

# Manulife Global Travel Insurance Policy



This policy is underwritten by The Manufacturers Life Insurance Company and First North American Insurance Company, a wholly owned subsidiary of Manulife Financial.

**EFFECTIVE AUGUST 2013**

Don't forget *your*  
Wallet Card!



**Manulife**  
**GLOBAL**  
Travel Insurance



IN EVENT OF AN EMERGENCY, CALL:

**1 800 211-9093**

toll-free from the USA and Canada

**+1 (519) 251-7821**

collect where available

NAME \_\_\_\_\_

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

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## ABOUT MANULIFE FINANCIAL

Whether you're travelling outside your province or out of the country for a few days or for a few months, Manulife Financial offers the personalized coverage you need to be financially protected against the cost of unexpected emergencies that may happen prior to or during your trip. No one expects to have a medical emergency away from home, or to have to cancel a trip due to an unforeseen emergency. But these events happen and they can be disruptive and expensive.

Since the very beginning, when Sir John A. Macdonald, Canada's first Prime Minister, became President of the company in 1887, Manulife Financial has been helping people feel financially secure.

### NOTICE REQUIRED BY THE ALBERTA INSURANCE ACT

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

### IMPORTANT NOTICE – PLEASE READ CAREFULLY

- Travel insurance is designed to cover losses arising from sudden and unforeseeable circumstances. It is important that you read and understand your policy before you travel as your coverage may be subject to certain limitations or exclusions.
- Your policy may not provide coverage for medical conditions and/or symptoms that existed before your trip. Check to see how this applies in your policy and how it relates to your departure date, date of purchase or effective date.
- In the event of an accident, injury or sickness, your prior medical history may be reviewed when a claim is made.
- If your policy provides travel assistance, you may be required to notify the designated assistance company prior to treatment. Your policy may limit benefits should you not contact the assistance company within a specified time period.

**PLEASE READ YOUR POLICY CAREFULLY  
BEFORE YOU TRAVEL**

## IMPORTANT INFORMATION ABOUT YOUR TRAVEL INSURANCE

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

To be eligible for insurance under this policy, *you* must meet all the Eligibility Requirements outlined on Pages 8-9 of this policy booklet.

If *you* are 75 years of *age* or older and have purchased the All-Inclusive Plan or the Canada All-Inclusive Plan, additional Eligibility Requirements apply to *your* coverage. *You* are not eligible for coverage under this insurance if *you* do not meet all the Eligibility Requirements outlined on Pages 8-9 of this policy booklet.

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

- *Trip Cancellation and Trip Interruption Insurance*: please review the *pre-existing condition* exclusions listed on Page 21 of this policy booklet.
- *Emergency Medical Insurance*: please review the *pre-existing condition* exclusions listed on Pages 27 to 30 of this policy booklet.

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

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

**1 800 211-9093** toll-free from the USA and Canada,  
**+1 (519) 251-7821** collect where available.

*Our Assistance Centre* is there to help *you*  
24 hours a day, 365 days a year.

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

If *you* need *medical attention* or must make any other type of claim during *your trip*, call us for assistance first. The Assistance Centre is open 24 hours a day, 365 days a year.

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

If *you* need *medical attention* or must make any other type of claim during *your trip*, call us for assistance first. The Assistance Centre is open 24 hours a day, 365 days a year.

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

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### IMPORTANT INFORMATION ABOUT *YOUR* INSURANCE:

This policy is underwritten by The Manufacturers Life Insurance Company (Manulife Financial) and First North American Insurance Company (FNA), a wholly owned subsidiary of Manulife Financial. Please note that risks identified with ‡ throughout this document are covered by FNA.

## MEDICAL CONCIERGE SERVICES

Manulife Global Travel Insurance is pleased to provide as an additional value-added service Medical Concierge Services to *you when travelling to the U.S., Mexico and the Dominican Republic*. These Medical Concierge Services include:

- *Physician* telephonic consultation 24/7 by a qualified *physician*
- 24/7 same-day coordination and delivery of lost/forgotten prescription maintenance medication, eye glasses or contact lenses and medical supplies
- 24/7 medical referrals to medical specialists, chiropractors, dentists, walk-in clinics, urgent care centres or *hospitals* for evaluation and medical *treatment*
- 24/7 access to *physician* house call visits in **select cities in the U.S., Mexico and the Dominican Republic**
- *Physician* co-ordination to an Emergency Room
- Consulting *physician* will “fast track” *you* through the Emergency Room in **select cities in the U.S., Mexico and the Dominican Republic**
- Consulting *physician* will communicate with the *hospital* to ensure continuity of care

To access this service simply call the Assistance Centre using the phone numbers indicated on the wallet card.

### MEDICAL CONCIERGE SERVICES PROVIDED BY THE **StandbyMD** PROGRAM.

Disclaimer, Waiver, and Limitation of Liability: StandbyMD is not a medical provider. Medical providers utilized by StandbyMD are not employees, agents, nor in any way affiliated with StandbyMD, beyond accepting StandbyMD’s referrals. StandbyMD does not have any control, real or implied, over the medical judgment of participating medical providers, nor their actions or inactions. StandbyMD, upon making referrals under this policy, does not assume any responsibility for the availability, quality, results or outcome of any treatment or service, or any policyholder’s failure to obtain any treatment or service covered under these terms. Policyholders hereby forever and fully waive all rights against, hold harmless, release and forever discharge StandbyMD and its principals, parents, successors and assigns, of and from any and all claims, demands, actions, causes of action, and suits of any kind, nature, or amount which relate to, or in any way directly or indirectly flowed from the concierge medical services offered by StandbyMD. StandbyMD’s liability under these concierge medical services, if any, is limited solely to the amount of payment made to participating medical providers for the services obtained pursuant to StandbyMD’s referral. StandbyMD services are provided by Healthcare Concierge Services Inc.

**The StandbyMD program is provided by Healthcare Concierge Services Inc. Manulife Financial and its agents are not responsible for the availability, quality, or results of services provided under the StandbyMD program.**

<b>PLANS</b>	<b>ALL-INCLUSIVE</b>	<b>CANADA ALL-INCLUSIVE**</b>	<b>NON-MEDICAL INCLUSIVE</b>	<b>ANNUAL ALL-INCLUSIVE</b>	<b>TRIP CANCELLATION &amp; INTERRUPTION</b>	<b>GLOBAL MEDICAL</b>
<b>ELIGIBLE AGE*</b>	NO LIMIT	NO LIMIT	NO LIMIT	UNDER AGE 85	NO LIMIT	UNDER AGE 60
<b>MEDICAL CONCIERGE SERVICES</b>	INCLUDED	INCLUDED	–	INCLUDED	–	INCLUDED
<b>TRIP CANCELLATION &amp; TRIP INTERRUPTION (Pages 13-24)</b>						
<b>TRIP CANCELLATION</b>	COVERED AMOUNT	COVERED AMOUNT	COVERED AMOUNT	Up to \$1,500 per trip to a maximum of \$10,000 per year	COVERED AMOUNT	–
<b>TRIP INTERRUPTION</b>	UNLIMITED	UNLIMITED	UNLIMITED	UNLIMITED	COVERED AMOUNT	–
<b>CANCEL FOR ANY REASON</b>	SEE PAGE 13	SEE PAGE 13	SEE PAGE 13	SEE PAGE 13	SEE PAGE 13	–
<b>MISCONNECTION</b>	SAME CLASS	SAME CLASS	SAME CLASS	SAME CLASS	ECONOMY CLASS	–
<b>EARLY RETURN</b>	SAME CLASS	SAME CLASS	SAME CLASS	SAME CLASS	ECONOMY CLASS	–
<b>DEFAULT PROTECTION</b>	SEE PAGE 22	SEE PAGE 22	SEE PAGE 22	SEE PAGE 22	SEE PAGE 22	–
<b>TERRORISM COVERAGE</b>	SEE PAGE 35	SEE PAGE 35	SEE PAGE 35	SEE PAGE 35	SEE PAGE 35	–
<b>ACCOMMODATION &amp; MEALS</b>	\$350/day maximum 2 days	\$350/day maximum 2 days	\$350/day maximum 2 days	\$350/day maximum 2 days	\$350/day maximum 2 days	–
<b>DELAYED RETURN ACCOMMODATION &amp; MEALS</b>	SEE PAGE 18 \$3,500	SEE PAGE 18 \$3,500	SEE PAGE 18 \$3,500	SEE PAGE 18 \$3,500	SEE PAGE 18 \$1,500	–

<b>EMERGENCY MEDICAL*** (Pages 24-31)</b>						
<b>HOSPITAL &amp; MEDICAL</b>	\$5,000,000	\$5,000,000	–	\$5,000,000	–	\$5,000,000
<b>ACCIDENTAL DENTAL</b>	\$3,000	\$3,000	–	\$3,000	–	\$3,000
<b>MEDICAL REPATRIATION</b>	\$5,000,000	\$5,000,000	–	\$5,000,000	–	\$5,000,000
<b>ACCOMMODATION &amp; MEALS</b>	\$500/day maximum \$5,000	\$500/day maximum \$5,000	–	\$500/day maximum \$5,000	–	\$350/day maximum \$3,500
<b>EXPENSES FOR CHILDCARE</b>	\$100/day maximum \$300	\$100/day maximum \$300	–	\$100/day maximum \$300	–	\$100/day maximum \$300
<b>EXPENSES RELATED TO YOUR DEATH</b>	SEE PAGE 25	SEE PAGE 25	–	SEE PAGE 25	–	SEE PAGE 25
<b>TERRORISM COVERAGE</b>	SEE PAGE 35	SEE PAGE 35	–	SEE PAGE 35	–	SEE PAGE 35
<b>BAGGAGE LOSS, DAMAGE &amp; DELAY (Pages 31-32)</b>	\$1,500	\$1,500	\$1,500	\$1,500	–	–
<b>PASSPORT REPLACEMENT</b>	\$200	\$200	\$200	\$200	–	–
<b>BAGGAGE DELAY</b>	\$500	\$500	\$500	\$500	–	–
<b>MAXIMUM PER ITEM</b>	\$300	\$300	\$300	\$300	–	–
<b>FLIGHT &amp; TRAVEL ACCIDENT (Pages 32-33)</b>						
<b>FLIGHT ACCIDENT</b>	\$100,000	\$100,000	\$100,000	\$100,000	–	–
<b>TRAVEL ACCIDENT</b>	\$50,000	\$50,000	\$50,000	\$50,000	–	–
<b>RENTAL VEHICLE DAMAGE (Pages 33-34)</b>	–	–	–	–	–	–

\* If you purchase any plan that includes *Emergency Medical Insurance*, your child must be at least 31 days old to be insured.

\*\* Benefits for the Canada All-Inclusive Plan and Travel Canada Plan apply for trips in Canada only.

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

<div>PLANS</div>	MEDICAL PREFERRED	TRAVEL CANADA**	ANNUAL MEDICAL	VISITORS (a \$75 deductible applies to each claim)	RENTAL VEHICLE DAMAGE	BAGGAGE & PERSONAL EFFECTS
ELIGIBLE AGE*	AGE 60 & OLDER	NO LIMIT	UNDER AGE 85	<ul style="list-style-type: none"><li>Visitors \$150,000 - Under age 70</li><li>All other plans - Under age 86</li></ul>	NO LIMIT	NO LIMIT
MEDICAL CONCIERGE SERVICES	AVAILABLE	AVAILABLE	AVAILABLE	–	–	–
TRIP CANCELLATION & TRIP INTERRUPTION (Pages 13-24)						
TRIP CANCELLATION	–	–	–	–	–	–
TRIP INTERRUPTION	–	–	–	–	–	–
CANCEL FOR ANY REASON	–	–	–	–	–	–
MISCONNECTION	–	–	–	–	–	–
EARLY RETURN	–	–	–	–	–	–
DEFAULT PROTECTION	–	–	–	–	–	–
TERRORISM COVERAGE	–	–	–	–	–	–
ACCOMMODATION & MEALS	–	–	–	–	–	–
DELAYED RETURN ACCOMMODATION & MEALS	–	–	–	–	–	–

<b>EMERGENCY MEDICAL*** (Pages 24-31)</b>						
HOSPITAL & MEDICAL	\$5,000,000	\$5,000,000	\$5,000,000	PLAN LIMIT: \$25,000; \$50,000; \$100,000, \$150,000	–	–
ACCIDENTAL DENTAL	\$3,000	\$3,000	\$3,000	\$3,000	–	–
MEDICAL REPATRIATION	\$5,000,000	\$5,000,000	\$5,000,000	PLAN LIMIT: \$25,000; \$50,000; \$100,000, \$150,000	–	–
ACCOMMODATION & MEALS	\$350/day maximum \$3,500	\$350/day maximum \$3,500	\$350/day maximum \$3,500	\$350/day maximum \$3,500	–	–
EXPENSES FOR CHILDCARE	\$100/day maximum \$300	\$100/day maximum \$300	\$100/day maximum \$300	\$100/day maximum \$300	–	–
EXPENSES RELATED TO YOUR DEATH	SEE PAGE 25	SEE PAGE 25	SEE PAGE 25	SEE PAGE 25	–	–
TERRORISM COVERAGE	SEE PAGE 35	SEE PAGE 35	SEE PAGE 35	NOT COVERED, SEE PAGE 35	–	–
<b>BAGGAGE LOSS, DAMAGE &amp; DELAY (Pages 31-32)</b>						COVERED AMOUNT
PASSPORT REPLACEMENT	–	–	–	–	–	\$200
BAGGAGE DELAY	–	–	–	–	–	\$500
MAXIMUM PER ITEM	–	–	–	–	–	\$300
<b>FLIGHT &amp; TRAVEL ACCIDENT (Pages 32-33)</b>						
FLIGHT ACCIDENT	–	–	–	–	–	–
TRAVEL ACCIDENT	–	–	–	–	–	–
<b>RENTAL VEHICLE DAMAGE (Pages 33-34)</b>	–	–	–	–	\$60,000	–

\* If you purchase any plan that includes *Emergency Medical Insurance*, your child must be at least 31 days old to be insured.

\*\* Benefits for the Canada All-Inclusive Plan and Travel Canada Plan apply for *trips* in Canada only.

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



## ELIGIBILITY

**TO BE ELIGIBLE FOR INSURANCE UNDER THIS POLICY** For insurance plans (except Visitors Plans) that include *Emergency Medical Insurance*, **you must be a resident of Canada and covered under a *government health insurance plan*. For the *Rental Vehicle Damage Insurance*, you must have a valid driver's licence.**

At the time of *your* application for coverage under an insurance plan *you* must meet the eligible *age* requirement for that plan. Please refer to the "Schedule of Maximum Benefits by Plan" section on pages 4 to 7.

*You* are **not eligible** for coverage if:

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

### For Visitors Plans:

- This policy may only be issued in Canada and coverage must not exceed 365 days.
- Application for insurance may be made before *you* arrive in Canada.
- On *your effective date* of insurance, *you* must be in Canada and under *age* 86 (under *age* 70 for \$150,000 plan).
- You* may not be covered under more than one plan during *your trip*.
- You* must not be under 31 days or over 85 years of *age* (over 69 years of *age* for the \$150,000 plan).

### Additional Eligibility Requirements for the All-Inclusive Plan and the Canada All-Inclusive Plan:

If *you* are **age 75 or older** and *you* are applying for the **All-Inclusive Plan or the Canada All-Inclusive Plan**, *you* must also meet all of the following **Eligibility Requirements**:

### **Ages 75 or older - Eligibility Requirements for the All-Inclusive and Canada All-Inclusive Plans**

- In the last **12 months**, *you* have not used or been prescribed **home oxygen**;
- You* have **never** had (and *you* are **not awaiting**) a **bone marrow or organ transplant** (except corneal transplant);
- In the last **12 months**, *you* have not required **kidney dialysis**;
- You* have not been diagnosed with **AIDS** (Acquired Immune Deficiency Syndrome), AIDS-related conditions or **HIV** (Human Immunodeficiency Virus);
- You* have not been diagnosed with a **terminal illness** for which a *physician* has estimated *you* have less than **6 months** to live or been advised by a *physician* **not to travel** at this time;
- In the last **12 months**, *you* have not been prescribed or taken **Lasix or furosemide** for any reason or had **heart failure**;

- In the last **5 years**, *you* have not been **diagnosed** with and/or **been prescribed or taken** medication and/or received **treatment** for **metastatic cancer**;
- You* have **never** received a **diagnosis** and/or had **treatment** and/or been in **hospital** and/or **been prescribed or taken** medication for 2 of the following 3 conditions:
  - diabetes**
  - stroke**
  - ANY heart condition**;
- You* have not had a **heart bypass** or **heart valve surgery** **more than 10 years** ago;
- In the last **12 months** *you* have not **received a new diagnosis** and/or been in **hospital** and/or had a **change in medication** and/or experienced **new or more severe symptoms** for **ANY heart condition**.

**IF YOU DO NOT MEET ALL OF THE ABOVE ELIGIBILITY REQUIREMENTS, YOU ARE NOT ELIGIBLE TO PURCHASE THE ALL-INCLUSIVE PLAN OR THE CANADA ALL-INCLUSIVE PLAN.**

### For Medical Preferred, Travel Canada, Annual Medical and Annual All-Inclusive Plans:

*You* must complete the medical *questionnaire* to determine whether *you* meet eligibility requirements for coverage, and if so, to determine *your* rate category, if *you* are:

<b>Age 60 or older</b> and applying for a Medical Preferred Plan or a Travel Canada Plan; or
--

<b>Age 60 to 84</b> and applying for an Annual Medical Plan or an Annual All-Inclusive Plan.
--

## GENERAL INFORMATION ABOUT YOUR TRAVEL INSURANCE

The cancel for any reason benefit does not apply if *you* did not purchase *your* policy within **48 hours** of *your* initial *trip* booking or before any cancellation penalties became applicable. Coverage must be for the entire time that *you* are away from *home*, *you* must pay the required premium to *your* travel agent before *you* leave *home* and, where applicable, complete *our questionnaire*.

**Family coverage** is available to *you* if all family members to be insured under one policy are named in *your confirmation*, are under *age* 60 and *you* have purchased and paid for family coverage. The family coverage covers *you*, *your spouse* and *children*, and/or grandchildren while travelling together, for the plan purchased. *Children* and/or grandchildren must be at least 31 days of *age* to be insured under the plan purchased. A maximum of 2 adults is permitted under family coverage.

The family rate is 3 times the older (or only) parent's (or grandparent's) rate for the All-Inclusive, Canada All-Inclusive and Non-Medical Inclusive Plans. The family rate is 2 times the older (or only) parent's (or grandparent's) rate for the Global Medical, Travel Canada, Annual Medical and Visitors Plans. Family coverage is not available for *Trip Cancellation*, Medical Preferred, Annual All-Inclusive, Baggage and Personal Effects and *Rental Vehicle Damage* Plans.

**Children Under 2 Years of Age at No Extra Charge:**

Available for the All-Inclusive, Canada All-Inclusive and Non-Medical Inclusive Plans. With the purchase of this insurance, coverage for *children* (or a *child*) more than 30 days old and under 2 years of *age* is provided at no extra charge.

The Visitors Plans also provide coverage, for up to 30 days, while travelling outside Canada as long as *your side trip* originates and terminates in Canada and does not exceed 49% of *your* total number of coverage days.

**YOUR COVERAGE STARTS****For Trip Cancellation Insurance included in the All-Inclusive, Canada All-Inclusive, Non-Medical Inclusive and Trip Cancellation Plans,**

coverage starts at the date and time *you* pay the premium for that coverage.

**For Trip Cancellation Insurance included in the Annual All-Inclusive Plan,**

coverage starts initially on the date and time *you* pay the premium for that coverage provided *you* have already purchased *your* prepaid travel arrangements. After that date, coverage starts each time *you* purchase *your* prepaid travel arrangements.

**For Rental Vehicle Damage Insurance,** coverage starts when *you* legally assume control of the *rental vehicle* as indicated on *your* rental contract, provided *you* have already purchased and paid the premium for that coverage.

**The Visitors Plan** coverages start on the later of i) the *effective date* of insurance as shown on *your confirmation*; or ii) the time and date *you* arrive in Canada from *home*.

**For Emergency Medical Insurance included in the Annual Medical and Annual All-Inclusive Plans,**

coverage starts initially on *your first travel date* and after that date, it starts every time *you* leave *home*. For the Annual Medical Plan, the *first travel date* must fall within 3 months of purchase.

**All Annual Medical and Annual All-Inclusive Plans**

provide *you* with *Emergency Medical Insurance* coverage for unlimited travel within Canada but outside *your* province or territory of residence, without additional premium.

**All other coverages** start when *you* leave *home*.

**YOUR COVERAGE ENDS**

**For Trip Cancellation Insurance,** *your* coverage ends before *you* leave *home*, if *you* cancel *your trip* and the reason for the cancellation is covered under *your* insurance.

**For Rental Vehicle Damage Insurance,** *your* coverage ends on the earliest of:

- the date the rental agency reassumes control of the *rental vehicle* or the rental contract ends;
- the *expiry date* as shown on *your confirmation*;
- when the number of days of coverage *you* purchased expires; or
- 45 days after the rental contract started.

**Visitors Plan** coverages end on the earliest of the following:

- the date *you* leave Canada to return *home*;
- when the number of days of coverage *you* purchased, as shown in *your confirmation*, expires;
- no later than 365 days after *your effective date* of insurance; or
- the first day *you* become insured under a Canadian *government health insurance plan*.

**Other coverages** end on the earliest of:

- the date *you* return *home*;
- the *expiry date* as shown on *your confirmation*; or
- when the number of days of coverage *you* purchased expires.

**AUTOMATIC EXTENSION**

Under *Trip Interruption Insurance*, we will extend *your* coverage automatically beyond the date *you* were scheduled to return *home* as per *your confirmation*:

- for up to 10 days, if *you* have an *emergency* that prevents *you* from returning *home* on that date; or
- for up to 30 days, if *you* are hospitalized and that hospitalization prevents *you* from returning *home* on that date.

However, if travel is medically possible before the applicable 10 or 30 days have passed, we will honour *your* claim for eligible expenses only until such earlier date.

Under all other types of insurance, we will extend *your* coverage automatically beyond the date *you* were scheduled to return *home* as per *your confirmation* if:

- your common carrier* is delayed. In this case, we will extend *your* coverage for up to 72 hours; or
- you* or *your travel companion* are hospitalized on that date. In this case, we will extend *your* coverage during the hospitalization and for up to 5 days after discharge from the *hospital*; or
- you* or *your travel companion* have an *emergency* that does not require hospitalization but prevents travel. In this case, we will extend *your* coverage for up to 5 days.

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

**TO STAY LONGER THAN PLANNED**

**Extensions:** If *you* have not left *home* yet, simply call *your* travel agent to ask for the extension. If, however, *you* are already on *your trip*, please call the Assistance Centre. *You* may be able to extend *your* coverage as long as:

- the total length of *your trip* does not exceed 183 days (212 days if *you* reside in Ontario or Newfoundland and Labrador) or 60 days for those *age* 60 and older covered by the All-Inclusive Plan and Canada All-Inclusive Plan;
- you* pay the additional premium; and
- you* have had no event that has resulted or may result in a claim.

Any extension is subject to the approval of the Assistance Centre. For Visitors Plans, a minimum premium of \$25 will apply to each extension.

## ANNUAL MEDICAL AND ANNUAL ALL-INCLUSIVE PLANS

- Provide coverage for any number of *trips* taken within one year.
- For the Annual Medical Plan, each *trip* can be up to a maximum duration of 8, 18, 30 or 60 days or less, based upon the coverage duration *you* have chosen.
- For the Annual All-Inclusive Plan, each *trip* can be up to a maximum duration of 8, 18 or 30 days or less, based upon the coverage duration *you* have chosen.
- The Annual Medical and Annual All-Inclusive Plans are issued for a maximum coverage period of 365 days commencing with the *effective date*.
- For a *trip* to be covered under the benefits of the Annual Plans, it must start and end within the coverage period.

**Exception:** If a *trip* begins during the coverage period but extends beyond the *expiry date*, *you* can purchase:

- top-up coverage for any travel days that fall after the *expiry date*; or
- a new Annual Medical Plan or Annual All-Inclusive Plan, for the next 365-day period. The total duration of *your trip* cannot exceed the maximum coverage duration *you* have chosen for *your* Annual Plan, unless it is topped up.

**Top-Ups:** Top-ups are available for the Annual Medical Plan and the Annual All-Inclusive Plan. If *you* want to take a *trip* that is longer than the coverage duration *you* have chosen, simply contact *your* travel agent before *your* coverage expires to purchase coverage for the additional days required. If *you* are topping up another insurer's plan, it is *your* responsibility to confirm with that insurer that a top-up is permitted on *your* existing plan with no loss of coverage.

*You* will be able to top up *your* coverage if *you* pay the extra premium and the total length of *your trip* does not exceed 183 days (212 days if *you* reside in Ontario or Newfoundland and Labrador). An extension to the *trip* length may be allowed if *you* obtain written approval from *your* Canadian *government health insurance plan*.

## REFUND OF PREMIUM

If *you* return *home* before the date *you* were scheduled to return *home* as per *your confirmation*, and have not had a cause for a claim or started a claim, *you* may ask for a refund of the premium for the unused days (minimum 7 days for Visitors Plans) of *your* Global Medical, Medical Preferred, Travel Canada or Visitors Plans purchased for *your trip*. Simply contact *your* travel agent to ask for the refund and provide proof of the date *you* actually returned *home*.

## TRIP CANCELLATION & INTERRUPTION INSURANCE

Included in All-Inclusive, Canada All-Inclusive, Non-Medical Inclusive, *Trip Cancellation* and Annual All-Inclusive Plans.

To have full coverage under *Trip Cancellation & Trip Interruption Insurance*, *you* must purchase coverage for the full value of the non-refundable portion of *your trip* and for the full duration of *your trip*.

### IMPORTANT RESTRICTION TO *YOUR TRIP* CANCELLATION COVERAGE

**IF *YOU* CANCEL FOR ANY REASON AND DECIDE NOT TO TRAVEL, COVERAGE IS AVAILABLE ONLY IF *YOU* PURCHASED *YOUR POLICY* WITHIN 48 HOURS OF BOOKING *YOUR TRIP* OR BEFORE ANY CANCELLATION PENALTIES BECAME APPLICABLE.**

If *you* cancel for any reason and decide not to travel before *you* leave *home* and *you* have booked *your trip* and purchased this insurance from the same travel agent, we will provide coverage as follows:

- If *you* cancel *your trip* 14 days or more before the departure date shown on *your confirmation*, we will pay up to 50% of the covered amount for the prepaid portion of *your trip* that is non-refundable and non-transferable to another date.

### Benefits – What does *Trip Cancellation Insurance* cover?

If *you* are unable to travel due to a covered event listed immediately below that occurs before *you* leave *home*, we will pay up to the covered amount for the prepaid unused portion of *your trip* that is non-refundable and non-transferable to another travel date. In addition, if *your travel companion* must cancel his/her *trip* due to a covered event applicable to him/her, and *you* decide to go on *your trip* as planned, we will cover the cost of the next occupancy charge up to the covered amount.

To cancel a *trip* before *your* scheduled *departure date*, *you* must cancel *your trip* with the travel agent immediately or, at the latest, the first business day following the cause of cancellation.

### *Trip Cancellation Insurance* Covered Events:

1. *You* or *your travel companion* develop(s) a *medical condition* or die(s).
2. A member of *your immediate family* or *your key-person*, a member of *your travel companion's immediate family* or their *key-person*, develops a *medical condition* or dies.
3. *Your* friend or the person whose guest *you* will be during *your trip* is admitted to a *hospital* in an *emergency* or dies.



4. A *medical condition* which, in the written opinion of the attending *physician*, prevents *you* or *your travel companion* from participating in a sporting event when the purpose of *your trip* was to participate in that sporting event.
5. *You, your spouse, your travel companion or your travel companion's spouse*: a) become(s) pregnant after *you* book *your trip* and *your departure date* falls in the 9 weeks before the expected delivery date or any time after that date, or b) legally adopt(s) a *child* and the date of the adoption falls during *your trip*.
6. *You or your travel companion* are unable to be immunized or take preventative medication based on *your or your travel companion's* medical history that is required for entry into a country or region that is on *your* travel itinerary (provided the requirement became effective after the purchase of the travel arrangements and this insurance).
7. ‡ *Your or your travel companion's* travel visa is not issued for a reason beyond *your/their* control, provided the documentation shows *you or your travel companion* were eligible to apply, that the refusal is not due to a late application, and the application is not a subsequent attempt for a visa that had been previously refused.
8. ‡ *Your or your travel companion's* passport is not issued within the time confirmed to *you/them* in writing by Passport Canada, provided that *you or your travel companion* had personally submitted the application to an authorized passport office and that it had been reviewed and found satisfactory by Passport Canada authorized personnel. This applies only to Canadian citizens.
9. ‡ *You, your spouse, your travel companion or your travel companion's spouse* are called to service as a reservist, firefighter, military or police staff, to jury duty or to be a defendant in a civil suit or are subpoenaed to be a witness during *your trip*.
10. ‡ *You, your spouse, your travel companion or your travel companion's spouse* are quarantined or hijacked.
11. ‡ *Your or your travel companion's* principal residence or place of business is burglarized within 3 days of *your/their departure date* and *you/they* are required to cancel *your/their trip* and stay behind as a result.
12. ‡ *You, your spouse, your travel companion or travel companion's spouse* are unable to occupy *your/their* principal residence or to operate *your/their* place of business because of an event that is independent of any intentional or negligent act on *you/their* part.
13. ‡ A natural disaster renders *your* pre-booked destination accommodation uninhabitable after *you* book *your trip*. This benefit is only applicable if *your* prepaid accommodation arrangements are not eligible for reimbursement by the *travel supplier*.
14. ‡ *You, your spouse, your travel companion or your travel companion's spouse*: a) lose a permanent job because of layoff or dismissal without just cause, or b) are transferred by *your /their* respective employer and must move from *your /their* respective principal residence.
15. ‡ A business meeting, conference or convention that is the main intent of *your trip* and was scheduled before *you* purchased this insurance, is cancelled for a reason beyond *your* control or the control of *your* employer. This event must be between companies with unrelated ownership, and, in the case of a conference or convention, *you* must be a registered delegate.
16. ‡ Foreign Affairs and International Trade Canada issues a written formal warning after *you* purchase *your* insurance, advising or recommending that Canadian residents should not visit a destination included in *your trip*. This applies only to Canadian residents.
17. ‡ The requirement that *you or your travel companion* attend a *professional career program* examination or a university or college course examination on a date that occurs during *your trip*, provided the examination date was published before *you* purchased this insurance and subsequently changed after such purchase.

**Benefits – What does Misconnection Insurance cover?**  
**If any of the covered events listed immediately below occurs before or after *your* originally scheduled departure date and prevents *you* from travelling as shown on *your confirmation*, we will pay up to the covered amount for *your* misconnection expenses, being the lesser of:** a) the change fee charged by the airline for *your* missed connection if this option is available; or b) up to \$1,000 for the cost of *your* one-way economy transportation via the most cost-effective itinerary to the next destination. In addition, we will pay *your* additional and unplanned hotel and meal expenses, *your* essential phone calls and taxi fares to a maximum of \$350 per day for up to 2 days when no earlier transportation is available.

**Exception:** If *you* purchased a ticket or pass to travel by *plane* and, at the same time, purchased the All-Inclusive Plan, the Canada All-Inclusive Plan, the Annual All-Inclusive Plan or the Non-Medical Inclusive Plan, this insurance will cover up to \$2,000 for the extra cost of *your* same class transportation via the most cost-effective itinerary to the next destination, when *you* are eligible for misconnection and delay benefits.

#### **Misconnection Insurance Covered Events:**

1. ‡ *You* miss *your* next connecting *common carrier* because the *common carrier* that is providing transportation for a portion of *your trip* leaves later than originally scheduled.
2. ‡ The *common carrier* that is providing transportation for a portion of *your trip* leaves earlier than originally scheduled and the ticket *you* have purchased for *your* prior connection via another *common carrier* becomes unusable.
3. ‡ *You* miss a connection because of a delay in clearing customs and security controls due to *your or your travel companion's* mistaken identity. *You* must have been scheduled to arrive at *your* point of boarding in time to comply with the *travel supplier's* check-in procedure.
4. ‡ *You* miss a connection because the cruise ship *you* are travelling on is delayed (or the itinerary is modified) because of another passenger's medical emergency.

**Only misconnection expenses outlined under this Misconnection Insurance will be payable.**

***You must make reasonable efforts to continue on your trip as originally planned. The amount payable will be reduced by any amounts paid or payable by the rescheduled or delayed common carrier.***

**Benefits – What does *Trip Interruption Insurance* cover?**  
**If your trip is interrupted due to a covered event listed immediately below that occurs on or after the day you plan to leave home, we will pay:**

- A. Up to the covered amount for the prepaid unused portion of your trip that is non-refundable and non-transferable to another travel date less the prepaid unused transportation home.
- B. If you have booked and paid for a golf package, we will also pay up to \$100 for each unused day of your trip, to a maximum of \$500 for your prepaid non-refundable green fees. Alternatively, if you have booked and paid for a ski package, we will pay up to \$100 for each unused day of your trip, to a maximum of \$500 for your prepaid non-refundable ski package (lift passes; ski school fees; rental of a snowboard, skis, ski poles, bindings and/or boots).
- C. In addition, we will pay your additional and unplanned hotel and meal expenses, your essential phone calls and taxi fares to a maximum of up to \$350 per day for up to 2 days when no earlier transportation arrangements are available.
- D. We will pay your extra cost of one-way economy class fare via the most cost-effective itinerary to your or your group's next destination, or to return home.

**Exception:** If you purchased a ticket or pass to travel by plane and, at the same time, purchased the All-Inclusive Plan, the Canada All-Inclusive Plan, the Annual All-Inclusive Plan or the Non-Medical Inclusive Plan, this insurance will cover the extra cost of your same class transportation via the most cost-effective itinerary to your or your group's next destination, or to return home when you are eligible for benefits under this insurance.

- E. If you have booked a cruise and insured it under the All-Inclusive Plan, the Canada All-Inclusive Plan or the Non-Medical Inclusive Plan; and you are unable to attend an activity you booked while on the cruise ship, we will cover up to \$100 for each missed activity, to a maximum of \$500.

**Trip Interruption Insurance Covered Events:**

1. You or your travel companion develop(s) a medical condition or die(s).
2. A member of your immediate family or your key-person, a member of your travel companion's immediate family or their key-person develops a medical condition or dies.
3. Your friend or the person whose guest you will be during your trip is admitted to a hospital with an emergency or dies.
4. You, your spouse, your travel companion or your travel companion's spouse legally adopt(s) a child and the date of the adoption falls during your trip.

5. A medical condition which, in the written opinion of the attending physician, prevents you or your travel companion from participating in a sporting event when the purpose of your trip was to participate in that sporting event.
6. ‡ Your or your travel companion's travel visa is not issued for a reason beyond your/their control, provided the documentation shows you or your travel companion were eligible to apply, that the refusal is not due to a late application, and the application is not a subsequent attempt for a visa that had been previously refused.
7. ‡ You, your spouse, your travel companion or your travel companion's spouse are called to service as a reservist, firefighter, military or police staff, to jury duty or to be a defendant in a civil suit or are subpoenaed to be a witness during your trip.
8. ‡ You, your spouse, your travel companion or your travel companion's spouse are quarantined or hijacked.
9. ‡ You, your spouse, your travel companion or your travel companion's spouse are unable to occupy your/their principal residence or to operate your/their place of business because of an event that is independent of any intentional or negligent act on your/their part.
10. ‡ A natural disaster renders your pre-booked destination accommodation uninhabitable after you book your trip. This benefit is only applicable if your prepaid accommodation arrangements are not eligible for reimbursement by the travel supplier.
11. ‡ You, your spouse, your travel companion or your travel companion's spouse: a) lose a permanent job because of layoff or dismissal without just cause; or b) are transferred by your/their respective employer and must move from your/their respective principal residence.
12. ‡ You miss a connection or must interrupt your trip because of the delay of your connecting private passenger vehicle, when the delay is caused by the mechanical failure of your connecting private passenger vehicle, a traffic accident, an emergency police-directed road closure, weather conditions, earthquakes or volcanic eruptions. Your connecting private passenger vehicle must have been scheduled to arrive at your point of boarding in time to comply with the travel supplier's check-in procedure.
13. ‡ If your trip is interrupted and the planned time of arrival is delayed for any reason beyond your control, we will reimburse you for the reasonable and customary charges of taking an alternate route to the planned destination provided that the primary reason for your trip was to be present at a school graduation, wedding, funeral, sporting, theatrical, musical or other commercial entertainment event or conference, and such event cannot be delayed as a result of your late arrival.
14. ‡ Foreign Affairs and International Trade Canada issues a written formal warning after your departure date advising or recommending that Canadian residents should not visit a destination included in your trip. This applies only to Canadian residents.
15. ‡ Weather conditions, earthquakes or volcanic eruptions cause delays to at least 30% of your trip and you choose not to travel.

16. ‡ A delay in *your* departure due to mechanical failure, weather conditions, earthquakes, volcanic eruptions, or grounding of *your* air transportation causes *you* to miss *your* scheduled cruise. This is applicable only if *your* airfare and cruise are insured with Manulife Global Travel Insurance and purchased through the same travel agent from whom *you* purchased *your* cruise and if *you* purchased the All-Inclusive Plan, the Canada All-Inclusive Plan or the Non-Medical Inclusive Plan.
17. ‡ If *you* have purchased the All-Inclusive Plan, the Canada All-Inclusive Plan, the Annual All-Inclusive Plan or the Non-Medical Inclusive Plan and the flight *you* are booked to fly on is overbooked and *you* are denied boarding as a result, we will pay up to \$1,000 for the prepaid unused portion of *your trip* that is non-refundable and non-transferable to another date. For this benefit to apply, the overbooked flight must have been insured under *your* All-Inclusive, Canada All-Inclusive, Annual All-Inclusive or Non-Medical Inclusive insurance.
18. ‡ If *your* or *your travel companion's* passport and/or travel visa is lost or stolen during *your trip*, *you* will be reimbursed for reasonable travel and accommodation expenses until *your* replacement travel documentation is replaced. *You* will also be reimbursed for the change fee charged by the airline.
19. *You* miss a connection or must interrupt *your trip* because of the delay of *your* connecting *common carrier*, when the delay is caused by the mechanical failure of *your* connecting *common carrier*, a traffic accident, an emergency police-directed road closure, weather conditions, an unannounced strike, earthquakes or volcanic eruptions. The *common carrier* must have been scheduled to arrive at *your* point of boarding in time to comply with the *travel supplier's* check-in procedure.
20. ‡ The requirement that *you* or *your travel companion* attend a *professional career program* examination or a university or college course examination on a date that occurs during *your trip*, provided the examination date was published before *you* purchased this insurance and subsequently changed after such purchase.

**Benefits – What does Delayed Return Insurance cover?**  
**If any of the covered events listed immediately below happens after *you* leave *home* and makes it impossible for *you* to return *home* as shown on *your confirmation*, we will pay up to the covered amount for the length of time that *you* are prevented from travel. We will pay:**

- A. *Your* additional and unplanned hotel and meal expenses, *your* essential phone calls and taxi fares to a maximum of up to \$150 per day and \$1,500 in total. Maximums are \$350 and \$3,500 respectively for the All-Inclusive Plan, the Canada All-Inclusive Plan, the Annual All-Inclusive Plan or the Non-Medical Inclusive Plan.
- B. Up to the covered amount for the extra cost of *your* economy class transportation via the most cost-effective itinerary to return *home*. If the delay is a result of a *medical condition*, it must be on the advice of *your* attending *physician* at *your* destination.

**Exception:** If *you* purchased a ticket or pass to travel by *plane* and, at the same time, purchased the All-Inclusive Plan, the Canada All-Inclusive Plan, the Annual All-Inclusive Plan or the Non-Medical Inclusive Plan, this insurance will cover the extra cost of *your* same class transportation via the most cost-effective itinerary to return *home* when *you* are eligible for misconnection and delay benefits.

#### **Delayed Return Insurance Covered Events:**

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

#### **Vacation Voucher**

Applicable exclusively if you purchased the All-Inclusive Plan, the Canada All-Inclusive Plan, the Non-Medical Inclusive Plan or the Annual All-Inclusive Plan. If the death or hospitalization of an *immediate family* member, close friend, business associate or key employee, who has not accompanied *you* on the *trip*, prompts *you* to return earlier than *your* return date and *you* consequently miss at least 70% of *your* scheduled package tour, we will on *your* request issue a voucher to a maximum of \$750.

#### **Vacation Voucher Limitations**

1. Eligibility to receive the benefit under Vacation Voucher is dependent upon approval and payment of a valid *trip* interruption claim under the *Trip Cancellation and Interruption Insurance* of this policy.
2. The redeemable voucher is:
  - a. payable only to *you*;
  - b. valid until the expiry date indicated on the voucher (a period of 180 days from the date of *your* early return from *your* interrupted *trip*);
  - c. nontransferable; and
  - d. not redeemable in cash.
3. The replacement trip must:
  - a. begin before the expiry date on the voucher; and
  - b. be purchased through a Travel Agency that offers Manulife Global Travel Insurance

#### **What else does *Trip Cancellation, Trip Interruption & Delayed Return Insurance* cover?**

1. In the event *your travel companion's plane* is delayed by weather conditions, earthquakes or volcanic eruptions for at least 30% of *your trip*, and *your travel companion* decides not to go on the *trip* as booked, we will cover the cost of *your* next occupancy charge up to the covered amount.
2. In the event *you* die after the start of *your trip*: We will reimburse *your* estate, up to the covered amount, for *your* prepaid unused *trip* arrangements, plus we will reimburse *your* estate for:
  - the return *home* of *your* body (in the standard transportation container normally used by the airline); plus up to \$5,000 to have *your* body prepared where *you* die and the cost of the container;

- up to \$5,000 to have *your* body prepared and the cost of a standard burial container, plus up to \$5,000 for *your* burial where *you* die; or
- the return *home* of *your* ashes, plus up to \$5,000 to cremate *your* body where *you* die.

In addition, if someone is required to identify *your* body and must travel to the place of *your* death, we will pay the economy class airfare via the most cost-effective itinerary for that person and up to \$300 for that person's hotel and meal expenses. We will also provide that person with *Emergency Medical Insurance* under the same terms and limitations of this policy for up to 72 hours.

3. We will reimburse *you* up to \$1,000 for the non-refundable prepaid airfare of a domestic flight (covers flights booked for travel within Canada only) that *you* had booked to connect with another airline carrier that is providing transportation for a portion of *your trip*, if the connecting flight is subsequently cancelled after *you* purchased this insurance. For this benefit to apply, both the connecting flight and the cancelled flight must be insured under *your* Manulife Global Travel Insurance policy.
4. If the primary reason for *your trip* was to attend a ticketed commercial event (sport, musical or other commercial entertainment) for which *you* had purchased and paid for tickets prior to booking *your trip* and purchasing this insurance, and such event is subsequently cancelled by the promoter of the event, we will pay, up to the covered amount, for the following:
  - a) If the event is cancelled before *you* leave *home*: 50% of the prepaid unused portion of *your trip* that is non-refundable and non-transferable to another travel date.
  - b) If the event is cancelled after *you* leave *home*:
    - i) the prepaid unused portion of *your trip* that is non-refundable and non-transferable to another travel date (less prepaid unused transportation *home*); and
    - ii) up to \$1,000 for the additional cost of one-way transportation via the most cost-effective itinerary (being the lesser of a one-way economy transportation or the change fee charged by the airline on existing tickets if this option is available) to return *you* *home*.
5. ‡ For the All-Inclusive Plan, the Canada All-Inclusive Plan and the Non-Medical Inclusive Plan, if *you* or *your travel companion* have prepaid airfare that is not part of a cruise or tour package and the cruise or tour is cancelled for any reason except *default*, we will reimburse *you* up to \$2,000 for the lesser of:
  - a) the prepaid portion of the non-refundable airfare; or
  - b) the additional cost of *your* one-way transportation via the most cost-effective itinerary to return *home* (being the lesser of a one-way fare or change fee charged by the airline if this option is available).

For this benefit to apply, both the airfare and the cruise must be insured for the entire amount with an All-Inclusive, Canada All-Inclusive or Non-Medical Inclusive Plan.

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

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

If the *Trip Cancellation* covered amount purchased is less than \$20,000, we will not cover any expenses for any *medical condition* related to *you*, *your spouse*, or *your children*, if that *medical condition* was not *stable* in the 3 months before the *effective date* for this insurance.

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

- *your/their* heart condition if, in the 3 months before the *effective date* for this insurance, it has not been *stable* or *you/they* have taken any form of nitroglycerine for the relief of angina pain; and/or
- *your/their* lung condition if, in the 3 months before the *effective date* for this insurance, it has not been *stable* or *you/they* required *treatment* with oxygen or prednisone for *your/their* lung condition.

If the *Trip Cancellation* covered amount purchased is \$20,000 or more, we will not cover any expenses for a *medical condition* related to *you*, a member of *your immediate family*, *your travel companion*, *your key-person*, or the person whose guest *you* are during *your trip*, if that *medical condition* was not *stable* in the 12 months before the *effective date* for this insurance.

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

- *your/their* heart condition if, in the 12 months before the *effective date* for this insurance, it has not been *stable* or *you/they* have taken any form of nitroglycerine for the relief of angina pain; and/or
- *your/their* lung condition if, in the 12 months before the *effective date* for this insurance, it has not been *stable* or *you/they* required *treatment* with oxygen or prednisone for *your/their* lung condition.

We will not pay for losses or expenses incurred for, or as the result of, the following events which are applicable to all coverages detailed in this section, including ***Trip Cancellation, Trip Interruption, Misconnection and Delayed Return Insurance***:

1. Any reason, circumstance, event or *medical condition* affecting *you* or anyone, which *you* were aware of on or before the *effective date*, and which may eventually prevent *you* from starting and/or completing *your* covered *trip* as booked when *you* purchase this insurance coverage.
2. The *medical condition* or death of a person who is ill when the purpose of *your trip* is to visit that person.
3. *Your* suicide, attempted suicide or *your* intentional self-inflicted injury whether sane or insane.
4. *Your* committing or attempting to commit a criminal act.
5. Not following a prescribed therapy or *treatment*.
6. Any *medical condition*, sickness, death, or *injury* related



directly or indirectly to *your* abuse of medication(s), drug(s), alcohol, or any other toxic substance(s).

7. An emotional or mental disorder (except an acute psychosis) that does not require admission to a *hospital*.
8. A *child* who is born after *you* leave *home*; routine prenatal care; pregnancy or childbirth; or complications of *your* pregnancy or childbirth when they happen in the 9 weeks before or after the expected date of delivery.
9. A *medical condition*:
  - that occurs during a *trip* when *you* knew that *treatment* may be sought or required for that condition; and/or
  - for which it was reasonable to expect before *you* left *home* 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 caused symptoms that would have caused an ordinarily prudent person to seek *treatment* in the 3 months before leaving *home*; and/or
  - that caused a *physician* to advise *you* not to go on *your trip*.
10. A travel visa that is not issued because of a late application.
11. Any *medical condition* if the answers provided in the *questionnaire* (if applicable), are not truthful and accurate.
12. An *act of war* or *act of terrorism*. For all Plans, except Visitors, limited coverage applies with respect to an *act of terrorism*. See Terrorism Coverage provision.
13. Any loss resulting from:
  - a specific or related *medical condition* which *you* contracted in a foreign country during *your trip*; and/or
  - an *act of war* or an *act of terrorism*, when, before the *effective date* for this insurance, a written formal warning was issued by Foreign Affairs and International Trade Canada, advising Canadians not to travel to that country, region or city.
14. *Your* cancelling for any reason and deciding not to travel if *you* did not purchase this insurance within 48 hours of booking *your trip* or before any cancellation penalties applied.

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

*You* must cancel *your* scheduled *trip* with the agent or *travel supplier* on the day the cause of cancellation occurs or on the next business day at the latest. Claim payment will be limited to the cancellation penalties specified in the *trip* contracts which are in effect at the time the cause of cancellation occurs.

*Trip Cancellation* for a *medical condition* must be recommended by *your* attending *physician*.

### DEFAULT PROTECTION COVERAGE

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

If *you* have purchased *Trip Cancellation & Interruption Insurance* and *you*:

- a) have contracted with a *travel supplier* who *defaults*; and

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

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

### Benefit Limits

The amount payable to *you* in respect of any *one trip* will not exceed \$3,500 CDN; and will not exceed \$7,500 CDN for all persons who are covered under the same Manulife Global Travel Insurance policy. Any benefits payable shall also be subject to an overall maximum aggregate payable limit specified below relating to all in-force travel policies issued by *us*, including this policy. If total claims otherwise payable for this type of coverage under all travel policies issued by *us*, resulting from the *default* of one or more *travel suppliers* occurring within an applicable time period, exceeds the maximum aggregate payable limit, then the amount paid on each claim shall be reduced on a pro rata basis so that the total amount paid in respect of all such claims shall be the maximum aggregate payable limit.

The maximum aggregate limits are:

- a) \$1,000,000 CDN with respect to the *default* of any one (1) *travel supplier*; and
- b) \$3,000,000 CDN with respect to all *defaults* of all *travel suppliers* occurring in the same calendar year.

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

### Exclusions

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

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



- b) Loss arising as a result of a *default* if, at the time of booking, the *travel supplier* is bankrupt, insolvent or in receivership or has sought protection from creditors under any bankruptcy, insolvency or similar legislation;
- c) Loss arising as a consequence of the bankruptcy or insolvency of a retail travel agent, agency or broker;
- d) Loss arising as a result of the *default* of a foreign *travel supplier* if the *travel services* to be provided by such foreign *travel supplier* are not part of a package tour sold to *you*;
- e) Losses incurred by an individual who has not purchased coverage for *Trip Cancellation & Interruption* Insurance coverage under the Manulife Global Travel Insurance policy, in connection with *your trip* which resulted in such losses;
- f) Insurance purchased or *trips* booked after the *default*; or
- g) *Travel services* that were actually provided.

## EMERGENCY MEDICAL INSURANCE

Included in All-Inclusive, Canada All-Inclusive, Annual All-Inclusive, Global Medical, Travel Canada, Annual Medical, Medical Preferred and Visitors Plans.

### Benefits – What does *Emergency Medical Insurance* cover?

*Emergency Medical Insurance* covers *you* for up to \$5,000,000 CDN (\$25,000, \$50,000, \$100,000 or \$150,000 as chosen for Visitors Plans) of *covered expenses* incurred by *you* as a result of *medical attention* required by *you* during *your trip* if a *medical condition* begins unexpectedly after *you leave home* or after *you* arrive in Canada for Visitors Plans, but only if these *covered expenses* are not covered by *your government health insurance plan* or any other benefit plan. The *medical attention* must be required as part of *your emergency treatment* and ordered by a *physician* (or a dentist in the case of dental *treatment*).

**In the event of an *emergency*, call the Assistance Centre immediately: 1 800 211-9093 toll-free from the USA and Canada or +1 (519) 251-7821 collect where available. Please note that if *you do not call* the Assistance Centre in an *emergency*, *you will have to pay 25% of the eligible medical expenses* we would normally pay under this policy. If it is medically impossible for *you* to call, please have someone call on *your* behalf.**

**We will cover benefits 5 to 13 only if they have been authorized and arranged by the Assistance Centre.** *Covered expenses* and benefits are subject to the policy's maximums, exclusions and limitations.

**For Visitors Plans, eligible *covered expenses* include those described under benefits 1 to 10 listed below.**

More specifically, the eligible *covered expenses* are:

1. **Expenses to receive *emergency medical attention*** – Medical care received from a *physician* in or out of a *hospital*, the cost of a semi-private *hospital* room (or an intensive or coronary care unit where *medically necessary*), the services of a licensed private duty nurse while *you* are in *hospital*, the rental or purchase (whichever is less) of a hospital bed, wheelchair, brace, crutch or other medical appliance, tests that are needed to diagnose or find out more about *your* condition, and

drugs that are prescribed for *you* and are available only by prescription from a *physician* or dentist.

2. **Expenses to receive professional services** – Care received from a licensed chiropractor, osteopath, physiotherapist, chiropodist or podiatrist, up to \$300 by profession.
3. **Expenses for ambulance transportation** – *Reasonable and customary charges* for local licensed ambulance service to transport *you* to the nearest qualified medical service provider in an *emergency*.
4. **Expenses related to *your death*** – If *you* should die during *your trip* from an *emergency* covered under this insurance, we will reimburse *your* estate for:
  - the return *home* of *your* body (in the standard transportation container normally used by the airline); plus up to \$5,000 to have *your* body prepared where *you* die and the cost of the container;
  - up to \$5,000 to have *your* body prepared and the cost of a standard burial container, plus up to \$5,000 for *your* burial where *you* die; or
  - the return *home* of *your* ashes, plus up to \$5,000 to cremate *your* body where *you* die.

In addition, if someone is required to identify *your* body and must travel to the place of *your* death, we will pay the economy class airfare via the most cost-effective itinerary for that person and up to \$300 for that person's hotel and meal expenses. We will also provide that person with *Emergency Medical Insurance* under the same terms and limitations of this policy for up to 72 hours.
5. **Expenses to bring *you 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*, we will pay for:
  - the extra cost of an economy class fare via the most cost-effective itinerary; or
  - a stretcher fare on a commercial flight via the most cost-effective itinerary, if a stretcher is *medically necessary*; and
  - the return cost of an economy class fare via the most cost-effective itinerary for a qualified medical attendant to accompany *you*, and the attendant's reasonable fees and expenses, if this is *medically necessary* or required by the airline; or
  - the cost of air ambulance transportation, if this is *medically necessary*.
6. **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 up to \$350 per day to *you* to a maximum of \$3,500 (\$500 and \$5,000 respectively for the All-Inclusive Plan, the Canada All-Inclusive Plan and the Annual All-Inclusive Plan) for *your* extra meals, hotel,

essential phone calls and taxi fares. *We* will only pay for these expenses if *you* have actually paid for them.

7. **Expenses to bring someone to your bedside** – If *you* are travelling alone and are admitted to a *hospital* for 3 days or more because of a medical *emergency*, *we* will pay the economy class fare via the most cost-effective itinerary for someone to be with *you*. *We* will also pay up to \$500 for that person's hotel and meals and cover him/her under *Emergency Medical Insurance*, under the same terms and limitations of this policy, until *you* are medically fit to return *home*. For a *child* insured under this policy, this benefit is available immediately upon his/her *hospital* admission.
8. **Expenses for emergency dental treatment** – If *you* need *emergency dental treatment*, *we* will pay:
  - up to \$300 for the relief of dental pain; and
  - if *you* suffer an accidental blow to the mouth, up to \$3,000 to repair or replace *your* natural or permanently attached artificial teeth (up to \$2,000 during *your trip* and up to \$1,000 to continue *medically necessary treatment* in the 90 days after the accident except for the Visitors Plans, where the benefit is up to \$3,000 during *your trip*.)
9. **Expenses to return children under your care** – If *you* are admitted to *hospital* for more than 24 hours or must return *home* because of an *emergency*, *we* will pay for the extra cost of one-way economy class airfare to return *your children* or grandchildren *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. *We* will cover him/her under the *Emergency Medical Insurance*, under the same terms and limitations of this policy for a qualified escort. The *children* or grandchildren must have been under *your* care during *your trip* and be covered under this policy.
10. **Expenses for childcare** – If *you* are admitted to *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 \$100 per day to a maximum of \$300 per *trip*. The *child(ren)/grandchild(ren)* must have been under *your* care during *your trip*.
11. **Expenses to return your pet(s) (Not an applicable benefit for Visitors Plans)** – When approved in advance and arranged by the Assistance Centre, *we* will pay for the extra cost of economy class transportation, up to \$500, to return *your* pet(s) (domestic dog(s) and/or cat(s)) *home* via the most cost-effective itinerary, if:
  - a) *your treating physician* recommends that *you* return *home* because of *your medical condition*;
  - b) *our* medical advisors recommend that *you* return *home* after *your emergency treatment*; or
  - c) *you* die.

12. **Expenses to return your travel companion home (Not an applicable benefit for Visitors Plans)** – *We* will pay the extra cost of one-way economy class airfare via the most cost-effective itinerary, to return *your travel companion* (who is travelling with *you* at the time of *your emergency* and insured under *our* travel medical insurance plan) *home*, if *you* return *home* under Benefit #5 above.
13. **Expenses to return your vehicle home (Not an applicable benefit for Visitors Plans)** – If, because of a medical *emergency*, hospitalization, death or repatriation, *you* are unable to drive *home* the *vehicle* *you* used during *your trip*, *we* will cover up to the reasonable cost charged by a commercial agency to bring *your vehicle home*. If *you* rented a *vehicle* during *your trip*, *we* will cover its return to the rental agency.
14. **Hospital Allowance (Not an applicable benefit for Visitors Plans)** – If *you* are hospitalized for 48 hours or more, *we* will reimburse *you* up to \$50 per day, to a maximum of \$500 for *your* incidental expenses (telephone calls, television rental, etc.) while *you* are in the *hospital*.
15. **Baggage Return (Not an applicable benefit for Visitors Plans)** – If *you* return *home* under Benefit #5 above, *we* will pay the extra costs to return *your* baggage to *your home*.
16. **Expenses to replace prescription drugs (Not an applicable benefit for Visitors Plans)** – *We* will pay up to a maximum of \$50 if *you* have misplaced or have forgotten *your* prescription medication during *your trip* and it is necessary for *you* to continue taking the prescribed medication. Charges for vitamins, vitamin preparations, over-the-counter drugs, contraception or birth control are not covered.
17. **Hearing Aid (Not an applicable benefit for Visitors Plans)** – Up to \$200 for the replacement of a hearing aid due to theft, loss or breakage during *your trip* and assistance to co-ordinate the replacement.
18. **Vision Care (Not an applicable benefit for Visitors Plans)** – Up to \$200 for the replacement of prescription eyeglasses due to theft, loss or breakage during *your trip* and assistance to co-ordinate the replacement.

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

*We* will not pay any expenses or benefits relating to:

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

All-Inclusive Plan:	
Under Age 75	<b><i>Pre-existing condition</i> exclusion 1</b>
Age 75 or over	<b><i>Pre-existing condition</i> exclusion 3</b>

Canada All-Inclusive Plan:	
<b>No <i>pre-existing condition</i> exclusion applies.</b>	

Global Medical Plan:	
Under Age 60	<i>Pre-existing condition exclusion 1</i>
Medical Preferred, Annual Medical and Annual All-Inclusive Plans:	
Under Age 60	<i>Pre-existing condition exclusion 1</i>
Age 60 or older Plan A+	<i>No pre-existing condition exclusion applies.</i>
Age 60 or older PLAN A	<i>Pre-existing condition exclusion 1</i>
Age 60 or older PLAN B and PLAN C	<i>Pre-existing condition exclusion 2</i>
Age 60 or older PLAN D	<i>Pre-existing condition exclusion 4</i>

Travel Canada Plan:	
Under Age 60	<i>No pre-existing condition exclusion applies.</i>
Age 60 or older Plan A+, Plan A, Plan B & Plan C	<i>No pre-existing condition exclusion applies.</i>
Age 60 or older PLAN D	<i>Pre-existing condition exclusion 4</i>

**Pre-existing condition exclusion 1**

We will not pay any expenses relating to:

- a *pre-existing condition* that was not *stable* in the **three (3) months** before *your effective date*; and/or
- *your heart condition*, if, in the **three (3) months** before *your effective date*, it has not been *stable* or *you* have taken any form of nitroglycerine for the relief of angina pain; and/or
- *your lung condition* if, in the **three (3) months** before *your effective date*, it has not been *stable* or *you* required *treatment* with oxygen or prednisone for *your lung condition*.

**Pre-existing condition exclusion 2**

We will not pay any expenses relating to:

- a *pre-existing condition* that was not *stable* in the **six (6) months** before *your effective date*; and/or
- *your heart condition*, if, in the **six (6) months** before *your effective date*, it has not been *stable* or *you* have taken any form of nitroglycerine for the relief of angina pain; and/or
- *your lung condition* if, in the **six (6) months** before *your effective date*, it has not been *stable* or *you* required *treatment* with oxygen or prednisone for *your lung condition*.

**Pre-existing condition exclusion 3**

We will not pay any expenses relating to:

- a *pre-existing condition* that was not *stable* in the **twelve (12) months** before *your effective date*; and/or
- *your heart condition*, if, in the **twelve (12) months** before *your effective date*, it has not been *stable* or *you* have taken any form of nitroglycerine for the relief of angina pain; and/or

- *your lung condition* if, in the **twelve (12) months** before *your effective date*, it has not been *stable* or *you* required *treatment* with oxygen or prednisone for *your lung condition*.

**Pre-existing condition exclusion 4**

We will not pay any expenses relating to:

- a *pre-existing condition* for which *you* have taken, received, or been prescribed medication and/or *treatment* in the **six (6) months** before *your effective date*; and/or
- *your heart condition* for which *you* have taken, received or been prescribed medication and/or *treatment* or *you* have taken any form of nitroglycerine for the relief of angina pain in the **six (6) months** before *your effective date*; and/or
- *your lung condition* for which *you* have taken, received or been prescribed medication and/or *treatment* or *you* required *treatment* with oxygen or prednisone in the **six (6) months** before *your effective date*.

*Visitors Plan – all ages
We will not pay any expenses relating to ...
<ul style="list-style-type: none"><li>• A <i>pre-existing condition</i> for which <i>you</i> have taken, received or been prescribed medication and/or <i>treatment</i> in the...</li><li>• Any heart condition for which <i>you</i> have taken, received or been prescribed medication and/or <i>treatment</i> or <i>you</i> have taken any form of nitroglycerine for the relief of angina pain in the...</li><li>• Any lung condition for which <i>you</i> have taken, received or been prescribed medication and/or <i>treatment</i> or <i>you</i> received <i>treatment</i> with oxygen or prednisone in the...</li></ul>
... <b>6 months</b> before the <i>effective date</i> of insurance. We will not pay any expenses for a <i>pre-existing condition</i> for which <i>you</i> were hospitalized either more than once, or for at least 2 consecutive days, in the <b>12-month</b> period before <i>your effective date</i> of insurance.

2. Any *medical condition* when, prior to departure, *you* had not met all the Eligibility Requirements or truthfully and accurately answered all the questions in the medical *questionnaire* (if applicable).
3. Expenses that exceed \$25,000, if *you* do not have valid coverage under a *government health insurance plan*.  
**(Not applicable to Visitors Plans)**
4. *Covered expenses* that exceed the *reasonable and customary charges* where the medical *emergency* happens.
5. *Covered expenses* that exceed 75% of the cost *we* would normally have to pay under this insurance, if *you* do not contact the Assistance Centre at the time of the *emergency*, unless *your medical condition* makes it medically impossible for *you* to call (in that case, the 25% co-insurance does not apply).
6. Any *treatment* that is not for an *emergency*.
7. The continued *treatment* of a *medical condition* when *you* have already received *emergency treatment* for that condition during *your trip* and *our* medical advisors determine that *your medical emergency* has ended.

8. *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* 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 *your effective date*; and/or
  - that had caused *your physician* to advise *you* not to travel.
9. An *emergency* resulting from: hang-gliding, rock climbing, *mountaineering*, participating in a motorized speed contest; or *your* professional participation in a sport, snorkeling or scuba-diving when that sport, snorkeling or scuba-diving is *your* principal paid occupation.
10. Suicide, attempted suicide, or an intentional self-inflicted injury whether sane or insane.
11. Committing or attempting to commit a criminal act.
12. Not following recommended or prescribed therapy or *treatment*.
13. Any *medical condition*, sickness, death, or *injury* related directly or indirectly to *your* abuse of medication(s), drug(s), alcohol, or any other toxic substance(s).
14. A mental or emotional disorder (other than acute psychosis) that does not require admission to a *hospital*.
15. *Your* routine prenatal care, a *child* born during *your trip*, *your* pregnancy or childbirth, or complications of *your* pregnancy or childbirth when they happen in the 9 weeks before or after the expected date of delivery.
16. For insured *children* under 2 years of *age*: any *medical condition* related to a birth defect.
17. 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.
18. Any *emergency* that occurs or re-occurs after *our* medical advisors recommend that *you* return *home* following *your emergency*, and *you* choose not to.
19. An *act of war* or *act of terrorism*. For all Plans, except Visitors, limited coverage applies with respect to an *act of terrorism*. See Terrorism Coverage provision.
20. Any loss resulting from:
  - a specific or related *medical condition* which *you* contracted in a foreign country during *your trip*; and/or
  - an *act of war* or an *act of terrorism*, when, before *your effective date*, a written formal warning was issued by Foreign Affairs and International Trade Canada, advising Canadians not to travel to that country, region or city.
21. **Specifically for Visitors Plans**, any claim within the *waiting period* that is not the result of an accidental bodily *injury* if *you* purchase this insurance after *your* arrival date in Canada.
22. **Specifically for Visitors Plans**, charges in excess of:
  - i) \$150,000 in total if *you* have purchased the \$150,000 plan;
  - ii) \$100,000 in total under the \$100,000 plan;
  - iii) \$50,000 in total under the \$50,000 plan or
  - iv) \$25,000 under the \$25,000 plan.

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

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

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

## ‡ BAGGAGE LOSS, DAMAGE & DELAY INSURANCE

Included in All-Inclusive, Canada All-Inclusive, Non-Medical Inclusive, Annual All-Inclusive and Baggage and Personal Effects Plans.

*Your* maximum coverage under this policy cannot exceed **\$2,000 per trip**.

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

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

1. The *reasonable and customary charges* for the replacement of a lost or stolen passport, driver's licence, birth certificate or travel visa. In addition, we will cover up to a maximum of \$200 per *trip* for travel and accommodation expenses *you* actually incur while waiting to receive the replacement travel documents.
2. Up to \$500 in total per *trip* for necessary toiletries and clothing when *your* checked luggage is delayed by the carrier for at least 10 hours while *you* are en route. This benefit is payable only when the delay happens before *your* return *home*.
3. Up to \$100 per day to a maximum of \$500 in total for the rental of golf clubs or ski equipment or for the purchase of reasonable golf accessories (golf balls, gloves, tees, etc.) or ski accessories (ski equipment includes snowboards, bindings, boots or poles, etc.) in the event *your* checked golf clubs or ski equipment are delayed by the *common carrier* for at least 10 hours while *you* are en route. This benefit is payable only when the delay happens before *your* return *home*.
4. Up to \$300 per *trip* for any item or set of items which is lost or damaged during *your trip* to a maximum of \$1,500 (if *you* have purchased the Baggage and Personal Effects Plan, we will pay up to the maximum covered amount *you* selected when *you* purchased this insurance). Jewellery or cameras (including camera equipment) are respectively considered a single item.



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

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

1. Animals, perishable items, bikes that are not checked as baggage with the *common carrier*, household items and furniture, artificial teeth or limbs, hearing aids, glasses of any type, contact lenses, money, tickets, securities, documents, items related to *your* occupation, antiques or collector items, items that are fragile, items that are obtained illegally, or articles that are insured on a valued basis by another insurer.
2. Damage or loss resulting from wear and tear, deterioration, defect, mechanical breakdown, *your* imprudence or omission.
3. Unaccompanied baggage, any items that are left unattended, personal property left in an unattended *vehicle* or unlocked trunk and any jewellery or cameras placed in the custody of a *common carrier*.
4. In instances of theft, losses unreported to authorities.
5. Any loss resulting from an *act of war* or an *act of terrorism* while *you* are at destination, when, before *your effective date*, a written formal warning was issued by Foreign Affairs and International Trade Canada, advising Canadians not to travel to that country, region or city.

See other conditions under How to Make a Claim.

## FLIGHT & TRAVEL ACCIDENT INSURANCE

Included in All-Inclusive, Canada All-Inclusive, Non-Medical Inclusive and Annual All-Inclusive Plans.

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

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

1. If an accidental bodily *injury* sustained during *your trip* causes *you* to die, to become completely and permanently blind in both eyes or to have two of *your* limbs fully severed above *your* wrist or ankle joint in the 12 months after the accident, we will pay \$100,000 under Flight Accident Insurance; or \$50,000 under Travel Accident Insurance as included in All-Inclusive, Canada All-Inclusive, Non-Medical Inclusive and Annual All-Inclusive Plans.
2. If an accidental bodily *injury* sustained during *your trip* causes *you* to become completely and permanently blind in one eye or to have one of *your* limbs fully severed above *your* wrist or ankle joint in the 12 months after the accident, we will pay \$50,000 under Flight Accident Insurance or \$25,000 under Travel Accident Insurance as included in All-Inclusive, Canada All-Inclusive, Non-Medical Inclusive and Annual All-Inclusive Plans.
3. If *you* sustain more than one accidental bodily *injury* during *your trip*, we will pay the applicable insured sum only for the one accident that entitles *you* to the largest benefit amount.

For Flight Accident Insurance, the accident giving rise to *your injury* must happen: a) while *you* are travelling on a commercial

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

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

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

1. Hang-gliding, rock climbing, *mountaineering*, parachuting or skydiving; participating in a motorized speed contest; or *your* professional participation in a sport, snorkeling or scuba-diving when that sport, snorkeling or scuba-diving is *your* principal paid occupation.
2. Piloting an aircraft, learning to pilot an aircraft, or acting as a member of an aircraft crew.
3. Suicide, attempted suicide, or an intentional self-inflicted injury whether sane or insane.
4. A criminal act or an attempt to commit such an act by *you* or *your* beneficiary.
5. Not following recommended or prescribed therapy or *treatment*.
6. Any *medical condition*, sickness, death, or *injury* related directly or indirectly to *your* abuse of medication(s), drug(s), alcohol, or any other toxic substance(s).
7. A mental or emotional disorder (other than acute psychosis) that does not require admission to a *hospital*.
8. A loss caused directly or indirectly from an existing disease or bodily infirmity, even if the proximate cause of its activation or reactivation is the result of an accidental bodily *injury*.
9. An *act of war* or *act of terrorism*. Limited coverage applies with respect to an *act of terrorism* as described in the Terrorism Coverage provision.
10. Any loss resulting from:
  - a specific or related *medical condition* which *you* contracted in a foreign country during *your trip*; and/or
  - an *act of war* or an *act of terrorism*, when, before *your effective date*, a written formal warning was issued by Foreign Affairs and International Trade Canada, advising Canadians not to travel to that country, region or city.

## ✚ RENTAL VEHICLE DAMAGE INSURANCE

Included in *Rental Vehicle* Damage Plan.

**Benefits – What does Rental Vehicle Damage Insurance cover?**  
We will cover the following *Rental Vehicle* Damage Insurance benefits:

1. Up to \$60,000 for the liability imposed upon *you* by law or assumed by *you* under the *vehicle* rental agreement, and resulting from physical loss or damage to a *rental vehicle* while it is under *your* care, custody and control, or that of a person who is permitted to operate the *rental vehicle*



- under the rental agreement; for the number of days of coverage purchased; and for a maximum of 45 days.
- Benefits include: a) *our* investigation, negotiation or settlement of *your* claim on *your* behalf and as *we* deem appropriate, b) *our* defending in *your* name, on *your* behalf and at *our* cost, any civil action brought against *you* on account of the loss or damage to the *rental vehicle*, c) *our* payment of all costs assessed against *you* in any civil action *we* defend and any interest accruing after judgment upon that part of the judgment that is within the limit of the insurer's liability, and d) *our* payment of towing costs, general average, salvage, fire department charges, customs duties and reasonable costs for loss of use of the *rental vehicle* for which *you* are responsible.
  - This insurance is valid only if *you* book *your vehicle* rental with the travel agent with whom *you* book *your trip*.
  - If the commercial rental agency requires it, *you* must examine the *rental vehicle* and record, in writing, all existing damages before accepting the *rental vehicle*, and keep a copy of that damage record in case *you* have a claim.

**Exclusions & Limitations – What does *Rental Vehicle Damage Insurance* not cover?**

For *Rental Vehicle Damage Insurance*, *we* will not cover expenses or benefits for:

- Contents of the *rental vehicle*, liability other than for loss of or damage to the *rental vehicle*, or expenses assumed or waived by the *vehicle* rental agency or its insurers or payable under any other insurance.
- Loss or damage arising from, caused by or contributed to by driving or operation of the *rental vehicle* by *you* or any other person while a) under the influence of intoxicating substances, b) participating in a speed test or contest, c) carrying passengers for compensation or hire, d) being used for commercial delivery, transporting contraband or illegal trade, or e) in violation of the terms of the *rental vehicle* agreement.
- Loss or damage arising from, caused by, or contributed to by: a) the mechanical failure or breakdown of any part of the *rental vehicle*, rusting, corrosion, wear and tear, gradual deterioration, inherent defect, or freezing; b) the conversion or any dishonest act committed by *you* or any other party of interest, *your* employees or agents, or any person to whom the property may be entrusted (bailees for hire excepted); c) *your* failure to preserve or protect the property, or *your* neglect or abuse of the property; or d) contamination by radioactive material.
- An *act of war* or *act of terrorism*.

**TERRORISM COVERAGE**

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

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

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

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

Type of Coverage	Maximum Aggregate for Each Act of Terrorism (CDN\$)
Emergency Medical	\$35,000,000
Trip Cancellation & Trip Interruption	\$2,500,000

If, in *our* judgment, the total of all payable claims under one or more *acts of terrorism* may exceed the applicable limits, *your* prorated claim may be paid after the end of the calendar year in which *you* qualify for benefits.

**Exclusion to this Terrorism Coverage provision**

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

## WHAT ELSE DO YOU NEED TO KNOW?

Coverage under this policy is issued on the basis of information provided in *your* application (including the medical *questionnaire* if required). *Your* entire contract with *us* consists of: this policy; *your* application for this policy (including the completed and signed medical *questionnaire*, if required); 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, extension or top-up of coverage for benefits under this policy.**

This policy is non-participating. *You* are not entitled to share in *our* divisible surplus. Neither *we* nor *our* agents or administrators are responsible for the availability, quality or results of any medical *treatment* or transportation, or for *your* failure to obtain medical *treatment*.

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

This policy shall be governed by and construed in accordance with the laws of the province or territory of residence of the insured. For Visitors to Canada, this policy shall be governed by the laws of the Canadian province or territory where this policy was issued.

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

### Premium

The required premium is due and payable at the time of purchase and will be determined according to the schedule of premium rates then in effect. Premium rates and policy terms and conditions are subject to change without prior notice. Upon payment of premium, this document becomes a binding contract provided it is accompanied by a *confirmation* upon which a contract number appears and *we* have received *your* completed application (including the *questionnaire*, if applicable) prior to *your* departure date. If the premium is insufficient for the period of coverage selected, *we* will:

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

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

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

The plans outlined in this policy are second payor coverages. 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 plan providing *hospital*, medical or therapeutic coverage or any other third party liability insurance in force concurrently herewith, amounts payable hereunder are

limited to that portion of *your* expenses, incurred outside the province or territory of residence, that are in excess of the amounts for which *you* are insured under such coverage.

Total benefits paid to *you* by all insurers cannot exceed *your* actual expenses. *We* will coordinate the payment of benefits with all insurers who provide *you* with benefits similar to those provided under this insurance (except if *your* current or former employer provides *you* with an extended health insurance plan with a lifetime maximum coverage of \$50,000 or less), to a maximum of the largest amount specified by any such insurer. In addition, *we* have full rights of subrogation. In the event of a payment of a claim under this policy, *we* will have the right to proceed, in *your* name, but at *our* expense, against third parties who may be responsible for giving rise to a claim under this policy. *You* will execute and deliver such documents as are necessary and cooperate fully with *us* to allow *us* to fully assert *our* rights. *You* must do nothing to prejudice such rights.

If *you* are insured under more than one insurance policy underwritten by *us*, the total amount *we* pay to *you* cannot exceed *your* actual expenses; and the maximum *you* are entitled to is the largest amount specified for the benefit in any one policy. If the total amount of all accident insurance *you* have under policies issued by *us* is more than \$100,000, *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.

## HOW TO MAKE A CLAIM

**In the event of an *emergency*, call the Assistance Centre immediately, prior to receiving *treatment*:**  
**1 800 211-9093** toll-free from the USA and Canada or  
**+1 (519) 251-7821** collect where available. The Assistance Centre is ready to assist *you* 24 hours a day, 365 days a year. Please note that **if *you* do not call** the Assistance Centre in an *emergency*, ***you* will have to pay 25% of the eligible medical expenses** *we* would normally pay under this policy (25% co-insurance).

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

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

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

To make a claim for benefits under this policy, *your* written proof of claim and *your* fully completed Manulife Global Travel Insurance claim form(s) must be submitted to *us* within 90 days (30 days for *Rental Vehicle* Damage) after the event, but not more than 12 months after the date of such event or loss.

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

Written claims correspondence should be mailed to:

Manulife Global Travel Insurance  
c/o Manulife Financial  
PO Box 11007  
Stn Centre Ville  
Montreal, QC H3C 4T9

*You* may also call the Assistance Centre directly for specific information on how to make a claim or to inquire about *your* claim status at: **1 866 298-2722**

For coverage information or general enquiries, please contact *your* travel agent.

**If *you* are making a *Trip Cancellation & Interruption Insurance* claim,** *we* will need proof of the cause of the claim, including: a) a medical certificate completed by the attending *physician* and stating why travel was not possible as booked, if the claim is for medical reasons; or b) a report from the police or other responsible authority documenting the reason for the delay if *your* claim is due to a misconnection. *We* will also need, as applicable: a) complete original unused transportation tickets and vouchers; b) original passenger receipts for the new tickets *you* had to purchase; c) original receipts for the travel arrangements *you* had paid in advance and for the extra hotel, meal, telephone and taxi expenses *you* may have had; d) any other invoice or receipt supporting *your* claim; and e) the entire medical file of any person whose health or *medical condition* is the reason for *your* claim.

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

**If *you* are making an *Emergency Medical Insurance* claim,** *we* will need: a) original itemized receipts for all bills and invoices; b) proof of payment by *you* and by any other benefit plan; c) medical records including complete diagnosis by the attending *physician* or documentation by the *hospital*, which must support that the *treatment* was *medically necessary*; d) proof of the accident if *you* are submitting a claim for dental expenses resulting from an accident; e) proof of travel (including

departure and return dates); and f) *your* historical medical records (if *we* determine applicable). For the Visitors Plans, *we* would also need a copy of *your* airfare ticket and passport or receipts confirming travel dates and entry into Canada.

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

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

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

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

**If *you* are making a *Rental Vehicle Damage Insurance* claim,** the following conditions apply:

1. *We* will need: a) *your rental vehicle* invoice, b) *your* rental agreement with the record of the damages that existed when *you* picked up the *rental vehicle*, c) the police report and *rental vehicle* agency report, and d) an estimate of repair costs or the repair bill.
2. *You* must not undertake any repairs other than those that are immediately necessary for the protection of the *rental vehicle* from further loss or damage, nor remove any physical evidence of the loss or damage without *our* consent.

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

Except in the case of *your* death, *we* will pay the *covered expenses* under this insurance to *you* or the provider of the service. Any sum payable for loss of life will be payable to *your* estate. *You* must repay *us* any amount paid or authorized by *us* on *your* behalf if *we* determine that the

amount is not payable under *your* policy. All amounts shown throughout this contract are in Canadian dollars. If currency conversion is necessary, *we* will use *our* exchange rate on the date *you* received the service outlined in *your* claim. *We* will not pay for any interest under this insurance.

