



INDIVIDUAL TRAVEL POLICY

Underwritten by: Northbridge General Insurance Corporation (the Company)
Claims Assistance by: Active Claims Management (2018) Inc. Operating as Active Care Management Inc. ("ACM")
Policy Managed by: AwayCare Inc.

PLEASE READ THIS DOCUMENT CAREFULLY!

This Individual Travel Policy is issued in consideration of Your enrollment and payment of the premium due. This Policy of Insurance describes the insurance benefits underwritten by Northbridge General Insurance Corporation, herein referred to as the Company and also referred to as We, Us and Our.

This policy is a legal contract between You and the Company. It is important that You read Your policy carefully. Please refer to the accompanying Confirmation of benefits, which provides You with specific information about the program policy You purchased. You should contact Your Agent immediately if You believe that the Confirmation of benefits is incorrect. In the event of a conflict between the terms of this policy and the Confirmation of benefits, the terms of the Confirmation of benefits will take precedence.

NOTICE OF RIGHT TO EXAMINE THE POLICY FOR THE MEDICAL EMERGENCY PROTECTION:

The Insured Person(s) have ten (10) days, from the day You receive the policy, to inspect it and verify the accuracy of Your declaration and application. This policy contains limitations and exclusions. Please read it carefully and contact Your representative if needed before leaving. A refund would be provided if no travel has taken place.

IN THE EVENT OF AN EMERGENCY

CALL THE ASSISTANCE CENTRE IMMEDIATELY

1-519-251-0150 toll-free from Canada or the U.S. or +1 (888) 997-0150 collect from anywhere else.

Please note that if You do not call the Assistance Centre in an Emergency and prior to Treatment, You will have to pay 30% 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.

TABLE OF CONTENTS

PLANS AT-A-GLANCE	3
GENERAL INFORMATION	4
Family Coverage	4
When Your Coverage Starts	4
When Your Coverage Ends	4
Coverage for side-trips outside of Canada	4
Automatic Extension	5
To Stay Longer than Planned	5
Cancellation & Refunds	5
HOW TO FILE A CLAIM	6
EMERGENCY MEDICAL INSURANCE	7
What is covered	7
Limitations and exclusions	10
ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE	12
What is covered	12
Limitations and Exclusions	13
WHAT ELSE DO YOU NEED TO KNOW?	14
How does this insurance work with other coverages that You may have?	15
DEFINITIONS	16
WORLD WIDE ASSISTANCE	20



PLANS AT-A-GLANCE. Important: This chart provides a high level summary of overall maximum coverage limits. It is provided for Your convenience only. Be sure to read and understand all the terms and conditions of the policy (including Your policy Confirmation) before You travel, as Your coverage may be subject to certain limitations, exclusion and sub limits.

PLANS	Standard	Enhanced	Gold	Platinum
EMERGENCY MEDICAL INSURANCE				
Coverage Limit Options	1. \$25,000	1. \$25,000	1. \$50,000	1. \$50,000
	2. \$50,000	2. \$50,000	2. \$100,000	2. \$100,000
	3. \$100,000	3. \$100,000	3. \$150,000	3. \$150,000
	4. \$150,000	4. \$150,000	4. \$300,000	4. \$300,000
Emergency Medical Expenses	Included	Included	Included	Included
Emergency Return Home	Included	Included	Included	Included
Emergency Dental Accident	\$1,500	\$2,500	\$3,000	\$4,000
Emergency Relief of Dental Pain	\$200	\$400	\$400	\$500
Prescription Drugs	\$500	\$750	\$750	\$1,000
Paramedical Services	\$200	\$400	\$400	\$600
Repatriation of Remains	\$5,000	\$7,500	\$10,000	\$12,000
Cremation or Burial at Place of Death	\$3,000	\$4,000	\$4,000	\$5,000
Identification of Remains Transportation / Subsistence	Return airfare / \$500	Return airfare / \$750	Return airfare / \$1,500	Return airfare / \$2,000
Bedside Companion Transportation / Subsistence	\$2,500 / \$1,000	\$3,000 / \$1,500	\$3,000 / \$1,500	\$5,000 / \$2,000
Hospital Allowance	\$500	\$750	\$1,000	\$1,000
Childcare	\$500	\$750	\$750	\$1,000
Expenses for Meals, Hotel, Phone Calls and Taxi	\$500	\$500	\$1,000	\$1,500
ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE				
Flight Accident	Not Covered	Not Covered	\$50,000	\$50,000
24-Hour Accident	Not Covered	Not Covered	\$50,000	\$50,000
OPTIONS AVAILABLE				
Deductible Savings	Available	Available	Available	Available
Family Coverage (up to age 69)	Available	Available	Available	Available

GENERAL INFORMATION

To apply for coverage, You or someone on Your behalf must complete and sign the Our Visitors to Canada application for insurance form not more than 365 days before the Effective date of coverage, and return it to Us with Your payment of the required premium.

Family Coverage is available if all family members are under Age 70 and You have purchased and paid the premium for Family Coverage. Family Coverage covers You, Your Spouse, and Children while travelling together and named on the Confirmation. Children must be at least 15 days of Age to be insured under this policy.

Your coverage starts on the later of:

- the Effective date of insurance as shown on Your Confirmation; or
- the time and date You arrive in Canada from Home.

