

2026 EARLY BIRD Travel Insurance® Guide

DEADLINE
August 31, 2026



MEDIPAC TRAVEL INSURANCE

EARLY BIRD SPECIAL!



NEW CLIENTS SAVE UP TO 10%



Save up to 25%

Details on Page 9

Great Reasons to Buy

Early Bird Travel Insurance® – SAVE 5%!

Lock in your rates AND save 5% for all policies starting before June 30, 2027 when you apply before August 31. You can also enrol in our easy 4-instalment payment plan. *See page 9 for details.*

New Client Discount – SAVE up to 5% more!

If you're new to Medipac, you can SAVE up to 5% with our Claim-Free Advantage Discount. *See page 9 for details.*

Rewards – SAVE up to 20%!

Loyal clients can earn up to 10% with our Loyalty Credit, and up to another 10% if they remain claim free, with our Claim-Free Discount. *See page 9 for details.*

4-Season Annual Plan

Most Canadians take more than two trips every year. Add an Annual Plan to your main policy and SAVE! Apply once and travel year-round. Two options - coverage for unlimited trips up to 23 or 33 days each, extend if you need. *See page 12 for details.*



Medipac's Early Bird Double Guarantee

When you purchase Medipac Early Bird Travel Insurance®, we guarantee that if rates increase your rate is locked in and if your total premium decreases, we guarantee that you will be reimbursed for the difference.

the Medipac® Program!



MedipacGOLD – \$10 MILLION USD!

Five times the base plan coverage, 5 exclusive benefits and a \$50 deductible credit. PLUS coverage for emergency relocation, in-patient rehab, family and pets. BUY GOLD – your hedge against inflation and rising medical costs. Only \$197.

See page 10 for details.



Short Term Travel

Hopping across the border for a little shopping or taking a 10-day cruise? Do not take a chance by travelling without Medipac Travel Insurance!

See page 43 for details.

Pre-Existing Condition Coverage

Most clients with stable and controlled medical conditions can purchase Medipac and have full coverage for ALL such conditions. *Read the enclosed policy for details, beginning on page 28.*

Superannuates

The Public Service Health Care Plan (PSHCP) has limited travel coverage. Purchase Medipac for your entire trip and receive a premium credit (discount) **AND** an upgraded 40-day annual plan at no extra cost. We do not recommend topping up your PSHCP.

See page 14 for details.

Endorsed by the CSA and the Royal Canadian Legion

Medipac has been chosen as the exclusive Travel Insurance Partner of both the Canadian Snowbird Association and the Royal Canadian Legion. We're proud to have earned their trust, and we hope to earn yours!





MEDIPAC Travel Insurance

Buying travel insurance is serious business. Something as simple as tripping over your own feet can cause a catastrophic financial loss, especially if you are in the United States or Mexico. Almost every one of us has had some health issue but having one when travelling can prove to be very expensive, indeed.

When we travel outside of Canada, our provincial medical system is useless. Our provinces will only reimburse you between \$75 and \$1,100 per day of hospitalization outside Canada; most provinces reimburse only \$100 per day.

The **real** cost of a hospital stay, in the U.S. for instance, ranges from \$8,000 to \$40,000 **per day**. And then you have to pay for those pesky MRIs and CT scans and other costly medical tests, **and** drugs **and** doctors (usually several) all at very inflated prices. Medipac routinely settles bills in excess of \$100,000 and we receive dozens in excess of \$500,000.

As an example, let's say that you have some minor chest pain and it results in a visit to the hospital for five days. The total medical costs would be in the range of half a million dollars, really. Complicated surgeries and extended hospital stays can cost more than a million dollars, even in Mexico. Your provincial health care would usually reimburse you a paltry \$500. The very best provinces might reimburse you \$5,000. Who is going to pay the other \$495,000?

Medipac is your only real option!

Medipac travel medical insurance has exceptional benefits, no age limits, **full coverage** for most stable medical conditions, and we automatically provide **free** 24-hour access to our own dedicated medical professionals. **Medipac Assist** is your lifeline in the event of any emergency and we will help you to navigate foreign medical systems and protocols should you ever need us...AND we can, and will, get you home.

Medipac is more than just a travel insurance policy...much, much more!

Sincerely,

John Ross Quigley, CEO

*P.S.: Our 4-Season Annual Plan benefit includes coverage for additional trips anywhere in the world and also within Canada for up to **6 months**. I personally recommend it. You should also consider one of our upgrade plans – MedipacPLUS, MedipacMAX or MedipacGOLD – for even greater protection.*

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Important Insurance Tips

1. Always read your *Travel Insurance Policy (TIP)* before making your purchase decision, and ensure that you understand the coverages being offered, as well as the policy limitations and exclusions.
 - ✓ At Medipac, we're proud of our policy and always include it in our Guide so that clients have the opportunity to review it before buying. **Do not buy any plan without reading, and understanding, its policy first.**
2. Before you purchase any *TIP*, ask about the assistance services – most assistance companies are disinterested third parties that route medical emergency calls to call-centre clerks, rather than to medical professionals.
 - ✓ At Medipac Assist, **medical professionals will answer your calls** – much more expensive, of course, but we take our responsibilities seriously! Minutes can save lives.
3. Every *TIP* has limitations and conditions. Ensure that you understand the pre-existing condition clause of your *TIP*, and note that these conditions usually apply as of your departure date, not when you purchased the policy. If you purchase an annual plan, these conditions apply to the departure date of each and every trip.
 - ✓ Medipac's **90-day stability period** is one of the fairest and most liberal pre-existing condition clauses* in the industry.
4. The “definitions” section of some *TIPs* defines “treatment” as including “taking ANY medication.” So if you ARE taking a medication, you will NOT meet the requirements of their pre-existing clause and no coverage is provided for your condition, or anything related to it. Stability really does not matter in these *TIPs*, so beware!
 - ✓ The Medipac policy covers most stable and controlled conditions*, including those for which you take medication, provided they have been stable during the 90 days prior to your effective date. **Make sure you buy insurance that covers your medical condition.**
5. Many *TIPs* have different deductible choices. Deductibles are a good way in which to reduce your premium cost. However, only choose a deductible that you can afford.
 - ✓ Medipac offers deductibles from \$0 to \$10,000 USD, with **substantial savings!** See the other sections of this Guide for details, but always choose a deductible that you can afford.

*See Unstable *Pre-Existing Conditions* starting on policy page 5

Important Insurance Tips

6. If you plan to take more than one trip during the upcoming year, consider purchasing an annual plan, rather than applying for travel insurance before each trip. You can save time and money.
 - ✓ Medipac's 4-Season Annual Plans are perfect for seasoned and regular travellers who plan to travel more than once during the year, and the **savings can be significant!**
7. If your upcoming birthday places you in the next-higher age band, your premium can increase.
 - ✓ You can **save money by departing earlier** than planned, prior to your birthday. Even if you purchase a longer trip, your premium may be lower because you are now in a less costly age band.
8. A dangerous practice is to refuse treatment or not change a drug, despite your doctor's recommendation, because you think that it may affect your insurance.
 - ✓ This does not work. If a doctor recommends a change in drugs and you do not accept that change, an insurance company may treat this as an unstable pre-existing condition. A claim may not be paid for that condition. Please, just do what your doctor recommends and **do not sacrifice your health for insurance reasons.** Medipac can often provide full coverage if you contact us and explain your situation. See page 13 for information on Individual Underwritten Insurance.
9. Some travellers leave a few days earlier or return home a few days later than they originally expected, without advising their insurance company. What they do not realize is that statistically the two highest incidences of claim are at the beginning and the end of trips.
 - ✓ This means no insurance protection when it is needed the most. Many insurance plans will void your insurance if such information is withheld. **Call your insurance company if you have a change of plans.**
10. Many *TIPs* require proof of departure and return. Purchases at "duty free" and using credit cards on your first day away and upon your return home are convenient ways of establishing a record that can be retrieved later.
 - ✓ Medipac recommends using a passport for all of your travels, and asking that it be stamped upon entering and leaving any country. **That's indisputable proof!**

Safe Travelling!

Medipac Benefits

❖ Medipac Assist

- 24-hour, toll-free advice from our experienced medical professionals
- Caring assistance throughout any medical emergency
- Hospital, clinic and physician referrals


❖ Benefits up to \$2,000,000 USD including:

- Hospital and Emergency Room Expenses
- Doctor's, Physician's, Chiropractor's and other Practitioner's Care
- Air Ambulance, Ground Ambulance and Paramedic Fees
- Emergency Prescription Drug Coverage
- Return of Your Vehicle (including your trailer or motor home)
- Return of Your Spouse and/or Dependent Children to Canada
- Coverage for COVID-19

❖ Discounts and Credits (page 9)

- Claim-Free Discount (available to new clients, too)
- Loyalty Credit

❖ Coverage Options (pages 10-12)

- MedipacGOLD (recommended) 
- MedipacMAX
- MedipacPLUS
- 4-Season Annual Plans

❖ Individualized Underwritten Insurance (page 13)

- For individuals not eligible for Medipac's regular travel insurance plan
- To cover pre-existing conditions that do not meet our stability requirements

❖ Existing Insurance (page 14)

- Top-ups
- Co-insurance
- Federal Superannuate option

Discounts - Save with Medipac

Early Bird Travel Insurance Discount – Save 5%

Lock in your rates and save 5% on all policies for trips departing before June 30, 2027. Policies must be purchased by August 31. You can also enrol in our easy payment plan – pay 25% of your premium when you apply and 25% on August 15, September 15 and October 15. *Where an application is processed after an instalment date, missed payments will be combined.*

Loyalty Credit – Save up to 10%

Medipac is continually working to save money for our clients. As one of our loyal Medipac clients, you can now save up to 10% off of your travel insurance; you will receive a 1% premium credit for each consecutive year in which you purchase Medipac for up to ten years or a total Loyalty Credit of 10%.

Note: If you were unable to travel in any particular year, advise us in writing. Medipac may still allow a Loyalty Credit.

Claim-Free Discount – Save up to 10%

Each year, thousands of Medipac clients qualify for substantial savings under our Claim-Free Discount program – saving hundreds, if not thousands of dollars! Medipac clients will receive a 1% Claim-Free Discount for each consecutive year they purchased Medipac and did not submit a claim, to a maximum of 10%. Also, protect your Claim-Free Discount with MedipacGOLD, MedipacMAX or MedipacPLUS (see page 10).

Note: A claim less than your deductible is not considered a claim for discount purposes.

Combine all of the above discounts to save up to 25%.

Save up to 30% in PEI, Nunavut, the Northwest Territories and the Yukon, under our provincial discount program.

NEW to Medipac? You too can save up to 10%!

As a NEW Medipac client, you may be eligible for Medipac's 5% **Claim-Free Advantage Discount**. This is in addition to the 5% Early Bird Travel Insurance Discount.

If you have not been hospitalized and have not made a travel medical insurance claim for the past three consecutive years, you may be entitled to savings under this unique program.

Your discount will be based on the number of consecutive years in which you have not made a claim. The initial discount is 3% and will increase by 1% for each additional claim-free year to a maximum of 5%. You must provide Medipac with a written statement confirming the number of years you have not been hospitalized and have remained claim free.

Discounts do not apply to 4-Season Annual Plan rates, MedipacGOLD, MedipacMAX or MedipacPLUS.



Medipac has always been the gold standard of travel medical insurance. In this era where medical inflation and economic uncertainty are at an all-time high, we're launching the most significant enhancement to our plan to date. Introducing:

MEDIPAC GOLD

5X the base plan coverage – \$10,000,000 USD – with even more coverage and more benefits!

For **ONLY \$197**, MedipacGOLD includes a \$50 deductible credit and double the coverage of MedipacMAX, yet it costs just \$50 more.

MedipacGOLD provides enhanced protection to manage today's uncertainty, and meaningful benefits that help ensure a safe recovery with family nearby. MedipacGOLD includes benefits to bring your family to your bedside in the event that you are hospitalized, whether in hospital in Canada or abroad.

If you need medical evacuation, we'll help your luggage and your best friend (your pet) get home too! Your endorsement also provides support for temporary relocation in the event of an environmental disaster.

MedipacGOLD is a **must-have** for all travellers.

MedipacGOLD Exclusives:

- **\$10,000,000 USD Policy Maximum**
→ Including COVID-19.
- **\$50 Deductible Credit**
→ Reduce your deductible for valid claims.
- **\$5,000 Bring Family to Bedside**
→ Bring a family member to your bedside when you need it the most.
- **\$10,000 Enhanced Private Duty Nursing**
→ Increased benefits for nursing care.
- **\$1,500 Emergency Pet Transport**
→ Don't leave your best friend behind.
- **\$1,000 Emergency Pet Boarding**
→ Protection for your pet during an emergency back home.

Additional Enhanced Benefits:

- **\$15,000 CAD Accidental Death**
- **\$10,000 Emergency Relocation Benefit**
→ If your vacation home is uninhabitable in a disaster.
- **\$6,000 Inpatient Rehabilitation**
→ Coverage for inpatient recovery.
- **Claim-Free Discount Protection**
→ If you have a claim, you'll lose your discount. Protect it and keep saving!
- **\$5,000 CAD Return to Canada**
→ Have an emergency back home? Support to help you get back quickly.
- **\$2,500 CAD Canadian Hospitalization**
→ Hospitalized when you get back home? Support to cover those unforeseen costs.
- **\$1,500 CAD Excess Luggage**
→ If you're medically evacuated, make sure your belongings follow.

Select Coverage

	MEDIPAC GOLD	MEDIPAC MAX	MEDIPAC PLUS
Benefits	Essential	Expanded	Basic
Policy Maximum (USD)	\$10,000,000 ★ 5x base plan	\$5 Million COVID coverage included	\$5 Million \$2M limit on COVID
★ MedipacGOLD Exclusives			
Save on Your Deductible	\$50 credit ★ exclusive	X	X
Enhanced Private Duty Nursing	Up to \$10,000 ★ exclusive	X	X
Enhanced Family to Bedside	\$500/day up to \$5,000 ★ exclusive	X	X
Emergency Pet Transport	Up to \$1,500 ★ exclusive	X	X
Emergency Pet Boarding	Up to \$1,000 ★ exclusive	X	X
Included in MedipacGOLD & MedipacMAX ONLY			
Return to Canada + Expenses (CAD)	Up to \$5,000	Up to \$2,500	X
Canadian Hospitalization (CAD)	\$250/day up to \$2,500	\$100/day up to \$1,000	X
Excess Luggage Return (CAD)	Up to \$1,500	Up to \$500	X
Included in all three plans			
Accidental Death (CAD)	\$15,000	\$7,500	\$3,000
Emergency Relocation	Up to \$10,000	Up to \$5,000	Up to \$2,500
Inpatient Rehabilitation	Up to \$6,000	Up to \$3,000	Up to \$1,500
Claim-Free Discount Protection	✓ Included	✓ Included	✓ Included
Premium	\$197	\$147	\$59

Terms and conditions on page 40.

