



Travel Insurance

# **Product Summary for Manulife Global Emergency Medical Policy**

Be protected if something unexpected happens during your trip.

Underwritten by The Manufacturers Life Insurance Company (Manulife)

GEMABCSUM1119E

## HOW TO CONTACT US

### Insurer

#### Manulife

Registered with Autorité des marchés financiers under client number 2000737614

Address:

Affinity Markets

250 Bloor Street East

Toronto, ON M4W 1E5

Telephone: 1-866-298-2722

Email: [manulifeglobal@manulife.com](mailto:manulifeglobal@manulife.com)

Website: [manulife.ca](http://manulife.ca)

#### First North American Insurance Company

Registered with Autorité des marchés financiers under client number 2000998244

Address:

Affinity Markets

250 Bloor Street East

Toronto, ON M4W 1E5

Telephone: 1-866-298-2722

Email: [manulifeglobal@manulife.com](mailto:manulifeglobal@manulife.com)

Website: [manulife.ca](http://manulife.ca)

### Travel Agency (Distributor)

Name

Address

(Email)

Telephone

Fax

← Your travel agency is required to provide you with this information.

### Autorité des marchés financiers

Quebec residents: The Autorité des marchés financiers can provide you with information about your insurer's or your insurance distributor's obligations.

Website: [lautorite.qc.ca](http://lautorite.qc.ca)

## RULES FOR REVIEWING THIS SUMMARY

### “You” can refer to many people

When referring to “you,” we mean the person who purchased the insurance and any other insured person, unless the context states otherwise.

### “Trip” has a specific meaning

The word “trip” refers to the period beginning on the *departure date* and ending on the return date shown in your *confirmation*.

### Words in *italics* have a specific meaning

Words and expressions in *italics* are defined at the end of the guide (see [Section 9. Definitions](#)). Read these definitions if you have any questions.

### This is a summary

Review the sample policy for complete details. You can get a copy from your travel agency, on the website where you buy your insurance, or [online](#).

## THINGS TO CONSIDER

### Before you buy this insurance

- ✓ Do you, and all the people you want to insure, meet **all** the eligibility requirements? If not, you might not be covered. To make sure, read [Section 1. Who can purchase this insurance \(eligibility requirements\)](#).
- ✓ Do you, or any of the people you want to insure, have a *medical condition* that is not *stable*? If so, expenses relating to the *medical condition* may not be covered.

### Before you travel

- ✓ Do all insured people still meet all eligibility requirements? Otherwise, exclusions may apply. Check before you leave.
- ✓ Have there been any changes in the health of any insured people since you purchased your insurance? If so, exclusions may apply.

## DON'T FORGET

### Don't make false statements

If you make a false statement or if you fail to declare certain information before or during the coverage period, we may cancel your coverage.

### 10 days to change your mind

You have the right to cancel your insurance at no cost within 10 days of purchasing it. To find out more, read [Section 8. Your right to terminate insurance](#).

### Don't leave without paying

You're not covered until you pay your insurance premium.

**Note:** The insurance does not provide any temporary coverage.

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# 1. WHO CAN PURCHASE THIS INSURANCE (ELIGIBILITY REQUIREMENTS)

## Requirements for purchasing this insurance



You can purchase this insurance if you, and any people you want to insure, meet all the following requirements:

- ✓ You live in Canada.
- ✓ You're covered under a *government health insurance plan* (such as RAMQ) for the entire duration of your trip
- ✓ You purchased this travel insurance for the entire duration of your trip.
- ✓ If you are 60 years of age or older, you must complete a medical *questionnaire* and meet the requirements on the *questionnaire*.

You are not eligible for this coverage if:

- ✗ You were advised by a *physician* not to travel.
- ✗ You have been diagnosed with a terminal illness with less than 6 months to live.
- ✗ You have a kidney condition that requires dialysis.
- ✗ You have used home oxygen during the 12 months before you applied for this insurance.
- ✗ You are 60 years of age or older and do not meet the requirements on the medical *questionnaire*.

## If you don't meet the eligibility requirements

You must meet all these requirements, and each person you want to insure must also meet them. If you don't meet the eligibility requirements:

- you will not be able to purchase the coverage; or
- we will cancel the insurance; or
- your claim will be denied.

