



DISTRIBUTION GUIDE

(Québec residents only)

Name of the insurance product: CIBC Travel Insurance

Type of insurance product: Group Travel Insurance for Individuals

Names and addresses of insurers: Co-operators Life Insurance Company
1920 College Avenue
Regina, Saskatchewan
Canada S4P 1C4
Telephone: 306-347-6200
Fax: 306-347-6806

Name and address of Distributor: Canadian Imperial Bank of Commerce
Commerce Court
Toronto, ON
M5L 1A2
Telephone: 416-980-2211
Fax: 416-218-9440

Important Notice:

l'Autorité des marchés financiers (AMF) does not express an opinion on the quality of the product offered in this guide. The insurer alone is responsible for any discrepancies between the wording in the guide and the policy.

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I. INTRODUCTION

The purpose of this Distribution Guide is to describe the **CIBC** Emergency Travel Medical Insurance product available to consumers online in Quebec.

The emergency medical travel insurance certificate is issued to **CIBC** under a Group Master Policy No. H006137. When you purchase the insurance, you receive **CIBC** certificate number HC110105 which contains a summary of the terms, conditions, limitations, exclusions, restrictions and other provisions of the Group Policy. This Guide describes these terms in a straightforward and simple manner to allow to you determine if this insurance meets your needs.

Terms defined in the Definitions section are in **bold** and *italics* throughout the text of this Guide for your reference. You can refer to the Definitions section, ensuring that you understand these terms as they are used in this Guide.

You are encouraged to read the “What is Covered” and “What is Not Covered” and “Exclusions, Limitations and Benefit Reductions” sections carefully as these sections may help you better understand what is covered and what is not covered. You should also pay special attention to any other part of this Guide where anything labeled “**Caution**” or “**Please note**” appears. These labels are used to ensure that you understand what you are reading prior to making a decision on purchasing **CIBC** Emergency Travel Medical Insurance.

If you require any additional information, you should refer to the **CIBC Travel Insurance** certificate HC110105. A copy of the certificate can be found on CIBC’s website www.cibc.com, or you can obtain a copy of this certificate by contacting **CIBC Travel Insurance** at 1-800-281-9109.

CIBC Travel Insurance / CIBC Travel Assistance is administered by:

TIC Travel Insurance Coordinators Ltd.
2100 - 250 Yonge Street
Toronto, Ontario M5B 2L7
Canada

Telephone: 1-800-465-2422
Fax: 1-416-340-2707
Email: info@travelinsurance.ca

TIC handles all of the claims for CIBC Travel Insurance.

PLEASE REFER ALL ENQUIRIES TO TIC

II. DEFINITIONS

Act of terrorism means an act, including the use of force or violence, and/or the threat thereof, or commission or threat of a dangerous act of any person or group(s) or government(s), committed for political, religious, ideological, social, economic or similar purposes, including the intention to intimidate, coerce or overthrow any government or to influence, affect or protest against any government and/or to put the civilian population, or any section of it, in fear.

Act of war means any loss or damage arising directly or indirectly from, occasioned by, and happening through or in the consequence of:

- war;
- invasion;
- acts of foreign enemies;
- hostilities;
- warlike operations (whether war is declared or not) by any government or sovereign, using military personnel or other agents;
- civil war;
- rebellion;
- revolution;
- insurrection;
- civil commotion assuming the proportions of or amounting to an uprising; or
- military or usurped power.

Annual Plan means Emergency Travel Medical Insurance coverage for an unlimited number of **insured trips** of a maximum duration of up to 15 days or 31 days (depending on the coverage that you choose when you purchase the **annual plan**) within a continuous 365-day period starting from the **effective date**. Top-ups to your **Annual Plan** coverage can be purchased.

Caregiver means a person whom you have given the responsibility of looking after your **dependent children** on a permanent full-time basis and you rely upon for daily supervision and whose absence cannot reasonably be replaced.

CIBC means the Canadian Imperial Bank of Commerce.

CIBC Travel Assistance means the 24 hour per day, 7 day per week travel assistance hotline providing you with **emergency**, orientation, referral and claims services during your **insured trip**.

Common Carrier means any land, air or water conveyance which is licensed to transport passengers for hire, provided they have regular published schedules and fares.

Caution

The definition of **common carrier** does not include taxis, limousines and rental **vehicles**.

Company means Co-operators Life Insurance Company or The Sovereign General Insurance Company.

Confirmation of Coverage means the document that you receive from us confirming the coverage that you purchased.

Please note

This confirmation can be in the form of:

- a letter;
- an application form that is stamped by a **CIBC** bank branch;
- a confirmation page of an internet purchase.

Departure Date means the **earlier** of the date you:

- board your ticketed transportation; or
- leave your **province** on your **insured trip**.

