

## **Emergency Out of Province Medical and Accidental Death and Dismemberment Coverage** **Policy No.: SRG 9429069**

### **Why You Need Emergency Out of Province Medical and Accidental Death and Dismemberment Coverage**

Each Canadian Province and Territory provides a Health Plan with comprehensive benefits for Hospital confinement, the service of medical Doctors and other health practitioners, ambulance services etc. In many cases, the benefits provided by these plans will pay all, or almost all, of the expenses you incur in your home province.

When you are outside your Province of residence and require these services, your Provincial Health Plan will usually make a payment towards your expenses but that payment is usually limited to the amount that would have been paid for the same services in the Province in which you reside. Unfortunately, there is often a tremendous difference between the cost of these services outside Province and the amounts allowed by your Health Plan, which you would have to pay were it not for this valuable benefit.

A serious accidental injury or death can also have tremendous consequences. A serious injury may prevent you from meeting your financial obligations and your loss of life may leave your spouse with insufficient financial resources to pay for the care that your loved ones may require. The policy provides a lump sum benefit to help ease the financial impact and assure your family's needs are met if you should suffer loss of life as a result of an accident. Your accident coverage also provides you with 'living benefits' should an accident leave you paralyzed or should you lose through severance or loss of use of a limb, sight, speech or hearing.

This Plan provides extensive coverage for many services rendered outside Province. It is important to note that such expenses are covered provided that they were unexpected and of an emergency nature. The Plan does not provide benefits for medical treatment if the purpose of your trip outside Province is to obtain that medical treatment.

### **How It Works**

You and your eligible dependents are automatically covered under this plan while travelling outside your province of residence, if you are an active member of **Suncrest** and under the age of 70 and you and your eligible dependents are covered under government hospitalization or medical plan in Canada.

Under the Accidental Death and Dismemberment insurance you are automatically covered for a Principal Sum amount of \$50,000 and your eligible dependents are automatically covered for a Principal Sum amount of \$50,000.

### **Here's What You Get**

**Broad Emergency Out of Province Medical Coverage** - Your plan provides extensive coverage for medical emergencies and accidental death and dismemberment benefit outside the Province in which you reside.

**Guaranteed Acceptance** - Coverage is provided regardless of your health history.

### **Beneficiary Designation**

You have the option to designate a beneficiary. Should you choose not to, in the event of accidental loss of life, the benefit will be paid to the beneficiary you have designated in writing under your employer's current group life policy. If there is no written designation then the benefit will be paid to your estate.

All other benefits will be payable to you.

### **Definitions**

**"Insured Member"** means you, if you are a permanent, active full-time member of the Policyholder who is under the age of 70.

### **Eligible Dependents:**

**"Spouse"** means a person who is under the age of 70 and who is either legally married to you, or if there is no such person, is a person who, although not legally married to you, is cohabitating with you for a period of at least one year and is publicly represented as your domestic partner in the community in which you reside.

**"Dependent Child"** means a person who is either your natural child, adopted child or step-child or a child to whom you are *in loco parentis* and who is (i) under 23 years of age, unmarried and dependent upon you for maintenance and support and not employed for more than 25 hours per week; or (ii) under 26 years of age, unmarried and enrolled in post-secondary education and dependent upon you for maintenance and support and not employed for more than 25 hours per week; or (iii) by reason of mental or physical infirmity is incapable of self-sustaining employment and who is considered your Dependent Child within the terms of the Income Tax Act (Canada).

**“Injury”** means bodily injury which is sustained as a direct result of an unintended and unanticipated accident, occurring anywhere in the world outside of your province of residence, that is external to the body and that occurs while your coverage under this Policy is in force, which causes a loss covered by this Policy.

**“Sickness”** means the onset of sickness or disease requiring medical treatment, care or advice while you or your eligible dependents are travelling anywhere in the world outside your province of residence which causes a loss covered by this Policy.

**“Emergency”** means medical treatment or surgery for an unforeseen Sickness or Injury which makes it necessary to receive immediate treatment from a Physician for the immediate relief of an acute symptom of which upon the advice of a Physician cannot be delayed until you or your eligible insured dependents return to your province of residence.

### **Period of Coverage**

You and your eligible dependents are covered under this plan while travelling outside your Province of residence, for a period not to exceed 180 days. Coverage can be extended to 365 days when travel is required to complete an eligible program or course of study, following confirmation from an academic supervisor.

### **Benefits and Coverages**

#### **Emergency Coverage for Hospital, Medical and Therapeutic Services**

If you or your eligible insured dependents suffer a Sickness or an Injury that results in Emergency Stay in a Hospital or Emergency medical or therapeutic services as specifically listed herein, the Company will pay benefits, for the period this contract is in force, not to exceed \$5,000,000 for the actual expenses you or your eligible insured dependents incurred outside your Province of residence that exceed the amount which is payable with respect to such expenses under any government hospitalization or medical plan in Canada.

#### **Emergency Hospital Confinement**

If you or your eligible insured dependents suffer a Sickness or an Injury which results in an Emergency confinement as a resident in-patient in a Hospital, including semi-private accommodation, for reasonable and customary charges made by the Hospital for services and supplies to the extent that such are medically necessary, the Company will pay benefits hereunder, subject to all limitations and conditions of your policy.

In the event you or your eligible insured dependents are confined to a Hospital at the end of your trip outside your province of residence and thus prevented from returning to your province of residence, insurance will continue for the period of such confinement, but in no event for more than 12 months from the date the first covered expense was incurred.

#### **Emergency Medical and Therapeutic Services:**

The Company will pay benefits hereunder in the event you or your eligible insured dependents require Emergency medical or therapeutic services to treat an Injury or Sickness to the extent that such are Medically Necessary. Benefits are payable to reimburse Reasonable and Customary expenses for:

- (a) the services of a Physician or legally qualified surgeon (other than an Immediate Family Member of the Insured Person),
- (b) laboratory tests and X-ray examinations (not including MRI) ordered by a Physician or legally qualified surgeon for the purpose of diagnosis,
- (c) MRI, for diagnostic purposes when Medically Necessary, to a maximum per Insured Person per Trip of \$7,500;
- (d) the services of a registered graduate nurse (other than an Immediate Family Member of the Insured Person), up to a maximum of 50 nursing shifts at a fee not to exceed \$100 per shift,
- (e) rental of crutches or a Hospital type bed, or the cost of splints, canes, slings, trusses, braces or other prosthetic appliances approved by the Company,
- (f) the services of a Physician who is an anaesthetist,
- (g) drugs or medicines that require a Physician or legally qualified surgeon's written prescription,
- (h) services of a chiropractor, osteopath, physiotherapist or podiatrist (other than an Immediate Family Member of the Insured Person) up to a maximum of \$300 for each class of practitioner,
- (i) expenses for accidental Injury to natural and sound teeth (capped or crowned teeth are considered whole or sound natural teeth) which require treatment by a legally qualified dentist or dental surgeon within 30 days from the date of the accident, not to exceed in the aggregate the amount of \$2,000 as the result of any one accident, and
- (j) out-patient services provided by a Hospital.

### **Repatriation Benefit**

Pays a benefit of up to \$15,000 to cover the expenses to return your body to your city of residence if you or your eligible insured dependents suffer a death while outside your province of residence.

### **Identification Benefit**

Pays a benefit of up to \$5,000 for the transportation of an immediate family member to identify your body if you or your eligible insured dependents suffer a covered death and a law enforcement agency requests such identification.

### **Automobile Return Benefit**

Pays a benefit of up to \$1,000 per occurrence to return your private or rental vehicle used for your trip, to your Province of residence or nearest rental agency if you or your eligible insured dependents become totally disabled due to a sickness or injury and you are unable to continue your trip.

### **Out-Of-Pocket Expense Benefit**

Pays a benefit of up to \$150 per day to a maximum of \$1,500 per occurrence for reasonable and necessary commercial living expenses incurred by you or your travel companion if you or your eligible insured dependents become totally disabled and cannot continue your trip.

### **Family Transportation Benefit**

Pays a benefit of up to \$15,000 per occurrence for the expenses incurred for the transportation of an immediate family member to your hospital if you or your eligible insured dependents are confined to a hospital, as well as incidental travel expenses up to a maximum of \$250.

