

Manulife Global Youth Emergency Medical Policy



Underwritten by
The Manufacturers Life Insurance Company (Manulife)

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 - Read Carefully 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 with limits). Please take time to read through your policy before you travel. **Italicized terms are defined in your policy.**

- Travel insurance covers claims arising from sudden and unexpected situations (i.e. accidents and emergencies) and typically not 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 stable, pregnancy, child born on trip, excessive use of alcohol, high risk activities).
- This insurance may not cover claims related to pre-existing medical conditions, whether disclosed or not at time of policy purchase.
- Contact the Assistance Centre before seeking treatment or your benefits may be limited.
- In the event of a claim your prior medical history may be reviewed.
- If you have been asked to complete a medical questionnaire and any of your answers are not accurate or complete, your policy will be voidable.

It is your responsibility to understand your coverage. If you have questions, call 1 866 298-2722.

IN THE EVENT OF AN EMERGENCY, CALL:

1-877-251-4517

Toll-free from the USA and Canada

+1 (519) 251-7423

Collect to Canada where available



NAME _____

POLICY # _____

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NAME _____

POLICY # _____

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.

A **pre-existing condition exclusion** applies to *your* Emergency Medical Insurance coverage. It is **your responsibility** to review and understand the *pre-existing condition* exclusion that applies to *you* listed on Page 6 of this policy.

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

1-877-251-4517 toll-free from the USA and Canada

+1 (519) 251-7423 call collect where available

Our Assistance Centre is there to help *you*

24 hours a day, every day of the year.

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

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

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

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INTRODUCTION

Policy Contract

This is *your* insurance policy, a contract detailing the terms and conditions of the insurance coverage *you* purchased. *Your* application, the *confirmation*, this policy and any riders or endorsements to it shall form the entire contract between *you* and *us*. We have the sole authority for changing or waiving any of the terms, conditions or provisions stated in this policy.

How to contact us

Prior to travelling, or when travelling and *you* require *emergency* assistance, call:

1-877-251-4517 toll-free from the USA and Canada

+1 (519) 251-7423 collect where available.

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

10-Day Free Look to Review this Policy

You have 10 days from *your* insurance purchase date to review this policy. If it does not meet *your* needs, *you* may terminate this insurance coverage and receive a premium refund if:

- (i) *you* have not departed on *your trip*; and
- (ii) there is no claim in progress.

To request a premium refund, simply contact *your* travel agent from whom *you* purchased the insurance.

THIS POLICY IS UNDERWRITTEN by The Manufacturers Life Insurance Company (Manulife). Manulife has appointed Active Claims Management (2018) Inc. (operating as “Active Care Management”) as the provider of all assistance and claims services under this policy.



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 Insurance 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



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™**.

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



If *you* need medical attention or must make any other type of claim during *your trip*, call us for assistance first. The Assistance Centre is open 24 hours a day, every day of the year. Before *you* travel download the free assistance & claim mobile app, **ACM TravelAid™**.

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



MEDICAL CONCIERGE SERVICES

Manulife Global Travel Insurance is pleased to provide you with value-added medical concierge services.

What services are available?

StandbyMD has an International network of medical providers and partners who provide services across time zones and who assure a quick and streamlined access to healthcare 24 / 7 / 365 all over the world. StandbyMD allows you to access multiple levels of personalized care ranging from:

- Teleconsultations for eligible cases (telephone / chat / videoconference access to a qualified physician who can assess your symptoms and provide treatment options)
- A network of visiting physicians (in 141 countries and over 4,500 cities)
- In-network clinics close to the patient
- In-network ERs located close to the patient only if necessary

In addition, when you travel within Canada or to the United States, StandbyMD offers the following services:

- Same-day co-ordination and delivery of lost/forgotten prescription maintenance medication, eyeglasses or contact lenses and medical supplies.

How does this service work? StandbyMD's risk assessment algorithm triages patients according to their symptoms, profiles and location. Based on the information provided they are instantly referred to the most appropriate level of care their specific situation requires. StandbyMD uses a worldwide network of providers that offer high-quality care at preferred rates and direct billing solutions, minimizing the likelihood of paying out-of-pocket. The StandbyMD program will assist with co-ordinating payment of eligible expenses subject to the terms and conditions of the policy. To access this service, simply call the Assistance Centre using the phone numbers indicated on the wallet card.

