

OUR ASSISTANCE CENTRE
IS THERE TO HELP AND SUPPORT YOU
24 HOURS A DAY, EVERY DAY OF THE YEAR.

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

Manulife Global Air Fare Cancellation Policy



Accessible formats and communication supports
are available upon request.
Visit Manulife.com/accessibility for more information.



PO Box 670, Stn Waterloo, Waterloo, ON N2J 4B8

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

Manulife, Manulife & Stylized M Design, and Stylized M Design are trademarks of The Manufacturers Life Insurance Company and are used by it, and by its affiliates under licence.

© 2019 The Manufacturers Life Insurance Company. All rights reserved.



GAFC619E



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

EFFECTIVE JUNE 4, 2019

Don't forget your
Wallet Card!



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 #



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 #

NOTICE REQUIRED BY PROVINCIAL LEGISLATION

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



Everyone wants to have a carefree trip and should be able to travel with confidence in their travel insurance purchase. Most people 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 Travel Insurance 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

For more information, go to www.thiaonline.com

TRAVEL ASSISTANCE. ANYWHERE IN THE WORLD.

Before *you* travel, be sure to download ACM's free assistance & claims app, **ACM TravelAid™**. The GPS-enabled **ACM TravelAid™**, available from Google Play and App store, provides travellers with the following services, from anywhere in the world:

- Direct link to the assistance centre
- Healthcare provider information
- Directions to the nearest medical facility
- Official travel advisories
- Travel tips
- Claim submission support

The TravelAid mobile app can also provide *you* with local emergency telephone numbers (such as 911 in North America), and pre- and post-departure travel tips. *We* recommend that *you* download the app before *you* travel to avoid incurring roaming charges that may apply at *your* destination.

HELP IS JUST A PHONE CALL AWAY.

Our multilingual Assistance Centre is there to help and support *you* 24 hours a day, every day of the year, with:

Pre-Trip Information

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

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

OUR ASSISTANCE CENTRE IS THERE TO HELP AND SUPPORT YOU 24 HOURS A DAY, EVERY DAY OF THE YEAR.

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

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, every day of the year.

Before you travel download the free assistance & claim mobile app, **ACM TravelAid™**.

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, every day of the year.

Before you travel download the free assistance & claim mobile app, **ACM TravelAid™**.

 **Manulife**



 **Manulife**

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 Page 3 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* exclusions listed on Pages 6-8 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.

Our Assistance Centre is there to help you
24 hours a day, every day of the year.

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

Our Assistance Centre can also be contacted through
the **ACM TravelAid™** mobile application.

IMPORTANT INFORMATION ABOUT *YOUR* INSURANCE:

This policy is underwritten by The Manufacturers Life Insurance Company (Manulife) and First North American Insurance Company (FNAIC), a wholly owned subsidiary of Manulife. Manulife has appointed Active Claims Management (2018) Inc. (operating as "Active Care Management") as the provider of all assistance and claims service under this policy. Please note that risks identified with ‡ throughout this document are covered by FNAIC.

WHAT'S INSIDE

SCHEDULE OF BENEFITS	2
ELIGIBILITY	3
GENERAL INFORMATION ABOUT <i>YOUR</i> TRAVEL INSURANCE	3
THE DATE <i>YOUR</i> COVERAGE STARTS	3
THE DATE <i>YOUR</i> COVERAGE ENDS	3
ADDITIONAL INFORMATION	3
Automatic Extension	3
To Stay Longer Than Planned	4
AIR FARE CANCELLATION PLAN	4
DEFAULT PROTECTION COVERAGE	8
<i>ACT OF TERRORISM</i> COVERAGE	9
WHAT ELSE DO <i>YOU</i> NEED TO KNOW?	10
IN THE EVENT OF A CLAIM	12
DEFINITIONS	14
NOTICE ON PRIVACY	18

SCHEDULE OF BENEFITS

Air Fare Cancellation Policy	
Eligible Age	No Limit
Trip Cancellation & Trip Interruption	
Trip Cancellation	Covered Amount Selected (covered amount insured)
Trip Interruption	Unlimited
Early Return	See Page 4
Accommodation & Meals	\$100
Delayed Return / Trip Delay Accommodation & Meals	See Page 6 \$300
Default Protection	See Page 8
Act of Terrorism Coverage	See Page 9

ELIGIBILITY

You are NOT eligible for coverage if:

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

GENERAL INFORMATION ABOUT YOUR TRAVEL INSURANCE

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*.

THE DATE YOUR COVERAGE STARTS / YOUR EFFECTIVE DATE OF COVERAGE

For Trip Cancellation Insurance, coverage starts at the date and time *you* pay the premium for that coverage.

All other coverages start on *your departure date*.

THE DATE YOUR COVERAGE ENDS / YOUR COVERAGE EXPIRY DATE

For Trip Cancellation Insurance, *your* coverage ends on *your* departure date as shown on *your confirmation*.

Other coverages end on the earliest of:

- a) the date when *you* return to *your departure point*; or
- b) on the expiry date as shown on *your confirmation*.

ADDITIONAL INFORMATION

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.

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. *You* may be able to extend *your* coverage as long as:

- *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.

AIR FARE CANCELLATION

You must purchase coverage for the full value of the non-refundable portion of the prepaid airfare that *you* booked for *your trip*.

Benefits – What does the Air Fare Cancellation Policy cover?

A. Trip Cancellation Insurance - Prior to *your departure date*

If *you* are unable to travel and must cancel *your trip* due to a covered event listed immediately below that occurs before *you* leave *home*, *we* will pay up to the covered amount indicated on *your confirmation*, for:

- i. the prepaid unused portion of the airfare booked for *your trip* that is non-refundable; or
- ii. the change fee charged by the airline on existing tickets if this option is available.

What are the conditions that apply to the Air Fare Cancellation Policy Trip Cancellation Insurance?

To cancel a *trip* before *your* scheduled *departure date*, *you* must cancel with the agent or *travel supplier* on the day the cause of cancellation occurs or on the next business day at the latest. Claims payment will be limited to the cancellation penalties specified in the trip contracts which are in effect on the next business day following the time the cause of cancellation occurs.

Cancellation for a *medical condition* must be recommended by the *physician* attending the person who is the cause of the claim.

B. Trip Interruption Insurance – On or after *your departure date*

If *your trip* is interrupted due to a covered event listed immediately below that occurs after *you* leave *home*, *we* will pay for:

- i. the extra cost of one-way economy transportation via the most cost-effective itinerary (being the lesser of a one-way economy fare or change fee charged by the airline of the existing ticket if this option is available) to return *home*.
- ii. in addition, *we* will pay *your* additional and unplanned hotel and meal expenses, *your* essential phone calls, internet usage fees and taxi fares (or car rental in lieu of taxi fares) to a maximum of up to \$100.

- iii. in the event of *your* death, *your* estate will be reimbursed to a maximum of \$5,000, for the reasonable costs incurred for either: i) the preparation and transportation of *your* remains back to *your home*; or ii) the cost of cremation and burial of *your* remains at the location where death occurs. No benefit is payable for the cost of a headstone, casket, urn and/or funeral service expenses.

Events Covered under Trip Cancellation and/or Trip Interruption

Medical Related Events

1. *You* or *your travel companion* develop(s) a *medical condition*.
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*.
3. The person whose guest *you* will be during *your trip* is admitted to a *hospital* in an *emergency* or is quarantined.
4. † *Sickness* or *injury* of *your* service dog, provided *you* are an individual with a disability (physical, psychiatric or mental disability), and travel arrangements have been made for the service dog to accompany *you* on *your trip*. For this benefit to apply, the travel arrangement cost for *your* service dog must be included in the covered amount.
5. *You*, *your spouse*, *your travel companion* or *your travel companion's spouse* are quarantined.

Death

6. *You* or *your travel companion* die(s).
7. A member of *your immediate family* or *your key-person*, a member of *your travel companion's immediate family* or their *key-person* dies.
8. The person whose guest *you* will be during *your trip* dies.
9. † Death of *your* service dog, provided *you* are an individual with a disability (physical, psychiatric or mental disability), and travel arrangements have been made for the service dog to accompany *you* on *your trip*. For this benefit to apply, the travel arrangement cost for *your* service dog must be included in the covered amount.

Government and Legal

10. † *You*, *your spouse*, *your travel companion* or *your travel companion's spouse* are called to jury duty or to be a defendant in a civil suit or are subpoenaed to be a witness during *your trip*.

Accommodation

11. † *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 *your* / their part.

Hijacking

12. † *You*, *your spouse*, *your travel companion* or *your travel companion's spouse* are hijacked.

C. Trip Delay Insurance - On or after your departure date

If *your trip* is delayed due to a covered event listed immediately below that occurs after *you* leave *home*, *we* will pay for:

- i. the extra cost of one-way economy transportation via the most cost-effective itinerary (being the lesser of a one-way economy fare or change fee charged by the airline of the existing ticket if this option is available) to either catch-up to *your* next destination or to return *home*.
- ii. *your* additional and unplanned hotel and meal expenses, *your* essential phone calls, internet usage fees and taxi fares (or car rental in lieu of taxi fares) up to \$150 per day to a maximum of \$300.

Events Covered under Trip Delay

Medical Related Events

1. *You* or *your travel companion* develop(s) a *medical condition*.
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*.
3. The person whose guest *you* will be during *your trip* is admitted to a *hospital* in an *emergency* or is quarantined.

Death

4. *You* or *your travel companion* die(s).
5. A member of *your immediate family* or *your key-person*, a member of *your travel companion's immediate family* or their *key-person* dies.
6. The person whose guest *you* will be during *your trip* dies.

Transportation

7. † *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.

Exclusions & Limitations – What does the Air Fare Cancellation Policy not cover?

We will not pay for losses or expenses incurred for, or as the result of, the following events:

1. *We* will not cover any expenses for a *medical condition* related to *you*, *your spouse*, or *your children*, if that *medical condition* was not *stable* in the **3 months** before the insurance purchase date or application date as indicated on *your confirmation*. 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 insurance purchase date or application date as indicated on *your confirmation*, any of *your / their heart condition(s)* has/have 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 insurance purchase date or application date as indicated on *your confirmation*, any of *your / their lung condition(s)* has/have not been *stable* or *you / they* required *treatment* with oxygen or prednisone for any lung condition.
2. 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 trip* as booked when *you* purchase this insurance coverage.
 3. The *medical condition* or death of a person who is ill when the purpose of *your trip* is to visit that person.
 4. *Your* self-inflicted injuries, unless medical evidence establishes that the injuries are related to a mental health illness.
 5. *Your* committing or attempting to commit a criminal act.
 6. Not following a prescribed therapy or *treatment*.
 7. Any *sickness*, death or *injury* related directly or indirectly to *your* abuse of medication(s), drug(s), alcohol or any other toxic substance(s).
 8. Any loss resulting from *your minor mental or emotional disorder*.
 9.
 - a) *your* routine prenatal care;
 - b) *your* pregnancy, childbirth, any complication(s) related to *your* pregnancy or childbirth, when any such event, in any combination, happen(s) in the nine (9) weeks before or after the expected date of delivery;
 - c) *your* child born during *your trip*.
 10. 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*.
 11. A travel visa that is not issued because of a late application.
 12. An *act of war* or *act of terrorism*. Limited coverage applies with respect to an *act of terrorism* as described in the *Act of Terrorism* Coverage provision.

13. When, before the *effective date*, the Government of Canada issues an "Avoid Non-Essential Travel" or an "Avoid All Travel" Travel Advisory, advising Canadian residents not to travel to that country, region or city where *your* loss resulted 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*.

DEFAULT PROTECTION COVERAGE

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

If *you* purchased a plan that includes **Trip Cancellation & Trip 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*:
 - *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
 - 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 Air Fare Cancellation 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 expenses 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 & Trip Interruption* Insurance coverage under the Manulife Global Air Fare Cancellation 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.

ACT OF 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 **Trip Cancellation & Trip Interruption Insurance coverage**, we will provide benefits to *you* for *your* eligible 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 Trip Cancellation & Trip 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 Insurance Coverage	Maximum Aggregate for Each Act of Terrorism (CDN\$)
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 Act of 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. *Your* entire contract with *us* consists of: this policy; *your* application for this policy; 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 or circumstance concerning this insurance, either at time of application for this policy (including any request for extension or top-up of coverage for benefits), at the time of claim or at any other moment during *your* coverage period.

This policy is non-participating. *You* are not entitled to share in *our* divisible surplus.

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.

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 or territory of residence, respecting contracts of accident and sickness insurance.

Limitation of Liability

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

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.

If *you* have purchased insurance for a period of coverage of 183 days or more, *you* have 10 days from the date of purchase to review this policy. If it does not meet *your* needs, *you* may cancel it and get the premium refunded by notifying *us*. *Your* ability to cancel the policy may be affected if *you* have already departed on *your trip*.

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?

This is second payor coverage. *You* may have other in-force plans or contracts such as, but not limited to, third party liability, auto insurance, group or individual health insurance providing *hospital*, medical or therapeutic coverage. In this case, the amounts payable under this insurance are limited to that portion of *your* eligible expenses that are in excess of the amounts provided by those 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 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), 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.

IN THE EVENT OF A CLAIM

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

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

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 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 on the following pages.

Written claims correspondence should be mailed to:

Manulife Global Travel Insurance
c/o Active Care Management
PO BOX 1237, Station A, Windsor, ON N9A 6P8

Online Claims Submission

For quick and easy submission of *your* Proof of Claim, visit <https://manulife.acmtravel.ca> and please have all of *your* documentation available [in electronic format].

You may also call the Assistance Centre directly to inquire about *your* claim status at: **1 855 841-4793**

For coverage information or general enquiries, please contact the Manulife Travel Customer Service at **1 866 298-2722**.

If *you* are making a *Trip Cancellation & Trip 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;
- b) a report from the police or other responsible authority documenting the reason for the delay if *your* claim is due to a misconnection or *trip* delay, or
- c) other appropriate documentation if the claim is not for medical reasons. For example: copy of the subpoena if cancelling due to jury duty or being called as witness. If death is the cause of the claim, an official document such as a death certificate that establishes cause of death will also be required.

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, internet usage fees, taxi fares or car rental 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.

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

Except in the case of *your* death, we will pay the *reasonable and customary* expenses under this insurance to *you* or the provider of the service, less any applicable deductible. Any sum payable for loss of life will be payable to *your* estate. You must repay us any amount paid or authorized by us on *your* behalf if we determine that the amount is not payable under *your* policy. All amounts shown throughout this contract are in Canadian dollars. If currency conversion is necessary, we will use *our* exchange rate on the date *you* received the service outlined in *your* claim. We will not pay for any interest under this insurance.

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

If *you* disagree with *our* claim decision, the matter may be submitted for judicial resolution under the applicable law(s) of the Canadian province or territory where *you* reside at the time of application for this policy.

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 in the *Limitations Act, 2002* in Ontario, 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(s) of terrorism means any activity that involves a threat to use or the actual use of violence or any dangerous or threatening act, or the use of force. Such act is directed against the general public, governments, organizations, properties or infrastructures, or electronic systems.

The intention of such activity is to:

- instill fear in the general public;
- disrupt the economy;
- intimidate, coerce or overthrow a sitting government or occupying power; 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 time of application.

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 *your* unmarried, dependent son or daughter or *your grandchild(ren)* travelling with *you* or joins *you* during *your trip* and is either: i) under 21 years of *age*, ii) under 26 years of *age* if full-time student; or iii) *your child* of any *age* who is mentally or physically disabled.

Confirmation means 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*.

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 for *your trip*.

Departure point means the place *you* leave from for *your trip* and are going to return to.

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

- For *Trip Cancellation Insurance* coverage starts at the date and time *you* pay the premium for that coverage, indicated as the purchase date on *your confirmation*.
- All other coverages start on *your departure date*.

Emergency means an unforeseen *sickness* or *injury* that requires immediate medical *treatment*. An *emergency* no longer exists when the Assistance Centre determines that the person is able to return to his or her province, territory of residence or country of permanent residence, or continue with the *trip*.

Expiry date means the date *your* coverage ends.

- For *Trip Cancellation Insurance*, *your* coverage ends on *your departure date* as shown on *your confirmation*.
- All other coverages end on the earlier of:
 - a) the date when *you* return to *your departure point*; or
 - b) on the expiry date as shown on *your confirmation*.

Heart condition means **ANY** disorder relating to the 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 means *the departure point*.

Hospital means a licensed facility 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 is caused by external and purely accidental means, and independent of *sickness* or disease.

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 condition means *sickness*, *injury*, disease or symptom, complication of pregnancy within the first thirty-one (31) weeks of pregnancy.

Minor mental or emotional disorder means:

- 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 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*, a *travel companion* or a member of *your immediate family*.

Pre-existing condition means a *medical condition* that existed before *your effective date*.

Reasonable and customary 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* or for other comparable services or supplies for similar circumstance.

Sickness means illness, disease, disorder or any symptom.

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

Stable medical condition means that all of the following apply:

- there has not been any new symptom(s); and
- existing symptom(s) have not become more frequent or severe; and
- a *physician* has not determined that the *medical condition* has become worse; and
- no test findings have shown that the *medical condition* may be getting worse; and
- a *physician* has not provided, prescribed, or recommended any new medication, any *change in medication*; and
- a *physician* has not provided, prescribed or recommended any investigative testing, new *treatment* or any change in *treatment*; and
- there has been no admission to a *hospital* or specialty clinic; and
- a *physician* has not advised a visit to a specialist or to have further testing, and there has been no testing for which the results have not yet been received.

Travel companion means someone who shares *trip* arrangements with *you* on any one *trip*, up to a maximum of 5 persons including *you*.

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 hospitalization, prescribed medication (including medication prescribed "as needed") medical, therapeutic, diagnostic or surgical procedure prescribed, performed or recommended by a licensed medical practitioner.

Important: Any reference to testing, tests, test results, or investigations excludes genetic tests. "Genetic test" means a test that analyzes DNA, RNA or chromosomes for purposes such as the prediction of disease or vertical transmission risks, or monitoring, diagnosis or prognosis.

Trip means the period of time between *your* effective date and expiry date as shown on *your confirmation*.

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 FNAIC in connection with risk identified with ‡ throughout this document; and Manulife in connection with all other coverages under this policy.

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*.

In this policy, words and terms denoting the singular shall be interpreted to mean the plural and vice versa, unless the context clearly indicates otherwise.

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 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 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, Manulife, P.O. Box 1602, Waterloo, Ontario N2J 4C6. *You* may also visit Manulife at <https://www.manulife.ca/privacy-policies.html> for further details about *our* Privacy Policy.

The Manufacturers Life Insurance Company
First North American Insurance Company