
Emergency Out of Province Travel Booklet



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Overview of Emergency Out of Province Benefits

*For detailed coverage information, please refer to Pages 2 to 8 in this booklet

The Travel Assistance Program offers the following features:

Medical Emergency Services

- Doctor, hospital, pharmacy and dentist referrals
- Verification of medical insurance
- Help with guarantees to providers
- Communications with family and doctor at home
- Arranging shipment of prescription drugs, medical equipment, prescription glasses and similar items
- Arranging for copies of medical records
- Arranging for transportation and escort for minors

Medical Evacuations and Repatriations

- Arranging for medically necessary evacuations
- Arranging for necessary medical treatment en route
- Arranging for the return of the remains of the insured person in the event of death away from home

Emergency Travel Agency Services

- Help with replacement of lost or stolen airline tickets
- 24-hour emergency travel service for airline and hotel reservations

Emergency Legal Referral

- Arranging contact with a local English-speaking attorney
- Direction to embassies and consulates

Insurance Coordination

- Assisting with filing of travel-related claims
- Verification of coverage to providers
- Help with documentation and translation

Lost Baggage/Lost Passport Assistance

- Immediate telephone advice on procedures
- Contact and follow-up with common carriers to track lost or delayed baggage
- Assistance in getting baggage forwarded to the insured
- Notifying authorities of insured's lost passport
- Provide directions to insured for replacement of lost passport

Additional Services

- Health precautions for medically remote areas
- Immunization requirements
- Special medical care arrangements
- Passport & Visa information
- Weather information
- Advice for handicapped or disabled travellers

The person named is eligible for certain Services and Benefits as outlined in the Service Agreement provided to you. Before obtaining medical and non-medical assistance, call one of the phone numbers below:



Canada & the United States: 1-855-234-3545
International (collect call): 416-234-3545

Contact Trident Global Assistance:

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Why You Need Emergency Out of Province Medical 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.

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 if you are an active eligible Member of the Policyholder and under the age of 80.

Here's What You Get

Broad Emergency Out of Province Medical Coverage – Your plan provides extensive coverage for medical emergencies outside the Province in which you reside.

Beneficiary Designation

All amounts payable will be reimbursed to the primary insured person or will be paid directly to the provider.

Definitions

"Insured Member" means you, if you are an eligible Member of the Policyholder who is under the age of 80.

Eligible Dependents:

"Spouse" means a person who is under the age of 80 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.

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“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.

“Stability” means insureds who already have a known disease or illness before the trip must ensure before departure that:

- Their health condition is good and stable. The insured's state of health is considered unstable and its effects are not considered to be those of a sudden and unexpected illness in the following case:
 - Symptoms worsen;
 - A relapse is suffered;
 - The disease or illness is in its terminal phase;
 - The disease or illness is chronic and shows signs that deterioration may occur or foreseeable complications may arise during the trip;
- They are able to carry out usual daily activities; and
- They are experiencing no symptoms that may reasonably suggest that any complications may arise or medical care may be required during the trip outside the province of residence.

“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 45 days.

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 \$2,000,000 per year if you are under age 70 and \$1,000,000 if you are between age 71 to 80 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, or if you or your eligible insured dependents are not covered under any such plan, to the extent you exceeded any amount which would be payable with respect to such expenses under the government hospitalization or medical care plan if you or your eligible insured dependents were covered under any such plan.

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.

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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 chiroprapist, 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.

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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 \$50,000 per occurrence if you or your eligible insured dependents medical condition require air transportation to the nearest hospital or to return to your province of residence. This service must be coordinated and approved by Trident Global Assistance.

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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) 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;
- (b) 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;
- (c) 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;
- (d) the abuse of medication or drugs or non-compliance with prescribed medical therapy or treatment whether prior to or during a Trip;
- (e) 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;
- (f) 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 7th month;
- (g) Sickness or Injury where the Trip is undertaken for the purpose of securing medical treatment or advice for such Sickness or Injury;
- (h) Sickness or Injury due to participation in any professional sport;
- (i) suicide or any attempt at suicide while sane or insane;
- (j) intentionally self-inflicted Injury or any attempt at intentionally self-inflicted Injury, while sane or insane;
- (k) an act of declared or undeclared war, civil war, rebellion, revolution or insurrection;
- (l) treatment or services when reimbursement or coverage by the Company would contravene any GHIP in Canada;
- (m) expenses incurred on an elective (non-emergency) basis;
- (n) 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;
- (o) any services or supplies provided by you, your eligible dependents or a member of your Immediate Family;
- (p) 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;
- (q) 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;
- (r) any treatment or surgery which reasonably could be delayed until you or your eligible dependents return to your province or territory of residence;

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- (s) 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;
- (t) a medical condition that had deteriorated, or had to be treated or investigated in the three (3) months immediately preceding your or your eligible dependent's departure from the province or territory of residence; and
- (u) that portion, if any, of any expenses for treatment, advice or hospitalization which are not Reasonable and Customary.

Coordination and Reduction of Benefits

Expenses eligible for reimbursement under this Travel Insurance and Assistance benefit will be reduced by the amount of any corresponding benefits payable under another insurance contract. However, if you are entitled to benefits for the same expenses under other provisions of your Extended Health Care coverage, benefits will only be payable under the provision of Travel Insurance.

Emergency Travel Assistance

Travel Assistance is provided by Trident Global Assistance. With centers worldwide they will:

- ✓ help you locate the most appropriate medical facility for you
- ✓ confirm coverage with Trident Global Assistance 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:

Trident Global Assistance
21 Four Seasons Place
Toronto, ON M9B 0A5

Major expenses

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

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In an emergency here is what to do:

In the event of a medical emergency, you or someone acting on your behalf must call Trident Global 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 Trident Global Assistance at the numbers listed below.

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An operator will ask you the following:

- ✓ your name, location and the details of your emergency
- ✓ your soloplus™ policy and certificate numbers:
 - The group name of your policy: **GROUPHEALTH BENEFIT SOLUTIONS**
 - Policy No.: 340000

Your coverage begins on the date you satisfy the definition of “Insured Member or Eligible dependents”

Termination Date

Coverage ends on the earliest of:

1. the date the policy is terminated;
2. the premium due date if premiums are not paid when due;
3. the date you no longer satisfy the definition of an Insured Member or eligible dependents

This booklet 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 Industrial Alliance.

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