Disclaimer, Waiver, and Limitation of Liability: StandbyMD is not intended to be a substitute for professional medical advice, it is provided for the purpose of assisting you in finding medical providers. The advice provided by StandbyMD is a recommendation only, and entirely voluntary. You still retain the right to choose for yourself, your own level of care regardless of StandbyMD's recommendation. Medical providers utilized by StandbyMD are not employees, agents, nor in any way affiliated with StandbyMD, beyond accepting StandbyMD's referrals. StandbyMD does not have any control, real or implied, over the medical judgment of participating medical providers, nor their actions or inactions. StandbyMD, upon making referrals under this policy does not assume any responsibility for:

- the availability,
- their quality,
- the results or outcome of any treatment or service.

Policyholders hereby specifically waive any and all rights to proceed legally against StandbyMD or anyone related to StandbyMD* in any and all claims, demands, actions, causes of action, and suits of any kind, nature, or amount which relate to, or in any way directly or indirectly flow from the medical concierge services that StandbyMD is offering. StandbyMD's liability under these medical concierge services, if any, is limited solely to the amount of payment made to participating medical providers for the services that a policyholder obtained after they received a referral from StandbyMD.

*Related persons include principals, parents, successors and assigns of StandbyMD.

SCHEDULE OF BENEFITS

YOUTH EMERGENCY MEDICAL POLICY	
Eligible Age	Over 30 days old and up to age 29
Medical Concierge Services	Included
EMERGENCY MEDICAL INSURANCE	
Hospital & Medical	Up to \$1,000,000
Accidental Dental	Up to \$1,000,000
Medical Evacuation & Return Home	Up to \$1,000,000
Accommodation & Meal Expenses	Up to \$150
Visit to Bedside	Round Trip Economy Fare + \$500 Travel Expenses
Return & Escort of Children	Escort Round Trip + Children One Way Economy Fares
Repatriation of Remains	Reasonable Expenses Up To \$1,000,000
Cremation-Burial at Destination	Up to \$3,000
Vehicle Return	Reasonable Return Cost
Hospital Confinement Allowance	Up to \$500
Child Care Cost	Up to \$500

We will reimburse eligible expenses and/or pay benefits for covered losses, subject to the terms, conditions, limitations and exclusions stated in this policy.

PLEASE NOTE: In the event that you are not covered under a *government health insurance plan* for the entire duration of your trip, reimbursement for eligible expenses incurred under this Emergency Medical Insurance will be limited to a **maximum of \$25,000**.

ELIGIBILITY

Travel insurance must be purchased based upon age, length of travel and other restrictions set forth in this Manulife Global Youth Emergency Medical policy.

AGE	LENGTH OF TRAVEL	OTHER CONDITIONS
Over 30 days old and up to age 29*	Trips up to 365 days	Valid <i>government health insurance plan</i> .

* Please check *pre-existing condition* exclusions for **Emergency Medical Coverage** (see page 6).

PERIOD OF COVERAGE

The period of coverage under this policy shall not exceed 12 consecutive months for any one *trip*.

The *trip* must originate and terminate in Canada.

This insurance must be purchased prior to departure from *your* province or territory of residence in Canada and for the complete duration of the *trip*.

THE DATE YOUR COVERAGE STARTS / YOUR EFFECTIVE DATE OF COVERAGE

Coverage starts when *you* leave *home*.

For Top-Ups, if *you* purchased this insurance as a *Top-Up* to another plan, coverage starts after *you* leave *home*, on the start date of *Top-Up* coverage indicated on *your* application and which must correspond to the first day after expiration of *your* other plan.

THE DATE YOUR COVERAGE ENDS / YOUR COVERAGE EXPIRY DATE

Coverage ends on the earlier of:

- a) the date *you* return *home*; or
- b) the return date, as stated on *your* confirmation.

Automatic Extension

We will extend *your* coverage automatically beyond the date *you* were scheduled to return *home* as per *your* confirmation if:

- a) *your* common carrier is delayed. In this case, we will extend *your* coverage for up to 72 hours; or
- b) *you* or *your* travel companion is in *hospital* on that date. In this case, we will extend *your* coverage while in *hospital* and for up to 5 days after discharge from the *hospital*; or
- c) *you* or *your* travel companion has a *medical condition* that does not require admission to *hospital* but prevents travel. In this case, we will extend *your* coverage for up to 5 days.

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

What If I Stay Longer Than Planned?

Extensions: If *you* have not left *home*, simply call *your* travel agency to ask for the extension. If, however, *you* are already on *your* trip, please call the Assistance Centre prior to *your* expiry date. *You* may be able to extend *your* coverage, subject to an extra premium, as long as the total length of *your* trip does not exceed 365 days.

If *you* have not had or expect to have a *medical condition* or claim since *your* policy was issued, the extension will be issued right away. Otherwise, the extension is subject to the approval of the Assistance Centre.