### **Return Transportation for Travelling Companion**

If you or your eligible insured dependents are repatriated to your home province or territory in accordance with the Repatriation Benefit or the Ground and Air Transportation Benefit, then the Company will pay a benefit of up to \$2,000 for the transportation of one Travel Companion to his/her home province or territory on a one-way economy air fare of a commercial flight.

### **Return and Escort of Dependent Children Under Age**

If you or your eligible insured dependents are repatriated to your home province or territory in accordance with the Repatriation Benefit or the Ground and Air Transportation Benefit, then the Company will pay a benefit of up to \$5,000 for the transportation of your Dependent Children under age 16 to their home province or territory on a one-way economy air fare of a commercial flight, plus reasonable overnight hotel accommodation and meal expenses for the services of an attendant to escort your Dependent Children, if required.

### **Extended Coverage after Termination**

In the event of a delayed arrival of a common carrier or your stay in a Hospital, coverage will automatically be extended for you at no charge for (i) 24 hours in the event of a delayed common carrier, (ii) the period of the Medically Necessary stay in Hospital plus 24 hours after you are released from Hospital.

### **Emergency Transportation Benefit**

#### **Ground Transportation**

Pays up to \$5,000 per occurrence for the use of ground ambulance.

#### **Air Transportation**

Pays up to \$300,000 per occurrence if you or your eligible insured dependents medical condition requires air transportation to the nearest hospital or to return to your province of residence. This service must be coordinated and approved by Travel Assistance.

### **Trip Cancellation and Baggage Insurance**

Pays up to a maximum of \$5,000 for Trip Cancellation/Interruption resulting from an approved list of unexpected and unforeseen events. Pays up to a maximum of \$2,000 for the loss of, or damage to your Baggage and Personal Effects. Please see the Policy for details.

### **Emergency Out of Province Medical Exclusions and Limitations**

The Plan will not cover any losses caused in whole or in part from, or contributed to by, or as a natural and probable consequence of, any of the following:

- (a) Injury, Sickness or Loss sustained while you or your eligible dependents are on full-time active duty in the armed forces or organized reserve corps of any country or international authority;

- (a) Injury or Loss sustained while you or your eligible dependents are under the influence of alcohol and operating any vehicle or means of transportation or conveyance while your blood alcohol is over 80 milligrams in 100 millilitres of blood;
- (b) Injury or Loss sustained while you or your eligible dependents are under the influence of a drug or substance which is controlled as specified under the Controlled Drug and Substances Act (Canada) (even if such drug or substance is taken outside Canada) unless taken pursuant to the advice of and in strict accordance with the instructions of a Physician;
- (c) the abuse of medication or drugs or non-compliance with prescribed medical therapy or treatment whether prior to or during a Trip;
- (d) the commission or attempted commission by you or your eligible dependents of, or Injury incurred while you or your eligible dependents are in the course of committing or attempting to commit, any act which if adjudicated by a court would be an indictable offence under the laws of the jurisdiction where the act was committed;
- (e) pregnancy, miscarriage, voluntary termination of pregnancy, childbirth or their complications except that in the case of an unexpected pregnancy complication which occurs before the end of the 7<sup>th</sup> month;
- (f) Sickness or Injury where the Trip is undertaken for the purpose of securing medical treatment or advice for such Sickness or Injury;
- (g) Sickness or Injury due to participation in any professional sport;
- (h) suicide or any attempt at suicide while sane or insane;
- (i) intentionally self-inflicted Injury or any attempt at intentionally self-inflicted Injury, while sane or insane;
- (j) an act of declared or undeclared war, civil war, rebellion, revolution or insurrection;
- (k) treatment or services when reimbursement or coverage by the Company would contravene any GHIP in Canada;
- (l) expenses incurred on an elective (non-emergency) basis;
- (m) any treatment, investigation or surgery for a specific condition, or a related condition, which had caused a physician to advise you or your eligible dependents not to travel;
- (n) any services or supplies provided by you, your eligible dependents or a member of your Immediate Family;
- (o) a sickness or Injury that, at the time of departure, might reasonably be expected to require you or your eligible dependents to undergo treatment, investigation, surgery or hospitalization;
- (p) any service, treatment, surgery or stay in Hospital not required for the immediate relief of acute pain or suffering or which is not Medically Necessary;
- (q) any treatment or surgery which reasonably could be delayed until you or your eligible dependents return to your province or territory of residence;
- (r) anticipated medical treatments required on an ongoing basis or for continued stabilization of a medical condition known to you or your eligible dependents prior to departure from your province or territory of residence;
- (s) a medical condition that had deteriorated, or had to be treated or investigated in the 3 months immediately preceding your or your eligible dependent's departure from the province or territory of residence; and that portion, if any, of any expenses for treatment, advice or hospitalization which are not Reasonable and Customary.

