day** to a maximum of **\$3,500**.

## **COVERED EVENTS FOR MISCONNECTION & TRAVEL DELAY INSURANCE**

1. ‡ *You* miss *your* next connecting *common carrier* because the *common carrier* that is providing transportation for a portion of *your trip* leaves later than originally scheduled as a result of a schedule change.
2. ‡ The *common carrier* that is providing transportation for a portion of *your trip* leaves earlier than originally scheduled as a result of a schedule change and the ticket *you* have purchased for *your* prior connection via another *common carrier* becomes unusable.
3. ‡ *You or your travel companion* are delayed for at least 6 hours in arriving at *your trip* destination or returning to *your home* due to the delay or schedule change or cancellation of *your or your travel companion's common carrier*.
4. ‡ *You* miss a connection or must interrupt *your trip* because of the delay of *your or your travel companion's* private passenger vehicle when the delay is caused by the mechanical failure of the private passenger vehicle, a traffic accident, an emergency police-directed road closure, weather conditions, earthquakes or volcanic eruptions. *You or your travel companion* must have calculated the

departure with the private passenger *vehicle* to include enough travel time to comply with the *travel supplier's* required check-in procedure.

5. ‡ You miss a connection or must interrupt *your trip* because of a delay in clearing customs and security controls due to *your* or *your travel companion's* mistaken identity.
6. ‡ You miss a connection because the cruise ship *you* are travelling on is delayed (or the itinerary is modified) because of another passenger's medical *emergency*.

**Only Misconnection and Travel Delay expenses will be payable under the circumstances outlined above.**

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

1. Strike (other than an unannounced strike), labour disruption;
2. Supplier *default* or bankruptcy. Limited coverage applies with respect to *default*, see *Default Protection Coverage* provision;
3. Grounding of aircraft for failure to satisfy government safety regulations or security alerts.

#### IV. What does Delayed Return Insurance cover?

##### Benefits –

**If any of the covered events listed immediately below happens after you leave home and makes it impossible for you to return home as shown on your confirmation, WE WILL PAY** up to the covered amount for the length of time that *you* are prevented from travel for the following:

1. Additional and unplanned hotel and meal expenses, essential phone calls and taxi fares up to **\$350 per day** to a maximum of **\$3,500**.
2. The additional cost of *your* one-way transportation by the most cost-effective itinerary (being the lesser of a one-way *fare* or change fee charged by the airline on existing tickets if this option is available) to return *home*.

If the delay is a result of a *medical condition*, it must be on the advice of the attending *physician* at *your* destination.

#### COVERED EVENTS FOR DELAYED RETURN INSURANCE:

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

#### V. What else does Trip Cancellation Insurance, Trip Interruption Insurance and Delayed Return Insurance cover?

##### Benefits –

1. ‡ In the event *your travel companion's plane* is delayed by weather conditions, earthquakes or volcanic eruptions for at least **30%** of *your trip*, and *your travel companion* decides not to go on the *trip* as booked, we will cover the cost of *your* next occupancy charge up to the covered amount.

2. In the event *you* die from a covered *medical condition* after the start of *your trip*, we will reimburse *your* estate, up to the covered amount, for *your* prepaid unused travel arrangements. We will also reimburse *your* estate the following reasonably incurred expenses for:

- a) the preparation and transportation of *your* remains back to *your home*; or
- b) the cremation or burial of *your* remains at the location where death occurs, to a maximum of **\$10,000**.

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

3. If *you* must interrupt *your trip*, we will reimburse *you* for up to **\$500** to cover the cost of prepaid unused non-refundable excursions that were not included in *your* original travel arrangements and that *you* booked onboard *your* cruise ship.
4. If the flight *you* are booked to fly on is overbooked and *you* are denied boarding as a result, we will pay up to **\$1,000** for the prepaid unused portion of *your trip* that is non-refundable and non-transferable to another date, provided *your trip* duration was a minimum of **7 days**.
5. If the primary reason for *your trip* was to be present at a wedding, funeral, sporting, theatrical, musical or other commercial entertainment event or conference, and *your trip* is delayed for reasons beyond *your* control, we will reimburse *you* for the cost of alternate transportation to get to *your* destination on time for the event, up to **\$800**.
6. ‡ If a cruise that is included in *your trip* and insured under *your* AIR MILES Canada Comprehensive policy is cancelled for any reason other than supplier *default*, and the cancellation occurs:
  - a) Before you leave home, we will reimburse *you* for *your* non-refundable prepaid airfare that is not part of *your* cruise package up to **\$1,500**.
  - b) After you leave home but prior to the departure of the cruise ship, we will reimburse *you* up to **\$1,500** for the lesser of:
    - i) the change fee charged by the airline carrier(s) to return *you home*, if such an option is available; or
    - ii) the extra cost of a one-way *fare* via the most cost-effective itinerary to return *you home*.
7. If the primary reason for *your trip* was to attend a ticketed commercial event (sport, musical or other commercial entertainment) for which *you* had purchased and paid for tickets prior to booking *your trip* and purchasing this insurance, and such event is subsequently cancelled by the promoter of the event, we will pay, up to the covered amount, for the following:
  - a) If the event is cancelled before you leave home, we will reimburse *you* the prepaid unused portion of *your trip* that is non-refundable and non-transferable to another travel date, including published AIR MILES Reward Program service fees insured.
  - b) If the event is cancelled after you leave home:
    - i) the prepaid unused portion of *your trip* that is non-refundable and non-transferable to another travel date (less prepaid unused transportation *home*); and
    - ii) up to **\$1,000** for the additional cost of one-way transportation by the most cost-effective itinerary (being the lesser of a one-way economy transportation or the change fee charged by the airline on existing tickets if this option is available) to return *you home*.

## Exclusions & Limitations – What does **Trip Cancellation & Trip Interruption Insurance** not cover?

When reading this section, please take the time to review the definitions of “*medical condition*,” “*pre-existing condition*” and “*stable*” at the end of this booklet.

### I. **Pre-Existing Condition Exclusions**

If the **Trip Cancellation Covered Amount is less than \$15,000**, under *Trip Cancellation and Interruption insurance*, we will not cover any expenses for *your medical condition* or the *medical condition of your travelling companion* if that *medical condition* was NOT *stable* in the **three (3) months** prior to the insurance purchase date or application date as indicated on *your confirmation*.

In addition to the “*stable*” requirement, we will not cover any expenses relating to:

- Any *heart condition* you have or any *heart condition* of your *travelling companion* if, during the **three (3) months** prior to the insurance purchase date or application date as indicated on *your confirmation*, you or your *travelling companion* have taken any form of Nitroglycerine more than once per week for the relief of angina.
- Any lung condition you have or any lung condition of your *travelling companion* if, during the **three (3) months** prior to the insurance purchase date or application date as indicated on *your confirmation*, you or your *travelling companion* required *treatment* with home oxygen or with Prednisone.

If the **Trip Cancellation Covered Amount is \$15,000 or more**, under *Trip Cancellation and Interruption insurance*, we will not cover any expenses for a *medical condition* or the *medical condition* of any person who is the cause of your claim, if that *medical condition* was NOT *stable* in the **three (3) months** prior to the insurance purchase date or application date as indicated on *your confirmation*.

In addition to the “*stable*” requirement, we will not cover any expenses relating to:

- Any *heart condition* you have or any *heart condition* of any person who is the cause of your claim if, during the **three (3) months** prior to the insurance purchase date or application date as indicated on *your confirmation*, you or that person have taken any form of Nitroglycerine more than once per week for the relief of angina.
- Any lung condition you have or any lung condition of any person who is the cause of your claim if, during the **three (3) months** prior to the insurance purchase date or application date as indicated on *your confirmation*, you or that person have required *treatment* with home oxygen for your/their lung condition.

### II. We will not cover expenses or benefits related in whole or in part, to any of the following events which are applicable to all coverages detailed in this section, including **Trip Cancellation, Trip Interruption, Misconnection & Travel Delay** and **Delayed Return Insurance**:

1. Any reason, circumstance, event or *medical condition* affecting you or anyone, which you were aware of on or before the date you purchased this insurance, and which may eventually prevent you from starting and/or completing your trip as booked when you purchase this insurance coverage.
2. Travel arrangements, expenses and/or losses related to travel arrangements that were not booked through the AIR MILES Reward Program and that have not been insured with *Trip Cancellation* and *Trip Interruption Insurance* with an AIR MILES Canada Comprehensive Policy. (Not applicable to travel arrangements that were booked through the AIR MILES Reward Program.)

3. The *medical condition* or death of a person who is ill when the purpose of your trip is to visit that person.
4. Your self-inflicted *injury* unless medical evidence establishes that the injuries are related to a mental health illness.
5. Any *medical condition* that is the result of you not following *treatment* as prescribed to you, including prescribed medication.
6. Any claim that results from or is related to your commission or attempted commission of a criminal offence or illegal act.
7.
  - Any *medical condition*, including symptoms of withdrawal, arising from, or in any way related to, your chronic use of alcohol, drugs or other intoxicants whether prior to or during your trip.
  - Any *medical condition* arising during your trip from, or in any way related to, the abuse of alcohol, drugs or other intoxicants.
8. Any loss resulting from your *minor mental or emotional disorder*.
9. A *medical condition*:
  - when you knew or for which it is reasonable to believe or expect that *treatment* will be required during your trip; and/or
  - for which future investigation or *treatment* was planned before you left home; and/or
  - which caused symptoms that would have caused an ordinarily prudent person to seek *treatment* in the **three (3) months** before leaving home, and/or
  - that caused a physician to advise you not to go on your trip.
10.
  - routine pre-natal or post-natal care;
  - pregnancy, delivery, or complications of either, arising 9 weeks before the expected date of delivery or 9 weeks after.
11. Your child born during the trip.
12. A travel visa that is not issued because of a late application.
13. Any *medical condition* if the answers provided in the questionnaire for trips covered for **\$15,000 or more** are not truthful and accurate. This exclusion applies to the total covered amount purchased.
14. An *act of war* or *act of terrorism*. Limited coverage applies with respect to an *act of terrorism*. See Terrorism Coverage provision.
15. Any *act of terrorism* or any *medical condition* you suffer or contract when an official travel advisory was issued by the Canadian government stating “Avoid all non-essential travel” or “Avoid all travel” regarding the country, region or city of your destination, before your effective date.  
To view the travel advisories, visit the Government of Canada Travel site.  
This exclusion does not apply to claims for an *emergency* or a *medical condition* unrelated to the travel advisory.
16. **Your cancelling for any reason and deciding not to travel** if you did not purchase this insurance within 72 hours of booking your trip with the AIR MILES Reward Program or before any cancellation penalties applied.

See In the Event of a Claim to submit a claim.

## Default Protection Coverage

We will provide *Default Protection Coverage* subject to the benefit limits and exclusions listed below.

If you:

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

then, we will reimburse you as follows:

- i) for *default* prior to your *departure date*: the non-refundable portion of the amount that you prepaid for such undelivered *travel services* up to the covered amount for the *Trip Cancellation* coverage that you purchased in connection with your *trip*; or
- ii) for *default* after your *departure date*: the non-refundable portion of the amount that you prepaid for such undelivered *travel services* except prepaid unused transportation *home* and subject to the following benefit limits:
  - your additional and unplanned hotel and meal expenses, your essential phone calls and taxi fares up to a maximum of **\$200 per day** for up to **3 days**; and
  - up to the covered amount for the extra cost of your economy class transportation via the most cost-effective itinerary to your next destination or to return you *home*.

## Benefit Limits for Default Protection Coverage

The amount payable to you in respect of any one *trip* will not exceed **\$5,000 CDN**; and will not exceed **\$10,000 CDN** for all persons who are covered under the same AIR MILES Canada Comprehensive policy. Any benefits payable shall also be subject to an overall maximum aggregate payable limit specified below relating to all in-force travel policies issued by us, including this policy.

If total claims otherwise payable for this type of coverage under all travel policies issued by us, resulting from the *default* of one or more *travel suppliers* occurring within an applicable time period, exceed the maximum aggregate payable limit, then the amount paid on each claim shall be reduced on a pro rata basis so that the total amount paid in respect of all such claims shall be the maximum aggregate payable limit. The maximum aggregate limits are:

- a) **\$1,000,000 CDN** with respect to the *default* of any one (1) *travel supplier*; and
- b) **\$5,000,000 CDN** with respect to all *defaults* of all *travel suppliers* occurring in the same calendar year.

If, in our judgment, the total of all payable claims on account of the *default* of one or more *travel suppliers* exceeds the applicable limits, your pro-rated claim may be paid after the end of the calendar year in which you qualify for benefits.

## Exclusions for Default Protection Coverage

We will not cover any loss concerning, caused by or resulting from any of the following:

- a) Loss or damage, incurred by you, which is or can be recovered from any other source, including any federal, provincial or other compensation fund;

- b) Loss arising as a result of a *default* if, at the time of booking, the *travel supplier* is bankrupt, insolvent or in receivership or has sought protection from creditors under any bankruptcy, insolvency or similar legislation;
- c) Loss arising as a consequence of the bankruptcy or insolvency of a retail travel agent, agency or broker;
- d) Loss arising as a result of the *default* of a foreign *travel supplier* if the *travel services* to be provided by such foreign *travel supplier* are not part of a package tour sold to you;
- e) Insurance purchased or *trips* booked after the *default*; or
- f) *Travel services* that were actually provided.

See In the Event of a Claim to submit a claim.

## EMERGENCY MEDICAL INSURANCE

### What does Emergency Medical Insurance cover?

#### Benefits –

*Emergency Medical Insurance* covers you for up to **\$5,000,000 CDN** for *reasonable and customary* expenses incurred by you for *emergency medical treatment* required by you during your *trip* if a *medical condition* begins unexpectedly after you leave *home*. **Such expenses must be in excess of those reimbursable by your government health insurance plan or by any other benefit plan.** The medical attention must be required as part of your *emergency treatment* and ordered by a *physician* (or a dentist in the case of dental *treatment*).

**In the event of an emergency, call the Assistance Centre immediately: 1-888-491-2285** in the U.S. and Canada or **+1 (519) 251-7427 collect** to Canada where available.

You must call the Assistance Centre before obtaining *emergency treatment*, so that we may:

- confirm coverage
- provide pre-approval of *treatment*.

If it is medically impossible for you to call prior to obtaining *emergency treatment*, we ask you to call or have someone call on your behalf as soon as possible. Otherwise, if you do not call the Assistance Centre before you obtain *emergency treatment* you will be responsible for 25% of your medical expenses covered under this insurance.

After your *medical emergency treatment* has started, the Assistance Centre must assess and pre-approve additional *medical treatment*. If you undergo tests as part of a medical investigation, *treatment* or surgery, obtain *treatment* or undergo surgery that is not pre-approved, your claim will not be paid. This includes but is not limited to MRI, MRCP, CAT Scan, CT Angiogram, sonograms, ultrasounds, Nuclear Stress Test, biopsies, Angiogram, Angioplasty, cardiovascular surgery including any associated diagnostic test(s), Cardiac Catheterization or any surgery.

Subject to the policy's maximums, exclusions and limitations, the eligible covered expenses are:

#### 1. **Emergency Medical Treatment:**

- a) *Hospital* accommodation up to the semi-private room rate (or an intensive or coronary care unit where medically necessary). We will also cover the expense of a cruise ship cabin or hotel room (that is not already included in your travel arrangements) if the use of such facility is recommended as a substitute for a *hospital* room during your recovery from a covered *medical emergency*.
- b) *Physicians' fees*.
- c) When approved in advance by the Assistance Centre, laboratory tests and x-rays prescribed by the attending *physician*.
- d) In-hospital duty nurse – private duty nursing (other than by a relative) during hospitalization when ordered by the attending *physician* and approved in advance by the Assistance Centre.

- e) Local, licensed ground ambulance service to the nearest *hospital*, *physician* or medical service provider in the event of a medical *emergency* (also covers local taxi fare in lieu of local ground ambulance service where an ambulance is medically necessary).
- f) If local taxi services are required to get to and from the nearest medical service provider for a minor *emergency*, expenses will be reimbursed up to **\$50**.
- g) Drugs requiring a prescription by a *physician*, excluding those necessary for the continued stabilization of a chronic *medical condition*.

**To file a claim, you must provide original receipts issued by the pharmacist, physician or hospital, indicating the total cost, prescription number, name of medication, quantity, date and name of the prescribing physician.**

- h) Casts, splints, trusses, braces, crutches, rental of wheelchair or other minor medical appliances when prescribed by a *physician*.
  - i) *Emergency treatment* by a chiropodist, chiropractor, osteopath, physiotherapist, or podiatrist (other than a relative), up to **\$300** per category of practitioner.
2. **Emergency Dental Expenses:** Reimbursement of:
- a) *emergency dental treatment* at *trip* destination to repair or replace sound natural teeth or permanently attached artificial teeth damaged as a result of an accidental blow to the head or mouth, provided you consult a *physician* or dentist immediately following the *injury*;
  - b) necessary *emergency dental treatment* (described in a. above) that must be continued upon return to *your* province or territory of residence, provided *treatment* is completed within **90 days** from the date of the accident, to a maximum of **\$1,500**; and
  - c) other *emergency dental treatment* at *trip* destination (excluding root canal treatment), to a maximum of **\$300**.

**To file a claim under a. or b. above, you must provide an accident report from the physician or dentist.**

- 3. **Sundry Hospital Expenses:** If *you* are hospitalized for 48 hours or more, we will reimburse *you* up to **\$50 per day**, to a maximum of **\$500** for *your* incidental expenses (telephone calls, television rental, etc) while *you* are in the *hospital*.
- 4. **Return Your Vehicle Home:** When approved in advance by the Assistance Centre, if, because of a covered medical *emergency*, hospitalization, death or repatriation, *you* are unable to drive *home* the *vehicle* *you* used during *your trip*, we will cover the reasonable costs incurred to return *your vehicle home*. If *you* rented a *vehicle* during *your trip*, we will cover the reasonable costs incurred for its return to the rental agency.
- 5. **Bedside Visit:** When approved in advance by the Assistance Centre, if *you* are hospitalized because of a covered medical *emergency* or if *your* attending *physician* recommends that a relative or close friend should attend *your* bedside during such hospitalization, we will pay the return economy fare via the most cost-effective itinerary for someone to be with *you*. For a *child* insured under this policy, this benefit is available immediately upon his/her *hospital* admission.

The person attending *your* bedside will be covered with AIR MILES Emergency Medical Insurance coverage, under the same terms and limitations of this policy. Reasonable out-of-pocket expenses incurred for commercial accommodation and meals, essential taxis and telephone calls will be reimbursed to a maximum of **\$500**.

**To file a claim, original receipts from commercial organizations must be supplied.**

- 6. **Subsistence Allowance:** In the event that:

- a) *your* scheduled return is delayed due to *your* medical *emergency* *sickness* or *injury* or the *sickness* or *injury* of an accompanying *immediate family member* or *travelling companion*; or
- b) *you* or an accompanying *immediate family member* or *travelling companion* must be relocated for the purpose of obtaining medical *treatment* for a covered medical *emergency*,

*you* are eligible for a subsistence allowance for commercial accommodation and meals, laundry, essential taxi or rental vehicle charges and telephone calls up to **\$500 per day** after the original scheduled return date or relocation date to a maximum of **\$5,000**.

**To file a claim, you must supply original receipts from commercial organizations as well as the local attending physician's written diagnosis of the medical emergency.**

- 7. **Medical Repatriation:** When approved in advance and arranged by the Assistance Centre:
  - a) the cost of a one-way *fare* on a commercial airline to *your* province or territory of residence; or
  - b) the costs for additional airline seats to accommodate a stretcher to return *you* to *your* province or territory of residence; or
  - c) where medically necessary, medical air evacuation (paid in advance) to the nearest appropriate *hospital* or to a *hospital* in *your* province or territory of residence, when the attending *physician* or the Medical Director of the Assistance Centre recommends that *you* be so transported for the purpose of obtaining immediate medical *treatment*; and
  - d) the return cost of an economy class fare via the most cost-effective itinerary for a qualified medical attendant to accompany *you*, and the attendant's reasonable fees and expenses, if this is medically necessary or required by the airline.
- 8. **Return Excess Baggage:** When approved in advance by the Assistance Centre, up to **\$500** for the return of *your* excess baggage if *you* are returned to *your home* by any medical repatriation or death benefit provided by this policy.
- 9. **Escort of Insured Children or Grandchildren:** When approved in advance by the Assistance Centre, in the event an insured parent, grandparent or legal guardian (on the *trip*) must be hospitalized for more than 24 hours, medically repatriated or dies at destination due to a medical *emergency* covered by this policy:
  - a) organization, escort and payment up to the cost of a one-way economy for the return of *your* accompanying *child(ren)* or *grandchildren*.
  - b) reimbursement for services of a caregiver (other than a relative) contracted by *you* for *your* accompanying *child(ren)* or *grandchildren*. Covered caregiver expenses will include the cost for the return economy via the most direct route, overnight commercial accommodation expense and reasonable meal expenses.
- 10. **Child Care:** In the event *you* are admitted to *hospital* or are delayed beyond *your* scheduled return date because of a covered medical *emergency*, we will cover the expenses for an attendant to provide childcare services when such service is required. The attendant must be a person other than the *child's* parent, member of the *immediate family*, *your travel companion*, or the person whose guest *you* are during the *trip*. We will reimburse *you* up to **\$50 per day** to a maximum of **\$500 per trip**. The *child(ren)* or *grandchild(ren)* must have been under *your* care during *your trip*.

11. **Return Your Travel Companion :** We will pay the extra cost of the one-way economy fare via the most cost-effective itinerary to return *your travel companion home*, if *you* must return *home* because of a medical *emergency* covered under this policy.

12. **Death:** If *you* should die during *your trip* from a covered medical *emergency*, we will reimburse *your* estate the reasonable costs actually incurred for:

- a) i) preparation of *your* remains; plus
  - ii) return transportation cost of the *your* remains in the *common carrier's* standard transportation container to the scheduled point of departure; or
  - b) for burial or cremation at the place of death up to **\$10,000**.
- No benefit is payable for the cost of a headstone, casket and/or funeral service expenses.

c) When approved in advance by the Assistance Centre, the return economy fare for an *immediate family* member or close friend to identify *your* remains. We will also pay up to **\$450** for that person's commercial accommodation and meals and provide him/her with AIR MILES *Emergency* Medical Insurance coverage, under the same terms and limitations of this policy for up to three (3) days.

**To file a claim, original receipts from commercial organizations must be supplied.**

13. **Return Your Pet(s):** When approved in advance and arranged by the Assistance Centre, we will pay for the extra cost of economy class transportation, up to **\$500** under benefits a), b) and c), to return *your* pet(s) (domestic dog(s) and/or cat(s)) *home* via the most cost-effective itinerary, if:

- a) *your* treating *physician* recommends that *you* return *home* because of *your* medical condition;
- b) *our* medical advisors recommend that *you* return *home* after *your* *emergency treatment*; or
- c) *you* die.

We will also pay up to **\$100** for commercial kennel fees at *your* destination, before *you* return *home*, in the event *you* are medically unable to return to *your* province or territory of residence on *your* scheduled return date.

14. **Prescription Assistance:** Up to **\$50** for the replacement at *your* destination of lost or stolen essential prescription medication (excluding birth control pills or other non-vital prescription medication). If *you* need the services of a local *physician* to replace *your* prescription medication, we will pay up to **\$75** under this benefit.

15. **Vision Care:** Up to **\$200** for the replacement at *your* destination of prescription eyeglasses due to theft, loss or breakage during *your trip* and assistance to coordinate the replacement.

16. **Hearing Aid:** Up to **\$200** for the replacement at *your* destination of a hearing aid due to theft, loss or breakage during *your trip* and assistance to coordinate the replacement. Does not include batteries or ear molds.

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

18. **Message Centre:** Leave urgent messages with the Assistance Centre in the event that awkward time zones or telephone difficulties prevent *you* from contacting *home*. Leave urgent messages as a contact point for *travelling companions* if *you* lose touch with one another. Call 1-888-491-2285 within North America or from anywhere else in the world at +1 (519) 251-7427 collect to Canada where available.

19. **Urgent Messages:** Transmission of urgent messages to family and/ or employer by the multilingual co-ordinators of the Assistance Centre.

## Quarantine Expenses

We do not pay any benefits for any government mandated quarantine or self-isolation in Canada. If *you* or *your travel companion* must unexpectedly self-isolate or quarantine after *your departure date* outside *your* province or territory of residence, as determined by a medical professional, we will:

- 1. Pay up to \$500 for *your* one-way economy class fare on the most cost-effective itinerary to return *you home* when *you* are delayed beyond the date *you* were originally scheduled to return *home*; and/or
- 2. Pay up to \$200 per day per insured person for additional and unplanned accommodations and meals to a maximum of \$2,800. If *you* paid the family rate, we pay up to \$400 per insured family per day to a maximum of \$5,600.

This benefit is payable to a maximum of 14 days when *you* are delayed beyond *your* originally scheduled return date and/or *you* must pay unexpected costs for new accommodations and/or meals where *you* must quarantine.

It is *your* responsibility to find accommodation during *your* quarantine. If *you* must quarantine at a medical facility and *treatment* is not required, we pay up to the maximums noted in this section.

- 3. Extend *your* coverage for the duration of *your* self-isolation or quarantine and for up to 72 hours after the self-isolation or quarantine period ends if *you* must stay at *your* destination beyond *your expiry date*.

## Exclusions & Limitations – What does Emergency Medical Insurance not cover?

We will not cover expenses or benefits relating to any of the following:

### 1. Pre-Existing Medical Condition Exclusions

When reading this section, please take the time to review the definitions of “*medical condition*,” “*pre-existing condition*” and “*stable*” at the end of this booklet. The *pre-existing condition* exclusion which applies to *you* depends on *your age* as outlined below.

**For ages 74 and under**, any *medical condition* that was not *stable* in the **three (3) months** before *your effective date*. In addition to the “*stable*” requirement, we will not cover any expenses relating to:

- a *heart condition*, if;
  - any *heart condition* was not *stable*, and/or
  - *you* had taken any form of Nitroglycerine for the relief of angina pain, in the **three (3) months** before *your effective date*,
- a *lung condition*, if;
  - any *lung condition* was not *stable*, and/or
  - *you* required *treatment* with oxygen or Prednisone for *your* lung condition, in the **three (3) month** before *your effective date*.

**For ages 75 and over**, any *medical condition* that was not *stable* in the **six (6) months** before *your effective date*. In addition to the “*stable*” requirement, we will not cover any expenses relating to:

- a *heart condition*, if;
    - any *heart condition* was not *stable*, and/or
    - you had taken any form of Nitroglycerine for the relief of angina pain, in the **six (6) months** before *your effective date*,
  - a *lung condition*, if;
    - any *lung condition* was not *stable*, and/or
    - you required *treatment* with oxygen or Prednisone for your *lung condition*, in the **six (6) months** before *your effective date*.
2. Expenses that exceed **\$25,000**, if you do not have valid coverage under a *government health insurance plan*.
  3. For *children* under 2 years of age: Any *medical condition* related to a birth defect.
  4.
    - Any *medical condition*, including symptoms of withdrawal, arising from, or in any way related to, your chronic use of alcohol, drugs or other intoxicants whether prior to or during your *trip*.
    - Any *medical condition* arising during your *trip* from, or in any way related to, the abuse of alcohol, drugs or other intoxicants.
  5. Any *medical condition* that is the result of you not following *treatment* as prescribed to you, including prescribed medication.
  6. Your self-inflicted injuries unless medical evidence establishes that the injuries are related to a mental health illness.
  7. Any loss resulting from your *minor mental or emotional disorder*.
  8.
    - routine pre-natal or post-natal care;
    - pregnancy, delivery, or complications of either, arising 9 weeks before the expected date of delivery or 9 weeks after.
  9. Your child born during the *trip*.
  10. A *medical condition*:
    - when you knew or for which it is reasonable to believe or expect that *treatment* will be required during your *trip*; and/or
    - for which future investigation or *treatment* was planned before you left *home*; and/or
    - which produced symptoms that would have caused an ordinarily prudent person to seek *treatment* in the 3 months before your *effective date*; and/or
    - that had caused your *physician* to advise you not to travel.
  11. Any *trip* made for the purpose of obtaining a diagnosis, *treatment*, surgery, investigation, palliative care, or any alternative therapy, as well as any directly or indirectly-related complication.
  12. Any *treatment* that is not for an *emergency*.
  13. Any non-*emergency*, experimental or elective *treatment* such as cosmetic surgery, chronic care, rehabilitation including any expenses for directly or indirectly related complications.
  14. An *emergency* resulting from an accident that occurs while you are participating in:
    - any sport, snorkeling or scuba-diving when that sport, snorkeling or scuba-diving is your principal paid occupation;
    - any sport or activity indicated below:
      - any form of BASE jumping (ie: wingsuit flying);
      - hang-gliding;
      - rock climbing;
      - mountain-climbing which involves the ascent or descent of a mountain requiring the use of specialized equipment, including crampons, pickaxes, anchors, bolts, carabiners and lead or top-rope anchoring equipment;
      - any competition, speed event or other high-risk activity involving the use of a motor vehicle on land, water or air, including training activities, whether on approved tracks or elsewhere.
  15. Piloting an aircraft or air travel on any air-supported device other than as a fare-paying passenger on a flight operated by a *common carrier*.
  16. Any claim that results from or is related to your commission or attempted commission of a criminal offence or illegal act.
  17. Except as is covered under Benefit #14 Prescription Assistance. The replacement of an existing prescription, whether by reason of loss, renewal or inadequate supply, or the purchase of drugs and medications (including vitamins) which are commonly available without a prescription or which are not legally registered and approved in Canada.
  18. Any *treatment*, services or supplies not medically necessary, or any medical procedures and/or tests (**including** but not limited to MRI, MRCP, CAT Scan, CT Angiogram, Nuclear Stress Test, Angiogram or Cardiac Catheterization) not authorized by the Assistance Centre in advance. All surgery must be authorized by the Assistance Centre prior to being performed except in extreme circumstances where surgery is performed on an *emergency* basis.
  19. The continued *treatment* of a *medical condition* when you have already received *emergency treatment* for that condition during your *trip* and our medical advisors determine that your medical *emergency* has ended.
  20. Any further medical *treatment* if our medical advisors determine that you should transfer to another facility or return to your home province or territory of residence for *treatment*, and you choose not to.
  21. Medical repatriation services unless approved in advance and arranged by the Assistance Centre.
  22. For policy extensions and top-ups: any *medical condition*, *injury* or *sickness* which first appeared, was diagnosed or for which you received medical *treatment* after the scheduled *departure date* and prior to the *effective date* of the insurance extension or top-up.
  23. An *act of war* or *act of terrorism*. Limited coverage applies with respect to an *act of terrorism* as described in the *Act of Terrorism Coverage* provision.
  24. Any *act of terrorism* or any *medical condition* you suffer or contract when an official travel advisory was issued by the Canadian government stating “Avoid all non-essential travel” or “Avoid all travel” regarding the country, region or city of your destination, before your *effective date*.  
To view the travel advisories, visit the Government of Canada Travel site.  
This exclusion does not apply to claims for an *emergency* or a *medical condition* unrelated to the travel advisory.
  25. For quarantine, the following also apply:
    - We do not pay any benefits for quarantine or self-isolation in Canada as mandated by any government.
    - We will not provide coverage for any pre-paid, unused travel arrangements.
    - We will not cover any expenses you incur when you or your travel

*companion* are denied entry to a country or region included in *your trip* when, before *your departure date*, there was a foreign government and/or regional travel guideline restricting entry of Canadian residents or guidelines that require self-isolation or quarantine for a specific period of time during *your trip*.

### What are the other conditions that apply to **Emergency Medical Insurance**?

If *your* current or former employer provides *you* with an extended health insurance plan with a lifetime maximum coverage of **\$50,000** or less, we will not coordinate payment with that coverage. If *your* lifetime maximum is more than **\$50,000**, we will coordinate payment.

Neither *we* nor *our* agents or administrators are responsible for the availability, quality or result of any medical *treatment* or transportation, or for *your* failure to obtain medical *treatment*.

See other conditions under In the Event of a Claim.

## ✚ BAGGAGE LOSS, DAMAGE & DELAY INSURANCE

*Our* overall maximum aggregate liability under all AIR MILES Canada Comprehensive policies purchased for any one *trip* with respect to a single insured person or family will not exceed **\$3,000**.

### What does Baggage Loss, Damage & Delay Insurance cover? Benefits –

Baggage Loss, Damage & Delay Insurance covers the theft of, loss of, damage to, and delay of the baggage and effects that belong to *you* and that *you* use during *your trip*. More specifically, *we* will pay for the following expenses based upon *your* selected plan:

#### 1. Baggage Theft, Loss or Damage

Up to **\$500 per trip** for any item or set of items that are lost, stolen, or damaged during *your trip*, up to a maximum of **\$1,500**.

*We* also apply a combined maximum limit of **\$500** for: jewellery; watches; cameras, including related equipment; binoculars; articles consisting in whole or in part of silver, gold or platinum; furs and fur-trimmed items; cell phones, computers and other digital or electronic items. In addition, original receipts must accompany *your* claim.

#### 2. Replacement Cost of Lost/Stolen Passport or Travel Visa

If *your* passport and/or travel visa is lost or stolen during *your trip*, while *you* are travelling, *we* will reimburse *you*:

- The *reasonable and customary* charges for a replacement passport and/or travel visa; and
- Up to **\$300** with respect to the travel and accommodation expenses *you* actually incur while waiting to receive the replacement passport and/or travel visa.

#### 3. Replacement Cost of Lost/Stolen Birth Certificate or Driver's Licence

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

#### 4. Baggage Delay

If *your* checked baggage is misdirected or delayed by the *common carrier* for at least **10 hours** while *you* are on *your trip*, *we* will reimburse up to an aggregate total of **\$600** for:

- The purchase of necessary toiletries and personal clothing while on

*your trip*;

- The rental cost of sporting equipment if the purpose of *your trip* was to participate in a sporting event and *your* sporting equipment was included in the delayed checked baggage;
- The rental cost of a wheelchair that *you* use during *your trip*.
- If a cruise is included as part of *your trip* and *your* baggage is delayed and does not arrive on the cruise ship before the ship's departure/launch, an **additional \$150** is available to *you* to purchase or rent formal evening attire.

The Baggage Delay benefits are payable only when the delay happens before *your* return *home*.

### Exclusions & Limitations – What does Baggage Loss, Damage & Delay Insurance not cover?

For Baggage Loss, Damage & Delay Insurance, *we* will not cover expenses or benefits relating to:

- Animals, perishable items, bikes that are not checked as baggage with the *common carrier*, household items and furniture, artificial teeth or limbs, hearing aids, sunglasses, contact lenses, money, tickets (except for administrative fees required to reissue such tickets), securities, documents, items related to *your* occupation, antiques or collector items, items that are fragile, items that are obtained illegally, or articles that are insured on a valued basis by another insurer.
- Damage or loss resulting from wear and tear, deterioration, defect, mechanical breakdown, *your* imprudence or omission.
- Unaccompanied baggage, any items that are left unattended, personal property left in an unattended *vehicle*, unlocked trunk and any jewellery or cameras placed in the custody of a *common carrier*.
- Instances of theft or losses that are not reported to authorities.
- Any loss resulting from an *act of war* or an *act of terrorism* while at a destination when, an official travel advisory was issued by the Canadian government stating "Avoid all non-essential travel" or "Avoid all travel" regarding the country, region or city of *your* destination, before *your effective date*.  
To view the travel advisories, visit the Government of Canada Travel site.

In addition to the Exclusions & Limitations above, there is also no coverage, and no benefits will be payable, for claims presented under this section when reimbursed:

- By the *common carrier*, hotel or *travel supplier*, including any services rendered by such *common carrier*, hotel or *travel supplier*; or
- As specified under any other insurance coverage *you* may have for the loss of or damage to property.

See other conditions under In the Event of a Claim.

## ✚ PERSONAL MONEY INSURANCE

### What does Personal Money Insurance cover? Benefits –

If *your* personal money is lost or stolen during *your trip*, *we* will reimburse *you* up to **\$300** for:

- Theft or loss of *your* personal money;

2. Financial loss or legal liability for payment following theft or fraudulent use of *your* traveller's cheques, letters of credit, travel tickets, passport, prepaid accommodation vouchers and entertainment tickets;

Provided that:

1. *You* have not failed to comply with any conditions applied by the issuing authority (including validating traveller's cheques and reporting missing negotiable documents to the issuing authority within the prescribed time period); and
2. *You* have reported the loss to the police immediately and have obtained their written report within 24 hours of the theft or loss.

### Exclusions & Limitations – What does Personal Money Insurance not cover?

We will not cover expenses or benefits related, in whole or in part, directly or indirectly, to any of the following:

1. **THE FIRST \$25 OF EACH AND EVERY CLAIM.**
2. Delay, detention or confiscation by customs personnel.
3. Shortages due to error, omission, depreciation, or fluctuations in value.
4. Money that was not in *your* possession at the time the loss occurred.

See In the Event of a Claim to submit a claim.

## FLIGHT & TRAVEL ACCIDENT INSURANCE

### What does Flight Accident Insurance & Travel Accident Insurance cover?

#### Benefits –

We will cover the following Flight & Travel Accident Insurance benefits:

1. If an accidental bodily *injury*, sustained during *your trip*, causes *you*, in the 12 months after the accident, to die, to become completely and permanently blind in both eyes, to suffer complete and irrecoverable loss of speech or hearing, to have two of *your* limbs fully severed above *your* wrist or ankle joint, to become completely and permanently blind in one eye and have one of *your* limbs fully severed above *your* wrist or ankle joint, we will pay:
  - a) For Flight Accident Insurance: **\$250,000**,
  - b) For Travel Accident Insurance: **\$50,000**.
2. If an accidental bodily *injury*, sustained during *your trip*, causes *you*, in the 12 months after the accident, to become completely and permanently blind in one eye or to have one of *your* limbs fully severed above *your* wrist or ankle joint, we will pay:
  - a) For Flight Accident Insurance: **\$125,000**,
  - b) For Travel Accident Insurance: **\$25,000**.
3. If *you* have more than one accidental bodily *injury* during *your trip*, we will pay the applicable insured sum only for the one accident that entitles *you* to the largest benefit amount.

For Flight Accident Insurance, the accident giving rise to *your injury* must happen:

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

### Benefit Limits for Flight Accident Insurance and Travel Accident Insurance Coverage

The amount payable to *you* in respect of any one accident will not exceed **\$250,000 CDN per person** and will not exceed **\$500,000 CDN for all persons** who are covered under the same AIR MILES Canada Comprehensive policy, regardless of how many valid policies have been purchased. Any amount purchased in excess of **\$500,000** shall be refunded upon request.

Any benefits payable shall also be subject to an overall maximum aggregate payable limit specified below relating to all in-force travel policies issued by *us*, including this policy.

If total claims otherwise payable for this type of coverage under all Flight Accident Insurance and Travel Accident Insurance policies issued by *us*, resulting from any one accident or resulting from more than one incident occurring during a calendar year, exceed the maximum aggregate payable limit, then the amount paid on each claim shall be reduced on a pro rata basis so that the total amount paid in respect of all such claims shall be the maximum aggregate payable limit. The maximum aggregate limits are:

- a) **\$12,000,000 CDN** with respect to any one (1) accident; and
- b) **\$24,000,000 CDN** with respect to all accidents occurring in the same calendar year.

If, in *our* judgment, the total of all payable claims on account of one or more accidents exceeds the applicable limits, *your* pro-rated claim may be paid after the end of the calendar year in which *you* qualify for benefits.

### Exclusions & Limitations – What does Flight Accident Insurance & Travel Accident Insurance not cover?

For Flight Accident Insurance & Travel Accident Insurance, we will not cover expenses or benefits relating to:

1. An *emergency* resulting from an accident that occurs while *you* are participating in:
  - any sport, snorkeling or scuba-diving when that sport, snorkeling or scuba-diving is *your* principal paid occupation;
  - any sport or activity indicated below:
    - any form of BASE jumping (ie: wingsuit flying);
    - hang-gliding;
    - rock climbing;
    - mountain-climbing which involves the ascent or descent of a mountain requiring the use of specialized equipment, including crampons, pickaxes, anchors, bolts, carabiners and lead or top-rope anchoring equipment;
    - any competition, speed event or other high-risk activity involving the use of a motor vehicle on land, water or air, including training activities, whether on approved tracks or elsewhere.
2. Piloting an aircraft, learning to pilot an aircraft, or acting as a member of an aircraft crew.
3. *Your* self-inflicted injury unless medical evidence establishes that the injuries are related to a mental health illness.
4. Any claim that results from or is related to *your* or *your* beneficiary's commission or attempted commission of a criminal offence or illegal act.
5. • Any *medical condition*, including symptoms of withdrawal, arising from, or in any way related to, *your* chronic use of alcohol, drugs

or other intoxicants whether prior to or during *your trip*.

- Any *medical condition* arising during *your trip* from, or in any way related to, the abuse of alcohol, drugs or other intoxicants.
6. Any loss resulting from *your minor mental or emotional disorder*.
  7. Any *medical condition* that is the result of *you* not following *treatment* as prescribed to *you*, including prescribed medication.
  8. A loss caused directly or indirectly from an existing disease or bodily infirmity, even if the proximate cause of its activation or reactivation is the result of an accidental bodily *injury*.
  9. An *act of war* or *act of terrorism*.
  10. Any *act of terrorism* or any *medical condition* *you* suffer or contract when an official travel advisory was issued by the Canadian government stating “Avoid all non-essential travel” or “Avoid all travel” regarding the country, region or city of your destination, before the *effective date*.

To view the travel advisories, visit the Government of Canada Travel site.

This exclusion does not apply to claims for an *emergency* or a *medical condition* unrelated to the travel advisory.

See In the Event of a Claim to submit a claim.

## ACT OF TERRORISM COVERAGE

Where an *act of terrorism* directly or indirectly causes *you* a loss for which benefits would otherwise be payable in accordance with the terms and conditions of this policy, this insurance will provide coverage as follows:

- For *Emergency Medical Insurance* and *Trip Cancellation & Interruption Insurance* coverage, we will provide benefits to *you* for *your* covered expenses, subject to the maximums shown in the benefits section and this provision; and
- The benefits payable, as described directly above, are in excess of all other potential sources of recovery, including alternative or replacement travel options offered by airlines, tour operators, cruise lines and other *travel suppliers* and other insurance coverage (even where such other coverage is described as excess) and will only become available after *you* have exhausted all such other sources.

Any benefits payable pursuant to *our Emergency Medical Insurance* and *Trip Cancellation & Interruption Insurance* shall be subject to an overall maximum aggregate payable limit relating to all in force travel policies issued by *us*, including this policy. If total claims otherwise payable for a type of coverage under all travel policies issued by *us*, resulting from one or more *acts of terrorism* occurring within an applicable time period, exceed this maximum aggregate payable limit, then the amount paid on each claim shall be reduced on a pro rata basis so that the total amount paid in respect of all such claims shall be the maximum aggregate payable limit.

Coverage is only available for up to two (2) *acts of terrorism* within a calendar year and the maximum aggregate payable limit for each *act of terrorism* is:

Type of Insurance Coverage	Maximum Aggregate for Each Act of Terrorism (CDN\$)
<i>Emergency Medical</i>	\$35,000,000
<i>Trip Cancellation &amp; Trip Interruption</i>	\$2,500,000

If, in *our* judgment, the total of all payable claims under one or more *acts of terrorism* may exceed the applicable limits, *your* prorated claim

may be paid after the end of the calendar year in which *you* qualify for benefits.

### Exclusion to this Terrorism Coverage provision

Notwithstanding any provision to the contrary within this policy or any endorsement thereto, this policy does not cover any liability, loss, cost or expense of whatsoever nature which is directly or indirectly caused by, resulting from, arising out of or in connection with any *act of terrorism* perpetrated by biological, chemical, nuclear or radioactive means, regardless of any other cause contributing concurrently or in any other sequence to the liability, loss, cost or expense.

