

# Emergency Hospital & Medical for Canadians

Multi-trip Basic plan – Worldwide destinations

AGES	0 – 30	31 – 39	40 – 54	55 – 59
Trip length	Per Person			
4 days	\$39	\$39	\$47	\$58
8 days	56	56	62	77
15 days	66	66	70	85
35 days	98	87	92	122
60 days	173	173	260	274
125 days	425	431	499	646

DEDUCTIBLES
<ul style="list-style-type: none"> <li>Standard deductible per claim: \$250.</li> <li>Surcharge to remove deductible: 10%</li> </ul>


The premium for family coverage is calculated at two and a half (2.5) times the premium for the eldest adult age 59 and under.

For the summary of coverage and eligibility refer to page 18.

## Important notes

- Use the applicant's age on the effective date.
- This product covers the insured on an unlimited number of trips during a 365 day period from the effective date.
- Top-ups and Extensions are available for trips over the trip length purchased (see pages 10 – 11 for procedures).
- Premiums are not refundable after the effective date.
- Family includes the applicant, age 59 and under, the applicant's spouse age 59 and under, and any number of dependent children 21 years of age and under.

## When is a medical questionnaire required?

0 – 59 Years of Age	60 – 84 Years of Age
<p>Standard Eligibility</p> <p><b>Not required</b></p> <p>Client is covered for medical conditions that are stable for 90 days immediately prior to effective date</p>	<p>Additional Eligibility</p> <p><b>Required</b></p>  <p>Complete Medical Questionnaire through quicktic*</p>

- \* Depending on the answers to the medical questionnaire, benefits are not payable for costs incurred due to or resulting from a medical condition or related condition, other than a **minor ailment**:
- that was not **stable** at any time during the 90, 180, or 365 days immediately before the **effective date**; or
  - for which **treatment** was received at any time during the 365 days immediately before the **effective date**; or
  - for which **treatment** was received at any time before the **effective date**.

Refer your client to their confirmation of coverage for the pre-existing conditions exclusion that applies to them.