

# Medical Questionnaire



Global Assistance

Underwritten by CUMIS General Insurance Company, a member of The Co-operators group of companies.

**For Emergency Hospital & Medical Single-trip, Multi-trip, and Comprehensive Plans. This questionnaire applies to ages 65 and over, traveling for any duration.**

**If you wish to issue a policy it MUST be returned to your travel insurance representative.**

## Section 1: Eligibility

You are eligible to apply for coverage if you meet the eligibility requirements stated below on the date you apply for coverage and on the *effective date*. If you have a change in health that makes you ineligible after the application date, please contact your travel insurance representative or Allianz Global Assistance. To be eligible for coverage, all the following conditions must be met:

1. As of the effective date of your policy you must:
    - a. Be at least 15 days old,
    - b. Be a Canadian resident and be insured for benefits under a Canadian government health insurance plan during the entire coverage period
    - c. Not have been advised against travel by a physician for period of time which includes your trip
    - d. Not be traveling or going on your trip to receive treatment or alternative therapy of any kind.
  2. In the two (2) years prior to the effective date, you must not have been diagnosed with or received treatment for a terminal condition for which a physician gave you a prognosis of eventual death or for which palliative care was or is being received.
  3. If you are age 65 or older on the effective date, to be eligible for coverage you must not require assistance with activities of daily living including but not limited to, eating, bathing, using the toilet, changing positions, including getting in and out of a bed or chair, or dressing, as the result of a medical condition or state of health.
1. Do you confirm that you are eligible to apply?      **Yes**      **No**

\_\_\_\_\_  
**Applicant's name** (please print)

\_\_\_\_\_  
**Date** (mm/dd/yyyy)

## Section 2 – Rate Qualification Questions

- |   |                                     |                                    |
|---|-------------------------------------|------------------------------------|
| 1. In the past 6 months have you been prescribed, refilled, or taken prescription medication, other than birth control, low-dose aspirin, or antibiotics?   | <b>Yes</b>                          | <b>No</b>                          |
| If YES, has it been for:  |                                     |                                    |
| Blood Pressure  | <input type="checkbox"/> <b>Yes</b> | <input type="checkbox"/> <b>No</b> |
| Stroke/ Mini Stroke, or prevention of a blood clot?   | <input type="checkbox"/> <b>Yes</b> | <input type="checkbox"/> <b>No</b> |
| Heart Condition (any cardiovascular condition)  | <input type="checkbox"/> <b>Yes</b> | <input type="checkbox"/> <b>No</b> |
| Digestive Condition (any condition related to the esophagus, stomach or intestines)   | <input type="checkbox"/> <b>Yes</b> | <input type="checkbox"/> <b>No</b> |
| Lung/Respiratory Condition? (excluding allergies)   | <b>Yes</b>                          | <b>No</b>                          |
| Diabetes or Pre-Diabetes?   | <b>Yes</b>                          | <b>No</b>                          |
| 2. Have you been diagnosed with or had any cancer treatment in the past 6 months? ( This does not include basal or squamous cell skin cancer or breast cancer treated only with hormone therapy.) | <b>Yes</b>                          | <b>No</b>                          |
| 3. Have you used any tobacco or nicotine products in the past 6 months?   | <b>Yes</b>                          | <b>No</b>                          |

## Section 3 - Signature

By signing this application, I agree to the terms and conditions of the Allianz policy and acknowledge that I am aware of the Exclusions and limitations of this policy. I confirm that all of my answers on the medical questionnaire are accurate and correct.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Key Terms Used in this Application

**Stable** describes any medical condition or related condition, including any *heart condition* or *lung/respiratory condition*, for which:

- a) there has been no new *treatment*; and
- b) there has been no change in *treatment* or change in *treatment* frequency or type; and
- c) there have been no *signs* or *symptoms* or new diagnosis; and
- d) there have been no test results showing deterioration; and
- e) there has been no hospitalization; and
- f) there has been no referral to a specialist (made or recommended) and you are not awaiting the results of further investigations performed by any medical professional.

The following are considered stable:

- a) Routine (not prescribed by a physician) adjustment of insulin to control diabetes provided the insulin was not first prescribed during the time period specified in the Pre-Existing Conditions Exclusion shown on your confirmation of coverage.
- b) Change from a brand name medication to a generic medication provided the medication was not first prescribed during the time period specified in the Pre-Existing Conditions Exclusion shown on your confirmation of coverage and there is no increase or decrease in dosage.
- c) The routine adjustment of Coumadin or Warfarin provided the Coumadin or Warfarin was not first prescribed during the time period specified in the Pre-Existing Conditions Exclusion shown on your confirmation of coverage.
- d) A *minor ailment*.
  - i) a sickness or injury that ended more than 30 days prior to your effective date and did not require:
    - 1) treatment (including prescriptions) for more than 30 consecutive days
    - 2) more than one (1) follow-up with a physician

If you purchase your policy after you have exited your province or territory of residence, any sickness or injury that manifests itself during the first 48 hours after the effective date is not covered even if related expenses are incurred after the 48-hour waiting period.

**Heart condition** Includes angina or chest pain, arrhythmia, coronary artery disease, congenital heart defect, acute and chronic heart failure, cardiomyopathy, myocardial infarction, cardiac tamponade, cardiogenic shock, cardiogenic syncope, heart block, heart murmur, and any other condition relating to the heart or cardiovascular system like carotid artery occlusions, vessel dissection and aneurysms of the great vessels.

**Lung/respiratory condition** Includes asbestosis, bronchiectasis, chronic bronchitis, chronic obstructive pulmonary disease (COPD), emphysema, pulmonary embolism, pulmonary fibrosis, Interstitial lung diseases, lung transplant, pleural effusions, pulmonary edema, tuberculosis or any other condition relating to lungs or respiratory system.

**Signs or symptoms** means any evidence of disease experienced by you or recognized through observation.

**Effective date** means the later of:

- a) the date and time the completed application is accepted by Allianz Global Assistance or its representative; or
- b) the date indicated as the effective date on your confirmation of coverage; or
- c) for Multi-trip Plans, the date you exit your province or territory of residence for each trip.

If you purchase a Multi-trip Plan after you have exited your province or territory of residence, effective date means the date indicated as the effective date on your confirmation of coverage.

For Trip Cancellation & Interruption Prior to Departure benefits, effective date means the date you make the initial non-refundable payment for your trip.

**Assistance with daily living** includes:

- a) eating;
- b) bathing;
- c) using the toilet;
- d) changing positions (including getting in and out of a bed or chair);
- e) dressing.

**Terminal** applies to a medical condition for which a physician gave a prognosis of eventual death or for which palliative care was received prior to the *effective date*.

**Treatment** means a medical, therapeutic or diagnostic procedure prescribed, performed or recommended by a physician including, but not limited to, prescribed medication, investigative testing or surgery.

**Medical consultation** means any medical services obtained from a licensed medical practitioner for a sickness, injury or medical condition, including but not limited to any or all of: history taking, medical examination, investigative testing, advice or *treatment*, and during which a diagnosis of the condition need not have been definitively made. **This does not include** regular medical check-ups where no medical *signs* or *symptoms* existed between check-ups or were found during the check-up.