BCAA Travel Insurance

BCAA Travel Insurance Policy

October 29, 2026

THIS POLICY CONTAINS A CLAUSE WHICH MAY LIMIT THE AMOUNT PAYABLE

This is your insurance document. It describes your policy coverage and contains clauses that may exclude or limit your coverage. Please read it carefully.

IMPORTANT NOTICES

It is your responsibility to read and understand your entire Policy before you travel as your coverage may be subject to certain conditions, limitations and exclusions. Travel insurance is designed to cover losses arising from sudden and unforeseeable circumstances.

Your Policy may not provide coverage for pre-existing conditions. It is your responsibility to review the pre-existing condition exclusions and stability requirements and understand how they apply to you and how they relate to your departure date, date of purchase and/or effective date.

In the event of an injury or sickness, your prior medical history may be reviewed when a claim is made.

If your health changes after you have purchased your insurance, you are not required to call to update your Health Questionnaire (if applicable) or modify your application. However, your health change may affect your coverage for pre-existing conditions and you may choose to contact us to review Pre-existing Condition Coverage and discuss whether other coverage options are available.

PLEASE READ YOUR POLICY CAREFULLY BEFORE YOU TRAVEL.

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A Guide To Your Policy

Welcome

Thank you for choosing BCAA Travel Insurance for your travel insurance needs. Please ensure you travel with this Policy wording (which is available anytime online at bcaa.com/wordings), your wallet card and/or Policy declaration. These materials comprise your complete Insurance Policy. They also provide important contact information should you need to extend your Policy while you are travelling, or in the event of a claim.

1) **In an emergency, contact *BCAA Claims Assistance* immediately.** For a complete list of numbers, refer to Contact Information on **page 6**.

2) **You can get treatment for medical emergencies from any medical provider, anywhere in the world when you have selected Travel Emergency Medical Insurance.**

   With BCAA Travel Insurance, you choose your medical provider — you may obtain treatment in any hospital anywhere in the world. Please contact ***BCAA Claims Assistance*** as soon as you have a medical emergency so that we can help you find appropriate medical attention. For instructions on How to Claim please refer to **page 69.**

3) **When you have selected Travel Emergency Medical Insurance, the following services are available to assist you in a medical emergency:**

   Payment to hospitals and other medical providers for travel emergency medical expenses guaranteed where possible, relieving you of credit responsibilities, multilingual assistance, travel assistance for your family, family/employer communications, medical assistant to travel with you, assistance in locating the nearest medical facility and more.

   We also submit all the paperwork to your government health care plan and extended benefit plans.

4) **As a BCAA Travel Insurance customer, the following travel assistance is available to you:**

   Before you leave:

   - tourist visa/passport information;
   - information regarding inoculation/vaccination requirements;
   - weather information;
   - currency exchange information.

   While you're travelling:

   - referral to legal assistance;
   - message centre;
   - travel assistance (for lost documents, lost luggage, etc.);
   - referral to Canadian consular services worldwide.

   Please contact ***BCAA Claims Assistance.***

5) **Please keep in mind exclusions may apply.**

   Please read carefully the General Exclusions section as well as the Exclusions applicable to the specific coverage you have purchased.

6) If you have an extended benefit plan and have made a claim that was paid for by ***BCAA Claims Assistance***, we may recoup the amount back from your extended benefit plan if your lifetime maximum limit is over $100,000. However, ***BCAA Claims Assistance*** will ensure that your extended benefit plan is never reduced below $100,000 due to a claim made under this Policy. For more details, refer to General Conditions and Provisions number 2 on **page 57**.

7) You can extend your period of coverage by calling the Customer Service/Policy Extensions numbers listed on **page 7**. during regular BC business hours. To extend your coverage, you must meet the following conditions:

a) you have not seen a physician or other registered medical practitioner since your *departure date or the* effective date of the Policy;
b) you have not submitted a claim and have no intent to submit a claim;
c) you are in good health, and you do not know of any reason to seek medical attention;
d) your period of coverage has not already expired.

8) You can renew your Annual Multi-trip BCAA Travel Insurance Policy. You will be notified well in advance of your expiry date so you will never need to worry.

9) Additional coverages are available for an extra premium.

BCAA Privacy Policy Statement

BCAA (including its member companies) collects, uses and discloses your personal information for the purposes and in the manner set out in BCAA's privacy policy located at bcaa.com/privacy.

Contact Information

Contact ***BCAA Claims Assistance*** anytime. Keep this contact information handy when you travel.

Claims/Hospitalization

In the event of *hospitalization*, call ***BCAA Claims Assistance*** immediately:

From Canada & USA
1.833.560.0522

Mexico
800.083.0811

Outside North America & Mexico (global toll-free)
* 800.464.71111

Worldwide (collect)
**519.325.1567

If you can't reach us using the numbers listed or by making a collect call, please call us direct at 1.519.325.1567 and we will reimburse the charges incurred for making this call.

Or reach *BCAA Claims Assistance* by email: bcaaassistance@globalexcel.com

* To use the global toll-free service when you are travelling outside North America and Mexico, you must first dial the international access code shown on **page 7** (subject to change without notice) to reach Canada, then enter our 11-digit toll-free number. For example, if you are in Australia, dial 0011 + 800.464.71111.

** If you are unable to use the global toll-free service and international access codes shown on **page 7** (subject to change without notice), call us collect. To call us collect, contact the local operator and let them know that you wish to make a collect call to Canada at the following number: 519.325.1567.

Customer Service/Policy Extensions

(only available during regular BC business hours)

To extend your Policy while travelling, simply call *BCAA*:

From Canada & USA
1.888.268.BCAA (2222)

Mexico
800.083.0811

Outside North America & Mexico (global toll-free)
*800.464.71111

Worldwide (collect)
**604.268.5294 or **519.325.1567

International Access Codes

Argentina	00	Germany	00	Poland	00
Australia	0011	Hong Kong	001	Portugal	00
Austria	00	Hungary	00	Singapore	001
Belarus	810	Iceland	00	Slovenia	00
Belgium	00	Ireland	00	South Africa	00 or 09
Bulgaria	00	Israel	00 or 014	South Korea	001 or 002 or 008
China	00	Italy	00	Spain	00
Colombia	00 or 005	Japan	010	Sweden	00
Costa Rica	00	Luxembourg	00	Switzerland	00
Cyprus	00	Macau	00	Taiwan	00 or 002 or 005 or 006 or 007 or 009
Czech Republic	00	Malaysia	00		
Denmark	00	Netherlands	00		
Estonia	00	New Zealand	00	Thailand	001
Finland	00 or 990	Norway	00	United Kingdom	00
France	00	Philippines	00	Uruguay	00

Other Policy Changes

To make changes to your Policy before you leave, call BCAA:

From British Columbia
1.888.268.BCAA (2222)

If/when necessary, please send all correspondence other than claims to BCAA:

By Mail
BCAA Insurance Agency
4567 Canada Way
Burnaby, BC, Canada
V5G 4T1

By Email
info@bcaa.com

BCAA Travel Insurance

Wherever in this Policy, or in any endorsement attached hereto, reference is made to "BCAA", "the *company*", "the *insurer*", "we", "us", or "our", reference shall be deemed to be made to BCAA Insurance Corporation. All words in italics have a specific meaning with a corresponding definition. Refer to the Definitions section for details.

10-Day Full Refund Provision

You have 10 days starting from the *application date* of the Policy to review this Policy to ensure it meets *your* insurance needs. A full refund is available provided no travel has taken place. This does not apply to the Trip Protection Package.

To cancel *your* Policy, *you* must contact BCAA Insurance Agency during regular BC business hours. The request must be received no later than 10 days starting from the *application date* of the Policy.

Other refunds may be available. Please refer to the Refunds section of the Plan *you* have purchased.

Insuring Agreement

In consideration of having paid the required premium for the coverage(s) chosen and having completed in full the application which has been provided to *you* by BCAA Insurance Agency, this policy wording booklet becomes *your* Policy of insurance. The *company* hereby agrees to provide insurance in accordance with the terms and conditions of the Policy as set forth in this Policy.

Insurance will be provided for the coverage(s) chosen by *you*, as indicated on *your* application/declaration.

All the limits of insurance under each benefit are *aggregate limits* per *insured*, per trip, unless otherwise stated.

Validation of Coverage

At the time the required premium is paid, *your* coverage will be validated when the *company* provides *you* with a completed, time dated and numbered application/declaration.

Base Plans

Travel Emergency Medical Insurance: Annual Multi-trip and Single Trip

Eligibility

You are eligible for coverage and to purchase this insurance if, on the *application date* and the date coverage commences, *you* meet all the following requirements:

1) At least 30 days of age.
2) A *Canadian resident*.
3) Are not travelling against a *physician*'s advice.
4) Are not receiving *palliative care* or *palliative care* has not been recommended.
5) Not been diagnosed with a *terminal condition*.

Notwithstanding these eligibility and purchase conditions, all terms, conditions and exclusions of this Policy still apply.

Period of Coverage

Applicable to Annual Multi-trip

This Policy is in effect at 12:01 AM on the effective date of the Policy and continues in force for a period of one year from the effective date of the Policy. *You* may travel as many times as *you* wish during the period of coverage provided that no one *trip* exceeds the maximum number of days as specified and contracted for at the time of application.

Coverage commences at the time and on the date of each departure from *your home province*. Coverage terminates each time *you* return to *your home province* or at 11:59 PM on the expiry date of the Policy, whichever occurs first.

When travel is within Canada but outside of *your home province*, coverage is automatically provided beyond the maximum number of days selected at the time of purchase but limited to the expiry date of the Policy.

When travel is outside of Canada, coverage is limited to the maximum number of days selected. The *trip* duration begins on the date *you* leave Canada and terminates when *you* return to Canada.

Applicable to Single Trip

Coverage commences on the later of:

1) The date and time *you* depart from *your home province* or Canada; or,
2) The date and time *you* depart from *your home province* when travel is within Canada only but outside *your home province*; or,
3) The effective date as shown on *your* application/declaration.

Coverage terminates on the earliest of the following:

1) At 11:59 PM on the expiry date of the Policy;

2) On the date and time when *you* return to *your home province*.

One temporary visit to *your home province* is permitted during *your* period of coverage provided the temporary visit is unexpected and beyond *your* control; *your* Policy will not terminate; however, *you* will not be covered while in *your home province*. There will be no refund for the number of days *you* spend in *your home province*.

For policies providing Travel Emergency Medical Insurance coverage for travel worldwide excluding the USA, Mexico and the Caribbean, coverage is limited to travel outside the USA, Mexico and the Caribbean. *You* may transit through or have a stopover or layover in the USA, Mexico or the Caribbean for a maximum of 48 hours at any one time (regardless of whether travel is by land or air).

If *your trip* involves a cruise that either begins in or makes any port stops within the USA, Mexico or the Caribbean, *you* are required to purchase a worldwide plan that covers the entire duration of *your* travel.

Applicable to Annual Multi-trip and Single Trip

Coverage shall be void if purchased after the date of departure from *your home province* or for a *trip* not originating in Canada unless authorized in advance by BCAA in which case it will be subject to the *waiting period* requirements.

Top-up Coverage

Top-up coverage may be purchased when an underlying travel emergency medical insurance plan from another provider does not cover the full duration of *your trip*. It extends the coverage period but does not increase any maximum benefit limits.

When this Policy is purchased before departure to top-up another travel emergency medical insurance plan issued by another provider, coverage commences either:

a) the day following the expiry date of the insurance plan being topped-up; or,
b) the day following the expiry date of the *trip* length of the annual multi-trip insurance plan being topped-up.

When symptoms or *medical treatment* for an *emergency sickness* or *injury* begin prior to the effective date of this top-up Policy and while *you* are covered by the other travel emergency medical insurance plan, the *company* will pay eligible expenses incurred on or after the date this top-up Policy takes effect as if the *emergency sickness* or *injury* began under this top-up Policy, unless other insurance policies, plans or contracts, including but not limited to any private or provincial automobile insurance, cover the loss, and subject to all other Policy terms and conditions.

Expenses incurred before this Policy takes effect are not covered.

Benefits

Maximum limit: $10,000,000

There is an overall maximum limit payable of $10,000,000 per *insured* person. Certain benefits have specific sub-limits as specified below.

The wording in this section applies to Travel Emergency Medical Insurance:

- Annual Multi-trip and Single Trip Worldwide
- Single-Trip Excluding USA, Mexico and Caribbean
- Single-Trip Within Canada

The *company* will pay the actual, reasonable and customary expenses up to the coverage limits for *acute*, sudden and unexpected *emergency sickness* or *injury*, resulting from an *emergency* that occurs while *you* are travelling outside *your home province*. Once the *emergency* ends, no further benefits will be payable related to the specific medical condition/injury that initially caused the *emergency*.

Eligible medical and related expenses are described below:

1) Emergency Medical Treatment

Hospital Services
Hospitalization services (limited to a semi-private room). Any coverage related to *hospitalization* terminates upon release from the *hospital* other than what is specified under the *Follow-up* Visit Benefit.

Out-patient *medical treatment* provided by a *hospital*.

Physician
The services of a *physician*.

Ambulance Services
The services of a licensed ground, air or sea ambulance and paramedics from the scene of the accident that caused the *injury* or place of onset of the *sickness* to the nearest *hospital*. Fire rescue expenses are also covered if a fire rescue team is dispatched in response to *your* medical *emergency*. If an ambulance is medically required but is unavailable, the *company* will pay for taxi expenses, taxi receipt required.

X-ray Examinations
X-ray examinations and diagnostic laboratory procedures when performed at time of initial *emergency*.

Prescription Drugs
Prescription drugs (excluding over the counter medicine, vitamins, minerals and dietary supplements) that require a *physician*'s written prescription (original pharmacy prescription receipts indicating the medication name, quantity, dosage, prescribing *physician* and cost are required). Coverage is available for a maximum supply of 30 days, for prescription drugs that are purchased in the 30-day period from the date of the initial *emergency* or the *follow-up* visit. While *you* are *hospitalized*, the *company* will pay the total cost of all prescription drugs, in addition to the 30-day maximum supply of related prescriptions that are filled in the 30-day period following the release from the *hospital*.

Lost or Stolen Prescription Drugs
In the event *your* prescription drugs are lost or stolen, the *company* will pay one *physician* visit to obtain a new prescription and the cost of the new prescription drugs (excluding over the counter medication, vitamins, minerals and dietary supplements). This benefit is payable up to a maximum of $200.

Essential Medical Appliances
The cost to rent or purchase essential medical appliances including, but not limited to wheelchairs, crutches and canes. When appliances are purchased, the reimbursement will not exceed the total cost that would have been incurred if the appliances had been rented.

Private Duty Nursing
Private duty nursing services, performed by a registered nurse (RN) other than a *family member*, when ordered in writing by the attending *physician*.

2) Follow-up Visit
One *follow-up* visit within the 14 days after the initial *emergency medical treatment*, provided the *follow-up* visit is required as a direct result of the initial *emergency*.

3) Fracture Treatment
Following the initial *emergency medical treatment* and the one *follow-up* visit, the *company* will pay up to a maximum of $1,000 for the following treatments related to fractures:

- X-ray examinations; and,
- Re-examination *physician* visits; and,
- Casting and re-casting, if *medically necessary*; and,
- Cast removal

Eligible expenses must be incurred during the same covered *trip* and prior to *your* return to *your home province*.

This benefit is only available in lieu of the Airfare to Return Home for Treatment Benefit.

4) Hospital Allowance
Expenses of up to $75 per day to cover incidental *hospital* charges, which are billed by the *hospital*, such as TV rental and telephone charges.

5) Other Professional Medical Services
Up to a maximum of $600 for any one *emergency*, per practitioner for the services of the following licensed practitioners to relieve an *acute emergency*:

- Physiotherapist
- Chiropractor
- Chiropodist
- Osteopath
- Podiatrist
- Optometrist
- Naturopath
- Holistic doctor
- Acupuncturist

6) Dental Services

The services of a licensed dentist or dental surgeon for *emergency* dental treatment, including the cost of prescription drugs and x-rays, as follows:

a) Dental expenses *you* incur while on *your trip* for an accidental blow to the face requiring the repair or replacement of natural teeth or permanently attached artificial teeth, including crowns, bridges and dental implants. *You* are also covered for continuing treatment after *your* return to *your home province*, provided the treatment is related to the accidental blow to the face and the initial treatment began prior to *your* return to *your home province*. All treatment must be completed within the 90 days after the treatment began. This benefit does not include dental treatment for veneers or dentures.

b) Dental expenses *you* incur while on *your trip* for any dental *emergencies* other than pain caused by an accidental blow to the face, up to a maximum limit of $600. All treatment must be completed within the 90 days after the treatment began and prior to *your* return to *your home province*.

7) Unexpected Birth of a Child

Up to a maximum of $20,000 for the medical expenses incurred by *your* newborn child/children following the unexpected birth of the child/children. This benefit is not payable during the nine weeks immediately prior to or after and including the expected date of delivery. Coverage terminates upon release from *hospital* or when the maximum limit has been reached, whichever occurs first.

8) Emergency Air Transportation

This benefit is payable only when pre-approved and arranged by *BCAA Claims Assistance*.

At the time of *hospitalization*, medical air evacuation for return to Canada or medical air evacuation between medical facilities when the first medical facility is not equipped to provide the required *medical treatment*.

9) Airfare to Return Home for Treatment

This benefit is payable only when pre-approved by *BCAA Claims Assistance*.

The cost of a one-way economy airfare on a commercial flight via the most direct route to return to *your home province* for immediate *medical treatment* as a result of an *emergency*. The *medical treatment* must be sought within 10 days from arrival to *your home province* and the attending *physician* providing treatment outside *your home province* must indicate in writing that the *medical treatment* is required.

The cost of an airline seat upgrade is included if the attending *physician* providing treatment outside *your home province* indicates in writing that it is also medically required.

For fracture claims, this benefit is only available in lieu of the Fracture Treatment Benefit.

10) Medical Attendant

This benefit is payable only when pre-approved by *BCAA Claims Assistance*.

If *you* are returned under the Emergency Air Transportation Benefit or the Airfare to Return Home for Treatment Benefit, the *company* will pay:

a) The cost of a round-trip economy airfare on a commercial flight via the most direct route for a qualified medical attendant (or *travelling companion* in lieu) to accompany *you* if the attending *physician* providing treatment outside *your home province* indicates in writing that it is medically required; and,

b) The cost of an airline seat upgrade for the medical attendant (or *travelling companion* in lieu) if the attending *physician* providing treatment outside *your home province* indicates in writing that it is medically required.

11) Airline Seat Upgrade

Following *emergency medical treatment*, the *company* will pay the cost of *your* airline seat upgrade when *you* are flying home on *your* regularly scheduled return flight, if the attending *physician* providing treatment outside *your home province* indicates in writing that it is medically required.

12) Return of Excess Baggage

This benefit is payable only when pre-approved by *BCAA Claims Assistance*.

If *you* are returned to *your home province* under the Emergency Air Transportation Benefit, the Airfare to Return Home for Treatment Benefit or the Repatriation Benefit, the *company* will pay up to $800 for the return of *your* excess baggage. If there was room aboard the aircraft for *your* baggage during the Emergency Air Transportation, this benefit is not applicable.

Return of Travelling Companion

This benefit is payable only when pre-approved by *BCAA Claims Assistance*.

If *you* are returned under the Emergency Air Transportation Benefit, the Airfare to Return Home for Treatment Benefit or the Repatriation Benefit, the *company* will pay a one-way economy airfare for one *travelling companion* to return back to the original *departure point*.

If *you* are resuming *your trip* under the Return to Your Destination Benefit, the *company* will also pay for the cost of a one-way economy airfare by the most direct route for the same *travelling companion* to return to the place where *you* departed from or to continue the *trip* with *you* as originally scheduled.

This benefit can only be offered once during the same *trip* and will not apply after *your* original expected *return date*.

13) Return of Children/Grandchildren

This benefit is payable only when pre-approved by *BCAA Claims Assistance*.

If *you* are returned to *your home province* under the Emergency Air Transportation Benefit, the Airfare to Return Home for Treatment Benefit or the Repatriation Benefit, the *company* will pay for:

a) A one-way economy airfare for *dependent children* or *grandchildren* travelling with *you* to return back to the original *departure point*; and,
b) The cost of a chaperone when necessary.