4-Season Annual Plan

Buy and fly. Or drive. And SAVE.



You probably take more than one trip every year; most Canadians do. Whether to the U.S., abroad, or within Canada, every trip comes with risks.

The problem: applying for travel insurance for every trip is time consuming, even costly.

The solution: the 4-Season Annual Plan.

Apply only once and travel with proper coverage on all of your trips this year!

Even if you only take two trips, usually upgrading with the **4-Season Annual Plan is less expensive** than purchasing two separate policies. Check for yourself; rates start on page 16.

Options

Buy it as a standalone policy or as an add-on to a longer, single trip policy.

Two options are available: a 23-day and a 33-day policy. Each covers **unlimited trips** within the year of **up to 23 or 33 days** each, respectively. If you need more time, you can call for an extension.

Canadian Bonus (~\$200 value)

The 4-Season Annual Plan isn't just for crossing the border, it's for all travel outside your province or territory of residence. Each policy covers **unlimited trips within Canada**, for **up to 182 days** each.

Features

- You can choose to have your 4-Season Annual Plan begin at any time between your purchase date and your Effective Date of Insurance, if adding it to a single trip policy.
- If you need to extend or top up a trip under your 4-Season Annual Plan, call us before you leave.

Fine Print

In order to add the 23-day option to your main trip policy, your main policy must cover a minimum of 22 days. Similarly, for the 33-day option, your main policy must cover a minimum of 31 days.

While you are not required to notify Medipac of each departure date (other than your main trip), You will be required to provide proof of departure in the event of a claim.

Read the policy for additional terms and conditions.

4-Season Annual Plan rates can be found at the bottom of all rate tables - see page 43 for short term rates.

The 4-Season Annual Plan trip days cannot be combined together with the qualifying single trip days needed to purchase a 4-Season Annual Plan but can be used alone, extended, or topped up for every other trip.

The premium for the 4-Season Annual Plan cannot be refunded once coverage begins.

Individual Underwritten Insurance

For Applicants NOT Eligible for the Medipac Plan

As most of you know, Medipac is continuously searching for new ways in which to make comprehensive travel insurance available to everyone.

Some of Medipac's clients have also found it difficult, if not impossible, to purchase proper travel health insurance due to a recent change in their medication, a change in their health status or because of hospitalization during the past year.

Medipac may be able to help – ask about our Individual Underwritten Insurance.

If you do not qualify for the Medipac plan, or if you want coverage for a “pre-existing condition” that would otherwise be excluded, we invite you to call our Specialty Services department at **1-877-888-5259** and ask for our Individual Underwritten Application. Once your completed application and medical questionnaire have been received by Medipac our medical staff will assess your medical information and, if approved, provide you with an individual quotation.

Our Individual Underwritten Insurance has brought the Medipac plan to thousands of snowbirds and travellers who were previously unable to purchase insurance anywhere.

For those of you who must apply for our Individual Underwritten Insurance, your Claim-Free Discount and Loyalty Credit still apply.



Existing Insurance? Reduce Your Cost

If you are one of the many travellers who already have some form of travel medical insurance, but with limited coverage, you can choose to modify your plan with Medipac Travel Insurance.

Co-insurance – If your existing policy provides coverage for your whole trip, but includes a co-insurance feature that requires you to pay a percentage of any bill (typically 20%), Medipac may be able to pass on significant savings with our Co-insurance Program. Call Medipac and request a special Co-insurance Application Supplement.

Lifetime Maximum – Many retirees have medical plans with limited lifetime maximums. If you have such a plan, you may choose to use a portion of your benefits under the plan to pay your Medipac deductible and, by choosing a \$5,000 or \$10,000 deductible, you can substantially reduce your premium. Payment of your deductible will be required up front.

Top-up Options – If you have an existing policy that provides for a limited number of travel days, you can have your Medipac policy begin on the day your other coverage expires. Simply select the Effective Date on which you want your Medipac policy to begin and pay the premium for the extra number of days you need to complete your trip. This is called “topping up.”

WARNING: In all top-up plans, eligibility conditions and pre-existing conditions will apply as of the effective date of your Medipac Travel Insurance Policy, NOT on your date of departure. If you have a change in your health prior to Medipac's Effective Date of Insurance, you must contact Medipac for a full review.

Save with Federal Superannuate Credits

Retired federal civil servants, military personnel and retired RCMP officers who participate in the Public Service Health Care Plan (PSHCP) are provided with up to \$1,000,000 CAD in basic travel medical benefits, for the first 40 days of any trip.

Some Superannuates choose to top up their insurance coverage, but if they purchase Medipac for the entire duration of their trip with a \$1,000,000 deductible for the first 40 days, they are covered from their date of departure with Medipac's maximum policy benefit of \$2,000,000 USD and receive a Federal Superannuate Coverage Credit towards their premium. In addition, they receive an out-of-country, 40-day annual plan at no extra cost. The annual plan begins on the Effective Date of Insurance and will be subject to the same deductible for each trip.

Why choose the credit:

- Double the benefit
- Premium discount for existing coverage
- 40-day, out-of-country annual plan at no extra cost
- Coverage from day one of your trip
- Additional benefits not provided by PSHCP
- 24-hour emergency assistance from Medipac Assist

FEDERAL SUPERANNUATE CREDITS - AVAILABLE FOR TRIPS OVER 40 DAYS

Age Bands	Up to 55	56 to 60	61 to 65	66 to 70	71 to 75	76 to 79	80 to 85	86 PLUS	
Deductible	\$99	\$ 45	\$ 82	\$ 113	\$ 158	\$ 188	\$ 308	\$ 413	\$ 672
	\$1,000	38	70	101	141	152	280	378	588
	\$5,000	28	54	77	111	124	202	278	448
	\$10,000	20	42	58	75	89	131	208	311

Medipac provides coverage for emergencies that occur on the dates on which your Medipac policy is in effect, and not for any other period of time. We strongly recommend that you carefully review and understand your other coverage.

Peace of mind is a phone call away

The Medipac Assistance “hotline” is a very important service for our clients. Should you ever need to call, you will speak directly with one of our medical professionals who are trained and experienced in critical care. Often, all that is required is some reassurance and help with setting up a doctor’s appointment. On many occasions, our medical staff has persuaded clients to seek immediate emergency medical attention and not to “wait until the weekend is over.” Our medical professionals can also help you deal with a sometimes intimidating foreign medical system and help prevent unnecessary expenses when you have a large deductible.



Some of your comments about our Medipac Program

“I am writing to you to express our appreciation for the exemplary service that we received when applying for Health Insurance when travelling out of country. It feels good to know that we can now go on our trip with no worries.”

George, Pearl and Debbie

“Our experience with Medipac has been truly amazing. Going through an emergency situation is scary and so many uncertainties...the Medipac team truly made everything so easy and calming for us. Thank you!”

Monique

“We’ve heard horror stories over the years regarding insurance claims but that was not the case with Medipac. We certainly will continue to recommend Medipac to other Canadian travellers.”

Ken

“Thank you very much for your kindness during [my husband’s medical emergency]. Medipac is an amazing insurance company we have been using for 30 or more years but never had a claim but when we did you were there for us. Your soothing voice and assurance was a calming welcome for me.”

Ann

Preferred PLUS Rates - \$99 USD Deductible

For Short Term rates see page 43

Zero Deductible add 10%
to \$99 Deductible Rates

TRIP LENGTH	AGE BANDS							
	Up to 55	56 to 60	61 to 65	66 to 70	71 to 75	76 to 79	80 to 85	86 PLUS
41-50	\$ 204	\$ 278	\$ 338	\$ 381	\$ 580	\$ 785	\$ 1,417	\$ 2,677
51-60	240	328	387	450	694	947	1,641	2,907
61-66	283	388	473	554	796	1,127	1,840	3,289
67-75	333	469	547	656	936	1,292	2,193	3,705
76-82	377	507	591	719	1,038	1,409	2,503	4,064
83-90	416	545	616	796	1,121	1,575	2,723	4,358
91-96	437	581	676	894	1,243	1,813	2,961	4,604
97-105	485	622	707	954	1,374	1,946	3,109	5,158
106-112	530	663	757	1,044	1,488	2,104	3,339	5,611
113-120	581	745	842	1,098	1,632	2,294	3,638	6,178
121-126	632	815	948	1,196	1,750	2,437	3,962	6,677
127-135	677	893	1,055	1,282	1,889	2,534	4,192	7,126
136-142	714	968	1,151	1,353	2,020	2,696	4,517	7,735
143-150	745	1,016	1,222	1,446	2,195	2,905	4,846	8,236
151-156	789	1,055	1,299	1,562	2,376	3,088	5,062	8,742
157-165	845	1,121	1,365	1,628	2,489	3,217	5,217	9,149
166-175	914	1,176	1,418	1,722	2,639	3,321	5,398	9,667
176-183	947	1,217	1,492	1,834	2,833	3,539	5,749	10,242
184-190	1,043	1,311	1,599	1,906	2,956	3,637	5,912	10,982
191-200	1,154	1,455	1,725	2,044	3,330	3,913	6,472	12,024
201-212	1,328	1,694	1,971	2,324	3,841	4,324	7,244	13,489

Trips in excess of 183 days are available to residents of all provinces and territories except QC, PEI and NU.

4-SEASON ANNUAL PLAN RATES

Age Bands	Up to 55	56 to 60	61 to 65	66 to 70	71 to 75	76 to 79	80 to 85	86 PLUS
23-DAY	\$ 65	\$ 70	\$ 89	\$ 111	\$ 142	\$ 196	\$ 301	\$ 374
33-DAY	89	99	130	160	206	281	437	549

Preferred PLUS Rates - \$1,000 USD Deductible

For Short Term rates see page 43

TRIP LENGTH	AGE BANDS							
	Up to 55	56 to 60	61 to 65	66 to 70	71 to 75	76 to 79	80 to 85	86 PLUS
41-50	\$ 198	\$ 261	\$ 315	\$ 365	\$ 526	\$ 716	\$ 1,285	\$ 2,353
51-60	211	285	340	406	602	848	1,448	2,556
61-66	247	333	408	480	688	1,027	1,616	2,907
67-75	309	400	472	587	812	1,173	1,892	3,305
76-82	337	442	513	659	935	1,294	2,145	3,578
83-90	359	456	531	707	989	1,410	2,355	3,815
91-96	385	494	568	773	1,095	1,613	2,595	4,123
97-105	425	515	612	835	1,192	1,723	2,739	4,553
106-112	465	560	644	904	1,318	1,875	2,935	4,930
113-120	510	621	723	961	1,441	2,049	3,225	5,346
121-126	555	691	847	1,040	1,516	2,190	3,491	5,809
127-135	597	767	947	1,107	1,597	2,265	3,705	6,218
136-142	631	827	988	1,178	1,741	2,399	3,982	6,776
143-150	658	856	1,040	1,261	1,906	2,569	4,292	7,250
151-156	693	876	1,108	1,353	2,049	2,748	4,478	7,675
157-165	743	947	1,158	1,395	2,171	2,855	4,613	8,076
166-175	794	972	1,214	1,453	2,296	2,965	4,763	8,538
176-183	845	1,007	1,271	1,549	2,415	3,150	5,053	9,099
184-190	896	1,097	1,346	1,610	2,556	3,239	5,197	9,685
191-200	1,015	1,246	1,496	1,772	2,885	3,494	5,689	10,558
201-212	1,174	1,449	1,709	2,014	3,330	3,871	6,363	11,811

Trips in excess of 183 days are available to residents of all provinces and territories **except** QC, PEI and NU.

4-SEASON ANNUAL PLAN RATES

Age Bands	Up to 55	56 to 60	61 to 65	66 to 70	71 to 75	76 to 79	80 to 85	86 PLUS
23-DAY	\$ 55	\$ 68	\$ 80	\$ 95	\$ 119	\$ 173	\$ 262	\$ 325
33-DAY	72	89	116	136	172	251	385	481

Preferred PLUS Rates - \$5,000 USD Deductible

For Short Term rates see page 43

TRIP LENGTH	AGE BANDS							
	Up to 55	56 to 60	61 to 65	66 to 70	71 to 75	76 to 79	80 to 85	86 PLUS
41-50	\$ 174	\$ 216	\$ 269	\$ 317	\$ 447	\$ 594	\$ 1,005	\$ 1,918
51-60	184	255	311	366	534	708	1,171	2,152
61-66	221	303	351	443	610	821	1,372	2,444
67-75	257	352	403	526	698	936	1,590	2,804
76-82	291	378	433	578	762	1,029	1,763	3,003
83-90	320	410	476	627	812	1,139	1,917	3,156
91-96	337	446	516	695	894	1,286	2,119	3,394
97-105	373	471	548	738	963	1,363	2,200	3,943
106-112	406	499	590	788	1,059	1,479	2,370	4,150
113-120	438	561	646	845	1,181	1,623	2,606	4,574
121-126	467	613	742	910	1,273	1,740	2,813	4,870
127-135	489	655	786	927	1,371	1,800	2,956	5,270
136-142	513	698	828	978	1,453	1,919	3,168	5,749
143-150	546	718	867	1,034	1,573	2,066	3,415	6,083
151-156	578	741	921	1,112	1,679	2,184	3,562	6,463
157-165	608	782	975	1,147	1,764	2,251	3,621	6,798
166-175	653	823	1,005	1,220	1,835	2,345	3,814	7,168
176-183	693	847	1,029	1,295	1,990	2,505	4,065	7,582
184-190	743	923	1,103	1,339	2,098	2,581	4,196	8,147
191-200	831	1,048	1,194	1,450	2,360	2,781	4,597	8,881
201-212	908	1,221	1,376	1,650	2,721	3,089	5,149	9,967

Trips in excess of 183 days are available to residents of all provinces and territories except QC, PEI and NU.

