



Who is eligible for coverage

To be eligible for coverage, all of the following conditions must be met:

1. As of the effective date of your policy you must:
 - a) be at least 15 days old; and
 - b) be a Canadian resident and be insured for benefits under a Canadian government health insurance plan during the entire Coverage Period; and
 - c) not have been advised against travel by a physician for a period of time which includes your trip; and
 - d) not be travelling to receive treatment or alternative therapy of any kind, and
2. In the last two (2) years, you must not have been diagnosed with or received treatment for a terminal condition for which a physician gave you a prognosis of eventual death or for which palliative care was or is being received.
3. If you are age 65 or older on the effective date, to be eligible for coverage you must not require assistance with activities of daily living including but not limited to, eating, bathing, using the toilet, changing positions (including getting in and out of a bed or chair), or dressing, as the result of a medical condition or state of health.

Definitions:

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

Physician: A person, other than you, a family member or a travelling companion, who is a medical practitioner and whose legal and professional standing within his or her jurisdiction is equivalent to that of a doctor of medicine (M.D.) licensed in Canada.

IMPORTANT:

Canadian resident means a person legally authorized to reside in Canada and who maintains a permanent residence in Canada.

The provincial and territorial government health insurance plans limit the time a person can be out of Canada and still remain eligible for provincial coverage. It is your responsibility to ensure you remain eligible during your Coverage Period. Check your province or territory's health insurance plan for details.