Departure Point means the location where you:

- board your ticketed transportation; or
- exit your **province**.

Dependent Child means any child:

- who is financially dependent on you;
- who is at least 15 days of age on the **departure date**; and
- who is:
 - under age 21;
 - under age 25 and enrolled and attending an accredited high school, college or university as a full time student;
 - mentally or physically disabled and less than 65 years of age.

Please note

- In the case of grandparents, a **dependent child** also means any child or step-child of your:
 - son or daughter;
 - son-in-law or daughter-in-law; or
 - step-son or step-daughterwho is:
 - at least 15 days of age on the **departure date**; and
 - under age 21; or
 - under age 25 and enrolled and attending an accredited high school, college or university as a full time student; or
 - mentally or physically disabled and less than 65 years of age.

Effective date means the date coverage begins, provided the premium has been received by us and the latest of:

- the date indicated on your **Confirmation of Coverage**; or
- the date you first exit your **province**.

Please note

If you purchase coverage after your **departure date**, **emergency sickness** benefits will become effective **48 hours after** the date and time the premium is received by us.

Elective Treatment means medical **treatment**, surgery or other procedures scheduled by your **physician** to occur at a future date.

Emergency means an unforeseen **sickness** or **injury**, which requires immediate **treatment** to prevent or alleviate existing danger to life or health.

Please note

An **emergency** no longer exists when medical evidence indicates that you are able to continue the trip or return to your **province** or Canada.

Expiry Date means the date your policy ends.

Please note

For Emergency Travel Medical **Annual Plan**, the **expiry date** is **364 days** after the **effective date**.

Extended Family means **spouse**, children or step-children, their respective **spouses**; parent(s), guardian(s) or step parent(s); in-law(s), brother(s), step-brother(s), sister(s), step-sister(s), grandparent(s) and grandchildren.

Guarantee of Coverage means the document that you receive from us, that specifies which **pre-existing conditions** are covered under this certificate.

Please note

This document will only be received if you have been medically underwritten.

High Risk Activity means

- bungee jumping
- gliding
- hang-gliding
- freestyle skiing/snowboarding
- heli-skiing/snowboarding
- ski jumping
- parachuting
- skydiving
- sky-surfing
- street luge
- skeleton activity
- mountain or rock climbing with or without ropes; and
- participation in any rodeo activity.

Hospital means a facility equipped to perform surgery on an **emergency** in-patient and outpatient basis.

Caution

The definition of a **hospital** does not include:

- a nursing home;
- rest home;
- a convalescent home;
- rehabilitation centre;
- a home for the aged.

Injury means sudden bodily harm, which is directly caused by an accident and is independent of **sickness** and all other causes.

Insured means a person(s) who is eligible for coverage, who is named on the **Confirmation of Coverage**, and for whom the required premium has been paid.

Insured Trip means the period of time that you are travelling outside your **province** and for which coverage is in effect.

Nuclear, chemical or biological means the use of any **nuclear** weapon or device or the emission, discharge, dispersal, release or escape of any solid, liquid or gaseous **chemical** agent and/or **biological** agent, including the resultant contamination where:

- **Nuclear** means any occurrence causing bodily **injury, sickness**, disease, or death or loss of or damage to property, or for loss of use of property, arising out of or resulting from the radioactive, toxic, explosive, or other hazardous properties of source, special **nuclear** or by-product material.
- **Chemical** agent means any compound which, when suitably disseminated, produces incapacitating, damaging or lethal effects on people, animal plants or material property.
- **Biological** agent means any pathogenic (disease-producing) micro-organism(s) and/or biologically produced toxin(s) (including genetically modified organisms and chemically synthesized toxins) which cause illness and/or death in human animals or plants.

Physician means TIC's medical director or a person who is legally qualified and licensed to practice medicine or perform surgery.

Please note

The **physician** cannot be related to you.

Pre-existing Condition means a **sickness, injury** or medical condition whether diagnosed or not by a **physician**:

- for which you had symptoms; **or**
 - for which you required or received medical attention, consultation or **treatment**;
- and**
- which existed prior to any **departure date** or **effective date** of your coverage.

Province means your **province** or territory of usual residence in Canada at the time of application.

Reasonable and customary charges are the amounts we believe are not in excess of the standard charges for the level of care, services or supplies usually given for similar cases in the place where the **emergency** took place.

Recurrence means the appearance of symptoms caused by or related to a medical condition which was previously diagnosed by a **physician** or for which **treatment** was previously received.

Sickness means any illness or disease.

Spouse means a person who is:

- legally married to you;
- in a civil union with you; **or**
- a partner who has been living with you and who has publicly represented himself or herself as your **spouse** for **at least 12 months**.