14) Repatriation

In the event of *your* death during a *trip* covered under the Policy benefits, the *company* will pay for:

a) The preparation and return of *your* body, including the cost of a standard shipping container (excluding the cost of a burial coffin or urn), to *your home province*; or,
b) Up to a maximum of $5,000 for burial at the place of death (excluding the cost of funeral and related expenses or a burial coffin) including one death certificate, in the event *your* body is not returned to *your home province*; or,
c) Up to a maximum of $5,000 for cremation at the place of *your* death (excluding the cost of funeral and related expenses or an urn) including one death certificate and the standard shipping cost to return *your* ashes to *your home province*; and
d) Transportation costs of one *family member* to go to the place of *your* death to identify *your* body when it is necessary to be identified prior to the release of *your* body and up to a maximum of $400 per day to a maximum of $2,000 for meals and commercial accommodation.

The *family member* identifying *your* body will also be covered as an *insured* under this Policy for the period of time required to identify *your* body. Coverage for the *family member* is limited to the Travel Emergency Medical Insurance Plan and is subject to the terms and conditions of the Policy.

15) Return to Your Destination

If *you* are returned to *your home province* under the Emergency Air Transportation Benefit or the Airfare to Return Home for Treatment Benefit, the *company* will pay the cost of a one-way economy airfare by the most direct route to return *you* to the place where *you* departed from or to continue *your trip* as originally scheduled. *Your* Policy will not terminate; however, *you* will not be covered while in *your home province*. There is also no refund for the number of days *you* spend in *your home province*.

Once *you* are returned to *your trip* destination, a *recurrence* of the same medical condition which necessitated a return to *your home province*; or the occurrence of a related condition will not be covered under this Policy. This benefit can only be offered once during the same covered *trip* and will not apply after *your* original expected *return date*.

16) Family Transportation

This benefit is payable only when pre-approved by *BCAA Claims Assistance*.

If an attending *physician* considers it necessary, the *company* will pay one round-trip economy airfare or ground transportation costs for one *family member* to be with *you* while *you* are *hospitalized* if *you* are travelling alone; or for

one additional *family member* other than *your travelling companion* if *you* are not travelling alone, and up to $400 per day up to a maximum of $2,000 for reasonable and necessary commercial accommodation, meals, telephone calls, internet charges, taxi or bus fare.

The *family member* attending *your* bedside will also be covered as an *insured* under this Policy while *you* are *hospitalized*. Coverage for the *family member* is limited to the Travel Emergency Medical Insurance plan and is subject to the terms and conditions of the Policy.

17) Out of Pocket Expenses

Up to $500 per day to a maximum of $5,000 for *your* commercial accommodation, meals, telephone calls, internet charges, taxi fare, parking charges, bus fare and rental car, if:

a) *Your travelling companion* is transferred to a different *hospital* in another city for *emergency medical treatment*; or,
b) *Your travelling companion* is confined to *hospital* on or after the date *you* are scheduled to return to *your home province*.

If *you* are claiming under part b), there is no coverage for any out-of-pocket expenses *you* incur before the date *you* are scheduled to return to *your home province*.

18) Child Care

Up to $500 per day to a maximum of $5,000 for childcare costs for *insured* children 18 years and under who are travelling with *you* (excluding childcare provided by a *family member*) when:

a) *You* are confined to *hospital*; or,
b) *You* are transferred to a different *hospital* in another city for *emergency medical treatment*.

19) Remote Evacuation

This benefit is payable only when pre-approved by *BCAA Claims Assistance*, unless contacting *BCAA Claims Assistance* is not possible.

Up to a maximum of $8,000, for reimbursement of expenses for non-medical emergency evacuation from a remote location (including mountain, sea or other location) by professional services to the nearest accessible point. This includes search and rescue services for mountain, sea or other remote locations.

20) Return of Vehicle

This benefit is payable only when pre-approved by *BCAA Claims Assistance*.

If the attending *physician* determines that as a result of an *emergency*, *you* are incapable of continuing *your trip* by means of the *vehicle* used to depart from *your home province* and the *vehicle you* intended to use to return to *your home province*, and *your travelling companion* is unable to do so for *you*, the *company* will pay either:

a) The actual reasonable and necessary charges incurred for a commercial agency to return a *vehicle* that *you* own or rent to either *your home province* or the nearest appropriate *vehicle* rental agency; or,
b) A one-way economy airfare to the destination where the *vehicle* is located; and gas, meals and accommodation for a *family member* or friend to return a *vehicle* that *you* own or rent to *your home province*.

The maximum benefit payable is limited to the amount it would cost the *insurer* to return *your vehicle*.

21) Vision Care and Hearing Aids

Up to a maximum limit of $1,000 for:

a) The replacement of prescription glasses (including prescription sunglasses) or contact lenses (up to a 30-day supply) due to theft, loss or breakage. Replacement of prescription glasses or contact lenses must be purchased and received during the same *trip* when the theft, loss or breakage occurred and prior to *your* return to *your home province*.
b) The replacement of a hearing aid due to theft, loss or breakage. Replacement of a hearing aid must be purchased during the same *trip* when the theft, loss or breakage occurred and prior to *your* return to *your home province*.

Replacement of prescription glasses, contact lenses and hearing aids must be of similar or lesser value to the ones that were stolen, lost or broken during the *trip*.

22) Domestic Services in Canada

This benefit is payable only when pre-approved by *BCAA Claims Assistance*.

If *you* have been returned to *your home province* under the Emergency Air Transportation Benefit or the Airfare to Return Home for Treatment Benefit, the *company* will reimburse up to a maximum of $250 for necessary and

reasonable cooking, cleaning, childcare and/or pet care services that are required at *your* principal residence. The services cannot be provided by a *family member* and receipts are required.
Coverage is available within the 15 days after the date *you* return to *your home province*.

23) Medical Follow-Up in Canada
This benefit is payable only when pre-approved by *BCAA Claims Assistance*.
If *you* have been returned to *your home province* under the Emergency Air Transportation Benefit or the Airfare to Return Home for Treatment Benefit, after being *hospitalized* during *your trip*, the *company* will reimburse the following expenses in Canada:

a) Up to $1,000 for a semi-private room in a *hospital*, rehabilitation centre or convalescent home; and,
b) Up to $100 per day for home care nursing or a caregiver when it is *medically necessary*; and,
c) Up to $300 for licensed ambulance services or taxi services to receive medical care; and,
d) Up to $200 to rent or purchase crutches, a standard walker, canes, trusses, an orthopedic corset and/or oxygen. When medical appliances are purchased, the reimbursement will not exceed the total cost that would have been incurred if the medical appliance had been rented.

Coverage is available within the 15 days after the date *you* return to *your home province*.

Automatic Extensions to Coverage

At the time the period of coverage ends, *your* coverage will be automatically extended at no additional premium:

Hospitalization

If *you or your travelling companion* are confined to *hospital*. The automatic extension will be provided to *you* for the remaining period of the *hospitalization*, plus up to seven days after *hospital* release to recover and/or travel home.

Medically Unfit to Travel

If *you or your travelling companion* are unable to travel on the scheduled *return date* due to a *sickness* or *injury* that does not require *hospitalization*. The automatic extension will be provided to *you* for up to seven days to recover and/or travel home. Written documentation must be provided to ***BCAA Claims Assistance*** by the attending *physician* to substantiate the inability to travel home as originally scheduled.

Quarantine

If *you* or *your travelling companion* are advised to quarantine at *your* destination and are unable to travel home on *your* scheduled *return date*, *your* coverage will be automatically extended at no additional premium for the duration of *your* quarantine, but for no more than 14 days beyond *your* original expected *return date*. Proof of being mandated to quarantine will be required and must be provided to *BCAA*.

Delay of Common Carrier

If *your common carrier* is delayed due to circumstances beyond *your* control, preventing *you* from returning to *your home province*, automatic extension will be provided to *you* for up to seven days. Written documentation must be provided to *BCAA* to substantiate the *common carrier* delay.

Vehicle Accident or Mechanical Breakdown

If the *vehicle you* are travelling in is involved in an accident or mechanical breakdown, automatic extension will be provided to *you* for up to seven days. Written documentation must be provided to *BCAA* to substantiate the reason for delay.

Pre-existing Condition Stability Requirements

In addition to the Travel Emergency Medical Insurance Exclusions below and to the General Exclusions shown on **page 55,** the *company* will not be liable to provide coverage or services, or to pay claims for expenses, regardless of if there are other contributing factors that are not otherwise excluded, that are, or could be, caused by, contributed to or arising out of, directly or indirectly, or in connection with:

Applicable to Insureds 59 Years and Under (on the Policy effective date)

Pre-existing conditions, including *minor ailments*, which have not remained *stable* within the 90 days before the date of departure.

Applicable to Insureds 60 Years and Over (on the Policy effective date)

Pre-existing conditions, including *minor ailments*, which have not remained *stable* within the 180 days before the date of departure.

Applicable to All Ages

Pre-existing conditions that do not meet the stability requirements set out above are not covered. *Pre-existing conditions* are not excluded under the Travel Within Canada Plan.

Refer to the following definitions: *alteration*, *medical treatment*, *minor ailment*, *pre-existing condition* and *stable*.

If *you* have purchased the optional Pre-existing Condition Coverage, refer to that section heading for coverage applicable to *your pre-existing conditions* that are not *stable*.

Exclusions

In addition to the General Exclusions on **page 55**, the *company* will not be liable to provide coverage or services, or to pay claims for expenses, regardless of if there are other contributing factors that are not otherwise excluded, that are, or could be, caused by, contributed to or arising out of, directly or indirectly, or in connection with:

1) A *trip* that is undertaken against a *physician*'s advice.
2) A *trip* that is undertaken after the diagnosis of a *terminal condition*.
3) A *trip* that is undertaken while *you* are receiving *palliative* care or after *palliative care* has been recommended.
4) Conditions or any related conditions for which, prior to departure, *diagnostic tests* took place, were scheduled to take place or were recommended and for which results had not yet been received at the time of departure. This includes *diagnostic tests* that were recommended or scheduled prior to departure but had not yet taken place at the time of departure. This exclusion does not apply to:
    a) Tests to monitor an existing condition if there have been no new or more frequent symptoms, whether or not results have been received; or,
    b) Screening tests intended to prevent illness or to detect conditions before symptoms are noticed, whether or not results have been received.
5) Tests and investigation, except when performed at the time of initial *emergency sickness* or *injury*.
6) Expenses incurred once the *emergency* ends and in the opinion of the attending *physician* or dentist, *you* are able to travel to *your home province* for any further treatment relating to the *sickness* or *injury* that led to the *emergency* (other than specified under the Follow-up Visit, the Fracture Treatment and the Dental Services Benefits).

7) Any *medical treatment* which is a continuation of or subsequent to an *emergency sickness* or *injury* during the same covered *trip*, including its *recurrence* or any complications, regardless if there are other contributing factors that are not otherwise excluded, that are, or could be, caused by, contributed to or arising out of, directly or indirectly, or in connection thereto unless based on the available medical evidence the *company*'s Medical Advisor determines the initial *emergency* had not ended or unless specified in the Fracture Treatment and Dental Services benefits.

8) Any expenses incurred as a result of *sickness* that originated or was symptomatic during the *waiting period*. This exclusion does not apply when this Policy purchased to top-up any other insurance plan.

9) Expenses incurred for *emergency* air transportation and any expenses incurred after *emergency* air transportation, when the *emergency* air transportation was not arranged by ***BCAA Claims Assistance.***

10) **a) Travel Advisory Issued on or Before *Your* Departure Date**
Emergency sickness or *injury* if *you* travel to a destination on or after the *date* the Government of Canada has issued a travel advisory to "Avoid all travel" or "Avoid non-essential travel" to that destination; this includes any connections, layovers, stopovers or transit locations during *your trip* that are impacted by such advisories.

b) Travel Advisory Issued After *Your* Departure Date
Emergency sickness or *injury* that occurs 15 days or more after the date the Government of Canada has issued a travel advisory to "Avoid all travel" or "Avoid non-essential travel" for a destination that *you* have already departed for or arrived at; this includes any connections, layovers, stopovers or transit locations during *your trip* that are impacted by such advisories.

11) Expenses incurred when coverage is purchased after departure, unless authorized by BCAA.

12) Any medical and related expenses in excess of $50,000, if *you* are not covered by a provincial or territorial government health care plan at the time *your* claim occurred.

13) Any condition(s) for which *you* are listed on a waiting list in Canada for treatment or diagnosis.

14) Any treatment related to symptoms that arose or worsened after the date of departure but prior to the effective date of this Insurance, except as specified under the heading Period of Coverage, sub-heading Top-up.

15) A medical condition for which symptoms were present or *medical treatment* was received during a temporary visit to *your home province* during the period of coverage or any condition, regardless of whether other contributing factors that are not otherwise excluded, that is, or could be, caused by, contributed to or arising out of, directly or indirectly, or in connection thereto.

16) Loss, theft, or breakage of prosthetic devices or dentures.

Deductible

The *company* will pay eligible medical expenses for losses incurred in excess of the amount of the *deductible* as shown on the application/declaration, per *insured,* per condition or event.

This *deductible* applies to the portion of eligible expense listed in section Benefits, under Benefit number 1. Emergency Medical Treatment, Benefit number 2. Follow-up Visit, remaining after payment by *your* provincial or territorial government health care plan or other insurance policies, plans or contracts, including private or provincial automobile insurance.

Applicable to insureds 60 Years and Over

If *you* qualify for the coverage selected but *you* or a representative purchasing insurance on *your* behalf have failed to answer truthfully and accurately any question asked in the Health Questionnaire, any condition or event claimed will be subject to an extra *deductible* of $10,000 in addition to any other applicable *deductible* amount, and no future coverage will be provided under this Policy unless *you* pay the additional premium reflecting true and accurate answers to those questions.

Refunds

Applicable to Annual Multi-trip and Single Trip

1) Refunds are not available if a claim has been or will be submitted.
2) When the request for refund is received **prior** to the effective date of the Policy, a full refund is available.
3) When no travel has taken place and the request for refund is received **after** the effective date of the Policy:
    a) A full refund is available within 10 days from the *application date* of the Policy; or,
    b) For Single Trip plans, a partial refund less a cancellation fee is available when the request for refund is received more than 10 days after the *application date* of the Policy but prior to the expiry date of the Policy.
    c) For Annual Multi-trip plans, a partial refund less a cancellation fee is available when the request for refund is received more than 10 days after the *application date* but within 90 days after the effective date of the Policy.
    d) Refunds must be requested in writing. Refer to Contact Information on **page 6**.

Applicable to Single-Trip Only

In the case of early return to *your home province*, a partial refund less a cancellation fee may be available provided:

1) A satisfactory proof of return to *your home province* is sent to BCAA Insurance Agency.
2) The request is received by BCAA Insurance Agency within the 90 days after the expiry date of the Policy. Refunds will be calculated from the date of return.
3) Refunds must be requested in writing. Refer to Contact Information on **page 6**.

Trip Protection Package: Annual Multi-trip and Single Trip

The Trip Protection Package is subject to the Insuring Agreement, Validation of Coverage, General Exclusions, General Conditions and Provisions, Authorized Extensions to Period of Coverage, Automatic Annual Multi-Trip Renewal Option, Definitions, Statutory Conditions and How to Claim sections of the Policy, as well as the terms and conditions as specified for each of the insurance coverages listed below. For greater certainty, the Statutory Condition entitled

"Termination of Insurance" shall not apply to this Trip Protection Package. The *company* may terminate this Trip Protection Package on 15 days notice of termination to *you* by registered mail. In the event of such termination, we will refund the excess of premium *you* actually paid over the short rate premium calculated to the date of receipt of the above notice.

This package is also available as an Optional Coverage. Refer to **page 52** for details.

This package includes the following coverages:

Trip Cancellation & Interruption Coverage

Maximum limit for sum insured prior to departure – Up to the sum insured as indicated on the application/declaration per Policy
Maximum limit for sum insured after departure – Up to $25,000 per Policy.

Baggage Coverage

Maximum limit — $1,500 per *trip* if one *insured on* Policy
Maximum limit — $3,000 per *trip* if more than one *insured* on Policy.

Travel Accident Coverage

Maximum limit for Common Carrier Accident — $100,000 per *insured*, per *trip*.
Maximum limit for 24/7 Travel Accident — $25,000 per *insured*, per *trip*.

Travel Delay +AutoPay Coverage

Applicable when this package is purchased as an Optional Coverage with the Travel Emergency Medical Insurance Base Plan.
Up to the limit of each benefit as specified in the section.

Travel Delay Coverage

Applicable when this package is purchased as an Optional Coverage with the Visitors to Canada Travel Emergency Medical Insurance Base Plan
Up to the limit of each benefit as specified in the section.

Eligibility

You are eligible for coverage and to purchase this insurance if, on the *application date* and the date coverage commences, *you* meet all the following requirements:

1) At least 30 days of age.
2) A *Canadian resident*.
3) Are not travelling against a *physician*'s advice.
4) Are not receiving *palliative care* or *palliative care* has not been recommended.
5) Not been diagnosed with a *terminal condition*.
6) Are a visitor to Canada purchasing the Trip Protection Package:
    a) Prior to arriving in British Columbia, provided part of or all *your trip* is in British Columbia; or,
    b) After arriving in British Columbia, for subsequent travel anywhere in the world provided that travel originates in British Columbia.

Notwithstanding these eligibility and purchase conditions, all terms, conditions and exclusions of this Policy still apply.

Conditions

If *you* have purchased this insurance as an Optional Coverage, the following conditions apply:

1) This Optional Coverage can be purchased as an endorsement to a Travel Emergency Medical Insurance or a Visitors to Canada Travel Emergency Medical Insurance Base Plan. Coverage will be subject to the terms and conditions of the Base Plan it is purchased with.

2) This Optional Coverage cannot be purchased as an endorsement to a Travel Emergency Medical Insurance Plan when this Policy is purchased to top-up another travel emergency medical insurance plan. If *you* would like to purchase this Optional Coverage with the Travel Emergency Medical Insurance Plan, *you* must purchase the Travel Emergency Medical Insurance for the full duration of *your trip*.

Refunds

Refunds are not available if a claim has been or will be submitted.

Applicable to Annual Multi-trip

A full refund is available if *you* have not travelled, no cancellation penalties are applicable and the request for refund is received prior to the effective date of the Policy.

A refund less a cancellation fee is available, if *you* have not travelled, no cancellation penalties are applicable and the request for refund is received within 90 days after the effective date of the Policy.

Applicable to Single Trip

A refund less a cancellation fee is available only if:

1) The tour operator (airline etc.) cancels the *trip* and all penalties are waived; or,
2) *You* cancel the *trip* prior to the effective date of any cancellation penalties; or,
3) The tour operator changes the travel date and if *you* are unable to travel on the new dates, the tour operator waives all cancellation penalties.

Coverages

Trip Cancellation & Interruption Coverage

Trip cancellation means an event occurring prior to *your departure date*, causing *you* to cancel *your trip*.

Trip interruption means an event occurring on or after *your departure date* causing *you* to disrupt *your trip* as originally scheduled or interrupt *your trip* and return earlier or later than *your return date*.

Period of Coverage

Annual Multi-trip

Trip Cancellation

This Policy becomes effective at 12:01 AM on the *application date* and remains in force until 11:59 PM on the expiry date, which occurs one year from the effective date of the Policy. Coverage is provided only for *trips* that are scheduled to start on or after the effective date of the Policy and end no later than 11:59 PM on the expiry date.

If a *trip* is scheduled to start after the effective date but ends after the expiry date of this Policy, coverage for that *trip* will apply only if the Policy is renewed and will begin on the *application date* of the renewed Policy.

Coverage for each *trip* commences at the time the *trip* is booked and terminates on the earlier of:

1) The date of the cause of cancellation prior to *your departure date*; or,
2) At 11:59 PM on the day prior to *your departure date*; or,
3) At 11:59 PM on the expiry date of the Policy.

Trip Interruption

This Policy begins at 12:01 AM on the effective date of the Policy and continues in force for a period of one year from the effective date of the Policy and ends at 11:59 PM on the expiry date of the Policy.

Coverage for each *trip* commences on the *departure date* and terminates on the earlier of:

1) The date *you* return to *your departure point*; or,
2) At 11:59 PM on the expiry date of the Policy.

If *your* return is delayed due to a covered risk, coverage terminates on the date *you* return to *your departure point* or within 30 days after the original scheduled date of return, whichever is earlier.