4-SEASON ANNUAL PLAN RATES

Age Bands	Up to 55	56 to 60	61 to 65	66 to 70	71 to 75	76 to 79	80 to 85	86 PLUS
23-DAY	\$ 48	\$ 58	\$ 67	\$ 77	\$ 97	\$ 137	\$ 201	\$ 264
33-DAY	59	81	96	110	143	199	296	389

Preferred PLUS Rates - \$10,000 USD Deductible

For Short Term rates see page 43

TRIP LENGTH	AGE BANDS							
	Up to 55	56 to 60	61 to 65	66 to 70	71 to 75	76 to 79	80 to 85	86 PLUS
41-50	\$ 159	\$ 198	\$ 246	\$ 284	\$ 385	\$ 547	\$ 929	\$ 1,664
51-60	165	222	270	313	431	631	1,033	1,875
61-66	185	245	307	359	510	742	1,187	2,134
67-75	214	264	334	444	606	851	1,422	2,442
76-82	242	297	362	495	676	932	1,575	2,642
83-90	269	329	392	528	740	1,018	1,728	2,905
91-96	287	366	422	589	819	1,158	1,908	3,147
97-105	314	396	441	614	889	1,255	1,976	3,452
106-112	341	434	483	668	964	1,366	2,150	3,663
113-120	375	471	556	714	1,071	1,483	2,369	3,992
121-126	407	524	617	781	1,148	1,582	2,563	4,303
127-135	430	569	678	825	1,227	1,641	2,711	4,454
136-142	458	603	734	879	1,336	1,738	2,883	5,018
143-150	482	636	784	938	1,439	1,873	3,114	5,319
151-156	509	660	827	1,009	1,534	1,985	3,258	5,642
157-165	532	702	867	1,043	1,605	2,040	3,315	5,920
166-175	578	741	912	1,094	1,702	2,143	3,470	6,269
176-183	618	774	942	1,166	1,807	2,280	3,718	6,564
184-190	660	825	980	1,192	1,905	2,400	3,809	7,096
191-200	750	940	1,113	1,318	2,148	2,527	4,173	7,758
201-212	860	1,089	1,271	1,497	2,478	2,800	4,677	8,704

Trips in excess of 183 days are available to residents of all provinces and territories **except** QC, PEI and NU.

4-SEASON ANNUAL PLAN RATES

Age Bands	Up to 55	56 to 60	61 to 65	66 to 70	71 to 75	76 to 79	80 to 85	86 PLUS
23-DAY	\$ 44	\$ 52	\$ 59	\$ 67	\$ 84	\$ 115	\$ 168	\$ 210
33-DAY	49	73	83	96	121	168	247	312

Preferred Rates - \$99 USD Deductible

For Short Term rates see page 43

Zero Deductible add 10%
to \$99 Deductible Rates

AGE BANDS								
TRIP LENGTH	Up to 55	56 to 60	61 to 65	66 to 70	71 to 75	76 to 79	80 to 85	86 PLUS
41-50	\$ 398	\$ 484	\$ 578	\$ 851	\$ 1,155	\$ 1,498	\$ 2,219	\$ 3,934
51-60	514	564	695	1,010	1,350	1,742	2,510	4,537
61-66	548	628	775	1,098	1,510	1,954	2,934	5,055
67-75	604	727	885	1,224	1,683	2,153	3,360	5,699
76-82	706	781	947	1,299	1,844	2,390	3,808	6,275
83-90	781	845	1,010	1,397	1,966	2,648	4,141	6,875
91-96	828	905	1,095	1,523	2,139	2,939	4,692	7,578
97-105	888	991	1,215	1,652	2,398	3,169	5,080	8,312
106-112	940	1,104	1,367	1,785	2,640	3,455	5,485	8,963
113-120	1,018	1,243	1,538	1,919	2,840	3,726	5,972	9,598
121-126	1,084	1,355	1,738	2,060	3,109	3,932	6,483	10,273
127-135	1,177	1,467	1,882	2,196	3,367	4,220	6,898	10,962
136-142	1,266	1,619	2,036	2,348	3,625	4,503	7,331	11,545
143-150	1,331	1,761	2,232	2,507	3,841	4,804	7,827	12,507
151-156	1,409	1,914	2,392	2,660	4,083	5,093	8,160	13,437
157-165	1,501	2,059	2,529	2,785	4,354	5,345	8,542	14,182
166-175	1,617	2,212	2,685	3,022	4,628	5,631	8,936	14,937
176-183	1,715	2,345	2,849	3,297	4,869	5,912	9,345	15,693
184-190	1,882	2,511	3,036	3,584	5,277	6,332	9,877	16,479
191-200	2,104	2,777	3,291	4,381	5,948	6,833	10,794	17,861
201-212	2,438	3,148	3,843	5,074	6,655	7,390	12,056	19,976

Trips in excess of 183 days are available to residents of **all** provinces and territories **except** QC, PEI and NU.

4-SEASON ANNUAL PLAN RATES

Age Bands	Up to 55	56 to 60	61 to 65	66 to 70	71 to 75	76 to 79	80 to 85	86 PLUS
23-DAY	\$ 79	\$ 92	\$ 126	\$ 172	\$ 220	\$ 322	\$ 425	\$ 554
33-DAY	110	131	177	249	318	470	623	815

Preferred Rates - \$1,000 USD Deductible

For Short Term rates see page 43

TRIP LENGTH	AGE BANDS							
	Up to 55	56 to 60	61 to 65	66 to 70	71 to 75	76 to 79	80 to 85	86 PLUS
41-50	\$ 354	\$ 432	\$ 513	\$ 699	\$ 1,027	\$ 1,309	\$ 1,921	\$ 3,493
51-60	448	506	617	871	1,164	1,544	2,185	3,981
61-66	482	549	689	988	1,340	1,709	2,568	4,498
67-75	539	643	806	1,099	1,498	1,886	2,940	5,062
76-82	613	721	839	1,167	1,659	2,092	3,333	5,630
83-90	678	757	878	1,237	1,757	2,321	3,713	6,083
91-96	729	804	928	1,327	1,856	2,567	4,096	6,717
97-105	776	856	986	1,472	2,120	2,799	4,441	7,364
106-112	824	924	1,102	1,605	2,338	3,022	4,796	7,950
113-120	872	1,028	1,320	1,725	2,514	3,268	5,229	8,519
121-126	926	1,107	1,495	1,793	2,759	3,492	5,665	9,108
127-135	980	1,221	1,571	1,942	2,997	3,693	6,156	9,720
136-142	1,056	1,349	1,701	2,099	3,205	3,896	6,566	10,239
143-150	1,110	1,466	1,855	2,242	3,406	4,175	6,934	11,090
151-156	1,189	1,581	2,003	2,373	3,606	4,451	7,198	11,721
157-165	1,251	1,750	2,134	2,466	3,869	4,707	7,420	12,572
166-175	1,331	1,849	2,262	2,777	4,108	4,949	7,896	13,350
176-183	1,418	1,950	2,354	3,082	4,349	5,183	8,080	14,030
184-190	1,566	2,089	2,509	3,508	4,681	5,472	8,563	14,596
191-200	1,748	2,314	2,719	3,998	5,215	5,873	9,267	15,847
201-212	1,999	2,624	3,149	4,639	5,897	6,449	10,542	17,698

Trips in excess of 183 days are available to residents of all provinces and territories **except** QC, PEI and NU.

4-SEASON ANNUAL PLAN RATES

Age Bands	Up to 55	56 to 60	61 to 65	66 to 70	71 to 75	76 to 79	80 to 85	86 PLUS
23-DAY	\$ 65	\$ 75	\$ 109	\$ 141	\$ 177	\$ 255	\$ 346	\$ 482
33-DAY	89	107	156	202	258	371	509	714

Preferred Rates - \$5,000 USD Deductible

For Short Term rates see page 43

TRIP LENGTH	AGE BANDS							
	Up to 55	56 to 60	61 to 65	66 to 70	71 to 75	76 to 79	80 to 85	86 PLUS
41-50	\$ 280	\$ 344	\$ 431	\$ 579	\$ 814	\$ 1,053	\$ 1,557	\$ 2,854
51-60	357	400	490	716	970	1,226	1,794	3,229
61-66	392	443	552	793	1,080	1,392	2,035	3,583
67-75	422	516	614	872	1,199	1,540	2,399	4,136
76-82	504	560	653	938	1,330	1,689	2,716	4,616
83-90	557	595	700	985	1,410	1,895	2,941	4,960
91-96	588	645	769	1,059	1,486	2,088	3,336	5,485
97-105	627	706	868	1,177	1,705	2,267	3,598	5,998
106-112	668	781	995	1,275	1,872	2,459	3,892	6,459
113-120	725	890	1,137	1,360	2,015	2,640	4,250	6,947
121-126	773	963	1,262	1,471	2,221	2,799	4,642	7,420
127-135	819	1,049	1,336	1,529	2,406	3,021	5,017	7,934
136-142	903	1,168	1,486	1,662	2,567	3,197	5,345	8,366
143-150	953	1,252	1,587	1,798	2,736	3,427	5,655	9,052
151-156	1,003	1,357	1,707	1,910	2,906	3,628	5,875	9,726
157-165	1,071	1,496	1,847	2,166	3,105	3,837	6,170	10,268
166-175	1,141	1,588	1,965	2,398	3,337	4,041	6,416	10,895
176-183	1,216	1,645	2,053	2,599	3,438	4,233	6,608	11,422
184-190	1,337	1,789	2,198	2,836	3,755	4,458	6,965	11,915
191-200	1,499	1,978	2,382	3,175	4,191	4,859	7,552	12,930
201-212	1,736	2,241	2,592	3,521	4,734	5,482	8,590	14,378

Trips in excess of 183 days are available to residents of **all** provinces and territories **except** QC, PEI and NU.

4-SEASON ANNUAL PLAN RATES

Age Bands	Up to 55	56 to 60	61 to 65	66 to 70	71 to 75	76 to 79	80 to 85	86 PLUS
23-DAY	\$ 55	\$ 72	\$ 89	\$ 115	\$ 144	\$ 210	\$ 280	\$ 388
33-DAY	78	103	130	160	208	306	415	573

Preferred Rates - \$10,000 USD Deductible

For Short Term rates see page 43

TRIP LENGTH	AGE BANDS							
	Up to 55	56 to 60	61 to 65	66 to 70	71 to 75	76 to 79	80 to 85	86 PLUS
41-50	\$ 260	\$ 309	\$ 369	\$ 505	\$ 742	\$ 971	\$ 1,420	\$ 2,548
51-60	321	343	406	640	899	1,110	1,626	2,927
61-66	354	402	462	721	997	1,234	1,892	3,278
67-75	393	437	513	801	1,091	1,395	2,168	3,678
76-82	458	515	589	850	1,208	1,546	2,464	4,118
83-90	504	542	646	898	1,281	1,713	2,675	4,443
91-96	549	581	749	964	1,391	1,904	3,030	4,893
97-105	578	643	830	1,057	1,548	2,066	3,282	5,361
106-112	611	713	865	1,169	1,704	2,221	3,537	5,782
113-120	656	814	990	1,237	1,827	2,398	3,860	6,197
121-126	701	876	1,110	1,299	2,004	2,547	4,180	6,629
127-135	760	947	1,216	1,434	2,184	2,727	4,542	7,076
136-142	806	1,030	1,337	1,531	2,336	2,907	4,839	7,522
143-150	861	1,130	1,437	1,633	2,476	3,096	5,090	8,056
151-156	907	1,232	1,553	1,831	2,633	3,285	5,311	8,656
157-165	971	1,321	1,661	2,089	2,807	3,465	5,564	9,151
166-175	1,031	1,420	1,790	2,332	2,996	3,655	5,798	9,716
176-183	1,104	1,496	1,867	2,530	3,149	3,822	5,971	10,196
184-190	1,216	1,614	1,977	2,674	3,399	4,038	6,321	10,632
191-200	1,359	1,794	2,160	2,940	3,801	4,414	6,837	11,534
201-212	1,576	2,024	2,475	3,348	4,279	4,763	7,777	12,879

Trips in excess of 183 days are available to residents of all provinces and territories **except** QC, PEI and NU.

4-SEASON ANNUAL PLAN RATES

Age Bands	Up to 55	56 to 60	61 to 65	66 to 70	71 to 75	76 to 79	80 to 85	86 PLUS
23-DAY	\$ 48	\$ 63	\$ 78	\$ 99	\$ 123	\$ 179	\$ 234	\$ 318
33-DAY	68	93	117	149	179	261	343	470

Standard Rates - \$99 USD Deductible

For Short Term rates see page 43

Zero Deductible add 10%
to \$99 Deductible Rates

TRIP LENGTH	AGE BANDS							
	Up to 55	56 to 60	61 to 65	66 to 70	71 to 75	76 to 79	80 to 85	86 PLUS
41-50	\$ 511	\$ 540	\$ 762	\$ 939	\$ 1,264	\$ 1,790	\$ 2,770	\$ 4,687
51-60	542	720	899	1,099	1,528	2,174	3,222	5,298
61-66	645	837	991	1,245	1,776	2,460	3,603	6,122
67-75	685	928	1,121	1,444	2,039	2,711	4,023	6,959
76-82	786	1,063	1,256	1,564	2,328	3,096	4,396	7,723
83-90	882	1,141	1,338	1,730	2,497	3,476	4,922	8,511
91-96	930	1,195	1,435	1,870	2,661	3,773	5,340	9,396
97-105	1,033	1,316	1,646	2,150	3,051	4,098	5,882	10,485
106-112	1,147	1,453	1,782	2,378	3,387	4,441	6,316	11,338
113-120	1,198	1,587	1,920	2,537	3,555	4,763	6,793	12,197
121-126	1,283	1,726	2,079	2,684	3,732	5,084	7,353	12,768
127-135	1,365	1,822	2,310	2,946	4,077	5,415	7,984	13,913
136-142	1,498	1,894	2,463	3,130	4,412	5,740	8,635	14,823
143-150	1,572	1,995	2,622	3,371	4,846	6,065	9,201	16,279
151-156	1,628	2,126	2,761	3,543	5,252	6,464	9,899	17,236
157-165	1,741	2,298	3,058	3,730	5,777	6,878	10,832	18,657
166-175	1,873	2,442	3,348	3,960	5,978	7,341	11,649	19,878
176-183	1,960	2,633	3,624	4,215	6,298	7,859	12,193	20,575
184-190	2,092	2,898	3,981	4,698	7,034	8,660	13,297	21,718
191-200	2,442	3,263	4,519	5,157	8,117	9,652	14,866	24,120
201-212	2,845	3,621	5,161	5,997	9,405	10,994	17,081	26,783

Trips in excess of 183 days are available to residents of all provinces and territories except QC, PEI and NU.

4-SEASON ANNUAL PLAN RATES

Age Bands	Up to 55	56 to 60	61 to 65	66 to 70	71 to 75	76 to 79	80 to 85	86 PLUS
23-DAY	\$ 135	\$ 148	\$ 178	\$ 229	\$ 344	\$ 500	\$ 704	\$ 1,040
33-DAY	190	210	260	330	496	729	1,031	1,531

Standard Rates - \$1,000 USD Deductible

For Short Term rates see page 43

TRIP LENGTH	AGE BANDS							
	Up to 55	56 to 60	61 to 65	66 to 70	71 to 75	76 to 79	80 to 85	86 PLUS
41-50	\$ 409	\$ 522	\$ 664	\$ 764	\$ 1,134	\$ 1,594	\$ 2,487	\$ 4,066
51-60	455	613	778	948	1,356	1,922	2,854	4,559
61-66	499	691	892	1,079	1,553	2,183	3,191	5,241
67-75	554	794	1,011	1,233	1,771	2,399	3,548	5,979
76-82	622	860	1,099	1,362	1,976	2,796	3,891	6,611
83-90	710	915	1,172	1,499	2,153	3,101	4,354	7,310
91-96	750	976	1,277	1,643	2,366	3,382	4,699	7,909
97-105	876	1,063	1,416	1,878	2,624	3,642	5,195	8,995
106-112	922	1,170	1,546	2,072	2,876	3,981	5,584	9,748
113-120	969	1,277	1,637	2,211	3,110	4,269	5,998	10,483
121-126	1,025	1,365	1,791	2,398	3,364	4,539	6,503	10,966
127-135	1,105	1,433	1,989	2,591	3,650	4,862	7,053	11,957
136-142	1,207	1,522	2,146	2,727	3,844	5,136	7,642	12,749
143-150	1,260	1,576	2,273	2,928	4,237	5,436	8,130	13,996
151-156	1,316	1,661	2,406	3,089	4,578	5,776	8,757	14,839
157-165	1,396	1,810	2,659	3,239	5,036	6,167	9,566	16,040
166-175	1,509	1,965	2,924	3,451	5,215	6,559	10,297	17,088
176-183	1,575	2,101	3,109	3,720	5,498	7,057	10,763	17,690
184-190	1,680	2,335	3,420	4,091	6,130	7,758	11,754	18,922
191-200	1,962	2,625	3,743	4,453	7,077	8,652	13,139	20,336
201-212	2,290	2,915	4,427	5,239	8,197	9,855	15,100	21,094

Trips in excess of 183 days are available to residents of all provinces and territories **except** QC, PEI and NU.

4-SEASON ANNUAL PLAN RATES

Age Bands	Up to 55	56 to 60	61 to 65	66 to 70	71 to 75	76 to 79	80 to 85	86 PLUS
23-DAY	\$ 115	\$ 133	\$ 162	\$ 197	\$ 291	\$ 434	\$ 607	\$ 923
33-DAY	161	189	231	283	425	633	893	1,364

Standard Rates - \$5,000 USD Deductible

For Short Term rates see page 43

TRIP LENGTH	AGE BANDS							
	Up to 55	56 to 60	61 to 65	66 to 70	71 to 75	76 to 79	80 to 85	86 PLUS
41-50	\$ 362	\$ 459	\$ 562	\$ 666	\$ 860	\$ 1,265	\$ 1,955	\$ 3,390
51-60	382	498	621	777	1,071	1,559	2,263	3,846
61-66	456	606	713	878	1,257	1,737	2,548	4,427
67-75	486	697	812	998	1,442	1,932	2,823	5,045
76-82	545	749	882	1,099	1,628	2,197	3,102	5,599
83-90	617	797	973	1,223	1,766	2,453	3,483	6,154
91-96	659	841	1,049	1,329	1,929	2,666	3,774	6,679
97-105	761	932	1,178	1,518	2,156	2,887	4,155	7,592
106-112	811	1,027	1,270	1,675	2,366	3,136	4,467	8,197
113-120	855	1,123	1,369	1,792	2,517	3,335	4,799	8,849
121-126	906	1,226	1,482	1,910	2,666	3,569	5,197	9,265
127-135	967	1,273	1,621	2,061	2,888	3,813	5,640	10,046
136-142	1,054	1,336	1,737	2,214	3,114	4,105	6,099	10,742
143-150	1,110	1,379	1,855	2,388	3,433	4,279	6,469	11,796
151-156	1,158	1,459	1,945	2,496	3,714	4,561	6,996	12,530
157-165	1,230	1,599	2,159	2,630	4,027	4,867	7,568	13,528
166-175	1,324	1,725	2,361	2,789	4,226	5,181	8,234	14,414
176-183	1,386	1,851	2,569	2,999	4,485	5,563	8,623	14,870
184-190	1,476	2,049	2,815	3,324	4,969	6,119	9,394	15,690
191-200	1,707	2,297	3,178	3,646	5,723	6,815	10,498	17,895
201-212	2,001	2,559	3,646	4,236	6,643	7,671	12,067	19,377

Trips in excess of 183 days are available to residents of all provinces and territories **except** QC, PEI and NU.

4-SEASON ANNUAL PLAN RATES

Age Bands	Up to 55	56 to 60	61 to 65	66 to 70	71 to 75	76 to 79	80 to 85	86 PLUS
23-DAY	\$ 89	\$ 102	\$ 131	\$ 161	\$ 241	\$ 345	\$ 479	\$ 728
33-DAY	126	145	188	231	349	502	704	1,078

Standard Rates - \$10,000 USD Deductible

For Short Term rates see page 43

TRIP LENGTH	AGE BANDS							
	Up to 55	56 to 60	61 to 65	66 to 70	71 to 75	76 to 79	80 to 85	86 PLUS
41-50	\$ 326	\$ 402	\$ 486	\$ 621	\$ 779	\$ 1,171	\$ 1,774	\$ 2,967
51-60	347	455	565	711	1,015	1,414	2,054	3,390
61-66	404	528	629	792	1,157	1,570	2,309	3,898
67-75	440	618	730	912	1,305	1,713	2,571	4,453
76-82	494	662	790	998	1,448	1,941	2,825	4,942
83-90	564	712	849	1,089	1,616	2,167	3,154	5,444
91-96	612	760	940	1,212	1,737	2,414	3,429	5,879
97-105	673	836	1,073	1,372	1,931	2,597	3,764	6,588
106-112	735	922	1,165	1,517	2,146	2,843	4,039	7,234
113-120	770	1,015	1,244	1,624	2,286	3,038	4,349	7,797
121-126	804	1,101	1,346	1,720	2,402	3,249	4,697	8,175
127-135	878	1,142	1,444	1,851	2,606	3,465	5,112	8,785
136-142	960	1,209	1,575	1,999	2,825	3,717	5,520	9,492
143-150	1,007	1,257	1,679	2,150	3,097	3,882	5,885	10,428
151-156	1,045	1,318	1,768	2,267	3,362	4,113	6,311	10,982
157-165	1,114	1,427	1,957	2,386	3,628	4,393	6,931	11,926
166-175	1,196	1,548	2,145	2,531	3,820	4,702	7,438	12,697
176-183	1,256	1,691	2,324	2,720	4,039	5,010	7,809	13,176
184-190	1,340	1,855	2,551	2,998	4,503	5,543	8,498	13,867
191-200	1,562	2,086	2,889	3,299	5,196	6,178	9,466	15,412
201-212	1,821	2,318	3,298	3,847	6,020	7,032	10,931	17,140

Trips in excess of 183 days are available to residents of all provinces and territories **except** QC, PEI and NU.

4-SEASON ANNUAL PLAN RATES

Age Bands	Up to 55	56 to 60	61 to 65	66 to 70	71 to 75	76 to 79	80 to 85	86 PLUS
23-DAY	\$ 78	\$ 89	\$ 111	\$ 137	\$ 205	\$ 292	\$ 403	\$ 595
33-DAY	109	126	159	198	296	426	591	879



2026 Early Bird Travel Emergency Medical Insurance Policy

Please read the policy carefully.
Certain conditions, limitations and exclusions apply.

The following 11 pages contain
the actual policy text.

Underwritten by:
Old Republic Insurance Company of Canada

Policy Text

Please read this policy carefully for an understanding of the coverage provided. **You may cancel Your policy within 10 days of the purchase date with a full return of premium provided You have not departed on Your Trip and there is no claim in progress.** This policy is underwritten by Old Republic Insurance Company of Canada, which has appointed Medipac International Inc. (Medipac) to perform certain administrative services, including enrolment and customer service, and Medipac Assistance International Inc. (Medipac Assist) to perform all assistance and claims services. The *Company* will pay benefits specified subject to the exclusions, limitations, definitions and other provisions of this policy. For an understanding of the exclusions, please refer to “WHAT IS NOT COVERED” and “GENERAL LIMITATIONS”. The section titled “THE DEFINITIONS” provides an explanation of the words and phrases shown in italics.

This coverage is available to Canadian residents only and must be purchased prior to the Date of Departure and from within Canada. *You* must be covered under the Government Health Insurance Plan of the Canadian province or territory in which *You* reside. Family coverage is available to *You* (if under age 56), *Your Spouse* and *Your Children*. All family members must be named on *Your* Policy. *Children* must be accompanied by either *You* or *Your Spouse*. A *Spouse* over age 55 is not covered by a family policy.

This policy covers *Reasonable Expenses* incurred by *You* outside *Your* province or territory of principal residence; that result from a *Medical Emergency*, including COVID-19, occurring during the period of coverage (as explained below); and that *You* incur for *Medically Necessary Medical Treatment*.

This policy contains a provision removing or restricting the right of the insured to designate persons to whom or for whose benefit insurance money is to be payable.

This insurance policy is in force only if Medipac has received *Your* completed application and premium; *You* have met the policy eligibility criteria; and a policy has been issued.

PERIOD OF COVERAGE

For the **Single Trip Plan**, *Your* insurance coverage begins at 12:01 a.m. on *Your Effective Date of Insurance* as set out on *Your* application for insurance and cannot begin earlier unless *You* notify Medipac in advance. *Your* insurance ends on the earlier of: (a) 11:59 p.m. on the scheduled return date set out on *Your* application for insurance; (b) the date *You* return to Canada for any

medical reason. Once treatment ends *You* may apply to Medipac Assist to have *Your* policy reinstated. To be valid, a policy endorsement is required.

If, during the **Single Trip Plan**, *You* return to *Your* province or territory of residence for any other reason and resume travel, this insurance does not provide coverage for any *Medical Emergency* concerning, relating to, caused by or arising from any medical or physical condition for which *You* received *Medical Attention* while in *Your* province or territory of residence. The number of days *You* return to *Your* province or territory of residence cannot be refunded.

If *You* have purchased the **4-Season Annual Plan** in addition to the **Single Trip Plan**, then for every other *Trip*:

- 1. Outside Canada**, *Your* insurance coverage begins at 12:01 a.m. on each day *You* leave Canada during the 365-day period beginning on *Your Effective Date of Insurance*. *Your* coverage ends on the earlier of: (a) 364 days after *Your Effective Date of Insurance*; (b) the date *You* return to Canada; (c) 12:01 a.m. 23 days after the date *You* leave Canada (if *You* purchased the 23-day 4-Season Annual Plan); or (d) 12:01 a.m. 33 days after the date *You* leave Canada (if *You* purchased the 33-day 4-Season Annual Plan).
- 2. Within Canada**, *Your* insurance coverage begins at 12:01 a.m. on each day *You* leave *Your* Canadian province or territory of principal residence during the 365-day period beginning on *Your Effective Date of Insurance*. *Your* coverage ends on the earlier of: (a) 364 days after *Your Effective Date of Insurance*; (b) the date *You* return to *Your* Canadian province or territory of principal residence; or (c) 12:01 a.m. 182 days after the date *You* leave *Your* Canadian province or territory of principal residence.

The period of coverage is subject to the automatic extension provision explained in “WHAT HAPPENS TO MY INSURANCE COVERAGE IF I AM HOSPITALIZED AND CANNOT RETURN ON MY SCHEDULED RETURN DATE?”

The insurance coverage must be purchased for the entire duration of *Your Trip*, unless otherwise expressly stated in this policy.

If *You* have purchased the 4-Season Annual Plan in addition to the **Single Trip Plan**, *You* can extend any single *Trip* during *Your* policy's 365-day period. When extending *Your* 4-Season Annual Plan, the same coverage type and deductible option **MUST** apply. *Your* 4-Season Annual Plan cannot be used in combination with *Your* **Single Trip Plan**.

WHAT SHOULD I DO IF I NEED TO SEEK TREATMENT WHILE TRAVELLING?

You MUST notify Medipac Assist **PRIOR** to seeking *Medical Treatment* – keep *Your* policy number and the following telephone numbers easily accessible.

1-800-813-9374 (U.S. and Canada)

416-441-6337 (collect or direct from all other locations).

Failure to call Medipac Assist will result in reimbursement of only 75% of all eligible Covered Expenses to a maximum of \$50,000 USD.

If *You* are not able to call because *You* are medically incapacitated, *You* or someone on *Your* behalf **MUST** contact Medipac Assist as soon as reasonably possible. Do not assume that someone has called Medipac Assist on *Your* behalf; it remains *Your* responsibility to ensure that Medipac Assist has been contacted.

All medical procedures and/or tests (**including but not limited to** MRI, MRCP, CAT Scan, CT Angiogram, Nuclear Stress Test, Angiogram, Angioplasty or Cardiac Catheterization or **ANY** surgery) **MUST** be authorized by Medipac Assist in advance. Reimbursement is subject to the terms and conditions of this policy.

Whenever possible, Medipac Assist will:

- verify *Your* insurance coverage;
- direct *You* or transfer *You* to one of our network of *Hospitals*, *Physicians* or other medical providers and help to manage *Your* emergency medical claim;
- provide multilingual interpreters to communicate with *Physicians* and *Hospitals* in foreign countries;
- contact *Your* family and *Physician*;
- pay *Covered Expenses* directly to *Hospitals*, *Physicians* and other medical providers on *Your* behalf;
- monitor *Your* medical condition;
- arrange return transportation to a *Hospital* or an outpatient facility in Canada for continued medical care, if necessary.

A *Medical Treatment* plan will be developed to provide *Medically Necessary Medical Treatment* in a managed care setting.

You **MUST** provide authorization for the release of medical records and information from *Your* attending *Physician(s)* (including any test results, hospital and pharmaceutical records). No benefits will be payable under this policy without the required information.

THE DEFINITIONS

The following words have specific meanings:

“Children” means unmarried dependent sons or daughters, or grandchildren, who are under the age of 19 and are full-time students; or dependent sons, daughters or grandchildren of any age who are mentally or physically disabled. All *Children* must have been born at least 3 months prior to *Your Effective Date of Insurance* or *Your Trip Start Date*.

“Company” means Old Republic Insurance Company of Canada.

“Covered Expense” means *Reasonable Expenses* in excess of the Government Health Insurance Plan of the Canadian province or territory in which *You* reside, any other Insurance Plan with the same or similar coverage provided under this policy, or any private or provincial or territorial Auto Insurance Plan for supplies, treatment or services listed in The Benefits section subject to policy limitations.

“Deductible Amount” means the amount of *Covered Expenses* that *You* will be responsible for paying. The *Deductible Amount* applies only once during a *Single Trip* policy term and applies per *Trip* under the 4-Season Annual Plan. *Covered Expenses* are first paid by *Your* Government Health Insurance Plan; then *Your Deductible Amount* applies before any remaining *Covered Expenses* are paid under this policy. The *Deductible Amount*, if any, applicable to this policy is shown in U.S. dollars on the Policy Validation Label and applies to each *Trip*. *Your Deductible Amount* must be satisfied in order for *Your* claim to be paid.

“Effective Date of Insurance” means for the *Single Trip* Plan, the later of 1) the Date of Departure shown on *Your* application for insurance or 2) the date *You* leave *Your* province or territory of residence. If purchasing the *Single Trip* Plan to top up another medical travel insurance policy, it means the *Effective Date of Insurance* indicated on *Your* application for insurance. For the 4-Season Annual Plan (if purchased) it means the date *You* choose *Your* insurance coverage to take effect as indicated on *Your* application for insurance.

“Hospital” means an institution which is licensed as a *Hospital* and which:

- (a) is primarily engaged in providing medical, diagnostic and surgical services for the care and treatment of sick or injured persons on an in-patient basis; and
- (b) provides medical care under the supervision of a staff of *Physicians*, with 24-hour-a-day care by registered nurses; and

(c) is not otherwise licensed as a home for the aged, a rest home, health spa, nursing home, convalescent hospital, hospice, palliative care facility, a place for the care and treatment of drug addicts or alcoholics, custodial or educational facility, or any rehabilitation facility.

“Hospitalized” and **“Hospitalization”** means confinement in a *Hospital* as defined above.

“Injury” means any accidental bodily harm that occurs and results in *Covered Expenses* while this policy is in force. Such *Injury* must be caused solely by external, violent and accidental means, and independent of *Sickness* and of any other cause.

“Insured” means a person who is named on the application for insurance, to whom a policy has been issued, and in whose name the required premium has been paid.

“Medical Attention”: see Policy Page 6 for details.

“Medical Emergency” means a *Sickness* or *Injury* which:

- (a) results in symptoms which occur suddenly and unexpectedly; and
- (b) requires immediate *Physician's* care to prevent death or serious impairment of *Your* health and/or to relieve acute pain and suffering; and
- (c) occurs outside *Your* Canadian province or territory of principal residence.

“Medical Treatment” means any reasonable medical, therapeutic or diagnostic measure, service or supply that is *Medically Necessary* and that is prescribed by a *Physician* in any form, including prescribed medication, reasonable investigative testing, *Hospitalization*, surgery or other prescribed or recommended treatment directly related to a condition, symptom, illness or disease. *Medical Treatment* does not include either: (a) the use of prescribed drugs or medication for a controlled condition, symptom, illness or disease when the dosage, drug or medication remains unchanged; or (b) a check-up where the *Physician* observes no change in a previously noted condition, symptom, illness or disease.

“Medically Necessary” in relation to any service, supply or other matter means one which is ordered by a *Physician* and one which the *Company* determines is:

- (a) provided for the diagnosis or direct treatment of an *Injury* or *Sickness*;

(b) appropriate and consistent with the symptoms and findings or diagnosis and treatment of the *Insured's Injury* or *Sickness*;

- (c) not experimental or investigative;
- (d) provided in accordance with generally accepted medical practice;
- (e) not possible to delay until *You* return to Canada; and
- (f) the most appropriate supply or level of service which can be provided on a cost-effective basis (including but not limited to open vs minimally invasive surgery, inpatient vs outpatient care, surgical vs medical or other types of care, electric vs manual wheelchair).

The fact that the *Insured's* attending *Physician* prescribes the services or supplies does not automatically mean such services or supplies are *Medically Necessary* and covered by this policy.

“Physician” means a medical practitioner (other than the *Insured*, a *Spouse* or relative) who was at the time of treatment licensed to prescribe and administer *Medical Treatment* within the scope of a medical doctor's licence, or a surgeon who performs surgery within the scope of a surgeon's licence and whose legal and professional standing within their jurisdiction is equivalent to a doctor of medicine (M.D.) duly licensed to practise in any province or territory of Canada.

“Pre-Existing Condition”: see Policy Page 5 for details.

“Reasonable Expenses” means expenses which are incurred for *Medical Treatment* at a level usually provided for cases that are of the nature and severity of the *Medical Emergency* being treated.

“Routine Check-up” means any medical examination which is performed for the purpose of general health monitoring, which may include routine medical tests and which is unrelated to any specific symptom, illness, condition or disease.

“Sickness” means an illness or disease which results in a *Covered Expense* while this coverage is in force. The *Sickness* must be serious enough for a reasonable person to seek personal *Medical Treatment* from a *Physician*.

“Spouse” means a person with whom the *Insured* is cohabiting and who either:

- (a) is legally married to the *Insured*; or

(b) has lived with the *Insured*, in a conjugal relationship, for a period of twelve (12) consecutive months immediately prior to the *Effective Date of Insurance* of this policy and who has been publicly represented as the *Insured's* spouse in the community in which they reside.

“Stable and Controlled” : see Policy Page 6 for details.

“Trip” means the defined period of travel between the time *You* leave home and the date *You* are scheduled to return home.

“Trip Start Date” means the Date of Departure each time *You* leave *Your* province or territory of principal residence during the period of coverage if *You* purchased the 4-Season Annual Plan.

“You” and **“Your”** mean the same as *Insured* defined above.

THE BENEFITS

This policy has a maximum limit of \$2,000,000 USD per *Insured* for *Covered Expenses* (including COVID-19) incurred as a result of a *Medical Emergency*, and includes the following benefits. All of the benefits are in U.S. dollars unless otherwise indicated.

1. Hospital/Medical/Ambulance Expenses:

- (a) *Hospital* room and board, up to the semi-private charge, services, supplies, intensive care unit and coronary care unit expenses;
- (b) *Physician's* charges for medical and surgical care;
- (c) X-rays and other diagnostic tests when prescribed by the attending *Physician* and approved in advance by Medipac Assist;
- (d) The cost of local licensed ambulance service to the nearest medical facility able to provide appropriate care;
- (e) Drugs and medication which by law require a written prescription and are dispensed by a pharmacist up to a maximum limit of a 30-day supply;
- (f) The cost or rental of casts, splints, trusses, braces, crutches, rental of a wheelchair or other medical appliances when prescribed by a *Physician* and approved in advance by Medipac Assist.

2. Private Duty Nursing Expenses: covers the cost of the professional services of a registered private duty nurse for out-of-*Hospital* nursing care only if recommended as *Medically Necessary* by the attending *Physician*. Charges for the services of a registered private

duty nurse who is a *Spouse* or is related to *You* are not covered. The maximum benefit amount is \$7,500. This benefit must be approved in advance by Medipac Assist.

3. Chiropractic Services: covers the cost of the professional services of a licensed chiropractor for a *Medical Emergency*. Charges for the services of a licensed chiropractor who is a *Spouse* or is related to *You* are not covered. The benefit amount is a maximum of \$500.

4. Other Professional Services: covers the cost of the professional services of a licensed chiroprapist, osteopath, podiatrist or physiotherapist only if recommended as *Medically Necessary* by the attending *Physician*. Charges for the services of a licensed practitioner who is a *Spouse* or is related to *You* are not covered. The benefit amount is a maximum of \$500.

5. Emergency Dental Expenses: If *You* suffered an *Injury* to *Your* teeth as a result of an external accidental blow to the mouth or face (chewing accidents are not covered), *You* will be reimbursed up to \$5,000 per *Insured* person for dental treatment to repair or replace natural teeth or permanently attached artificial teeth. Dental treatment must take place within 90 days of the accidental blow to the mouth or face. If *You* need treatment for relief of dental pain, a maximum of \$500 will be allowed for such treatment. Dental treatment must take place before *You* return to *Your* Canadian province or territory of principal residence.

6. Return of Vehicle: If neither *You* nor anyone travelling with *You* is able to operate *Your* owned or rented vehicle due to *Sickness*, *Injury* or death while travelling outside *Your* province or territory of residence, this plan will reimburse a maximum of \$5,000 for the return of the vehicle.

Eligible for reimbursement is the lesser of the cost of the return performed by a professional agency or the following necessary and reasonable expenses incurred by an individual returning the vehicle on *Your* behalf: fuel, meals, commercial accommodation and one-way economy airfare. To receive reimbursement, original receipts must be submitted. Any other expenses are not covered. Benefits will only be payable when pre-approved and/or arranged by Medipac Assist and the vehicle is returned to *Your* normal place of residence or the nearest appropriate rental agency within 30 days of *Your* return to Canada. Car rental costs while awaiting the return of *Your* vehicle are not eligible expenses. A copy of vehicle ownership is required.

7. Bringing a Relative to Your Bedside: covers the reasonable expenses incurred by a family member or a close friend to visit *You* in *Hospital* in the event that *You* are *Hospitalized* for at least three (3) consecutive nights due to a *Medical Emergency*. The benefit covers the cost of return economy-class airfare via the most cost-effective itinerary. This benefit will also cover up to \$350 per day for the cost of commercial accommodations, meals, essential telephone calls and taxi expenses. The *Company* requires original receipts for the incurred costs. This benefit is payable to a maximum of \$2,000 and must be approved in advance by Medipac Assist.

8. Out-of-Pocket Expenses for Accompanying Family Member: covers the reasonable expenses incurred by an accompanying family member in the event that *You* are *Hospitalized* on *Your* scheduled return date to Canada as indicated on the Application. This benefit covers the cost of commercial accommodation, meals, essential telephone calls and taxi expenses. The benefit amount is up to \$350 per day to a maximum of \$2,000. The *Company* requires all original receipts for the expenses incurred.

9. Return of Spouse and Children: covers the cost of an economy class airfare to the departure point for the return of *Your Spouse* and *Children*, if the *Company* requires that *You* return to Canada for immediate *Medical Treatment* or in the event of *Your* death. This benefit is payable up to a maximum of \$2,500. This benefit must be approved in advance by Medipac Assist.

10. Emergency Air Transportation: covers, as a result of a *Sickness* or *Injury*: (a) the cost of a one-way, economy class airfare to *Your* departure point in Canada; or (b) the cost of additional airline seats to accommodate a stretcher when recommended by the attending *Physician*. Any air transportation must be arranged and approved in advance by Medipac Assist.

11. Qualified Medical Attendant: covers the reasonable expenses for the services of a medical attendant. These services must be on the recommendation of a *Physician* and must be approved in advance by Medipac Assist. Charges for the services of a medical attendant who is a *Spouse* or is related to *You* are not covered.

12. Air Ambulance: covers the reasonable cost of air ambulance transportation, when medically required, between *Hospitals*. This benefit must be arranged and approved in advance by Medipac Assist.

13. Return of Deceased: covers the cost of preparation and transportation of a deceased *Insured* to the original departure point in Canada. This benefit includes the cost of a standard transportation container (excludes cost of a casket). The maximum benefit amount is \$10,000. For cremation or burial of the deceased *Insured* at the place of death, the maximum benefit amount is \$5,000. If it is necessary to identify the deceased *Insured* before release of the body, the benefit also covers the cost of a round-trip, economy class airfare for one family member or close friend and their out-of-pocket expenses up to \$350 per day to a maximum of \$2,000. The *Company* requires original receipts for the incurred costs. This benefit must be approved in advance by Medipac Assist.

14. Return to Destination: covers the cost of an economy class airfare to return *You* and/or *Your Insured Spouse* back to *Your* original *Trip* destination so *You* can continue *Your Trip* after *Your* medically approved emergency evacuation back to Canada. This benefit is available only if no further treatment is required and Medipac Assist has approved *Your* return under *Your* existing policy. To be valid, a policy endorsement is required.

NOTE: NOTWITHSTANDING THE OTHER PROVISIONS OF THIS POLICY, ANY *MEDICAL TREATMENT*, SERVICE OR SUPPLY THAT IS NOT SPECIFICALLY LISTED IN THE SECTION "THE BENEFITS" IS NOT COVERED BY THIS POLICY.

WHAT IS NOT COVERED

UNSTABLE PRE-EXISTING CONDITIONS

This insurance does not provide coverage for **any** *Medical Emergency* concerning, relating to, caused by or arising from any of the following:

1. Any *Pre-Existing Condition* that was not *Stable and Controlled* in the 90 days prior to the *Effective Date of Insurance* or *Your Trip Start Date*. This includes any reaction that results from a change in medication prescribed for such a condition.

"Pre-Existing Condition" means, whether or not diagnosed, any medical or physical condition, symptom, illness or disease for which *Medical Attention* was received or for which an ordinarily prudent person would have sought *Medical Attention* prior to the *Effective Date of Insurance* or *Your Trip Start Date*.

“Stable and Controlled” means:

- (a) the medical or physical condition, symptom, illness or disease did not first manifest itself; and/or
- (b) the medical or physical condition, symptom, illness or disease was not first investigated; and/or
- (c) the medical or physical condition, symptom, illness or disease has not worsened; and/or
- (d) no change in any medication or its usage or dosage occurred, was prescribed and/or recommended by a *Physician*; and/or
- (e) no new medication was prescribed and/or recommended by a *Physician*; and/or
- (f) no *Medical Attention* was received, prescribed or recommended by a *Physician*.

“Medical Attention” means any medical, therapeutic or diagnostic procedure, service or supply that is prescribed, performed or recommended by a *Physician*, including but not limited to prescribed medication, investigative testing or surgery. *Medical Attention* does not include either the unchanged use of prescribed medication for a medical condition, symptom or problem which is *Stable and Controlled*; or a *Routine Check-up*.

A change in medication does not apply to cholesterol lowering medication or to a change in any other medication from a brand name medication to a generic brand medication (insofar as the dosage is not modified). If *You* are taking Coumadin (warfarin) or insulin and are required to have *Your* blood levels tested on a regular basis and *You* are required to adjust the dosage of *Your* medication only to ensure correct blood levels are maintained, such a change is not considered to be a change in medication, provided *Your* medical condition remains unchanged.

2. Any medical or physical condition, symptom, illness or disease that, in the 12 months prior to *Your Effective Date of Insurance* or *Your Trip Start Date*, required: a) a total of three (3) or more Emergency Room visits, *Hospitalizations*, *Day Surgeries* or any combination of all three; and/or b) a single *Hospitalization* for more than 48 consecutive hours.

3. Any medical or physical condition, symptom, illness or disease for which treatment and/or investigation(s) was recommended but not received prior to *Your Effective Date of Insurance* or *Your Trip Start Date*.

GENERAL EXCLUSIONS

This insurance does not cover, provide services or pay expenses resulting directly or indirectly from:

4. War, whether declared or not, any act of civil war, rebellion, insurrection or terrorism, participation in a riot, civil commotion or demonstration or service in the armed forces of any country.
5. Suicide, attempted suicide or self-inflicted *Injury*.
6. (a) Normal pregnancy; (b) normal childbirth; or (c) any complication, condition or symptom of pregnancy occurring within the last 18 weeks before the expected date of delivery or 9 weeks after.
7. Any child born during a *Trip*.
8. A *Trip* made for the purpose of obtaining a diagnosis, treatment, investigation, surgery or palliative care, whether or not it was recommended by a physician.
9. Emotional, psychological or mental disease, disorder, condition or symptom.
10. Medical or surgical treatment which is not a *Medical Emergency*, is primarily cosmetic, or is experimental; or any complication of the foregoing treatment.
11. Any medical or physical symptom, illness or disease for which, prior to *Your Trip Start Date*, *Medical Attention* or a change in medication has been recommended or scheduled for a date after *Your Trip* begins.
12. Expenses for which no charge would normally be made in the absence of insurance.
13. Rehabilitation, the continued treatment, or complication of the medical condition which caused the *Medical Emergency*, once *You* are discharged from *Hospital* or once a *Medical Emergency* ends, as determined by the *Company*.
14. Any expenses incurred after the date on which *You* have declined an offer of repatriation and/or medical evacuation.
15. The commission or attempted commission of any criminal act by *You*.

16. Any treatment, services or supplies not *Medically Necessary* (as defined), or any medical procedures and/or tests (including but not limited to MRI, MRCP, CAT Scan, CT Angiogram, Nuclear Stress Test, Angiogram, Angioplasty or Cardiac Catheterization) not authorized by Medipac Assist in advance. All surgeries must be authorized by Medipac Assist prior to being performed except in extreme circumstances where surgery is performed on an emergency basis immediately upon admission to a *Hospital*.
17. Emergency medical relocation unless arranged and approved in advance by Medipac Assist.
18. Any treatment, services or supplies provided by a home for the aged, a rest home, health spa, nursing home, convalescent hospital, hospice, palliative care facility, a place for the care and treatment of drug addicts or alcoholics, custodial or educational facility, or any rehabilitation facility.
19. Any *Hospital* or medical benefits if *You* are not covered under the Government Health Insurance Plan of *Your* Canadian province or territory of principal residence.
20. Any damage to or loss of: hearing aids, eyeglasses, sunglasses, contact lenses, artificial teeth or artificial limbs and resulting prescription thereof.
21. a) Non-compliance with or the refusal to accept recommended medical treatment or rehabilitation; b) the abuse or chronic use of drugs, alcohol or other intoxicants (including symptoms of withdrawal); or c) the abuse of prescribed medication (including non-compliance with or refusal to take prescribed medication); whether prior to or during *Your Trip*.
22. The regular treatment or regular care of a condition that existed prior to the *Effective Date of Insurance*.
23. A Heart, Lung, Liver, Kidney, Pancreatic or Bone Marrow Transplant.
24. A *Medical Emergency* that occurred during a *Trip* under the 4-Season Annual Plan for which proof of departure has not been provided.
25. Any medical treatment or condition resulting from the practice or training for, or participation in, any high-risk sport, activity or behaviour, including but not limited to scuba diving, mountaineering, rock or precipice climbing, hang gliding, paragliding, sport parachuting, skydiving or bungee jumping.
26. Any medical treatment or condition resulting from the practice or training for, or participation in, a) any speed or endurance contest or b) any athletic or sport activity for remuneration or prize money.
27. Any medical or physical condition, symptom, illness or disease for which the results of any test(s) and/or investigation(s) were not available prior to the *Effective Date of Insurance* or *Your Trip Start Date*.
28. Any *Medical Emergency* that occurs in any city, region or country where the Government of Canada has issued a travel advisory to "avoid all non-essential travel" or "avoid all travel" prior to *Your Effective Date of Insurance* or *Your Trip Start Date*. For travel advisories due to COVID-19, this exclusion does not apply.
29. A COVID-19 test that is required by any body with appropriate authority (such as a government or transportation service) for entry or exit from a country or jurisdiction, to use its services, or for a COVID-19 test which is not considered a *Medical Emergency*.
30. A general health examination or check-up.

GENERAL LIMITATIONS

If *Your* health changes (including a new or changed diagnosis) and/or *You* have any investigations or seek medical attention at any time between *Your* Date of Application and *Your Effective Date of Insurance*, *You* must contact Medipac at 1-800-633-4722 right away. A reassessment of *Your* eligibility and rate qualification will be required, and *Your* premium may be adjusted. Failure to contact Medipac may result in payment of only a portion of the *Covered Expenses*, a claim denied, or the policy deemed **null and void**.

Individuals Excluded from Coverage

You cannot be covered by this policy, and all insurance coverage is null and void, and the liability of the *Company* will be limited to return of premium if:

1. Coverage is not purchased for the entire duration of *Your Trip* (unless otherwise expressly stated in this policy).
2. Coverage is applied for while outside Canada (with the exception of post-departure applications for extension of coverage).
3. Any material misrepresentation is made on the application or in connection with any claim for benefits under this policy.

and/or if between *Your Date of Application and Your Effective Date of Insurance*:

4. *You* had been diagnosed as having a terminal illness or had been advised by a *Physician* not to travel.
5. *You* had been diagnosed with pulmonary fibrosis or interstitial lung disease.
6. *You* had an organ or bone marrow transplant (excluding cornea or skin graft) or a blood disorder for which *You* received stem cell treatment.
7. *You* had been treated for, taken or been prescribed medication for, or been diagnosed with lung cancer, metastatic cancer or two (2) or more cancers (excluding basal cell and squamous cell skin cancer).
8. *You* had a cardiac condition with an ejection fraction of less than 41% or a ventricular function grade of 3 or 4.
9. *You* had moderately severe or severe cardiac valve stenosis.
10. *You* had an aneurysm or dilated artery greater than 4.5 cm in size (diameter or width) which remains surgically untreated.
11. *You* underwent chemotherapy, immunotherapy or targeted drug therapy for cancer or malignant tumour(s).
12. *You* had surgery or stenting on any artery or had cardiac pacemaker implant surgery.
13. *You* had cardiac ablation, cardiac defibrillator implant surgery, coronary angioplasty and/or stent, coronary bypass surgery, cardiac valve replacement or repair, had a heart attack, a cardiac arrest or an episode of congestive heart failure.
14. *You* had a stroke, a transient ischemic attack (TIA) or a ministroke.
15. *You* had any chronic lung disease (including emphysema, chronic obstructive pulmonary disease [COPD], chronic bronchitis, reactive airway disease or asthma) which caused *You* to be *Hospitalized* for more than 24 consecutive hours, or for which *You* had taken or been prescribed prednisone or Solu-Medrol.
16. *You* had taken or been prescribed home oxygen for any reason.
17. *You* had taken or been prescribed insulin or two (2) or more medications for diabetes and medication for a heart condition. The term “medication” includes nitroglycerin in any form.

If *You* are under the age of 56 and travelling for less than 41 days, items 4. to 17. do not apply.

Misstatement

If *You* misstate *Your* response to any question in section A of the application, then this policy is null and void.

If *You* misstate *Your* response on the application to the question which asks if *You* have smoked cigarettes and, as a result, paid a lower premium than required, *Your* policy will provide reimbursement of only 75% of all *Covered Expenses*.

If *You* misstate *Your* response in any other section of the application and, as a result, paid a lower premium than required, this policy will cover only the proportion of *Covered Expenses* that the premium paid bears to the required premium. *You* will be responsible for the remaining portion of *Covered Expenses*.

Where the *Company* has incurred expenses on *Your* behalf, *You* irrevocably assign *Your* premium and any Government Health Insurance Plan payments to the *Company*, where the amount of premium is greater than the *Company's* expenses, the difference shall be refunded to *You*.

CHANGE IN DEPARTURE DATE

For the Single *Trip* Plan, if there is a change in *Your* Date of Departure, notice **MUST** be provided to Medipac from within Canada prior to the Date of Departure shown on *Your* application. If *You* purchased the 4-Season Annual Plan, *You* are not required to provide advance notice of *Your Trip Start Date* for every other *Trip*. **However, evidence of these dates will be required at the time of claim.**

IS THERE ANYTHING ELSE I NEED TO KNOW?

Yes, the following are the general conditions that apply to *Your* insurance under this policy:

- A. The *Company* and its agents are not responsible for the availability, quality or results of any *Medical Treatment* or transportation, or where *You* fail to obtain *Medical Treatment* or proper *Hospitalization*.
- B. The *Company* reserves the right to return *You* to Canada or to transfer *You* to one of our preferred health care providers. **Refusal to comply with the transfer or the return to Canada renders this policy null and void** as of the date and time of *Your* refusal. After that date and time no expenses will be paid under this insurance policy; for greater clarity, coverage under this policy will cease.

Policy Text

- C. There is no insurance coverage if the premium is not received by Medipac due to an N.S.F. cheque or invalid credit card charge.
- D. Every action or proceeding against the *Company* or its agents for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act, or other applicable legislation.
- E. In no event will a claim be accepted after one year from the date of occurrence.
- F. Any fraud, attempted fraud, misrepresentation or non-disclosure of any material fact relating to this insurance or to a claim under this policy renders this policy null and void. If *You* have misstated *Your* age, and such misstatement results in *Your* paying premium which is less than the required premium, this policy will cover only the proportion of *Covered Expenses* that the premium paid bears to the required premium.
- G. Where the *Company* has incurred expenses on *Your* behalf for a loss caused by, or that can be attributed to a third party, the *Company* has the right to subrogate any incurred expenses against the third party and/or any other person or entity that may be obligated to indemnify the third party (and/*You*) or that may be deemed responsible for the loss ("Responsible Party"). The *Company*, at its own expense, has the right to initiate or continue legal proceedings ("Legal Claim"), in *Your* name, against the Responsible Party. *You* must take all reasonable steps to assist the *Company* in advancing the Legal Claim. Where *You* initiate a Legal Claim, or seek compensation for *Your* loss, the *Company's* rights of subrogation must be sufficiently addressed, and the *Company* kept informed of any negotiations. The *Company* has the right to review, approve and/or reject any offer of compensation or settlement. Any funds received by *You* or *Your* representatives, in compensation or settlement for *Your* loss, must first be applied to any expenses incurred by the *Company*, and the *Company* reimbursed accordingly.
- H. When the *Company* has made *Hospital* or other medical payments on *Your* behalf, *You* must sign an Authorization Form which authorizes and allows the *Company* to recover such payments from *Your* other insurers and other health plans (including *Your* Government Health Insurance Plan). *You* must assist the *Company* in obtaining such reimbursement. If an advance has been made for any expense that is not covered by this insurance policy, *You* will be required to reimburse the *Company*.
- I. All benefit amounts under this policy are in United States currency unless stated otherwise. If *You* have paid a *Covered Expense* in a currency other than that of United States or Canada, any reimbursements made will be in Canadian currency at the prevailing rate of exchange on the date the service was provided. No sum payable under this policy shall bear interest.
- J. This insurance is supplementary health coverage; i.e., this policy covers expenses in excess of those covered under *Your* Government Health Insurance Plan, any Private or Provincial or Territorial Auto Insurance Plan or any other insurance. If *You* have similar out-of-country/province extended health benefits with a lifetime maximum coverage of: (a) \$100,000 CAD or less, the *Company* will not co-ordinate payment with such coverage; or (b) over \$100,000 CAD, the *Company* will co-ordinate payment with such coverage in excess of \$100,000 CAD.
- K. For purposes of determining eligibility under the section "Individuals Excluded from Coverage" in the General Limitations of this policy or for determining the validity of a claim, **hospital records, pharmaceutical records and the medical records of *Your* attending Physician(s) (including *Your* Canadian Physician(s)), will be obtained and reviewed by the *Company*.** *Your* claim cannot be processed and no benefits will be payable under this policy without the required information.
- L. Despite any other provision contained herein, **this policy is subject to the applicable statutory conditions in the Insurance Act**, as applicable in *Your* province or territory of residence, respecting contracts of accident and sickness insurance.
- M. The right of any person to designate persons to whom or for whose benefit insurance money is payable is restricted.
- N. The *Company* has the right, and *You* shall afford the *Company* the opportunity, to have *You* medically examined by an independent medical professional when and as often as may reasonably be required while benefits are being claimed or paid under this policy. In the event of death, the *Company* has the right to request an autopsy if not prohibited by law.

WHAT HAPPENS TO MY INSURANCE COVERAGE IF I AM HOSPITALIZED AND CANNOT RETURN ON MY SCHEDULED RETURN DATE?

This policy provides an automatic extension of coverage at no additional cost to *You* in each of the following situations:

1. If *You* are in *Hospital* due to *Injury* or *Sickness* on *Your* scheduled return date, insurance coverage will remain in force for the period of time *You* remain in *Hospital*, plus a further period of 72 hours following *Your* discharge from *Hospital*.
2. If *Your* return is delayed beyond *Your* scheduled return date due to the delay of a common carrier in which *You* are scheduled to travel; or, while travelling by automobile, *You* are involved in an accident or a mechanical breakdown, insurance coverage will be extended until *You* return to *Your* point of departure or for 72 hours after the date when the insurance coverage would otherwise have terminated, whichever occurs first.

However, in any event, insurance coverage will not be extended more than twelve (12) consecutive months immediately after the date of *Your Medical Emergency* which was the cause of *Your* delay beyond *Your* scheduled return date.

HOW DO I PRESENT MY CLAIM?

When *You* contact Medipac Assist at the time of *Your Medical Emergency*, we will send *You* a Claim Kit containing everything necessary to submit *Your* claim, including instructions and forms (also available on our website at www.medipac.com). **Forms must be returned to our office within 30 days of receipt.** Failure to provide the required documents in a timely manner will reduce any amount payable under this policy.

To adjudicate *Your* claim, the *Company* will require:

- a completed Claim and Authorization and Release Form
- original invoices and/or receipts
- payment of *Your Deductible Amount*, if any
- payment of outstanding premium, if any
- complete medical records including final diagnosis by the attending *Physician*
- medical records relating to the continuation of any treatment after *Your* return to Canada
- historical medical records
- any other relevant documentation
- proof of *Your* departure date, if claiming under the 4-Season Annual Plan or when requested by the *Company*

For payment, please submit ONLY original itemized bills, the HCFA-Form 1500, UB-04 (with itemized statement) OR an original itemized doctor's bill with:

- formal letterhead with full name and address
- tax I.D.
- procedure and diagnostic codes with dollar amounts
- original doctor's signature (stamped photocopied signatures are not acceptable)

Original bills must be provided for any eligible out-of-pocket expenses. Cash register receipts are not considered original bills.

For Claim inquiries please phone the Medipac Assist Claims Department:

Toll-free from the U.S.A. and Canada: **1-888-311-4761**
or from other locations: (416) 441-7073

POLICY EXTENSIONS

All requests for an extension of coverage are subject to approval and are not guaranteed. To extend *Your* coverage *You* must call Medipac Customer Service at 1-800-633-4722 toll-free from the U.S. or Canada, or at (416) 441-7070 from other locations during general office hours. Extensions will not be completed by email or voicemail. Policy terms, conditions and exclusions will apply during the extension period.

An extension must be applied for at least 5 days prior to the expiry date of *Your* policy, or at least 5 days prior to the date *Your Trip* will end under the 4-Season Annual Plan, if applicable. If *Your* 4-Season Annual Plan has ended, *You* must purchase a new policy.

To apply for an extension of coverage *You* must:

- be in good health and have had no change in *Your* health status between *Your Effective Date of Insurance* and the date of *Your* request for an extension;
- have had no event that has resulted or may result in a claim on the policy;
- have not consulted a physician or other registered medical practitioner between the Date of *Your* Departure from Canada and the date of *Your* request for an extension;
- complete a questionnaire;
- pay the required premium by credit card; and
- pay a non-refundable administration fee per person, per extension.

Extensions are available in trip length units as published, and the total trip length cannot exceed the maximum number of days allowed by *Your* Government Health Insurance Plan, or 212 days. Extensions are calculated

Policy Text

using the rate of the new total trip length minus the rate of the original trip length. If extending a *Trip* under the 23-day or 33-day 4-Season Annual Plan, the extension is calculated using the rate of the new *Trip* total minus the rate of a 23-day or 33-day trip length.

Extension Exclusion:

Policy extensions do not cover, provide services or pay claims for expenses resulting directly or indirectly from any *Sickness* or *Injury* that first manifested, was first diagnosed, or first treated after the *Effective Date of Insurance* or *Trip Start Date* and prior to the date when *Your* application to extend *Your* period of coverage under this insurance was approved.

REFUND POLICY

1. No refunds are available if a claim has been incurred.
2. The premium for the 4-Season Annual Plan cannot be refunded once coverage begins.
3. Refund requests must be made in writing from within Canada and can be either mailed or emailed. All refund requests must be signed and dated by each individual applicant.
4. Refunds will be made using the same method of payment in which the original transaction was completed. For web banking payments, refunds will be issued by cheque.

A refund will be provided to an Insured in the following situations:

FULL REFUND only if, prior to the *Effective Date of Insurance*, the policy is cancelled for the following reasons:

- the *Insured* or his/her *Spouse* is unable to travel due to *Sickness* or *Injury* (a *Physician's* statement is required); or
- the *Insured* is unable to travel due to a death in the immediate family.

FULL REFUND less a \$50 Administration Fee per person if prior to the *Effective Date of Insurance* the policy is cancelled for any other reason. Premiums \$50 or less will not be refunded.

Any **FULL REFUND** of the **Single Trip Plan** will also terminate the 4-Season Annual Plan.

PARTIAL REFUND if:

- the *Insured* returns to Canada prior to the scheduled return date with at least 5 consecutive unused days remaining on their policy.
- If the refund request is sent via email, proof of *Your* return to Canada must be provided.
 - If travelling by air, provide a boarding pass or check-in receipt.

- If crossing the border by land, provide a receipt which includes the date of *Your* return and a Canadian address, and identifies that *You* made the purchase (e.g. the receipt for a purchase made with the credit card *You* used to pay for *Your* policy).
- A pro-rata refund will be calculated using the postmarked date of the written request or, in the cases of an emailed request, the date indicated on the proof of return.
- If *You* have purchased the 23-day (or 33-day) 4-Season Annual Plan, only the premium in excess of a minimum 22-24 day (or 31-33 day) Single *Trip* Plan will be eligible for a refund.
- *Your* request **MUST** include a statement that no claims have been incurred.

PARTIAL REFUNDS are subject to a \$20 Administration Fee per person. Premiums \$20 or less will not be refunded.

All requests for refunds can be mailed to:
Medipac Travel Insurance,
180 Lesmill Road, Toronto ON M3B 2T5
or emailed to: service@medipac.com

Signed for the *Company* by:



Jason Smith, CPA, CA
President and CEO

Underwritten by

Old Republic Insurance Company of Canada.

100 King Street W. Suite 1100, Hamilton, ON L8P 1A2

IMPORTANT NOTICE – PLEASE READ CAREFULLY

- Travel insurance is designed to cover losses arising from sudden and unforeseeable medical emergencies. It is important that you read and understand your policy before you travel, as your coverage is subject to certain conditions, limitations and exclusions.
- A pre-existing exclusion may apply to medical conditions and/or symptoms that existed prior to your trip. Check to see how this applies in your policy and how it relates to your departure date, date of purchase or effective date.
- In the event of an accident, injury or sickness, your prior medical history may be reviewed when a claim is reported.
- Travel insurance requires you to notify your designated assistance company prior to treatment. Your policy may limit benefits should you not contact the assistance company within a specified time period.

Please read your policy carefully before you travel.

Endorsement (If purchased)

When added, this endorsement applies to and forms part of *Your* Medipac Travel Emergency Medical Insurance Policy. The additional coverage is dependent on the option selected on *Your* application; MedipacGOLD, MedipacMAX or MedipacPLUS. Coverage is subject to all terms, conditions, and definitions of *Your* Policy.

POLICY MAXIMUM

MedipacGOLD increases the Policy Maximum stated in *Your* policy under THE BENEFITS section, providing coverage of up to \$10,000,000 USD for *Covered Expenses* per *Insured*, including COVID-19. The Policy Maximum for MedipacMAX is limited to \$5 million. The Policy Maximum for MedipacPLUS is limited to \$5 million with coverage for COVID restricted to the base plan limit of \$2 million.

DEDUCTIBLE CREDIT BENEFIT

MedipacGOLD provides a \$50 credit toward *Your* deductible in the event of a valid and payable claim that exceeds *Your Deductible Amount*. This benefit applies only once per policy for *Deductible Amounts* \$99 and greater and IS NOT included with MedipacMAX or MedipacPLUS.

PROTECT YOUR CLAIM-FREE DISCOUNT

MedipacGOLD forgives the first valid and payable claim that causes *You* to exceed *Your Deductible Amount*, protecting *Your* Claim-Free Discount. Any subsequent claim(s) on the same policy will not be forgiven and *Your* Claim-Free Discount lost. This protection is included with MedipacMAX and MedipacPLUS.

ACCIDENTAL DEATH BENEFIT

MedipacGOLD provides \$15,000 CAD if *You* die as a result of an accident that occurs while *You* are outside *Your* province or territory of residence and during *Your* policy's coverage period. The loss must occur within 12 months of the accident and is payable to *Your* estate. Coverage under this benefit is limited to \$7,500 with MedipacMAX and \$3,000 with MedipacPLUS.

EMERGENCY RELOCATION BENEFIT

MedipacGOLD provides up to \$10,000 to cover the reasonable cost of temporary accommodations for up to 7 days and expenses for transportation if after *Your* departure and during *Your* policy's coverage period a hurricane, flood, forest fire,

sinkhole, or earthquake renders *Your Temporary Dwelling* uninhabitable. Proof of departure, proof of residence, proof of the disaster, and original receipts are required, along with pre-approval by Medipac Assist. Coverage under this benefit is limited to \$5,000 with MedipacMAX and \$2,500 with MedipacPLUS.

INPATIENT REHABILITATION BENEFIT

MedipacGOLD covers up to \$6,000 for inpatient rehabilitation if *You* suffer an accidental orthopedic injury outside Canada and a physician recommends immediate inpatient rehab following treatment. Pre-approval by Medipac Assist is required. Coverage under this benefit is limited to \$3,000 with MedipacMAX and \$1,500 with MedipacPLUS.

PRIVATE DUTY NURSING – ENHANCED POLICY BENEFIT

MedipacGOLD increases the existing Policy Benefit (BENEFIT 2 on policy page 4) up to \$10,000. Pre-approval by Medipac Assist is required. Enhancements under this benefit are NOT included with MedipacMAX or MedipacPLUS.

BRING A RELATIVE TO YOUR BEDSIDE – ENHANCED POLICY BENEFIT

MedipacGOLD increases the existing Policy Benefit (BENEFIT 7 on policy page 5) up to \$500 per day to a maximum of \$5,000. Pre-approval by Medipac Assist is required. Enhancements under this benefit are NOT included with MedipacMAX or MedipacPLUS.

PET BENEFIT – TRANSPORT AND BOARDING

MedipacGOLD covers up to \$1,500 for transportation to return *Your* pet(s) to Canada if Medipac Assist returns *You* for medical treatment during *Your* policy's coverage period. ALSO, if *You* have a valid claim under the Return to Canada benefit (below), coverage is available, up to \$1,000, for pet boarding (maximum 1 week) while *You* are in

Endorsement (If purchased)

Canada. Original receipts and pre-approval by Medipac Assist are required. Pet benefits are NOT included with MedipacMAX or MedipacPLUS.

CANADIAN HOSPITALIZATION BENEFIT

MedipacGOLD pays \$250 CAD per day (up to a maximum of \$2,500 CAD) if Medipac Assist returns *You* to Canada for medical reasons and *You* are hospitalized within 3 days of return. Hospitalization days must be consecutive, and medical records are required for any claims. Coverage under this benefit is limited to \$100 CAD per day (up to a maximum of \$1,000 CAD) with MedipacMAX and is NOT included with MedipacPLUS.

EXCESS LUGGAGE BENEFIT

MedipacGOLD covers up to \$1,500 CAD for shipping expenses to return *Your* excess luggage to Canada if, during *Your* policy's coverage period, Medipac Assist returns *You* for medical treatment and *You* are unable to return *Your* luggage by other means. Original receipts and pre-approval by Medipac Assist are required. Coverage under this benefit is limited to \$500 CAD with MedipacMAX and is NOT included with MedipacPLUS.

EMERGENCY RETURN TO CANADA BENEFIT

MedipacGOLD covers up to \$4,000 CAD for round-trip economy airfare from *Your* vacation destination to Canada and back, PLUS up to \$1,000 CAD for ground transportation and accommodations. This benefit applies if, during *Your* policy's coverage period, a member of *Your Immediate Family* not travelling with *You* dies after *Your* departure, OR a natural disaster renders *Your Principal Residence* uninhabitable after *Your* departure (proof of *Your* home insurance claim is required). Flights outside *Your* policy's coverage period are not eligible. Original receipts and pre-approval by Medipac Assist are required. This benefit is limited to

\$2,000 CAD/\$500 CAD with MedipacMAX and is NOT included with MedipacPLUS.

EXCLUSIONS

No benefits are payable under the EMERGENCY RETURN TO CANADA BENEFIT if:

1. The deceased *Immediate Family* member was hospitalized within the 30 days prior to *Your Effective Date of Insurance* or *Your Trip Start Date*, whichever is later, or
2. At the time *You* applied for coverage, a reasonable person would have expected that an event covered under this benefit would occur before *Your* scheduled return date.

No benefits are payable under the ACCIDENTAL DEATH BENEFIT for death resulting directly or indirectly from:

1. Training for, serving in, or participating in armed forces or related operations, or any competitions.
2. Serving as a pilot or crew member, or as a passenger on an aircraft used for purposes other than transportation.
3. Parachuting for any reason other than to save *Your* life.

CLAIMS PROCEDURE FOR ACCIDENTAL DEATH BENEFIT

Written notice of the accident MUST be provided within 30 days, and proof of loss (death certificate) within 90 days.

ADDITIONAL DEFINITIONS

- **Immediate Family** means *Your* Spouse, Mother, Father, Mother-in-law, Father-in-law, Son, Daughter, Son-in-law, Daughter-in-law, Grandson, or Granddaughter. Brothers and Sisters are NOT included.
- **Temporary Dwelling** means the residence at the out-of-province address where *You* temporarily reside during *Your* policy's coverage period.
- **Principal Residence** means the residence at the Canadian address listed on *Your* application for the Medipac Travel Emergency Medical Insurance Policy under which this endorsement was purchased.

Underwritten by Old Republic Insurance Company of Canada

Notice on Privacy

Privacy

Collecting personal information about You is essential to our ability to offer You high quality insurance products and service. The information provided by You will be used only for determining Your eligibility for coverage under the Policy, assessing insurance risks, managing and adjudicating claims and negotiating or settling payments to third parties. This information may also be shared with third parties, such as other insurance companies, health organizations and government health insurance plans to adjudicate and process any claim. In the event that we must share Your information with a third party who conducts business outside of Canada, there is a possibility that this information could be obtained by the government of the country in which the third party conducts business. We take great care to keep Your personal information accurate, confidential and secure.

Our privacy policy sets high standards for collecting, using, disclosing and storing personal information. If You have questions about our privacy policy, please visit www.orican.com/privacy or contact our Privacy Officer at privacy@orican.com or 1-800-530-5446.

Administration Fees

1. Change (<i>first change at no charge</i>).....	\$20.00
2. NSF cheque.....	\$10.00
3. Rush delivery service (<i>2-4 business days</i>).....	\$20.00
4. Extension	\$10.00
5. Full refund	
Medical reasons.....	FREE
Any other reason.....	\$50.00
6. Partial refund.....	\$20.00

Administration fees are non-refundable.

Short Term Rates

Short-Term Travel Medical Insurance

Medipac offers coverage for short-term travel at affordable rates, perfect for friends or family who visit you at your winter destination.

You can also turn your short-trip plan into year-round protection with either our 23-day or our 33-day 4-Season Annual Plan.

If you are age 55 and under, there are no medical questions. Simply call Medipac to purchase or apply online at www.medipac.com.

If you are over age 55, complete the application to determine your rate category and find your rate on pages 44 to 46.

INDIVIDUAL RATES FOR APPLICANTS AGE 55 AND UNDER

AGE	\$99 USD DEDUCTIBLE													23-day Annual Plan	33-day Annual Plan
	TRIP LENGTH														
	1-3	4-6	7-9	10-12	13-15	16-18	19-21	22-24	25-27	28-30	31-33	34-36	37-40		
TO 55	66	73	80	84	86	93	99	107	115	126	133	142	152	65	89

You must buy a minimum 22-24 day trip to purchase the 23-day 4-Season Annual Plan.

You must buy a minimum 31-33 day trip to purchase the 33-day 4-Season Annual Plan.

Family Plans

Coverage is available for three or more family members and insures you, your spouse (if applicable) and any children* (including grandchildren) who are at least 3 months old and under the age of 19. When taking a trip, children must be accompanied by either the applicant or spouse.

Note: If you or your spouse is over the age of 55 or if any child is over the age of 18, you must purchase a separate policy for that person.

Family plans cannot be extended beyond 40 days.

**see definition on page 2 of the policy*

FAMILY RATES FOR APPLICANTS AGE 55 AND UNDER

AGE	\$99 USD DEDUCTIBLE													23-day Annual Plan	33-day Annual Plan
	TRIP LENGTH														
	1-3	4-6	7-9	10-12	13-15	16-18	19-21	22-24	25-27	28-30	31-33	34-36	37-40		
TO 55	132	146	160	168	172	186	198	214	230	252	266	284	304	130	178

You must buy a minimum 22-24 day trip to purchase the 23-day 4-Season Annual Plan.

You must buy a minimum 31-33 day trip to purchase the 33-day 4-Season Annual Plan.

Call 1-800-633-4722 for more information or assistance

Short Term Rates for Individuals OVER Age 55

AGE	PREFERRED PLUS - \$99 USD DEDUCTIBLE													23-day Annual Plan	33-day Annual Plan
	TRIP LENGTH														
	1-3	4-6	7-9	10-12	13-15	16-18	19-21	22-24	25-27	28-30	31-33	34-36	37-40		
56-60	78	85	91	95	111	123	140	153	165	177	189	217	235	70	99
61-65	102	110	124	133	148	169	184	213	224	238	255	264	314	89	130
66-70	110	115	130	145	161	180	194	225	240	259	265	284	325	111	160
71-75	124	139	146	165	186	208	242	279	302	329	371	409	455	142	206
76-79	138	171	211	245	277	328	373	422	473	527	572	615	666	196	281
80-85	161	203	302	398	474	546	610	702	825	912	1,014	1,098	1,218	301	437
86+	223	348	487	598	725	852	962	1,096	1,254	1,397	1,615	1,841	2,053	374	549

Zero Deductible add 10% to \$99 Deductible Rates

AGE	PREFERRED PLUS - \$1,000 USD DEDUCTIBLE													23-day Annual Plan	33-day Annual Plan
	TRIP LENGTH														
	1-3	4-6	7-9	10-12	13-15	16-18	19-21	22-24	25-27	28-30	31-33	34-36	37-40		
56-60	75	80	88	91	105	117	136	149	163	172	182	203	214	68	89
61-65	98	104	115	123	142	164	184	200	221	235	250	261	303	80	116
66-70	104	112	122	130	152	174	190	209	230	250	261	272	313	95	136
71-75	118	129	141	155	173	204	235	272	299	321	355	393	437	119	172
76-79	135	142	197	239	270	308	355	396	453	506	541	580	630	173	251
80-85	146	188	273	360	432	495	552	669	751	812	921	998	1,110	262	385
86+	192	306	425	533	634	751	853	974	1,120	1,247	1,375	1,622	1,807	325	481

AGE	PREFERRED PLUS - \$5,000 USD DEDUCTIBLE													23-day Annual Plan	33-day Annual Plan
	TRIP LENGTH														
	1-3	4-6	7-9	10-12	13-15	16-18	19-21	22-24	25-27	28-30	31-33	34-36	37-40		
56-60	69	73	78	82	91	101	113	124	134	144	150	160	170	58	81
61-65	82	89	99	111	121	140	155	166	175	185	210	230	254	67	96
66-70	90	94	105	118	130	149	165	174	188	194	221	244	266	77	110
71-75	99	112	126	139	155	173	192	210	230	253	283	315	347	97	143
76-79	112	133	172	201	233	263	295	324	365	411	440	476	511	137	199
80-85	121	147	243	288	342	394	443	503	585	651	715	782	862	201	296
86+	161	246	340	420	511	593	673	769	919	1,047	1,174	1,321	1,466	264	389

You must buy a minimum 22-24 day trip to purchase the 23-day 4-Season Annual Plan.

You must buy a minimum 31-33 day trip to purchase the 33-day 4-Season Annual Plan.

Short Term Rates for Individuals OVER Age 55

AGE	PREFERRED - \$99 USD DEDUCTIBLE													23-day Annual Plan	33-day Annual Plan
	TRIP LENGTH														
	1-3	4-6	7-9	10-12	13-15	16-18	19-21	22-24	25-27	28-30	31-33	34-36	37-40		
56-60	92	104	127	154	177	197	215	226	245	266	280	304	336	92	131
61-65	115	144	167	190	218	241	268	294	318	342	356	378	414	126	177
66-70	122	156	193	222	227	290	324	355	391	414	442	479	513	172	249
71-75	146	191	237	240	277	354	403	442	493	534	574	617	711	220	318
76-79	175	224	307	381	453	499	593	656	731	807	836	946	1,084	322	470
80-85	263	339	467	602	730	820	955	1,095	1,235	1,340	1,463	1,631	1,846	425	623
86+	338	458	663	833	1,028	1,180	1,397	1,578	1,770	1,931	2,106	2,282	2,482	554	815

Zero Deductible add 10% to \$99 Deductible Rates

AGE	PREFERRED - \$1,000 USD DEDUCTIBLE													23-day Annual Plan	33-day Annual Plan
	TRIP LENGTH														
	1-3	4-6	7-9	10-12	13-15	16-18	19-21	22-24	25-27	28-30	31-33	34-36	37-40		
56-60	89	101	118	138	155	182	207	220	237	255	272	294	319	75	107
61-65	105	128	158	186	209	234	260	287	312	330	347	368	391	109	156
66-70	118	137	182	202	218	266	309	342	378	397	416	460	493	141	202
71-75	137	165	219	225	265	333	393	427	474	504	546	592	631	177	258
76-79	167	213	295	361	428	475	565	617	697	763	793	895	964	255	371
80-85	207	304	450	570	694	775	916	1,028	1,156	1,261	1,395	1,539	1,654	346	509
86+	306	434	625	787	972	1,123	1,324	1,465	1,666	1,826	1,974	2,159	2,345	482	714

AGE	PREFERRED - \$5,000 USD DEDUCTIBLE													23-day Annual Plan	33-day Annual Plan
	TRIP LENGTH														
	1-3	4-6	7-9	10-12	13-15	16-18	19-21	22-24	25-27	28-30	31-33	34-36	37-40		
56-60	80	89	100	113	128	143	150	163	176	183	194	214	239	72	103
61-65	95	106	125	142	156	173	185	197	208	225	236	251	291	89	130
66-70	101	123	141	164	187	205	225	244	259	272	286	315	366	115	160
71-75	130	150	170	201	233	256	277	299	325	346	366	407	486	144	208
76-79	151	190	228	277	327	369	409	432	487	517	549	624	715	210	306
80-85	177	249	353	438	533	593	679	734	816	885	968	1,074	1,155	280	415
86+	263	348	478	611	756	858	939	1,030	1,157	1,259	1,377	1,510	1,641	388	573

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You must buy a minimum 31-33 day trip to purchase the 33-day 4-Season Annual Plan.

Short Term Rates for Individuals OVER Age 55

AGE	STANDARD - \$99 USD DEDUCTIBLE												23-day Annual Plan	33-day Annual Plan	
	TRIP LENGTH														
	1-3	4-6	7-9	10-12	13-15	16-18	19-21	22-24	25-27	28-30	31-33	34-36			37-40
56-60	106	121	135	165	212	242	267	297	324	365	404	429	477	148	210
61-65	152	179	218	280	321	356	416	432	506	542	578	638	693	178	260
66-70	164	195	255	303	362	399	480	524	590	637	702	746	789	229	330
71-75	170	203	297	361	434	476	555	636	725	787	876	952	999	344	496
76-79	202	253	378	483	569	651	758	876	993	1,104	1,226	1,364	1,496	500	729
80-85	265	368	548	722	866	983	1,170	1,356	1,536	1,711	1,929	2,136	2,325	704	1,031
86+	399	608	997	1,268	1,591	1,797	2,126	2,493	2,807	2,998	3,205	3,438	3,740	1,040	1,531

Zero Deductible add 10% to \$99 Deductible Rates

AGE	STANDARD - \$1,000 USD DEDUCTIBLE												23-day Annual Plan	33-day Annual Plan	
	TRIP LENGTH														
	1-3	4-6	7-9	10-12	13-15	16-18	19-21	22-24	25-27	28-30	31-33	34-36			37-40
56-60	101	116	131	154	191	213	239	265	291	333	369	391	433	133	189
61-65	143	173	211	250	296	321	349	390	447	488	523	580	628	162	231
66-70	149	186	230	274	331	364	434	476	532	585	636	665	693	197	283
71-75	152	194	271	326	411	443	506	576	653	712	789	862	957	291	425
76-79	189	241	343	435	519	608	698	777	899	998	1,109	1,247	1,360	434	633
80-85	223	354	498	632	726	872	1,009	1,187	1,377	1,549	1,744	1,932	2,103	607	893
86+	366	551	899	1,154	1,440	1,627	1,844	2,176	2,485	2,766	2,952	3,119	3,328	923	1,364

AGE	STANDARD - \$5,000 USD DEDUCTIBLE												23-day Annual Plan	33-day Annual Plan	
	TRIP LENGTH														
	1-3	4-6	7-9	10-12	13-15	16-18	19-21	22-24	25-27	28-30	31-33	34-36			37-40
56-60	91	101	124	140	166	190	204	221	236	263	288	308	338	102	145
61-65	129	162	194	221	251	275	292	316	349	384	415	452	519	131	188
66-70	137	174	213	237	288	315	357	371	421	457	494	521	580	161	231
71-75	141	180	235	285	344	379	436	461	512	558	620	670	733	241	349
76-79	163	222	296	377	446	516	575	616	694	778	867	975	1,080	345	502
80-85	207	289	403	511	604	681	805	945	1,086	1,205	1,362	1,499	1,639	479	704
86+	322	437	719	926	1,153	1,342	1,553	1,766	1,979	2,158	2,324	2,497	2,712	728	1,078

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You must buy a minimum 31-33 day trip to purchase the 33-day 4-Season Annual Plan.

Trip Days – Quick Calculator

AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL
1	1	1 32	1 62	1 93	1 123	1 154	1 185	1 214	1 274	1 305	1 335
2	2	2 33	2 63	2 94	2 124	2 155	2 186	2 214	2 275	2 306	2 336
3	3	3 34	3 64	3 95	3 125	3 156	3 187	3 215	3 276	3 307	3 337
4	4	4 35	4 65	4 96	4 126	4 157	4 188	4 216	4 277	4 308	4 338
5	5	5 36	5 66	5 97	5 127	5 158	5 189	5 217	5 278	5 309	5 339
6	6	6 37	6 67	6 98	6 128	6 159	6 190	6 218	6 249	6 310	6 340
7	7	7 38	7 68	7 99	7 129	7 160	7 191	7 219	7 250	7 311	7 341
8	8	8 39	8 69	8 100	8 130	8 161	8 192	8 220	8 251	8 312	8 342
9	9	9 40	9 70	9 101	9 131	9 162	9 193	9 221	9 252	9 313	9 343
10	10	10 41	10 71	10 102	10 132	10 163	10 194	10 222	10 253	10 314	10 344
11	11	11 42	11 72	11 103	11 133	11 164	11 195	11 223	11 254	11 315	11 345
12	12	12 43	12 73	12 104	12 134	12 165	12 196	12 224	12 255	12 316	12 346
13	13	13 44	13 74	13 105	13 135	13 166	13 197	13 225	13 256	13 317	13 347
14	14	14 45	14 75	14 106	14 136	14 167	14 198	14 226	14 257	14 318	14 348
15	15	15 46	15 76	15 107	15 137	15 168	15 199	15 227	15 258	15 319	15 349
16	16	16 47	16 77	16 108	16 138	16 169	16 200	16 228	16 259	16 320	16 350
17	17	17 48	17 78	17 109	17 139	17 170	17 201	17 229	17 260	17 321	17 351
18	18	18 49	18 79	18 110	18 140	18 171	18 202	18 230	18 261	18 322	18 352
19	19	19 50	19 80	19 111	19 141	19 172	19 203	19 231	19 262	19 323	19 353
20	20	20 51	20 81	20 112	20 142	20 173	20 204	20 232	20 263	20 324	20 354
21	21	21 52	21 82	21 113	21 143	21 174	21 205	21 233	21 264	21 325	21 355
22	22	22 53	22 83	22 114	22 144	22 175	22 206	22 234	22 265	22 326	22 356
23	23	23 54	23 84	23 115	23 145	23 176	23 207	23 235	23 266	23 327	23 357
24	24	24 55	24 85	24 116	24 146	24 177	24 208	24 236	24 267	24 328	24 358
25	25	25 56	25 86	25 117	25 147	25 178	25 209	25 237	25 268	25 329	25 359
26	26	26 57	26 87	26 118	26 148	26 179	26 210	26 238	26 269	26 330	26 360
27	27	27 58	27 88	27 119	27 149	27 180	27 211	27 239	27 270	27 331	27 361
28	28	28 59	28 89	28 120	28 150	28 181	28 212	28 240	28 271	28 332	28 362
29	29	29 60	29 90	29 121	29 151	29 182		29 241	29 272	29 333	29 363
30	30	30 61	30 91	30 122	30 152	30 183		30 242	30 273	30 334	30 364
31	31		31 92		31 153	31 184		31 243	31 304		31 365

TRIP DURATION CALCULATOR

Select the **Red** numbers beside your departure and return dates. Insert them into the formula and complete the calculation. Statutory holidays highlighted in green.

	EXAMPLE: (if you are leaving October 15 and returning March 25)	CALCULATE YOUR TRIP LENGTH:
Return Date #	237	
<i>minus</i> Effective Date #	76	-
subtotal	161	
Add 1	1	1
Equals Trip Duration (days)	162	
	<i>Select the 165-day package to cover your entire trip.</i>	

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