Terminal means a **sickness** or medical condition for which a **physician** gave a prognosis of eventual death or for which palliative care was received, prior to the **insured trip**.

Termination Date means the earliest of the date:

- you return to your **province**; **or**
- the numbers of days of coverage you purchased expires.

Travelling companion under Emergency Travel Medical Insurance is someone with whom you have common departure and return dates, and trip destination.

Treatment means a medical, therapeutic or diagnostic procedure prescribed, performed or recommended by a **physician** including but not limited to:

- prescribed medication;
- investigative testing;
- surgery.

Unstable Condition means a **sickness** or **injury**, which would cause an ordinarily prudent person to expect the need for **treatment** or investigation following departure.

Vehicle means a private passenger car, sport utility **vehicle**, pick-up truck or mini-van which is used for personal pleasure purposes and not for commercial use.

Please note

The **vehicle** must be owned or rented by you, or borrowed from a member of your **extended family**, or supplied to you by your employer for personal use.

We, Our, and Us means TIC Travel Insurance and/or Co-operators Life Insurance Company.

You and Your means the **insured**.

III. DESCRIPTION OF THE PRODUCT OFFERED

1. Nature of the Coverage

CIBC Emergency Travel Medical Insurance is designed for Canadian residents who will be covered by a Canadian Government or Provincial Health Insurance Plan for the entire duration of their insured trip. To purchase this coverage, you must be travelling out of the **province** or territory where you live. This insurance covers certain **hospital** and medical costs if you become sick or injured. The **sickness** or **injury** must be the result of an **emergency**.

2. Summary of Specific Features

a. *Emergency Travel Medical Insurance*

What are my options?

Emergency Travel Medical Insurance can be purchased:

- on a per-trip basis; **or**
- as a multi-trip **Annual Plan**:
 - 15 day option (covers 15 days outside of your province or territory of residence at a time)
 - 31 day option (covers 31 days outside of your province or territory of residence at a time)

What is covered?

The coverage pays up to **\$2 million** per **insured** person for each new and unforeseen **sickness** or **injury** you incurred as a result of a medical **emergency** while on an **insured trip**.

This insurance covers expenses in excess of:

- any deductible amount specified on your **Confirmation of Coverage**;
- any amount covered by your Canadian government health insurance plan; **and**
- any amount covered by other insurance you may hold.

Please note

There are specific maximums for certain covered expenses. These maximums are set out in the Benefits section against the benefit to which the maximum is applicable.

Am I eligible?

1. You are eligible if you:

- are a resident of Canada;
- are not employed outside Canada on a full or part-time basis, unless you will be receiving Canadian wages from a Canadian employer and your employment outside of Canada is less than 30 days during a one year period;
- covered for benefits under a Canadian Government or Provincial Health Insurance Plan for the entire **insured trip**;
- **and**
- you have paid the required premium in full and are travelling outside your **province**.

2. You are eligible for the **Annual Plan** if:

- you meet the eligibility criteria above; **and**
- you are not employed outside Canada on a full or part time basis. This particular eligibility requirement does

not apply to you if:

- at the time you purchased the **Annual Plan** you paid a premium surcharge to have this eligibility requirement removed;
- each of the following applies with respect to your employment outside of Canada:
 - it is for a Canadian employer;
 - you will be receiving wages from such Canadian employer;
 - it is less than 30 days during any one year period.

When do I have to answer medical questions and have my health history reviewed?

You must answer medical questions and your health history will be reviewed in any of the following situations:

- you are between the ages of 55 and 74 inclusive and travelling for 23 days or more;
- you are 75 years of age or more;
- you want coverage for **pre-existing conditions**.

In any such situation, based on your answers, your age and medical history, you will be:

- given the option to pay extra to have the specific medical condition(s) covered;
- given the option to be insured, but without being covered for the specific medical condition(s);
- declined for coverage.

When does my coverage start?

Provided the appropriate premium has been received by us, your coverage begins on the latest of:

- the date indicated on your **Confirmation of Coverage**;
- the date you first exit your **province**.

Please note

If coverage is purchased after your **departure date, emergency sickness**-related benefits will be effective 48 hours after the date and time the premium is received by us.

When does my coverage end?

If you purchase the **Annual Plan**, your coverage ends 365 days after it starts.

Otherwise, your coverage ends on the earliest of:

- the date you return to your **province**;
- the number of days of coverage you purchased expires.

Where am I covered?

You are covered worldwide.

Benefits 1. Hospital & physician’s bills – Reasonable and customary charges

We will cover **reasonable and customary charges** for **emergency treatment** and related expenses resulting from an accidental **injury**, or new **sickness** or disease that started during the **insured trip**.

Please note
Emergencies related to **pre-existing conditions** will only be covered if you have received written confirmation that your **pre-existing conditions** are covered.

