

## **Product Summary – Single Trip Comprehensive Basic Domestic**

*Offering protection for your travel arrangements*

Underwritten by Europ Assistance Canada Branch.

### **HOW TO CONTACT US**

Europ Assistance Canada  
Registered with Autorité des marchés financiers under client number 1-888-726-1559  
Address:  
PO BOX 1108  
First Canadian Place RPO RPO FIRST CAN, ON  
M5K 1P2  
Telephone: 1-888-726-1559  
Email: [service@europ-assistance.ca](mailto:service@europ-assistance.ca)

### **AUTORITÉ DES MARCHÉS FINANCIERS**

The Autorité des marchés financiers can provide you with information about your insurer's or your insurance distributor's obligations.  
Website: [lautorite.qc.ca](http://lautorite.qc.ca)



## THINGS TO NOTE

### With reference to “You”

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

### With reference to “Trip”

The word “trip” refers to the period beginning on the departure date and ending on the **end date** shown in your Confirmation of Insurance.

### With reference to words in *italics* and **bold**

Words and expressions in italics and bold are defined at the end of the summary ([section 8. Definitions](#)). Read these definitions if you have any questions.

### This is a summary

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

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## THINGS TO CONSIDER

### Before you buy this insurance

Do you, and all the people you want to insure, meet all the eligibility requirements?  
If not, you may not be covered. To ensure your eligibility, read section [1. Who can buy this insurance](#).

Do you, or any of the people you want to insure, have a **medical condition** that is not **stable**? If so, expenses relating to the **medical condition** may not be covered.

### Before you travel

Do all insured people still meet all eligibility requirements?  
If not, exclusions may apply. Check before you travel.  
Have there been any changes in health for any insured travellers since you purchased your insurance? If so, exclusions may apply.

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## ADDITIONAL GUIDELINES

All amounts in this summary are shown in Canadian dollars.  
All coverages are per person unless stated otherwise.

### Provide full and accurate information

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

### Don't leave without paying

You are not covered until you pay for your insurance.  
**Note:** The insurance policy doesn't provide any temporary coverage.

## 1. WHO CAN BUY THIS INSURANCE

### Eligibility requirements for purchasing this insurance

You can buy this insurance if you, and any person(s) you want to insure, meet all the following requirements:



- You live in Canada.
- You are covered under a government health insurance plan (such as RAMQ) for the entire trip duration.
- You are less than 75 years of age.
- You are, and anyone on whose behalf you wish to purchase a policy, is 30 days and older.
- Neither you nor anyone else on whose behalf you are purchasing the policy has been advised by a physician to not travel.



If you don't meet the eligibility requirements, you cannot purchase the insurance

- You will not be covered; or
- The insurance will be cancelled; or
- Your claim will not be paid.

## 2. WHO IS INSURED AND HOW WE CALCULATE YOUR INSURANCE COST



### You

You are insured if:

- You meet all the eligibility requirements.
- You paid for the insurance.



### Your family (if you pay family premium)

You, your spouse, **children**, and grandchildren must meet all the eligibility requirements when you purchased the family coverage option.

You and your family will be insured when you pay an amount equal to 2.5 times the rate for the oldest parent or grandparent.

The following people qualify under family coverage:

- 2 adults married or partnered
- Your **children** or grandchildren under 18

If you are traveling with your **children** or grandchildren under 2 years old, they will have the same coverage as you at no extra cost if they remain under 2 years old for the entire trip.

### Your insurance costs are based on the following criteria:



- The age of each traveller
- The length of the trip – how long are you travelling?
- The amount of coverage you choose – the cost of your trip that you choose to insure
- Single or family coverage – travelling alone or with family?

The cost includes premium tax and the cost of any administration by us.

### Other fees and costs

The insurance is sold within Canada, only by authorized Europ Assistance distributors. The sale is subject to applicable federal and provincial/territorial sales taxes. We charge a single, fixed amount and there are no other fees or expenses related to the cost of the insurance. The insurance product is not renewable.

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

### Maximum trip duration

The maximum trip duration this policy will cover, including any extensions, is 365 days if authorized by your government health insurance provider (RAMQ). Your insurance applies only in CANADA.



**Warning:** Exclusions may apply if the Government of Canada issues an advisory against travel to a certain region or country.  
**Important:** Emergency Medical coverage applies only outside your province or territory of residence.

#### 4. ADDITIONAL SERVICES

##### Anywhere in the world

- You have phone access to a physician to assess your symptoms.
- You have access to a network of physicians who make house call visits.

#### 5. SUMMARY OF COVERAGES

##### EMERGENCY MEDICAL

Emergency Medical provides coverage during your trip for a sudden and unforeseen medical emergency that requires immediate **treatment**. You are insured under Emergency Medical coverage from the moment you leave on your trip.

Read “EMERGENCY MEDICAL INSURANCE” in the [sample policy](#) for a full list of insurance benefits, the limits to the amount we pay, and the expenses we do not cover including **pre-existing medical condition** exclusions.



