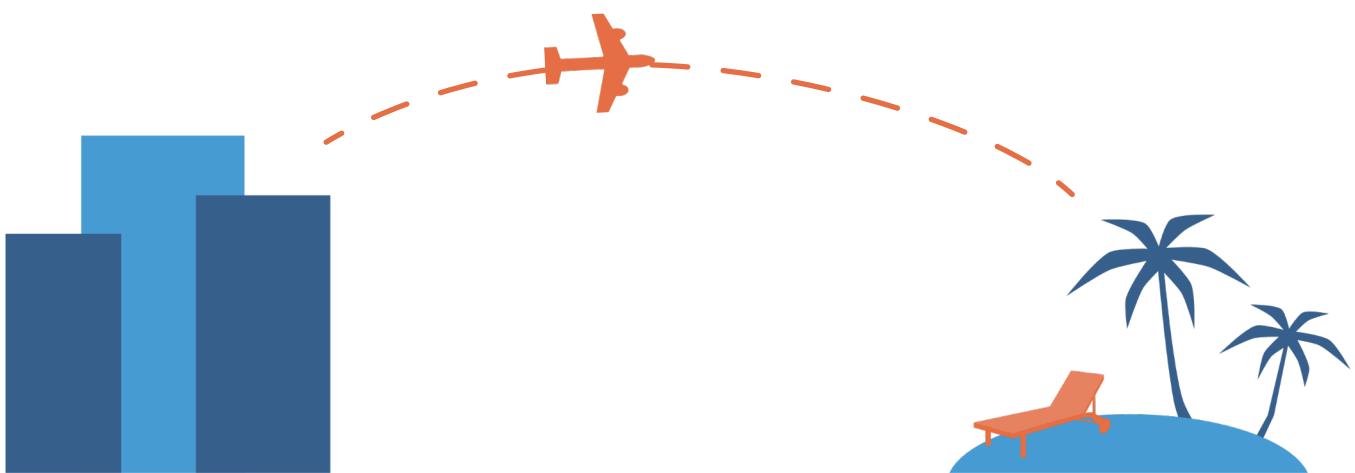




Emergency Medical Insurance

Xodus Travel Services Inc.

Effective: January 2, 2025



Underwritten by: Northbridge General Insurance Corporation

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SECTION 1 – GENERAL INFORMATION



This policy is underwritten by Northbridge General Insurance Corporation (“Northbridge”).

Northbridge has appointed Xodus Travel Services Inc. (operating as Xodus) as the administrator under this policy.



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



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.



10-Day Free Look – If you notify us within 10 days of *your* purchase date, as indicated on *your confirmation*, that *you* are not completely satisfied with *your* policy, we will provide a full refund if *you* have not already departed on *your trip* and there is no claim in progress. Refunds are only available when we receive *your* request for a refund before *your departure date*.

SECTION 2 – IMPORTANT INFORMATION

PLEASE TAKE TIME TO READ THROUGH YOUR POLICY BEFORE YOU TRAVEL

You have purchased a travel insurance policy – what's next? We want *you* to understand (and it is in *your* best interest to know) what *your* policy includes, what it excludes, and what is limited (payable but within limits).

- Travel insurance covers claims arising from sudden and unexpected situations (i.e. accidents and emergencies) and typically does not cover follow-up or recurrent care.
- To qualify for this insurance, *you* must meet all of the eligibility requirements.
- This insurance contains limitations and exclusions (i.e. *medical conditions* that are not disclosed by *you*, pregnancy, *your child* born on *your trip*, excessive use of alcohol, high risk activities).
- In the event of a claim *your* prior medical history may be reviewed.
- If *you* have been asked to complete a *medical declaration* and any of *your* answers are not accurate or complete, *your* policy may be voidable.

IMPORTANT: If *you* have any *change in health status*, including but not limited to a *change in medication* or *treatment* between the date *you* completed the application for this coverage and *your effective date*, *you* must either go to www.xodus.ca and modify *your medical declaration* or notify *us* by calling **+1 866-424-0825** or **+1 416-987-1250**. In addition, if *you* have purchased a Multi-Trip Plan, *you* must also notify *us* if there is any *change in health status*, *treatment* or *change in medication* after *your effective date*. Otherwise, any such change may render *your* policy voidable by *us*.



It is *your* responsibility to understand *your* coverage.
If *you* have questions, call Xodus Travel Services Inc. at:

[+1 866-424-0825](#) or [+1 416-987-1250](#)

SECTION 3 – IN THE EVENT OF AN EMERGENCY

If *you* have a medical *emergency*, *you* must notify the Assistance Centre before obtaining *emergency treatment* so that *we* may confirm coverage and provide pre-approval of *treatment*. Please note that if *you* do not notify the Assistance Centre without reasonable cause, *you* may have to pay 25% of the eligible medical expenses *we* would normally pay under this policy. If it is medically impossible for *you* to contact the Assistance Centre, please have someone contact *us* on *your* behalf.

We reserve the right, as reasonably required, to transfer *you* to any *hospital* or to transport *you* to Canada following an *emergency*.