2. Ground ambulance, emergency return home by regular flight/air ambulance – Reasonable and customary charges up to \$250,000

We will cover **reasonable and customary charges** to transport you to the nearest medical facility or to a Canadian **hospital**.

Caution
If pre-approved by **CIBC Travel Assistance**, this benefit is payable to the following maximums:
• \$250,000 for air ambulance;
• \$25,000 for regular flight upon prior approval; or
• \$3,000 for ground ambulance.

3. Return to original trip destination – One-way economy airfare

We will cover the cost of a one-way economy airfare to return you to your original trip destination if:

- you were returned home by regular flight under benefit #2 listed above;
- your attending **physician** in Canada determines that the **treatment** you received at home resolved your **emergency**; and
- you have received prior approval from **CIBC Travel Assistance**.

Caution
• Your return must be within the period of coverage under the **insured trip** under which the benefit was utilized; and
• Your return airfare must be arranged by **CIBC Travel Assistance**.

Please note
A **recurrence** or complication of the condition that caused you to be returned home under benefit #2, will not be covered under this certificate.

4. Paramedical services – Reasonable and customary charges up to \$300

We will cover **reasonable and customary charges** to a maximum of \$300 for the services of:

- a chiropractor;
- a chiropodist; or
- a physiotherapist

if required as a result of your **emergency**.

5. Dental treatment – up to \$2,000

We will reimburse you, to a maximum of \$2,000, for expenses associated with and related to damage to your sound natural teeth as a result of a direct accidental blow to the mouth while on your trip.

Please note

Expenses must be incurred within **90 days** after the ***injury*** and prior to your return to Canada.

6. Relief of dental pain – up to \$200

We will cover the cost of ***emergency treatment*** of dental pain.

Please note

Expenses for dental pain must be incurred outside Canada and ***treatment*** must be unrelated to a dental accident. Pain associated with root canals is not covered under this benefit.

7. Return of *dependent children/travelling companion* – up to \$2,000

If you return home under benefit #2 due to your ***emergency sickness*** or ***injury***, we will cover the cost of a one-way economy airfare to return:

- your accompanying ***travelling companion***; and
- your ***dependent children*** who are insured under **CIBC** Emergency Travel Medical Plan.

We will pay up to \$250 for incidental expenses that resulted from sending them home provided original receipts are submitted with your claim.

We will pay up to \$100 for:

- the care of your ***dependent children*** if they are left unattended because of your ***emergency*** hospitalization;
- for the cost associated with their return to Canada.

8. Return of accompanying dog or cat – up to \$300

We will cover the cost of returning your accompanying dog or cat to your ***province***, to a maximum of \$300, in the event you have been transported home under benefit #2 or #10 described in this guide.

9. Transportation to your bedside – Round trip economy airfare by most direct route

We will cover the pre-approved by **CIBC Travel Assistance** cost of transportation of a relative to your bedside if:

- you are hospitalized on an ***insured trip*** for a critical ***emergency***;
- your relative is required to identify you in the event of your death.

Please note

Your relative is not covered under your insurance, therefore should consider purchasing his/her own travel insurance.

10. Return of deceased – up to \$5,000

In the event of your death, we will cover the cost up to:

- \$5,000 to return your remains to your **province**;
- \$2,500 for cremation or burial at the place of death.

Please note

The cost of a coffin or urn is not covered.

11. Meals and Accommodation – up to \$150 per day to a maximum of \$1,500

We will cover your reasonable additional expenses when the return portion of your **insured trip** is delayed beyond the scheduled return date due to an **emergency** or death of your **extended family** member or **travelling companion**.

12. Vehicle services – up to \$1,000

We will cover expenses to return your **vehicle** to your residence or a rental **vehicle** to the nearest rental agency, if you or those travelling with you are unable to do so as a result of an **emergency**.

13. Incidental expenses – up to \$300

If you are hospitalized for an **emergency**, the insurance will cover incidental expenses while in **hospital**, such as:

- Telephone
- Television

14. Automatic extension of coverage – up to 72 hours

We will automatically extend coverage for up to **72 hours**, at no charge, if due to circumstances beyond your control your trip is delayed beyond your **termination date** due to:

- your emergency **sickness** or **injury**;
- a delay to your **common carrier**.

Please note

Other situations may be considered. You must provide documented proof acceptable to us in support of the cause for delay.

If you are hospitalized on your **termination date**, we will extend coverage to you and those travelling with you, who are also insured under this coverage for:

- the period you are in **hospital**;
- up to 72 hours following discharge.

15. Trip Break – up to 15 days

If you have requested and received prior approval from **CIBC Travel Assistance**, you may return to your **province** for up to **15 days** without terminating your coverage.