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

**IF YOU DON'T CALL THE ASSISTANCE CENTRE, YOU MAY BE RESPONSIBLE FOR CERTAIN EXPENSES**

**Covered maximum:** \$25,000 per person covered under this policy

We pay up to a maximum of \$25,000 Canadian for all claims combined. For some benefits we limit the amount we pay to a maximum amount.

##### Covered expenses for Emergency Medical

This is an overview of emergency medical care expenses we pay. For a full list, read “WHAT YOU ARE COVERED FOR” in the [sample policy](#).

- Expenses incurred to receive emergency **treatment**, including surgical and diagnostic procedures 100%
- Expenses for repatriation 100%
- Expenses in the case of death while travelling Sample policy lists services and maximums

##### Exclusions for Emergency Medical

Some of the expenses we do not cover are outlined in this section. For a full list of exclusions, read “WHAT YOU ARE NOT COVERED FOR” section of the [sample policy](#).

- Expenses not related to urgent and necessary medical care.
- Expenses related to participating in hazardous sports.
- Expenses related to a **medical condition** if the Government of Canada has issued a formal warning to the country you are visiting.
- A **medical condition** when you knew or for which it was reasonable to expect, that you would need medical **treatment** for that **medical condition** during your trip.
- Expenses related to unstable **pre-existing medical conditions**
  - If, at the time you leave for your trip, you are age 59 or younger and have a **medical condition** that is not **stable** in the 90 days before your **departure date**, we will not provide coverage for that condition.
  - If, at the time you leave for your trip, you are age 60 or older and have a **medical condition** that is not **stable** in the 365 days before your **departure date**, we will not provide coverage for that condition.

Your **medical condition** is not **stable** if you have any new symptoms or if there is a change in medication or **treatment** during the stability period.

#### TRIP CANCELLATION & TRIP INTERRUPTION

In this section, we outline some details about the Trip Cancellation and Trip Interruption coverage. Read “WHAT YOU ARE COVERED FOR” in the [sample policy](#) for a full list of insurance benefits, including:

- What is covered when cancelling or interrupting your trip
- The limits to the amounts we will pay
- The expenses we do not cover

TRIP CANCELLATION

Trip Cancellation coverage is available before you leave on your trip and covers up to the amount that you select and purchase for the value of your trip. To have full coverage under Trip Cancellation, you should purchase coverage for the full value of your trip.

Covered maximum: The amount of insurance coverage you purchase for your policy.

Covered expenses for Trip Cancellation

This is an overview of covered expenses. For full details, read "WHAT YOU ARE COVERED FOR" in the [sample policy](#).

- Cancellation and/or amendment fees 100%
- Non-refundable portion of your trip 100%

TRIP INTERRUPTION

Trip Interruption coverage is available if your trip is interrupted, delayed, a connection is missed, or you experience a travel disruption. If you must return to your departure point or go directly to your next destination, we pay certain non-refundable expenses for the portion of the trip you were unable to take. Some events may also apply to your *travel companion*.

Covered expenses for Trip Interruption

This is an overview of covered expenses and applicable limits. For full details read "WHAT YOU ARE COVERED FOR" section of the [sample policy](#).

- Any unused portion of your trip that is non-refundable and non-transferable to another travel date, or the extra cost of your same-class airfare to the next destination on your trip 100%

Important: We don't pay for the return ticket you purchased, but we cover the extra cost of your airfare to return to your departure point.

- Expenses in the case of death while travelling Sample policy lists services and maximums
- Extra cost of same-class airfare to travel to your next destination Up to \$5,000

MISSED AND DELAY DEPARTURES/CONNECTIONS

Missed and Delayed Departures/Connections provides coverage if your trip is disrupted by missed connections, delays, schedule changes, and all other unexpected events that are beyond your reasonable control. We pay for certain expenses when your travel arrangements included enough connection time based on your travel supplier's guidelines.

Covered expenses

This is an overview of covered expenses. For full details, read "WHAT YOU ARE COVERED FOR" in the [sample policy](#).

- Charges for incidentals, such as overnight accommodations, meals, phone calls, etc. until you reach your next destination \$150 per day to a maximum of \$1,500

Important: We will pay a combined maximum of \$1,500 per insured

Travel supplier bankruptcy (supplier default)

We pay expenses for the unused portion of your trip if your tour operator, airline, ground transport provider, or other travel supplier fails to provide you with the travel services you purchased because your travel supplier defaulted (for example, declared bankruptcy). For full details, read "Default Supplier Coverage" in the [sample policy](#).

Exclusions for Trip Cancellation, Trip Interruption & Missed and Delayed Departures/Connections

We do not cover expenses related to the items outlined in this section. For a full list of exclusions, read "WHAT YOU ARE NOT COVERED FOR" in the [sample policy](#).

- Events that you should have known may arise
- *Pre-existing medical conditions*
- Professional sports
- High risk sport activities

## FLIGHT ACCIDENT & TRAVEL ACCIDENT

In this section, we outline some details of the Flight & Travel Accident insurance. Read “WHAT YOU ARE COVERED FOR” in the [sample policy](#) for a full list of insurance benefits, the limits to the amount we pay, and the expenses we do not cover.

