JF JF Insurance Agency Group Inc.

JF CANADIAN TRAVEL INSURANCE Policy

IN THE EVENT OF AN EMERGENCY: You must call Ontime Care immediately:

From Canada and the U.S., call TOLL FREE 1-888-988-3268

From anywhere call COLLECT +1-905-707-9555

Do not assume that someone will contact *Ontime Care* on *your* behalf. It remains *your* responsibility to ensure that *Ontime Care* has been contacted prior to receiving treatment or as soon as reasonably possible.

If *you* fail to notify *Ontime Care*, coverage will be limited to 70% of eligible expenses to a maximum of \$250,000.

Section I Important Notice

- Throughout this policy, words in italics have a specific meaning and are defined in SECTION II - DEFINITIONS.
- 2 This insurance is designed to cover losses arising from sudden and unforeseeable circumstances. It is important that you read and understand your policy, as your coverage may be subject to certain limitations and exclusions.
- 3. A pre-existing medical condition exclusion may apply to medical conditions and/or symptoms that existed prior to your effective date. Check to see how this applies in your policy and how it relates to your effective date. In the event of an accident, injury or sickness, your prior medical history will be reviewed after a claim has been reported.
- 4. All amounts are in Canadian currency, unless indicated otherwise.

Please read this policy carefully.

Section II Definitions

THROUGHOUT THIS POLICY, DEFINED WORDS ARE IN ITALICS.

Accident means a, sudden, unforeseen and unintentional event exclusively attributable to an external cause resulting in *injury*.

Administrator Company means JF Insurance Agency Group Inc., appointed by the insurer to administer this JF Canadian Travel Insurance plan.

Common Carrier means an airline, bus, train, cruise ship or government-operated ferry system offering its transportation services to paying passengers at published rates and scheduled times.

Dependent Child(ren) means any unmarried child(ren) residing with you who is at least 15 days old and no more than 19 years of age on the date of purchase, and who is dependent on you for support. **Emergency** means an unexpected and unforeseen sickness or injury occurring during the coverage period for which you require immediate medical treatment to alleviate danger to life or health occurring while on a covered trip, and that such medical treatment cannot be delayed until you return to your province or territory of residence or Canada by the next available means.

health occurring while on a covered *trip*, and that such *medical treatment* cannot be delayed until you return to your province or territory of residence or Canada by the next available means, whether you intend to or not. An emergency no longer exists when you are deemed medically fit to travel or you are discharged from the *hospital* and no further benefits are payable in respect of the medical condition which caused the emergency.

Government Health Insurance Plan means the health care coverage provided by Canadian federal, provincial and territorial governments to their residents.

Hospital means an institution which is designated as a hospital by law, which is continuously staffed by one or more *physicians* at all times; which continuously provides nursing services by graduate registered nurses; which is primarily engaged in providing diagnostic services and/or medical and surgical treatment of a *sickness* or *injury* in the acute phase, or active treatment of a chronic *sickness*, which has facilities for diagnosis, major surgery and in-patient care. The term hospital does not include convalescent, nursing, rest or skilled nursing facilities, whether separate from or part of a regular general hospital, or a facility operated mainly as a clinic, extended or palliative care facility rehabilitation facility, addiction treatment centre or health spa.

Hospitalization or Hospitalized means an insured occupies a hospital bed for more than 24 hours for medical treatment and for which admission was recommended by a physician when medically necessary. Immediate Family Member means your mother, father, sibling, child, spouse, grandparent, grandchild, aunt, uncle, niece, nephew, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law or sister-in-law.

Injury means unexpected and unforeseen harm to the body caused by an *accident*, occurring during the coverage period and which requires immediate *emergency* treatment that is covered by this policy. **Insured, Insured Person, You, Your** and **Yourself** means any eligible person who is named on the application or the confirmation of insurance.

Insurer means Berkley Canada (a Berkley Company) which provides this insurance.

Medical Treatment means any reasonable procedure which is medical, therapeutic or diagnostic in nature, which is *medically necessary* and which is prescribed by a *physician*. Medical treatment includes *hospitalization*, basic investigative testing, surgery, prescription medication (including prescribed as needed) or other treatment directly related to the *sickness*, *injury* or symptom.

- Medically Necessary in reference to a given service or supply means such service or supply:
 a) is appropriate and consistent with the diagnosis according to accepted community standards of medical practice;
 - b) is not experimental or investigative in nature;
 - c) cannot be omitted without adversely affecting your condition or quality of medical care; and
 - d) cannot be delayed until your return to your country of origin.

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

- a) the use of medication for a period of greater than 15 days; or
- b) more than one follow-up visit to a physician, hospitalization, surgical intervention, or
- c) referral to a specialist; and
- d) which ends at least 30 consecutive days prior to the departure date of each trip.

A chronic condition or any complication of a chronic condition is not considered a minor ailment. **Ontime Care** means Ontime Care Worldwide Inc., the company appointed by the Insurer to provide emergency assistance and claims services.

Physician means a medical practitioner who is registered and licensed to practice in accordance with the regulations applying in the jurisdiction where the person practices. A physician must be a person other than *yourself* or an *immediate family member*.

Pre-Existing Medical Condition(s) means any medical condition, *sickness* or *injury* for which at any time prior to the effective date, *you* have experienced symptoms, *you* have received medical care, advice, investigation or *medical treatment*, *you* have been *hospitalized*, *you* have been prescribed (including prescribed as needed) or have taken medication, or *you* have undergone a medical surgical procedure.

Reasonable and Customary Costs mean costs that are incurred for approved, eligible medical services or supplies and that do not exceed the standard fee of other providers of similar standing in the same geographical area, for the same treatment of a similar sickness or injury.

Sickness means a disease or disorder of the body which results in loss while this coverage is in effect. The sickness must be sufficiently serious to prompt a reasonably prudent person to consult a *physician* for the purpose of *medical treatment*.

Spouse means *your* legally married spouse or a person with whom *you* have been cohabitating in a common-law relationship for at least 12 consecutive months prior to the date of application.

Stable means the pre-existing medical condition is not worsening and there has been no alteration* in any medication for the pre-existing medical condition or its usage or dosage, nor any medical treatment received or prescribed or recommended by a physician, including referral to a specialist, during the period specified for the plan for which you qualify prior to the effective date of the policy.

Any medical condition for which you are awaiting test results or diagnosis is not considered stable. *Alteration includes a new medication, stopped medication, increase or decrease in medication, but does NOT include changes between brand-name and generic versions of drugs with the same active ingredient and dosage, or routine adjustments of maintenance medications such as insulin or asthma medication.

Terrorism means any ideologically motivated unlawful act or acts, including but not limited to the use of violence or force or threat of violence or force, committed by or on behalf of any groups(s), organization(s) or government(s) for the purpose of influencing any government and/or instilling fear in the public or a section of the public.

Travel Companion means someone who sharestravel arrangements with *you up* to a maximum of 3 people. **Trip** means a journey undertaken by *you* which commences when *you* depart *your* province or territory of residence and ends when *you* return to *your* province or territory of residence.

Vehicle means a private passenger automobile, pick-up truck, minivan, motorhome, camper van or motorcycle which is owned orrented by you/from a commercial rental agency for your use during your trip. Watercraft means a vessel for use on the water for your personal transportation. You, Your, Yourself means the insured person.