Except for losses resulting from any Injury, coverage will begin 48 hours after the Effective date if You purchase Your policy:

- after the Expiry date of an existing policy issued by Us; or
- after You leave Home.

When coverage is purchased prior to leaving Home with an Effective date equal to the date and time You are scheduled to arrive in Canada, coverage will also be provided with no additional premium during Your uninterrupted flight directly to Canada. An uninterrupted flight can include a stop-over provided You do not leave the airport.

Your coverage ends on the earliest of the following:

- each time You leave Canada to return Home;
- when Your policy expires as shown in Your Confirmation;
- when You become a resident of a nursing Home, Home for the aged, or other long-term care facility during Your Trip;
- 365 days after Your Effective date of insurance; or
- the first day You become insured under a government health insurance plan.

When coverage is purchased prior to leaving Canada to return Home with an Expiry date equal to the date and time You are scheduled to leave Canada, coverage will also be provided with no additional premium during Your uninterrupted flight from Canada directly Home. An uninterrupted flight can include a stop-over provided You do not leave the airport.

During Your coverage period, if You return Home under the Trip Break allowance (see paragraph 15 of Section 8 below), Your Visitors to Canada coverage will be suspended but not terminated and when You return to Canada, Your policy coverage will resume provided You are still eligible for coverage. There will be no refund of premium for any of the days during Your return Home.

Insurance coverage for side-trips outside Canada

This insurance provides coverage while travelling outside Canada (excluding Your Home country), as long as each side-Trip originates and terminates in Canada and does not exceed 51% of the period of coverage spent in Canada.

During Your coverage period, if You take a side-Trip outside of Canada that is longer than that permitted in this policy, Your Visitors to Canada coverage will be suspended for the remainder of Your side-Trip but Your coverage will not be terminated. When You return to Canada, Your coverage will resume.

Automatic extension of Your coverage is provided beyond the date You were scheduled to return Home as per Your Confirmation if:

- Your Common Carrier is delayed and prevents You from travelling on Your Expiry date. In this case, We will extend Your coverage for up to 72 hours;
- You or Your Travel Companion are Hospitalized on Your Expiry date. In this case, We will extend Your coverage during the Hospitalization up to a maximum of 365 days or until, in our opinion, You are Stable for discharge from the Hospital or for evacuation Home, whichever is earlier, and for up to 72 hours after discharge from the Hospital;
- You or Your Travel Companion have a Medical condition that does not require Hospitalization but prevents travel on Your Expiry date, as confirmed by a Physician. In this case, We will extend Your coverage for up to 5 days.

To extend Your coverage:

If Your coverage period, as shown in Your Confirmation, is less than 365 days, You may extend Your coverage up to a total coverage period of 365 days. If You have had no change in Your health status and have had no event that has resulted or may result in a claim against the policy since the Effective date of insurance, the extension may be issued upon request and Your payment of the required premium. Otherwise, the extension is subject to the approval of the Company. In order to avoid the waiting period, purchase Your extension of coverage before the Expiry date of Your existing Visitors to Canada policy issued by Us.

To obtain a refund of premium:

Other than the “10 Day Right to Examine” on page 4, a refund for unused days will be allowed, subject to the following administration fees, which will be deducted from Your refund:

- a) If You are cancelling Your policy because Your application for a Parent and Grandparent Super Visa was refused, You must provide proof of visa refusal with Your request for a refund, which will be subject to a \$100 fee
- b) If Your request for a refund is received more than 10 days after the date of purchase but before the Effective date of Your insurance, a refund less a \$100 fee.
- c) If you obtain Canadian government health insurance plan coverage, or return Home before the date You were scheduled as per Your Confirmation, and have not reported or initiated a claim or been provided with any assistance services, a partial refund of the premium for the unused days of Your Trip is available less a \$50 fee for the Standard and Enhanced Plan and a \$25 fee for the Gold and Platinum Plan. You will need to provide proof of the date You actually returned Home or the Effective date of Your Canadian government health insurance plan coverage. Simply contact Us to ask for a refund. All travelers insured under the same policy must return together or have Canadian government health insurance plan coverage in effect for a refund to be possible.
- d) If You hold a Parent and Grandparent Super Visa and have purchased 365 days of coverage, and are requesting a partial refund due to Your early return to Your Home or departure from Canada and:
 - have had no claim that has been reported, paid or denied,
 - unused premiums may be refunded less a \$50 fee for the Standard/Enhanced Plan and a \$25 fee for the Gold/Platinum Plan when You have provided proof of return to Your Home or departure from Canada.
 - have reported a claim or have a payable claim for which the payment has not been issued or the total amount of all reported eligible claim expenses will not exceed the deductible amount, if applicable,
 - You may apply to have such claim withdrawn and, subject to Our approval, the unused premium may be refunded less a handling fee, which will be deducted from any amount to be refunded.

If You have submitted a claim that has been denied or paid, no refund is possible under this policy.

A written request to cancel this policy must be received within 60 days following the date You return Home along with proof of Your departure from Canada. In no event will We back-date a cancellation to a date more than 60 days prior to the date of receipt of Your cancellation request. If Your cancellation request is received more than 30 days following the date You returned Home, We will require a copy of every page of Your passport to verify that You did not visit Canada between the date You returned Home and the date You submitted Your refund request. Once any refund of premium has been requested, no expenses will be accepted for consideration under the policy, regardless of the date the expense was incurred.