### Covered events for Flight & Travel Accident

While in flight or at any time during your trip, if there is a flight or travel accident that causes any of the following, we pay an amount based on the type of injury or your death:

- Loss of limb(s)
- Complete loss of sight
- Death

### Exclusions for Flight Accident & Travel Accident

Some of the expenses we do not cover are outlined in this section. For a full list of exclusions, read “WHAT YOU ARE NOT COVERED FOR” in the [sample policy](#).

- Death or injury from causes other than the flight or travel accident
- Expenses related to participation in a hazardous sport

## BAGGAGE & PERSONAL EFFECTS

If your baggage is stolen, lost, damaged, or delayed, we pay for certain expenses. Read “WHAT YOU ARE COVERED FOR” in the [sample policy](#) for a full list of benefits, the limits to the amount we pay, and the expenses we do not cover.

**Covered maximum:** \$500 per trip, per insured

### Covered expenses for Baggage & Personal Effects

This is an overview of covered expenses:

- Cost of replacing your ID or travel documents
- Cost of replacing your personal effects
- Expenses for incidentals (for example, toiletries) if your baggage is delayed at least 10 hours
- Expenses for other unexpected events are limited to individual benefit amounts

### Exclusions for Baggage & Personal Effects

Some of the expenses we do not cover are outlined in this section. For a full list of exclusions, read “WHAT YOU ARE NOT COVERED FOR” section of the [sample policy](#).

- Loss or damage from wear and tear or a defect
- Jewellery and cameras placed in your checked baggage



### **ALWAYS FILE A POLICE REPORT IF THERE IS A THEFT OR LOSS**

**Warning:** If you don't report the baggage theft, loss, or damage to the authorities, we may not be able pay your claim.

## 6. HOW TO MAKE A CLAIM



You can submit your claim online at [E – Claims Portal](#)

For faster and easier submissions, have all your documents available in electronic format, such as PDF or JPEG/JPG.



You can also write to us at:

Europ Assistance Canada

PO BOX 1108

First Canadian Place RPO RPO FIRST CAN, ON, M5K 1P2



### **90 days to make your claim**

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



### **We will notify within 30 days if your claim is approved**

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

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

1. You can ask us to reconsider your claim.  
You can contact Customer Service, and, if you are still not satisfied, the Europ Assistance Ombuds Office. For more information:
2. You can contact the Autorité des marchés financiers.  
The Autorité des marchés financiers reviews your file and can help us find a solution together, such as offering dispute resolution services.  
For more information: <https://lautorite.gc.ca/en/general-public/assistance-and-complaints>
3. You can contact the OmbudService for Life and Health Insurance. For more information: <https://olhi.ca/>
4. You can contest our decision in court.  
Your legal action must be taken within the 3-year time frame prescribed by the Civil Code (prescription period). We recommend that you seek legal advice for information on your rights and the appeal process.

## **7. YOUR RIGHT TO RESCIND AN INSURANCE CONTRACT**

### **Within 10 days after purchasing your insurance: Full refund**

You are eligible for cancellation only if you have not left on your trip. If you want to cancel your insurance contract, you must complete a Notice of Rescission of an Insurance Contract. You can get a copy of this document from your distributor or online at: <http://www.europ-assistance.ca/avisderesolutionduncontratdassurance>

Your travel booking and any other contract you enter with your travel agency remains in effect.

**Important:** No refund in other cases

## 8. DEFINITIONS

### ***Child/Children***

Your unmarried biological, adopted or stepchild, living in the same residence as you, for whom you have legal custody and/or control and is financially dependent on you and travelling with you or joins you during your trip and is either:

- i. Under 18 years of age;
- ii. ***Under 26 years of age if a full-time student; or***
- iii. Your ***child*** of any age who is mentally or physically disabled. In addition, any ***child(ren)*** must be older than 30 days of age.

### ***Departure Date***

The date, as shown in your Confirmation of Insurance, on which you are originally scheduled to begin your trip.

### ***End Date***

The date, as shown in your Confirmation of Insurance, on which you are originally scheduled to return from your trip.

### ***Medical Condition***

Any disease, illness, or injury (including symptoms of undiagnosed conditions).

### ***Pre-existing Medical Condition***

Any ***medical condition*** that exists before the policyholder purchased the policy.

### ***Stable***

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

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

All these conditions must be met for a ***medical condition*** to be considered ***stable***.

### ***Travel companion***

Any person other than an insured that has booked to travel with you on your trip.

### ***Treatment***

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



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

## LET'S TALK INSURANCE!

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

Name of insurer: \_\_\_\_\_

Name of insurance product: \_\_\_\_\_



### IT'S YOUR CHOICE

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

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

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



### HOW TO CHOOSE

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



### DISTRIBUTOR REMUNERATION

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



### RIGHT TO CANCEL

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

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

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

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Reserved for use by the insurer: