



When you travel for business or pleasure, your Chambers of Commerce Group Insurance Plan® continues to work for you. The Plan's Extended Health benefit includes coverage for eligible expenses resulting from a medical emergency outside your province of residence.

OUT-OF-PROVINCE/COUNTRY TRAVEL MEDICAL EMERGENCY COVERAGE

This Chambers Plan benefit is designed to cover charges for **emergency medical treatment** outside your province of residence. **Medical Emergency means an unforeseen illness or accidental injury requiring immediate medical treatment.** The emergency expenses must be reasonable and customary for the area in which they are charged. This plan will pay for eligible expenses that exceed the provincial health insurance plan schedule in the insured's home province. Covered services include:

- semi-private hospital room;
- hospital medical services and supplies;
- physicians' services;
- prescription drugs;
- licensed ground or air ambulance to the **nearest** hospital equipped to provide the required treatment.





COVERAGE ELIGIBILITY

- In the event of a medical emergency, you must **contact Voyage Assistance immediately to confirm your coverage and to access the covered services**. The toll free emergency numbers are on the back of your Chambers Plan group insurance wallet card. We suggest you carry this card with you at all times.
- You must be covered under the Government Health Insurance Plan in your province or territory of residence and your provincial health plan must be prepared to pay a portion of any claim.

CONTACTING THE VOYAGE ASSISTANCE CENTRE WILL NOT ONLY CONFIRM YOUR ELIGIBILITY FOR COVERAGE, BUT IT WILL ALSO MAKE THE FOLLOWING SERVICES AVAILABLE TO YOU OR ANY DEPENDENT INSURED UNDER THE EXTENDED HEALTH CARE BENEFIT OF THIS POLICY:

Medical Assistance and Consultation

If required, *Voyage Assistance* will help locate a physician or medical facility, monitor an individual's condition, and guarantee payment of medical expenses subject to the provisions of this policy.

Telephone Interpretation Services

Voyage Assistance will provide translation services in all major languages for an individual who needs help communicating with local health care professionals.

Emergency Medical Payments

Voyage Assistance will advance funds if required in order for an individual to obtain necessary medical service.

Medical Evacuation

At its discretion, *Voyage Assistance* will arrange and pay for transportation, under proper medical supervision, if an individual must be evacuated to a different hospital or treatment facility or be repatriated to Canada for treatment.

After Hospital Convalescence

Voyage Assistance will pay up to \$150 per day for a maximum of 7 days for the cost of daily room and board. This becomes an eligible expense when, in consultation with a local attending Physician, it is determined that the individual is unable to travel and should convalesce after discharge from the hospital, extending the stay beyond the originally scheduled return date.

Return of Dependent Children

Voyage Assistance will arrange for the transportation of children under age 16 to their normal place of residence in Canada by the most economically suitable route. To be eligible, the children must be traveling with the individual who is hospitalized, then left unattended as a result of the Medical Emergency. A qualified escort will accompany the children when considered necessary.

Bedside Visit

If an insured's traveling alone, *Voyage Assistance* will provide one round trip economy class airfare, for one immediate family member to join the insured if he or she must be hospitalized for more than 7 consecutive days as a result of a Medical Emergency.

Meals and Accommodation

Voyage Assistance will pay up to \$150 per family per day for a maximum of 7 days, for the cost of daily room and board for any

- a) family member brought by *Voyage Assistance* to the bedside of the hospitalized individual who is traveling alone, or
- b) individual whose trip home is delayed beyond the original scheduled return date due to the emergency hospitalization of another individual traveling with him.

TRAVEL COVERAGE
THAT NEVER TAKES A HOLIDAY

Trip Interruption

Voyage Assistance will arrange and pay for a one way economy class airfare direct to an insured's normal residence in Canada (less any refund value of the original ticket), in the event they miss their scheduled flight home due to their own or their dependent's hospitalization as a result of a Medical Emergency.

Return of Deceased

Voyage Assistance will arrange for the necessary authorizations and pay up to \$5,000 for the preparation (including cremation) and transportation of a deceased insured to the normal place of residence in Canada. The cost of a burial coffin is not included.

Return of Vehicle

If disabled as a result of a Medical Emergency and unable to drive the vehicle used at the time (provided there is no alternative driver available), *Voyage Assistance* will arrange for and pay up to \$1,000 for the return of that vehicle by a commercial agency. The vehicle will be delivered to the insured's normal place of residence in Canada or, if the vehicle is rented, to the nearest appropriate rental agency.

Urgent Messages

In the event of a personal difficulty, *Voyage Assistance* will assist in the exchange of messages with immediate family members or an employer.

Lost Luggage and Documents

Voyage Assistance will contact the appropriate authorities regarding lost luggage, and the replacement of lost documents.

Legal Assistance

In the event of a car accident, or if the insured is charged with a traffic violation or other civil offence, *Voyage Assistance* will help locate local legal aid. The cost of the legal services are the insured's responsibility.



VOYAGE ASSISTANCE

LIMITS

- All totally disabled employees who qualify for Waiver of Premium under the Life Insurance benefit and any insured dependent classified as a student outside of Canada are not eligible for any Out-Of-Province/Country expenses.
- The emergency must be due to an accident or sudden illness during the first 60 days of any trip. Coverage is not provided after the first 60 days. Insureds staying outside the province of residence longer than 60 days should notify the Plan Administrator before departure. **For individuals with Health Option E40/41** (please see your *Certificate of Insurance* to confirm the option you hold), the emergency must be due to an accident or sudden illness during the first 15 days of a trip.
- **For employees over age 65**, coverage is limited to the first 30 days of a trip. Coverage is based on the employee's age, not the dependent's. i.e. if the employee is 67 and the spouse is 60, both are subject to this limitation.
- Chambers Plan coverage does not pay for elective, non-emergency treatment or surgery, when this service could have been provided in the province of residence of the employee without endangering life or health, even if such service is provided as a result of a sudden illness or accident requiring emergency treatment, or if the purpose of the trip is to obtain medical services advised as necessary, but not readily available in the province of residence.

MAKING TRAVEL HEALTH CLAIMS

All foreign bills must be translated before you send them to us. Eligible claims are payable on a reimbursement basis in Canadian currency at the conversion rate in force when the claim is processed.

For employees in Manitoba, Saskatchewan, North West Territories, Yukon, Nunavut and Newfoundland

Please submit your travel claim to your provincial government plan **first**. Then submit unpaid expenses to the group plan using a *Travel Health Claim* form.

WHEN MAKING A CLAIM:

- Start the process as quickly as possible once you return to your province or territory.
- Make copies of all your receipts. Submit the originals along with your health registration number, your full name and address, the reason for the hospital or doctor visit, the dates you left and returned to your home province, and the reason you were away to your respective Provincial plans:
 - Manitoba Health**, 300 Carlton Street, Winnipeg, MB, R3B 3M9
 - Newfoundland Medical Care Plan**, Box 200, St. Johns, NF, A1C 5J3
 - NWT Health and Social Services**, Box 1320, Yellowknife, NT, X1A 2L9
 - Saskatchewan Medical Services**, 3475 Albert Street, Regina, SA, S4S 6X6
 - Yukon Health and Social Services**, Box 2703, Whitehorse, YK, Y1A 2C6
- Once you have received a *Statement of Benefits* from your provincial plan, the Chambers Plan will pay up to the balance of eligible expenses paid by your provincial plan as long as the expenses are less than 365 days old. Send us a **copy of your provincial plan's *Statement of Benefits* and the copies of your receipts** with the completed *Travel Health Claim* form including
 - Your health registration number
 - Your full name and address
 - The reason for the hospital or doctor visit outside your province
 - The dates you left and returned to your province, and
 - The reason you were away.

For employees in all other provinces

Please submit ALL travel claim expenses to the group plan using a *Travel Health Claim* form. The insurance company will coordinate payments on your behalf with your provincial government plan.

WHEN MAKING A CLAIM:

- Start the process as quickly as possible once you return to your province or territory.
- The Chambers Plan will pay up to the balance of expenses deemed eligible by your provincial plan as long as the expenses are less than 365 days old.
- Make copies of all your receipts.
- Send us the original receipts with the completed *Travel Health Claim* form including
 - Your health registration number
 - Your full name and address
 - The reason for the hospital or doctor visit outside your province
 - The dates you left and returned to your province, and
 - The reason you were away.