HOW TO FILE A CLAIM

To make a claim due to *Sickness or Injury* during *Your Trip*, please call the Assistance Centre at:

1-519-251-0150

Toll-free from the USA and Canada.

+1 (888)-997-0150

Collect to Canada from anywhere else.

Call within 24 hours of Hospitalization. If You do not contact the Assistance Centre before receiving medical Treatment, You will have to pay 30% of the medical expenses We would normally pay under this insurance. If it is medically impossible for You to call when the emergency happens, the 30% 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.

The Assistance Centre will verify and explain Your coverage to You; refer You to a medical provider; arrange to have Your covered expenses billed directly to Us where possible; and monitor Your medical condition.

Please mail all original receipts, bills, and invoices to:

**Active Care Management
C/O Assistance Centre
P.O. Box 337, Stn. A
Windsor, ON N9A 6K8**

Your claim must be sent to Us within 90 days of Your loss. Ensure You keep a copy of Your receipts, bills, and invoices for Your records.

To determine which documents are needed for each type of claim, refer to the insurance plan under which You are filing a claim.

WHAT IS COVERED UNDER EMERGENCY MEDICAL INSURANCE?

*All benefits are outlined in Canadian Funds.

Under Emergency Medical Insurance, You are covered for the actual eligible covered expenses related to the medical attention You need if a medical Emergency begins unexpectedly after Your Effective date of insurance and when these expenses are not covered by any other benefit plan. The maximum amount payable is based on the plan You have purchased, as shown in Your policy Confirmation. 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). Covered expenses and benefits are subject to the policy's exclusions and limitations. Covered expenses and benefits are also subject to Your payment of the applicable deductible amount, if any.

All medical procedures and/or tests (including but not limited to MRI, MRCP, CAT Scan, CT Angiogram, Nuclear Stress Test, Angiogram or Cardiac Catheterization, or any surgery) must be authorized by the Assistance Centre in advance.

Benefits #3, #7 to #13 and #15 will only be eligible if they been authorized and/or arranged by ACM.

You are covered up to the maximum amount shown on the PLANS AT-A-GLANCE on page 2 of this policy or the amount as otherwise specified in the Benefit.

Eligible covered expenses include:

1. **Emergency medical expenses** – Reasonable and customary charges (up to policy limit) for:
 - a) medical care received from a Physician in or out of Hospital;
 - b) the cost of a Hospital room (semi-private room when available or an intensive care unit when medically necessary);
 - c) the services of a licensed private duty nurse while You are in Hospital;
 - d) the rental or purchase (whichever is less) of a Hospital bed, wheelchair, brace, crutch or other medical appliance;
 - e) tests that are needed to diagnose or find out more about Your condition.
2. **Prescription drugs** - Drugs that are prescribed for You and are available only by prescription from a Physician or dentist. This benefit is limited to a 30-day supply and to the maximum amount shown below, based on the plan You purchased:

Standard Plan – \$500 | Enhanced Plan – \$750 || Gold Plan – \$750 | Platinum Plan – \$1,000

3. **Follow-up visits** - Follow-up visits are covered up to the amounts listed below provided they are directly related to the medical Emergency.

Standard Plan – \$500	Enhanced Plan – \$1,000	Gold Plan – \$1,500	Platinum Plan – \$3,000
-----------------------	-------------------------	---------------------	-------------------------

4. Paramedical services – Treatment received from a licensed chiropractor, osteopath, chiroprapist, physiotherapist or podiatrist for a covered Injury. Your paramedical practitioner must be a person other than Yourself or an Immediate family member. This benefit is limited per Emergency.

Standard Plan– \$200 | Enhanced Plan – \$400 || Gold Plan – \$400 || Platinum Plan – \$600

5. Ground ambulance transportation – Reasonable and customary charges for local licensed ground ambulance service to transport You to the nearest appropriate medical service provider in an Emergency.

6. Emergency dental Treatment – If You need dental Treatment in an Emergency, We will pay:

a) for the relief of dental pain, excluding crowns and root canals, up to the maximum amount shown below, based on the plan You purchased:

Standard Plan– \$200 | Enhanced Plan– \$400 || Gold Plan – \$400 || Platinum Plan – \$500

b) if You suffer from an accidental blow to the mouth, the expenses incurred to repair or replace Your natural or permanently attached artificial teeth, up to the maximum amount shown below, based on the plan You purchased:

Standard Plan – \$1,500		Enhanced Plan – \$2,500		Gold Plan – \$3,000		Platinum Plan – \$4,000
----------------------------	--	----------------------------	--	------------------------	--	----------------------------

7. Repatriation of Remains – If You die during Your Trip from an Emergency covered under this insurance, We will reimburse :

a) up to a maximum outlined below for expenses incurred for the preparation of Your remains and the cost of the standard transportation container normally used by the airline, plus the return Home of Your remains or ashes; or

Standard Plan – \$5,000		Enhanced Plan – \$7,500		Gold Plan – \$10,000		Platinum Plan – \$12,000
----------------------------	--	----------------------------	--	-------------------------	--	-----------------------------

b) up to a maximum outlined below for the cremation or burial of Your remains at the place of death. No benefit is payable for the expense of a headstone, casket, urn and/or funeral service.

Standard Plan – \$3,000		Enhanced Plan – \$4,000		Gold Plan – \$4,000		Platinum Plan – \$5,000
----------------------------	--	----------------------------	--	------------------------	--	----------------------------

8. Identification of Remains - If someone is legally required to identify Your body and must travel to the place of Your death, We will pay the return economy class airfare via the most cost-effective itinerary for that person, as well as expenses incurred for that person's hotel and meal expenses up to the maximums outlined below. We will also cover that person for up to 72 hours under the same Emergency Medical Insurance Plan purchased by You.

Standard Plan \$100/day, max of \$500		Enhanced Plan \$100/day, max of \$750		Gold Plan \$150/day, max of \$1,500		Platinum Plan \$200/day, max of \$2,000
--	--	--	--	---	--	---

9. Emergency return Home – If Your treating Physician recommends that You return Home because of Your Emergency or if our medical advisors recommend that You return Home after Your Emergency Treatment, We will pay for one or more of the following:

- a) the extra cost of an economy class airfare via the most cost-effective itinerary;
- b) a stretcher airfare on a commercial flight via the most cost-effective itinerary, if a stretcher is medically necessary;
- c) the return economy class airfare of a qualified medical attendant via the most cost-effective itinerary to accompany You, and the attendant’s reasonable fees and expenses, if this is medically necessary or required by the airline; or
- d) the cost of air ambulance transportation, if it is medically necessary.

10. Extra expenses for meals, hotel, phone calls and taxi – If a medical Emergency prevents You or Your Travel Companion from returning Home as originally planned, or if Your Emergency medical Treatment or that of Your Travel Companion requires Your transfer to a location that is different from Your original destination, We will reimburse You for expenses incurred for Your extra hotel, meals, essential calls and taxi fares up to the maximum amount shown below, based on the plan You purchased:

Standard Plan – \$500	Enhanced Plan – \$750	Gold Plan – \$1,000	Platinum Plan – \$1,500
-----------------------	-----------------------	---------------------	-------------------------

Note: We will only pay for these expenses if You have actually paid for them.

11. Bedside Companion – If You are travelling alone and are admitted to a Hospital for five (5) days or more because of a medical Emergency, We will pay up to the maximum below for an economy class airfare via the most cost-effective itinerary for one Immediate family member or one close friend to be with You. We will also pay for expenses incurred for that person’s hotel and meals. We will also cover that person under the same Emergency Medical Insurance Plan purchased by You, until You are medically fit to return Home.

Round Trip max:

Standard Plan – \$2,500	Enhanced Plan – \$3,000	Gold Plan – \$3,000	Platinum Plan – \$5,000
-------------------------	-------------------------	---------------------	-------------------------

Meals & Accommodations:

Standard Plan \$100/day, max of \$1,000	Enhanced Plan \$150/day, max of \$1,500	Gold Plan \$150/day, max of \$1,500	Platinum Plan \$200/day, max of \$2,000
---	---	---	---

12. Childcare – If You are admitted to a Hospital, 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 the benefits below. The Child(ren) must have been under Your care during Your Trip.

Standard Plan \$50/day, max of \$500	Enhanced Plan \$75/day, max of \$750	Gold Plan \$75/day, max of \$750	Platinum Plan \$100/day, max of \$1,000
---	---	-------------------------------------	--

13. Return and escort of children – If You are admitted to a Hospital for more than 24 hours or must return Home because of an Emergency, We will pay for the extra cost of an economy class airfare to return accompanying Children Home via the most cost-effective itinerary and the return economy class airfare via the most cost effective itinerary for a qualified escort when the airline requires it. The Children must have been under Your care during Your Trip and covered under this policy.

14. Hospital allowance – If You are Hospitalized for more than 72 hours, We will reimburse You up to the benefits outlined below for out-of-pocket expenses such as telephone and television charges incurred by You when Hospitalized. Expenses must be supported by original receipts.

Standard Plan \$50/day, max of \$500	Enhanced Plan \$75/day, max of \$750	Gold Plan \$100/day, max of \$1,000	Platinum Plan \$100/day, max of \$1,000
---	---	---	---

15. Trip break – If You have requested and received prior approval from Our Assistance Centre, You may return Home during Your coverage period without terminating Your coverage. Your coverage will be suspended but will not terminate after You leave Canada and while You are Home. Your suspension of coverage will end and Your coverage will be reinstated when You arrive in Canada. Your arrival back in Canada must occur during the original Trip period. There will be no refund of premium for any of the days during Your return Home.

Limitations and Exclusions

We will not pay any expenses or benefits relating to:

1. Pre-existing conditions and/or symptoms as follows and if the Pre-Existing coverage was purchased (as outlined on Your Confirmation of insurance):
 - a) Standard and Enhanced
 - i) 0-74 years of Age has a standard stability 180 with option to buy down to 90
 - ii) 75+ years of Age has a standard stability 365 with option to buy down to 180 and 90
 - b) Gold and Platinum
 - i) 0-74 years of Age has a standard stability 180 with option to buy down to 90 and 30
 - ii) 75+ years of Age has a standard stability 365 with option to buy down to 180 and 90 and 30
2. Any Sickness that manifests during the Waiting Period even if related expenses are incurred after the waiting period.
3. Covered expenses that exceed the Reasonable and customary charges that normally apply where the medical Emergency occurs.
4. Covered expenses that exceed the maximum insured amount available under the plan You have purchased.
5. Any expenses or benefits if any of the information provided on the application for insurance is not truthful and accurate or You did not meet the eligibility requirements under this coverage.