Please note

A premium refund will not be provided for the days that you are in your **province**.

16. Act of Terrorism

When any **act of terrorism** causes a loss within a **72-hour period**, the total sum payable for all eligible policies issued and administered by TIC will be **\$2.5 million**.

When any **act of terrorism** causes a loss within any calendar year, the total sum payable for all eligible policies issued and administered by TIC will be **\$5 million**.

3. CIBC Travel Assistance

CIBC Travel Assistance is available to all customers regardless of the coverage option purchased, 24 hours a day, 7 days a week.

Services include:

1. Monitoring your medical case and communicating with:
 - your attending **physician**;
 - your family **physician**;
 - employer;
 - travel **company**;
 - consulate.
2. Making travel arrangements for:
 - **emergency** medical transportation and treatment en route as requested by your **physician** and authorized by **CIBC Travel Insurance**;
 - escort and transportation home for stranded **dependent children** while you are in **hospital**; and/or
 - escort and transportation of other **extended family** members or friends while you are in **hospital**;
 - your return home if you get ill or injured;
 - services for the return of your remains, in the event of your death while on a trip.
3. **Confirmation of coverage** and **emergency** medical payment directly to the **hospital** or medical facility, whenever possible.
4. Co-ordination of benefits with your Canadian Government or Provincial Health Insurance plan when appropriate.

Other services which can be provided include:

1. **Baggage**
If your baggage is lost, stolen or delayed while you are using a **common carrier**, we can provide advice on:
 - proper reporting procedures; and
 - helping you maintain contact with other companies and authorities to resolve your issue.
2. **Emergency Cash**
In the event of an **emergency**, we can arrange for cash to be available to you through:
 - a friend;
 - a family member;
 - a business or your credit card.

3. **Emergency Message Services**

We can take **emergency** messages from you or for you.

4. **Emergency Ticket Replacement**

We can help you replace lost or stolen airline tickets.

5. **Replacement Prescription Drugs**

When permitted by law and with approval from your **physician**, we can assist you with obtaining prescription medication or other personal medical items which were:

- forgotten;
- lost; or
- depleted while travelling.

6. **Legal Services**

We can help you with legal services or contacting a consular officer if you are:

- arrested or detained;
- in a traffic accident; or
- in need of legal help.

7. **Bail Bond Services**

We can coordinate bail bond services for you in all locations where they are available.

Please note

Any expenses incurred or related to the seven other services listed above are not covered under the insurance.

You can also take advantage of the following pre-trip information by calling **CIBC Travel Assistance** at 1-800-848-8454:

- Passport and Visa information
- Health hazards advisory
- Inoculation requirements
- Weather information
- Currency exchange information
- Consulate and embassy information
- Translation and interpreter services

4. Exclusions, Restrictions and Benefit Reductions

CAUTION

General Limitations and Exclusions

We will not pay for losses or expenses incurred for, or as a result of:

1. *sickness* or *injury* or loss occurring while this insurance is not in effect.
2. any investigation or *treatment* recommended or scheduled prior to any *departure date*.
3. *sickness* or *injury* when travel is booked or commenced:
 - against medical advice;
 - with prior knowledge of an *unstable condition*; **or**
 - after determination of a *terminal* condition.
4. a) childbirth;
b) miscarriage;
c) deliberate termination of pregnancy; **or**
d) any complications related to pregnancy occurring within 8 weeks of the expected delivery date.
5. *treatment*, death or *injury* related to:
 - misuse of medication;
 - abuse of drugs or intoxicants.
6. suicide, attempted suicide or self-inflicted injury or whether sane or insane willful exposure to peril except in an attempt to save a human life.
7. any *nuclear* occurrence however caused.
8. committing or attempting to commit any criminal or illegal act as defined by local laws.
9. practicing for or participating in:
 - sanctioned competitive sports;
 - any contest of motorized speed.

Please note

For Emergency Travel Medical Insurance, you may pay a premium surcharge to have this exclusion removed. No written confirmation is required if a surcharge is paid.

10. *injury* or loss while practicing for or participating in any *high risk activity*.
11. asymptomatic or symptomatic:
 - HIV infection;
 - Acquired Immune Deficiency Syndrome (AIDS); **or**
 - Acquired Immune Deficiency Syndrome Complex.
12. air travel unless you are a passenger in a commercial aircraft with a seating capacity of six people or more, that is licensed to carry passengers for hire.

