



Local 67 Benefit Plans

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**GROUP EMERGENCY OUT OF  
PROVINCE/COUNTRY MEDICAL**

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# **TRAVEL MEDICAL INSURANCE**

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*Insurance is underwritten by  
AIG Insurance Company of Canada*



## Your Travel Coverage

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### How Group Emergency Out of Province/Country Insurance Helps

Accidental injury and unexpected illness are ways in which medical emergencies can arise while you are travelling abroad.

Out-of-country healthcare services are not typically covered under Canada's health plan, and emergency situations are further complicated by differences in language and standards of care.

AIG's Assistance Company is backed by a team of emergency care professionals –physicians and nurses who work closely with the doctor looking after you and, if necessary, your family doctor, to help ensure that you receive the medical care you need.

This plan provides extensive coverage for many services rendered outside your province/country of residence. It is important to note that such expenses are covered if they were unexpected and of an emergency nature.

### When your coverage starts:

Coverage begins when you become eligible for the UA Local 67 Welfare Plan. Coverage for each trip begins on the date and time you leave your province of residence.

### When your coverage ends:

- 12:01 am the date following the 90th day of your trip (60th day if you are retired ); or
- the date you return to your province of residence; or
- the date you or your dependent is no longer eligible on the UA Local 67 Welfare Plan; or
- the date of the member's 85th birthday; or
- the date this policy terminates.

## How To Use Your Travel Coverage

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### In a medical emergency here is what to do:

You or someone on your behalf must call AIG Assist immediately.

#### **AIG Assist**

- U.S. and Canada toll free: **1 877 204-2017**
- U.S. and Canada (collect): **+1 715 295-9967**

#### **An operator will ask you the following:**

- Your name, location, and the details of your emergency
- Your GROUP NAME: **U.A. Local 67 Welfare Plan**
- Your POLICY NUMBER: **9429604**

# Benefits and Coverages

## Out Of Province/Country Medical Benefits:

- \$2,000,000 maximum per Insured Person per trip
- Maximum Trip Duration
  - 90 days for Active Members
  - 60 days for Retired MembersSpouses and eligible dependent children are covered under the same terms as the insured member.
- **There is no coverage once the member turns age 85**
- **Emergency Hospital Confinement:** Included in Total Maximum for Reasonable and Customary charges made by the Hospital for services and supplies provided to the Insured Person to the extent that such are Medically Necessary, including semi-private accommodation and only if **such expenses** are incurred while this Policy is in effect for such person.
- **Emergency Medical and Therapeutic Services:** Included in Total Maximum, where applicable sub limits are noted below:
  - the services of a Physician or legally qualified surgeon;
  - laboratory tests and X-ray examinations (not including MRI) ordered by a Physician or legally qualified surgeon for the purpose of diagnosis;
  - MRI, for diagnostic purposes when Medically Necessary, up to \$7,500 per Insured Person per Trip;
  - the services of a registered graduate nurse (other than an Immediate Family Member of the Insured Person), up to 50 nursing shifts at a fee not to exceed \$100 per shift;
  - rental of crutches or a Hospital type bed, or the cost of splints, canes, slings, trusses, braces or other prosthetic appliances approved by the Company;
  - the services of a Physician who is an anesthetist;
  - drugs or medicines that require a Physician or legally qualified surgeon's written prescription;
  - services of a chiropodist, chiropractor, osteopath, physiotherapist or podiatrist, up to \$300 for each class of practitioner;
  - expenses for accidental Injury to natural and sound teeth (capped or crowned teeth are considered whole or sound natural teeth) which require Treatment by a legally qualified dentist or dental surgeon, up to \$2,000 for any one accident;
  - out-patient services provided by a Hospital.



Travel Guard®

## Emergency Assistance Card

Group Name:	U.A. Local 67 Welfare Plan
Policy Number:	9429604

In the event of a medical emergency, you must contact AIG Travel immediately:  
U.S. AND CANADA TOLL FREE: 1 877 204-2017  
OUTSIDE U.S. AND CANADA (COLLECT): +1 715 295-9967

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- **Repatriation Benefit:** If an Insured Person has a Medical Emergency causing loss of life while on a Trip and when this Policy is in effect for such person, the Company shall pay the actual expenses incurred for preparing the deceased Insured Person for burial or cremation and shipment of the body to the city of residence of the deceased Insured Person, up to \$15,000.
  - **Identification Benefit:** If an Insured Person has a Medical Emergency causing loss of life for which a benefit is paid or payable hereunder and the Insured Person's body requires identification, the Company will pay to one Immediate Family member of the Insured Person, the reasonable and necessary expenses actually incurred by such Immediate Family member up to \$5,000 for:
    - (a) commercial lodging and board while en route and/or during the stay in the city or town where the body is located (not to exceed a maximum duration of 3 consecutive nights); and
    - (b) transportation by the most direct route to such location.
  - **Automobile Return:** If as a result of a Medical Emergency an Insured Person is unable to return to their province of residence with the vehicle used for their Trip, the Company will pay the actual expense incurred for a commercial agency to return the Insured Person's private or rental vehicle used for the Trip to the Insured Person's place of residence or nearest rental agency, up to \$1,000 per trip.
  - **Out-of-Pocket Expense Benefit:** If an Insured Person or their Travel Companion is hospitalized as an inpatient during their Trip and are delayed beyond the end of their Trip the Company will pay for reasonable and necessary commercial living expenses, such as commercial accommodations and meals, incurred by any Insured Person, up to \$150 per day up to a maximum of \$1,500.
  - **Family Transportation:** If an Insured Person experiences a Medical Emergency resulting in the Insured Person being confined to a Hospital located outside their province of residence, the Company shall pay the reasonable and necessary expenses actually incurred for the transportation of one Immediate Family member to such Hospital, up to \$15,000 maximum for any one accident and up to \$250/day for incidental travel expenses.
  - **Return Transportation for Travelling Companion:** If the Insured Person is repatriated to their province of residence in accordance with the *Repatriation Benefit*, or is returned to their province of residence in accordance with the *Ground or Air Transportation Benefit*, the Company will pay a benefit to such Insured Person (or the estate of such Insured Person) for the extra cost of a one-way economy air fare on a commercial flight or charter via the most cost effective itinerary to transport the Insured Person's Travel Companion to their province of residence, up to \$2,000 for any one Trip for the transportation of one Travel Companion.
  - **Return and Escort of Dependent Children:** Up to \$5,000 per repatriated or returned Insured Person.
  - **Ground Transportation Benefit:** If a Medical Emergency during a Trip results in a Medically Necessary transportation of an Insured Person by a licenced ground ambulance, the Company will pay the expenses actually incurred up to \$5,000 for such transportation.
  - **Emergency Air Transportation Benefit:** If you or your eligible insured dependent's medical condition requires air transportation to the nearest hospital or to return to your province of residence. This service must be coordinated and approved by the Company, up to \$300,000 for a licenced air ambulance.



# Policy Exclusions

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**The policy will not cover any losses caused in whole or in part by, or resulting in whole or in part from, the following:**

- a. Sickness or Injury sustained while the Insured Person is on full-time active duty in the armed forces or organized reserve corps of any country or international authority;
- b. Injury sustained while the Insured Person is under the influence of alcohol and operating any vehicle or means of transportation or conveyance while his or her blood alcohol is over 80 milligrams in 100 millilitres of blood;
- c. Injury sustained while the Insured Person is under the influence of a drug or substance which is controlled as specified under the Controlled Drug and Substances Act (Canada) (even if such drug or substance is taken outside Canada) unless taken pursuant to the advice of and in strict accordance with the instructions of a Physician;
- d. the abuse of medication or drugs or non-compliance with prescribed medical therapy or Treatment whether prior to or during the Insured Person's Trip;
- e. Injury incurred while an Insured Person is in the course of committing or attempting to commit, any act which if adjudicated by a court would be an indictable offence under the laws of the jurisdiction where the act was committed;
- f. **childbirth or any unexpected pregnancy complications after 31 weeks;**
- g. routine pre-natal care;
- h. voluntary termination of pregnancy;
- i. a child born during a Trip covered under this policy;
- j. Sickness or Injury where the Trip is undertaken for the purpose of securing medical Treatment or advice for such Sickness or Injury;
- k. Sickness or Injury due to participation in any professional sport;
- l. suicide or any attempt at suicide;
- m. intentionally self-inflicted Injury or any attempt at intentionally self-inflicted Injury;
- n. an act of declared or undeclared war, civil war, rebellion, revolution or insurrection;
- o. repair or replacement of the following except for the purpose of modifying the item because the Injury or Sickness has caused further impairment in the underlying bodily condition:
  - i. existing artificial limbs, artificial eyes or other prosthetic appliances or rental of existing durable medical equipment;
  - ii. **new, or repair or replacement of, dentures, bridges, dental implants, dental bands or braces or other dental appliances, crowns, caps, inlays or onlays, fillings or any other treatment of the teeth or gums, except for repair or replacement of sound natural teeth damaged or lost;**
  - iii. new eye glasses or contact lenses or eye examinations related to the correction of vision or related to the fitting of glasses or contact lenses;
  - iv. new hearing aids or hearing examinations;
  - v. rental of durable medical equipment where the total rental expense exceeds the usual purchase expense for similar equipment in the locality where the expense is incurred (but if, in the Company's sole judgment, Emergency Medical and Therapeutic Services for rental of durable medical equipment

- are expected to exceed the usual purchase expense for similar equipment in the locality where the expense is incurred, the Company may, but is not required to, choose to consider such purchase expense as a Reasonable and Customary charge in lieu of such rental expense);
- p. Personal comfort or convenience items, such as but not limited to Hospital telephone charges, television rental, or hospital guest meals;
  - q. Treatment or services when reimbursement or coverage by the Company would contravene any GHIP in Canada;
  - r. expenses incurred on an elective (non-emergency) basis;
  - s. any Treatment, investigation or surgery for a specific condition, or a related condition, which had caused the Insured Person's Physician to advise such person not to travel;
  - t. any services or supplies provided by an Insured Person or an Immediate Family Member of the Insured Person;
  - u. a Sickness or Injury that, at the time of departure, might reasonably be expected to require an Insured Person to undergo Treatment, investigation, surgery or hospitalization;
  - v. **any service, Treatment, surgery or stay in Hospital not required for the immediate relief of acute pain or suffering or which is not Medically Necessary;**
  - w. any Treatment or surgery which reasonably could be delayed until the Insured Person returns to their province of residence;
  - x. anticipated medical Treatments required on an ongoing basis or for continued stabilization of a medical condition known to the Insured Person prior to departure from their province of residence;
  - y. **any sickness, injury or medical condition that is a Pre-Existing Condition 90 days prior to the Insured Person's Departure Date;**
  - z. that portion, if any, of any expenses for Treatment, advice or hospitalization which are not Reasonable and Customary.

*This brochure outlines the main features of your Group Emergency Out of Province Medical insurance plan through UA Local 67 Welfare Plan, but the policy issued by AIG Insurance Company is the governing document. If there are any variations between this brochure and the provisions of the policy, the policy will prevail.*

## Your Emergency Assistance Card:

**Please detach your Emergency Assistance Card and keep it with you at all times when you travel out of your province or country.**



**Travel Guard®**

### Emergency Assistance Card

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Policy Number:	9429604

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