## WHAT ELSE DO YOU NEED TO KNOW?

### General Conditions

**This insurance is void in the case of fraud or attempted fraud, or if *you* conceal or misrepresent any material fact or circumstance concerning this insurance, either at time of application for this policy (including any request for extension or top-up of coverage for benefits), at the time of claim or at any other moment during *your* coverage period.**

We will not pay a claim if *you*, any person insured under this policy or anyone acting on *your* behalf attempt to deceive *us* or makes a fraudulent, false or exaggerated statement or claim. When completing the application (including the *questionnaire* if required), *your* answers must be complete and accurate. In the event of a claim, we will review *your* medical history. If any of *your* answers are found to be incomplete or inaccurate:

- *your* coverage will be void,
- which means *your* claim will not be paid.

*You* must be accurate and complete in *your* dealings with *us* at all times.

This policy is non-participating. *You* are not entitled to share in *our* divisible surplus.

The right of any person to designate persons to whom or for whose benefit insurance money is payable is restricted.

This policy shall be governed by and construed in accordance with the laws of *your* province or territory of residence.

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

### Limitation of Liability

*Our* liability under this policy is limited solely to the payment of eligible benefits, up to the maximum amount purchased, for any loss or expense. Neither *we*, upon making payment under this policy, nor *our* agents or administrators, nor AIR MILES or its affiliates assume any responsibility for the availability, quality, results or outcome of any *treatment* or service, or *your* failure to obtain any *treatment* or service covered under the terms of this policy. The participation of the insurers is several and not joint and none of them will under any circumstances participate in the interest and liabilities of any of the others.

### Premium

The required premium is due and payable at the time of purchase and will be determined according to the schedule of premium rates then in effect. Premium rates and policy terms and conditions are subject to change without prior notice.

Upon payment of premium, this document becomes a binding contract provided it is accompanied by a *confirmation* upon which a contract

number appears and we have received *your* completed application (including the *questionnaire*, if applicable) prior to *your departure date*. If the premium is insufficient for the period of coverage selected, we will:

1. charge and collect any underpayment; or
2. shorten the policy period by written endorsement if an underpayment in premium cannot be collected.

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

## Subrogation

### How does this insurance work with other coverages that you may have?

This is second payor coverage. *You* may have other in-force plans or contracts such as, but not limited to, third party liability, auto insurance, group or individual health insurance providing *hospital*, medical or therapeutic coverage. In this case, the amounts payable under this insurance are limited to that portion of *your* eligible expenses that are in excess of the amounts provided by those other in-force plans or contracts.

Total benefits paid to *you* by all insurers cannot exceed *your* actual expenses. We will coordinate the payment of benefits with all insurers who provide *you* with benefits similar to those provided under this insurance, (except if *your* current or former employer provides *you* with an extended health insurance plan with a lifetime maximum coverage of \$50,000 or less) to a maximum of the largest amount specified by any such insurer.

In addition, we have full rights of subrogation. In the event of a payment of a claim under this policy, we will have the right to proceed, in *your* name, but at *our* expense, against third parties who may be responsible for giving rise to a claim under this policy. *You* will execute and deliver such documents as are necessary and cooperate fully with *us* to allow *us* to fully assert *our* rights. *You* must do nothing to prejudice such rights.

If *you* are insured under more than one insurance policy underwritten by *us*, the total amount we pay to *you* cannot exceed *your* actual expenses; and the maximum *you* are entitled to is the largest amount specified for the benefit in any one policy. If the total amount of all accident insurance *you* have under policies issued by *us* is more than \$250,000, *our* aggregate liability will not exceed that amount, and any excess insurance will be void and the premiums paid for such excess insurance will be refunded.

## IN THE EVENT OF A CLAIM

### In the Event of an *Emergency*

**In the event of an *emergency*, call the Assistance Centre immediately, prior to receiving *treatment*:**

**1-888-491-2285** toll-free from the USA and Canada or  
**+1 (519) 251-7427** collect to Canada where available.

The Assistance Centre is ready to assist *you* 24 hours a day, each day of the year.

Please note that **if *you* do not call** the Assistance Centre in an *emergency*, ***you* will have to pay 25% of the eligible medical expenses** we would normally pay under this policy (25% co-insurance).

If it is medically impossible for *you* to call when the *emergency* happens, the 25% co-insurance will not apply. In this case, we ask that *you* call as soon as *you* can or that someone call on *your* behalf. Do not assume that someone will contact the Assistance Centre for *you*. It is *your* responsibility to verify that the Assistance Centre has been contacted.

If *you* choose to pay eligible expenses directly to a health service

provider without prior approval by the Assistance Centre, these services will be reimbursed to *you* on the basis of the *reasonable and customary* charges that we would have paid directly to such provider.

Medical charges that *you* pay may be higher than this amount; therefore *you* will be responsible for any difference between the amount *you* paid and the *reasonable and customary* charges reimbursed by *us*. Some benefits are not covered if they have not been authorized and arranged by the Assistance Centre.

### To Make a Claim for Benefits

To make a claim for benefits under this policy, *your* written proof of claim and *your* fully completed AIR MILES Travel Insurance claim form(s) must be submitted to *us* within 90 days after the event, but not more than 12 months after the date of such event or loss.

More information on the documentation that must be submitted with *your* written proof of claim is provided on the following pages.

### Mobile app

Before *you* travel, download the Manulife TravelAid mobile app through the Google Play store or the Apple App Store.

Use the app to begin the process to file a claim and track *your* claim status.

### Written claims correspondence should be mailed to:

AIR MILES Travel Insurance  
c/o Global Excel Management  
P.O. Box 1237, Stn. A  
Windsor, ON N9A 6P8

### Online Claims Submission

For quick and easy submission of your Proof of Claim, visit <https://manulife.acmtravel.ca> and please have all of your documentation available [in electronic format].

***You* may also call the Assistance Centre** directly for specific information on how to make a claim or to inquire about *your* claim status at **1-855-841-4794**.

For coverage information or general enquiries, please contact the **AIR MILES Travel Insurance Customer Service Centre at 1-866-298-6581 or by email at [airmilestravelinsurance@manulife.ca](mailto:airmilestravelinsurance@manulife.ca)**.

**If *you* are making a *Trip Cancellation & Trip Interruption Insurance claim***, we will need proof of the cause of the claim, including:

- a) a medical certificate or the Physician statement section of the claim form completed by the attending *physician* and stating why travel was not possible as booked, if the claim is for medical reasons; or
- b) a report from the police or other responsible authority documenting the reason for the delay if *your* claim is due to a misconnection; or
- c) if claiming due to cancellation of ticketed commercial event, the cancellation notice issued by the promoter of the event and the unused ticket for such event.

We will also need, as applicable:

- a) complete original unused transportation tickets and vouchers;
- b) original passenger receipts for the new tickets *you* had to purchase; or
- c) original receipts for the travel arrangements *you* had paid in advance and for the extra hotel, meal, telephone and taxi expenses *you* may have had;
- d) any other invoice or receipt supporting *your* claim; and

e) the entire medical file of any person whose health or *medical condition* is the reason for *your* claim.

**If you are making a Default Protection claim**, we must receive written notice of the claim within 60 days of the day on which the *travel supplier* announces that it is in *default*. You must submit proof of loss (including original receipts, proofs of payment to *travel suppliers*, proof of payment for insurance, unused transportation or accommodation documents and, where appropriate, evidence of claim to or reimbursement from any federal, provincial or other compensation fund, or other insurance, or any other source (including credit card companies) that is legally responsible or under contract to reimburse *you* for the cost of such undelivered *travel services*) no later than 30 days immediately after such filing deadline.

**If you are making an Emergency Medical Insurance claim**, we will need:

- a) original itemized receipts for all bills and invoices;
- b) proof of payment by *you* and by any other benefit plan;
- c) medical records including complete diagnosis by the attending *physician* or documentation by the *hospital*, which must support that the *treatment* was medically necessary;
- d) proof of the accident if *you* are submitting a claim for dental expenses resulting from an accident;
- e) proof of travel (including departure and return dates); and
- f) *your* historical medical records (if we determine applicable).

**If you are making a Baggage Loss, Damage & Delay Insurance claim, the following conditions apply:**

1. In the event of theft, burglary, robbery, malicious mischief, disappearance or loss of an item covered under this insurance, *you* must obtain written documented evidence from the police immediately or, if the police are unavailable, the hotel manager, tour guide or transportation authorities. You must also take all precautions to protect, save or recover the property immediately, and advise *us* as soon as *you* return *home*. Your claim will not be valid under this insurance if *you* do not comply with these conditions.
2. If the property *you* have checked with a *common carrier* is delayed, we will continue to provide coverage until the property is delivered by the carrier.
3. We cover the current actual cash value of *your* property when it is lost or damaged. We also reserve the option to repair or replace *your* property with other of similar kind, quality and value. We may also ask *you* to submit damaged items for an appraisal of the damage. If a lost or damaged article is part of a set, we will cover a reasonable and fair proportion of the total value of the set, but not the total value of the set.
4. If *you* need to make a claim under this insurance, we will need:
  - a) copies of reports from the authorities as proof of loss, damage or delay; and
  - b) proof that *you* owned the articles, and receipts for their replacement.