Additionally, if you lose your coverage under a *government health insurance plan*, your maximum Emergency Medical benefit reduces to \$25,000 for all eligible expenses combined

If you don't meet all eligibility requirements for this plan, there might be other travel insurance products with different eligibility requirements. Speak to your travel agent.

# 2. WHO IS INSURED

## You



You are insured if:

- You meet all the eligibility requirements.
- You have paid the insurance premium.
- Your *confirmation* shows that you are an insured person.

## Your family, if you selected the family coverage option



Your *spouse*, *children*, and *grandchildren* have the same coverage as you if you purchased the family coverage option.

The following people qualify under the family coverage option:

- two adults under age 60
- your *children* or *grandchildren*, if they are 31 days old or older

### REQUIREMENTS

To be eligible for family coverage, each member of your family must:

- ✓ meet all the eligibility requirements
- ✓ be named in your *confirmation*
- ✓ travel with you

**Warning:** Family coverage is only available if each member of your family is under 60 years old

## 3. THE LENGTH OF YOUR INSURANCE DEPENDS ON YOUR TRAVEL DATES

### While travelling

You are insured under Emergency Medical from the moment you leave *home* to the earlier of the date you return *home* or the expiry date shown on your *confirmation*.

### Staying longer than planned?

If you are extending your trip, you need to extend your insurance to remain covered. In some cases, you will receive an automatic extension.

For all Emergency Medical, your coverage can be extended up to:

- 72 hours if your *common carrier* is delayed
- 5 days in the event of a *medical emergency* for *you* or *your travel companion*
- the entire duration of *hospitalization*, and up to 5 days after discharge from the *hospital* if you or your *travel companion* are *hospitalized*

### Have your travel dates changed?

#### ADJUST THE LENGTH OF YOUR INSURANCE

Your insurance must cover the entire duration of your trip. If you leave earlier or come back later than planned, contact your travel agency to adjust the duration of your coverage.

**Important:** In some cases, you must get authorization from the Assistance Centre to change your insurance. For example, if a *medical condition* first appeared after you purchased the insurance or if you already have a claim in progress.

### Maximum trip duration

Maximum trip duration, including any extensions, is:

- 183 days, however if your *government health insurance plan* permits, it may be extended to 365 days

## 4. YOUR INSURANCE APPLIES WORLDWIDE

Your insurance applies worldwide.



**Warning:** Exclusions may apply if the Government of Canada issues an advisory against travel to a certain region or country.

**Important:** Emergency Medical coverage applies only outside your province or territory of residence.

## 5. SUMMARY OF COVERAGES

### EMERGENCY MEDICAL

In the event of a *medical emergency* during your trip, we pay *reasonable and customary* expenses that you incur to receive urgent care.

#### Requirements to qualify for this coverage

- ✓ You have a *medical emergency*, such as a sudden and unforeseen *medical condition* that requires immediate attention.
- ✓ Your *medical emergency* occurs during your trip.
- ✓ Your *medical emergency* occurs outside your province or territory of residence.
- ✓ Your expenses are *reasonable and customary*. This means that the expenses aren't higher than the standard fee charged by providers of similar standing in the same geographical area, when providing the same *treatment*.



#### ALWAYS CALL THE ASSISTANCE CENTRE BEFORE YOU RECEIVE TREATMENT

Before you receive emergency treatment, call the Assistance Centre so we can confirm you are covered and pre-approve any *treatment*.



#### IF YOU DON'T CALL THE ASSISTANCE CENTRE, YOU ARE RESPONSIBLE FOR CERTAIN CHARGES

- Certain expenses are not covered if they are incurred without the authorization of the Assistance Centre. These expenses are indicated by an asterisk (\*) in the list of covered expenses.
- Other expenses may be payable up to 75% of the expense only and *you* may be required to pay 25% of the expense.
- If you can't call us at the time of the *medical emergency* because of your condition, call us as soon as possible or ask someone to call on your behalf.

#### Covered maximum: \$5 million

We pay up to a maximum of \$5,000,000 for all claims combined.

#### Covered expenses

Below is an overview of covered expenses and applicable limits. For a full list, see the [sample policy](#).

If an expense is followed by an asterisk (\*), you must call the Assistance Centre before you incur this expense. These expenses are not covered without prior authorization from the Assistance Centre.