CAUTION

What is NOT covered by Emergency Travel Medical Insurance:

In addition to General Limitations and Exclusions listed above, we will not pay for losses or expenses incurred for, or as the result of:

1. **any *pre-existing condition* unless you have:**
 - applied for and qualified for *pre-existing condition coverage*; **and**
 - received a *Guarantee of Coverage* from us.
2. **any dental *treatment* or *treatment* for relief of dental pain provided in Canada.**
3. ***treatment* where you specifically purchased this insurance to obtain such *treatment* whether or not it was recommended or authorized by a *physician*.**
4. **medical examination, *treatment*, care or services which can be delayed until you return to Canada. Your return to Canada would have to be by the next available means of transportation.**
5. **medicines or drugs that the government authority has not yet approved for use including:**
 - experimental drugs;
 - preventative, patent or proprietary medicines;
 - vaccines;
 - vitamin preparations; **and**
 - any drugs and medicine that can be purchased over the counter.
6. **major medical or surgical procedures including but not limited to cardiac surgery, which are not approved in advance by *CIBC Travel Assistance*.**
7. **a *sickness* or *injury* related to a change in your *pre-existing condition* for which you have received a *Guarantee of Coverage*.**

Please note

This exclusion applies only if you fail to notify us of the change in your *pre-existing condition* prior to your *departure date* or the *effective date* of any top-up or extension.

8. **any *treatment*, investigation, or hospitalization which is a continuation of or subsequent to an *emergency*.**

Please note

This exclusion does not apply if you have been declared medically unfit to return to Canada by *CIBC Travel Assistance*.

9. **expenses incurred for:**
 - eye examinations;
 - the replacement of lost or damaged eyeglasses;
 - contact lenses;
 - hearing aids.
10. **expense incurred for:**
 - non-emergency, investigative or *elective treatment*;
 - cosmetic surgery;

- **chronic care;**
- **rehabilitation; or**
- **any directly or indirectly related complications.**

11. **an act of terrorism caused directly or indirectly by:**

- **nuclear means;**
- **chemical means;**
- **biological means; or**
- **an act of war.**

12. **any loss occurring from any act of terrorism on an insured trip while you are at a destination where, prior to your *departure date* for that destination, a statement regarding terrorism is made in the 'Country Travel Reports' issued by the Foreign Affairs Canada, advising or recommending that Canadians should not travel to that destination.**

CAUTION

We reserve the right, to transfer you to any *hospital* or medical facility, or to transport you back to Canada following an emergency. If you refuse to be transferred or to be transported when declared medically fit to travel, any continuing costs incurred after your refusal will not be covered.

Caution: Restrictions & Benefit Reductions

An ***insured trip*** must start and end within the coverage period.

Maximum duration of an ***insured trip*** cannot exceed **212 days** unless you have written permission from your Canadian Government or Provincial Health Insurance Plan.

Hospital or medical benefits must be provided at the nearest facility capable of providing adequate service at the time of the ***emergency***, as determined by TIC.

We are not responsible for the quality, availability or results of any ***treatment*** or transportation.

Only the amount in excess of your Canadian Government or Provincial Health Insurance Plan will be paid.

Interest charges are not payable by the CIBC Emergency Travel Medical Insurance plan.

If you incur expenses due to the fault of a third party, we may take action against that party, in your name. This will require your full cooperation with us and we will pay for all the related expenses.

If we pay benefits to you that exceed your entitlement, we will advise you of the amount of this overpayment and you will have to repay that amount to us. If you do not, we may collect the overpayment amount from any further benefit payments due.

We may change coverage benefits when changes are required by law.

5. How to Change Your Coverage

You can make changes such as:

- adding or deleting a traveller or travellers from your coverage

- changing your dates of travel prior to departure

Just call **CIBC Travel Insurance** at 1-800-281-9109. Your premium will be recalculated. Charges or refunds may be required.

6. How to Extend or Top-up Your Coverage

What if I wish to extend my stay?

If you decide to stay longer than planned, call **CIBC Travel Insurance** prior to the **termination date**. You can purchase the extra number of days you need, provided:

- no event has occurred that may result in a claim
- there has been no change in your health

From Canada and the United States, including Hawaii, call (toll free) 1-800-281-9109
From anywhere else in the world, including Mexico, call collect at (416) 340-6524

How do I top up Emergency Travel Medical Annual Plan coverage?

If a trip **begins** during the coverage period but extends beyond the **expiry date**, you can purchase top-up coverage for any number of travel days after the expiry date as long as the total duration of the trip does not exceed the maximum trip length of **15 days** or **31 days** depending on the option you chose when you applied.

If you want to take a trip that is longer than the number of days you have selected under your **annual plan**, call **CIBC Travel Insurance** at 1-800-281-9109 and purchase the extra number of days you require.

Please note

Extended and top-up coverage are subject to a minimum premium requirement and is subject to the maximum trip duration set out in the Exclusions, Restrictions and Benefit Reductions section.

7. Cancellation & Refunds

When can we cancel this insurance?

We may cancel your insurance if at the time of application you have failed to disclose or you misrepresented any material fact or circumstance affecting coverage under the certificate.