If *you* refuse to be transferred or transported when *you* are declared medically fit to travel, any continuing costs incurred after *your* refusal will not be covered and the payment of such costs becomes *your* sole responsibility. All coverage ceases upon *your* refusal to be transported, and no coverage will be provided to *you* for the remainder of the *trip*.

SECTION 4 – ELIGIBILITY

TO BE ELIGIBLE FOR INSURANCE UNDER THIS POLICY, *you* must, prior to the purchase date and/or *effective date*:

- be a resident of Canada and covered under a *government health insurance plan* for the entire duration of *your trip*;
- have purchased coverage for the entire duration of *your trip* away from *home*;
- be at least thirty (30) days of *age*;
- not have been advised by a *physician* to avoid travel;
- not have a terminal illness or metastatic cancer;
- not require kidney dialysis;
- not have been prescribed or used home oxygen in the last twelve (12) months; and/or
- never have had a bone marrow, stem cell or organ transplant (except corneal transplant).

In addition, *we* must have received *your* completed application (including the medical declaration), *you* must have had *your* health history reviewed by *us*, received a *Medical Underwriting Agreement* from *us*, and paid the required premium in full.

SECTION 5 – EMERGENCY MEDICAL INSURANCE

This policy provides *emergency* medical coverage for the plan type *you* have purchased:

- a Single-*Trip* plan for travel outside *your* province of residence or Canada, or
- a Multi-*Trip* plan for an unlimited number of *trips* outside *your* province of residence or Canada, taken within one (1) year of the *effective date* for the *trip* length as shown on *your confirmation*.

What does **Emergency Medical Insurance** cover?

Emergency Medical Insurance covers *you* for up to \$10,000,000 CDN of covered expenses as a result of an *emergency* while on a *trip*, only if these covered expenses are not covered by *your government health insurance plan* or any other benefit plan. If *you* have purchased a multi-*trip* plan, regardless of the number of *trips* taken, the maximum payable for the term of the policy is \$10,000,000 CDN per insured person.

A medical *treatment* plan approved by *your* attending *physician* and accepted by the Assistance Centre, will be developed to provide medically necessary *treatment*. After *your* *emergency medical treatment* has started, the Assistance Centre must assess and pre-approve additional medical *treatment*.

Covered expenses are subject to the policy's limits, exclusions, terms and conditions, and *your deductible* amount as shown on *your* certificate of insurance.

Eligible expenses include:

1. **Expenses for *emergency treatment*** – We will pay for *reasonable and customary* charges for *emergency 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 for *paramedical services*** – We will pay for care received from a licensed chiropractor, osteopath, physiotherapist, chiropodist or podiatrist, up to \$70 CDN per visit to a combined maximum limit of \$700 CDN for a covered *injury*.
3. **Expenses for *ambulance transportation*** – We will pay for *reasonable and customary* charges of local licensed ambulance service to the nearest qualified medical service provider in an *emergency*.
4. **Expenses for *dental treatment*** – If *you* need *emergency dental treatment*, we will pay:
 - a. up to \$300 CDN for the relief of dental pain; or
 - b. if *you* suffer an accidental blow to the mouth, up to \$3,000 CDN to repair or replace *your natural or permanently attached artificial teeth* (up to \$2,000 CDN during *your trip* and up to \$1,000 CDN to continue medically necessary *treatment* in the ninety (90) days after the accident).
5. **Extra expenses for meals, hotel, and taxi** – If a medical *emergency* prevents *you* or *your travel companion* from returning *home* as originally planned, or if *your emergency treatment* or that of *your travel companion* requires *your transfer* to a location that is different from *your original destination*, we will reimburse *you* up to \$200 CDN per day to a maximum limit of \$2,000 CDN for *your extra meals, hotel, and taxi fares*. We will only pay for these expenses if *you* have actually paid for them.

- 6. Childcare expenses** – If you are admitted to *hospital* due to a medical *emergency*, we will reimburse up to \$75 CDN per day to a maximum of \$500 CDN for childcare costs incurred by *you* during *your trip* to care for *your children* travelling with *you* and remaining with *you* at *your destination*. Original receipts from the professional childcare provider are required and the professional childcare provider must be someone other than *immediate family* or a *travel companion*.
- 7. Hospital allowance** – When *you* are hospitalized for 48 hours or more due to a medical *emergency* during *your trip*, we will reimburse *you* \$50 CDN per day up to \$300 CDN per policy for *your telephone, parking, and television out-of-pocket expenses*. Expenses must be supported by original receipts.
- 8. Phone call expenses** – We will pay for phone calls to or from *our Assistance Centre* regarding *your medical emergency*. *You* must provide receipts or other reasonable evidence to show the cost of these calls, and the numbers phoned or received during *your trip*.
- 9. Expenses to bring you home** – If *your treating physician* recommends that *you return home* because of *your emergency* or if the Assistance Centre recommends that *you return home* after *your emergency*, when approved and arranged by the Assistance Centre, we will pay for:
 - a. the extra cost of an economy class fare via the most cost-effective itinerary; or
 - b. a stretcher fare on a commercial flight via the most cost-effective itinerary, if a stretcher is medically necessary; and/or
 - c. 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
 - d. the cost of air ambulance transportation, if this is medically necessary.
- 10. Expenses related to your death** – If *you die* during *your trip* from an *emergency* covered under this insurance, we will reimburse *your estate* for:
 - a. Up to \$5,000 CDN for the cost to have *your body* prepared or cremated where *you die* and the cost of the standard transportation container normally used by the airline, plus up to \$5,000 CDN for the return *home of your remains*; or
 - b. Up to \$5,000 CDN to have *your body* prepared or cremated and the cost of a standard burial container, plus up to \$5,000 CDN for *your burial* where *you die*.
- 11. Identification of remains** - If *you die* during *your trip* from an *emergency* covered under this insurance and someone is required to travel to *your place of death* to legally identify *your body*, we will reimburse the economy class airfare via the most cost-effective itinerary for that person, as well as up to \$300 CDN 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 seventy-two (72) hours.
- 12. Return excess baggage** – When approved in advance by the Assistance Centre, up to \$300 CDN for the return of *your excess baggage*. This benefit is payable if *you return home* under Benefit #9 and #10.
- 13. Pet Return** – If *your domestic dog or cat* travels with *you* during *your trip* and *you return* to Canada under Benefit #9 or #10, we will pay the cost of one-way transportation up to a maximum of \$500 CDN to return *your domestic dog or cat* to Canada.
- 14. Expenses to bring someone to your bedside** – If *you* are travelling alone and are admitted to a *hospital* for three (3) days or more because of a medical *emergency*, we will reimburse the economy class fare via the most cost- effective itinerary for someone to be with *you*. We will also reimburse up to \$1,000 CDN for that person's hotel and meals and cover them with *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 their *hospital admission*.

- 15. Expenses to return *your travel companion*** – When approved in advance by the Assistance Centre, we will cover the extra cost of one-way economy 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 a Northbridge travel insurance policy) *home*, if *you return home* under Benefit #9 or #10 above.
- 16. Expenses to return *children under your care*** – If *you* are admitted to *hospital* for more than twenty-four (24) hours or must return *home* because of an *emergency*, when approved in advance by the Assistance Centre, we will pay for the extra cost of one-way economy class airfare to return the *children home* via the most cost-effective itinerary and the return economy class airfare via the most cost-effective itinerary for a qualified escort when the airline requires it. The *children* must have been under *your care* during *your trip* and covered under a Northbridge travel insurance policy.
- 17. Expenses for *vehicle* return** – If, because of a medical *emergency*, *you* or *your travel companion* are unable to drive *home* the *vehicle* *you* used during *your trip*, when approved in advance by the Assistance Centre, we will cover up to \$3,000 CDN charged by a commercial agency to bring *your vehicle home*. Or, if *you* rented a *vehicle* during *your trip*, up to \$3,000 CDN for its return to the rental agency.
- 18. Qualified medical attendant** – Covers the reasonable expenses for the services of a medical attendant. These services must be on the recommendation of a *physician* as a result of a medical *emergency* occurring at travel and must be approved in advance by the Assistance Centre.

What is not covered under *Emergency Medical Insurance*?

Emergency Medical Insurance does not cover expenses relating directly or indirectly to:

- 1. Misrepresentation:** Any *emergency* when, prior to the purchase date and/or *effective date*, *you* had not met all the eligibility requirements or truthfully and accurately answered all the questions in the *medical declaration* (if applicable) and/or any *emergency* relating to any *pre-existing condition* not listed on the *Medical Underwriting Agreement*.
- 2. Unreported changes in health:** Any *change in health status* occurring after *your application date* and not reported prior to *your effective date*. If *you* purchased a *Multi-Trip Plan*, any *change in your health status* occurring after *your effective date* that has not been reported and reassessed for continued coverage under the terms of this policy.
- 3. Reasonable and customary:** Covered expenses that exceed the *reasonable and customary* charges where the medical *emergency* happens.
- 4. Continued treatment:** The continued *treatment* of a *medical condition* or related condition, following *emergency treatment* during *your trip*, if the Assistance Centre determines that *your emergency* has ended.
- 5. Elective treatment:** Any non-emergency, experimental or elective *treatment* such as cosmetic surgery, chronic care, or rehabilitation including any expenses for directly or indirectly related complications.
- 6. Pregnancy and childbirth:** Routine pre-natal or post-natal care; pregnancy, delivery, or complications of either, arising 9 weeks before or after the expected date of delivery; *Your child* born during *your trip*.
- 7. Birth defects:** For insured *children* under two (2) years of *age* any *medical condition* related to a birth defect.
- 8. Not following prescribed treatment:** Any *medical condition* that is the result of *you* not following *treatment* as prescribed to *you* by a licensed medical professional, including prescribed medication.
- 9. Treatment after declining return or transfer:** Any further medical *treatment* if the Assistance Centre determines that *you* should transfer to another facility or return to *your home province/territory* of residence for *treatment*, and *you* choose not to. Any expenses incurred after the date on which *you* have declined an offer of repatriation and/or medical evacuation.

- 10. Trips for the purpose of obtaining medical treatment:** Any *trip* made for the purpose of obtaining a diagnosis, *treatment*, surgery, investigation, palliative care, or any alternative therapy, as well as any directly or indirectly related complication.
- 11. Treatments provided by specified services or suppliers** – Any *treatment*, services or supplies provided by a home for the aged, a rest home, health spa, nursing home, convalescent *hospital*, hospice, palliative care facility, a place for the care and *treatment* of drug addicts or alcoholics, custodial or educational facility, or any rehabilitation facility.
- 12. Reasonable to expect** - Any *medical condition* or symptoms when you knew or for which it was reasonable to believe or expect before *you left home* or before the *effective date* of coverage that:
- *treatment* will be required during *your trip*;
 - for which future investigation or *treatment* was planned before *you left home*;
 - which produced symptoms that would have caused an ordinarily prudent person to seek *treatment* in the three (3) months before leaving *home*; or
 - that had caused *your physician* to advise *you* not to travel.
- 13. Not contacting the Assistance Centre:** Covered expenses, including air transportation, that exceed 75% of the cost we would normally pay under this insurance, if *you* do not contact the Assistance Centre at the time of the *emergency*.
- 14. Treatment requiring pre-authorization:** Any *treatment*, services or supplies not medically necessary, or any medical procedures and/or tests (including MRI, MRCP, CAT Scan, CT Angiogram, Nuclear Stress Test, Angiogram or Cardiac Catheterization) not authorized by the Assistance Centre in advance. All surgery must be authorized by the Assistance Centre prior to being performed except in extreme circumstances where surgery is performed on an *emergency* basis.
- 15. For policy extensions and Top-Ups:** Any *medical condition* which first appeared, was diagnosed, or treated after the scheduled *departure date* and prior to the *effective date* of the policy extension or Top-Up.
- 16. Benefits requiring pre-authorization:** Any benefit that must be authorized or arranged in advance and the Assistance Centre has given no authorization and/or made no arrangement for that benefit.

In addition, refer to General Exclusions.

SECTION 6 – TRAVEL AND FLIGHT ACCIDENT INSURANCE

What does Travel Accident Insurance cover?

Subject to the policy terms and conditions, we will pay up to the maximum according to the following schedule for loss of life, limb or sight resulting directly from an *injury*:

- Up to \$50,000 CDN if an *injury* 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 joints, within 365 days of the *injury*.
- Up to \$25,000 CDN if an *injury* causes *you* to become completely and permanently blind in one eye, or to have one of *your* limbs fully severed above a wrist or ankle joint, within 365 days of the *injury*.
- If *you* have more than one *injury* during *your trip*, we will pay the applicable insured sum only for the one accident that entitles *you* to the largest benefit amount.
- Loss of life due to disappearance: If there is an accident and *your* body has not been found within 365 days of the accident, it will be presumed, subject to evidence to the contrary, that *you* suffered loss of life.

What does Flight Accident Insurance cover?

Subject to the policy terms and conditions, *we* agree to pay up to \$100,000 CDN for loss of life, limb or sight directly resulting from *injury* occurring during a *trip* while *you* are:

- a. Riding solely as a ticketed passenger in or boarding or disembarking from, a certified multi-engine transportation-type aircraft or passenger aircraft provided by a regularly scheduled airline on any regularly scheduled *trip* operated between licensed airports.
- b. On airport premises immediately before boarding or immediately after disembarking from an aircraft.
- c. Riding as a passenger in an airport limousine or bus, or other *common carrier* provided, and arranged for, by the airline or airport authority, when going to or after being at an airport for the purpose of boarding an aircraft or disembarking from an aircraft.

Coverage is for all eligible flights ticketed and arranged before the *effective date*.

The maximum amount payable for *injury* resulting from one covered event under all Flight Accident Coverage under all policies issued by *us* and administered by the Assistance Centre is \$100,000 CDN.

What is not covered under Travel and Flight Accident Insurance?

See General Exclusions.

SECTION 7 – GENERAL EXCLUSIONS

We will not pay any expenses relating directly or indirectly to:

1. **Aircraft** – An *injury* or loss occurs while *you* are piloting an aircraft, learning to pilot an aircraft, or acting as a member of an aircraft crew.
2. **Commercial Travel** – Any loss resulting when *you* are a driver, the operator, a co-driver, a crew member, or any other passenger on a commercial *vehicle* used for the purpose of delivering goods or carrying a load. This exclusion is not applicable when the commercial *vehicle* is used during *your trip* solely for pleasure purposes and not used for delivering goods or carrying a load.

Air travel other than as a passenger in a commercial aircraft licensed to carry passengers for hire, except while being transported under the terms of the *emergency* transportation or *emergency* return *home* benefits.

3. **High Risk Activities** – Any loss or *emergency* that occurs while *you* are participating in:
 - a. any sporting activity for which *you* are paid;
 - b. any extreme sport or activity involving a high level of risk, such as those indicated below, but not limited to:
 - mountain climbing requiring the use of specialized equipment, including carabiners, crampons, pick axes, anchors, bolts and lead rope or top rope anchoring equipment to ascend or descend a mountain;
 - rock-climbing;
 - parachuting;
 - skydiving;
 - hang-gliding or using any other air supported device;
 - participating in a motorized speed contest; or
 - scuba diving.

4. **Abuse of drugs or alcohol** – Any loss or *medical condition*, including symptoms of withdrawal, arising from, or in any way related to intoxication, chronic use, abuse, overdose or chemical dependence on medication, alcohol, drugs or other intoxicants.
5. **Self-inflicted injuries** – Any loss or *medical condition* resulting from *your* self-inflicted injuries, unless medical evidence establishes that the injuries are related to a mental health illness.
6. **Minor mental or emotional disorder:** Any loss resulting from *your* minor mental or emotional disorder.
7. **Costs recoverable through other sources** – Benefits are not payable for costs which can be reimbursed by any other source, including trustees or any government or industry compensation fund.
8. **Motor vehicle accidents** – Any loss, *sickness* or *injury* resulting from a motor *vehicle* accident where *you* are entitled to receive benefits pursuant to any policy or legislative plan of motor *vehicle* insurance.
9. **Armed forces** – Any losses resulting from *your* participation in armed forces activities.
10. **Sanctions** – Benefits are not payable under this policy for any losses or expenses incurred due to or as a result of *your* travel to a sanctioned country for any business or activity that would violate any Canadian economic or trade sanction law or regulation.
11. **Criminal acts:** Any claim that results from or is related to *your* or *your* beneficiary's commission or attempted commission of a criminal offence or illegal act.
12. **Acts of Terrorism.**
13. **Acts of war.**
14. **Government issued travel advisory:** Any loss or *medical condition* *you* suffer or contract when an official travel advisory issued by the Canadian government states, "Avoid all non-essential travel" or "Avoid all travel" regarding the country, region or city of *your* destination, before *your effective date*. To view the travel advisories, visit the Government of Canada Travel site. This exclusion does not apply to claims for an *emergency* or a *medical condition* unrelated to the travel advisory.

SECTION 8 – COVERAGE PERIODS

When *your* coverage starts

Travel Insurance must be purchased prior to departure from *your* province or territory of residence in Canada and for the entire duration of *your trip* (exceptions apply to Top-Ups).

For a Single *Trip* plan, *your* coverage starts on the later of:

- the date *you* leave *home*; or
- the *effective date* shown on *your confirmation*.

For a Multi-*Trip* plan, *your* coverage starts:

- each date *you* leave *home*; and
- each date *you* leave Canada on or after the *effective date* as stated on *your confirmation*.

When your coverage ends

For a Single Trip plan, your coverage ends on the earliest of:

- the date you return *home*; or
- the *expiry date* shown on your *confirmation*.

For a Multi-Trip plan, your coverage ends on the earliest of:

- the date you return *home*;
- the *expiry date*, as stated on your *confirmation*; or
- when travelling outside Canada, the date you reach the maximum *trip* length you purchased for each *trip*, as stated on your *confirmation*.

Additional details regarding Multi-Trip plans

- Provides coverage for an unlimited number of *trips* taken within one (1) year, commencing with the *effective date* as shown on your *confirmation*.
- Provides you with *emergency* medical coverage for an unlimited number of days of travel within Canada but outside your province or territory of residence.
- Each *trip* taken outside of Canada can be up to the maximum number of days you selected when you purchased your Multi-Trip plan, beginning on the first day you leave Canada.
- For a *trip* to be covered under the benefits of Northbridge *Emergency* Medical Insurance, it must start on or after the *effective date* and end prior to or on the *expiry date* shown on your *confirmation*.

To stay longer than planned

Any extension is subject to the approval of the Assistance Centre. We will not extend any coverage beyond twelve (12) months after the *effective date*.

You may be able to extend your coverage if:

- the total length of your time away from Canada, including top-up or extension, does not exceed the maximum allowed by your *government health insurance plan*; and
- you pay the additional premium; and
- you have had no claim or event that has resulted or may result in a claim under this policy; and
- there has been no *change in your health status*.

For Muti-trip plans, if your *trip*:

If your *trip*:

- is longer than the maximum number of coverage days you have under your current plan; or
- will extend beyond the *expiry date* shown on your *confirmation*, you can either:
 - purchase Top-Up coverage before the *expiry date* of your Multi-Trip plan for any additional travel days; or
 - purchase a new Northbridge Multi-Trip plan, with no lapse in coverage, providing the total duration of the *trip* does not exceed the maximum *trip* length you choose.

When you apply for Top-Up coverage, you will be required to answer questions about your health.

In the event of a claim, *you* will be required to provide proof of *your departure date* and *your return date*. Proof can include *your* plane ticket, train ticket, a stamped passport, and/or a credit card or bank statement showing purchases in Canada just prior to *your departure date*.

Automatic Extension

Coverage will automatically be provided beyond *your expiry date* as shown on *your confirmation* if:

- *your common carrier or vehicle* is delayed. In this case, *we* will extend *your coverage* for up to seventy-two (72) hours; or
- *you or your travel companion* are hospitalized on the *expiry date*. In this case, *we* will extend *your coverage* during the hospitalization up to 365 days or until, in *our* opinion, *you* are stable for discharge from *hospital* or evacuation *home*, whichever is earlier and for up to five (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 five (5) days.

SECTION 9 – VIRTUAL MEDICAL SERVICES

Northbridge is pleased to provide *you* with Virtual Medical Services, on a worldwide basis.

What services are available?

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

The program will assist with coordinating payment of eligible expenses subject to the terms and conditions of the policy.

To access this service, simply utilize the mobile application described in *your* fulfilment documents or call the Assistance Centre using the phone numbers indicated on the wallet card.

SECTION 10 – WHAT ELSE DO YOU NEED TO KNOW?

Coverage under this policy is issued on the basis of information provided in *your medical declaration* and application, the *Medical Underwriting Agreement*, and application. *Your* entire contract with *us* consists of: this policy, *your* application for this policy (including the *medical declaration*), the *Medical Underwriting Agreement*, the *confirmation* issued in respect of that application, and any other amendments or endorsements resulting from extensions 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.

We will not pay a claim if *you*, any person insured under this policy or anyone acting on *your* behalf attempt to deceive *us* or makes a fraudulent, false or exaggerated statement or claim. *You* must be accurate and complete in *your* dealings with *us* at all times.

Despite any other provision of this contract, this contract is subject to the statutory conditions in the Insurance Act respecting contracts of accident and sickness insurance.

Limitation of Liability

This policy is non-participating and *our* liability under this policy is limited solely to the payment of eligible expenses, up to the maximum amount purchased, for any loss or expense. Neither *we*, upon making payment under this policy, nor *our* agents or administrators assume any responsibility for the availability, quality, results or outcome of any *treatment*, transportation or service, or *your* failure to obtain any *treatment*, transportation or service covered under the terms of this policy.

Premium

The required premium is due and payable at the time of purchase and will be determined according to the schedule of premium rates in effect at that time.

Upon payment of the appropriate 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 *medical declaration* and *medical underwriting agreement*) prior to *your* *departure date*. If the premium is insufficient for the period of coverage selected, *we* will charge and collect any underpayment; or shorten the policy period by written endorsement if an underpayment in premium cannot be collected.

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

The coverages outlined in this policy are second payor coverages. Along with this coverage, *you* may have other liability, group or individual, basic or extended health insurance plans or contracts with other insurers including any private or provincial or territorial auto insurance plan providing *hospital*, medical or therapeutic coverage or any other liability insurance. In this case, amounts payable under this insurance are limited to that portion of *your* expenses, incurred outside the province or territory of residence, that are in excess of the amounts insured by *your* other in-force plans or contracts.

Total benefits paid to *you* by all insurers cannot exceed *your* actual expenses. *We* will coordinate the payment of benefits with all insurers who provide *you* with benefits similar to those provided under this insurance (except if *your* current or former employer provides *you* with an extended health insurance plan with a lifetime maximum of \$50,000 CDN or less), to a maximum of the largest amount specified by each 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. In return of payment of benefits (compensation) and up to the amount thereof, *we* become the beneficiary of the rights

and causes of action that *you* might have against anyone responsible for the loss. If *we* can no longer exercise this action due to *your* action or inaction, *we* can be relieved of all or part of its obligations towards *you* or *your* beneficiary.

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.

SECTION 11 – HOW TO MAKE A CLAIM

In the event of *emergency*, call the Assistance Centre immediately at:



[+1 833-754-3725](#) toll-free from the USA and Canada

[+1 416-987-1218](#) collect to Canada from anywhere else in the world

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

Please note that **if *you* do not call** the Assistance Centre in an *emergency* prior to receiving *treatment*, ***you* may 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 contact the Assistance Centre when the *emergency* happens, the 25% co-insurance will not apply. In this case, *we* ask that *you* contact the Assistance Centre as soon as *you* can or that someone do so 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 eligible expenses will be reimbursed to *you* based on 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 due to *sickness*, *injury*, or *disease* during *your trip*, *your* proof of claim should be sent to *us* as soon as possible and in no event later than 12 months from the date of loss. **If *you* are making an *Emergency Medical Insurance* claim, *we* will need:**

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

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

- *We* will need:
 - a police, autopsy or coroner's report;
 - medical records; and
 - a death certificate, as applicable.
- If *your* body is not found within 365 days of the accident, *we* will presume that *you* died of *your* injuries.

To whom will we pay your benefits 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 in the event of *your* 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? Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is barred unless commenced within the time set out in the Insurance Act, or in the Limitations Act in the Canadian province or territory where *your* policy was issued.

To determine the validity of a claim under this policy, *we* may obtain and review the medical records of *your* attending *physician(s)*, including the records of *your* regular *physician(s)* at *home*. These records may be used to determine the validity of a claim whether or not the contents of the medical records were made known to *you* before *you* incurred a claim under this policy. As a condition precedent to recovery of insurance money under this policy, the claimant shall afford *us* an opportunity to examine the person of the person insured when and so often as *we* reasonably require while the claim hereunder is pending; and in the case of death of the person insured, *we* may require an autopsy subject to any law of the applicable jurisdiction relating to autopsies.

IMPORTANT CONTACT INFORMATION

To enquire about *your* claim status, please log into *your* account described in *your* fulfillment documentation or call the Customer Service Centre at [1 833-754-3725](tel:18337543725) or [+1 416-987-0869](tel:14169870869).

For coverage information, general inquiries, or to apply for an extension or refund of premium, please call [+1 866-424-0825](tel:18664240825) or [+1 416-987-1250](tel:14169871250).

Written correspondence regarding claims should be mailed to:

Northbridge General Insurance Corporation
care of Xodus Travel Services Inc.
3215 Electricity Dr.
Windsor On. N8W 5J1

SECTION 12 – DEFINITIONS

When *italicized* in this policy, the term:

Act of terrorism means any activity that involves a threat to use or the actual use of violence or any dangerous or threatening act, or the use of force, where such activity, threat, act, or use is directed against the general public, governments, organizations, properties or infrastructures, or electronic systems, and the intention of such activity, threat, act or use is to:

- instill fear in the general public;
- disrupt the economy;
- intimidate, coerce or overthrow a government (whether that government is legal or illegal); and/or
- promote political, social, religious or economic objectives.

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

Age means *your age at your application date*.

Change in health status means

- there has been any new symptom(s);
- existing symptom(s) have become more frequent or severe;
- a physician has determined that the *medical condition* has become worse;
- test findings have shown that the *medical condition* may be getting worse;
- a physician has provided, prescribed, or recommended any new medication or any *change in medication*;
- a physician has provided, prescribed or recommended any investigative testing, new *treatment* or any change in *treatment*;
- there has been admission to a hospital or referral to a specialty clinic or specialist; or
- there has been testing for which the results have not yet been received.

Change in medication means the medication dosage, frequency, or type has been reduced, increased, stopped and/or new medications have been prescribed. **Exceptions:** the routine adjustment of Coumadin(warfarin) or insulin (as long as they are not newly prescribed or stopped) and there has been no change in *your medical condition*; and a change from a brand name medication to a generic brand medication of the same dosage.

Child, Children means *your* unmarried, dependent son or daughter or *your* grandchild(ren) under the *age* of twenty-one (21) or, if a full-time student, under the *age* of twenty-six (26). Also, an unmarried dependent son or daughter of any *age*, if mentally or physically disabled and dependent on *you* for support.

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

Confirmation means the document or set of documents confirming *your* insurance coverage under this policy and, where applicable, *your trip* arrangements. It includes the *Medical Underwriting Agreement* and application for this policy, once the required premium has been received by *us*.

Deductible means the amount of covered expenses that you are responsible for paying per person, per covered condition or event. Your *deductible* amount in Canadian dollars applies to the amount remaining after any covered expenses are paid by any other benefit plan, and/or *your government health insurance plan*. The insurer will pay eligible expenses for losses incurred in excess of the *deductible* amount.

Departure date means the date *you leave home*.

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

For Single-Trip plans, *emergency* medical coverage starts on the later of:

- the date *you leave home*; or
- the *effective date* shown on *your confirmation*.

For a Multi-Trip plan, *emergency* medical coverage starts each date *you leave home* and each date *you leave Canada* on or after the *effective date* as stated on *your confirmation*.

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

Minor mental or emotional disorder means having anxiety or panic attacks, or being in an emotional state. A *minor mental or emotional disorder* is one where *your treatment* includes only minor tranquilizers or minor anti-anxiety medication (anxiolytics) or no prescribed medication at all.

Physician means a person who is not *you* or a member of *your immediate family* or *your travel companion*, licensed in the jurisdiction where the services *are* exists when the evidence reviewed by the Assistance Centre indicates that no further *treatment* is required at destination or *you* are able to return to *your* province or territory of residence for further *treatment*.

Expiry date means the date *your* coverage ends.

For Single-Trip plans, *emergency medical coverage* ends on the earlier of:

- the date *you* return *home*; or
- the *expiry date* shown on *your confirmation*.

For all Multi-Trip plans, *emergency medical coverage* ends on the earliest of:

- the date *you* return *home*;
- the *expiry date*, as stated on *your confirmation*; or
- when travelling outside Canada, the date *you* reach the maximum *trip* length *you* purchased for each *trip* as stated on *your confirmation*.

Government health insurance plan means the health insurance coverage that the provincial or territorial governments provide to its residents.

Home means *your* Canadian province or territory of residence. If *you* requested coverage to start when *you* leave Canada, *home* means Canada.

Hospital means an institution that is licensed as an accredited *hospital* that is staffed and operated for the care and *treatment* of in-patients and out-patients. *Treatment* must be supervised by *physician(s)* and there must be registered nurses on duty 24 hours a day. Diagnostic and surgical capabilities must also exist on the premises or in facilities controlled by the establishment.

A *hospital* is not an establishment used mainly as a clinic or home for the aged, health spa, rest or nursing home, convalescent hospital, hospice, extended or palliative care facility, addiction *treatment* centre, custodial or educational facility, or any rehabilitation facility.

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

Injury means sudden bodily harm that is caused by external and purely accidental means.

Medical condition means any disease, sickness or *injury* (including symptoms of undiagnosed conditions) or complication of pregnancy within the first 31 weeks.

Medical declaration means all the medical questions that *you* were required to answer when *you* applied for coverage under this policy.

Medical Underwriting Agreement means the document that *you* receive from *us* after *you* have been medically underwritten, which specifies *your pre-existing conditions* covered under this policy, and includes *your* responses to the *medical questionnaire*.

Minor mental or emotional disorder means having anxiety or panic attacks, or being in an emotional state. A *minor mental or emotional disorder* is one where *your treatment* includes only minor tranquilizers or minor anti-anxiety medication (anxiolytics) or no prescribed medication at all.

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

Pre-existing condition means any *medical condition* that exists before *your effective date*.

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

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

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

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

Treatment means hospitalization, or a procedure prescribed, performed or recommended by a *physician* for a *medical condition*. This includes but is not limited to prescribed medication (including prescribed as needed), investigative testing and surgery. **IMPORTANT:** Any reference to testing, tests, test results, or investigations excludes genetic tests. "Genetic test" means a test that analyzes DNA, RNA or chromosomes for purposes such as the prediction of disease or vertical transmission risks, or monitoring, diagnosis or prognosis.

Trip means the time between *your effective date* and *expiry date*.

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).

We, us, our means Northbridge.

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

SECTION 13 – NOTICE ON PRIVACY

The Northbridge group of companies is committed to protecting *your* personal information. This Privacy Notice applies to all of the member companies of Northbridge, which includes Northbridge Financial Corporation and Northbridge General Insurance Corporation.

When *you* request an insurance product or service from *us*, *you* consent to allow *us* to collect, use and disclose *your* personal information for the following purposes:

- Offering and providing products and services to meet *your* needs;
- Establishing and maintaining communications with *you*;
- Verifying personal information *you* provide in *your* application;

- Assessing and underwriting risks on a prudent basis;
- Performing safety assessments;
- Determining insurance product prices;
- Investigating and settling claims;
- Detecting and preventing fraud or other illegal activities;
- Analyzing business results and compiling statistics;
- Conducting market research;
- Reporting to regulatory or industry entities; and
- Acting as required or authorized by law.

You may withdraw your consent, but doing so may limit our ability to provide you with the requested product or service.

As part of maintaining *our* relationship with *you*, we may share *your* personal information within the Northbridge group of companies and with third parties, but only for the purposes identified above, and in accordance with this Privacy Notice. Where personal information is shared with third parties, it is done on the basis that they will maintain the confidentiality of the information. If we discover that third parties are improperly handling *your* personal information, we will take appropriate action to protect *your* personal information.

We may use service providers located outside of Canada to collect, use, disclose or store personal information. Where we do so, we will contractually require such third party to employ the appropriate security safeguards to protect *your* personal information, subject to the law in the third party jurisdiction. While the personal information is in another jurisdiction it may be accessed by the courts, law enforcement and national security authorities of that jurisdiction. The jurisdictions where personal information may be collected, used, disclosed and stored include the United States of America.

You can obtain a copy of our Privacy Policy by visiting our website at www.nbfc.com or by contacting your broker or agent. You may request access to your personal information that we have on file in order to verify its accuracy and completeness by sending a written request to our Privacy Officer. If you have any questions or complaints regarding our Privacy Policy or procedures, please contact our Privacy Officer:

By Mail: Northbridge Financial Corporation
 105 Adelaide Street West, 7th Floor
 Toronto, Ontario M5H 1P9
 Attention: Privacy Officer

By E-mail: privacy@nbfc.com

By Phone: [\(416\) 350-4400](tel:(416)350-4400)
[1-800-268-9680](tel:(1-800-268-9680)

If we are unable to resolve your privacy concern to your satisfaction, you have the right to contact your privacy regulator. Our Privacy Officer will provide you with this contact information upon request.

SECTION 14 – 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, each day of the year with:

Pre-Trip Information

- Passport and visa information
- Health hazards advisory
- Weather information
- Currency exchange information
- Consulate and embassy locations

During a Medical Emergency

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

Other Services

- Assistance in obtaining *emergency* cash
- Translation and interpreter services in a medical *emergency*
- *Emergency* message services
- Assistance with obtaining prescription drugs
- Assistance with obtaining legal help or bail bond

In the event of *emergency*, call the Assistance Centre immediately at:



1 833-754-3725 toll-free from the USA and Canada

+1 416-987-1218 collect to Canada from anywhere else in the world

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



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

Know your health

Know your trip

Know your policy

Know your rights

Underwritten by:

Northbridge General
Insurance Corporation