**If you are making a Flight & Travel Accident Insurance claim**, the following conditions apply:

1. We will need:
  - a) police, autopsy or coroner's report;
  - b) medical records; and
  - c) death certificate, as applicable.
2. If *your* body is not found within 12 months of the accident, we will presume that *you* died as a result of *your* injuries.

## Who will we pay your benefits to if you have a claim?

Except in the case of *your* death, we will pay the covered expenses under this insurance to *you* or the provider of the service. Any sum payable for loss of life will be payable to *your* estate. You must repay *us* any amount paid or authorized by *us* on *your* behalf if we determine that the amount is not payable under *your* policy. All amounts shown throughout this contract are in Canadian dollars. If currency conversion is necessary, we will use *our* exchange rate on the date *you* received the service outlined in *your* claim. We will not pay for any interest under this insurance.

## Is there anything else you should know if you have a claim?

If *you* disagree with *our* claim decision, the matter may be submitted for judicial resolution under the applicable law(s) of the Canadian province or territory where *you* reside at the time of application for this policy.

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*, or in the *Limitations Act, 2002* in Ontario, or other applicable legislation.

For the purposes of determining the validity of a claim under this policy, we may obtain and review the medical records of the attending *physician(s)*, including the records of the regular *physician(s)* at *home*. These records may be used to determine the validity of a claim whether or not the contents of the medical records were made known to *you* before *you* incurred a claim under this policy. In addition, we have the right, and *you* shall afford *us* the opportunity, to have *you* medically examined when and as often as may reasonably be required while benefits are being claimed under this policy. If *you* die, we have the right to request an autopsy, if not prohibited by law.

## DEFINITIONS

When italicized in this policy, the term:

**Act(s) of Terrorism** means any activity that involves a threat to use or the actual use of violence or any dangerous or threatening act, or the use of force. Such act is directed against the general public, governments, organizations, properties or infrastructures, or electronic systems.

The intention of such activity is to:

- instill fear in the general public;
- disrupt the economy;
- intimidate, coerce or overthrow a sitting government or occupying power; and/or
- promote political, social, religious or economic objectives.

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

**Age** means *your* age at time of application.

**Change in medication** means the medication dosage, frequency or type has been reduced, increased, stopped and/or new medication(s) has/have been prescribed. **Exceptions:** the routine adjustment of Coumadin, warfarin or insulin (as long as they are not newly prescribed or stopped) to test *your* blood levels; and a change from a brand name medication to a generic brand medication of the same dosage.

**Child, Children** means *your* unmarried, dependent son or daughter or *your* grandchild(ren) travelling with *you* or joins *you* during *your* trip and is either:

- i) under 21 years of age;
- ii) under 26 years of age if full-time student; or
- iii) *your* child of any age who is mentally or physically disabled.

In addition, for *Emergency Medical Insurance*, the *children* must be older than 30 days of age.

**Common carrier** means a conveyance (such as a bus, taxi, train, boat, airplane) which is licensed, intended and used to transport paying passengers.

**Confirmation** means this policy, the application for this policy, and any other documents confirming *your* insurance coverage once *you* have paid the required premium; and where applicable, includes the medical *questionnaire* and *your trip* arrangements. It may also include tickets or receipts issued by an airline, travel agent, tour operator, rental agency, cruise line or other accommodation or travel provider with whom *you* made arrangements for *your trip*.

**Default** means the inability of a *travel supplier* to provide *travel services* for which *you* have contracted with the *travel supplier*, because of complete or substantially complete cessation of business by the *travel supplier* resulting directly or indirectly from bankruptcy or insolvency thereof.

**Departure date** means the date *you* leave for *your trip*.

**Departure point** means the place *you* leave from for *your trip* and are going to return to.

**Effective date** means the date on which *your* coverage starts.

- For *Trip Cancellation Insurance*, coverage starts at the date and time *you* pay the premium for that coverage (indicated as the purchase date on *your confirmation*).
- For *Emergency Medical Insurance*, coverage starts when *you* leave *home*.
- For *Trip Interruption Insurance*; *Baggage Loss, Damage & Delay Insurance* and *Flight & Travel Accident Insurance*, coverage starts on *your departure date*.

**Emergency** means a sudden and unforeseen *medical condition* that requires immediate *treatment*. An *emergency* no longer exists when the evidence reviewed by Assistance Centre indicates that no further *treatment* is required at destination or *you* are able to return to *your* province or territory of residence for further *treatment*.

**Expiry date** means the date *your* coverage ends.

- For *Trip Cancellation Insurance*, coverage ends on *your* departure date as shown on *your confirmation*.
- For *Emergency Medical Insurance*, coverage ends on the earlier of:
  - a) the date *you* return *home*; or
  - b) the expiry date as shown on *your confirmation*.
- For *Trip Interruption Insurance*; *Baggage Loss, Damage & Delay Insurance* and *Flight & Travel Accident Insurance*, coverage ends on the earlier of:
  - a) the date when *you* return to *your departure point*; or
  - b) the expiry date as shown on *your confirmation*.

**Fare** means the same ticket class that *you* originally purchased (subject to availability) for *your trip*.

**Government health insurance plan** means the health insurance coverage that a Canadian provincial or territorial government provides to its residents.

**Heart condition** means ANY disorder relating to the heart. *Heart conditions* include but are not limited to the following:

- An abnormal cardiac test result
- Atrial fibrillation
- Chest pain or discomfort due to the heart, or angina
- Heart failure, or heart attack, or myocardial infarction, or cardiac arrest

- Heart murmur (Does not include a murmur that existed as a child if the *physician* has advised that there is no murmur as an adult.)
- Narrowing or blockage of a coronary artery, or coronary artery disease
- Prior heart surgery of any kind, including but not limited to angioplasty, bypass surgery, valvuloplasty, valve replacement, heart ablation surgery, heart transplantation or surgery for any congenital heart disorder
- Any heart valve disorder, or any rapid, or slow, or irregular heartbeats or heart rates for which a *physician* has prescribed medication, or for which there has been surgery or cardioversion
- *Treatment* with a pacemaker or a cardiac defibrillator device
- Water on the lungs or swelling of the ankles due to a heart disorder.

**Home** means *your* Canadian province or territory of residence. If *you* requested *your* coverage to start when *you* leave Canada, *home* means Canada. In the case of *Trip Cancellation*, *Trip Interruption*, *Trip Delay*, *Flight and Travel Accident* and *Baggage Insurance*, it means the *departure point*.

**Hospital** means an institution that is licensed as an accredited *hospital* that is staffed and operated for the care and *treatment* of in-patients and out-patients. *Treatment* must be supervised by *physicians* and there must be registered nurses on duty 24 hours a day. Diagnostic and surgical capabilities must also exist on the premises or in facilities controlled by the establishment. A *hospital* is not an establishment used mainly as a clinic, extended or palliative care facility, rehabilitation facility, addiction treatment centre, convalescent, rest or nursing home, home for the aged or health spa.

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

**Injury** means sudden bodily harm that is caused by external and purely accidental means, and independent of *sickness* or disease.

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

**Medical condition** means any disease, *sickness* or *injury* (including symptoms of undiagnosed conditions).

**Minor mental or emotional disorder** means:

- having anxiety or panic attacks, or
- being in an emotional state or in a stressful situation.

A *minor mental or emotional disorder* is one where *your treatment* includes only minor tranquilizers or minor anti-anxiety (anxiolytics) medication or no prescribed medication at all.

**Physician** means a person:

- who is not *you* or a member of *your immediate family* or *your travel companion*;
- licensed in the jurisdiction where the services are provided, to prescribe and administer medical *treatment*.

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

**Pre-existing condition** means a *medical condition*, that exists prior to *your effective date*.

**Questionnaire** means the document *you* must fill out truthfully and accurately to confirm *your* eligibility and premium (rate), if the non-refundable value of *your trip* is more than \$15,000.

**Reasonable and customary** means charges incurred for goods and services that are comparable to what other providers charge for similar goods and services in the same geographical area.

**Sickness** means illness, disease, disorder or any symptom.

**Spouse** means someone to whom one is legally married, or with whom one has been residing and publicly represented as a *spouse*.

**Stable** means a *medical condition* is considered *stable* when all of the following statements are true:

1. there has not been any new *treatment* prescribed or recommended, or change(s) to existing *treatment* (including a stoppage in treatment), and
2. there has not been any *change in medication*, or any recommendation or starting of a new prescription drug, and
3. the *medical condition* has not become worse, and
4. there has not been any new, more frequent or more severe symptoms, and
5. there has been no hospitalization or referral to a specialist, and
6. there have not been any tests, investigation or *treatment* recommended, but not yet complete, nor any outstanding test results, and
7. there is no planned or pending *treatment*.

All of the above conditions must be met for a *medical condition* to be considered *stable*.

**Travel companion** means someone who shares *trip* arrangements with *you* on any one *trip*, up to a maximum of 5 persons including *you*.

**Travel services** means transportation, sleeping accommodation or other service provided or arranged by a *travel supplier* for *your* use (but does not include taxes or insurance).

**Travel supplier** means a tour operator, travel wholesaler, airline, cruise line, provider of ground transport or provider of travel accommodation or provider of other services to *you* that is:

- a) contracted to provide *travel services* to *you*; and
- b) licensed, registered or is otherwise legally authorized in the particular location of the *travel supplier* to operate and provide *travel services* as shown on *your confirmation*.

**Treatment** means hospitalization, a procedure prescribed, performed or recommended by a *physician* for a *medical condition*. This includes but is not limited to prescribed medication, investigative testing and surgery.

**Important:** Any reference to testing, tests, test results, or investigations excludes genetic tests. "Genetic test" means a test that analyzes DNA, RNA or chromosomes for purposes such as the prediction of disease or vertical transmission risks, or monitoring, diagnosis or prognosis.

**Trip** means the period of time between effective date and expiry date as shown on *your confirmation*.

**Vehicle** includes any private or rental passenger automobile, boat, motorcycle, camper truck, mobile home or trailer home (not including any commercial trailers) which *you* use during *your trip* exclusively for the transportation of passengers (other than for hire).

**We, us, our** means FNAIC in connection with risk identified with ‡ throughout this document; and Manulife in connection with all other coverages under this policy.

**You, your** means the person(s) named as insured(s) on the *confirmation*, for whom insurance coverage was applied for and for whom the appropriate premium was received by *us*.

In this policy, words and terms denoting the singular shall be interpreted to mean the plural and vice versa, unless the context clearly indicates otherwise.

## MANULIFE FLIGHT ASSISTANCE

Payments and services are offered by our partner, Blink Parametric (Blink). This service and its availability are subject to change without notice.

Blink monitors and tracks all flights that *you* register with them at least 1 hour before the scheduled departure time. If the airline delays or cancels *your* flight, Blink arranges payment of the covered benefits.

*You* must register *your* cell/mobile phone number with Blink so they can contact *you* if *your* flight is delayed or cancelled beyond the threshold that entitles *you* to payment. For example, *you* will receive a notification of *your* \$40 payment only if the flight is delayed 3 hours or more.

Payments are sent by Interac e-Transfer®.

Note: In some cases, for example when *you* travel on a chartered flight or airline, flights may not appear on Blink's system and can't be tracked. Blink makes every effort to monitor these flights and notify *you* about eligible delays or cancellations.

If *you* don't receive a notification from Blink as expected, contact AIR MILES Travel Insurance Customer Service:

[airmilestravelinsurance@manulife.ca](mailto:airmilestravelinsurance@manulife.ca)

1 866 298-6581

### WHEN YOUR COVERAGE STARTS

*Your* coverage starts when *you* register the date and time of each flight on *your* airline booking receipt for all insured travellers at [flightassistancemanulife.com](http://flightassistancemanulife.com). *You* must register each flight for each insured person at least 1 hour before the original schedule departure time.

### WHEN YOUR COVERAGE ENDS

*Your* coverage ends as soon as each registered flight departs.

### BENEFITS

Manulife Flight Assistance offers the following benefits to a maximum of \$140 per policy for each registered, insured person.

#### Delay

- If the flight is delayed by a minimum of 3 hours, each registered person receives \$40.
- If the flight is delayed by a minimum of 6 hours, each registered person receives \$140.

#### Cancellation

If the flight is totally cancelled, each registered person receives \$140.

### GENERAL CONDITIONS

1. Coverage is available only for flights within, to, or from Canada including connections to such flights when *you* registered with Manulife Flight Assistance.
2. The mobile/cell phone *you* register with Blink must have suitable battery life and cellular, data or Wi-Fi service.

3. The mobile/cell phone *you* register with Blink must stay with *you* during *your* journey. Blink uses the same mobile/cell phone information when benefits are paid during *your* journey.
4. Blink is not responsible for and will not make any payments related to data or roaming charges for *your* mobile/cell phone.
5. If Blink receives false information or fraudulent claims by *you* or anyone on *your* behalf, Blink treats this coverage as if it never existed.
6. *You* must be on the airline's boarding list to be eligible for Manulife Flight Assistance.
7. All amounts are listed in Canadian dollars.
8. *You* must have a bank account with a financial institution legally operating in Canada to receive payments by Interac E-transfer.
9. After the 3-hour delay threshold, Blink will make every effort to notify *you* of any flight delays or cancellations and fund transfers, but Blink is not accountable if, for any reason, *you* do not receive their message or e-Transfer on *your* mobile/cell phone.
10. Manulife Flight Assistance benefits are paid to the policyholder who registers their flight(s) with [flightassistancemanulife.com](http://flightassistancemanulife.com). This individual receives funds for all insured travellers who are registered on their flight(s).

## NOTICE ON PRIVACY

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

**Notice on Privacy and Confidentiality.** The specific and detailed information requested on the application form is required to process the application. To protect the confidentiality of this information, Manulife will establish a "financial services file" from which this information will be used to process the application, offer and administer services and process claims. Access to this file will be restricted to those Manulife employees, mandataries, administrators or agents who are responsible for the assessment of risk (underwriting), marketing and administration of services, and the investigation of claims, and to any other person *you* authorize or as authorized by law. These people, organizations and service providers may be in jurisdictions outside Canada, and subject to the laws of those foreign jurisdictions.

*Your* file is secured in *our* offices or those of *our* administrator or agent. *You* may request to review the personal information it contains and make corrections by writing to:

Privacy Officer, Manulife, P.O. Box 1602, Waterloo, Ontario N2J 4C6.

*You* may also visit Manulife at:

<https://www.manulife.ca/privacy-policies.html> for further details about *our* Privacy Policy.

## TRAVEL ASSISTANCE.

### ANYWHERE IN THE WORLD.

Before *you* travel, be sure to download ACM's free assistance & claims app, the Manulife TravelAid mobile app through the Google Play™ store or the Apple App Store®. It, provides travellers with the following services, from anywhere in the world:

- Direct link to the Assistance centre
- Healthcare provider information
- Directions to the nearest medical facility
- Official travel advisories
- Travel tips
- Claim submission support

The Manulife TravelAid mobile app can also provide *you* with local emergency telephone numbers (such as 911 in North America), and pre- and post departure travel tips. We recommend that *you* download the app before *you* travel to avoid incurring roaming charges that may apply at *your* destination.

### HELP IS JUST A PHONE CALL AWAY.

*Our* multilingual Assistance Centre is there to help and support *you* 24 hours a day, every day of the year, with:

#### Pre-Trip Information

- ✓ Passport and Visa information
- ✓ Health hazards advisory
- ✓ Weather information
- ✓ Currency exchange information
- ✓ Consulate and Embassy locations

#### During A Medical Emergency

- ✓ Verifying and explaining coverage
- ✓ Referral to a doctor, *hospital*, or other health care providers
- ✓ Monitoring your medical *emergency* and keeping *your* family informed
- ✓ Arranging for return transportation *home* when medically necessary
- ✓ Arranging direct billing of covered expenses (where possible)

#### Other Services

- ✓ Assistance with lost, stolen or delayed baggage
- ✓ Assistance in obtaining emergency cash
- ✓ Translation and interpreter services in a medical *emergency*
- ✓ Emergency message services
- ✓ Help to replace lost or stolen airline tickets
- ✓ Assistance in obtaining prescription drugs
- ✓ Assistance in obtaining legal help or bail bond

## HOW TO REACH US

In the event of an **emergency**, call:

**1-888-491-2285**

Toll-free from the USA and Canada

**+1 (519) 251-7427**

**Collect** to Canada where available

(have *your* policy number on hand when *you* call)

Please note that **if you do not call** the Assistance Centre in an **emergency**, **you will have to pay 25% of the eligible medical expenses** we would normally pay under this policy. If it is medically impossible for *you* to call, please have someone call on *your* behalf.

If *you* are unable to call us collect, please make sure *you* obtain the receipt(s) for the cost of placing the call(s) and submit those receipts with *your* claim.

**If making a claim, you can contact us at:**

### AIR MILES TRAVEL INSURANCE

c/o Global Excel Management

P.O. Box 1237, Stn. A

Windsor, ON N9A 6P8

Telephone **1-855-841-4794**



PO Box 670, Waterloo, ON N2J 4B8

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Interac e-Transfer is a registered trademark of Interac Inc.

StandbyMD is a trademark of Healthcare Concierge Services Inc, owned by Global Excel Management Inc.

App Store is a trademark of Apple Inc.

Google Play is a trademark of Google LLC.

Accessible formats and communication supports are available upon request.

Visit [Manulife.ca/accessibility](https://www.manulife.ca/accessibility) for more information.