We may terminate the certificate at any time by giving written notice to you and by refunding the premium paid less any days already used. Prior to doing so we will issue a notice of termination:

- delivered to you with **5 days'** notice of termination; or
- sent by registered mail to your latest address on record with **10 days'** notice beginning on the day following the date of mailing of the notice.

How do I cancel this insurance?

You can also cancel your policy by contacting TIC by telephone at 1-800-281-9109.

How can I obtain a premium refund?

You can cancel your policy any time prior to the **effective date** of the policy.

With the exception of the Annual plan, you may cancel your policy after the **effective date** and request an early return refund if and only if you are returning to your province or territory of residence before the expiry date of your policy.

If you cancel this insurance after the **effective date** we will only refund the unused portion of the premium, provided:

- there has been no claim;
- you have notified us within **7 days** of your return;
- all travellers covered under the same certificate must return together; and
- there are at least 15 days remaining on your policy after your return.

Annual plans cannot be cancelled after the **effective date**.

Refunds are subject to an administration fee of \$10.00 plus tax.

Please note

If you cancel within **10 days** from the receipt of the **CIBC Travel Insurance** certificate, your refund will not be subject to the administration fee of \$10.00 plus tax.

8. Proof of Loss or Claim

Within what time frame must I notify CIBC Travel Assistance of a claim?

If you require medical services you must call **CIBC Travel Assistance** immediately. You will be directed to the closest facility or **physician** in your area of travel. Failure to notify **CIBC Travel Assistance** will delay the processing and payment of your claim and may even limit the amount of your claim payment.

From Canada or the Continental USA including Hawaii, call toll free: 1-800-848-8454

From all other locations including Mexico, ask the operator to place a collect call to Canada at: (416) 340-7124.

How do I submit a claim and what documents must I submit?

- Call **CIBC Travel Assistance**, select the Claims inquiry option to obtain a claim form.
- Make sure you have original receipts for all expenses that you paid for.
- For the Emergency Travel Medical **Annual Plan**, you must submit proof of your **departure date**.
- If we purchase a new ticket to return you home, you must surrender your original unused transportation ticket.
- Submit a fully completed and signed claim form with all supporting documentation to:

TIC Claims and Travel Assistance

2100-250 Yonge Street
Toronto, ON M5B 2L7

Within what time frame must I provide supporting documentation for a claim?

Written documentation must be provided within **60 days** of the date of service. When submitting your claim, please ensure you have completed and included all required information and signed the claim form. Failure to do so may delay the processing and payment of your claim.

How will claims be paid?

All benefits and related amounts are expressed in Canadian currency. At our option, benefits may be payable in the currency of the country where expenses were incurred or in US currency.

All benefit payments are made by cheque to:

- you;
- your beneficiary;
- your estate; or
- directly to the provider of service.

If you have coverage with another insurer, we will co-ordinate benefits with them. We will request and share any information that is required to enable us to do so.

How long will it take before the Insurer replies to my Claim?

Our objective is to process your claim or to inform you of our decision within **10 business days** following the receipt of all the information required to process your claim.

How do I appeal the Insurer's Decision and what are my other recourses?

In the event that you are dissatisfied with our decision, you may present your claim to our Appeals Committee. The committee consists of regional Claims Managers and **physicians**. You should submit your appeals in writing with new and additional supporting documentation. Appeals can be sent to:

TIC Claims and Travel Assistance
2100-250 Yonge Street
Toronto, ON M5B 2L7

You have the option of consulting with your own lawyer or l'Autorité des marchés financiers.

You also have the option of contacting the following organizations:

- Better Business Bureau - www.bbb.org (enter your Canadian postal code to find the nearest office)
- Canadian Life and Health Insurance OmbudService - www.clhio.ca

9. Similar Products

Other insurance products on the market have similar coverage as that described in this Guide.

IV. REFERRAL TO L'AUTORITÉ DES MARCHÉS FINANCIERS

If you have any question regarding TIC's or the **insurer's** obligations towards you please contact l'Autorité des marchés Financiers at:

l'Autorité des marchés financiers
Place de la Cité, tour Cominar
2640, boulevard Laurier
4^e étage
Sainte-Foy (Québec) G1V 5C1

Québec City: (418) 525-0337
Montréal: (514) 395-0311
Elsewhere in Québec: 1-877-526-0337
Fax: (418) 647-9963
E-mail: renseignements-consommateur@lautorite.qc.ca
Website: www.lautorite.qc.ca

V. COLLECTION AND USE OF YOUR PERSONAL INFORMATION

In the event of a claim, TIC has the authority to obtain your pertinent medical records or information from any *physician*, dentist, *hospital* or clinic.