### **Additional Accidental Death and Dismemberment Benefits**

#### **Accidental Death, Dismemberment, Paralysis and Loss of Use**

If a covered loss occurs within 365 days after the date of the covered accident causing the loss, the Plan will pay in one sum the indicated percentage of the Principal Sum as set out in the following Table of Losses:

#### **Table of Losses**

Loss of life.....	The Principal Sum
Loss of both hands or both feet .....	The Principal Sum
Loss of entire sight of both eyes .....	The Principal Sum
Loss of one hand and one foot .....	The Principal Sum
Loss of one hand and the entire sight of one eye .....	The Principal Sum
Loss of one foot and the entire sight of one eye .....	The Principal Sum
Loss of one arm or one leg .....	Four-fifths of the Principal Sum
Loss of one hand or one foot .....	Three-quarters of the Principal Sum
Loss of the entire sight of one eye .....	Three-quarters of the Principal Sum
Loss of thumb and index finger of the same hand .....	One-third of the Principal Sum
Loss of speech and hearing.....	The Principal Sum
Loss of speech or hearing .....	Three-quarters of the Principal Sum
Loss of hearing in one ear .....	Two-thirds of the Principal Sum
Loss of four fingers of one hand .....	One-third of the Principal Sum

Loss of all toes of one foot..... One-quarter of the Principal Sum

**Loss of Use**

Loss of use of both arms or both hands..... The Principal Sum

Loss of use of one hand or one foot ..... Three-quarters of the Principal Sum

Loss of use of one arm or one leg ..... Four-fifths of the Principal Sum

**Paralysis**

Quadriplegia (total paralysis of both upper and lower limbs) .....

Two times The Principal Sum up to a maximum of one million dollars

Paraplegia (total paralysis of both lower limbs) .....

Two times The Principal Sum up to a maximum of one million dollars

Hemiplegia (total paralysis of upper and lower limbs of one side of the body).....

Two times The Principal Sum up to a maximum of one million dollars

If you sustain more than one loss as a result of the same accident, only one amount, the largest, will be paid.

"Loss" when used with reference to "Quadriplegia", "Paraplegia", and "Hemiplegia" means the complete and irreversible paralysis of such limbs; "Hand" or "Foot" means the complete severance through or above the wrist or ankle joint, but below the elbow or knee joint; "Arm" or "Leg" means the complete severance through or above the elbow or knee joint; "Thumb and Index Finger" means the complete severance through or above the first phalange; "Fingers" means the complete severance through or above the first phalange of all Four Fingers of One Hand; "Toes" means the complete severance of both phalanges of all the Toes of One Foot; "The Entire Sight of One Eye" means the total and irrecoverable Loss of Sight such that corrected visual acuity must be 20/200 or less in such eye; "The Entire Sight of Both Eyes" means the total and irrecoverable Loss of Sight in Both Eyes such that corrected visual acuity must be 20/200 or less and the field of vision must be less than 20 degrees in both eyes. A Physician certified in Ophthalmology must clinically confirm the diagnosis in writing; "Hearing in One Ear" means the diagnosis of permanent Loss of Hearing in One Ear, with an auditory threshold of more than 90 decibels. A Physician certified in Otolaryngology must confirm the diagnosis in writing; "Hearing" means the diagnosis of permanent Loss of Hearing in Both Ears, with an auditory threshold of more than 90 decibels in each ear. A Physician certified in Otolaryngology must confirm the diagnosis in writing; "Speech" means complete and irrecoverable Loss of the ability to utter intelligible sounds; and "Loss of Use" means the total and irrecoverable Loss of Use provided the Loss is continuous for 12 consecutive months and such Loss of Use is determined to be permanent. "Loss" when used herein may also include "Loss of Life".

**Rehabilitation Benefit**

Reimburses your expenses for occupational training to a maximum of \$15,000 if such expenses are incurred within two years of and as a result of an injury for which you receive a benefit under the Plan.

**Home Alteration and Vehicle Modification Benefit**

Pays a benefit of up to \$15,000 for modification to your home or vehicle if you suffer an injury for which you receive a benefit under the Plan and require a wheelchair to be ambulatory.

**Seat Belt Benefit**

Pays an additional benefit of 10% of the Principal Sum to a maximum of \$50,000 if you suffer a covered accidental death while operating or riding as a passenger in a private passenger automobile in which your seat belt was properly fastened.

**Dependent Child Educational Benefit**

Pays an annual benefit of up to 5% of the Principal Sum to a maximum of \$5,000 per school year for the tuition costs of each Dependent Child who is enrolled in post-secondary education if you suffer a covered accidental death. The benefit is payable for up to four consecutive years.

**Spousal Educational Benefit**

Pays a benefit of up to \$15,000 for your Spouse's expenses in enrolling in a professional or trades training program for the purpose of obtaining an independent source of income, if you suffer a covered accidental death and such expenses are incurred within 30 months of your death.

**War Risk Coverage**

You may be eligible for coverage for injury or loss resulting from declared or undeclared war in certain countries. Please see the Policy for specific details.

**Accidental Death and Dismemberment Exclusions and Limitations**

The Plan will not cover any losses caused in whole or in part by, or resulting in whole or in part from, the following:

- (a) suicide or any attempt thereof by you while sane;
- (b) self inflicted injury or any attempt thereof by you while sane or insane;
- (c) declared or undeclared war or any act thereof;
- (d) sickness, disease, or bodily infirmity whether the loss or claim results directly or indirectly from any of these;
- (e) mental incapacity whether the Loss or claim results directly or indirectly from any mental incapacity;
- (f) sustained while you are undergoing the medical or surgical treatment of sickness, disease, or bodily or mental infirmity;
- (g) stroke or cerebrovascular accident or event; cardiovascular accident or event; myocardial infarction or heart attack; coronary thrombosis; aneurysm;
- (h)
  - (i) travel or flight in or on (including getting in or out of, or on or off of) any Aircraft, if the Insured Member is:
    - a. riding as a passenger in any Aircraft not intended or licensed for the transportation of passengers; or
    - b. performing, learning to perform or instructing others to perform as a pilot or crew member of any Aircraft; or
    - c. riding as a passenger on an Owned Aircraft, Leased Aircraft or on a Charter Flight;
  - (ii) travel or flight in or on (including getting in or out of, or on or off of) any Aircraft or any craft designed to fly or glide above the Earth's surface:
    - a. except as a passenger on a regularly scheduled commercial airline; or
    - b. being used for crop dusting, spraying or seeding, fire-fighting, traffic patrol, air ambulance, pipeline or power line inspection, aerial photography or exploration, racing, endurance tests, stunt or acrobatic flying; or
    - c. operating to or from off-shore landing sites; or
    - d. used in any operation that requires a special permit from the Civil Aviation Branch of Transport Canada, even if it is granted (this does not apply if the permit is required only because of the territory flown over or landed on);
- (i) infections of any kind regardless of how contracted, except bacterial infections that are directly caused by botulism, ptomaine poisoning or an accidental cut or wound independent and in the absence of any underlying sickness, disease or condition including but not limited to diabetes;
- (j) injury or Loss sustained if you are on full-time active duty in the armed forces or organized reserve corps of any country or international authority. (Unearned premium for any period for which you are on full-time active duty shall, upon application to the Company by the Policyholder, be refunded);
- (k) injury or Loss sustained while you are under the influence of alcohol and operating any vehicle or means of transportation or conveyance while your blood alcohol is over 80 milligrams in 100 millilitres of blood;
- (l) injury or Loss sustained while you are under the influence of a drug or substance which is controlled as specified under the Controlled Drug and Substances Act (Canada) unless taken pursuant to the advice of and in strict accordance with the instructions of a duly licensed physician;
- (m) the commission or attempted commission by you or injury incurred while you are in the course of committing or attempting to commit any act which if adjudicated by a court would be an indictable offence under the laws of the jurisdiction where the act was committed; and
- (n) an act, attempted act or omission taken or made by you, or an act, attempted act or omission taken or made with your consent, for the purposes of interrupting the blood flow to your brain or to cause asphyxiation to you whether with intent to cause harm or not; and
- (o) natural causes.

### **War Risk**

Notwithstanding Exclusion (c), the Company will afford coverage under this policy for Injury or Loss caused by or resulting from an act of declared or undeclared war within a Designated War Risk Territory(ies) (but not such an act in which you are an active participant). For the purposes of War Risk coverage, Designated War Risk Territory(ies) means named country(ies) or part(s) of country(ies) included on the war risk country listing maintained by the Company. A Designated War Risk Territory does not include Canada or the United States of America or your country of permanent residence.

## Aggregate Limit Per Accident

The maximum amount the Company will pay for two or more Insured Persons injured in one accident is the amount of the Aggregate Limit Per Accident set out in the policy, if any. If the total of the benefits which would be paid by the Company would exceed the Aggregate Limit Per Accident, each Insured Person shall receive their proportionate share of the amount of the Aggregate Limit Per Accident paid by the Company.

## Emergency Travel Assistance

**Travel Assistance is provided by Global Excel Management. They will:**

- ✓ help you locate the most appropriate medical facility for you
- ✓ confirm coverage with AIG Insurance Company of Canada and assure the hospital that you are covered
- ✓ guarantee payment for hospitalization, if necessary
- ✓ arrange for admission to a hospital
- ✓ provide translation services
- ✓ contact your own doctor for recommendations, when required
- ✓ contact your family and employer, when required
- ✓ arrange for/co-ordinate emergency medical evacuation
- ✓ co-ordinate your return home

## How to submit a claim?

### Minor Expenses

For expenses associated with minor medical emergencies (less than \$250), keep your receipts and file your claims with your government health plan first and then with

AIG Insurance Company of Canada  
120 Bremner Blvd  
Toronto, ON M5J 0A8

### Major Expenses

For major emergencies that require hospitalization or day surgery, Travel Assistance will coordinate services between the Provider and the Company to insure direct billing of your expenses.

## In an emergency here is what to do

In the event of a medical emergency, you or someone acting on your behalf must call AIG Assistance immediately. Their operations are backed by a team of emergency care professionals – physicians and nurses who work closely with the doctor looking after you and, if necessary, your family or company doctor, to help ensure that you receive the medical care you need.

**Telephone AIG Coordination Centre at the numbers listed below:**

**GEM (US & Canada) 1-877-207-5018**  
**GEM (Collect) 819-566-3940**

**Email:**

[Emergency Department: assistance@globalexcel.com](mailto:assistance@globalexcel.com)

[Claims Department: info@globalexcel.com](mailto:info@globalexcel.com)

An operator will ask you the following:

- ✓ your name, location and the details of your emergency
- ✓ your AIG Access Number:
  - The group name of your policy: **Suncrest**
  - Policy No. **SRG 9429069**

## Effective Date

Your coverage under the policy begins on the date you satisfy the definition of “Insured Member or Eligible dependents” and applies while you are travelling outside your province of residence.

## Termination Date

Coverage ends on the earliest of:

1. the date the policy is terminated;
1. the premium due date if premiums are not paid when due;
2. the date you no longer satisfy the definition of an Insured Member or eligible dependents; or
3. the first day of the month following the date you no longer belong to an Eligible Class of Members.

This brochure provides only brief descriptions of the coverage available. The full details of the coverage are contained in the Policy including limitations, exclusions and termination provisions. If there are any conflicts between this document and the Policy, the Policy shall govern. Insurance is underwritten by AIG Insurance Company of Canada.

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