Single Trip

Trip Cancellation

Coverage commences on the *application date* of the Policy and terminates on the earlier of:

1) The date of the cause of cancellation prior to *your departure date*; or,
2) At 11:59 PM on the day prior to *your departure date*.

Trip Interruption

Coverage commences on the *departure date* and terminates on the earlier of:

1) The date *you* return to your *departure point*; or,
2) At 11:59 PM on the expiry date of the Policy.

Covered Risks

Benefits will only be payable if the *trip* has been cancelled or interrupted as a result of one of the following covered risks. Refer to **pages 22-25** for a description of the benefits applicable to the covered risks described below.

HEALTH

1) *Sickness*, *injury*, death or quarantine of *you* or *your travelling companion*.
Trip cancellation benefits: 1, 2
Trip interruption benefits: 5, 6, 7, 11, 13

2) *Sickness*, *injury*, death or quarantine of *your immediate family* or *your travelling companion*'s *immediate family*.
Trip cancellation benefits: 1, 2
Trip interruption benefits: 5, 6, 7, 13

3) *Sickness*, *injury*, death of *your* or *your travelling companion*'s business partner, employer or key employee, *caregiver*, or death of a friend not travelling with *you* on the *trip*.
Trip cancellation benefits: 1, 2
Trip interruption benefits: 5, 6, 7, 13

4) *Sickness*, *injury*, death or quarantine of *your* host at *your* final destination.
Trip cancellation benefits: 1, 2
Trip interruption benefits: 5, 6, 7, 13

5) *Hospitalization* of *you*, *your travelling companion* or *your* accompanying *immediate family member* that prevents *you* from returning on *your* regular scheduled *return date* and that causes *you* to incur boarding fees for *your* accompanying *pets*.
Trip cancellation benefits: none
Trip interruption benefits: 12

6) *Hospitalization* (including home based *palliative care*) or death of a *family member* not travelling with *you* that causes *you* to interrupt *your trip* before *your* scheduled *return date*.
Trip cancellation benefits: none
Trip interruption benefits: 9

7) *Sickness* or *injury* which is expected to prevent *you* or *your travelling companion* from participating in a sporting event when the purpose of *your* or *your travelling companion*'s *trip* was to participate in that sporting event.
Trip cancellation benefits: 1, 2
Trip interruption benefits: 5, 6, 7, 13

8) *You* or *your travelling companion*'s inability, due to medical reasons, to receive an injection or medication that is suddenly required for entry into a country, region or city originally indicated in *your* itinerary, provided that this requirement was not mandatory prior to the date the *trip* is booked or prior to the date this insurance is purchased, whichever occurs later.
Trip cancellation benefits: 1, 2
Trip interruption benefits: 5, 6, 7, 13

PREGNANCY AND ADOPTION

9) *You* or *your travelling companion* being notified, after the *trip* is booked or after the date this insurance is purchased, whichever occurs later, that the actual date of a legal adoption of a child by *you* or *your travelling companion* is scheduled to take place during *your trip*.
Trip cancellation benefits: 1, 2
Trip interruption benefits: 5, 6, 7, 13

10) *You*, *your spouse*'s or *your immediate family member*'s pregnancy, or *your travelling companion*'s, *your travelling companion*'s *spouse*'s or *your travelling companion*'s *immediate family member*'s pregnancy, being diagnosed after the date the *trip* is booked or after the date this insurance is purchased, whichever occurs later, if *you* or *your travelling companion*'s *trip* is scheduled to take place in the nine weeks before or after and including the expected date of delivery.
Trip cancellation benefits: 1, 2
Trip interruption benefits: none

11) Complications of *your*, *your spouse*'s or *your immediate family member*'s pregnancy, or *your travelling companion*'s, *your travelling companion*'s *spouse*'s or *your travelling companion*'s *immediate family member*'s pregnancy, occurring within the first 31 weeks of pregnancy.
Trip cancellation benefits: 1, 2
Trip interruption benefits: none

EMPLOYMENT AND EDUCATION

12) *Your*, *your spouse* or *your travelling companion*'s job transfer, which results in the relocation of *your* or *your travelling companion*'s principal residence.
Trip cancellation benefits: 1, 2
Trip interruption benefits: 5, 6, 7, 13

13) Involuntary loss of *your*, *your spouse*'s, *your travelling companion*'s or *your travelling companion*'s *spouse*'s permanent employment (excluding contract or self-employment) if *you*, *your spouse*, *your travelling companion* or *your travelling companion*'s *spouse* had been continuously employed with the same employer for at least six months prior to the date the *trip* is booked or prior to the date this insurance is purchased, whichever occurs later.
Trip cancellation benefits: 1, 2
Trip interruption benefits: 5, 6, 7, 13

14) The cancellation of a *business meeting* at *your* final destination beyond *your* or *your* employer's control or beyond *your travelling companion*'s or *your travelling companion*'s employer's control. Only the *travel costs* related directly to the *business meeting* will be reimbursed.
Trip cancellation benefits: 1, 2
Trip interruption benefits: 5, 6, 7, 13

15) The re-scheduling of *your* or *your travelling companion*'s university or college classes or exams to a date during *your trip* due to unexpected circumstances beyond *your*, *your travelling companion*'s control and the control of the university or college, provided that both the unexpected circumstances and re-scheduling occurs after the date the *trip* is booked or after the date this insurance is purchased, whichever occurs later.
Trip cancellation benefits: 1, 2
Trip interruption benefits: 5, 6, 7, 13

16) The cancellation of a conference, seminar, workshop, convention, symposium or retreat at *your* or *your travelling companion*'s final destination that is beyond *your* or *your travelling companion*'s control.
Trip cancellation benefits: 1, 2
Trip interruption benefits: 5, 6, 7, 13

LEGAL

17) *You* or *your travelling companion* being subpoenaed, after the *trip* is booked or after the date this insurance is purchased, whichever occurs later, for jury duty, as a witness, or required to appear at a court proceeding during the period of travel (excluding law enforcement officers).
Trip cancellation benefits: 1, 2
Trip interruption benefits: 5, 6, 7, 13

18) *You* or *your travelling companion* being summoned to police, fire, paramedic or military service (active or reserve).
Trip cancellation benefits: 1, 2
Trip interruption benefits: 5, 6, 7, 13

19) A travel advisory to "Avoid all travel" or "Avoid non-essential travel" is issued by the Government of Canada for *your* travel destinations prior to *your* departure, provided such travel advisory was issued after the date *your trip* is booked or after the date this insurance is purchased, whichever occurs later, and the travel advisory is still in effect on *your* scheduled *departure date* or at any time within the 7 days prior to *your* scheduled *departure date*.
This covered risk also applies when the Government of Canada, or a provincial, territorial or local government, issues

a travel advisory, warning, or statement advising *you* not to travel to a specific province, territory, region, or city within Canada when travel is within Canada.

Trip cancellation benefits: 1, 2
Trip interruption benefits: none

20) A travel advisory to "Avoid all travel" or "Avoid non-essential travel" is issued by the Government of Canada for *your* travel destinations after *your* departure, provided such travel advisory was issued for *your* scheduled travel dates and this insurance was purchased prior to the travel advisory being issued.
This covered risk also applies when the Government of Canada, or a provincial, territorial or local government, issues a travel advisory, warning, or statement advising *you* not to travel to a specific province, territory, region, or city within Canada when travel is within Canada.

Trip cancellation benefits: none
Trip interruption benefits: 5, 6, 7, 13

21) The non-issuance of *your* or *your travelling companion*'s travel or student visa (not including an immigration or employment visa) for reasons beyond *your* or *your travelling companion*'s control, provided *you* or *your travelling companion* were eligible to make such an application, and the application was not submitted late.
Trip cancellation benefits: 1, 2
Trip interruption benefits: none

22) Delay in receiving *your* or *your travelling companion*'s Canadian passport provided *you* or *your travelling companion* were eligible to make such an application and where receipt of the passport is delayed by Passport Canada for at least five weeks beyond the estimated processing time published by Passport Canada as of the date the *passport application* was received by Passport Canada. If the *trip* is booked or if this insurance is purchased after the *passport application* was received by Passport Canada, coverage is valid only when purchased within the number of days of the estimated processing time published by Passport Canada.
Trip cancellation benefits: 1, 2
Trip interruption benefits: none

CANCELLATIONS AND DELAYS

23) The earlier departure, the later departure or the later arrival of *your* or *your travelling companion*'s *common carrier* causing a missed connection.
Trip cancellation benefits: 1, 2
Trip interruption benefits: 5, 6, 7, 12, 13

24) The earlier departure, the later departure or the later arrival of *your* or *your travelling companion*'s *common carrier* by at least four hours when there is no connection.
Trip cancellation benefits: 1, 2
Trip interruption benefits: 5, 6, 7, 12, 13

25) The cancellation of a *common carrier* for any reason other than bankruptcy, insolvency or quarantine.
Trip cancellation benefits: 1, 2
Trip interruption benefits: 5, 6, 7, 12, 13

26) An accident on the way to the *departure point* involving a private *vehicle* in which *you* are a passenger or driver; or a *common carrier* in which *you* are a passenger (a police report or written confirmation from the *common carrier* is required).
Trip cancellation benefits: 1, 2
Trip interruption benefits: 5, 6, 7, 13

27) The delay of a private *vehicle* resulting from mechanical failure of the *vehicle*, weather conditions, earthquakes, volcanic eruption, a traffic accident, or an emergency police-directed road closure.
Trip cancellation benefits: 1, 2
Trip interruption benefits: 5, 6, 7, 13

28) *You* or *your travelling companion* are detained by immigration or customs officials due to mistaken identity.
Trip cancellation benefits: none
Trip interruption benefits: 5, 6, 13

29) The cancellation of *your* cruise due to bankruptcy, insolvency, grounding, quarantine of the cruise ship.
Trip cancellation benefits: 3
Trip interruption benefits: 10

30) *Your travelling companion* is taken off the cruise ship for medical reasons to the nearest medical facility equipped to provide the required treatment.
Trip cancellation benefits: none
Trip interruption benefits: 13
The benefit under this covered risk is only applicable during *your travelling companion*'s *hospitalization*.

31) The repositioning of *your* cruise ship.
Trip cancellation benefits: 3
Trip interruption benefits: 10, 13

32) The earlier departure, the later departure or the later arrival of *your* or *your travelling companion*'s tour.
Trip cancellation benefits: 4
Trip interruption benefits: 10

33) The cancellation of *your* or *your travelling companion*'s tour by the tour operator.
Trip cancellation benefits: 4
Trip interruption benefits: 10

OTHER

34) A natural disaster or unforeseeable event completely independent of any intentional or negligent act, which renders *your* or *your travelling companion*'s principal residence uninhabitable or place of business inoperative.
Trip cancellation benefits: 1, 2
Trip interruption benefits: 5, 6, 7, 13

35) A natural disaster or unforeseeable event completely independent of any intentional or negligent act, which renders *your* principal residence uninhabitable and that causes *you* to interrupt *your trip* before *your* scheduled *return date*.
Trip cancellation benefits: none
Trip interruption benefits: 8

36) Hijacking of which *you* are or *your travelling companion* is a victim.
Trip cancellation benefits: 1, 2
Trip interruption benefits: 5, 6, 7, 13

37) The cancellation or reschedule of a wedding, concert, theatre or sporting event beyond *your* control, when the primary reason for *your trip* is to attend this event. Supporting documentation, including tickets, is required to substantiate the claim.
Trip cancellation benefits: 1, 2
Trip interruption benefits: none

Benefits

Maximum limit: Sum insured as shown on the application/declaration.

Sums insured amounts are *aggregate limits* per Policy and are payable up to the maximum limit as shown on the application/declaration except for benefits 3, 4, 10, 11, 12 and 13 which are payable up to the amount listed in the Policy per *trip*.

Trip Cancellation Before Departure

Benefits outlined below are payable if cancellation of *your trip* results in unexpected expenses.

1) Reimbursement of non-refundable prepaid airfare and/or other prepaid *travel costs* that cannot be recovered from another source.

   Note: if *you* choose not to cancel *your trip*, reimbursement of the change fees charged by the transportation supplier when such an option is available to *you*.

2) Reimbursement of the additional single supplement commercial accommodation expense in the event a *travelling companion* cancels their *trip*.

3) Reimbursement of *your* non-refundable prepaid transportation that is not part of *your* cruise up to a maximum limit of $1,000.

4) Reimbursement of *your* non-refundable prepaid transportation that is not part of *your* tour, up to a maximum limit of $1,000.

Trip Interruption After Departure

5) Benefits outlined below are payable if interruption of *your trip* results in unexpected expenses.

   Reimbursement of either:
   a) *Your* non-refundable, unused prepaid airfare costs; or,
   b) The change fees; or,
   c) The cost of a one-way economy airfare to the original *departure point* to return earlier or later than the *return date*; or,
   d) An airline seat upgrade when *medically necessary* to the original *departure point* to return earlier or later than the *return date*; or,
   e) Transportation costs or a one-way economy airfare to catch-up to *your* next travel destination.

6) Reimbursement of *your* other non-refundable unused prepaid *travel costs* excluding the cost of unused prepaid transportation back to the original *departure point* from a destination where *you* have already been reimbursed for a one-way economy airfare under Benefit number 5c) to return *you* to *your* original *departure point*.

7) Reimbursement of the additional single supplement commercial accommodation expense in the event *your travelling companion* cancels or interrupts their *trip*.

8) Reimbursement of the cost of a round-trip economy airfare to return *you* to the original *departure point* and back to *your* original travel destination point provided the return to *your* original travel destination takes place within the same *trip*.

   If *you* return to *your home province* under this benefit, *your* Policy will not terminate, however, *you* will not be covered for any expenses incurred in *your home province*. There is also no refund for the number of days *you* spend in *your home province*.

   This benefit is not applicable to Visitors to Canada purchasing this insurance.

9) Reimbursement of the cost of a round-trip economy airfare to return *you* to the original *departure point* or the place of *hospitalization* or death of *your family member* and back to *your* original travel destination point, provided the return to *your* original travel destination takes place within the same *trip*.

   For airfare to a location other than the *departure point*, the cost of the ticket is limited to the cost for a round-trip economy airfare to the *departure point*.

   If *you* return to *your home province* under this benefit, *your* Policy will not terminate, however, *you* will not be covered for any expenses incurred in *your home province*. There is also no refund for the number of days *you* spend in *your home province*.

   This benefit is not applicable to Visitors to Canada purchasing this insurance.

10) Reimbursement up to a maximum limit of $1,000, for the lesser of the change fees charged by the *common carrier* involved to return *you* to the original *departure point* (if such option is available to *you*) or for the extra cost of a one-way economy airfare on a commercial flight via the most direct route to return *you* to *your* original *departure point*, if cancellation occurs prior to the departure of the cruise ship or tour but after *your* departure.

11) Repatriation – In the event of *your* death during a *trip*, as result of an *injury* or an unexpected *sickness*, the *company* will pay for:
    a) Preparation and return of *your* body, including the cost of a standard shipping container (excluding the cost of a burial coffin), to *your home province* or country of permanent residence, up to a maximum of $12,000; or,
    b) Burial at the place of death (excluding the cost of funeral and related expenses or a burial coffin) including one death certificate, in the event *your* body is not returned to *your home province* or country of permanent residence, up to a maximum of $5,000.
    c) Cremation at the place of death (excluding the cost of funeral and related expenses or an urn) including one death certificate and the standard shipping cost to return *your* ashes to *your home province* or country of permanent residence, up to a maximum of $5,000.

12) Reimbursement for the cost of additional boarding fees for *your* accompanying *pets* up to a maximum of $150. The *company* will pay the additional boarding charges incurred but will not cover any veterinary fees.

13) Reimbursement of the reasonable out-of-pocket expenses up to the limit of $350 per day to a maximum of $3,000 for commercial accommodation, meals, internet, telephone and facsimile charges and taxi expenses.

Conditions

In addition to the General Conditions and Provisions on **page 57**, the following conditions apply:

1) When the reason for cancellation occurs prior to departure, *you* must:
    a) Contact the travel agent or airline on the day the reason for cancellation occurs or on the next business day; and,
    b) Advise ***BCAA Claims Assistance*** within the same period. Claim payment will be limited to the cancellation penalties specified in the *trip* contracts which are in effect at the time the cause of cancellation occurs.

2) If *you* make a claim based on delay in receiving a passport, *you* must provide a receipt issued by Passport Canada showing the date Passport Canada received the *passport application*.

3) No claims will be considered unless the original unused transportation ticket(s) or electronic ticket(s) is/are provided to ***BCAA Claims Assistance***. If applicable, ***BCAA Claims Assistance*** will also require copies of substitute transportation tickets and travel agent or tour operator invoices.

4) Trip Cancellation - If *you* need to cancel *your trip* because of a *sickness* or *injury*, the patient must consult a *physician* before *you* cancel *your trip* and prior to the date and time *you* are scheduled to leave from *your departure point*. If it's not possible for the patient to consult a *physician* on or before the date and time *you* are scheduled to leave from *your departure point*, the patient must consult a *physician* within one business day from the scheduled date of departure.

   Trip Interruption - If *you* need to interrupt *your trip* because of a *sickness* or *injury*, the patient must consult a *physician* at the place where the *sickness* or *injury* occurred, on or before the date and time *you* interrupt or disrupt *your trip*.

   In both cases, *you* must provide a medical certificate or letter completed by the attending *physician* at the place where the *sickness* or *injury* occurred, advising against travel that includes: a complete diagnosis, the date of onset of the condition, the dates and type of treatment, and the medical necessity of cancelling or interrupting or disrupting *your trip*. If a *physician* was not consulted as required or if *you* do not provide the complete written certificate, *your* claim will be denied.

5) If *you* purchased a Single Trip Policy and *your* travel dates change, *you* must notify the *company* of *your* new travel dates. Failure to do so will result in denial of *your* claim.

6) The benefits are only applicable if:

a) *You* had left enough travel time to comply with the travel provider's recommended check-in time prior to departure;

b) *Your trip*, whether booked online or through a travel agent, meets the minimum connection times approved by the applicable travel provider.

7) If *you* purchased an Annual Multi-trip Trip Protection Package, *your trip* must start on or after the effective date and end prior to or on the expiry date of this Policy.

8) The *company* does not insure or reimburse the cash value of any *travel costs* that have been booked and paid for with points, air miles or any type of travel reward program.

9) Duplication of Coverage – If any benefit under this Trip Cancellation & Interruption Coverage is duplicated or also a benefit or covered under this Policy or any other insurance coverage, policy, plan or optional coverage provided by *us*, then:
   a) The total amount paid by *BCAA* shall not exceed the actual expenses incurred by *you;* and
   b) The maximum amount *we* shall pay under all such coverages is the lesser of:
      - the sum of the amounts specified for such coverages; or
      - $100,000.

10) If *you* increase *your* Policy sum insured, exclusions number 1, 2, 3, 4, 5, 8 and 9 will also apply to the date *you* increased *your* sum insured, for the amount of the increase.

Exclusions

In addition to the General Exclusions on **page 55**, the *company* will not be liable to provide coverage or services, or to pay claims for expenses, regardless of if there are other contributing factors that are not otherwise excluded, that are, or could be, caused by, contributed to or arising out of, directly or indirectly, or in connection with:

1) A *trip* booked or for which this insurance is purchased after the diagnosis of a *terminal condition*.

2) A *trip* booked or for which this insurance is purchased after a *physician* has advised *you* or *your travelling companion* not to travel.

3) A *trip* booked or for which this insurance is purchased while receiving *palliative care* or after *palliative care* was recommended.

4) Cancellation or interruption caused by or related to a circumstance known to *you* or any person purchasing insurance on *your* behalf prior to the date and time the *trip* is booked or prior to the date and time this insurance is purchased, whichever occurs later, and which eventually prevents or interrupts travel as booked.

5) A *sickness* or death (other than death caused by an *injury*) occurring within 72 hours after the date this insurance is purchased if the Policy was purchased more than 72 hours after the transportation and/or commercial accommodations are booked.

6) Travel undertaken to visit an ailing *family member* where the medical condition or death of that *family member* is the cause of cancellation or interruption of the *trip*.

7) An early or late return due to *sickness* or *injury*, unless ordered in writing by the attending *physician* that *you* return to *your home province* or country of permanent residence.