Section III Insurance Agreement -

A. The Contract

Coverage is provided only for the benefits purchased by you as shown on your confirmation of insurance.

For all plans, if your covered expense results from an act of terrorism all benefit maximums shown in this policy may be reduced subject to the Terrorism Coverage benefit.

- 1. Emergency Hospital & Medical provides coverage for the benefits listed under Emergency Hospital & Medical up to \$10,000,000 for reasonable and customary costs incurred by you, for medically necessary treatment due to a covered emergency occurring while you are travelling outside your province or territory of residence until the initial emergency is resolved and the condition stabilized. Subject to all terms and conditions of this policy benefits are payable to a maximum of the sum insured provided that they are medically necessary.
- Trip Cancellation provides coverage for the benefits listed under Trip Cancellation up to the sum insured, for prior to departure benefits and for reasonable and customary costs for after departure benefits.
- 3. All Inclusive provides coverage for all benefits of Emergency Hospital & Medical, Trip

Cancellation, Baggage, A.D.& D. and Flight Accident.

- 4. Accidental Death & Dismemberment provides coverage for the benefits listed under Accidental Death & Dismemberment resulting directly from accidental injury occurring during the coverage period.
- 5. Flight Accident provides coverage for the benefits listed under Flight Accident resulting directly from accidental injury occurring during the coverage period while the insured is travelling on, boarding or alighting from a regularly scheduled flight or charter flight.
- 6. Benefit limits are per *insured person* per *trip* including any Top Up or extension.
- 7. The insurerreserves the right to decline any application or any request for an extension of coverage.
- 8. Only one policy can be issued to you and all premiums paid for any additional policy will be returned to you. When more than one policy of this form is issued by the Insurer and is in force with respect to you at the time of claim, only one such policy, the earliest by effective date, will apply.
- B. Waiting Period If you purchase your policy after you have departed your province or

territory of residence, there is no coverage for any *sickness* that began or for which *you* experienced symptoms during the first 48 hours after the effective date even if related expenses are incurred after the 48-hour waiting period.

- C. Automatic Extension of Coverage Upon notifying Ontime Care, coverage will be extended automatically, without additional premium, if your stay is prolonged beyond the period for which insurance has been purchased due to the following reasons:
 - a) you are hospitalized due to a covered emergency on the expiry date indicated on your confirmation of insurance. Your coverage will remain in force as long as you are hospitalized and will extend a further 5 days upon release from hospital, to a maximum of 365 days.
 - b) Up to 72 hours if:
 - i. you are delayed due to a late train, boat, bus, plane, or other vehicle in which you are a
 passenger causes you to miss your scheduled return to your country of origin, including
 by reason of inclement weather;
 - ii. the vehicle in which you are travelling is involved in a traffic accident or mechanical breakdown that prevents you from returning to your country of origin;
 - iii. you must delay your scheduled return to your country of origin because you are not deemed medically stable to travel by Ontime Care.
- Note: All claims incurred after the expiry date of your insurance policy must be supported by documented proof of the event resulting in your delayed return. This benefit does not include costs associated with flight change.
- D. Optional Extensions Coverage under this policy can be extended provided that:
 - a) a claim has not been made under this policy; and
 - b) you have not experienced changes in your health since your effective date or departure date; and
 - c) you remain eligible for insurance; and
 - d) the request for the extension is received prior to the expiry date of your coverage; and
 - e) the required premium is paid.

Note: The minimum premium is \$25 per extension. The cost of additional days of insurance will be calculated based on the age of the *insured* on the effective date of the extension and using the rate schedule in effect at the time the extension is requested.

E. Premium Payment - The full premium is due and payable at the time of application and will

Section IV Emergency Hospital & Medical ELIGIBILITY

To be eligible for Emergency Hospital & Medical coverage, on the effective date the applicant must:

- applicant must:

 a) be at least 15 days old and not more than 84 years old; and
 b) be insured under a *government health insurance plan* for the entire duration of *your trip:* and
- be in good health at the time you purchase your policy and on the date you exit your country of origin, and know of no reason to seek medical consultation during the coverage period.

On the effective date, applicants 60 years of age or over must not:

- d) have used, or been prescribed, home oxygen during the 12 months prior to the effective date; and
- e) be travelling against the advice of a physician and/or have been diagnosed with a terminal illness, and
- f) have kidney disease treated with dialysis; and
- g) have been diagnosed with stage III or IV cancer or cancer that has metastasized.

Note: Applicants between 60 and 76 years of age travelling for more than 60 days or over age 76 travelling for any *trip* length must complete a medical questionnaire.

COVERAGE PERIOD

Effective Date of Coverage

Coverage begins on the latest of:

- a) the date and time you apply for and pay for this insurance; or
- b) the date and time you depart from your province or territory of residence; or
 12:01 a.m. (local time) on the effective date as shown on your confirmation of insurance.
- **Expiry Date of Coverage**

Coverage ends on the earliest of:

- a) 11:59 p.m. (local time) on the expiry date shown on *your* confirmation of insurance; or
- b) the date and time you return to your province or territory of residence; or
- c) the date you reach the maximum duration outside of Canada for a multi-trip plan.

BENEFITS 1. Hospital Accommodation:

- a) Reasonable and customary costs up to the semi-private room rate or coronary care or intensive care unit where medically necessary. In the event that you are hospitalized at the time that coverage terminates benefits will continue until discharge, to a maximum of one year. In no case will expenses for in-patient stays be covered for a period greater than 365 days per insured person.
- b) Treatments on an outpatient basis in a hospital.
- Physician Charges: Medical treatment by a physician, surgeon, anaesthetist or registered graduate nurse (other than an immediate family member).
- Diagnostic Services: Laboratory tests and X-rays prescribed by the attending physician due to an emergency.
 - **Note:** This policy does not cover magnetic resonance imaging (MRI), cardiac catheterization, computerized axial tomography (CAT) scans, digital x-rays, sonograms, ultrasounds or biopsies unless such services are approved in advance by *Ontime Care*.
- 4. Prescription Drugs: Limited to a 30-day supply per prescription, unless you are hospitalized, drugs, for serums and injectables that can only be obtained upon medical prescription, that are prescribed by a physician and that are supplied by a licensed pharmacist when required as a result of an emergency. This benefit does not cover drugs, serums and injectables necessary for the continued stabilization of a chronic medical condition, except in case of emergency.
- **Note:** 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*.
- 5. Prescription Replacement: When approved in advance by Ontime Care the cost of one visit to a physician to obtain a written prescription and up to \$250 for the cost to replace prescription medication, if your prescription medication is lost, stolen or damaged during the trip and its replacement cannot be delayed until you return to your province or territory of residence in Canada.
- 6. Private Duty Nursing: The professional services of a registered private nurse (other than by an immediate family member) as the result of a covered emergency, when medically necessary while hospitalized, when ordered by the attending physician and approved in advance by Ontime Care.

be determined according to the rate schedule in effect at the time of application and the *insured*'s age as of the effective date. Premium rates, policy terms and conditions are subject to change without prior notice. A minimum premium of \$25 applies. If the premium paid is insufficient for the coverage period selected, the *Administrator Company* will:

- a) charge and collect any underpayment; or
- b) shorten the policy period 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.

- F. Family Coverage Your policy provides coverage for you and your spouse, both age 59 or under, and your child(ren) named on the application to a maximum of 6 people. if:

 a) coverage dates are the same for all family members;
 - all family members are travelling to the same destination; and
 - the premium for family coverage is paid prior to the effective date of the policy, as shown on the application or confirmation of insurance.

G. Premium Refunds

- If cancellation of your Emergency Hospital & Medical, Accidental Death & Dismemberment or Flight Accident policy is requested prior to the effective date of your policy, the full premium may be refunded.
- 2. A refund for the unused portion of the premium for your Emergency Hospital & Medical single trip plan, may be granted if you return to your province or territory of residence prior to your scheduled return date.
- A request for a premium refund after the effective date will be considered only if no claim has been paid or is pending, subject to a \$25 administrative fee.

Note: Requests for refunds must be made in writing to your broker or sales agent with satisfactory proof (e.g. airline ticket or customs/immigration stamp) of your actual return date to your province or territory of residence. Otherwise calculation of such refunds will be based on the postmarked date of your written request. No refund will be issued if the amount of premium to be reimbursed is less than \$10 per policy.

There are no premium refunds for All Inclusive or Trip Cancellation and Trip Interruption policies.

- Paramedical Services: When prescribed by a physician and approved by Ontime Care, treatment provided by a licenced chiropodist, chiropractor, osteopath, physiotherapist or podiatrist up to a maximum of \$500.
- Medical Appliances: When prescribed by a physician and approved in advance by Ontime Care, minor appliances such as casts, splints, canes, slings, trusses, braces, crutches and/or rental of a wheelchair.
- Emergency Transportation: Licenced ambulance services (includes \$100 taxi fare in lieu of ambulance) to the nearest medical facility capable of providing the required emergency medical treatment;
 - a) Transportation between hospitals when ordered by the attending physician for emergency medical treatment;
 - b) If, as the result of a covered emergency, your treating physician or Ontime Care's Medical Team recommends that you be returned to Canada, the costs incurred for:
 - i. one-way economy airfare on a commercial flight via the most direct route, including the cost for additional seats to accommodate a stretcher;
 - ii. return economy airfare via the most direct route for a qualified medical attendant to accompany you if required by the airline or if your attending physician states in writing that it is medically necessary;
 - iii. air ambulance if medically necessary
 - only when approved and arranged by Ontime Care.

Ground transportation is limited to \$10,000 and air transportation is limited to \$250,000.

- 10. Treatment of Dental Accident: Emergency dental treatment to repair or replace sound natural teeth (capped or crowned teeth are considered natural teeth) as the result of an accidental injury that requires treatment within 30 days of the date of the accident by a legally qualified dentist or oral surgeon not to exceed \$4,000 per accident.
- 11. Emergency Relief of Dental Pain: Emergency treatment for the relief of acute pain to natural teeth, excluding fillings and repairs to dentures or other dental devices, to a maximum of \$600 during the coverage period. Treatment must be initiated within 48 hours from the time the emergency began and completed no later than 90 days after treatment has begun.
- 12. Out of Pocket Expenses: When approved in advance by Ontime Care up to \$150 per day to a maximum of \$4,000 for your commercial accommodation, meals, essential telephone calls, internet fees, including while hospitalized, bus or taxi fare, or rental car in lieu, and child care costs for your dependents up to age 18 (excluding childcare provided by an immediate family member) if
 - a) you or your travel companion are hospitalized on the date you are scheduled to return to your province or territory of residence in Canada; or
 - b) you or your travel companion are transferred to a different hospital in another city for emergency medical treatment.

The fact that an *insured person* is unable to travel must be certified by the attending *physician* and claims must be supported with original receipts from commercial organizations.

- 13. Transportation to Bedside: When approved in advance by Ontime Care up to a maximum of \$3,000 for single round-trip economy airfare plus up to \$150 per day to a maximum of \$1,000 for the cost of meals and commercial accommodation for one person of your choice to:
 - a) be with you if you are hospitalized as the result of a covered emergency and the attending physician provides written certification that the situation was serious enough to warrant the visit; or
 - b) identify the deceased insured person prior to the release of the body, where necessary.
- 14. Return of Travel Companion: When approved in advance by the Assistance Company up to single one-way economy airfare to return a travel companion to Canada if you are returned to Canada under the Emergency Transportation benefit or the Repatriation of Remains benefit.
- 15. Preparation and Return of Remains: In the event of death, up to a maximum of \$5,000 towards the actual cost incurred for preparation of remains and homeward transportation of the deceased insured person to his/her permanent residence in Canada; or up to a maximum of \$5,000 for cremation and/or burial at the place of death of the insured person when approved by Ontime Care. The cost of the casket or um is not covered by this benefit.
- 16. Vehicle or Watercraft Return: When approved and arranged in advance by Ontime Care up to \$4,000 for the cost of returning your vehicle or watercraft used for your trip to your residence in Canada or to the nearest commercial rental agency if you were travelling within continental North America, or to the nearest commercial rental agency if you were travelling

- outside continental North America, in the event that you are unable to return the vehicle or watercraft to its point of origin due to a covered emergency.
- 17. Pet Return: When approved and arranged in advance by Ontime Care, up to \$500 for the cost of returning your accompanying dog or cat to Canada if you are returned to Canada under the Emergency Transportation or Return of Remains benefit, or if you are hospitalized due to a covered sickness or injury.
- 18. Excess Baggage Return: When approved and arranged in advance by Ontime Care, up to \$500 for the cost of returning your excess baggage to the departure point in the event that you are returned to Canada under the Emergency Transportation benefit.
- 19. Return to Original Trip Destination: If you are returned to your province or territory of residence under the Emergency Transportation benefit, and the attending physician determines that the treatment received in Canada resolved the emergency, the insurer agrees to reimburse up to a maximum of \$5,000 for a one-way economy flight to return you and one insured travel companion to the original trip destination.

The return must occur during the original trip period.

A subsequent recurrence or complication of the condition that resulted in *you* being returned home is excluded under this policy.

EXCLUSIONS

Emergency Hospital and Medical does not cover losses or expenses caused directly or indirectly, in whole or in part, by:

- 1. Any sickness, injury or medical condition (other than a minor ailment) that was not stable:
- In the 90 days prior to the effective date if:
 - you are less than 60 years of age; or
 - you are between 60 and 74 years of age travelling for no more than 60 days; or
- c. you qualify to Rate Category 1 or 2.

 In the **180 days** prior to the effective date if you qualify for Rate Category 3 or 4; or
- In the 365 days prior to the effective date if you qualify for Rate Category 5 or 6.
- 2. Any heart condition if you have used nitroglycerine in any form for a heart condition during the 90 days prior to the effective date.
- Any lung/respiratory condition if you have an active prescription for or used home oxygen or prednisone for a lung/respiratory condition during the 90 days prior to the effective date.
- Expenses related to a sickness or injury that would have caused an ordinarily prudent person to seek medical treatment, advice, diagnosis or care during the 90 days prior to the effective date.
- Any medical treatment that is not emergency medical treatment for the immediate relief of acute pain and suffering including cosmetic, elective or non-emergency medical treatment including any medical treatment of an ongoing condition, regular care of a chronic condition, home health care, investigative testing, rehabilitation or convalescent or ongoing care or that could reasonably be postponed until you return to your province or
- 6. For policy extensions or Top Ups any medical condition which first appeared, was diagnosed or treated after the scheduled departure date and prior to the effective date of the insurance extension or Top Up.
- 7. Any medical treatment or investigative testing of any medical condition for which you have received emergency medical treatment during your trip after the initial emergency has ended as determined by the medical team at Ontime Care.

Trip Cancellation and Interruption Section V

To be eligible for Trip Cancellation coverage, the applicant must:

- a) be at least 15 days of age and less than 84 years of age; and
- b) be scheduled on a trip to, from or within Canada; and
- purchase coverage for the full value of the non-refundable, pre-paid travel arrangements: and
- if purchasing this coverage at the time of, or after the initial trip payment, or after cancellation penalties are applicable, be in good health, and know of no reason to: i. seek medical attention: or
- ii. cancel the trip; or
- iii. make any claim.

COVERAGE PERIOD

Effective Date of Coverage

Coverage begins on the date and time you apply for and pay for this insurance.

Expiry Date of Coverage

Coverage ends on the earliest of:

- a) the date and time of the cause of the cancellation of your trip; or
- 11:59 p.m. (local time) on the expiry date shown on your confirmation of insurance; or
- the date and time you return to your province or territory of residence; or
- d) the date you reach the maximum duration outside of Canada for a multi-trip plan.

Trip Cancellation (Prior to Departure)

If you are unable to travel due to an insured risk listed below that occurs before your scheduled departure date, the insurer will pay up to the sum insured for one of the following:

- The prepaid unused portion of your airfare and other travel arrangements that is nonrefundable and non-transferable to another travel date.
- The penalty fee charged for the reinstatement of unused travel points.
- The cost of the next occupancy charge if your travel companion must cancel their trip due to an insured risk applicable to them, and you decide to go on your trip as planned.
- The change fee charged by your travel supplier.
- The cost to join your trip in progress if you are eligible to cancel, but choose to go on your trip, provided this cost is less than the cost of cancellation.

Cancel for Any Reason (Prior to Departure)

If Cancel for Any Reason is purchased and shown on your confirmation of insurance, and you cancel your trip for a reason other than an insured risk, the insurer will pay:

- up to 75% of the sum insured if you cancel 14 days or more prior to your scheduled departure date; or
- up to 75% of the sum insured to a maximum of \$500 if you cancel less than 14 days but more than 48 hours prior to your scheduled departure date.

No benefits are payable if you cancel your trip less than 48 hours prior to your scheduled departure date for any reason other than an insured risk.

- 8. Any costs incurred due to your travelling against the advice of a physician or any loss resulting from your sickness or medical condition that was diagnosed by a physician as a terminal illness prior to the effective date.
- Non-compliance with any prescribed medical therapy treatment (as determined by Ontime Care) or failure to carry out a physician's instructions.
- 10. Expenses for any benefit or medical treatment that requires prior approval by the Assistance Company if such approval was not provided, except in extreme circumstances where such medical treatment is performed on an emergency basis immediately upon admission to hospital.
- 11. Transplants including, but not limited to, cornea or organ transplants or bone marrow transplants, artificial joints, prosthetic devices or implants including any associated charges. Implants required to stabilize an emergency medical condition may be covered if pre-approved by Ontime Care.
- 12.Loss or damage to hearing devices, eyeglasses, sunglasses, contact lenses, or prosthetic teeth, limbs or devices and resulting prescription thereof.
- 13. An insured person's suicide, attempted suicide or self-inflicted injury.
- 14. Committing or attempting to commit an illegal act or a criminal act by an *insured person*.

 15.A disorder, disease, condition or symptom that is emotional, psychological or mental in nature unless the insured person is hospitalized.
- 16. Any loss, sickness, injury or death related to the misuse, abuse, overdose or chemical dependence on medication, drugs, alcohol or other intoxicant.
- 17. Expenses incurred as a result of symptomatic or asymptomatic HIV infection or HIV-related conditions and AIDS (acquired immune deficiency syndrome), including any associated diagnostic tests or charges.
- 18. Treatment or surgery during a trip when the trip is undertaken for the purpose of securing or with the intent of receiving medical or hospital services, whether or not such trip is taken on the advice of a physician or surgeon.
- 19. Routine pre-natal care; your pregnancy or childbirth or complications thereof when they happen in the 9 weeks before or after the expected date of delivery; your child born during your trip.

20. Participation in:

- any sports as a professional athlete (person who engages in an activity as one's main paid occupation);
- any competitive motorized sporting events, racing or speed contests;
- scuba diving (unless you hold a basic SCUBA designation from a Canadian certified school), hang-gliding, rock climbing, paragliding, skydiving, parachuting, bungee iumping, mountaineering,
- 21. Travel to, from or through any country, region or city for which, prior to your departure date, any department of the Canadian Government has issued a warning to avoid all travel or to avoid non-essential travel if the loss is the result of the reason for which the warning was issued.
- 22. Any risk from: war or act of war, whether declared or undeclared; invasion or act of a foreign enemy; declared or undeclared hostilities; civil war; terrorism, riot; rebellion; revolution or insurrection; or military power. Limited coverage applies with respect to an act of terrorism. See Terrorism Coverage.
- 23. Contamination resulting from radioactive material or nuclear fuel or waste or the release of weapon(s) of mass destruction (nuclear, chemical or biological).
- 24. Flight accident (unless you are travelling as a fare paying passenger on a commercial airline).
- 25. Service in, or training for, the armed forces, national guard or organized reserve corps of any country or international authority.

Trip Interruption (After Departure)

If your trip is interrupted due to an insured risk listed below that occurs on or after the day of your scheduled departure date, benefits are payable for:

- The lesser of one-way economy airfare via the most cost effective route or the change fee charged by the airline:
- a) to return to your point of departure; or
- to continue to your trip at its next destination.
- The prepaid unused portion of your airfare and other travel arrangements purchased prior to the effective date that is non-refundable and non-transferable to another travel date, excluding the cost of the original transportation and prepaid unused transportation home.
- Missed Connection. If the delay of a common carrier or automobile due to weather conditions, volcanic eruption, natural disaster, traffic accident, emergency road closure (police report required), strike or lockout of 24 hours or more, or the common carrier's mechanical failure, grounding, or schedule change causes you to miss your connection, and provided the original time between connections was not less than then greater of the recommended check-in time or 2 hours, the insurer will pay:
- The extra cost of economy transportation to the ticketed destination;
- The prepaid, unusable portion of your insured travel arrangements purchased prior to the effective date;
- Additional and unplanned hotel and meal expenses, essential phone calls, internet usage and taxi fares up to \$200 per day to a maximum of \$1,000 while awaiting replacement travel arrangements.

This benefit can be claimed only once during the coverage period.

Additional Benefits (Prior to or After Departure)

If your trip is cancelled or interrupted due to an insured risk listed below, the insurer will pay expenses you actually incur for:

- Additional and unplanned hotel and meal expenses, essential phone calls, internet usage and taxi fares up to \$300 per day to a maximum of \$1,000 when no earlier transportation arrangements are available.
- Prepaid, unused, non-refundable excursion or special event tickets up to \$100 each to a maximum of \$500.
- Additional animal boarding fees at a licensed shelter if your return is delayed more than 24 hours up to a maximum of \$100.

INSURED RISKS

Medical

- Sickness, injury, death or quarantine of you, a travel companion, an immediate family member, a travel companion's immediate family member or a caregiver.
- Death or emergency hospitalization of a business partner or a close friend occurring within 10 days of your scheduled departure date or during the covered trip.
- 3. Death or emergency hospitalization of your host at your trip destination.

Pregnancy and Adoption

- Pregnancy of you, your spouse, your travel companion or your travel companion's spouse which was confirmed after this insurance was purchased and after you booked your trip and your scheduled departure date falls in the 9 weeks before or after the expected delivery date.
- Complications of a pregnancy arising in the first 31 weeks of a pregnancy of you, your spouse, your travel companion or your travel companion's spouse
- Legal adoption of a child by you or your travel companion and the notice of custody is received after this insurance was purchased and after you booked your trip and the date of custody is scheduled in the 9 weeks before or after your scheduled departure date.

Delays, Cancellations and Schedule Changes

- A delay that causes you to miss or interrupt any part of your trip when the private or rented vehicle which you are driving or in which you are a passenger or a common carrier or a prepaid connecting flight aboard which you are a passenger, is delayed due to weather, a mechanical failure, an emergency road closure by the police or an accident, provided that the vehicle, common carrier or connecting flight was scheduled to arrive at the departure or return point at least 2 hours (or the required minimum arrival reporting time, whichever is the greater) in advance of the scheduled time of departure or return
- Loss or theft of your passport, travel documents or money that causes you to miss a connection or results in the interruption of your travel arrangements.
- The schedule change or cancellation by the airline carrier that is providing transportation for a portion of your trip causing you to miss a connection or interrupt your travel arrangements.
- 10. Complete cancellation of a cruise or tour and travel package (other than by supplier default) within 30 days of the scheduled departure by the cruise line or tour operator.
- Cancellation of a business meeting or conference that was the main purpose of your trip, for reasons beyond your control, after this insurance was purchased and after you booked your trip.
- 12. Adverse weather conditions, earthquakes or volcanic eruptions for a period of at least 30% of the total duration of the covered trip when you or your travel companion choose not to continue with the trip prior to departure.
- 13. A travel advisory issued by the Canadian Government after this insurance was purchased and after you booked your trip, warning Canadian residents to avoid all travel or non-essential travel to a specific region or country that is part of your trip.
- 14. Failure of you or your travel companion to obtain a travel visa (excluding an immigration, student or employment visa) for reasons beyond vour/their control.

Employment

- 15. The relocation of your or your travel companion's principal residence due to a job transfer by the employer with whom you, your spouse, your travel companion or your travel companion's spouse are employed at the time of purchase of this insurance or the booking of the trip. (Not applicable to cases of self-employment or temporary contract work).
- 16. Involuntary loss of permanent employment without just cause by you, your spouse, your travel companion or your travel companion's spouse provided that, at the time you purchased this insurance or booked the trip, they have been employed by the same employer for at least one year and were not aware of the imminent loss of permanent employment. (Not applicable to cases of self-employment or temporary contract work).

Other

- An unforeseen event beyond your control that renders your or your travel companion's principal residence uninhabitable or your or your travel companion's place of business inoperative.
- 18. You, your spouse, your travel companion or your travel companion's spouse are the victim of a hijacking during your trip.
- You or your spouse are called to service as a reservist, fire-fighter, military or 19. police staff during your trip.
- You or your spouse are called to jury duty, to be a defendant in a civil suit, or 20. are subpoenaed to be a witness during your trip.

EXCLUSIONS

Trip Cancellation and Interruption does not cover losses or expenses related in whole or in part, directly or indirectly, to any of the following:

1. Any sickness, injury or medical condition (other than a minor ailment) that was not stable in the 90 days prior to the effective date.

2. Any sickness or injury that would have caused an ordinarily prudent person to seek medical treatment, advice, diagnosis or care during the 90 days prior to the effective date.

- An event which, prior to when this insurance was purchased and/or prior to when you booked your trip, you or your travel companion knew, or it was reasonable to expect, may prevent you from going on or completing your trip as booked.
- A trip undertaken for the purpose of visiting a sick or injured person and their medical condition or death is the reason for the cancellation or interruption.
- Any costs incurred due to your travelling against the advice of a physician or any loss resulting from your sickness or medical condition that was diagnosed by a physician as terminal prior to the effective date.
- Non-compliance with any prescribed medical therapy or treatment.
- A trip undertaken to obtain medical treatment whether or not recommended by your attending physician.
- Routine pre-natal care; your pregnancy or childbirth or complications thereof when they happen in the 9 weeks before or after the expected date of delivery; a child born during your trip.
- A return earlier or later than the scheduled date of return, unless recommended by your attending physician.
- 10. A return delayed more than 10 days beyond the scheduled date of return, unless you, an immediate family member or your travel companion were hospitalized for at least 48 consecutive hours within the 10-day period.
- For policy extensions or Top Ups any medical condition which first appeared, was diagnosed or treated after the scheduled departure date and prior to the effective date of the insurance extension or Top Up.
- Any medical treatment that is not emergency medical treatment for the immediate relief of acute pain and suffering, including any elective or cosmetic surgery or treatment.
- Loss, death or injury, if at the time of the loss, death or injury, evidence supports that you were affected by, or the medical condition causing the loss was in any way contributed to by, the use of alcohol, prohibited drugs, or any other intoxicant.
- 14. A disorder, disease, condition or symptom that is emotional, psychological or mental in nature unless you are hospitalized.
- 15. An insured person's suicide, attempted suicide or self-inflicted injury,
- 16. Committing or attempting to commit an illegal act or a criminal act by an insured person.
- 17. Rock or mountain climbing, hang gliding, parachuting, bungee jumping, or skydiving; participation in any motorized race or speed contest; participation in any sport as a professional athlete (for which the *insured person* is remunerated); scuba diving (except if certified by an internationally recognized and accepted program such as NAUI or PADI, or if diving depth does not exceed 30 metres).
- 18. A travel visa that is not issued because of its late application.
- Failure, default or bankruptcy of any travel supplier which you contract for services. No protection is provided for failure, default or bankruptcy of any travel agent, agency or broker.
- 20. Travel to, from or through any country, region or city for which, prior to your departure date, the Canadian Government, or any department thereof, has issued a warning to avoid all travel or to avoid non-essential travel during the time of your trip if the loss is the result of the reason for which the warning was issued.
- War, invasion, act of a foreign enemy, declared or undeclared hostilities, civil war, riot, rebellion, revolution or military power or your unlawful visit in any country.
- 22. Terrorism or by any activity or decision of a government agency or any other entity to prevent, respond to or terminate terrorism except for ensuing loss or damage which results directly from fire or explosion. Such loss or damage is excluded regardless of any other cause or event that contributes concurrently or in any sequence to the loss or damage. Limited coverage applies with respect to an act of terrorism. See Terrorism Coverage. Contamination resulting from radioactive material or nuclear fuel or waste or the release of
- weapon(s) of mass destruction (nuclear, chemical or biological).
- Service in, or training for, the armed forces, national guard or organized reserve corps of any country or international authority other than as provided in Insured Risk #19.

Section VI Baggage

When an insured person incurs eligible expenses as described in this section as a result of direct physical loss of, or damage to, baggage and personal effects you own and use during your trip, the insurer will reimburse costs up to \$1,000 CAD per trip to a maximum of \$4,000 CAD for the period from the effective date to the expiry date, subject to all policy limitations, exclusions and provisions.

To be eligible for Baggage coverage, the applicant, on the effective date, must be:

- A Canadian resident; and
- 2. at least 15 days of age and less than 84 years of age.

COVERAGE PERÍOD

Effective Date of Coverage

Coverage begins on the latest of:

- d) the date and time you apply for and pay for this insurance; or
- e) the date and time you depart from your province or territory of residence; or
- 12:01 a.m. (local time) on the effective date as shown on your confirmation of insurance.

Expiry Date of Coverage

Coverage ends on the earlier of:

- d) 11:59 p.m. (local time) on the expiry date shown on your confirmation of insurance; or
- the date and time you return to your province or territory of residence; or e)
- the date you reach the maximum duration outside of Canada for a multi-trip plan.

BENEFITS

- 1. Personal Effects: Up to \$500, or the actual cash value, whichever is less, to repair or replace any item or set of items which is lost or damaged during your trip. Jewellery, cameras (including camera equipment), or sports equipment are respectively considered a single item.
- Document Replacement: Up to \$200 for the replacement of any of the following: passport, driver's licence, birth certificate or travel visa in the event of loss or theft.
- Personal Currency: Up to \$100 for the loss of personal currency caused by robbery or theft and supported by a police report.
- Baggage Delay: Up to \$400 to purchase necessary toiletries and personal effects in the event that your checked baggage is delayed by the common carrier for more than 12 hours while en route and before returning to your point of

- departure. To file a claim, you must supply proof of delay of checked baggage from the common carrier and original purchase receipts.
- Wheelchair: Up to \$100 for repairs or rental replacement of the insured's wheelchair in the event the wheelchair is rendered inoperable due to damage resulting from normal usage.
- Injury of Accompanying Dog or Cat: Up to \$500 for emergency care due to unexpected injury of an accompanying dog or cat.

EXCLUSIONS

Baggage does not cover losses or expenses related in whole or in part, directly or indirectly, to any of the following:

- Property illegally acquired, kept, stored or transported.
- The purchase or replacement cost (prescribed or not) for loss or damage to hearing devices, eyeglasses, sunglasses, contact lenses or prosthetic teeth, limbs or devices and resulting prescription therefrom.
- Loss or damage resulting from moths, vermin, deterioration or wear and tear.
- Loss or damage caused by any imprudent action or omission by the insured person.
- Loss or damage by theft from an unattended vehicle unless it was locked and there was visible evidence of forced entry.
- 6. Belongings insured under another insurance policy.
- Jewellery, cameras, camera equipment and sports equipment while held by a
- Money and currency (except as provided under Personal Currency), credit cards, securities, tickets, documents, items pertaining to business, paintings, statuary, china, breakage of fragile articles, glass objects, or art objects
- 9. Committing or attempting to commit an illegal act or a criminal act.
- 10. Animals (except as specifically provided for dog or cat).
- 11. War, invasion, act of a foreign enemy, declared or undeclared hostilities, civil war, riot,
- rebellion, revolution or military power or *your* unlawful visit in any country.

 12.Contamination resulting from radioactive material or nuclear fuel or waste or the release of weapon(s) of mass destruction (nuclear, chemical or biological).

Section VII Accidental Death & Dismemberment

The *insurer* will pay up to the maximum sum insured shown on *your* confirmation of insurance for loss of life, limb or sight of *an insured person* resulting directly from *accidental injury* occurring during the coverage period if the loss occurs within 365 days after the date of the Accident causing the loss subject to all policy limitations, exclusions and provisions.

The total aggregate limit for all Accidental Death & Dismemberment losses resulting from any one incident under all policies underwritten by the *insurer* is \$10,000,000 CAD.

ELIGIBILITY

To be eligible for Accidental Death & Dismemberment coverage, the applicant, on the effective date, must be:

- a) be at least 15 days old and not more than 84 years old; and
- b) be insured under a government health insurance plan; and
- c) be travelling on a trip to, from or within Canada.

COVERAGE PERIOD

Effective Date of Coverage

Coverage begins on the latest of:

- a) the date and time you apply for and pay for this insurance; or
- b) the date and time you depart from your province or territory of residence; or
- c) 12:01 a.m. (local time) on the effective date as shown on your confirmation of insurance.

Expiry Date of Coverage

Coverage ends on the earlier of:

- a) 11:59 p.m. (local time) on the expiry date shown on your confirmation of insurance; or
- b) the date and time you return to your province or territory of residence; or
- c) the date you reach the maximum duration outside of Canada for a multi-trip plan.

BENEFITS

Benefits are payable according to the following schedule:

- 1. 100% of sum insured resulting from the same accidental injury for loss of:
 - a) life: or
 - b) entire sight of both eyes; or
 - c) both hands; or
 - d) both feet: or
 - e) one hand and entire sight of one eye; or
 - f) one foot and entire sight of one eye.
- 2. 50% of sum insured resulting from the same accidental injury for loss of:
 - a) entire sight of one eye; or
 - b) one hand; or
 - c) one foot.

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

Loss of eye or eyes means total and irrecoverable loss of the entire sight. Only one amount is payable (the largest) if you suffer more than one of these losses.

Section VIII Flight Accident

The insurer will pay up to the maximum sum insured shown on your confirmation of insurance for loss of life, limb or sight of an insured person resulting directly from accidental injury occurring during the coverage period that occurs when an insured person is travelling on, boarding or alighting from a regularly scheduled flight or charter flight if the loss occurs within 365 days after the date of the accident causing the loss subject to all policy limitations, exclusions and provisions.

The total aggregate limit for all Flight Accident losses resulting from any one incident under all policies underwritten by the *insurer* is \$10,000,000 CAD.

ELIGIBILITY

To be eligible for Flight Accident coverage, the applicant, on the effective date, must be:

- a) be at least 15 days old and not more than 84 years old; and
- b) be insured under a government health insurance plan for the entire duration of your trip; and
- c) be travelling on a trip to, from or within Canada.

Effective Date of Coverage

Coverage begins on the latest of:

- d) the date and time you apply for and pay for this insurance; or
- e) the date and time you board a flight to depart your province or territory of residence; or
- f) 12:01 a.m. (local time) on the effective date as shown on your confirmation of insurance.

Expiry Date of Coverage

Coverage ends on the earlier of:

- g) 11:59 p.m. (local time) on the expiry date shown on your confirmation of insurance; or
- h) the date and time you return to your province or territory of residence; or
- i) the date you reach the maximum duration outside of Canada for a multi-trip plan.

BENEFITS

Benefits are payable according to the following schedule:

- 1. 100% of sum insured resulting from the same accidental injury for loss of:
 - a) life; or
 - b) entire sight of both eyes; or
 - c) both hands; or
 - d) both feet; or
 - e) one hand and entire sight of one eye; or
- f) one foot and entire sight of one eye.
- 2. 50% of sum insured resulting from the same accidental *injury* for loss of:
 - d) entire sight of one eye; or
 - e) one hand; or
 - f) one foot.

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

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

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

Section IX Terrorism Coverage

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

- a) As a result of any one or a series of acts of terrorism occurring within a 72-hour period, the aggregate limit payable shall be limited to \$2,500,000 for all eligible insurance policies issued and administered by the *insurer*, including this policy.
- by the instance, instance that the policy.
 As a result of any one or a series of acts of terrorism occurring in any calendar year, the aggregate limit payable shall be limited to \$5,000,000 for all eligible policies issued and administered by the insurer including this policy.

Exposure and Disappearance

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

- a) as a result of such exposure, you suffer one of the losses specified in the schedule of losses above; or
- b) your body has not been found within 52 weeks from the date of the accident. It will be
 presumed, subject to evidence to the contrary, that you suffered loss of life.

EXCLUSIONS

Accidental Death & Dismemberment does not cover losses or expenses related in whole or in part, directly or indirectly, to any of the following:

- Rock or mountain climbing, hang gliding, parachuting, bungee jumping, or skydiving; participation in any motorized race or speed contest; participation in any sport as a professional athlete (for which the insured person is remunerated); scuba diving (except if certified by internationally recognized and accepted program such as NAUI or PADI, or if diving depth does not exceed 30 metres).
- Death or injury sustained while operating or learning to operate or travelling on, boarding or alighting any aircraft.
- 3. An insured person's suicide, attempted suicide or self-inflicted injury.
- 4. Committing or attempting to commit an illegal act or a criminal act by an *insured person*.
- Loss, death or injury, if at the time of the loss, death or injury, evidence supports that you were affected by, or the medical condition causing the loss was in any way contributed to by the use of alcohol, prohibited drugs, or any other intoxicant.
- 6. Non-compliance with any prescribed medical therapy or treatment
- 7. Travel to, from or through any country, region or city for which, prior to your departure date, the Canadian Government, or any department thereof, has issued a warning to avoid all travel or to avoid non-essential travel during the time of your trip if the loss is the result of the reason for which the warning was issued.
- War, invasion, act of a foreign enemy, declared or undeclared hostilities, civil war, riot, rebellion, revolution or military power or your unlawful visit in any country.
- 9. Terrorism or by any activity or decision of a government agency or any other entity to prevent, respond to or terminate terrorism except for ensuing loss or damage which results directly from fire or explosion. Such loss or damage is excluded regardless of any other cause or event that contributes concurrently or in any sequence to the loss or damage. Limited coverage applies with respect to an act of terrorism. See Terrorism Coverage.
- Contamination resulting from radioactive material or nuclear fuel or waste or the release of weapon(s) of mass destruction (nuclear, chemical or biological).
- 11. Service in, or training for, the armed forces, national guard or organized reserve corps of any country or international authority.

Exposure and Disappearance

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

- a) as a result of such exposure, you suffer one of the losses specified in the schedule of losses above; or
- b) your body has not been found within 52 weeks from the date of the accident. It will be
 presumed, subject to evidence to the contrary, that you suffered loss of life.

EXCLUSIONS

Flight Accident does not cover losses or expenses related in whole or in part, directly or indirectly, to any of the following:

- Rock or mountain climbing, hang gliding, parachuting, bungee jumping, or skydiving; participation in any motorized race or speed contest; participation in any sport as a professional athlete (for which the insured person is remunerated); scuba diving (except if certified by internationally recognized and accepted program such as NAUI or PADI, or if diving depth does not exceed 30 metres).
- 2. Death or injury sustained while operating or learning to operate any aircraft as pilot or crew.
- 3. An insured person's suicide, attempted suicide or self-inflicted injury.
- 4. Committing or attempting to commit an illegal act or a criminal act by an insured person.
- Loss, death or injury, if at the time of the loss, death or injury, evidence supports that you
 were affected by, or the medical condition causing the loss was in any way contributed to by
 the use of alcohol, prohibited drugs, or any other intoxicant.
- 6. Non-compliance with any prescribed medical therapy or treatment
- 7. Travel to, from or through any country, region or city for which, prior to your departure date, the Canadian Government, or any department thereof, has issued a warning to avoid all travel or to avoid non-essential travel during the time of your trip if the loss is the result of the reason for which the warning was issued.
- War, invasion, act of a foreign enemy, declared or undeclared hostilities, civil war, riot, rebellion, revolution or military power or your unlawful visit in any country.
- 9. Terrorism or by any activity or decision of a government agency or any other entity to prevent, respond to or terminate terrorism except for ensuing loss or damage which results directly from fire or explosion. Such loss or damage is excluded regardless of any other cause or event that contributes concurrently or in any sequence to the loss or damage. Limited coverage applies with respect to an act of terrorism. See Terrorism Coverage.
- Contamination resulting from radioactive material or nuclear fuel or waste or the release of weapon(s) of mass destruction (nuclear, chemical or biological).
- 11. Service in, or training for, the armed forces, national guard or organized reserve corps of any country or international authority.

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

Coverage is only available for up to two acts of terrorism within a calendar year.

Section X **Limitations and Restrictions**

1. Pre-Approval of Surgery, Invasive Procedure, Diagnostic Testing and Treatment Ontime Care must approve in advance any surgery, invasive procedure (including, but not limited to, cardiac catheterization), diagnostic testing or treatment prior to you undergoing such procedure. It remains your responsibility to inform your attending physician to call Ontime Care for approval, except in extreme circumstances where such action would delay surgery required to resolve a life threatening medical crisis.

You must contact Ontime Care prior to seeking medical treatment. If it is not reasonably possible for you to contact Ontime Care prior to seeking treatment due to the nature of your emergency, you must have someone else call on your behalf or you must call as soon as medically possible. If you fail to notify Ontime Care, coverage will be limited to 70% of eligible expenses to a maximum of \$250,000.

Limitation of Benefits

Once you are deemed medically stable to return to your country of origin (with or without a medical escort) in the opinion of Ontime Care or by virtue of discharge from hospital, your emergency is considered to have ended, whereupon any further consultation, treatment, recurrence or

Emergency Travel Assistance

Ontime Care answers your questions 24 hours a day, seven days a week

From Canada and the U.S., call TOLL FREE 1-888-988-3268 From anywhere call COLLECT 1-905-707-9555

Emergency Call Centre

No matter where you are, professional assistance personnel are ready to take your call. Please consult your insurance card for emergency numbers.

Ontime Care will answer any questions you have about the eligibility of your claim, our standard verification procedures and the way that your policy benefits are administered. complication related to the emergency will no longer be eligible for coverage under this policy.

Availability and Quality of Care

The Insurer, the Administrator Company or Ontime Care shall not be held responsible for the availability or quality of any medical treatment (including the results thereof) or transportation, or your failure to obtain medical treatment.

5. Transfer or Medical Repatriation

During an emergency (whether prior to admission, during a covered hospitalization or after your release from hospital), Ontime Care reserves the right to:

a) transfer you to one of its preferred health care providers, and/or

return you to your country of origin, for medical treatment of your sickness or injury without danger to your life or health. If you choose to decline the transfer or return when declared medically stable by Ontime Care, the Insurer will be released from any liability for expenses incurred for such sickness or injury after the proposed date of transfer or return. Ontime Care will make every provision for *your* medical condition when choosing and arranging the mode of your transfer or return and, in the case of a transfer, when choosing the hospital.

Ontime Care will also:

- 1. Help you locate the most appropriate medical facility for you,
- 2. Arrange for admission to a hospital if necessary;
- 3. Provide details of your coverage to you and to the medical providers who are treating you;
- 4. Connect you to an interpreter;
- 5. Whenever possible, instruct the hospital or clinic to bill Ontime Care directly.

How to File a Claim

- You must substantiate your claim by providing all documents listed below. (The insurer, Administrator Company or Ontime Care are not responsible for charges levied in relation to any such documents.)
 - a) A completed Claim Form (provided by Ontime Care upon notification of claim).
 - Original itemized bills from the licensed medical provider(s) stating the patient's name, diagnosis, date and type of treatment, and the name, address and telephone number of the provider, as well as the original transaction documents proving that payment was made to the provider.
 - c) Original prescription drug receipts from the pharmacist, physician or hospital indicating the name of the prescribing *physician*, prescription number, name of preparation, date, quantity and total cost.

Note: If you refuse or fail to sign the medical authorization form or refuse to provide any information pertinent to your claim, it may result in a delay in processing your claim.

2. Payment of Benefits

All payments are payable to you or on your behalf. Benefits for loss of life are made to your estate unless another beneficiary is designated in writing to Ontime Care or the Administrator Company. Any claims paid to you will be payable in Canadian funds. If you have paid a covered expense, you will be reimbursed in Canadian currency at the prevailing rate of exchange on the date that the claim payment is made to you. No sum payable shall bear interest.

3. Send all pertinent documents to:

Ontime Care Worldwide Inc. 15 Wertheim Court, Suite 512, Richmond Hill, ON L4B 3H7

Indicate your policy number on all correspondence.

Section XIII General Provisions

1. Subrogation

If you suffer a loss covered under this policy, Ontime Care is granted the right from you to take action to enforce all your rights, powers, privileges and remedies upon making payment or accepting the claim to the extent of the incurred losses, against any person, legal person or entity which caused such loss. You shall take no action after a loss that will impair the rights of the Insurer set forth in this paragraph and shall do such things as are necessary to secure the Insurer's rights.

Other Insurance

This insurance is a second payor plan. For any loss or damage insured by, or for any claim payable under any other liability, group or individual basic or extended health insurance plan, or contracts including any private or provincial or territorial auto insurance plan providing hospital, medical, or therapeutic coverage, or any other insurance in force concurrently herewith, amounts payable hereunder are limited to those covered that are in excess of the amounts for which you are insured under such other coverage.

3. Misrepresentation and Non-disclosure

The entire coverage under this policy shall be void if the insurer determines whether before or after loss, vou have concealed, misrepresented or failed to disclose any material fact or circumstance concerning your policy or your interest therein, or if you refuse to disclose information or permit the use of such information, pertaining to any of the insured persons under this contract of insurance.

Arbitration

Notwithstanding any clause in the present policy, the parties hereto undertake to submit to an arbitration procedure, to the exclusion of the courts, any present or future dispute relating to a claim. The arbitration proceedings shall be governed by arbitration laws in force in the province or territory where this policy was issued. The parties agree that any action will be referred to arbitration.

Applicable Law

This contract of insurance is governed by the laws of the province or territory where this policy was issued. Any legal proceeding by you, your heirs or assigns shall be brought in the courts of the province or territory where this policy was issued.

6. Safeguarding Your Privacy

The Administrator Company places great importance on the protection of your privacy. The Administrator Company collects your personal information when you apply for this insurance and in the event of a claim, to provide you with insurance services and to analyze your claim. This information remains confidential, as is required under applicable federal and provincial laws. In the event of a claim, Ontime Care may collect your personal health information held by a third party. This information may be released to employees of Ontime Care, the Administrator Company and the insurer for claims analysis and to better serve you. In no case will the Insurer release this information to any person or organization that is not clearly entitled to it without first seeking your consent.

Section XIV Statutory Conditions

- 1. The Contract The application, this policy, any document attached to this policy when issued, and any amendment to the contract agreed upon in writing by the Insurer after the policy is issued, constitute the entire contract, and no agent has authority to change the contract or waive
- 2. Waiver The Insurer shall be deemed not to have waived any condition of this contract, either in whole or in part, unless the waiver is clearly expressed in writing signed by the Insurer.
- 3. Copy of Application The Insurer shall, upon request, furnish to the insured or to a claimant under the contract a copy of the application.
- Material Facts No statement made by you at the time of application for this contract shall be used in defence of a claim under or to avoid this contract unless it is contained in the application or any other written statements or answers furnished as evidence of insurability.
- 5. Notice and Proof of Claim You or a beneficiary entitled to make a claim, or the agent of any of you, shall:
 - a) give written notice of claim to Ontime Care by delivery thereof or by sending it by registered mail to Ontime Care not later than 30 days from the date the claim arises under the contract on account of an accident or sickness;
 - b) within 90 days from the date a claim arises under the contract on account of an accident or sickness, furnish to Ontime Care such proof of claim as is reasonably possible in the circumstances of the happening of the accident or the commencement of the sickness, and the loss occasioned thereby, the right of the claimant to receive payment, his or her age, and the age of the beneficiary if relevant; and
 - if so required by Ontime Care or the Insurer, furnish a satisfactory certificate as to the cause or nature of the accident or sickness for which claim may be made under the contract.

- 6. Failure to Give Notice or Proof Failure to give notice of claim or furnish proof of claim within the time prescribed by this statutory condition does not invalidate the claim if the notice or proof is given or furnished as soon as reasonably possible, and in no event later than one year from the date of the accident or the date a claim arises under the contract on account of sickness if it is shown that it was not reasonably possible to give notice or furnish proof within the time so prescribed.
- 7. Insurer to Furnish Forms for Proof of Claim The Insurer shall furnish forms for proof of claim within 15 days after receiving notice of claim, but where the claimant has not received the forms within that time the claimant may submit his or her proof of claim in the form of a written statement of the cause or nature of the accident or sickness giving rise to the claim and of the extent of the loss.
- 8. Rights of Examination As a condition precedent to recovery of insurance money under this contract:
 - a) the claimant shall afford to the Insurer and Ontime Care an opportunity to examine the insured person when and so often as it reasonably requires while the claim hereunder is pending; and
- in the case of death of the insured, the Insurer and Ontime Care may require an autopsy subject to any law of the applicable jurisdiction relating to autopsies.
- When Money Payable All money payable under this contract shall be paid by the Insurer within 60 days after it has received proof of claim.
- 10. Limitation of Actions 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 other applicable legislation. The limitation period applies to all plans and benefits of this policy and to all endorsements thereof.

Identification of Insurer Section XV

JF Canadian Travel Insurance is underwritten by Berkley Canada (a Berkley Company) and administered by JF Insurance Agency Group Inc.

The insured is requested to read this policy and if incorrect, return it immediately for alteration. In the event of an occurrence likely to result in a claim under this insurance, immediate notice should be given to Ontime Care Worldwide Inc. To contact JF Insurance Agency Group Inc., please call 1-877-832-5541 or write to info@jfgroup.com.