The personal information we collect from you is used to provide you with the insurance products and services you have requested. To protect your confidentiality, access to your personal information is restricted to those with the responsibility to provide the required insurance service(s).

When necessary, your information may also be shared with others such as:

- medical facilities;
- investigative agencies;
- insurance companies;
- other organizations/persons/entities.

Any such disclosure would be for the following reasons:

- to provide you with the requested insurance service(s);
- as authorized by you;
- as required by law.

CIBC may review your use of products and services in order to serve you better. **CIBC** may also tell you about other products and services through:

- direct mail;
- telephone;
- other means.

If you do not wish **CIBC** to do so, please let us know by calling 1-800-465-2422, if:

- you do not wish us to share your information within the **CIBC** Group of Companies;
- you do not want to receive direct marketing;
- you have questions;
- you would like a copy of **CIBC's** privacy policy.

If you would like a copy of Co-operators, Sovereign or TIC's privacy policy, please call us at 1-800-281-9109.

If you have any concerns or questions about how we handle personal information, contact the:

Compliance Manager
TIC Travel Insurance Coordinators Ltd.
2100 - 250 Yonge Street
Toronto, Ontario M5B 2L7
Fax: (416) 340-9868
Email: privacy@travelinsurance.ca

NOTICE OF CANCELLATION OF AN INSURANCE CONTRACT

NOTICE GIVEN BY THE DISTRIBUTOR

Section 440 of the *Act respecting the distribution of financial products and services*.

THE ACT RESPECTING THE DISTRIBUTION OF FINANCIAL PRODUCTS AND SERVICES GIVES YOU IMPORTANT RIGHTS.

- The Act allows you to cancel an insurance contract you have just signed when signing another contract, **without penalty, within 10 days of its signature**. To do so, you must give the insurer notice by registered mail within that period of time. You may use the attached form for this purpose.
- Despite the cancellation of the insurance contract, the first contract entered into will remain in force. Caution: it is possible that you may lose favourable conditions as a result of this insurance contract; contact your distributor or consult your contract.
- After expiry of the 10 day delay, you may cancel the insurance at any time; however, penalties may apply.

For further information, please contact the Bureau des services financiers at (418) 525-0337 (Quebec City region) or 1 877 525-0337 (elsewhere in Quebec).

NOTICE OF CANCELLATION OF AN INSURANCE CONTRACT

TO:

(Name of insurer)

(Address of insurer)

DATE:

(Date notice sent)

Pursuant to section 441 of the *Act respecting the distribution of financial products and services*, I hereby cancel insurance contract number:

(Number of contract, if indicated)

Entered into on :

(Date of signature of contract)

In:

(Place of signature of contract)

(Name of client)

(Signature of client)

The distributor must first complete this section. This document must be sent by registered mail.

Sections 439 to 443 of *An Act respecting the distribution of financial products and services* are reproduced on the back of this Notice.

A distributor may not subordinate the making of a contract to the making of an insurance contract with the insurer specified by the distributor.

The distributor may not exercise undue pressure on the client or use fraudulent tactics to induce the client to purchase a financial product or service.

439. A distributor that, at the time a contract is made, causes the client to make an insurance contract must give the client a notice, drafted in the manner prescribed by regulation of the Bureau, stating that the client may cancel the insurance contract within 10 days of signing it.

440. A client may cancel an insurance contract made at the same time as another contract, within 10 days of signing it, by sending notice by registered or certified mail.

Where such an insurance contract is cancelled, the first contract retains all its effects.

441. No contract may contain provisions allowing its amendment in the event of cancellation or termination by the client of an insurance contract made at the same time.

However, a contract may provide that the cancellation or termination of the insurance contract will entail, for the remainder of the term, the loss of the favorable conditions extended because more than one contract was made at the same time.

442. A distributor that offers financing for the purchase of goods or services and that requires the debtor to subscribe for insurance to guarantee the reimbursement of the loan must give the debtor a notice, drawn up in the manner prescribed by regulation of the Bureau, stating that the debtor may subscribe for insurance with the insurer and representative of the debtor's choice provided that the insurance is considered satisfactory by the creditor, who may not refuse it without reasonable grounds. The distributor may not subordinate the making of the contract of credit to the making of an insurance contract with the insurer specified by the distributor.

No contract of credit may stipulate that it is made subject to the condition that the insurance contract subscribed with such an insurer remain in force until the expiry of the term, or subject to the condition that the expiry of such an insurance contract will entail forfeiture of term or the reduction of the debtor's rights.

The rights of the debtor under the contract of credit shall not be forfeited when the debtor cancels, terminates or withdraws from the insurance contract, provided that the debtor has subscribed for insurance with another insurer that is considered satisfactory by the creditor, who may not refuse it without reasonable grounds.