#### EXPENSES TO RECEIVE EMERGENCY MEDICAL CARE

Expenses incurred to receive emergency <i>treatment</i>	100%
Expenses for a surgical procedure *	100%
Expenses to establish a diagnosis (such as an MRI) *	100%
Expenses for ambulance transportation	100%
Repatriation expenses *	100%
Expenses to receive professional services	\$300 per profession

Expenses for emergency dental <i>treatment</i>	
• due to an accidental blow	\$2,000 \$1,000 after your return
• for relief of dental pain	\$300
Expenses to return to your destination after receiving emergency <i>treatment</i> in your province of residence *	Economy class airfare
Extra expenses for meals, accommodation, phone calls, and taxis	\$350 per day, to a maximum of \$3,500
Extra <i>hospital</i> expenses (phone calls, television rental, etc.)	\$50 per day, to a maximum of \$500

#### **EXPENSES FOR CHILDCARE OR TO HAVE SOMEONE COME TO YOUR BEDSIDE IN THE EVENT OF HOSPITALIZATION**

Expenses for childcare in event of <i>hospitalization</i>	\$100 per day, to a maximum of \$300
Travel expenses to bring someone to your bedside in event of <i>hospitalization</i> *	Round-trip economy class airfare + \$500

#### **COST OF REPLACING PRESCRIPTION DRUGS, HEARING AIDS, AND EYEGASSES**

Expenses to replace prescription drugs, hearing aids, or eyeglasses	\$50 to \$200
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#### **EXPENSES TO RETURN YOUR TRAVEL COMPANION, CHILDREN, PETS, BAGGAGE, AND VEHICLE**

Expenses to return your <i>travel companion</i> to their <i>departure point</i>	Economy class airfare
Expenses to return insured <i>children</i> and <i>grandchildren</i> under your care *	Economy class airfare
Expenses incurred to repatriate your pet dog or cat *	\$500
Expenses to return your baggage *	100%
Expenses to return your vehicle <i>home</i> or to the rental agency *	100%

#### **FUNERAL ARRANGEMENT EXPENSES IN THE CASE OF DEATH WHILE TRAVELLING**

Travel expenses for someone to identify your body *	Economy class airfare + \$300
Preparation of your body, burial, or cremation where you die	\$5,000
Repatriation of your body or ashes	100%

## Exclusions for Emergency Medical

Below is an overview of the main exclusions. For a full list, see the [sample policy](#).

### EXPENSES RELATED TO YOUR HEALTH BEFORE YOUR TRIP

If you:

- were 59 years of age or younger when you purchased the insurance, or
- qualified for Plan A

and you had any *medical condition* that existed before your trip, and if the *medical condition* was not *stable* in the three months before your *departure date*, you will not be covered.

If you:

- qualified for Plan B, or
- qualified for Plan C

and you had any *medical condition* that existed before your trip, and if the *medical condition* was not *stable* in the 6 months before your *departure date*, you will not be covered.

For example, your *medical condition* is not *stable* if you experience any new symptoms, or if there was any *change in medication* or *treatment* during this period.

To **check if this exclusion applies to you**, see the [sample policy](#).

You are not covered for expenses relating to your *medical condition* when:

- ✗ You knew or should have known that you would need *treatment* during your trip.
- ✗ An assessment or *treatment* for your *medical condition* was planned for after your return date.

### EXPENSES INCURRED WITHOUT THE AUTHORIZATION OF THE ASSISTANCE CENTRE

- ✗ These medical procedures and/or tests are identified by an asterisk (\*) in the list of covered expenses. For example, magnetic resonance imaging (MRI or MRCP).

### COVERAGE IS LIMITED IF YOU AREN'T COVERED BY A GOVERNMENT HEALTH INSURANCE PLAN

- ✗ If you aren't covered under a *government health insurance plan*, we limit our payments to \$25,000. You are responsible for any remaining charges.