6. Covered expenses that exceed 70% of those We would normally pay under this insurance, if You do not contact the Assistance Centre within 24 hours of Hospitalization, unless Your Medical condition makes it medically impossible for You to call (in that case, the 30% co-insurance does not apply).
7. Any Treatment that is not for an Emergency, including any elective or cosmetic surgery or Treatment.
8. Continued Treatment of a Medical condition when You have already received Emergency Treatment for that condition during Your Trip, if Our medical advisors determine that the medical Emergency has ended.
9. Magnetic resonance imaging (MRI), computerized axial tomography (CAT) scans, sonograms, ultrasounds or biopsies, cardiac catheterization, angioplasty and/or cardiovascular surgery including any associated diagnostic test(s) or charges unless approved in advance by the Assistance Centre prior to being performed. All surgery must be authorized by ACM prior to being performed except in extreme circumstances where surgery is performed on an Emergency basis immediately upon admission to Hospital.
10. A medical condition:
 - when You knew, before You left Home, or before the Effective date of coverage, that You would need or be required to seek Treatment for that Medical condition during Your Trip; and/or
 - for which it was reasonable to expect before You left Home or before Your Effective date of coverage, that You would need Treatment 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 leaving Home; and/or
 - that had caused Your Physician to advise You not to travel.
11. Any Emergency and non-Emergency medical services for any Injury that occurred or Sickness that started or was treated during any Trip break (Eligible expense #15) that You have taken or after the number of days permitted for Your side-Trip outside of Canada.
12. An Emergency resulting from mountain climbing requiring the use of specialized equipment, including carabiners, crampons, pick axes, anchors, bolts and lead-rope or top-rope anchoring equipment to ascend or descend a mountain; rock-climbing; parachuting, skydiving, hang-gliding or using any other air-supported sporting device; skiing or snowboarding out of bounds, heli-skiing, ski jumping; participating in a motorized speed contest; white water rafting (except grades 1 to 4), street luge, skeleton activity, rodeo activity; or Your professional participation in a sport when that sport, snorkeling or scuba-diving is Your principal paid occupation; or snorkeling or scuba-diving (unless certified by an internationally recognized and accepted program such as NAUI or PADI and diving depth does not exceed 30 meters).
13. Any loss Injury or death incurred due to:
 - a) Your emotional or mental disorders resulting from any cause, including but not limited to anxiety or depression; or
 - b) Your suicide or attempted suicide; or
 - c) Your intentionally self-inflicted Injury.
14. Committing or attempting to commit a criminal or illegal act by You, a family member or travelling companion Your or beneficiary.
15. Not following a recommended or prescribed therapy or Treatment.
16. Any loss, Injury or death related to intoxication, the misuse, abuse, overdose, or chemical dependence on medication, drugs, alcohol or other intoxicant.

17. a) Your routine prenatal care; b) Your pregnancy or childbirth or complications thereof when they happen in the 9 weeks before or after the expected date of delivery; c) Your Child born during Your Trip.
18. For insured Children under 2 years of Age, any Medical condition related to a birth defect.
19. Any benefit that must be authorized or arranged in advance by the Assistance Centre when it has given no authorization or made no arrangement for that benefit.
20. Any Emergency that occurs or recurs after Our medical advisors recommend that You return Home following Your Emergency Treatment, and You choose not to.
21. Any death or Injury sustained while piloting an aircraft, learning to pilot an aircraft or acting as a member of an aircraft crew.
22. For consecutive policies and policy extensions: any Medical condition 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 subsequent policy or insurance extension.
23. Any follow-up visits outside Canada when the Emergency occurred in Canada.
24. Any Medical condition You contract or suffer in a specific country, region, or city when a Government of Canada Travel Advisory, issued before Your departure to that country, region, or city advises Canadians to avoid all or non-essential travel to that specific country, region or city. In this exclusion, "medical condition" is limited, related or due to the reason for the travel advisory.
25. Any Act of War or Act of Terrorism.
26. Your participation in armed forces activities.

IF YOU ARE FILING A CLAIM UNDER THIS BENEFIT, WE WILL NEED:

- original receipts for all bills and invoices;
- proof of payment made by You and/or by any other benefit plan;
- medical records including complete diagnosis by the attending Physician or documentation by the Hospital, which must support that the Treatment was medically necessary;
- proof of the accident if You are submitting a claim for dental expenses resulting from an accident;
- proof of travel dates for side-Trips outside Canada; and
- a copy of Your ticket and passport confirming travel dates and entry into Canada.

WHAT IS COVERED UNDER ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE?

This section applies only to insured persons who have purchased the Gold or Platinum Plan.

Travel Accident (Non-Flight)

We will pay up to the amount shown below for loss of life, limb or sight resulting directly from an Injury occurring during the coverage period, except while boarding, riding in, or alighting from an aircraft:

- a) \$25,000 for a loss resulting from the same Injury for loss of:
 - i. life; or
 - ii. entire sight of both eyes; or
 - iii. both hands; or
 - iv. both feet; or
 - v. one hand and entire sight of one eye; or
 - vi. one foot and entire sight of one eye.
- b) \$12,500 for a loss resulting from the same Injury for loss of:

- i. entire sight of one eye; or
- ii. one hand; or
- iii. one foot.

Loss of hand or hands, or foot or feet means severance through or above the wrist joint or ankle joint, respectively. Loss of eye or eyes means total and irrecoverable loss of the entire sight.

If You have more than one Injury during Your Trip, We will pay the applicable insured sum only for the one accident that entitles You to the largest benefit amount.

Flight Accident

We will pay up to \$50,000 in the case of death as a result of an Injury sustained during the coverage period while boarding, riding in, or alighting from an aircraft lawfully operated by a licensed public air Common Carrier as a fare-paying passenger.

Exposure and Disappearance

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

- a) as a result of such exposure, You suffer one of the losses specified in the schedule of losses above; or
- b) Your body has not been found within 12 months from the date of the accident. It will be presumed, subject to evidence to the contrary, that You suffered loss of life.

EXCLUSIONS AND LIMITATIONS UNDER ACCIDENTAL DEATH & DISMEMBERMENT

Under Travel Accident Insurance, We will not cover expenses or benefits if Your death or Injury results directly or indirectly from:

1. Mountain climbing requiring the use of specialized equipment, including carabiners, crampons, pick axes, anchors, bolts and lead-rope or top rope anchoring equipment to ascend or descend a mountain; rock climbing; parachuting, skydiving, sky-surfing, hang-gliding or using any other air supported sporting device; participating in a motorized speed contest; any skiing out of bounds, heli-skiing; white water rafting (except grades 1 to 4); street luge, skeleton activity; mountaineering; any rodeo activity; or Your professional participation in a sport, snorkeling or scuba-diving when that sport, snorkeling or scuba-diving is Your principal paid occupation.
2. Any loss Injury or death incurred due to:
 - a) Your emotional or mental disorders resulting from any cause, including but not limited to anxiety or depression; or
 - b) Your suicide or attempted suicide; or
 - c) Your intentionally self-inflicted Injury.
3. Not following a recommended or prescribed therapy or Treatment.
4. Any loss, Injury or death related to intoxication, the misuse, abuse, overdose, or chemical dependence on medication, drugs, alcohol or other intoxicant.
5. Piloting an aircraft, learning to pilot an aircraft, or acting as a member of an aircraft crew.
6. Committing or attempting to commit a criminal or illegal act by You, a family member or travelling companion or Your beneficiary.

7. A Sickness or disease, even if the proximate cause of its activation or reactivation is the result of an Injury.
8. Any Act of War or Act of Terrorism.

IF YOU ARE FILING A CLAIM UNDER ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE, WE WILL NEED:

- a police, autopsy, or coroner's report;
- medical records; and
- a death certificate, as applicable.

WHAT ELSE DO YOU NEED TO KNOW?

This policy is issued on the basis of information provided in Your application. Your entire contract with Us consists of: this policy, Your application for this policy including medical questions if requested, the Confirmation issued in respect of that application, and any other amendments or endorsements resulting from extensions or top-ups of coverage. This insurance is void in the case of fraud or attempted fraud, or if You conceal or misrepresent any material fact in Your application for this policy or extension of coverage under this policy.

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

Despite any other provisions of this contract, this contract is subject to the statutory conditions contained in the governing provincial statutes respecting contracts of accident and Sickness insurance where Your policy was issued.

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 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.

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 medical questions if required) prior to Your effective date.

If the premium is insufficient for the period of coverage selected, We will: charge and collect any underpayment; or shorten the policy period by written endorsement if an underpayment in premium cannot be collected. Coverage will not be in effect 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.

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

The insurance coverages outlined in this policy are second-payer plans. If there are other third-party liability, group or individual, basic or extended health insurance plans or contracts including any private or provincial or territorial auto insurance plans providing Hospital, medical or therapeutic coverage or

any other third-party liability insurance in force concurrently herewith, amounts payable hereunder are limited to those expenses incurred while away from Home that are in excess of the amounts for which You are insured under such coverage.

If You are eligible, from any other insurer, for benefits similar to those provided under this insurance, the 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, to a maximum of the largest amount specified by each insurer (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).

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 will do nothing to prejudice such rights.

If You are insured under more than one policy underwritten by Us, the total amount We will 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 You are insured under more than one policy and the total amount of all accident insurance You have exceeds \$50,000, 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.

To whom will We pay Your benefits if You have a claim?

Except in the case of Your death, We will pay the expenses covered 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 Your policy was issued.

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

To determine the validity of a claim under this policy, We may obtain and review medical records from Your attending Physician(s), including the records from Your 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 capitalized in this policy, the term:

ACM – “Active Care Management” the operating name of the authorized travel assistance and claims company Active Claims Management (2018) Inc.

Act 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 government (whether that government is legal or illegal); 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.

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

Age means Your age at Your effective date of insurance.

Child, Children means Your unmarried, dependent son or daughter, or Your grandchild(ren) travelling with You or joining You during Your Trip and is either:

- at least 15 days of age but under 21 years of age; or
- under 26 years of age and a full-time student; or
- any age who is mentally or physically disabled and dependent on You for support.

Common carrier means a conveyance (bus, taxi, train, boat, airplane or other vehicle) which is licensed, intended for 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 and medical questions information included in 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.

Departure date means the date You leave Home.

Effective date means the date on which Your coverage begins. Your coverage starts on the later of:

- a) the effective date of insurance as shown on Your Confirmation; or
- b) the time and date You arrive in Canada from Home. Except in the case of an Injury, the applicable

Waiting Period applies to all claims if You purchased insurance after Your arrival in Canada.

When coverage is purchased prior to leaving Home with an effective date equal to the date and time You are scheduled to arrive in Canada, coverage will also be provided with no additional premium during Your uninterrupted flight directly to Canada. An uninterrupted flight can include a stop-over provided You do not leave the airport.

Emergency means an unforeseen Sickness or Injury that requires immediate Treatment. An Emergency no longer exists when the Assistance Centre indicates that the person is able to return to his or her province, territory of residence or country of permanent residence, or continue with the Trip.

Expiry date means the earliest of:

- a. the date You leave Canada to return Home;
- b. when Your policy expires as shown in Your Confirmation;
- c. when You become a resident of a nursing Home, Home for the aged,

- or other long term care facility during Your Trip;
- d. 365 days after Your effective date of insurance;
- e. the first day You become insured under a government health insurance plan.

When coverage is purchased prior to leaving Canada to return Home with an Expiry date equal to the date and time You are scheduled to leave Canada, coverage will also be provided with no additional premium during Your uninterrupted flight from Canada directly Home. An uninterrupted flight can include a stop-over provided You do not leave the airport.

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

Home means Your country of residence or origin; or Your place of departure before arriving in Canada.

Hospital means a facility that is licensed as a Hospital where inpatients receive medical care and diagnostic and surgical services under the supervision of a staff of Physicians with 24-hour care by registered nurses. A clinic, an extended or palliative care facility, a rehabilitation establishment, an addiction centre, a convalescent, rest or nursing Home, Home for the aged or health spa is not a Hospital.

Immediate family means Spouse, parent, legal guardian, step-parent, grandparent, grandchild, in-law, natural or adopted child, step-child, brother, sister, step-brother, step-sister, aunt, uncle, niece, nephew or cousin.

Injury means sudden bodily harm that is caused directly by external and solely accidental means, and independent of Sickness or disease.

Medical condition means an irregularity in Your health that required or requires medical advice, consultation, investigation, Treatment, care, service or diagnosis by a Physician.

Medical questions means all the medical questions that are included in the application for coverage under this policy.

Minor Ailment means an ailment or infection that ends 30 days prior to the effective date of coverage and does not require:

- use of medication for a period greater than 15 days;
- more than one follow-up visit to a Physician;
- Hospitalization;
- surgical intervention; or
- consultation with a medical specialist.

A chronic infection or the complication of a chronic infection is not a minor ailment

Physician means a medical doctor who is duly licensed in the jurisdiction in which he/she operates and who gives medical care within the scope of his/her licensed authority. A Physician must be a person other than Yourself or a member of Your Immediate family.

Pre-existing condition means a medical condition, other than a minor ailment, that exists before Your effective date of insurance.

Reasonable and customary means charges that do not exceed the standard fee of other providers of similar standing in the locality or geographical area when providing the same Treatment of a similar Sickness or Injury.

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

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

Stable describes any Medical condition or related condition for which:

- a) there has been no new Treatment; and
- b) there has been no change in Treatment or change in Treatment frequency or type; and
- c) there have been no signs or symptoms or new diagnosis; and
- d) there have been no test results showing deterioration; and
- e) there has been no Hospitalization; and
- f) there has been no referral to a specialist (made or recommended) and You are not awaiting the results of further investigations performed by any medical professional.

The following are considered Stable:

- Routine (not prescribed by a Physician) adjustment of insulin to control diabetes provided the insulin was not first prescribed during the time period specified in the pre-existing conditions exclusion as shown on Your Confirmation.
- Change from a brand name medication to a generic medication provided the medication was not first prescribed during the time period specified in the pre-existing conditions exclusion as shown on Your Confirmation and there is no increase or decrease in dosage.
- The routine adjustment of Coumadin or Warfarin provided the Coumadin or Warfarin was not first prescribed during the time period specified in the pre-existing conditions exclusion as shown on Your Confirmation.

A minor ailment

Travel companion means someone who shares Trip arrangements with You on any one Trip, up to a maximum of three (3) persons including You. All Traveling Companions must be named on the Confirmation

Treatment means Hospitalization, prescribed medication (including prescribed as needed), medical, therapeutic, diagnostic or surgical procedure prescribed, performed or recommended by a licensed medical practitioner. 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 time between Your effective date of insurance and Expiry date.

Waiting period means the 48-hour period following and including Your effective date of insurance if You purchase Your policy:

- after the Expiry date of an existing TrueNorth Visitors to Canada policy; or
- after You leave Home.

The Waiting Period will be waived if You purchased this policy prior to the Expiry date of an existing Visitors to Canada policy already issued by Us, to take effect on the day following such Expiry date, provided that there is no increase in the coverage amount or change in the Plan You select.

We, Us, Our means Northbridge General Insurance Corporation (the Company)

You, Yourself, Your means the person named as the insured on the Confirmation for whom insurance coverage was applied 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.

IN THE EVENT OF AN *EMERGENCY*,

CALL THE ASSISTANCE CENTRE IMMEDIATELY.

1-519-251-0150 toll-free

1-888-997-0150 from the USA and Canada

Our Assistance Centre is ready to assist You 24 hours a day, each day of the year.

SECTION VIII. WORLDWIDE ASSISTANCE SERVICES

A variety of travel assistance services are provided. Travel assistance services are not insurance coverages included in the policy. Travel assistance services are provided by the Assistance Company and not by Northbridge General Insurance Corporation. Travel assistance services provided include (where available):

- Medical or Legal Referral • Inoculation Information • Translation Service • Lost Baggage Retrieval
- Passport/Visa Information • Emergency Cash Advance • Bail Bond (outside Canada only) • Prescription Drug/Eyeglass Replacement • ID Theft Resolution Service

Payment reimbursement to the Assistance Company is Your responsibility.

24/7 Travel Assistance Services

**Medical Emergency, Concierge Service, Business Concierge, Political and Natural Disaster Evacuation.
Please contact Active Care Management (herein known as the Assistance Company)**

IN THE EVENT OF AN EMERGENCY, PLEASE CONTACT

ACTIVE CARE MANAGEMENT (herein known as the Assistance Company)

IMMEDIATELY toll free at **1-888-669-0135** or collect where available at **519-251-0135**

For non-Emergency assistance needs the Assistance Company can also be contacted via email at northbridgeassistance@acmtravel.ca

Canadian Mail:

ACM, PO Box 337, Station A, Windsor, ON N9A 6K7

U.S. Mail:

ACM, 535 Griswold Street, Ste 111-612 Detroit, MI 48226

The Assistance Company is there to help You 24 hours a day, each day of the year. If it is medically impossible for You to call, please have someone call on Your behalf. You can also contact the Assistance Company's Emergency assistance centre via their mobile app.

Travel Assistance Mobile App

For a direct link to the Assistance Company You can download ACM's free assistance app, **ACM TravelAid™**. The GPS-enabled **ACM TravelAid™** provides travelers with the following services, from anywhere in the world:

- Direct link to the assistance center
- Healthcare provider information
- Directions to the nearest medical facility
- International 911 look-up
- Official travel advisories and travel tips
- Claims submission support for out-of-province and out-of-country travelers

FREE DOWNLOAD NOW

(Available through the Apple Store or Google Play)

www.active-care.ca/travelaid

Travel assistance services are provided by the Assistance Company and not by Northbridge General Insurance Corporation. There may be times when circumstances beyond the Assistance Company's control hinder their endeavors to provide travel assistance services. They will, however, make all reasonable efforts to provide travel assistance services and help You resolve Your Emergency situation. If You require **Non-Medical Emergency Evacuation**, the Assistance Company will arrange for evacuation from a safe departure point to the nearest safe location. You must contact the Assistance Company as soon as possible after Your host country issues the official disaster declaration, as delays may

make safe transportation impossible. The method of transportation will be as deemed most appropriate to ensure Your safety. If evacuation becomes impractical due to hostile or dangerous conditions, the Assistance Company will maintain contact with and advise You until evacuation becomes viable or the natural disaster situation or the political or social upheaval has been resolved. Should commercial transportation be available, but transportation to the commercial transportation departure point will place You in imminent bodily harm, the Assistance Company shall, when possible, arrange and pay for Your secure transport to the departure point. Fees for commercial transportation and/or change fees are Your responsibility once You reaches the departure point where normal commercial transportation is available. Benefit is subject to the terms and conditions of the plan and as determined by Active Care Management's security personnel, in accordance with local and Canadian authorities. Services rendered without Active Care Management's coordination and approvals are not covered. No claims for reimbursement will be accepted. If You are able to leave Your host country by normal means, Active Care Management will assist You in rebooking flights or other transportation.

AVAILABILITY OF SERVICES

You are eligible for information and concierge services at any time after You purchase this plan. The travel assistance services become available when You actually start Your Trip. Travel assistance, Concierge and Informational Services, end the earliest of: midnight on the day the program expires; when You reach Your return destination; or when You complete Your Trip. The Identity Theft Resolution Services become available on Your Scheduled Departure Date for Your Trip. Services are provided only for an Identity Theft event which occurs while on Your Trip. Identity Theft Resolution does not guarantee that its intervention on behalf of You will result in a particular outcome or that its efforts on behalf of You will lead to a result satisfactory to You. Identity Theft Resolution does not include and shall not assist You for thefts involving non-Canadian bank accounts.

CONCIERGE SERVICES

Concierge Services are provided by the Assistance Company's designated provider. There is no charge for the services provided by the provider. You are responsible for the cost of services provided and charged for by third parties and for the actual cost of merchandise, entertainment, sports, tickets, food and beverages and other disbursement items. Services offered include (where available):

- Destination Profiles • Epicurean Needs • Event Ticketing • Floral Services • Tee Time Reservations • Hotel Accommodations • Meet-And-Greet Services • Shopping Assistance Services • Pre-Trip Assistance
- Procurement of Hard-To-Find Items • Restaurant Referrals and Reservations • Rental Car Reservations
- Airline Reservations

BUSINESS CONCIERGE SERVICES

Concierge Services are provided by the Assistance Company's designated provider. There is no charge for the services provided by the provider. You are responsible for the cost of services provided and charged for by third parties. Services offered include (where available):

- Emergency Correspondence And Business Communication Assistance • Assistance With Locating Available Business Services Such As: Express/Overnight Delivery Sites, Internet Cafes, Print/Copy Services • Assistance With Or Arrangements For Telephone And Web Conferencing • Emergency Messaging To Customers, Associates, And Others (Phone, Fax, E-mail, Text, etc.) • Real Time Weather, Travel Delay And Flight Status Information • Worldwide Business Directory Service For Equipment Repair/Replacement, Warranty Service, etc. • Emergency Travel Arrangements