8) Any *pre-existing condition* affecting *you* or *your immediate family member*, *caregiver*, friend, business partner, host at final destination, employer or key employee, unless the *pre-existing condition* was *stable*:

Applicable to Annual Multi-trip

a) During the 60 days prior to the date *your trip* is booked when the insurance is purchased prior to the booking date; or,
b) During the 60 days prior to the date this insurance is purchased when the insurance is purchased after the date *your trip* is booked.

Applicable to Single Trip

During the 60 days prior to the date this insurance is purchased.

9) Any *pre-existing condition* affecting *your travelling companion* or *your travelling companion*'s immediate *family* member, *caregiver*, friend, business partner, host at final destination, employer or key employee, unless the *pre-existing condition* was *stable*:

Applicable to Annual Multi-trip

a) During the 60 days prior to the date *your trip* is booked when the insurance is purchased prior to the booking date; or,
b) During the 60 days prior to the date this insurance is purchased when the insurance is purchased after the date *your trip* is booked.

Applicable to Single Trip

During the 60 days prior to the date this insurance is purchased.

10) The non-issuance of a travel visa due to late visa application.

11) Any unused prepaid travel expenses when a refund or a travel credit is available, when *you* choose not to cancel the travel credit.

12) Cancellation due to *sickness* or *injury* when a *physician* has not been consulted and has not advised against travel, on or before the date and time of cancellation. When it's not possible for the patient to consult a *physician* on or before the date and time *you* are scheduled to leave from *your departure point*, the patient must consult a *physician* within one business day from the scheduled date of departure.

13) Interruption due to *sickness* or *injury* when a *physician* has not been consulted at the place where the *sickness* or *injury* occurred and has not advised against travel, on or before the date and time of interruption or disruption.

14) Cancellation or interruption of a *trip* caused by or relating to fear, apprehension or anxiety related to travel or any mode of transportation.

Baggage Coverage

Baggage Coverage is also available as a separate Optional Coverage.

Period of Coverage

Coverage commences on the date and time *you* leave for *your trip*. Coverage terminates on the earliest of the following:

1) At 11:59 PM on the expiry date of the Policy;

2) On the date and time, *you* return to *your* ordinary place of residence, except as outlined below:

a) If *you* are also covered under Trip Cancellation & Interruption Coverage and *your trip* is interrupted before the scheduled *return date* as a result of *hospitalization* or death of a *family member* not travelling with *you*, or as a result of a natural disaster or unforeseeable event rendering *your* principal residence uninhabitable and then *you* resumed *your trip*. In this case, *your* Policy will not terminate, however *you* will not be covered while in *your* ordinary place of residence. There will be no refund for the number of days *you* spend in *your* ordinary place of residence.
b) If *you* are also covered under the Travel Emergency Medical Insurance and *you* are returned to *your home province* under the Emergency Air Transportation Benefit or the Airfare to Return Home for Treatment Benefit during the period of coverage, coverage will be suspended during *your* temporary return and will resume once *you* return to *your trip* destination under benefit number 16, Return to Your Destination. In this case, *your*

Policy will not terminate, however *you* will not be covered while in *your home province*. There will be no refund for the number of days *you* spend in *your home province*.

Benefits

Maximum limit
$1,500 per *trip,* if one *insured* on Policy.
$3,000 per *trip,* if more than one *insured* on Policy.

Baggage and Personal Effects

The *company* agrees to pay for the loss, damage, destruction or theft of personal effects owned by *you* while in transit, or while in any hotel or other building, en route anywhere in the world, on land or water or in the air.

Currency

The *company* agrees to pay for loss of currency through theft or robbery of personal currency (excluding unexplained disappearance; police report required), up to a limit of $100.

Baggage Delay

If *your* baggage is delayed beyond 12 hours while *you* are en-route and before *you* return to *your* ordinary place of residence, the *company* will pay for personal necessities up to a maximum of $200, until *your* baggage has been returned to *you*.

Conditions

In addition to the General Conditions and Provisions shown on **page 57**, the following conditions apply:

1) Baggage Coverage is offered on a first payor basis unless the property that is lost, stolen or damaged is insured for a specific value under another insurance policy.

2) **Notice of Loss**—If the insured property is lost or damaged through perils insured against, *you* must promptly notify police, hotel proprietors, steamship lines, railroad or station authorities, airlines or any other carrier or bailee in whose custody the property was at the time of loss, damage or theft. *You* must also notify ***BCAA Claims Assistance*** within 30 days of return from journey and take all reasonable measures to protect, save and/or recover the property. This coverage is conditional upon *your* compliance with this clause.

3) **Payment of Loss**—Any claim hereunder for damage and/or destruction shall be paid immediately after presentation to ***BCAA Claims Assistance*** of evidence substantiating such damage and/or destruction.

4) **Valuation**—The *company* shall reimburse the repair, replacement with a like kind and quality or actual cash value of the property at the time any loss or damage occurs, whichever is less.

5) **Duplication of Coverage** – If any loss, claim, expense, or benefit is covered under more than one benefit, Policy, Plan or Coverage administered by *BCAA*, including this Baggage Coverage then:

    a) the total amount paid by *BCAA* shall not exceed the actual expenses incurred by *you*; and
    b) the total amount paid to *you* by *BCAA* shall be the lesser of:
        - the greatest applicable limit of coverage per *trip* under one such benefit, Policy(ies), Plan(s) or Coverage(s); or
        - $5,000, per *trip,* if one *insured* is on the Policy or $7,500, per *trip,* if more than one *insured* is on the Policy.

If *you* have purchased this insurance as an Optional Coverage, the following conditions also apply:

6) This Optional Coverage can be purchased as an endorsement to a Travel Emergency Medical Insurance, a Trip Protection Package, or a Visitors to Canada Travel Emergency Medical Insurance Base Plan. Coverage will be subject to the terms and conditions of the Base Plan it is purchased with.

7) This Optional Coverage cannot be purchased as an endorsement to a Travel Emergency Medical Insurance Plan when this Policy is purchased to top-up another travel emergency medical insurance plan. If *you* would like to purchase this Optional Coverage with the Travel Emergency Medical Insurance Plan, *you* must purchase the Travel Emergency Medical Insurance for the full duration of *your trip*.

Limitation

Coverage for risk of loss of or damage to *your* property for any single item is limited to not more than 50% of the sum insured per *insured* per claim.

Exclusions

In addition to the exclusions of the Base Plan this Optional Coverage is purchased with and to the General Exclusions shown on **page 55**, the *company* will not be liable to provide coverage or services, or to pay claims for expenses, regardless of if there are other contributing factors that are not otherwise excluded, that are, or could be, caused by, contributed to or arising out of, directly or indirectly, or in connection with:

1) Loss, damage, or theft of animals; self-propelled conveyances of any kind or their equipment; trailers, boats, motors, aircraft or other conveyances or their appurtenances; bicycles except while checked as baggage with a *common carrier*; household effects and furnishings; artificial teeth and limbs; hearing aids; eye glasses, contact lenses; money (except as specified under the Currency Benefit), securities, tickets and documents; electronic and/or mobile devices and their accessories and/or related equipment, personal computers, software, professional or occupational equipment or property; antiques and collectors items; property illegally acquired, kept or stored, or transported; works of art, jewellery, furs, cameras or camera equipment.
2) Loss or damage caused by wear and tear, deterioration, moths or vermin.
3) Property insured for a specific value under another insurance policy.
4) Any loss caused by or related to a circumstance known to *you* or to any person purchasing this Policy on *your* behalf prior to the date and time this insurance is purchased.

Travel Accident Coverage

Travel Accident Coverage is also available as a separate Optional Coverage.

Common Carrier Accident: Maximum limit—$100,000 per *insured*, per *trip*.

24/7 Travel Accident: Maximum limit—$25,000 per *insured*, per *trip*.

Period of Coverage

Coverage commences on the date and time *you* leave for *your trip*. Coverage terminates on the earliest of the following:

1) At 11:59 PM on the expiry date of the Policy;
2) On the date and time *you* return to *your* ordinary place of residence, except as outlined below:
    a) If *you* are also covered under Trip Cancellation & Interruption Coverage and *your trip* is interrupted before the scheduled *return date* as a result of *hospitalization* or death of a *family member* not travelling with *you*, or as a result of a natural disaster or unforeseeable event rendering *your* principal residence uninhabitable and then *you* resumed *your trip*. In this case, *your* Policy will not terminate, however *you* will not be covered while in *your* ordinary place of residence. There will be no refund for the number of days *you* spend in *your* ordinary place of residence.

b) If *you* also are covered under the Travel Emergency Medical Insurance and *you* are returned to *your home province* under the Emergency Air Transportation Benefit or the Airfare to Return Home for Treatment Benefit during the period of coverage, coverage will be suspended during *your* temporary return and will resume once *you* return to *your trip* destination under benefit number 16, Return to Your Destination. In this case, *your* Policy will not terminate, however *you* will not be covered while in *your home province*. There will be no refund for the number of days *you* spend in *your home province*.

Covered Risks

Common Carrier Accident

Death or dismemberment as a result of an *injury* sustained during the period of coverage while riding as a fare-paying passenger or while entering or leaving a lawfully operated licensed *common carrier*.

Coverage is also applicable to *insured* children under two years accompanied by a fare-paying passenger.

24/7 Travel Accident

Death or dismemberment as a result of an *injury* sustained during the period of coverage in any other situation not specifically mentioned under Common Carrier Accident above.

Benefits

In the case of *your* death or certain *losses* resulting from an *injury*, the *company* will pay to or on behalf of *you*, *your* estate or other *beneficiary*, the benefits as outlined below, but in no event shall payment exceed the maximum sum insured under this section:

1) 100% of the maximum sum insured for *loss* of life, double dismemberment, or *loss* of sight in both eyes.
2) 50% of the maximum sum insured for single dismemberment or *loss* of sight in one eye.

Benefits for *loss* of life, limb or sight are payable for *loss* which occurs in the 90 days from the date of the accident.

Any claim for indemnity based on *loss* of life, dismemberment or *loss* of sight must be substantiated by a certificate from the attending *physician* at the place of the accident attesting to the injuries sustained.

Exclusions

In addition to the exclusions of the Base Plan this Optional Coverage is purchased with and to the General Exclusions shown on **page 55**, the *company* will not be liable to provide coverage or services, or to pay claims for expenses, regardless of if there are other contributing factors that are not otherwise excluded, that are, or could be, caused by, contributed to or arising out of, directly or indirectly, or in connection with:

1) A *trip* that is undertaken against a *physician*'s advice.
2) A *trip* that is undertaken after the diagnosis of a *terminal condition*.
3) A *trip* that is undertaken while *you* are receiving *palliative care* or after *palliative care* has been recommended.
4) **Travel Advisory Issued on or Before Your *Departure Date***
   Death or dismemberment as a result of an *injury* if *you* choose to travel to a destination after a travel advisory has been issued by the Government of Canada recommending that *you* "Avoid all travel" or "Avoid non-essential travel" to that destination during *your trip*. This exclusion applies if the advisory is issued on or before the date *you* leave for *your trip* and the expenses are, or could be, caused by, contributed to or arising out of, directly or indirectly, or in connection with the reason for the travel advisory regardless of if there are other contributing factors that are not otherwise excluded.

Limitation

The total *aggregate limit* is $10,000,000 for any one event under this Policy and all policies administered by *BCAA* and issued by the *company*. If the total sum of all claims resulting from the same event exceeds the total *aggregate limit* the $10,000,000 will be shared proportionately among all *insureds*. The proportionate share for each *insured* will not exceed the maximum limits of their Plan. Payment will be processed after ***BCAA Claims Assistance*** has completed the review of all submitted claims related to the same event.

Conditions

If *you* have purchased this insurance as a separate Optional Coverage, the following conditions apply:

1) This Optional Coverage can be purchased as an endorsement to a Travel Emergency Medical Insurance or a Visitors to Canada Travel Emergency Medical Insurance Base Plan. Coverage will be subject to the terms and conditions of the Base Plan it is purchased with.

2) This Optional Coverage cannot be purchased as an endorsement to a Travel Emergency Medical Insurance Plan when this Policy is purchased to top-up another travel emergency medical insurance plan. If *you* would like to purchase this Optional Coverage with the Travel Emergency Medical Insurance Plan, *you* must purchase the Travel Emergency Medical Insurance for the full duration of *your trip*.

Travel Delay +AutoPay Coverage

Travel Delay +AutoPay Coverage is also available as a separate Optional Coverage when purchased with the Travel Emergency Medical Insurance Base Plan.

Period of Coverage

Coverage commences on the date and time *you* leave for *your trip*. Coverage terminates on the earliest of the following:

1) At 11:59 PM on the expiry date of the Policy;
2) On the date and time *you* return to *your* ordinary place of residence, except as outlined below:

    a) If *your* flight or baggage is delayed or *your* return is delayed due to quarantine as outlined in the benefits below, coverage terminates on the date *you* return to *your* ordinary place of residence or within 30 days after the original scheduled date of return, whichever is earlier.
    b) If *you* are also covered under the Trip Cancellation & Interruption Coverage and *your trip* is interrupted before the scheduled *return date* as a result of *hospitalization* or death of a *family member* not travelling with *you*, or as a result of a natural disaster or unforeseeable event rendering *your* principal residence uninhabitable and then *you* resumed *your trip*. In this case, *your* Policy will not terminate, however *you* will not be covered while in *your* ordinary place of residence. There will be no refund for the number of days *you* spend in *your* ordinary place of residence.
    c) If *you* are also covered under the Travel Emergency Medical Insurance and *you* are returned to *your home province* under the Emergency Air Transportation Benefit or the Airfare to Return Home for Treatment Benefit during the period of coverage, coverage will be suspended during *your* temporary return and will resume once *you* return to *your trip* destination under benefit number 16, Return to Your Destination. In this case *your* Policy will not terminate, however *you* will not be covered while in *your home province*. There will be no refund for the number of days *you* spend in *your home province*.

+AutoPay Instant Payouts

Eligibility

To be eligible for Flight and Baggage Delay +AutoPay Instant Payouts, *you* must:

1) Register *your* flight details on the BCAA online Travel Delay +AutoPay portal at least six hours prior to the originally scheduled departure time of *your* delayed flights, and *your* registered flights must be originally scheduled within the period of coverage of *your* Policy; and,
2) Travel within the period of coverage of *your* Policy; and
3) Be listed as a fare-paying passenger on the registered flight or flights; and,
4) Have a mobile device that can receive text messages (SMS) and access the internet and the email account *you* used to register *your* flight so that *you* can receive +AutoPay communications in real time while *you* wait for *your* flight.

To be eligible for Baggage Delay +AutoPay Instant Payouts, *you* must also:

1) Make a claim with the airline responsible for *your* baggage; and,
2) Register the baggage claim number (Property Irregularity Report – PIR – number) given to *you* by the airline at the BCAA online Travel Delay +AutoPay portal.

When *you* sign up for Travel Delay +AutoPay Instant Payouts and register *your* flight details, the registered flights will then be monitored for any delays and/or cancellations.

Benefits

Flight Delay +AutoPay Instant Payouts

Flight Delay benefits will be triggered by flights that are delayed or cancelled within 24 hours prior to their originally scheduled *departure date and time*.

If any of *your* registered flights experience an eligible delay or cancellation, *you* will be notified of *your* benefit choices via a text message (SMS) to *your* mobile phone number and an email.

If *you* choose an instant cash payout, y*ou* will be prompted to receive payment by either an Interac e-Transfer or a bank transfer.

MAXIMUM AGGREGATE LIMITS:

Applicable to Single Trip

$1,000 maximum instant cash payout per Policy if one *insured* on Policy.
$2,000 maximum instant cash payout per Policy if more than one *insured* on Policy.

Applicable to Annual Multi-trip

$2,000 maximum instant cash payout per Policy if one *insured* on Policy.
$4,000 maximum instant cash payout per Policy if more than one *insured* on Policy.

TWO-TO FOUR-HOUR FLIGHT DELAYS

If any of *your* registered flights are delayed for two to four hours beyond their originally scheduled departure time, *you* will be prompted to receive and choose between the following:

1) a free pass for *you* and all *insureds* on the Policy to access an airport lounge (if lounge available); or,
2) a $75 instant cash payout per registered flight if one *insured* on Policy; or,
3) a $150 instant cash payout per registered flight if more than one *insured* on Policy.

FOUR-HOUR+ FLIGHT DELAYS AND FLIGHT CANCELLATIONS

If any of *your* registered flights are delayed for more than four hours, or are cancelled, without any previous delays and cash payouts, *you* will be prompted to receive:

1) a $175 maximum instant cash payout per registered flight if one *insured* on Policy; or,
2) a $350 maximum instant cash payout per registered flight if more than one *insured* on Policy;

If *you* already received an instant cash payout or lounge pass because *your* flight was first delayed for two to four hours and is now further delayed for more than four hours, or cancelled, then *you* will be prompted to receive:

1) an additional $100 instant cash payout per registered flight, for a maximum total instant cash payout of $175 per registered flight if one *insured* on Policy; or,
2) an additional $200 instant cash payout per registered flight, for a $350 maximum total instant cash payout per registered flight per Policy if more than one *insured* on Policy.

If *you* have already received the maximum instant cash payouts for flight delays of two to four hours and/or for more than four hours, no further cash payouts will be made if the same flight is then cancelled.

If *you* did not register *your* flights that otherwise would have been eligible for +AutoPay Instant Payouts, *you* can submit eligible expenses for reimbursement as described in the Travel Delay Reimbursement section.

Baggage Delay +AutoPay Instant Payouts

If *your* baggage is lost or delayed, *you* must make a claim with the airline responsible for *your* baggage and then register the baggage claim number (Property Irregularity Report – PIR – number) given to *you* by the airline at the BCAA online Travel Delay +AutoPay portal to be entitled to Baggage Delay benefits.

If *your* registered baggage claim experiences an eligible delay, *you* will be prompted to receive an instant cash payout by either an Interac e-Transfer or a bank transfer.

BAGGAGE DELAY

When *you* register the baggage claim number (PIR number) given to *you* by the airline at the BCAA online Travel Delay +AutoPay portal, *you* will be prompted to receive:

1) a $75 instant cash payout per registered baggage claim if one *insured* on Policy; or,
2) a $150 instant cash payout per registered baggage claim, per Policy if more than one *insured* on Policy.

BAGGAGE LOSS

If your baggage has not arrived within 96 hours of your flight arriving at the destination airport or has been declared lost by the airline responsible for your baggage, you will be prompted to receive:

1) an additional $100 instant cash payout per registered baggage claim for a maximum total instant cash payout of $175 if one *insured* on Policy; or,
2) an additional $200 instant cash payout per registered baggage claim for a maximum total instant cash payout of $350 if more than one *insured* on Policy.

If *you* did not register *your* baggage claim on the BCAA online Travel Delay +AutoPay portal that otherwise would have been eligible for +AutoPay Instant Payouts, *you* may submit additional eligible expenses incurred under the **Travel Delay Reimbursement Coverage.**

Conditions

1) If more than one *insured* is travelling at the same time, *you* will be prompted to nominate one *insured* (as the Nominated Insured) to receive benefits.
2) No Flight Delay payment will be made if the flight is delayed or cancelled more than 24 hours before its scheduled *departure date and time*.
3) *BCAA* will not be responsible for any roaming charges or wireless connection charges that result from receiving +AutoPay notifications and benefits.
4) *You* are responsible for ensuring the device registered to receive +AutoPay notifications and benefits has sufficient battery life, cellular data/WI-FI service.
5) All amounts are in Canadian funds.
6) Instant +AutoPay services are available for all non-charter flights worldwide, 24 hours a day, 7 days a week. Subject to airlines providing flight-status updates.
7) *BCAA* is not responsible for any service charges or administration fees charged by *your* financial institution.
8) Benefits are provided by CPP Innovation Limited ("Blink") on behalf of *BCAA*. By registering *your* flight, *you* consent to the collection, use and sharing of *your* personal data and information by Blink.
9) To receive benefits, *you* must also have a bank account with a financial institution legally operating in Canada.
10) Any fraud, attempted fraud or giving false information on *your* part while registering online for the +AutoPay service, receiving a compensation payment, or at any other time, will cancel *your* right to compensation under the +AutoPay service.

Travel Delay Reimbursement

Benefits

Flight Delay

TWO-TO-FOUR-HOUR FLIGHT DELAYS

When *your* flight is delayed between two to four hours beyond its originally scheduled *departure date and time*, the *company* will reimburse *you* for the following expenses incurred directly as a result of the delay:

1) necessary and reasonable hotel, motel or restaurant expenses; and/or,
2) additional transport expenses incurred; and/or,
3) entertainment expenses
   a) up to a maximum of $75 if one *insured* on Policy; or,
   b) up to a maximum of $150 if more than one *insured* on Policy.

FOUR-HOUR+ FLIGHT DELAY

When *your* flight is delayed for more than four hours beyond its originally scheduled *departure date and time*, the *company* will reimburse *you* for the following expenses incurred directly as a result of the delay:

1) necessary and reasonable hotel, motel or restaurant expenses up to a maximum of $900.
2) additional transport expenses incurred up to a maximum of $400.
3) entertainment expenses incurred up to a maximum of $400.

Proof of expenses, of being a fare-paying passenger on the delayed flight, and of the length of the flight delay will be required.

Baggage Delay

ONE-TO-SIX-HOUR BAGGAGE DELAY

When *your* baggage is lost or delayed by an airline responsible for that baggage between one to six hours beyond *your* flight arriving at the destination airport, the *company* will reimburse *you* for the purchase of essential clothing and personal care items incurred directly as a result of the loss or delay:

1) up to a maximum of $75 if one *insured* on Policy; or,
2) up to a maximum of $150 if more than one *insured* on Policy.

SIX-HOURS+ BAGGAGE DELAY

When *your* baggage is lost or delayed by an airline responsible for that baggage for more than six hours beyond *your* flight arriving at the destination airport, the *company* will reimburse *you* for the purchase of essential clothing and personal care items up to a maximum of $900, incurred as a result of the loss or delay.

Eligible items must be purchased during the same *trip* when the loss or delay occurred and prior to *your* return to *your* ordinary place of residence.

Proof of expenses and of making a claim for *your* delayed baggage with the airline responsible for that baggage will be required.

Travel Delay Quarantine Expenses

Benefit

If *you, or your insured travelling companion*(s) are placed in *quarantine* as ordered by the attending *physician*, the local government or another lawful public authority during *your* covered *trip*, or when *your* scheduled return to *your* ordinary place of residence is delayed because of being in *quarantine,* the *company* will pay for *your* additional and unplanned commercial accommodation, meals, and internet costs:

1) up to $300 per day if one *insured* on Policy to a maximum of $3,000 *per trip;* or,
2) up to $500 per day if more than one *insured* on Policy to a maximum of $5,000 per *trip*.

This benefit terminates on the date *you* return to *your* ordinary place of residence or 30 days after the originally scheduled date of return, whichever is earlier.

Proof of expenses and of being ordered to quarantine will be required.

Conditions

If *you* have purchased this insurance as a separate Optional Coverage, the following conditions apply:

1) This Optional Coverage can be purchased as an endorsement to a Travel Emergency Medical Insurance Base Plan.

2) Coverage will be subject to the terms and conditions of the Travel Emergency Medical Insurance Base Plan it is purchased with. Coverage is not subject to the *deductible* as specified in the section entitled Travel Emergency Medical Insurance.

3) This Optional Coverage cannot be purchased as an endorsement to a Travel Emergency Medical Insurance Plan when this Policy is purchased to top-up another travel emergency medical insurance plan. If *you* would like to purchase this Optional Coverage with the Travel Emergency Medical Insurance Plan, *you* must purchase the Travel Emergency Medical Insurance for the full duration of *your trip*.

Exclusions

In addition to the exclusions of the Base Plan this Optional Coverage is purchased with and to the General Exclusions shown on **page 55**, the *company* will not be liable to provide coverage or services, or to pay claims for expenses, regardless of if there are other contributing factors that are not otherwise excluded, that are, or could be, caused by, contributed to or arising out of, directly or indirectly, or in connection with:

1) Any loss caused by or related to a circumstance known to *you* or to any person purchasing this Policy on *your* behalf prior to the date and time this insurance is purchased.

2) *Your* failure to provide proof of being ordered to quarantine by the attending physician, the local government, or another lawful public authority.

3) Additional costs incurred by *you* to reschedule missed event(s)/excursion(s) after *you* have been ordered to quarantine, this includes reimbursement for *your* unused prepaid *travel costs*.

4) Expenses incurred when a travel advisory to "Avoid all travel" or to "Avoid non-essential travel" is issued by the Government of Canada for *your* destination prior to *your* departure.

Travel Delay Coverage

Travel Delay Coverage is also available as a separate Optional Coverage when purchased with the Visitors to Canada Travel Emergency Medical Insurance Base Plan.

Period of coverage

Coverage commences on the date and time *you* leave for *your trip*. Coverage terminates on the earliest of the following:

1) At 11:59 PM on the expiry date of the Policy;
2) On the date and time, *you* return to *your* original point of departure, except as outlined below:
    a) If *your* flight or baggage is delayed or *your* return is delayed due to quarantine as outlined in the benefits below, coverage terminates on the date *you* return to *your* original point of departure or 30 days after the originally scheduled date of return, whichever is earlier.

    b) If *you* are also covered under the Trip Cancellation & Interruption Coverage and *your trip* is interrupted before the scheduled *return date* as a result of *hospitalization* or death of a *family member* not travelling with *you*, or as a result of a natural disaster or unforeseeable event rendering *your* principal residence uninhabitable and then *you* resumed *your trip*. In this case, *your* Policy will not terminate, however *you* will not be covered while in *your* country of permanent residence. There will be no refund for the number of days *you* spend in *your* country of permanent residence,

    c) If *you* are also covered under the Visitors to Canada Travel Emergency Medical Insurance and *you* are returned to *your country of permanent residence* under the Emergency Air Transportation Benefit or the Airfare to Return Home for Treatment Benefit during the period of coverage, coverage will be suspended during *your* temporary return. In this case *your* Policy will not terminate, however *you* will not be covered while in *your country of permanent residence*. There will be no refund for the number of days *you* spend in *your country of permanent residence*.

Travel Delay Reimbursement

Benefits

Flight Delay

TWO-TO-FOUR-HOUR FLIGHT DELAY

When *your* flight is delayed between two to four hours beyond its originally scheduled *departure date and time*, the *company* will reimburse *you* for the following expenses incurred directly as a result of the delay:

1) necessary and reasonable hotel, motel or restaurant expenses; and/or,
2) additional transport expenses incurred; and/or,
3) entertainment expenses
   a) up to a maximum of $75 if one *insured* on Policy; or,
   b) up to a maximum of $150 if more than one *insured* on Policy.

FOUR-HOUR+ FLIGHT DELAY

When *your* flight is delayed for more than four hours beyond its originally scheduled *departure date and time*, or when it is cancelled, the *company* will reimburse *you* for the following expenses incurred directly as a result of the delay:

1) necessary and reasonable hotel, motel or restaurant expenses up to a maximum of $900.
2) additional transport expenses incurred up to a maximum of $400.
3) entertainment expenses incurred up to a maximum of $400.

Proof of expenses, of being a fare-paying passenger on the delayed flight, and of the length of the flight delay will be required.

Baggage Delay

ONE-TO-SIX-HOUR BAGGAGE DELAY

When *your* baggage is lost or delayed by an airline responsible for that baggage for between one to six hours beyond *your* flight arriving at the destination airport, the *company* will reimburse *you* for the purchase of essential clothing and personal care items incurred directly as a result of the loss or delay:

1) up to a maximum of $75 if one *insured* on Policy; or,
2) up to a maximum of $150 if more than one *insured* on Policy.

SIX-HOURS+ BAGGAGE DELAY

When *your* baggage is lost or delayed by an airline responsible for that baggage for more than six hours beyond *your* flight arriving at the destination airport, the *company* will reimburse *you* for the purchase of essential clothing and personal care items up to a maximum of $900 per Policy, incurred directly as a result of the loss or delay.

Eligible items must be purchased during the same *trip* when the loss or delay occurred and prior to *your* return to *your* original point of departure.

Proof of expenses and of making a claim for *your* delayed baggage with the airline responsible for that baggage will be required.

Travel Delay Quarantine Expenses

Benefit

If *you, or your insured travelling companion*(s) are placed in *quarantine* as ordered by the attending *physician*, the local government or another lawful public authority during *your* covered *trip*, or when *your* scheduled return to *your* original point of

departure is delayed because of being in quarantine, the *company* will pay for *your* additional and unplanned commercial accommodation, meals, and internet costs:

1) up to $300 per day if one *insured* on Policy to a maximum of $3,000 *per trip*; or,
2) up to $500 per day if more than one *insured* on Policy to a maximum of $5,000 per *trip*.

This benefit terminates on the date *you* return to *your* original point of departure or 30 days after the originally scheduled date of return, whichever is earlier.

Proof of expenses and of being ordered to quarantine will be required.

Conditions

If *you* have purchased this insurance as a separate Optional Coverage, the following conditions apply:

1) This Optional Coverage can be purchased as an endorsement to a Visitors to Canada Travel Emergency Medical Insurance Base Plan.

2) Coverage will be subject to the terms and conditions of the Visitors to Canada Travel Emergency Medical Insurance Base Plan it is purchased with. Coverage is not subject to the *deductible* as specified in the section entitled Visitors to Canada Travel Emergency Medical Insurance.

Exclusions

In addition to the exclusions of the Visitors to Canada Travel Emergency Medical Insurance Base Plan this Optional Coverage is purchased with and to the General Exclusions shown on **page 55**, the *company* will not be liable to provide coverage or services, or to pay claims for expenses, regardless of if there are other contributing factors that are not otherwise excluded, that are, or could be, caused by, contributed to or arising out of, directly or indirectly, or in connection with:

1) Any loss caused by or related to a circumstance known to *you* or to any person purchasing this Policy on *your* behalf prior to the date and time this insurance is purchased.

2) *Your* failure to provide proof of being ordered to quarantine by the attending *physician*, the local government, or another lawful public authority.

3) Additional costs incurred by *you* to reschedule missed event(s)/excursion(s) after *you* have been ordered to quarantine, this includes reimbursement for *your* unused prepaid *travel costs*.

4) Expenses incurred when a travel advisory to "Avoid all travel" or to "Avoid non-essential travel" is issued by the Government of Canada for *your* destination prior to *your* departure.

Visitors to Canada Travel Emergency Medical Insurance: Single Trip

Eligibility

You are eligible for coverage and to purchase this insurance if, on the *application date* and the date coverage commences, *you* meet all the following requirements:

1) At least 30 days of age.
2) In good health and know of no reason for which *you* may seek medical attention.
3) Are a foreign worker, or a visitor to Canada with valid legal status in Canada; or,
    a) An immigrant awaiting provincial or territorial government health care coverage; or,
    b) A returning Canadian not eligible for a provincial or territorial government health care plan due to an extended leave.
4) Not travelling against a *physician's* advice.
5) Not receiving *palliative care* nor been recommended *palliative care*.
6) Not been diagnosed with a *terminal condition*.

Notwithstanding these eligibility and purchase conditions, all terms, conditions and exclusions of this Policy still apply.

Period of Coverage

Coverage commences on the later of:

1) The effective date of the Policy; or,
2) The date and time *you* arrive in Canada.

Coverage is also subject to the *waiting period* requirements.

Coverage terminates on the earliest of:

1) 11:59 PM on the expiry date of the Policy; or,
2) On the day *you* return permanently to *your* country of permanent residence; or,
3) On the day *you* become insured under a provincial or territorial government health care plan.

This Period of Coverage is also applicable to the 24/7 Travel Accident Coverage Additional Benefit as stated in this section.

Travel outside British Columbia and Canada

Coverage is available for travel outside of the province of British Columbia and worldwide during the period of coverage as long as the majority of the period of coverage is spent in British Columbia. Visits to *your* country of permanent residence are permitted; *your* Policy will not terminate;-however, expenses will not be covered while in *your* country of permanent residence.

Benefits

Maximum limit: Sum insured as shown on the application/declaration

Whenever a benefit limit is not specified, the benefit is limited to the maximum sum insured that is indicated on the application/declaration and for which the appropriate premium has been paid.

The *company* will pay the actual, reasonable and customary medical and related expenses up to the coverage limits for *acute*, sudden and unexpected *emergency sickness* or *injury*, resulting from an *emergency* that occurs while travelling outside *your* country of permanent residence.

Once the *emergency* ends, no further benefits will be payable related to the specific medical condition/injury that initially caused the *emergency*.

Eligible medical and related expenses are described below.

1) Emergency Medical Treatment

Hospital Services
Hospitalization services (limited to a semi-private room). Any coverage related to *hospitalization* terminates upon release from the *hospital* other than what is specified under the Follow-up Visits Benefit.

Out-patient *medical treatment* provided by a *hospital*.

Physician
The services of a *physician*.

Ambulance Services
The services of a licensed ground, air or sea ambulance and paramedics from the scene of the accident that caused the *injury* or place of onset of the *sickness* to the nearest *hospital*. Fire rescue expenses are also covered if a fire rescue team is dispatched in response to *your* medical *emergency*. If an ambulance is medically required but is unavailable, the *company* will pay for taxi expenses, taxi receipt required.

X-ray Examinations
X-ray examinations and diagnostic laboratory procedures when performed at time of initial *emergency*.

Prescription Drugs
Prescription drugs (excluding over the counter medicine, vitamins, minerals and dietary supplements) that require a *physician*'s written prescription (original pharmacy prescription receipts indicating the medication name, quantity, dosage, prescribing *physician* and cost are required). Coverage is available for a maximum supply of 30 days, for prescription drugs that are purchased in the 30-day period from the date of the initial *emergency* or *follow-up* visits. While *you* are *hospitalized,* the *company* will pay the total cost of all prescription drugs, in addition to the 30-day maximum supply of related prescriptions that are filled in the 30-day period following the release from the *hospital*.

Essential Medical Appliances
The cost to rent or purchase essential medical appliances including, but not limited to wheelchairs, crutches and canes. When appliances are purchased, the reimbursement will not exceed the total cost that would have been incurred if the appliances had been rented.

Private Duty Nursing
Private duty nursing services, performed by a registered nurse (RN) other than a *family member*, when ordered in writing by the attending *physician*.

2) Follow-up Visits
Three *follow-up* visits within the 14 days after the initial *emergency medical treatment*, provided the *follow-up* visits are required as a direct result of the initial *emergency*.

3) Fracture Treatment
Following the initial *emergency medical treatment* and any covered *follow-up* visits, the *company* will pay up to a maximum of $1,000 for the following treatments related to fractures:

- X-ray examinations; and,
- Re-examination *physician* visits; and,
- Casting and re-casting, if *medically necessary*; and,
- Cast removal

Eligible expenses must be incurred during the same covered *trip* and prior to *your* return to *your* country of permanent residence.

This benefit is only available in lieu of the Airfare to Return Home for Treatment Benefit.

4) Hospital Allowance
Expenses of up to $75 per day to cover incidental *hospital* charges, which are billed by the *hospital*, such as TV rental and telephone charges.

5) Other Professional Medical Services
Up to a maximum of $600 for any one *emergency*, per practitioner for the services of the following licensed practitioners to relieve an *acute emergency*:

- Physiotherapist
- Chiropractor
- Chiropodist
- Osteopath
- Podiatrist
- Optometrist
- Naturopath
- Holistic doctor
- Acupuncturist

6) Dental Services
The services of a licensed dentist or dental surgeon for *emergency* dental treatment, including the cost of prescription drugs and x-rays, as follows:

a) Dental expenses *you* incur while on *your trip* for an accidental blow to the face requiring the repair or replacement of natural teeth or permanently attached artificial teeth, including crowns, bridges and dental implants. *You* are also covered for continuing treatment, provided the treatment is related to the accidental blow to the face and takes place within the period of coverage. All treatment must be completed within 90 days after the treatment began.
This benefit does not cover dental treatment for veneers or dentures.

b) Dental expenses *you* incur while on *your trip* for any dental *emergencies* other than pain caused by an accidental blow to the face, up to a maximum limit of $600. All treatment must be completed within 90 days after the treatment began.

7) Emergency Air Transportation
This benefit is payable only when pre-approved and arranged by *BCAA Claims Assistance*.
At the time of *hospitalization*, medical air evacuation for return to *your* country of permanent residence or medical air evacuation between medical facilities when the first medical facility is not equipped to provide the required *medical treatment*.

8) Airfare to Return Home for Treatment
This benefit is payable only when pre-approved by *BCAA Claims Assistance*.
The cost of a one-way economy airfare on a commercial flight via the most direct route to return to *your* country of permanent residence for immediate *medical treatment* as a result of an *emergency*. The *medical treatment* must be sought within 10 days from arrival to *your* country of permanent residence and the attending *physician* providing treatment outside *your* country of permanent residence must indicate in writing that the *medical treatment* is required.
The cost of an airline seat upgrade is included if the attending *physician* providing treatment outside *your* country of permanent residence indicates in writing that it is also medically required.

For fracture claims, this benefit is only available in lieu of the Fracture Treatment Benefit.

9) Medical Attendant
This benefit is payable only when pre-approved by *BCAA Claims Assistance*.
If *you* are returned under the Emergency Air Transportation Benefit or the Airfare to Return Home for Treatment Benefit, the *company* will pay:

a) The cost of a round-trip economy airfare on a commercial flight via the most direct route for a qualified medical attendant (or *travelling companion* in lieu) to accompany *you* if the attending *physician* providing treatment outside *your* country of permanent residence indicates in writing that it is medically required; and,
b) The cost of an airline seat upgrade for the medical attendant (or *travelling companion* in lieu) if the attending *physician* providing treatment outside *your* country of permanent residence indicates in writing that it is medically required.

10) Return of Travelling Companion

This benefit is payable only when pre-approved by *BCAA Claims Assistance*.

If *you* are returned under the Emergency Air Transportation Benefit, the Airfare to Return Home for Treatment Benefit or the Repatriation Benefit, the *company* will pay a one-way economy airfare for one *travelling companion* to return back to the original *departure point*.

11) Return of Children/Grandchildren

This benefit is payable only when pre-approved by *BCAA Claims Assistance*.

If *you* are returned to *your* country of permanent residence under the Emergency Air Transportation Benefit, the Airfare to Return Home for Treatment Benefit or the Repatriation Benefit, the *company* will pay for:

a) A one-way economy airfare for *dependent children* or *grandchildren* travelling with *you* to return back to the original *departure point; and,*
b) *The* cost of a chaperone when necessary

12) Repatriation

In the event of *your* death during a *trip* covered under the Policy benefits, the *company* will pay for:

a) The preparation and return of *your* body, including the cost of a standard shipping container (excluding the cost of a burial coffin) to *your* country of permanent residence; or,
b) Up to a maximum of $5,000 for burial at the place of death (excluding the cost of funeral and related expenses or a burial coffin or urn) including one death certificate, in the event *your* body is not returned to *your* country of permanent residence; or,
c) Up to a maximum of $5,000 for cremation at the place of death (excluding the cost of funeral and related expenses or an urn) including one death certificate and the standard shipping cost to return *your* ashes to *your* country of permanent residence; and
d) Transportation costs of one *family member* to go to the place of *your* death to identify *your* body when it is necessary to be identified prior to the release of *your* body and up to a maximum of $400 per day to a maximum of $2,000 for meals and commercial accommodation.
e) The *family member* identifying *your* body will also be covered as an *insured* under this Policy for the period of time required to identify *your* body. Coverage for the *family member* is limited to the Visitors to Canada Travel Emergency Medical Insurance Plan and is subject to the terms and conditions of the Policy.

13) Family Transportation

This benefit is payable only when pre-approved by *BCAA Claims Assistance*.

If an attending *physician* considers it necessary, the *company* will pay one round-trip economy airfare or ground transportation costs for one *family member* to be with *you* while *you* are *hospitalized* if *you* are travelling alone, or for one additional *family member* other than *your travelling companion* if *you* are not travelling alone, and up to $400 per day up to a maximum of $2,000 for reasonable and necessary commercial accommodation, meals, telephone calls, internet charges, taxi or bus fare.

The *family member* attending *your* bedside will also be covered as an *insured* under this Policy while *you* are *hospitalized*. Coverage for the *family member* is limited to the Visitors to Canada Travel Emergency Medical Insurance Plan and is subject to the terms and conditions of the Policy.

14) Out of Pocket Expenses

Up to $500 per day to a maximum of $5,000 for *your* commercial accommodation, meals, telephone calls, internet charges, taxi fare, parking charges, bus fare and rental car, if:

a) *Your travelling companion* is transferred to a different *hospital* in another city for *emergency medical treatment*; or,
b) *Your travelling companion* is confined to *hospital* on or after the date *you* are scheduled to return to *your* country of permanent residence.

If *you* are claiming under part b), there is no coverage for any out-of-pocket expenses *you* incur before the date *you* are scheduled to return to *your* country of permanent residence.

15) **Child Care**
Up to $500 per day to a maximum of $5,000 for childcare costs for *insured* children 18 years and under who are travelling with *you* (excluding childcare provided by a *family member*) when:
   a) *You* are confined to *hospital*; or,
   b) *You* are transferred to a different *hospital* in another city for *emergency medical treatment*.

16) **Additional Benefit: 24/7 Travel Accident Coverage**
Maximum sum insured - $25,000 per *insured*, per *trip*.
Refer to **page 31** for details.

This benefit is not applicable if *you* have purchased a Trip Protection Package or a Travel Accident Coverage Optional Coverage for the same covered *trip*.

Automatic Extensions to Coverage

At the time the period of coverage ends *your* coverage will be automatically extended at no additional premium:

Hospitalization

If *you* or *your travelling companion* are confined to *hospital*. The automatic extension will be provided to *you* for the remaining period of the *hospitalization*, plus up to seven days after *hospital* release to recover and/or travel home.

Medically Unfit to Travel

If *you* or *your travelling companion* are unable to travel on the scheduled *return date* due to a *sickness* or *injury* that does not require *hospitalization*. The automatic extension will be provided to *you* for up to seven days to recover and/or travel home. Written documentation must be provided to ***BCAA Claims Assistance*** by the attending *physician* to substantiate the inability to travel home as originally scheduled.

Quarantine

If *you* or *your travelling companion* are advised to quarantine *at your destination* and are unable to return to *your* country of permanent residence on *your* scheduled *return date*, *your* coverage will be automatically extended at no additional premium for the duration of *your quarantine*, but for no more than 14 days beyond *your* original expected *return date*. Proof of being mandated to quarantine will be required and must be provided to *BCAA*.

Delay of Common Carrier

If *your common carrier* is delayed due to circumstances beyond *your* control, preventing *you* from returning to *your* country of permanent residence. The automatic extension will be provided to *you* for up to seven days. Written documentation must be provided to *BCAA* to substantiate the *common carrier* delay.

Vehicle Accident or Mechanical Breakdown

If the *vehicle you* are travelling in is involved in an accident or mechanical breakdown. The automatic extension will be provided to *you* for up to seven days. Written documentation must be provided to *BCAA* to substantiate the reason for delay.

Pre-existing Condition Stability Requirements

In addition to the Visitors to Canada Travel Emergency Medical Insurance Exclusions below and to the General Exclusions shown on **page 55**, the *company* will not be liable to provide coverage or services, or to pay claims for expenses, regardless of if there are other contributing factors that are not otherwise excluded, that are, or could be, caused by, contributed to or arising out of, directly or indirectly, or in connection with:

Applicable to Insureds 59 Years and Under (on the effective date)

Pre-existing conditions which have not remained *stable* within the 90 days before the effective date of the Policy or the arrival date in Canada, whichever occurs later.

Applicable to Insureds 60 to 69 Years (on the effective date)

Pre-existing conditions which have not remained *stable* within the 180 days before the effective date of the Policy or the arrival date in Canada, whichever occurs later.

If *you* are 69 years and under and have purchased the optional Visitors Unstable Pre-existing Condition Coverage, refer to that section heading for coverage applicable to *your pre-existing conditions* that are not *stable*.

Applicable to Insureds 70 Years and Over (on the effective date)

Any *pre-existing conditions*.

If *you* are 70 to 79 years and have purchased the optional Visitors Stable Pre-existing Condition Coverage, refer to that section heading for coverage applicable to *your pre-existing conditions* that are *stable*.

Applicable to All Ages

Pre-existing conditions that do not meet the stability requirements set out above are not covered.

Refer to the following definitions: *alteration*, *medical treatment*, *pre-existing condition* and *stable*.

Exclusions

In addition to the General Exclusions on **page 55**, the *company* will not be liable to provide coverage or services, or to pay claims for expenses, regardless of if there are other contributing factors that are not otherwise excluded, that are, or could be, caused by, contributed to or arising out of, directly or indirectly, or in connection with:

1) A *trip* that is undertaken against a *physician*'s advice.
2) A *trip* that is undertaken after the diagnosis of a *terminal condition*.
3) A *trip* that is undertaken while *you* are receiving *palliative care* or after *palliative care* has been recommended.
4) Conditions or any related conditions for which, prior to the effective date of the Policy or *your* arrival date in Canada, whichever occurs later, *diagnostic tests* took place, were scheduled to take place or were recommended and for which results had not yet been received on the effective date of the Policy or *your* arrival date in Canada, whichever occurs later. This includes *diagnostic tests* that were recommended or scheduled prior to the effective date of the Policy or *your* arrival date in Canada, whichever occurs later, but had not yet taken place at the time of the effective date of the Policy or *your* arrival date in Canada, whichever occurs later. This exclusion does not apply to:
    a) Tests to monitor an existing condition when there have been no new or more frequent symptoms, whether or not results have been received; or,
    b) Screening tests intended to prevent illness or to detect conditions before symptoms are noticed, whether or not results have been received.
5) Tests and investigation except when performed at the time of initial *emergency sickness* or *injury*.
6) Any expenses incurred as a result of *sickness* that originated or was symptomatic during the *waiting period*.
7) Any *medical treatment* which is a continuation of or subsequent to an *emergency sickness* or *injury* during the same covered *trip*, including its *recurrence* or any complications, regardless if there are other contributing factors that are not otherwise excluded, that are, or could be, caused by, contributed to or arising out of, directly or indirectly, or in

connection thereto unless based on the available medical evidence the *company*'s Medical Advisor determines the initial *emergency* had not ended or unless specified in the Fracture Treatment and Dental Services benefits.

This exclusion does not apply if *you* are declared medically unfit to return to *your* country of permanent residence, or the country *you* were travelling or residing in prior to arriving in Canada, because the initial *emergency* had not ended.

This exclusion applies whether or not *you* intend to return to *your* country of permanent residence or the country *you* were travelling or residing in prior to arriving in Canada.

8) Expenses incurred for *emergency* air transportation and any expenses incurred after *emergency* air transportation, when the *emergency* air transportation was not arranged by ***BCAA Claims Assistance***.

9) ***a) Travel Advisory Issued on or Before Your Departure Date***
Emergency sickness or *injury* if *you* travel to a destination on or after the date the Government of Canada has issued a travel advisory to "Avoid all travel" or "Avoid non-essential travel" to that destination; this includes any connections, layovers, stopovers or transit locations during *your trip* that are impacted by such advisories.

b) Travel Advisory Issued After Your Departure Date
Emergency sickness or injury that occurs 15 days or more after the date the Government of Canada has issued a travel advisory to "Avoid all travel" or "Avoid non-essential travel" for a destination that *you* have already departed for or arrived at; this includes any connections, layovers, stopovers or transit locations during *your trip* that are impacted by such advisories.

10) A medical condition for which symptoms were present or *medical treatment* was received during a temporary visit to *your* country of permanent residence during the period of coverage or any condition that is, or could be, wholly or partly, caused by, contributed to or arising out of, directly or indirectly, or in connection thereto, regardless of if there are other contributing factors that are not otherwise excluded.

11) *Medical treatment* and expenses incurred while in *your* country of permanent residence. This exclusion does not apply to a returning Canadian.

12) Loss, theft or breakage of contact lenses, prescription glasses, hearing aids, prosthetic devices or dentures.

Deductible

The *company* will pay eligible medical expenses for losses incurred in excess of the amount of the *deductible* as shown on the application/declaration, per *insured,* per condition or event.

This *deductible* applies to the portion of eligible expenses listed in section Benefits, under Benefit number 1. Emergency Medical Treatment, Benefit number 2. *Follow-up* Visit remaining after payment by *your* provincial or territorial government health care plan or other insurance policies, plans or contracts, including private or provincial automobile insurance.

Refunds

1) Refunds are not available if a claim has been or will be submitted.

2) When no travel has taken place and the request for refund is received **prior** to the effective date of the Policy, a full refund is available.

3) When no travel has taken place and the request for refund is received **after** the effective date of the Policy:
   a) A full refund is available within 10 days from the *application date*; or,
   b) A refund less a cancellation fee is available when the request for refund is received more than 10 days after the *application date* but no later than one year from the expiry date of the Policy.
   c) Refunds must be requested in writing. Refer to Contact Information on **page 6**.

4) A partial refund less a cancellation fee is available if:

a) *You* return to *your* country of permanent residence; or,
b) *You* become eligible and/or covered under a provincial or territorial government health care plan during the period of coverage.
c) A satisfactory proof of return to *your* country of permanent residence or proof of the date *you* became eligible and/or covered under a provincial or territorial government health care plan, is sent to BCAA Insurance Agency.
d) Refunds must be requested in writing. Refer to Contact Information on **page 6**.

All refund requests must be received by BCAA Insurance Agency no later than one year from the date *you* became eligible and/or covered under a provincial or territorial government health care plan. Refunds will be calculated from the date *you* return to *your* country of permanent residence or the date *you* become eligible and/or covered under a provincial or territorial government health care plan.

5) Applicable to 365-day Policies with a sum insured of $100,000 or more (Super Visa Policies):
   a) A refund is available, subject to a $250 cancellation fee, provided no travel has taken place. For cancellation after the effective date of the Policy, the request must be received no later than one year from the expiry date of the Policy; or,
   b) If a Super Visa application was denied, a full refund is available prior to the effective date of the Policy, or a refund less the cancellation fee is available after the effective date of the Policy, provided the request is received no later than one year from the expiry date of the Policy. Supporting documentation must be sent to BCAA Insurance Agency.
   c) Refunds must be requested in writing. Refer to Contact Information on **page 6**.

   Note: If *your* Super Visa application is delayed, please contact BCAA Insurance Agency prior to *your* Policy effective date to change the coverage dates of *your* Policy.

Optional Coverages

The Optional Coverages listed in this section may only be purchased in conjunction with a Base Plan as described in this Policy. The Optional Coverages are also subject to the 10-day Full Refund Provision (if applicable), Insuring Agreement, Validation of Coverage, General Exclusions, General Conditions and Provisions, Authorized Extensions to Period of Coverage, Automatic Annual Multi-trip Renewal Option, Definitions, Statutory Conditions, Other Conditions, Privacy and How to Claim sections of the Policy.

Pre-existing Condition Coverage

Benefits

Maximum limit: $300,000

This Optional Coverage is available for purchase with the Travel Emergency Medical Insurance Base Plan. It provides coverage for unstable *pre-existing conditions*; however, the maximum benefit payable under this Optional Coverage is $300,000.

This coverage does not increase the maximum limits of the Travel Emergency Medical Insurance Base Plan stated in the Policy.

When this Optional Coverage is purchased, the *company* will pay for the actual, reasonable and customary medical and related expenses for *acute*, sudden and unexpected *emergency sickness* or *injury* incurred as a result of *your pre-existing conditions* that were not *stable* and existed before the date of departure.

Coverage is subject to the terms and conditions specified in the section entitled Travel Emergency Medical Insurance, except for the wording under the sub-heading Pre-existing Condition Stability Requirements and is also subject to the exclusion and conditions described below.

Exclusion

In addition to the exclusions of the Base Plan this Optional Coverage is purchased with and to the General Exclusions shown on **page 55**, the *company* will not be liable to provide coverage or services, or to pay claims for expenses, regardless of if there are other contributing factors that are not otherwise excluded, that are, or could be, caused by, contributed to or arising out of, directly or indirectly, or in connection with:

Symptoms which were present or conditions and/or symptoms for which *medical treatment* or consultation was required or took place on the date of departure or at any time within the seven days before the date of departure, other than a *minor ailment*.

Refer to the following definitions: *alteration*, *medical treatment*, *minor ailment*, *pre-existing condition* and *stable*.

Conditions

1) This Optional Coverage can be purchased as an endorsement to a Travel Emergency Medical Insurance Base Plan. Coverage for *pre-existing conditions* that were not *stable* is subject to the maximum benefit limits that are specified in the Travel Emergency Medical Insurance Base Plan but in no event shall exceed $300,000.

2) Coverage is also subject to the *deductible* as specified in the section entitled Travel Emergency Medical Insurance, subheading Deductible.

Visitors Unstable Pre-existing Condition Coverage

Eligibility

To be eligible to purchase this Optional Coverage, *you* must be 69 years and under at the time of the effective date of the Policy.

Benefits

Maximum limit: Sum insured as shown on the application/declaration

This Optional Coverage is available for purchase with the Visitors to Canada Travel Emergency Medical Insurance Base Plan. It provides coverage for unstable *pre-existing conditions*; however, the maximum benefit payable is as set out in the application/declaration and does not increase the maximum limits of the Visitors to Canada Travel Emergency Medical Insurance Base Plan.

When this Optional Coverage is purchased, the *company* will pay for the actual, reasonable and customary medical and related expenses up to the sum insured selected for *acute*, sudden and unexpected *emergency sickness* or *injury* incurred as a result of *your pre-existing conditions* that were not *stable* and existed before the effective date of the Policy or before *your* arrival date in Canada, whichever occurs later.

Coverage is subject to the terms and conditions specified in the section entitled Visitors to Canada Travel Emergency Medical Insurance, except for the wording under the sub-heading Pre-existing Condition Stability Requirements that is applicable to *insureds* 69 years and under. Coverage is also subject to the exclusion and conditions described below.

Exclusion

In addition to the exclusions of the Base Plan this Optional Coverage is purchased with and the General Exclusions shown on **page 55**, the *company* will not be liable to provide coverage or services, or to pay claims for expenses, regardless of if there are other contributing factors that are not otherwise excluded, that are, or could be, caused by, contributed to or arising out of, directly or indirectly, or in connection with:

Symptoms which were present or conditions and/or symptoms for which *medical treatment* or consultation was required or took place on:

a) The effective date of the Policy or *your* arrival date in Canada, whichever occurs later; or,
b) At any time within the seven days before the effective date of the Policy or before *your* arrival date in Canada, whichever occurs later, other than a *minor ailment*.

Refer to the following definitions: *alteration*, *medical treatment*, *minor ailment*, *pre-existing condition* and *stable*.

Conditions

1) This Optional Coverage can be purchased as an endorsement to the Visitors to Canada Travel Emergency Medical Insurance Plan. Coverage is subject to the maximum benefit limits that are specified in the Visitors to Canada Travel Emergency Medical Insurance Plan but in no event shall exceed the sum insured as indicated on the application/declaration.

2) Coverage is also subject to the *deductible* as specified in the section entitled Visitors to Canada Travel Emergency Medical Insurance, subheading Deductible.

Visitors Stable Pre-existing Condition Coverage

Eligibility

To be eligible to purchase this Optional Coverage, *you* must be 70 to 79 years at the time of the effective date of the Policy.

Benefits

Maximum limit: Sum insured as shown on the application/declaration

This Optional Coverage is available for purchase with the Visitors to Canada Travel Emergency Medical Insurance Base Plan. This does not increase the maximum limits of the Visitors to Canada Travel Emergency Medical Insurance Base Plan stated in the application/declaration.

When this Optional Coverage is purchased, the *company* will pay for the actual, reasonable and customary medical and related expenses up to the sum insured selected for *acute*, sudden and unexpected *emergency sickness* or *injury* incurred as a result of *your pre-existing conditions* that were *stable* and existed before the effective date of the Policy or before *your* arrival date in Canada, whichever occurs later.

Coverage is subject to the terms and conditions specified in the section entitled Visitors to Canada Travel Emergency Medical Insurance, except for the wording under the sub-heading Pre-existing Condition Stability Requirements that is applicable to *insureds* 70 years and over. Coverage is also subject to the exclusion and conditions described below.

Exclusion

In addition to the exclusions of the Base Plan this Optional Coverage is purchased with and to the General Exclusions shown on **page 55**, the *company* will not be liable to provide coverage or services, or to pay claims for expenses, regardless if there are other contributing factors that are not otherwise excluded, that are, or could be, caused by, contributed to or arising out of, directly or indirectly, or in connection with:

Any *pre-existing condition* that is not *stable* within the 180 days before the effective date of this Policy or before *your* arrival date in Canada, whichever occurs later, for *insureds* who are 70 to 79 years on the effective date of the Policy.

Refer to the following definitions: *alteration*, *medical treatment*, *pre-existing condition* and *stable*.

Conditions

1) This Optional Coverage can be purchased as an endorsement to the Visitors to Canada Travel Emergency Medical Insurance Plan. Coverage is subject to the maximum benefit limits that are specified in the Visitors to Canada Travel Emergency Medical Insurance Plan but in no event shall exceed the sum insured as indicated on the application/declaration.

2) Coverage is subject to the *deductible* as specified in the section entitled Visitors to Canada Travel Emergency Medical Insurance, subheading Deductible.

Trip Protection Package

This package can be purchased as an Optional Coverage to the Travel Emergency Medical Insurance and Visitors to Canada Travel Emergency Medical Insurance Base Plans and is subject to the terms and conditions specified under the Base Plan it is purchased with.

This coverage can also be purchased as a Base Plan. For complete details, refer to **page 19.**

This package includes the following coverages:

Trip Cancellation & Interruption Coverage

Maximum limit for sum insured prior to departure Sum insured as shown on the application/declaration
Maximum limit for sum insured after departure – Up to $25,000 per Policy.
For complete details, refer to **page 20**.

Baggage Coverage

Maximum limit — $1,500 per *trip* if one *insured* on Policy
Maximum limit — $3,000 *per trip* if more than one *insured* on Policy
For complete details, refer to **page 29**.

Travel Accident Coverage

Maximum limit for Common Carrier Accident —$100,000 per *insured*, per *trip*.
Maximum limit for 24/7 Travel Accident — $25,000 per *insured*, per *trip*. For complete details, refer to **page 31**.

Travel Delay +AutoPay Coverage

Applicable when this package is purchased as an Optional Coverage with the Travel Emergency Medical Insurance Base Plan.
Up to the limit of each benefit as specified in the section.
For complete details, refer to **page 33**.

Travel Delay Coverage

Applicable when this package is purchased as an Optional Coverage with the Visitors to Canada Travel Emergency Medical Insurance Base Plan.
Up to the limit of each benefit as specified in the section.
For complete details, refer to **page 38**.

Baggage Coverage

This Optional Coverage can be purchased with the Travel Emergency Medical Insurance or Visitors to Canada Travel Emergency Medical Insurance or Trip Protection Package Base Plans, subject to the terms and conditions specified under the Base Plan it is purchased with.

Maximum limit — $1,500 per *trip* if one *insured* on Policy.
Maximum limit — $3,000 *per trip* if more than one *insured* on Policy.

For complete details, refer to **page 29**.

Travel Accident Coverage

This Optional Coverage can be purchased with the Travel Emergency Medical Insurance or Visitors to Canada Travel Emergency Medical Insurance Base Plans and is subject to the terms and conditions specified under the Base Plan it is purchased with.

Common Carrier Accident: Maximum limit—$100,000 per *insured*, per *trip*.
24/7 Travel Accident: Maximum limit—$25,000 per *insured*, per *trip*.

For complete details, refer to **page 31**.

Travel Delay +AutoPay Coverage

This Optional Coverage can be purchased with the Travel Emergency Medical Insurance Base Plan and is subject to the terms and conditions specified under the Travel Emergency Medical Insurance Base Plan.

For complete details, refer to **page 33.**

Travel Delay Coverage

This Optional Coverage can be purchased with the Visitors to Canada Travel Emergency Medical Insurance Base Plan and is subject to the terms and conditions specified under the Visitors to Canada Travel Emergency Medical Insurance Base Plan.

For complete details, refer to **page 38**.

Pet Coverage

This Optional Coverage can be purchased with the Travel Emergency Medical Insurance Base Plan and is subject to the terms and conditions specified under the Travel Emergency Medical Insurance Base Plan.

Benefits

Pet Return

If *you* are returned to *your home province* under the Emergency Air Transportation Benefit, the Airfare to Return Home for Treatment Benefit or the Repatriation Benefit; or if *you* are *hospitalized* during *your trip*, the *company* will pay for the cost of returning *your* accompanying *pets* to *your home province* up to a maximum of $600.

Veterinary Fees & Kennel Costs

Up to a maximum of $600 for:

a) *Emergency* veterinary services for accompanying *pets* if they are injured during *your trip*; and/or,
b) Commercial kennel costs for accompanying *pets* if *you* are *hospitalized* during *your trip*.

Conditions

1) This Optional Coverage can be purchased as an endorsement to a Travel Emergency Medical Insurance Plan.
2) Coverage is subject to the terms and conditions specified in section entitled Travel Emergency Medical Insurance.
3) Coverage is not subject to the *deductible* as specified in the section entitled Travel Emergency Medical Insurance.

General Exclusions

In addition to the exclusions specified in each insurance coverage, the *company* will not be liable to provide coverage or services, or to pay claims for expenses, regardless of if there are other contributing factors that are not otherwise excluded, that are, or could be, caused by, contributed to or arising out of, directly or indirectly, or in connection with:

1) **a) Applicable to all policies other than Trip Cancellation & Interruption**
   Losses occurring while *you* are in any country or region (including any connections, layovers, or transit locations that *you* travel to or through) where *Acts of War* or *Acts of Terrorism* are occurring or anticipated or imminent.

   b) Applicable to Policies with Trip Cancellation & Interruption

   Losses due to *Acts of War* or *Acts of Terrorism* unless a formal travel advisory has been issued by the Government of Canada after the booking date of the *trip* or the date the insurance was purchased, whichever is later.

2) Death, disablement, medical condition/disease or *injury* in any way caused by or contributed by radioactive contamination or by the utilization of nuclear, chemical or biological weapons (whether or not caused by *acts of war* or *acts of terrorism*).

3) Expenses incurred as a result of *your* failure to accept or follow a *physician*'s advice, treatment or recommended treatment.

4) *Sickness*, *injury*, or death that could reasonably be caused by or contributed to by *your*:

   a) Abuse or misuse of alcohol, drugs, prescription drugs, over the counter medication or any other intoxicants, either before or during *your trip*; or,
   b) Consumption or use of illegal drugs (based on the law where the cause of the claim occurred); or,
   c) Operation or use of any *vehicle* (including but not limited to motor *vehicles*, bicycles, e-bikes, e-scooters, or similar modes of transport) while under the influence of alcohol or drugs. Alcohol influence is determined either when records indicate blood alcohol concentration (BAC) equal to or greater than 80 milligrams of alcohol per 100 milliliters of blood (0.08%); or, where no BAC is recorded, when medical, police, or incident reports indicate signs of intoxication or impairment.

5) *Sickness* or *injury* as a result of scuba diving unless *you* are certified by an internationally recognized and accepted program (including but not limited to NAUI, PADI).

6) *Sickness* or *injury* as a result of participating in, training or practicing for any sport as a *professional athlete*.

7) *Sickness* or *injury* as a result of participating in any *motorized speed contests*.

8) Any medical condition or recognized complication of a condition, where the purpose of *your trip* is to seek *medical treatment*, advice or services, and where the medical evidence indicates the *medical treatment*, advice or services received are related to that condition.

9) a) Routine pre-natal care;
   b) Voluntary termination of pregnancy or resulting complications;
   c) Complications related to pregnancy within the nine weeks immediately before or after and including the expected date of delivery;
   d) Complications related to childbirth within the nine weeks immediately before or after and including the expected date of delivery;
   e) Childbirth within the nine weeks immediately before or after and including the expected date of delivery; and
   f) *treatment* incurred by a newborn child during *your trip*, except as specified under the Unexpected Birth of a Child benefit.

10) *Your* suicide or attempt thereat or self-inflicted *injury*.

11) *Your* commission or attempted commission of any crime or offence, based on the law where the cause of the claim occurred.

12) Ongoing care, rehabilitation or check-ups.

13) *Elective (non-emergency)* treatment or surgery.

14) Unless otherwise stated in this Policy (see General Conditions and Provisions, #2), expenses incurred if other insurance policies, plans or contracts cover the loss. This includes, but is not limited to, any private or provincial automobile insurance plan or any provincial or territorial government health care plan. If, however, the loss exceeds the limits of the other policies, plans or contracts and if this insurance covers losses and periods not covered by those other policies, plans or contracts, this insurance shall then apply in excess of all other valid insurance. This exclusion does not apply to Travel Accident Coverage and Baggage Coverage.

General Conditions and Provisions

1) **Qualification, Misrepresentation and Fraud**
   a) The coverage under this Policy shall be void if *you* do not meet the eligibility requirements for the Plan selected as set out in the application/declaration. The eligibility requirements are material to the risk for which insurance is sought. In addition, the coverage under this Policy shall be void if, before or after any loss or claim, *you* or *your* representative conceal, misrepresent or fail to disclose any material fact or commit any fraud or false swearing pertaining to *you* or any claim.
   b) Health Questionnaire – Applicable to *insureds* 60 and over - If *you* qualify for the coverage selected but *you* or a representative purchasing insurance on *your* behalf have failed to answer truthfully and accurately any question asked in the Health Questionnaire, any claim will be subject to an extra *deductible* of $10,000 in addition to any other applicable *deductible* amount, and no future coverage will be provided under this Policy unless *you* pay the additional premium reflecting true and accurate answers to those questions.

2) **Coordination of Benefits** — If, at the time of loss, *you* have insurance from another source, or if any other party is responsible for benefits also provided under this Policy, the *company* will pay eligible expenses only in excess of those covered by that other insurer or other responsible party, including credit cards, private or provincial auto plans or any other insurance, whether collectable or not. If, however, that other insurance is also "excess only", the *company* will co-ordinate payment of all eligible claims with that other insurer. All co-ordination follows guidelines set by the Canadian Life and Health Insurance Association. In no case will the *company* seek to recover against employment related plans if the lifetime maximum for all in-country and out-of-country benefits is $100,000 or less. If *your* lifetime maximum is greater than $100,000, the *company* will co-ordinate benefits only above this amount.

3) **Subrogation** – If compensation is or will be available from a third party for any payments made by the *company* under this Policy, the *company* has the right to subrogate to recover those payments. The *company*, at its own expense, can file a suit in *your* name for that purpose and *you* authorize the *company* to do so. This right of subrogation is in addition to and does not limit any other right of subrogation existing under common law, equity or statute. Further, if *you* make any claim against a third party related to payments made by the *company* under this Policy, *you* will include the amount of those payments in *your* claim against the third party. If *you* obtain compensation for a portion or all of the included payments made by the *company*, *you* must immediately remit that compensation to the *company*. *You* understand that *you* shall do nothing to prejudice the *company*'s rights of subrogation, which includes not releasing third parties from liability without the express written agreement of the *company*.

4) **Misstatement of Age** – If *your* age has been misstated to the *company*, the coverage and/or premium may be adjusted in accordance with the correct age as of the date *you* applied for coverage to become effective. Any premium adjustment is payable upon receipt of a premium notice.

5) **Due Diligence** – *You* must act at all times so as to minimize the costs to the *company*.

6) **Currency** – Any dollar amount expressed in this Policy is deemed to be in Canadian currency, unless otherwise stated.

7) **Duplication of Coverage** – If any benefit or coverage is duplicated or is also a benefit or covered under this Policy or any other insurance coverage, Policy, Plan or Optional Coverage provided by *us*, then the maximum amount *we* shall pay under all such coverages is the largest amount specified under any one such coverage. The total amount paid by *BCAA* shall not exceed the actual expenses incurred by *you*. This provision does not apply to Baggage Coverage and Trip Cancellation & Interruption Coverage.

8) In the case of duplicate benefits in this Policy, claims are payable under the one benefit with the greatest benefit limit.

9) The date and time of commencement and termination of coverage is based on the time zone of the province the Policy was purchased in.

10) The availability, quality, results or effects of any *medical treatment*, assistance, *hospitalization*, transportation or *your* failure to obtain any of the above, is not the responsibility of the *company*, ***BCAA Claims Assistance*** or any company or agency providing services on their behalf.

11) The *company* reserves the right to accept or to decline any person as an *insured*.

12) ***BCAA Claims Assistance*** has been appointed by the *company* to be the sole provider of all assistance and claims processing services.

13) In the event of *medical treatment* or other circumstances that have led or may lead to a claim under this Policy, *you* authorize any *hospital*, *physician* or other person or organization that has records or knowledge of *your* health, medical history or other information relevant to the claim to provide that information to the *company* or ***BCAA Claims Assistance*** and authorize the *company* and ***BCAA Claims Assistance*** to use and disclose that information for the purpose of determining whether any claim that may be made is covered by this Policy or by another Plan or Policy.

14) If requested by the *company* or *BCAA* or ***BCAA Claims Assistance***, *you* must consent to and furnish the release of *your* medical records for the relevant period prior to the effective date of the Policy and/or during the term of the insurance required in order to determine if the claim is payable. Failure to produce these records will invalidate *your* claim.

15) In the event of a claim, upon request, *you* will establish the date and time of departure and initially planned date of return of the *trip*.

16) *You* shall be responsible for the verification of any *hospital* and medical expenses incurred and shall upon request obtain and provide to ***BCAA Claims Assistance*** itemized accounts of all *hospital* and medical services which have been provided to *you*.

17) When expenses are reimbursable hereunder, the eligible medical expenses shall be paid by the *company* within 30 days after ***BCAA Claims Assistance*** has received satisfactory proof of claim.

18) The *company* shall not reimburse any expense incurred after a period of 365 days has elapsed following the date on which the loss first occurred, or the relevant *emergency* first occurred.

19) During an *emergency* in which *you* are *hospitalized*, with *your* consent, the *company* may transfer *you* to one of the *company*'s preferred *hospitals*.

20) The *company*, *BCAA* and ***BCAA Claims Assistance*** shall comply with all applicable privacy legislation and regulations.

21) If any of the terms or conditions of this Policy are in conflict with the statutes of the province or territory in which this Policy is issued, the terms and conditions are hereby amended to conform to such statutes.

22) In the event of complaints or unresolved disputes respecting any claim or portion thereof, the following should be contacted: BCAA, 4567 Canada Way, Burnaby, BC, Canada, V5G 4T1.

23) The law of the province or territory of Canada in which *you* ordinarily reside, or in which *you* are staying while a visitor to Canada, will govern this Policy, including all issues of its interpretation and performance. Any legal action or other proceeding related to or connected with this Policy that is commenced by *you* or anyone claiming on *your* behalf or by an assignee of benefits under this Policy must take place in the courts of the province or territory of Canada in which *you* ordinarily reside or in which *you* purchased this Policy, and no other court has jurisdiction to hear or determine any such action or proceeding.

24) This insurance provides no coverage and no *insurer* shall be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such coverage, payment of such claim or provision of such benefit would expose that *insurer* to any sanctions, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom or United States of America.

25) If *you* are a US citizen or US resident, *you* may have an obligation to purchase insurance under the Affordable Care Act ("ACA"). This Policy is not subject to the ACA and is not intended to fulfill individual obligations to purchase health insurance coverage under the ACA. Please contact *your* tax adviser or lawyer if *you* think the ACA obligations may apply to *you*.

26) The *company* shall not reimburse any interest charged accrued by *you*.

27) When a premium is not paid, the *company* reserves the right to terminate the Policy with notice, except as otherwise provided by law.

28) **Legal Proceedings** – Service of legal proceedings to enforce the obligations under this Policy of the *insurer* listed in the definition of *company* may be validly made by serving the offices of BCAA, 4567 Canada Way, Burnaby, BC, V5G 4T1, Canada.

29) **Notice to *Company*** – Notice under this Policy to the *insurer* listed in the definition of *company* may be validly given to BCAA, 4567 Canada Way, Burnaby, BC, V5G 4T1, Canada. Complaints or unresolved disputes should be referred to BCAA, 4567 Canada Way, Burnaby, BC, V5G 4T1, Canada.

Authorized Extensions to Period of Coverage

You can extend *your* period of coverage before *your* Policy expires by calling *your* agent or BCAA during regular BC business hours. Please refer to Contact Information on **page 6**.

You must meet the following conditions:

Applicable to all coverages except the Trip Protection Package

1) *You* have not submitted a claim and have no intent to submit a claim.
2) *Your* period of coverage has not already expired.
3) *Your* total *trip* length does not exceed two years from the effective date of the original Policy.

Applicable to Travel Emergency Medical Insurance and Visitors to Canada Travel Emergency Medical Insurance

1) *You* have not seen a *physician* or other registered medical practitioner since *your departure date* or the effective date of *your* Policy.
2) *You* are in good health, and *you* do not know of any reason to seek medical attention.

If these conditions haven't been met, an extension may be authorized at the discretion of BCAA. If an extension has been authorized, there would be no coverage for subsequent claims, regardless of if there are other contributing factors that are not otherwise excluded, that are, or could be, caused by, contributed to or arising out of, directly or indirectly, or in connection with the condition(s) or symptom(s) for which a claim has been or will be submitted or for which *medical treatment* was received or required prior to the effective date of the extension.

Automatic Annual Multi-trip Renewal Option

This option is only available for insureds 58 years and under. If you choose the monthly payment option, your Policy will automatically renew on your Annual Multi-trip Policy renewal date provided valid banking information is on file and the premium is accepted. A Policy will be issued to you for one year. Before the renewal date of the Policy, you will be notified of the details pertaining to your new Annual Multi-trip Policy. If you do not wish to have a new Annual Multi-trip Plan automatically issued, please contact 1.888.268.BCAA (2222).

Definitions

Acts of terrorism means an act, or acts, of any person, or group(s), committed for political, religious, ideological, ethnic or similar purposes with the intention to influence any government and/or, but not be limited to, the use of force or violence and/or the threat thereof. Furthermore, the perpetrators of *acts of terrorism* can either be acting alone, or on behalf of, or in connection with any organization(s) or government(s).

Acts of war means war, civil war, riot, rebellion, insurrection, revolution, invasion, hostilities (whether between nations or within a nation) or warlike operations (regardless of whether war has been officially declared), civil commotion, overthrow of the legally constituted government, military or usurped power, and explosions caused by war weapons.

Acute means the initial or *emergency* short course (not chronic) treatment phase of a sudden and unexpected *sickness* or *injury*.

Aggregate limit means the maximum amount of coverage available, regardless of the number of separate claims.

Alteration means the medication usage, dosage or type has been increased, decreased or stopped and/or a new medication has been prescribed.

Alteration does not include:

a) Changes in brand due solely to the availability of the usual brand or due to a change from a brand name medication to an equivalent generic brand medication of the same usage or dosage; or,
b) Routine dosage adjustments within prescribed parameters for insulin or oral diabetes medication to ensure correct blood levels are maintained; blood sugar levels must be checked regularly, and the condition must remain unchanged; or,
c) Routine dosage adjustments within prescribed parameters for blood thinner medication to ensure correct blood levels are maintained; blood levels must be checked regularly, and the condition must remain unchanged; or,
d) Usage changes due to the combination of several medications into one; the condition must remain unchanged.

Application date means the date when premium for this insurance is paid.

BCAA has the same definition as *Company*.

BCAA Claims Assistance means Global Excel Management Inc.

Beneficiary means estate unless otherwise requested in writing.

Business meeting means a meeting between companies with unrelated ownership that pertains to *your* full-time occupation or profession and is the primary purpose of *your trip*. The meeting must be pre-arranged prior to the date the *trip* was booked or the date this insurance was purchased, whichever occurs later.

Courses and legal proceedings are not business meetings.

Canadian resident means a person who is eligible for or has a provincial or territorial government health care plan in place and:

a) Is a Canadian citizen with a primary permanent residence in Canada; or,
b) Has landed immigrant status in Canada and a primary permanent residence in Canada; or,
c) Has a permit to study or work in Canada.

Caregiver means a person entrusted with the care and guidance of *your dependent(s)* on a permanent, full-time basis and whose absence cannot reasonably be replaced.

Common carrier means a boat, cruise ship, airplane, bus, taxi, train or other similar vehicle that is licensed, intended and used primarily to transport passengers for hire.

Company means BCAA Insurance Corporation.

Deductible means the portion of eligible expenses *you* must pay from *your* own pocket when an eligible claim occurs. For all medical insurance plans (except Visitors to Canada Plan), the deductible applies to the expenses remaining after payment by *your* government health care plan. The deductible applies per *insured*, per condition or event.

Departure date means the date *you* leave *your departure point* to begin *your trip*.

Departure point means the place *you* depart from on the first day of *your trip*.

Dependent children means all unmarried children who are between 30 days and 21 years of age (inclusive), residing in *your* household, or between 30 days and 25 years (inclusive) if the child is a full-time student attending an educational institution, or at least 30 days up to any year of age if the child has a cognitive, developmental or physical disability that prevents them from living independently and makes them fully dependent on a parent or legal guardian for support. Children named in the application/declaration need not be travelling with *you* for coverage to apply to them.

Diagnostic tests mean tests to:

a) Assess, identify or investigate a symptom or a condition; or,
b) Follow up on abnormal test results; or,
c) Monitor the effectiveness or response to an initial course of treatment or to a new type of treatment.

Elective (non-emergency) treatment or **surgery** means any *medical treatment*, test, investigations or surgery:

a) not required for the immediate relief of *acute* pain and suffering; which, if not rendered,
a) would not result in *you* being in continued danger; or,
b) which reasonably could be delayed until *you* return to Canada or *your* country of permanent residence; or,
b)
c) which *you* elect to have provided during the insured *trip* following *emergency medical treatment* of a medical condition or the diagnosis of a medical condition which, on medical evidence, would not prevent *you* from returning to *your home province* or *your* country of permanent residence prior to such treatment or surgery.

Emergency means an unforeseen *sickness* or *injury* that happens during *your* covered *trip*, which requires immediate *medical treatment* to alleviate danger to *your* life or health. The *emergency* no longer exists when:

- No further immediate e*mergency medical treatment* is required at destination; or,
- *You* are able to return to *your home province* or country of permanent residence; or,
- *You* are able to continue *your trip;* or,
- When based on the available medical evidence, the *company's* medical advisor deems the *emergency* is over.

Follow-up means the re-examination of *you* to monitor the effects of earlier *medical treatment* related to the initial *emergency*, except while *hospitalized*. Follow-up does not include continuous or ongoing treatment or further diagnostic or investigative testing related to the initial *emergency*.

Grandchildren means all unmarried grandchildren who are dependent on their parents or grandparents up to and including 21 years, residing in their parents' household or grandparents' household, or up to 25 years if the child is a full-time student attending an educational institution, or of any age if the child has a cognitive, developmental or physical disability. Grandchildren must be travelling with *you* for coverage to apply to them.

Home province means *your* province or territory of ordinary residence in Canada.

Hospital means a legally constituted medical facility under the medical supervision of a *physician*, with either permanent facilities on the premises for surgery or a formal arrangement with another institution making such facilities available and providing 24-hour nursing services. The term hospital does not include health spa or rehabilitation centre; convalescent, rest or skilled nursing facilities operated exclusively for geriatric care or for addiction treatment.

Hospitalization or **hospitalized** means the formal admission to in-patient services of a *hospital*. This does not include visits to the emergency room unless they result in the formal admission to the in-patient services of a *hospital*.

Immediate family or **family member** means (whether by birth, adoption or marriage) *your* legal or common-law *spouse*, parents, stepparents, brothers, sisters, fathers-in-law, mothers-in-law, brothers-in-law, sisters-in-law, sons-in-law, daughters-in-law, natural or adopted children, stepchildren, stepbrothers or stepsisters, grandparents, *grandchildren*, aunts, uncles, nieces, nephews, cousins, or any individual of whom *you* are a legal guardian.

Injury means physical *injury* to *you* caused by violent external and accidental means which occurred after coverage commenced, requiring *emergency medical treatment*.

Insured means a person who is at least 30 days of age (and 59 years and under if more than one *insured* on Policy) named in the application/declaration, and for whom the applicable premiums have been paid.

Insurer means the same as *company*.

Loss For Travel Accident Coverage means in respect of limbs means actual severance through or above wrist or ankle joints and, in respect of loss of sight, means entire and irrecoverable loss of sight.

Medical treatment means any reasonable medical, therapeutic or diagnostic measure prescribed by a *physician*, other registered medical practitioner or dentist in any form including prescribed medication, reasonable investigative testing, *hospitalization*, surgery or other prescribed or recommended treatment directly referable to the condition, symptom or problem including referral to a specialist. *Medical treatment* does not include either: a) the unchanged use of prescribed drugs or medication for a *stable* condition, symptom or problem; or b) a check-up where the *physician* observes no change in a previously noted condition, symptom or problem.

Medically necessary means the medical service or product in question is necessary to preserve, protect or improve *your* medical condition and well-being.

Minor ailment means a condition that does not require:

a) Treatment for a period of greater than 30 consecutive days; or,
b) More than one *follow-up* visit, or referral visit to a *physician* or other registered medical practitioner; or,
c) *Hospitalization* or surgical intervention.

Motorized speed contest means a timed sporting event involving the use of motorized vehicles.

Palliative Care means medical care, treatment, or support services provided to *you* to relieve pain, manage *your* symptoms, and improve the quality of life for *your* serious, incurable chronic, or *terminal condition*. It is not intended to cure the underlying condition but to provide *you* with comfort and support.

Passport application means a completed and approved application for which Passport Canada does not require submission of further information before issuing the passport.

Pet means dog, cat, bird, small reptile or small mammal.

Physician means a medical practitioner who is registered and licensed to practice their medical profession in accordance with the regulations applying in the jurisdiction where the person practices. A physician must be a person other than *you* or a *family member*.

Pre-existing condition
For Travel Emergency Medical Insurance and Visitors to Canada Travel Emergency Medical Insurance: means a medical or dental condition, illness or injury known to *you* for which *you* have received medical consultation, diagnosis and/or *medical treatment* and includes a medically recognized complication or *recurrence* of a medical condition or dental condition.

For Trip Cancellation & Interruption Coverage: means a medical or dental condition, illness or injury for which medical consultation, diagnosis, and/or *medical treatment* has been received and includes a medically recognized complication or *recurrence* of a medical condition or dental condition.

Professional athlete means a person who earns the majority of their income from this sporting activity.

Recurrence means the appearance of symptoms caused by or related to a medical condition that was previously diagnosed by a *physician* or for which *medical treatment* was previously received.

Renewal date means the date one year from the effective date of the Policy.

Return date means the date on which *you* are scheduled to return from *your trip* as shown on *your* application/declaration or the date of *your* actual return to *your departure point*.

Sickness
For Travel Emergency Medical Insurance and Visitors to Canada Travel Emergency Medical Insurance means an *acute* illness requiring immediate *emergency medical treatment* or dental treatment as a result of a sudden onset of symptoms which first manifested after coverage commenced. For Travel Emergency Medical Insurance coverage authorized after departure and for Visitors to Canada Travel Emergency Medical Insurance coverage, refer to the *waiting period* requirements.

For Trip Cancellation & Interruption Coverage means an *acute* illness requiring immediate *emergency medical treatment* or dental treatment as a result of a sudden onset of symptoms.

Spouse means the person *you* are legally married to, or a person *you* cohabitated with for a minimum period of one year and who is publicly presented as *your* spouse.

Stable
For Travel Emergency Medical Insurance and Visitors to Canada Travel Emergency Medical Insurance means that within the period specified in this Policy:

a) There has been no deterioration of *your* condition as determined by *your physician*, and
b) There have been no new symptoms or findings or more frequent or severe symptoms or findings, and

c) There has been no change in *medical treatment* or no *alteration* in any medication for the condition, and
d) There has been no new *medical treatment* prescribed or recommended by a *physician* or received.

For Trip Cancellation & Interruption Coverage means that within the period specified in this Policy:

a) There has been no deterioration of the condition as determined by a *physician*, and
b) There have been no new symptoms or findings or more frequent or severe symptoms or findings, and
c) There has been no change in *medical treatment* or no *alteration* in any medication for the condition, and
d) There has been no new *medical treatment* prescribed or recommended by a *physician* or received.

Terminal condition means a medical condition or *injury*:

a) for which a *physician* has told *you* that *you* have a life expectancy of 12 months or less; or,
b) which normally carries a life expectancy of 12 months or less in the event that the life expectancy prognosis has not been specifically assessed or communicated in relation to *you*;

where that life expectancy is measured as of the later of:

- the *application date; or,*
- the *effective date* of the Policy; or,
- the *departure date*; or,
- the arrival date in Canada (applicable to Visitors to Canada).

Travel costs means non-refundable unused prepaid travel arrangements for: hotels, hostels, timeshares, campgrounds and commercial vacation rentals that are booked through a rental agency with a published cancellation process; airfares, car rentals, boat rentals, RV rentals; bus, train, ferry and cruise tickets; conference, seminar, workshop, convention, symposium and training fees; theatre and concert tickets, entrance fees, sports tickets and passes (intended for a participant or a spectator); tours, retreats, excursions, city passes and ski passes.

Travelling companion means a person who has prepaid shared commercial accommodation or transportation with *you* for the same period of travel.

Trip means the period of time *you* are travelling and for which coverage under this Policy has been purchased.

Vehicle means a car, recreational vehicle, motorcycle, boat or other land or water conveyance used for the covered *trip*.

Waiting period

For Travel Emergency Medical Insurance means:

a) If this Policy was purchased within the seven days after departing from *your home province*, there is no coverage for any *sickness* arising in, occurring in or symptomatic in the first 48 hours from the effective date of the Policy, including any related expenses incurred after the first 48 hours from the effective date of the Policy; or,
b) If this Policy was purchased more than seven days after departing from *your home province*, there is no coverage for any *sickness* arising in, occurring in or symptomatic in the first seven days from the effective date of this Policy, including any related expenses incurred after the first seven days from the effective date of the Policy.

For Visitors to Canada Travel Emergency Medical Insurance means:

a) For Insurance purchased within 60 days after arrival in Canada:
There is no coverage for any *sickness* arising in, occurring in or symptomatic in the first 48 hours from the effective date of the Policy.
This includes any related expenses incurred after the first 48 hours from the effective date of the Policy.
b) For insurance purchased 61 days or more after arrival in Canada:
There is no coverage for any *sickness* arising in, occurring in or symptomatic in the first seven days from the effective date of the Policy.
This includes any related expenses incurred after the first seven days from the effective date of the Policy.
The *waiting period* is not applicable when insurance is purchased prior to arrival in Canada.

You or **your** means any *insured* named in the application/declaration.

Statutory Conditions

The Contract

The application, this Policy, any document attached to this Policy when issued and any amendment to the contract agreed on in writing after this Policy is issued constitute the entire contract and no agent has authority to change the contract or waive any of its provisions.

Material Facts

No statement made by the insured or a person insured at the time of application for the contract may be used in defence of a claim under or to avoid the contract unless it is contained in the application or any other written statements or answers furnished as evidence of insurability.

Termination of insurance

1) The contract may be terminated

    a) by the insurer giving to the insured 15 days' notice of termination by registered mail or 5 days' written notice of termination personally delivered, or
    b) by the insured at any time on request.

2) If the contract is terminated by the insurer,

    a) the insurer must refund the excess of premium actually paid by the insured over the prorated premium for the expired time, but in no event may the prorated premium for the expired time be less than any minimum retained premium specified in the contract, and
    b) the refund must accompany the notice.

3) If the contract is terminated by the insured, the insurer must refund as soon as practicable the excess of premium actually paid by the insured over the short rate premium calculated to the date of receipt of the notice according to the table in use by the insurer at the time of termination.

4) The 15-day period referred to in subparagraph (1) (a) of this condition starts to run on the day the registered letter or notification of it is delivered to the insured's postal address.

Notice and Proof of Claim

Notice of a claim shall be given in accordance with the claims procedures clause included in this Policy as soon as practical but in no case later than 30 days from the date a claim arises under this Policy. You must also within 90 days from the date the claim arises under this Policy furnish such proof and additional information as is reasonably possible and if required by the company, furnish a certificate from a physician detailing the cause or nature of the sickness or injury for which the claim has been instituted.

Failure to Give Notice or Proof

Failure to give notice of claim or furnish proof of claim within the time required by this notice and proof of claim condition does not invalidate the claim if (a) the notice or proof is given or furnished as soon as reasonably possible, and in no event later than one year after the date of the accident or the date a claim arises under the contract on account of sickness or disability, and it is shown that it was not reasonably possible to give the notice or furnish the proof in the time required by this condition, or (b) in the case of death of the person insured, if a declaration of presumption of death is necessary, the notice or proof is given or furnished no later than one year from the date a court makes the declaration.

Insurer to Furnish Forms for Proof of Claim

The insurer must furnish forms for proof of claim within 15 days after receiving notice of claim, but if the claimant has not received the forms within that time the claimant may submit his or her proof of claim in the form of a written statement of the cause or nature of the accident, sickness or disability giving rise to the claim and of the extent of the loss.

Rights of examination

As a condition precedent to recovery of insurance money under the contract,

a) the claimant must give the *insurer* an opportunity to examine the person of the person *insured* when and as often as it reasonably requires while a claim is pending, and
b) in the case of death of the person *insured*, the *insurer* may require an autopsy, subject to any law of the applicable jurisdiction relating to autopsies.

When Moneys Payable Other Than For Loss of Time

All money payable under the contract shall be paid by the *insurer* within sixty days after it has received proof of claim.

Other Conditions

Waiver

The insurer is deemed not to have waived any condition of this contract, either in whole or in part, unless the waiver is clearly expressed in writing signed by the insurer.

In consideration of the insured having paid or agreed to pay the insurer the required premium, the insurer agrees for the Sum(s) Insured or Percentage(s) and for the Coverage(s) Insured, and subject always to the terms and conditions of the Policy, that if a loss occurs for which insurance is provided by this Policy at any time while it is in force, it will indemnify the insured against the loss so caused; the liability of the insurer for such loss being limited to that proportion of the loss payable according to the terms and conditions of this Policy which the Sum Insured or the amount corresponding to the Percentages of the sums insured set out against the coverage concerned on the Policy Declaration.

This Policy is made and accepted subject to the foregoing provisions, and to the other provisions, stipulations and conditions contained herein, which are hereby specially referred to and made part of this Policy, as well as such other provisions, agreements or conditions as may be endorsed hereon or added hereto.

Notice of limitation

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.

Code of Consumer Rights & Responsibilities

Insurance companies are committed to protecting *your* rights. These include the right to be informed fully, to be treated with respect, to timely claims handling and complaint resolution, and to privacy.

Insurance is a two-way contract, and you have a role to play. You are responsible for understanding your needs, asking questions and providing accurate, up-to-date information to your insurer. For more information about your role, speak to your insurance representative and read your Policy.

Right to Be Informed

You have the right to an easy-to-understand explanation of how insurance works and how insurers calculate price based on relevant facts. You can expect to access clear information about your Policy, your coverage and the claims settlement process. Under normal circumstances, insurers will advise an insurance customer of changes to, or the cancellation of, a Policy at least 30 days prior to the expiration of the policy. Your insurer is required to provide you with the renewal terms of your Policy at least 30 days prior to the expiration of the Policy.

You have the right to know how your broker or agent is compensated, and if they have any conflicts of interest.

Right to Timely and Transparent Claims Handling

You can expect qualified staff to respond to your claim in a timely manner. You have the right to be informed of procedures and timelines for settling your claim, as well as the status of your claim. If your claim is denied, you have the right to be informed why.

Right to Complaint Resolution

You can access your company's complaint resolution process. Your insurer, agent or broker can provide you with information about how you can ensure that your complaint is heard and promptly handled. You may also contact your provincial insurance regulator or the independent General Insurance Ombud Service (www.giocanada.org).

Right to Privacy

You have the right to understand how your personal information will be used. All insurers have privacy statements and are subject to Canada's privacy laws. Ask your insurer to provide you with a copy of its privacy statement.

Responsibility to Understand Your Needs

You are responsible for asking questions and educating yourself about your Policy. Visit www.ibc.ca for information about questions you should ask your insurance provider. Make sure you ask all relevant questions and give your insurance provider a detailed explanation of your circumstances to help him or her make informed recommendations on what your Policy should include. This will ensure that you have the right insurance coverage.

You are responsible for making premium payments as required by your insurer. Failure to do so could result in a lapse of coverage or cancellation of your Policy.

Responsibility to Provide Accurate Information

You are required to provide all relevant information in your application for insurance, and you must ensure that the information is accurate. If you have questions about the application or Policy, contact your insurance representative and have him or her explain it to you to ensure that you understand your and the insurer's obligations.

Responsibility to Update Your Information

To maintain your protection against loss, you must promptly inform your insurance company, broker or agent of any change in your circumstances.

Responsibility to Report the Facts

You must report an accident or claim, providing complete and accurate details, as soon as possible following the accident or incident giving rise to the claim.

Privacy Notice

The protection of your personal information is very important to us. BCAA is committed to the protection of your personal information. BCAA fully complies with Canada's privacy laws. BCAA's Privacy Policy determines our responsibilities on the collection and use of your personal information. You can review BCAA's entire Privacy Policy at BCAA.com.

Personal information is gathered at the time of application to determine the premium and appropriate coverage. We may obtain personal information, such as, information about your identity or information from a variety of other sources, such as, health care providers. In the event of a claim, we may need to collect additional medical information to help provide the best possible assistance, arrange care, possible medical evacuation, and to determine coverage. This information may be obtained or shared with your agent, any affiliate or subsidiary, referring organization and third-party provider including but not limited to health care providers and government health insurers. The information is used by authorized personnel only as needed and is maintained securely for the period required by law. We use your personal information to issue and maintain insurance products, determine eligibility for insurance products, verify your identity, manage and coordinate claims, communicate with you or other purposes as required by law. Your information may need to be shared with or by organizations located outside of Canada, such as the country you are travelling to and will be also subject to the laws of those foreign jurisdictions.

For the purposes identified, personal information may be disclosed to a third party. We may also disclose your personal information without consent to conduct investigations, detect fraud, investigate a breach of an agreement or contravention of the laws of Canada or foreign jurisdiction, or otherwise, as allowed by law. In the event we share your personal information with service providers outside of Canada, that information may be governed by the applicable laws in the jurisdiction. We may also share your personal information with other BCAA companies to promote our insurance products and services. You may choose not to have certain information shared and we will respect your choices. We encourage you to review BCAA's Privacy Policy occasionally as it could be amended.

Upon written request, you may also review your personal information to verify its accuracy. For more information about how BCAA collects and uses personal information and about our privacy policies or to make an access request, contact our privacy officer: BCAA, Attn: Privacy Officer, 4567 Canada Way, Burnaby, BC Canada V5G 4T1.

How to Claim

Claims procedures and payment of benefits are outlined below. For information on how to contact *BCAA Claims Assistance*, please refer to Contact Information section at the beginning of this policy wording booklet.

Applicable to all Claims

1) Any notices of claim or correspondence concerning a claim should be promptly sent to:

   By Mail:
   BCAA Claims Assistance
   c/o Global Excel Management Inc.
   PO Box 308, Station A
   Windsor, ON, N9A 6K7

   Or by Email:
   bcaaclaims@globalexcel.com

2) Claims for medical, dental and trip cancellation & trip-interruption can be opened online at bcaa.com/travelclaims, although some restrictions apply.

3) Any cost incurred to obtain documentation required to confirm eligibility of *your* claim is the responsibility of the claimant.

4) Claim Forms will be provided to the claimant for completion and return to ***BCAA Claims Assistance***. It is the responsibility of the claimant to complete and/or produce any documentation required by ***BCAA Claims Assistance*** to enable them to process and confirm the eligibility of the claim.

5) All required documentation must be received within one year from the date of loss. Failure to do so will result in denial of the claim.

6) To qualify for reimbursement, original, itemized receipts must be provided as support for all eligible expenses. If original, itemized receipts are not provided, the expense will not be reimbursed.

7) To receive benefits, any requested supporting documentation must be submitted along with *your* notice of claim.

8) If the claim is as a result of a death, the following documents are required:

   a) A copy of the death certificate
   b) A copy of the Will or Power of Attorney
   c) A police report, if applicable

   The claims forms must be signed by the Executor of Estate or the person holding Power of Attorney as shown in b).

Applicable to Travel Emergency Medical Insurance

1) ***BCAA Claims Assistance*** will submit a claim for medical expenses to *your* provincial or territorial government health care plan offices provided that the claim form, as well as the appropriate Provincial Assignment Form are completed in full and forwarded together with original itemized receipts from *physicians* or *hospitals* along with medical certificate(s) from attending *physician*(s) within the time frame provided. The claim must be submitted to *your* provincial or territorial government health care plan offices by their submission deadline. If *you* fail to meet their deadline, *you* will be responsible for the provincial or territorial government health care plan portion.

2) Claims will not be considered unless the Claim Form is completed in full and signed by the claimant (or legally authorized representative). Failure to provide fully completed, original forms will invalidate *your* claim.

Applicable to Travel Emergency Medical Insurance and Visitors to Canada Travel Emergency Medical Insurance

Only bills from *physicians*, *hospitals* and other medical care provider(s) which are original, itemized, and which state *your* name, diagnosis, date(s) of service and type of treatment or service will be considered. Only original official pharmacy prescription receipts will be considered. For all other benefits, original itemized receipts are required.

Applicable to Trip Cancellation & Interruption Coverage

To receive benefits, the following documents must be submitted along with *your* notice of claim:

1) The original unused airline ticket and/or all additional travel tickets purchased to return home or to rejoin the tour.

2) Itemized travel agency dated invoices showing full payment, taxes and premiums paid for *your trip*.

3) A statement from the travel agency/airline/tour operator documenting refunds provided for cancelled or unused tickets and/or cancelled or unused land and sea services.

4) If the claim occurred prior to departure, a medical certificate completed by the *physician* at the place where the *sickness* or *injury* occurred stating the diagnosis, the date of onset of the condition, the dates and type of treatment, and the reason why travel was not possible.

5) If the claim occurred after departure, a medical certificate completed by the attending *physician* at the place where the *sickness* or *injury* occurred, stating the diagnosis, the date of onset of the condition, the dates and type of treatment, and the reason why it was necessary to interrupt the *trip*.

Applicable to Baggage Coverage

1) Lost, stolen or damaged baggage must be promptly reported (and claimed for where applicable) to the most appropriate local authority or party responsible for the care of the baggage. Local authorities or responsible parties include but are not limited to airline or any other carrier, hotel proprietors, steamship lines, railroad or station authorities, the police or any bailee in whose custody the property was at the time of loss, damage or theft.

2) If baggage is lost or stolen, proof of loss (copy of notice and/or Police Report) is necessary to substantiate claim.

3) If baggage is damaged, a written estimate to repair damaged luggage from a repair shop of *your* choice is necessary to substantiate claim.

4) If baggage is delayed, proof of delay is required and original itemized and dated receipts for personal necessities are necessary to substantiate claim.

International Assistance Services

The following services will be provided to all customers:

1) Toll-free help line 24 hours a day, every day (for medical emergencies only).
2) Vital communications link between claimant/hospital regarding insurance coverage and procedures.
3) Medical (physician and surgeon) consultative and advisory services including review of appropriateness and analysis of medical care.
4) Monitoring of progress during treatment and recovery.
5) Establishing contact with family, personal physician and/or employer as appropriate.
6) Multilingual capabilities.
7) Coordination of payments.
8) Special assistance respecting claims.
9) Management, arrangement and authorization of emergency medical evacuation.
10) Arrangement and coordination of repatriation of remains.
11) Interpretation of Policy wordings.
12) Assistance in locating the nearest and most appropriate medical care.
13) Payment to hospitals and other medical providers for emergency medical expenses will be guaranteed where possible relieving claimant of credit responsibilities.
14) Travel arrangements assistance for family members.
15) Provision of medical assistant to travel with claimant when necessary.
16) In addition to physicians, hospitals/administrators and ambulance, arrangements and communications are concluded on your behalf with:
    - Consulates
    - Travel Agents
    - Embassies
    - Tour Guides
    - Airlines
    - Police
    - Foreign Affairs Department
17) Legal referral services in order to meet the legal needs of travellers.

To access this service, please refer to Contact Information at the beginning of this Policy wording booklet.

Go to

bcaa.com

Call

1.888.268.BCAA (2222)

Visit

One of our many locations across BC

BCAA Travel Insurance

Travel Insurance is sold through B.C.A.A. Holdings Ltd. dba BCAA Insurance Agency, a licensed insurance agent, and is underwritten by BCAA Insurance Corporation. The insurance transaction is between the customer and BCAA Insurance Corporation. BCAA Insurance Corporation and B.C.A.A. Holdings Ltd. are both subsidiaries of British Columbia Automobile Association and B.C.A.A. Holdings Ltd. receives commission from BCAA Insurance Corporation for sales of Travel Insurance. Insurance claims are administered by Global Excel Management Inc.