### EXPENSES RELATING TO A BIRTH DEFECT IN YOUR CHILDREN UNDER 2 YEARS OF AGE

- ✗ For insured *children* under 2 years of age, we do not cover expenses for a *medical condition* related to a birth defect

### EXPENSES NOT RELATED TO URGENT AND NECESSARY MEDICAL CARE

- ✗ services that aren't considered medically necessary by Manulife or that could wait until your return
- ✗ expenses not directly related to a *medical emergency*
- ✗ expenses if the trip was made for the purpose of investigation, diagnosis, or any *treatment* or alternative therapy
- ✗ *treatment* you received to follow-up on a *medical condition* that has already been *treated* as a *medical emergency* during the trip but is no longer a *medical emergency*

### FURTHER EXPENSES IF YOU CHOOSE NOT TRANSFER TO ANOTHER FACILITY

- ✘ further medical *treatment* if our medical advisors determine you should transfer to another facility or return to your *home* province or territory for *treatment* and you choose not to

### EXPENSES RELATED TO CERTAIN BEHAVIOURS

- ✘ abusing medication, drugs, or alcohol or other substances
- ✘ self-inflicted, unless a *physician* certifies that the injuries are related to a mental disorder
- ✘ if the expense was related to an incident while you committed or attempted to commit a crime
- ✘ if the expense was a result of you not following a recommended or prescribed therapy or *treatment*

### EXPENSES RELATED TO PARTICIPATION IN A HAZARDOUS SPORT

- ✘ for example, hang-gliding, mountain-climbing, or motorized speed contests. See the [sample policy](#) for more information.

### EXPENSES RELATED TO YOUR PREGNANCY

Travel in the final months of pregnancy and the months following childbirth can be hazardous for both your health and the health of your child.

We do not cover:

- ✘ expenses related to managing pregnancy (prenatal and postnatal care)
- ✘ expenses for a child born during the trip

We do not cover expenses related to your pregnancy if they are incurred 9 weeks before or after the expected delivery date.

For example:

- ✘ if you give birth during your trip
- ✘ if you have a *medical condition* related to your pregnancy or the after-effects of childbirth and the *medical condition* causes you to incur expenses during your trip

### EXPENSES RELATED TO MINOR MENTAL OR EMOTIONAL DISORDERS (ANXIETY)

- ✘ We cover expenses related to *stable* mental or emotional disorders. However, we do not cover expenses related to a condition where your *treatment* includes only mild tranquilizers or mild anti-anxiety (anxiolytic) medication, or no prescription medication at all.

### EXPENSES RESULTING FROM OF AN ACT OF WAR OR AN ACT OF TERRORISM

- ✘ We do not cover expenses incurred because of an *act of war*. We cover expenses incurred from an *act of terrorism* in limited circumstances. For more information, see the [sample policy](#).

### EXPENSES RELATED TO A MEDICAL CONDITION IF THE GOVERNMENT OF CANADA HAS ISSUED A FORMAL WARNING

- ✘ If the Government of Canada issues a warning for Canadians not to travel to a certain region, and the date of the warning is before the start date of your *trip* (as shown on your *confirmation*), we do not cover expenses related to a *medical condition* specific or related to this warning if you choose to travel to that region.

## STANDBYMD™ MEDICAL CONCIERGE SERVICES

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StandbyMD provides access to assistance services in the event of a *medical emergency*. These services are available when you contact the Manulife Assistance Centre.

### ANYWHERE IN THE WORLD

- ✓ You have phone access to a *physician* to assess your symptoms.
- ✓ You have access to a network of *physicians* who make house call visits in 141 countries and over 4,500 cities.

### IN THE UNITED STATES

- ✓ If you lose or forget your prescription drugs, eyeglasses, or contact lenses, StandbyMD organizes their delivery.
- ✓ If you need an assessment or *treatment*, StandbyMD can recommend medical resources.
- ✓ A *physician* can coordinate you with an emergency room and can “fast track” you through the emergency room, where available.

Note: This service is provided by our partner StandbyMD and not by Manulife.

## ACT OF TERRORISM COVERAGE

If an *act of terrorism* occurs that causes you a loss that would otherwise be payable, under this policy we pay for certain costs.

### Covered expenses

For Emergency Medical Insurance coverage:

- ✓ we will only pay benefits that are in excess of payments from all other sources such as airlines, tour operators, cruise lines, other *travel suppliers*, and other insurance coverages
- ✓ we will pay benefits for your eligible expenses, subject to the maximum coverages in this policy

### Aggregate compensation limit

Coverage is limited an aggregate amount relating to all in-force travel policies we issue. Coverage is only available for up to two *acts of terrorism* within a calendar year. For more information, see the [sample policy](#).