Top-ups: To *Top-up* another insurer's plan for trips longer than the number of coverage days *you* have, simply call *your* distributor of Travel Insurance before *you* leave *home* for the additional coverage days required. It is *your* responsibility to confirm that a *Top-up* is permitted on *your* existing plan with no loss of coverage.

Refund of Premium

If *you* return *home* before the date *you* were scheduled to return *home* as per *your* confirmation, and have not had a cause for a claim or started a claim, *you* may ask for a refund of the premium for the unused days. Simply contact *your* travel agent to ask for the refund and provide proof of the date *you* actually returned *home*.

EMERGENCY MEDICAL INSURANCE

Benefits - What does Emergency Medical Insurance cover?

If *you* incur eligible expenses during the period of coverage as the result of an *emergency sickness or injury*, we will pay the *reasonable and customary* charges in excess of any amount payable under *your* government health insurance plan for such expenses, up to the amount specified for any service subject to the overall maximum of **\$1,000,000**. Benefit payments under this policy will be coordinated with benefits available to *you* under any other type of insurance or prepaid plan, so that reimbursement from all sources will not exceed 100% of the eligible expenses incurred. In any event, coverage and benefits will cease immediately upon *your* arrival back to *your* province or territory of residence in Canada.

Eligible expenses shall consist of charges for:

1. **Emergency Hospital Services:** Hospital room and board charges or charges for an intensive care room. Alternatively the services of private duty nursing, performed by a registered nurse (R.N.) other than a relative, when ordered in writing by the attending *physician* expressly in lieu of hospitalization and arranged by the Assistance Centre. If *you* are on a cruise ship and are unable to pay directly as required by the cruise ship medical provider, the Assistance Centre will make arrangements for direct billing of covered expenses, where possible, on *your* behalf.
2. **Emergency Medical Services:** Services by a *physician* or surgeon when necessary to provide *treatment* due to an *emergency*.
3. **Medical Procedures and Diagnostic Services:** All medical and diagnostic procedures and/or tests (including but not limited to MRI, MRCP, CAT Scan, CT Angiogram, Nuclear Stress Test, Angiogram or Cardiac Catheterization or any surgery) **provided prior approval is obtained by the Assistance Centre.**
4. **Prescription Drugs:** Drugs and/or medications that are required to treat an *emergency*, provided they are obtained on the written prescription of a *physician* and dispensed by a licensed pharmacist. This includes the replacement cost of *your* drugs or medications that are lost, stolen or damaged during *your* trip to the lesser of **\$50** or the amount of medication required for the balance of *your* trip. Charges for vitamins, vitamin preparations, over-the-counter drugs or medications, contraception or birth control are not covered.
5. **Medical Equipment:** Rental or purchase of durable medical equipment for therapeutic purposes only, when necessitated by a medical *emergency*, provided prior approval is obtained by contacting the Assistance Centre.
6. **Emergency Dental Treatment:** Services of a licensed dentist or dental surgeon at *your* destination, when required to repair natural or permanently attached artificial teeth which are damaged due to an accidental blow to the head or mouth. Up to **\$1,500** will be reimbursed for continuing dental *treatment* following *your* return to Canada, provided the *treatment* is related to the accidental blow to the head or mouth and the expenses are incurred within 180 days after the date of the accident.

In the event that *you* require *emergency* dental *treatment* to relieve acute pain and suffering that is unrelated to an accidental blow to the head or mouth, up to a maximum of **\$300** will be payable.
7. **Emergency Paramedical Services:** Services of a chiropractor, chiropodist, physiotherapist, osteopath or podiatrist when medically necessary as the result of an *emergency*, up to a maximum of **\$300** per category of practitioner. Excluded are charges for general examinations for "checkup" purposes, cosmetic treatments, or services performed by an *immediate* family member.

8. **Ground Ambulance:** Ground ambulance services to the nearest appropriate *hospital* or medical service provider when necessary due to a medical *emergency*. If an ambulance was medically necessary but not available, expenses will be reimbursed for local taxi fares. If local taxi services are required to get to and from the nearest medical service provider for a minor *emergency*, expenses will be reimbursed up to a maximum of **\$100**.
 9. **Emergency Medical Evacuation/Return Home:** If, in the event of a medical *emergency*, our medical advisors and/or the Assistance Centre in consultation with *your* local attending *physician* determine that *you* should be transported to another *hospital* or back to *your* province or territory of residence in Canada for necessary medical *treatment*, the Assistance Centre will arrange for transportation under proper medical supervision and we will pay expenses for the following:
 - a) the extra cost of one-way economy class transportation, via the most cost-effective itinerary back to *your* province or territory of residence in Canada; This benefit will extend to cover the cost of an airline seat upgrade if determined medically necessary and arranged by the Assistance Centre; or
 - b) a stretcher fare on a commercial flight via the most cost-effective itinerary back to *your* province or territory of residence in Canada, if a stretcher is medically necessary, and the round-trip economy class airfare via the most cost-effective itinerary, plus the reasonable fees and expenses for a qualified medical attendant to accompany *you*, when an attendant is medically necessary or required by the airline; or
 - c) air ambulance transportation, if this is medically necessary, is appropriate and consistent with the diagnosis and could not be omitted without adversely affecting *your* condition or quality of medical care.
- Emergency Medical Evacuation/Return Home Services under this section must be approved and arranged in advance by contacting the Assistance Centre.**
10. **Accommodation and Meals:** Up to **\$150** for commercial accommodation and meals, essential telephone calls, internet usage fees and taxi fares or *rental vehicle* charges in the event *you* are relocated to receive *emergency* medical *treatment* or delayed beyond the scheduled *return date* due to a *sickness* or *injury* to *you*, *your travel companion* or an *immediate family* member who is accompanying *you* on the *trip*. The claim must be supported by original receipts and the attending *physician's* written diagnosis of the *sickness* or *injury*.
 11. **Visit To Bedside:** Travel and accommodation expenses incurred for one relative or close friend to visit at *your* bedside due to a critical *sickness* or *injury*, or when the attending *physician* states in writing that it is necessary for someone to travel to, remain with, and/or escort *you* back to *your* province or territory of residence in Canada, provided prior written approval is obtained by contacting the Assistance Centre; *you* will be reimbursed for:
 - a) the round-trip economy transportation via the most cost-effective itinerary for someone to be with *you*; plus
 - b) up to **\$500** for commercial accommodation and meals.If the Assistance Centre must arrange for a visit to bedside, Emergency Medical Insurance will be automatically extended under the same terms and limitations of this policy (subject to meeting the eligibility requirements of the policy) to cover such relative or close friend until *you* are medically fit to return *home*.
 12. **Return & Escort of Children:** If *you* are admitted to *hospital* for more than 24 hours due to an *emergency*, or *you* must return to Canada due to an *emergency medical condition* covered by this policy, or in the event of *your* death, *children* (includes grandchildren), travelling with *you* during *your trip* or who had joined *you* during *your trip* will be returned to Canada and reimbursement will be made for:
 - a) the extra cost of one-way economy transportation via the most cost-effective itinerary to return the *children* back to their province or territory of residence in Canada; and
 - b) the round-trip economy transportation and overnight hotel accommodation for the services of an escort, if required.
 13. **Return of Travel Companion:** If *your travel companion* is prevented from returning by means of originally scheduled transportation due to *your* death or medical evacuation, expenses will be reimbursed for the extra cost of one-way economy transportation via the most cost-effective itinerary to return *your travel companion* back to his/ her province or territory of residence.
 14. **Travel Expenses Due to Repatriation of Travel Companion:** If *you* are prevented from returning by means of *your* originally scheduled transportation due to the death or medical evacuation of *your travel companion*, *you* will be reimbursed for the extra cost of one-way economy transportation via the most cost-effective itinerary back to *your* province or territory of residence.
 15. **Repatriation:** The reasonable costs actually incurred for preparing and returning *your* body or ashes to *your* province or territory of residence in Canada; or up to the maximum of **\$3,000** for burial or cremation in the place where the death occurs. Expenses for a headstone, casket and/or funeral service charges are not covered.
 16. **Identification of Remains:** The round-trip economy transportation via the most cost-effective itinerary to transport one relative or close friend to the place where *your* remains are located, plus up to **\$450** for commercial accommodation and meals, when someone is legally required to identify *your* remains before the body is released; provided prior written approval is obtained by contacting the Assistance Centre. Emergency Medical Insurance will be automatically extended under the same terms and limitations of this policy (subject to meeting the eligibility requirements of the policy) to cover such relative or close friend during the period required to identify *your* remains but for not more than 3 business days.
 17. **Vehicle Return:** The reasonable costs incurred for returning *your vehicle* to *your* residence or the nearest appropriate rental depot when *you* are unable to do so due to an *emergency*.
 18. **Hospital Allowance:** If *you* are hospitalized for 48 hours or more, we will reimburse *you* up to **\$50** per day, to a maximum of **\$500** for incidental expenses (telephone calls, television rental, etc.) while *you* are in the *hospital*.
 19. **Baggage Repatriation:** In the event of an *emergency*, and the Assistance Centre is arranging to return *you* to *your* province or territory of residence in Canada, if there is insufficient space to accommodate *your* baggage and/or personal effects aboard the transport provided, we will reimburse *you* up to **\$200** to cover the cost of shipping *your* baggage and/or personal effects to the original *departure point* of *your trip*.
 20. **Child Care Cost:** We will reimburse *you* up to **\$50** per day to a maximum of **\$500** for professional *child* care costs in the event *you* are relocated to receive *emergency* medical *treatment* or delayed beyond the scheduled *return date* due to *your sickness* or *injury*. Receipts from the professional *child* care provider will be required.

CONDITIONS & LIMITATIONS: EMERGENCY MEDICAL INSURANCE

1. In the event of an **emergency** which requires assistance, medical *treatment* or admission to *hospital*, you must call the Assistance Centre before obtaining **emergency treatment**, so that we may:

- confirm coverage
- provide pre-approval of *treatment*.

You must immediately contact the Assistance Centre at:

- 1-877-251-4517 toll-free from the USA and Canada
- +1 (519) 251-7423 collect where available

prior to *treatment* or admission to *hospital* or within 24 hours after a life or organ threatening *emergency*, unless you are unconscious or physically unable. If it is medically impossible for you to call prior to obtaining *emergency treatment*, we ask you to call or have someone call on your behalf as soon as possible. Otherwise, if you do not call the Assistance Centre before you obtain *emergency treatment* you will be responsible for 25% of your medical expenses covered under this insurance.

After your medical *emergency treatment* has started, the Assistance Centre must assess and pre-approve additional medical *treatment*. If you undergo tests as part of a medical investigation, *treatment* or surgery, obtain *treatment* or undergo surgery that is not pre-approved, your claim will not be paid. This includes but is not limited to MRI, MRCP, CAT Scan, CT Angiogram, sonograms, ultrasounds, Nuclear Stress Test, biopsies, Angiogram, Angioplasty, cardiovascular surgery including any associated diagnostic test(s), Cardiac Catheterization or any surgery.

2. If you experience a medical *emergency* during your *trip*, the Assistance Centre must be notified and, in consultation with its medical advisors and the local attending *physician*, reserves the right to return you to Canada prior to any *treatment* or following *emergency treatment* or your admission to *hospital* for a *sickness* or *injury*, if on medical evidence you are able to return to Canada without endangering your life or health. If our medical advisors determine that you should transfer to another facility or return to your home province/territory of residence for *treatment*, and you choose not to, benefits will not be paid for further medical *treatment* and the contract will be terminated.
3. If you are not covered under a *government health insurance plan* for the entire duration of your *trip*, reimbursement for eligible expenses incurred under this Emergency Medical Insurance Section will be limited to a maximum of **\$25,000**.

EXCLUSIONS: EMERGENCY MEDICAL INSURANCE

This insurance does not cover and no benefits will be payable for:

1. A pre-existing condition or related medical condition which was not stable during the 3-month period before your effective date.
2. Any *medical condition* when you knew or for which it is reasonable to believe or expect that *treatments* will be required during your *trip*.
3. Expenses incurred for medical care or services where the *trip* was undertaken after a *physician* advised you not to travel or after receiving notice of a terminal prognosis.
4. Any *treatment*:
 - a) not required for the immediate relief of acute pain and suffering;
 - b) which can reasonably be delayed until you return to your province or territory of residence in Canada;

- c) which you elect to have rendered or performed outside your province or territory of residence in Canada following *emergency treatment* for unexpected *sickness* or *injury*, and which on medical evidence would not prevent you from returning to your *departure point* prior to such *treatment* being performed; or
 - d) for follow-up *treatment*, a *medical condition* that occurs or reoccurs or subsequent *emergency treatment* or hospitalization for a *medical condition* or related *medical conditions* for which you had received *emergency treatment* during your *trip*.
5. Transplants, including but not limited to, organ transplants or bone marrow transplants.
 6. Any *trip* made for the purpose of obtaining a diagnosis, *treatment*, surgery, investigation, palliative care, or any alternative therapy including any expenses for directly or indirectly related complications.
 7. Any non-*emergency*, experimental or elective *treatment* such as cosmetic surgery, chronic care, rehabilitation including any expenses for directly or indirectly related complications.
 8. The cost of replenishing any drugs or medications that were in use on your *departure date* or for the maintenance of any course of *treatment* that commenced prior to your *departure date* unless the replacement is required to replace your eligible drugs or medications that were damaged, lost or stolen during your *trip*.
 9. Preventive medicines, inoculations, birth control pills or devices, vitamins, vitamin preparations and over-the-counter drugs or medications.
 10. Unless prior approval is provided the Assistance Centre, any *emergency* air transportation, any medical procedures or diagnostic services or tests (including MRI, MRCP, CAT Scan, CT Angiogram, Nuclear Stress Test, Angiogram or Cardiac Catheterization). 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.
 11. Consequential loss of any kind, including loss of enjoyment and financial loss not otherwise specifically covered under this policy.
 12. Accidental bodily injury(ies) sustained during the *trip* as the result of your participation in:
 - any sporting activity for which you are paid;
 - any sport or activity indicated below:
 - any form of BASE jumping (ie: wingsuit flying);
 - hang-gliding;
 - spelunking;
 - hunting;
 - bungee jumping;
 - piloting an aircraft;
 - rock climbing;
 - mountain-climbing which involves the ascent or descent of a mountain requiring the use of specialized equipment, including crampons, pickaxes, anchors, bolts, carabiners and lead or top rope anchoring equipment;
 - underwater activities involving the use of self-contained underwater breathing apparatus (unless you hold an open water diving certificate)
 - motorcycling (unless you hold a valid Canadian motorcycle driver's licence)
 - mopeds (unless you hold a valid Canadian driver's licence)
 - any competition, speed event or other high-risk activity involving the use of a motor vehicle on land, water or air, including training activities, whether on approved tracks or elsewhere.

13. *Act(s) of terrorism* except as otherwise specifically provided in the General Limitations on Coverage Section of this policy.
14. • acts of war, whether declared or undeclared;
 - willing participation in a riot or civil disorder;
 - rebellion;
 - revolution;
 - ionizing radiation or poisoning of people by nuclear, radioactive, chemical and/or biological substances that causes sickness or death from any nuclear fuel or waste which results from the burning of nuclear fuels;
 - radioactive, toxic, explosive or other dangerous properties of nuclear machinery or any part of it.
15. Participation in armed forces training exercises or manoeuvres.
16. *Your* self-inflicted injuries, unless medical evidence establishes that the injuries are related to a mental health illness.
17. *Your minor mental or emotional disorders*.
18. • Any *medical condition*, including symptoms of withdrawal, arising from, or in any way related to, *your* chronic use of alcohol, drugs or other intoxicants whether prior to or during *your trip*.
 - Any *medical condition* arising during *your trip* from, or in any way related to, the abuse of alcohol, drugs or other intoxicants.
19. • routine pre-natal or post-natal care;
 - pregnancy, delivery, or complications of either, arising 9 weeks before the expected date of delivery or 9 weeks after.
20. *Your* child born during the *trip*.
21. *Your* commission of or attempt to commit any criminal offence or illegal act.
22. Fraud, concealment, or deliberate misstatement in relation to any matter affecting this insurance or in connection with the making of any claim hereunder.
23. If *your* insurance is purchased as *Top-up coverage* to another insurance coverage, any expenses related to a claim that occurred when the other insurance was in force.
24. Any *medical condition* you suffer or contract when an official travel advisory was issued by the Canadian government stating "Avoid all non-essential travel" or "Avoid all travel" regarding the country, region or city of *your* destination, before the *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.

If *you* are not eligible for coverage in accordance with the eligibility requirements on the date of *your* application, we will declare *your* coverage null and void from inception and no benefits will be payable.

Limitation on Assistance Centre Services

We and/or the Assistance Centre reserve the right to suspend, curtail or limit services in any area or country in the event of:

- a) rebellion, riot, military uprising, war; or
- b) labour disturbances, strikes; or
- c) nuclear accident(s), act(s) of God, or refusal by the authorities in the country where assistance is required, to permit the delivery of such services.

The Assistance Centre will use its best efforts to provide services to the best of its ability during any such occurrence.

The Assistance Centre's obligation to provide services described in this policy is subject to the terms, conditions, limitations and exclusions set out in this policy. The medical professional(s) suggested or designated by *us* or the Assistance Centre to provide services in accordance with the benefits and terms of this policy are not employees of *us* or the Assistance Centre.

Therefore, neither *we* nor the Assistance Centre shall be held responsible or liable for any negligence or other acts or omissions on their part, nor for the availability, quality, quantity or results of any *treatment* or service *you* may receive or *your* failure to obtain or receive any *treatment* or service.

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:

- We will provide benefits to *you* for *your* covered expenses, up to a maximum aggregate of **\$35,000,000** (CDN) for each *act of terrorism* (up to two (2) *acts of terrorism* within a calendar year); and
- The benefits payable, as described directly above, are in excess of 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 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.

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

EXCLUSION TO THIS TERRORISM COVERAGE PROVISION

Notwithstanding any provision to the contrary within this policy or any endorsement thereto, this policy does not cover any liability, loss, cost or expense of whatsoever nature which is directly or indirectly caused by, resulting from, arising out of or in connection with any *acts of terrorism* perpetrated by or involving the utilization of 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.

DEFINITIONS

When italicized, the following words are defined as:

Acts of Terrorism or **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.

Age means *your age* at time of application.

Change in Medication means the medication dosage, frequency or type has been reduced, increased, or stopped 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 who join *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.

In addition, the *children* must be older than 30 days in order to be eligible for coverage under this policy.

Common Carrier means a conveyance (such as a bus, taxi, train, boat, airplane) which is licensed, intended and used to transport paying passengers.

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*.

Departure Date means the date *you* leave *home* on *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.

- a) Coverage starts when *you* leave *home*.
- b) **For Top-Up coverage** to another plan, coverage starts after *you* leave *home*, on the start date of *Top-Up* coverage indicated on *your* application which must correspond to the first day after expiration of *your* other policy.

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*.

Government Health Insurance Plan means the health insurance coverage that a Canadian provincial or territorial government provides to its residents.

Home means *your* Canadian province or territory of residence. If *you* requested *your* 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 *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. A *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 means *spouse*, parent, legal guardian, step-parent, grandparent, step-grandparent, grandchild, in-laws, 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 directly by external and purely accidental means, and independent of *sickness* or disease.

Medical Condition(s) means any disease, *sickness* or *injury* (including symptoms of undiagnosed conditions).

Minor Mental or Emotional Disorders 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 person:

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

Pre-Existing Condition(s) 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.

Rental vehicle means a passenger automobile, mini-van, self-propelled mobile home, self-propelled camper truck or self-propelled trailer that *you* use during *your trip* and rent, under a written contract, from a commercial rental agency licensed under the laws of its jurisdiction. Excluded is any vehicle which is a: truck, panel van, bus, sport utility vehicle while *you* use it off road, automobile designed and manufactured primarily for off-road use while it is being used off road, motorcycle, moped, motorbike, recreational vehicle (other than self-propelled motor homes), all-terrain vehicle, non self-propelled camper or trailer, automobile that is more than 20 years old, limousine, or exotic vehicle of these or similar makes: Aston Martin, Bentley, Ferrari, Porsche or Rolls Royce.

Return Date means the date on which *you* are scheduled to return to *your* departure point, as shown on *your confirmation*.

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 A *medical condition* is considered *stable* when all of the following statements are true:

1. there has not been any new *treatment* prescribed or recommended, or change(s) to existing *treatment* (including a stoppage in *treatment*), and
2. there has not been any *change in medication*, or any recommendation or starting of a new prescription drug, and
3. the *medical condition* has not become worse, and
4. there has not been any new, more frequent or more severe symptoms, and

5. there has been no hospitalization or referral to a specialist, and
6. there have not been any tests, investigation or *treatment* recommended, but not yet complete, nor any outstanding test results, and
7. there is no planned or pending *treatment*.

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

Top-Up means the coverage *you* purchase from *us* before *your* date of departure from your *departure point*, to add to *your* insurance coverage that is in effect through another source for a portion of *your* trip duration.

Travel Companion means someone who shares travel arrangements with *you* on any one trip, up to a maximum of five 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, 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.

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 return 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 or our means The Manufacturers Life Insurance Company (Manulife).

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.

GENERAL CONDITIONS

Statutory Conditions: 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.

Applicable Law: This policy is governed by the laws and regulations of the Canadian province or territory where this policy was issued.

Misrepresentation: This policy is issued on the basis of information in *your* application or provided in connection with *your* application.

When completing the application, *your* answers must be complete and accurate. In the event of a claim, we will review *your* medical history. If any of *your* answers are found to be incomplete or inaccurate:

- *your* coverage will be void;
- which means *your* claim will not be paid.

You must be accurate and complete in *your* dealings with *us* at all times.

We will not pay a claim if *you*, any person insured under this policy or anyone acting on *your* behalf makes a fraudulent, false or exaggerated statement or claim.

Contract: 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.

Conformity with Existing Laws: Any provision of this policy which is in conflict with any federal, provincial or territorial law where this policy is issued is hereby amended to conform to the minimum requirements of that law. In all other respects, the terms and provisions of this policy shall apply.

Currency: All premiums and benefits under this policy are payable in Canadian currency. To facilitate payments to providers, we will pay claims in the currency of the country where the charges are incurred, based on: i) the rate of exchange set by any chartered bank in Canada on the last date of service, or ii) the date the payment is issued to the provider of service.

Eligibility Requirements: If at the time of application *you* do not meet the Eligibility Requirements outlined in this policy, *your* insurance is void and *our* liability is limited to a refund of the premium paid.

Premium Payment: *Your* policy takes effect when the required premium is paid, subject to the terms and conditions outlined in the policy. No coverage will be provided if: i) the required premium is not paid, ii) *your* cheque is not honoured, or iii) credit card charges are declined for any reason.

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.

Limitation of Action: 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 *your* application for this policy. If mutually agreeable, legal actions may also be brought in the province where *our* head office is located.

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.

CLAIM PROVISIONS

Assignment of Benefits: Where we have paid expenses or benefits to *you* or on *your* behalf under this policy, we have the right to recover, at its own expense, those payments from any applicable source or any insurance policy or plan that provides the same benefits or recoveries. This policy also allows *us* to receive, endorse and negotiate eligible payments from those parties on *your* behalf. When *we* receive payment from any Canadian provincial or territorial *government health insurance plan*, any other insurer or any other source of recovery to *us*, the respective payor is released from any further liability with respect to the claim.

Secondary Coverage: Coverage under this policy is secondary to all other sources of recovery. Any benefits payable under this policy are in excess of any other coverage *you* may have with any other insurer or any other source of recovery.

Coordination of Benefits: Benefit payments under this policy will be coordinated with benefits available to *you* under any other insurance policy or plan, so that payments made under this policy and any other policy or plan do not exceed **100%** of the eligible expenses incurred. Coordination of the Emergency Medical Insurance benefits will be in accordance with the Coordination of Benefits Guidelines issued by the Canadian Life and Health Insurance Association with respect to Out of Country/Province Medical Expenses.

However, if *you* are covered as an active or retired employee under *your* current or former employer's group health insurance plan for Extended Health Care benefits and the lifetime maximum amount is:

- a) \$50,000 or less, Coordination of Benefits will not apply to such amount; or
- b) more than \$50,000, Coordination of Benefits will apply only to the amount of insurance in excess of \$50,000.

Notice of Claim and Proof of Claim: To make a claim for benefits under this policy, *your* written proof of claim and *your* fully completed 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 below.

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 dates* and *return dates*); and
- *your* historical medical records (if we determine applicable).

Original substantiating claims documentation must be provided; however, we may accept certified copies if the original documentation cannot be provided for a reasonable cause. Failure to provide applicable substantiation for a claim shall invalidate any claim under this policy. All documents required to support or validate the claim, including English or French translations of such documents, must be provided free of expense to *us*.

Written claims correspondence should be mailed to:

Manulife Global - Youth Emergency Medical Policy

c/o Active Care Management

PO Box 1237

Station A

Windsor, ON N9A 6P8

Online Claims Submission

Visit ACM's website www.active-care.ca, to learn more about the claim submission process and to download the free ACM TravelAid™ mobile application.

For quick and easy claim submission, please have all of *your* documents available [in electronic format] and visit <https://manulife.acmtravel.ca> to submit *your* claim online.

You may also call the Assistance Centre directly to inquire about *your* claim status at **1 855 317-1193**.

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

Claim Payments: Benefit payments will be made to *you* or, to facilitate matters, to the service provider. In the event of *your* death, any balance remaining or benefits payable for loss of life will be paid to *your* estate.

Rights of the Company and Claimant: When *you* purchase this policy, *you* agree to provide *us* with access to all pertinent records or information about *you* from any licensed *physician*, dentist, medical practitioner, *hospital*, clinic, insurer, individual, institution or other provider of service to determine the validity of any claim submitted by *you* or on *your* behalf.

Right of Examination: We have the right, and *you* must afford it the opportunity, to have *you* medically examined when and as often as may be reasonably required, when a claim under this policy is pending. In the event of death, we have the right to request an autopsy, subject to any laws relating thereto.

Right of Recovery: In the event that *you* are found to be ineligible for coverage or that a claim is found to be invalid or benefits are reduced in accordance with any policy provision, we have the right to collect from *you* any amount which it has paid on *your* behalf to medical providers or other parties.

Subrogation: If *you* suffer a loss caused by a third party, we have the right to subrogate *your* rights of recovery against the third party for any benefits payable to or on *your* behalf and will, at *our* own expense and in *your* name, execute the necessary documents and take action against the third party to recover such payments. *You* must not take any action or execute any documents after the loss that will prejudice *our* rights to such recovery.

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 below 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



Manulife, P.O. Box 670, Stn Waterloo, Waterloo, ON N2J 4B8.

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Accessible formats and communication supports are available upon request.

Visit [Manulife.ca/accessibility](https://www.manulife.ca/accessibility) for more information.

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.

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

Pre-Trip Information

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

During A Medical Emergency

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

Other Services

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

**IN THE EVENT OF AN EMERGENCY,
CALL THE ASSISTANCE CENTRE IMMEDIATELY**
1 877 251-4517 toll-free from the USA and Canada
1 877 251-7423 collect where available.

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

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