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

If *you* disagree with *our* claim decision, the matter may be submitted to arbitration under the arbitration law in the Canadian province or territory where *you* reside at the time of application for this policy, or for the Visitors Plans, where *your* policy was issued in Canada.

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.

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

## DEFINITIONS

When italicized in this policy, the term:

**Act of terrorism** means any activity, occurring within a 72-hour period, save and except an *act of war*, against persons, organizations, property (whether tangible or intangible) or infrastructure of any nature by an individual or a group based in any country that involves the following or preparation for the following:

- use of, or a threat to use, force or violence; or
- commission of, or a threat to commit, a dangerous act; or
- commission of, or a threat to commit, an act that interferes with or disrupts an electronic, information or mechanical system;

and the effect or intention of the above is to:

- intimidate, coerce or overthrow a government (whether de facto or de jure) or to influence, affect or protest against its conduct or policies; or
- intimidate, coerce or instill fear in the civilian population or any segment thereof; or
- disrupt any segment of the economy; or
- further political, ideological, religious, social or economic objectives or to express (or express opposition to) a philosophy or ideology.

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

**Age** means *your age* as calculated at time of application. For Visitors Plans, *age* means *your age* on the *effective date* of *your* coverage as per *your confirmation*.

**Change in medication** means the medication dosage, frequency or type has been reduced, increased or stopped, and/or new medication(s) has/have been prescribed.

**Exceptions:** the routine adjustment of Coumadin, warfarin or insulin (as long as they are not newly prescribed or stopped) to test *your* blood levels; and a change from a brand name medication to a generic brand medication of the same dosage.

**Child, Children** means an unmarried, dependent son or daughter or *your* grandchild(ren) under the *age* of 21 or, if a full-time student, under the *age* of 26. Also, an unmarried dependent son or daughter of any *age*, if mentally or physically handicapped. In addition, a *child* must be at least 31 days old to be covered under this policy.

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

**Confirmation** means the document or set of documents confirming *your* insurance coverage under this policy and, where applicable, *your trip* arrangements. It includes the medical *questionnaire*, if required, and the application for this policy, once *you* have completed and submitted it with the required premium to *us*. 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*.

**Covered expenses** means *reasonable and customary charges* *you* incur for supplies and services which are eligible expenses under the *Emergency Medical Insurance* provisions and which are either in excess of and/or not covered under *your government health insurance plan* or any other plan.

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

**Departure date** means the date *you* leave *home* unless *you* requested *your* coverage to start when *you* leave Canada. For the Visitors Plans, it means the date *you* leave *home*.

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

- For *Trip Cancellation* included in the All-Inclusive, Canada All-Inclusive, Non-Medical Inclusive and *Trip Cancellation* Plans, coverage starts at the date and time *you* pay the premium for that coverage, indicated as the purchase date on *your confirmation*.



- For *Trip Cancellation Insurance* included in the Annual All-Inclusive Plan, coverage starts initially on the date and time *you* pay the premium for that coverage, indicated as the purchase date on *your confirmation*, provided *you* have already purchased *your* prepaid travel arrangements. After that date, coverage starts each time *you* purchase *your* prepaid travel arrangements.
- *Rental Vehicle Damage Insurance* starts when *you* legally assume control of the *rental vehicle* as indicated on *your* rental contract.
- The Visitors Plans coverages start on the later of: i) the *effective date* of insurance as shown on *your confirmation*; or ii) the time and date *you* arrive in Canada from *home*.
- For *Emergency Medical Insurance* included in the Annual Medical and Annual All-Inclusive Plans, coverage starts initially on *your first travel date* and after that date, it starts every time *you* leave *home*. For the Annual Medical Plan, the *first travel date* must fall within 3 months of purchase.
- All other coverages start on *your departure date*, as indicated on *your confirmation*.

**Emergency** means a sudden and unforeseen occurrence of a *medical condition* that begins during the period of insurance and requires immediate *treatment*. An *emergency* no longer exists when the Assistance Centre determines that *you* are able to continue *your trip* or return *home*.

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

- For *Trip Cancellation Insurance*, *your* coverage ends on *your departure date* as indicated on *your confirmation*.
- *Rental Vehicle Damage Insurance* ends on the earliest of:
  - a) the date the rental agency reassumes control of the *rental vehicle* or the rental contract ends;
  - b) the *expiry date* as shown on *your confirmation*;
  - c) when the number of days of coverage *you* purchased expires; or
  - d) 45 days after the rental contract started.
- The Visitors Plans coverages end on the earliest of the following:
  - a) the date *you* leave Canada to return *home*;
  - b) when the number of days of coverage *you* purchased expires, as per *your confirmation*;
  - c) no more than 365 days after *your effective date* of insurance;
  - d) the first day *you* become insured under a Canadian *government health insurance plan*.
- Other coverages end on the earliest of these dates:
  - a) the date *you* return *home*;
  - b) on the *expiry date*, as shown on *your confirmation*; or
  - c) when the number of days of coverage *you* purchased expires.

**First travel date** means *your* planned *departure date*, as recorded on *your confirmation*.

**Government health insurance plan** means the health insurance coverage that a Canadian provincial or territorial government provides to its residents; or for the Visitors Plans, coverage that governments of *your home* or *your* country of residence provide to *you*.

**Home** means *your* Canadian province or territory of residence. If *you* requested *your* coverage to start when *you* leave Canada, *home* means Canada. In the case of *Trip Interruption*, Flight and Travel Accident, and Baggage Insurance, it means the place *you* leave from on the first day of coverage and are scheduled or ticketed to return to on the last day of coverage. For the Visitors Plans, it 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 in-patients 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, step-grandparent, grandchild, in-law, natural or adopted child, step-child, brother, sister, step-brother, step-sister, aunt, uncle, niece or nephew.

**Injury** means sudden bodily harm that *you* sustain and that is caused by external and purely accidental means, directly and independently of illness or disease and all other causes.

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

**Medical attention** means *treatment* required for the immediate relief of an acute symptom or that, according to a *physician*, cannot be delayed until *you* return *home*. It must be ordered by and received from a licensed *physician* during the *trip* or received from a physiotherapist, chiropractor, osteopath, chiropodist or podiatrist during the *trip*.

**Medical condition** means *injury*, illness or disease, complication of pregnancy within the first thirty-one (31) weeks of pregnancy, or a mental or emotional disorder that requires admission to a *hospital*, or acute psychosis.

**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) could not be omitted without adversely affecting *your* condition or quality of medical care; d) cannot be delayed until *your* return *home*; and e) is delivered in the most cost-effective manner possible, at the most appropriate level of care and not primarily for reasons of convenience.



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

**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 *you* or a member of *your immediate family*.

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

**Pre-existing condition** means a *medical condition* that exists before *your effective date* of insurance.

**Professional career program** means a registered course where a formal examination takes place at a set date and time.

**Questionnaire** means the document *you* must fill out truthfully and accurately to confirm *your* eligibility and rate category for *our* Medical Preferred, Travel Canada, Annual Medical or Annual All-Inclusive Plans. *You* must also fill out a *questionnaire* if *you* are purchasing a plan that includes *Trip Cancellation & Interruption Insurance*, and the non-refundable value of *your trip* is \$20,000 or more.

**Reasonable and customary charges** means costs that do not exceed the standard fee of other providers of similar standing in the same geographical area, when providing the same *treatment* for a similar sickness or *injury*.

**Rental vehicle** means a private passenger automobile, mini-van, self-propelled mobile home, self-propelled camper truck or self-propelled trailer that *you* use during *your trip* and rent, under a written contract, from a commercial rental agency licensed under the laws of its jurisdiction. *We* do not mean any of the following: truck, van, bus, sport utility vehicle while *you* use it off road, automobile designed and manufactured primarily for off-road use while it is being used off road, motorcycle, moped, motorbike, recreational vehicle (other than self-propelled motor homes), all-terrain vehicle, non self-propelled camper, non self-propelled trailer, automobile that is more than 20 years old, limousine, or exotic vehicle of these or similar makes: Aston Martin, Bentley, Ferrari, Porsche or Rolls Royce.

**Spouse** means someone to whom one is legally married, or with whom one has been living in a conjugal relationship for at least one full year before the *effective date* of this insurance.

**Stable** means a *medical condition* for which:

- there have been no new symptoms, and existing symptoms have not become more frequent or more severe or there have been no test results showing deterioration; and/or

- a *physician* has not determined that the condition has become worse; and/or
- a *physician* (or other medical professional) has not prescribed or recommended a *change in medication* taken or medical care received for that condition; and/or
- a *physician* (or other medical professional) has not prescribed or recommended a change in *treatment* for that condition; and/or
- there has been no admission to a *hospital* and/or *you* are not awaiting results of further investigation for that *medical condition*.

**Travel companion** means someone who shares *trip* arrangements and accommodations with *you*. No more than four (4) individuals (including the insured) will be considered *travel companions* on any one *trip*.

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

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

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

**Treatment** means a medical, therapeutic or diagnostic procedure prescribed, performed or recommended by a licensed medical practitioner, including but not limited to prescribed medication, investigative testing and surgery related to any sickness, *injury* or symptom.

**Trip** means the period of time that begins on the date *you* leave *home* and ends on the earliest of these dates:

- a) the date *you* return *home*;
- b) the *expiry date*, as shown on *your confirmation*; or
- c) when the number of days of coverage *you* purchased expires.

**Vehicle** includes any private or rental passenger automobile, boat, mobile home, camper truck or trailer home which *you* use during *your trip* exclusively for the transportation of passengers (other than for hire).

**Waiting period** means:

- a) the 48-hour period following *your effective date* of insurance if *you* purchase this insurance within 30 days of arrival in Canada;
- b) the 8-day period following *your effective date* of insurance if *you* purchase this insurance more than 30 days after arrival in Canada.

The *waiting period* applies to any claim that is not the result of an accidental bodily *injury*.

**We, us, our** means First North American Insurance Company (FNA) in connection with Baggage Insurance and coverage for the risks identified with # throughout this document; and The Manufacturers Life Insurance Company (Manulife Financial) in connection with all other coverages under this policy. The participation of the insurers is several and not joint and none of them will under any circumstances participate in the interest and liabilities of any of the others.

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

## NOTICE ON PRIVACY

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

**Notice on Privacy and Confidentiality.** The specific and detailed information requested on the application form is required to process the application. To protect the confidentiality of this information, Manulife Financial will establish a "financial services file" from which this information will be used to process the application, offer and administer services and process claims. Access to this file will be restricted to those Manulife Financial employees, mandataries, administrators or agents who are responsible for the assessment of risk (underwriting), marketing and administration of services and the investigation of claims, and to any other person *you* authorize or as authorized by law. These people, organizations and service providers may be in jurisdictions outside Canada, and subject to the laws of those foreign jurisdictions. *Your* file is secured in *our* offices or those of *our* administrator or agent. *You* may request to review the personal information it contains and make corrections by writing to: Privacy Officer, Affinity Markets, Manulife Financial, P.O. Box 4213, Stn. A, Toronto, Ontario M5W 5M3.

## HELP IS JUST A PHONE CALL AWAY.

Enjoying *your trip* should be the first thing on *your* mind. *Our* multilingual Assistance Centre is there to help and support *you* 24 hours a day, 365 days a year with:

### **Pre-Trip Information**

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

### **During A Medical *Emergency***

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

### **Other Services**

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

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

**1 800 211-9093** toll-free from the USA and Canada  
**+1 (519) 251-7821** collect where available.

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*Our Assistance Centre is there to help you*  
24 hours a day, 365 days a year



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