EXCLUSIONS AND LIMITATIONS

Extended Health benefits are not payable under any of the following circumstances:

- experimental services, treatments or supplies, or charges for services which are not medically necessary;
- drugs, injections or products for the treatment of obesity;
- travel vaccines, patent medicines, general health exams and physicians' fees;
- services or treatment provided by anyone related by blood or marriage or living in the insured's residence (this might come up, for example, if an insured lives with a dentist or pharmacist); or services, treatment or supplies provided to the employee by the employer;
- expenses as a result of intentionally self-inflicted injuries, while sane or insane;
- cosmetic treatment expenses, except as a result of an accidental injury;
- treatment for injuries sustained while committing or attempting to commit a criminal offence;
- expenses for which payment is provided under any Workers' Compensation Act or similar legislation, government plan or any other plan;
- injuries caused directly or indirectly by insurrection and war, or participation in a riot or civil disorder;
- personal comfort items and erectile dysfunction drugs/items;
- services, treatment or supplies which the individual received without charge, or amounts in excess of reasonable and customary charges for the least expensive treatment that is medically appropriate;
- travel time, broken appointments, transportation costs, telephone or other indirect consultations;
- expenses related to temporomandibular joint dysfunction;
- expenses related to implants;
- elective treatments and services not listed in eligible expenses;
- **out of province referrals.**

For immediate assistance in a medical emergency outside your province of residence, contact the Voyage Assistance Coordination Centre in Montreal, Quebec.

Inside Canada or the US, call 1 800 465 6390

Outside Canada or the US, call collect 1 514 875 9170

IDENTIFYING YOURSELF

The Coordination Centre needs the following information to identify you as a plan participant.

Insured's Name _____

Firm and Certificate # _____

Effective Date of Coverage _____

Group: **Chambers of Commerce Group Insurance Plan**

The above information is found on the wallet card provided at the bottom of your Certificate of Insurance. We recommend you carry the card with you when you travel.

Chambers of Commerce Group Insurance Plan
582 King Edward Street, Winnipeg, MB, R3H 0P1
1 800 665 3365 (In Winnipeg 774 6677)
www.chambers.ca

AT WORK FOR
SMALL BUSINESS
SINCE 1970

Chambers of Commerce
Group Insurance Plan®

www.chambers.ca



Please print your Firm & Certificate #

Firm #

Certificate #

T R A V E L H E A L T H C L A I M

Please read these instructions carefully before completing the form:

- Please print clearly and answer all questions. All the information you provide on this form will be treated as confidential.
Enclose itemized receipts for all services received along with a copy of the payment advice from your government plan.
Keep a copy of this claim for your records.

Chambers of Commerce Group Insurance Plan, 582 King Edward Street, Winnipeg, Manitoba R3H 0P1
Call 1-800-665-3365, Fax (204) 774-6698 or 1-800-457-8410

Employee's Last Name Employee's Given Name(s)

Employee's Full Mailing Address Date of Birth (D/M/Y)

Patient's Name Relationship to Employee Date of Birth (D/M/Y)

Departed from Home Province (D/M/Y) Originally Scheduled Return (D/M/Y) First Treatment (D/M/Y)

Are you or your dependents eligible for benefits under any other insurance plan? Yes No If "Yes" complete the following

Insurer's Name

Policy or Contract Number Person Insured

This claim is the result of a sudden illness (go to next section) an accident (complete the rest of this section)

Type of Accident Location of Accident

Date of Accident Name and Address of Lawyer Representing You With Respect to the Accident

Details of Accident

Why did you need medical attention? What was the nature of the illness or injury?

Attending Physician Name Were you hospitalized? No Yes

Address If "No," who provided treatment? Name

Address

Family Physician at Home Name If "Yes," where were you hospitalized? Hospital Name

Address Address

STATEMENT OF EXPENSES (Attach receipts)

Table with 4 columns: Description, Organization Name on Billing, Date of Service, Amount/Currency. Rows include Hospital, Ambulance, Prescription Drugs, Other, and TOTAL.

ALL DOCUMENTS MUST BE TRANSLATED TO ENGLISH/FRENCH PRIOR TO SUBMISSION.

I certify that this claim is true and correct and agree that it shall be subject to the provisions of the Group Policy. I hereby authorize any physician, hospital, dentist, insurance company or organization to release any information regarding the medical history, treatment, disability or benefits payable for this claim to the Chambers of Commerce Group Insurance Plan or Desjardins Financial Security. A photocopy of this authorization shall be as valid as the original.

I understand that the fees listed in this claim may not be covered or may exceed my group insurance benefits. I understand that I am financially responsible for the entire cost of services received and that this claim is for reimbursement of eligible charges.

Date Residence Phone Business Phone

Employee's or Legal Representative's Signature