### EMERGENCY MEDICAL

Maximum aggregate payable for each *act of terrorism*

\$35,000,000

### Exclusions for Act of Terrorism Coverage

No benefit is payable if the *act of terrorism* is directly or indirectly related to biological, chemical, nuclear, or radioactive means.

## 6. COST OF INSURANCE



You can purchase this insurance for a fixed, single payment. This insurance premium provides coverage for one trip and it is not renewable.

You can get a quote for different premium amounts from the travel agency where you purchase your insurance.

Premiums are calculated based on the following criteria:

- age
- the length of the trip
- the amount of coverage you choose
- the plan you qualify for, based on the medical *questionnaire* you completed if you are 60 years of age or older
- single or family coverage

### **COST OF FAMILY COVERAGE**

For family coverage to apply, you must pay an additional premium equal to 2 times the rate for the *oldest* parent or grandparent.

### **What is included in the premium**

The premium includes:

- ✓ premium tax
- ✓ the cost of any administration by us

### **Other fees and costs**

The insurance is sold only within Canada by authorized Manulife distributors. The sale is subject to applicable federal and provincial sales taxes.

There are no other fees or expenses related to the cost of the insurance.

## 7. HOW TO MAKE A CLAIM



You can use the TravelAid™ mobile app to make a claim.



You can submit your claim online at [Manulife.acmtravel.ca](https://Manulife.acmtravel.ca)  
You will need all your documentation available and in electronic format.



You can also write to us at the following address:  
Manulife Travel Insurance c/o Active Care Management  
P.O. Box 1237, Station A  
Windsor, ON N9A 6P8

Claims are administered by our partner, Active Care Management (ACM).

Website: [active-care.ca](https://active-care.ca)

In North America: 1-855-841-4793

### 90 DAYS TO MAKE YOUR CLAIM

You must send us your claim within 90 calendar days of an event.

We can accept claims up to 12 months after the event if you aren't able to submit your claim sooner. For example, if you are in a coma and no one can make the claim for you.

### Supporting receipts and documents



#### CLAIM FORM

To obtain a form, contact the Assistance Centre, download the TravelAid™ mobile app or visit the [ACM website](#).



#### PROOF OF EVENT

For example, your medical records or a medical certificate, or a police report



#### ORIGINAL BILLS AND RECEIPTS

For example, your transportation tickets or accommodation receipts, or receipts for medical expenses

### We pay within 30 days if your claim is approved

We notify you of our decision within 30 days after receiving your claim and all supporting documents. If we decline your claim, we explain our reasons to you, in writing.

## YOUR LEGAL RIGHTS IF YOU DISAGREE WITH OUR DECISION OR WANT TO FILE A COMPLAINT

### 1. You can ask us to reconsider your claim

We will reconsider your claim if you provide us with additional arguments, information, or documentation. You can contact Customer Service, then Customer Service management and, if you are still not satisfied, the Manulife Ombuds Office. For more information:

<https://www.manulife.ca/personal/support/contact-us/resolve-a-complaint.html>

### 2. You can contact the OmbudService for Life & Health Insurance

The OmbudService for Life & Health Insurance is an independent organization that helps people who want to file a complaint about their insurance coverage. For more information: [olhi.ca](http://olhi.ca)

### 3. Quebec residents can contact the Autorité des marchés financiers

The Autorité des marchés financiers reviews your file and can help us find a solution together, such as offering dispute resolution services. For more information: [autorite.qc.ca/en/general-public/assistance-complaints-and-compensation/](http://autorite.qc.ca/en/general-public/assistance-complaints-and-compensation/)

### 4. You can appeal our decision in court

If you decide to appeal our decision in court, you need to appeal within the 3-year time frame prescribed by the Civil Code (prescription period). We recommend that you seek legal advice for information on your rights and the appeal process.

## 8. YOUR RIGHT TO TERMINATE INSURANCE

### Within 10 days after purchasing your insurance: full refund

We refund you the insurance premium in full if you meet **all** the following conditions:

- ✓ You cancel your insurance no later than 10 days after signing the *Application*.
- ✓ You cancel your insurance before the planned *departure date* shown in your *confirmation*.
- ✓ You do not have any claims in progress.

### YOU MUST CANCEL YOUR INSURANCE IN WRITING

Contact Manulife if you want to cancel your insurance. See the [How to contact us](#) section at the beginning of this summary. Your travel booking and any other contract you enter with your travel agency remains in effect. You may lose certain discounts or benefits if you cancel the insurance.

### No refund in other cases

You can terminate your policy at any time, but you will not be entitled to a refund in other cases.

## 9. DEFINITIONS

### Act(s) of terrorism

Any activity that involves threat to use or the actual use of violence or any dangerous or threatening act, or the use of force. Such act is directed against the general public, governments, organizations, properties or infrastructures, or electronic systems. The intention of such activity is to:

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

### Act of war

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.

### Change in medication

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.

### Children, grandchildren

Your unmarried, dependent son or daughter, or your grandchild(ren) travelling with you or joining you during your trip and who is:

- under 21 years of age, or
- under 26 years of age if a full-time student, or
- your *child* of any age who is mentally or physically disabled.

**WARNING:** For Emergency Medical Insurance, a *child* must also be older than 30 days of age

### Confirmation

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

### Departure date

The date you leave for your trip

### Government health insurance plan

Health insurance coverage that a Canadian provincial or territorial government provides to its residents.

### Heart condition

Any disorder relating to your heart. *Heart conditions* include but are not limited to the following:

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

## Home

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

## Hospitalization (Hospital)

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

**WARNING:** *Hospital* is not an establishment used mainly as a clinic, extended or palliative care facility, rehabilitation facility, addiction treatment centre, convalescent, rest or nursing home, home for the aged or health spa.

## Immediate family

*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

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

## Medical condition

Any disease, sickness, or *injury* including symptoms of undiagnosed conditions.

## Medical emergency

A sudden and unforeseen occurrence of a *medical condition* that requires immediate treatment.

**WARNING:** A *medical emergency* no longer exists when the evidence reviewed by Assistance Centre indicates that no further *treatment* is required at destination or you are able to return to your province or territory of residence for further *treatment*.

## Minor mental or emotional disorder

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

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

## Physician

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.

## Questionnaire

The document you must fill out truthfully and accurately to confirm your eligibility and premium (rate) category.

## Reasonable and customary

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

Illness, disease, disorder, or any symptom.

## Spouse

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

## Stable

A *medical condition* is stable when all the following criteria are true:

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

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

## Travel companion

Someone who shares trip arrangements and accommodations with you on any one trip.

**WARNING:** A maximum of 5 people, including you, may be considered *travel companions* on any one trip.

## Treatment

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

**WARNING:** 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.

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Insurance products are underwritten by The Manufacturers Life Insurance Company (Manulife).

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The purpose of this fact sheet is to inform you of your rights.  
It does not relieve the insurer or the distributor of their obligations to you.

## LET'S TALK INSURANCE!

Name of distributor: \_\_\_\_\_

Name of insurer: Manulife and First North American Insurance Company

Name of insurance product: Manulife Global Emergency Medical Policy



### IT'S YOUR CHOICE

**You are never required to purchase insurance:**

- that is offered by your distributor;
- from a person who is assigned to you; or
- to obtain a better interest rate or any other benefit.

Even if you are required to be insured, **you do not have to** purchase the insurance that is being offered. **You can choose** your insurance product and your insurer.



### HOW TO CHOOSE

To choose the insurance product that's right for you, we recommend that you read the summary that describes the insurance product and that must be provided to you.



### DISTRIBUTOR REMUNERATION

A portion of the amount you pay for the insurance will be paid to the distributor as remuneration. The distributor **must** tell you when the remuneration exceeds 30% of that amount.



### RIGHT TO CANCEL

The Act allows you to rescind an insurance contract, **at no cost**, within 10 days after the purchase of your insurance. However, the insurer may grant you a longer period of time. After that time, fees may apply if you cancel the insurance. **Ask** your distributor about the period of time granted to cancel it **at no cost**.

If the cost of the insurance is added to the financing amount and you cancel the insurance, your monthly financing payments might not change. Instead, the refund could be used **to shorten the financing period**. **Ask your distributor for details**.

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The *Autorité des marchés financiers* can provide you with unbiased, objective information.  
Visit [www.lautorite.qc.ca](http://www.lautorite.qc.ca) or call the AMF at 1-877-525-0337.

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Reserved for use by the insurer: