

# Your Desjardins Odyssey Gold, Travel Gold and Odyssey World Elite credit card travel insurance guide

## **Very important:**

### **When you receive your guide**

- Make sure you read all the exclusions and limitations that apply to your insurance (see pages 26 to 36).

### **Before leaving on your trip**

- Make sure you're covered for an injury, medical condition or symptoms that you've had for 3 or 6 months prior to your departure date (see pages 26 to 29).
- Make sure you ask us to extend your insurance if the duration of your trip exceeds the number of days of insurance included with your credit card (see pages 37 and 38).

### **In case of emergency while travelling**

- Don't forget to call the Assistance Service **BEFORE** going to a hospital or clinic. Otherwise, penalties may apply (see page 9).



**Desjardins**  
**Insurance**

**LIFE • HEALTH • RETIREMENT**

Desjardins Insurance refers to Desjardins  
Financial Security Life Assurance Company.

## Important Numbers

➤ **In case of emergency while travelling:**

Canada and U.S. – toll free

**1-888-419-2495**

Anywhere in the world – collect call

**514-875-2495**

➤ **To make a claim or modify your contract**  
(extend or add coverage or increase insurance amount):

- **Website**

[desjardinstravelinsurance.ca](http://desjardinstravelinsurance.ca)

- **Phone**

Canada and U.S. – toll free

**1-800-463-1623**

➤ **For all other questions:**

Canada and U.S. – toll free

**1-800-463-1623**

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### Notice from the Autorité des marchés financiers

The Autorité des marchés financiers does not express an opinion on the quality of the product offered in this guide.

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In this guide, words in *italics* are defined on pages 50 to 52.

## Table of Contents

|   |           |
|---|-----------|
| <b>Important Numbers .....</b>                                  | <b>2</b>  |
| <b>Table of Coverage .....</b>                                  | <b>4</b>  |
| <b>Introduction .....</b>                                       | <b>6</b>  |
| <b>Product description .....</b>                                | <b>6</b>  |
| <b>Nature of coverage .....</b>                                 | <b>6</b>  |
| <b>Who is covered under this insurance (eligibility)? .....</b> | <b>7</b>  |
| <b>Description of the coverages .....</b>                       | <b>8</b>  |
| 1. Emergency Health Care coverage .....                         | 8         |
| 2. Trip Cancellation coverage .....                             | 15        |
| 3. Baggage coverage.....  | 21        |
| 4. Common Carrier Accident coverage .....                       | 23        |
| <b>Insurance start date .....</b>                               | <b>25</b> |
| <b>Insurance end date .....</b>                                 | <b>25</b> |
| <b>Important – Exclusions and limitations .....</b>             | <b>26</b> |
| <b>Modifying your contract .....</b>                            | <b>36</b> |
| <b>Free automatic extension .....</b>                           | <b>41</b> |
| <b>Assistance Service .....</b>                                 | <b>42</b> |
| <b>Other information .....</b>                                  | <b>43</b> |
| What documents make up your travel insurance contract? .....    | 43        |
| Can we make changes to the contract?.....                       | 43        |
| Can we cancel the contract?.....                                | 44        |
| Termination of a coverage for an insured..                      | 44        |
| <b>Submitting a claim .....</b>                                 | <b>45</b> |
| Three steps .....   | 45        |
| Our response to your claim .....                                | 47        |
| If you do not agree with our decision (appeal process) .....    | 47        |
| Payment of your claim .....                                     | 48        |
| <b>Definitions .....</b>  | <b>50</b> |
| <b>Similar travel insurance products .....</b>                  | <b>53</b> |
| <b>Referral to the Autorité des marchés financiers .....</b>    | <b>53</b> |
| <b>Are you dissatisfied with our service? .....</b>             | <b>53</b> |
| <b>Personal information management .....</b>                    | <b>54</b> |

## Table of Coverage

All the amounts shown in the Table of Coverage apply per *insured*, per trip, unless otherwise indicated. The insurance under some coverages may be modified.

### EMERGENCY HEALTH CARE

**Maximum age of the *insured*  
(at start of coverage):**

Age 75

**Number of days of insurance included:**

Age 59 or younger ..... 60 days

Age 60 to 64 ..... 31 days

Age 65 to 75 ..... 15 days

Age 76 or older..... not covered

**Maximum reimbursement  
of eligible expenses:** \$5,000,000

### TRIP CANCELLATION

**Maximum age of the *insured*:**

No age limit

**Number of days of insurance included:**

No limit

However, the trip cannot exceed a  
maximum of 365 days

**Insurance amount:** \$2,500

However, if you have to return  
from your trip before or after  
the date planned: unlimited

Note: The fees must have been paid using the *credit card*.

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## **BAGGAGE**

### **Maximum age of the *insured*:**

No age limit

### **Number of days of insurance included:**

Age 59 or younger ..... 60 days

Age 60 to 64 ..... 31 days

Age 65 or older..... 15 days

### **Insurance amount:**

Theft or damage of baggage: \$1,000

Baggage delay: \$500

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## **COMMON CARRIER ACCIDENT**

### **Maximum age of the *insured*:**

No age limit

### **Number of days of insurance included:**

No limit

**Maximum insurance amount:** \$1,000,000

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### **The insurance is offered by:**

Desjardins Financial Security

Life Assurance Company

200 rue des Commandeurs

Lévis QC G6V 6R2

Telephone: 1-855-368-6924

[desjardinstravelinsurance.ca](http://desjardinstravelinsurance.ca)

### **In some provinces, some coverages are offered by:**

The Personal Insurance Company

6300 boul. Guillaume-Couture

Lévis QC G6V 6P9

Telephone: 1-800-463-6416

[desjardins.com](http://desjardins.com)

## Introduction

### What's the purpose of this guide?

This guide describes the travel insurance included with your *credit card* so you can decide for yourself whether it meets your needs, considering that you are not in the presence of an insurance representative.


## Product description

### Nature of coverage

#### What is the purpose of the travel insurance included with your *credit card*?

This insurance provides financial protection against **sudden and unforeseen** events that could occur while travelling.

Your contract therefore includes certain exclusions relating to some activities or illnesses among other things. For example, you may not be covered while practicing dangerous sports or for health problems or symptoms that you had before leaving on your trip.

We recommend that you read the exclusions and limitations section of this guide so you understand your coverage (see pages 26 to 36). 

#### When are you covered under this insurance?

This insurance covers you for trips outside your *province of residence* of a duration equal to or less than the number of days of insurance included indicated in the Table of Coverage.

Please note that the **Common Carrier Accident** and **Trip Cancellation** coverages also cover you for trips inside your *province of residence*.

## How are the insurance amounts and maximums applied?

All the amounts apply per *insured*, per trip, unless otherwise indicated.

## What is the effective date of the contract?

The Desjardins Odyssey Gold, Travel Gold and Odyssey World Elite travel insurance contract takes effect on May 15, 2016 and replaces all other Desjardins Odyssey Gold and Travel Gold travel insurance contracts. The terms and conditions described in this guide apply to any coverage that begins as of May 15, 2016.

## Who is covered under this insurance (eligibility)?

### To be covered under the travel insurance included with your *credit card*:

- a) you must be a *Canadian resident* and at least 15 days old;
- b) you must, on the departure date, be younger than or the maximum age indicated in the Table of Coverage;
- c) you must have activated your *credit card* prior to departure;
- d) your privileges as a *cardholder* must not have been suspended;
- e) your *credit card* account must not be in arrears for more than 90 days;
- f) your trip must begin and end in Canada, in your *province of residence*;
- g) the destination of your trip must be outside your *province of residence*, except for the **Trip Cancellation and Common Carrier Accident** coverages.

This travel insurance also covers your *spouse* and your *dependent children* if they accompany you throughout their trip.

For the **Emergency Health Care** coverage, you, your *spouse* and your *dependent children* must be insured under the hospitalization insurance plan in your *province of residence* for the entire duration of the trip. You are responsible for ensuring that you have this government insurance.

**For a child that is born on the trip to be covered**

A child born during a trip is automatically insured under the **Emergency Health Care** coverage if the mother is insured under this coverage and expenses for delivery are not excluded (see the exclusions for this coverage).

**Description of the coverages**

**1. Emergency Health Care coverage**

**Important note!**

**Emergency Health Care only** covers you for trips whose duration is equal to or less than the number of days indicated in the Table of Coverage. If the duration of your trip exceeds the number of days indicated, you **must** ask us to extend your coverage. Otherwise, you will **not be covered** under the **Emergency Health Care coverage for your trip**. Your extended coverage must cover the entire duration of your trip, but you will pay only for the days of coverage not included under this insurance. The departure and return date count as full days when calculating the duration of the trip.



- We cover the **expenses outlined on pages 10 to 14, if incurred outside your *province of residence***, in the event that:
  - you suddenly and unexpectedly become ill or have an *accident* on your trip; **and**
  - you require emergency medical care or services.
- These expenses are covered:
  - up to the maximums indicated below, which, unless otherwise indicated, apply per *insured*, per trip;
  - up to an overall maximum of \$5,000,000 per *insured*, per trip;
  - up to the reasonable and customary amounts usually billed for such care or services in the region where they are received.
- **You must call the Assistance Service BEFORE going to a *hospital or clinic*** and follow their instructions. Otherwise, you will be required to pay 30% of the eligible expenses, up to a maximum of \$3,000.

If you are unable to call yourself (for example: you are unconscious), another person must call on your behalf within 24 hours following the *accident or illness*. If you are travelling alone, we recommend that you carry with you a copy of the telephone numbers to call in case of emergency.

- We are not responsible for the availability or quality of the care and services received.
- This insurance also covers your *spouse* and your *dependent children* if they accompany you throughout their trip.

## Eligible expenses

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### **1 Expenses for medical and dental care and services**

- a) Hospital room and board charges for semi-private accommodation or private accommodation, if your state of health requires it;
- b) the services of a *physician* or a nurse practitioner;
- c) the following care and services, if prescribed by a *physician*:
  - lab tests and X-rays;
  - nursing care provided during a hospitalization;
  - drugs that can only be obtained with a prescription. **These drugs are limited to a 30-day supply.** However, there is no limit on the drugs taken during a hospitalization;
  - purchase or rental of crutches, canes or splints;
  - rental of a wheelchair, respirator or other medical or orthopaedic devices;
  - any other type of care authorized by the Assistance Service.
- d) the services of a chiropractor (excluding X-rays), a podiatrist or a physiotherapist who are members in good standing of their professional association. **Maximum of \$60 per treatment and \$300 in total per profession.**
- e) treatment of natural healthy teeth (that still have their roots), in the event of an **emergency** resulting from a direct and accidental blow to the mouth. **Maximum of \$3,000.**

## **2 Living expenses if you have to delay your return**

*Living expenses* (accommodation, meals, transportation, etc.) that you are required to pay if you have to delay your return because you or a *family member* accompanying you suffers from an *illness* or injury. The *illness* or injury must be confirmed by a *physician*.

**Maximum of \$200 per day and \$2,000 in total.**

## **3 Emergency transportation expenses**

Transportation to the closest facility where appropriate medical care is available. We also reimburse up to **\$100 per emergency** for local transportation expenses that you incur after having received this care to return to the location where you are staying during your trip.

## **4 Expenses for the repatriation, visit of a family member and return of vehicle**

**To be covered, the Assistance Service must approve and arrange the services below.**

### **a) Expenses to repatriate you for medical reasons**

Your repatriation to your place of residence to receive appropriate care as soon as your health permits.

### **b) Medical attendant expenses**

If you have to be repatriated and the attending *physician* indicates the need for a qualified medical attendant to accompany you: round-trip economy transportation and the usual fees and expenses of an attendant.

c) **Expenses to repatriate an insured travelling companion**

If you have to be repatriated: the additional cost of an economy-class plane ticket for the repatriation of a single *travelling companion* to their place of residence. This *travelling companion* must be insured by Desjardins Financial Security for their trip and must have emergency healthcare coverage.

d) **Expenses to repatriate children accompanying you**

If you have to be repatriated or are confined to a *hospital* for more than 24 hours: the additional cost of an economy-class plane ticket for the repatriation of children in your care during your trip to their place of residence, if no other person can take them. We also pay the expenses of an escort if the *common carrier* requires that the children be escorted.

e) **Expenses to repatriate a pet accompanying you**

If you have to be repatriated: the repatriation to your place of residence of a cat or dog accompanying you on your trip if no other person can bring the pet home. **Maximum of \$500.**

f) **Expenses to repatriate your baggage**

If you have to be repatriated: the excess baggage charges if your baggage has to be brought back by another person, or the cost of repatriating your baggage to your place of residence if no other person can bring your baggage back. **Maximum of \$300.**

**g) Expenses to bring a family member to your bedside**

If you are confined to a *hospital* or *clinic* for at least 3 days, are not already accompanied by a *family member* age 18 or older and the attending *physician* deems it necessary:

- the cost of a round-trip economy ticket for the transportation by the most direct route of a *family member* who has to leave their *province of residence* to visit you;
- the cost for this person to purchase travel insurance from Desjardins Financial Security for emergency health care to insure the trip that they have to make to come to your bedside, **up to \$1,000;**
- the *living expenses* incurred by this person during their trip, **up to \$200 per day and \$2,000 in total.**

**h) Expenses to return your vehicle**

The return of the vehicle that you used to get to your destination, provided that a *physician* certifies that your health does not allow you to drive and provided that no *travelling companion* is able to do so. The vehicle must be in good mechanical condition to make the return. The following expenses are eligible for the return of your vehicle: the costs of a vehicle transport agency or the reasonable and necessary expenses incurred by an individual for gas, meals, accommodation and a one-way economy ticket. **Maximum of \$2,500.**

## **5 Expenses in case of death**

**To be covered, the Assistance Service must approve and arrange the services below.**

### **a) Expenses relating to body identification**

If you die during your trip and you were not accompanied by a *family member* age 18 or older:

- the cost of a round-trip economy ticket by the most direct route for a *family member* who must leave their *province of residence* to come and identify your body;
- the cost for this person to purchase travel insurance from Desjardins Financial Security for emergency health care to insure the trip to identify your body, **up to \$1,000**;
- the *living expenses* incurred by this person during their trip, **up to \$200 per day and \$2,000 in total**.

### **b) Expenses to repatriate your remains or ashes**

If you die during your trip: the repatriation of your remains or ashes to your usual place of residence by the most direct route. **Maximum of \$12,000** for transportation and preparation of the body, including cremation, where applicable. The cost of the casket or urn is not covered.

### **c) Expenses for cremation or burial in the country you were visiting**

If you die during your trip: your cremation or burial in the country where you died. **Maximum of \$6,000.**

## 2. Trip Cancellation coverage

- We will reimburse **the expenses outlined on pages 18 to 20**, depending on your situation, if:
  - You have to cancel or modify your trip for one of the 18 causes below (pages 15 to 18);
  - You were reasonably unaware that this cause would occur at the time the expenses were incurred or when you requested an increase in the insurance amount for this coverage;
  - This cause is serious enough to justify cancelling or modifying your trip; **and**
  - The fees must have been paid using the *credit card*.
- This insurance also covers your *spouse* and your *dependent children* if they accompany you throughout their trip.

### Recognized causes of trip cancellation or modification

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**Cause 1 – One of the following people becomes ill, has an *accident* or dies:**

- you
- one of your *family members*
- a *travelling companion*
- a *family member* of a *travelling companion*
- the person responsible for the care of your *dependent children*
- your business partner or key employee
- the person for whom you are the legal guardian
- the person who is hosting you in their home during part or all your trip

We reserve the right to have the injured or sick person examined by a *physician* of our choosing.

**Cause 2 – Your *travelling companion* has to cancel or interrupt their trip** due to one of the recognized causes described in this section.

**Cause 3 – You find out that *you* (or your *spouse*) are pregnant** and your scheduled return date is **after the first 32 weeks of pregnancy**.

**Cause 4 – A person for whom you are the estate executor dies.**

**Cause 5 – You are summoned for jury duty or to appear as a witness.**

**Cause 6 – You receive notice of custody of a child.**

**Cause 7 – A business meeting is cancelled** because the person you are supposed to meet becomes ill, has an *accident* or dies.

The meeting must have been arranged in advance and be the only reason for your trip.

**Cause 8 – You are required to move for work purposes** in the 30 days prior to your departure or during the time scheduled for your trip. This transfer is required by the employer for whom you were working at the time you purchased your trip.

**Cause 9 – The company where you have been working for at least one year shuts down due to a lock-out or declares bankruptcy.**

**Cause 10 – You involuntarily lose your permanent employment** that you have had with the same employer for more than one year. Permanent employment is a non-seasonal employment under a contract of unlimited duration for which you are paid at least 20 hours per week.



**Cause 11** – A **disaster** causes significant damage to your **main residence** in your *province of residence* or to your **business**.

**Cause 12** – Your **cruise is cancelled** due to mechanical problems, grounding or quarantining of the cruise ship or it has been repositioned due to bad weather.

**Cause 13** – The ***common carrier*** is **delayed** due to **bad weather**, a **natural disaster** or **mechanical problems**.

**OR**

The ***common carrier*** or a **vehicle** is **delayed** due to a **traffic accident** or **emergency road closure** by police (we will require a police report).

This delay must result in you missing the departure of a ***common carrier vehicle*** used during your trip and force you to change your travel arrangements. In all cases, you must have planned to be at the point of departure at least **3 hours** before the scheduled departure time.

**Cause 14** – A ***travel service supplier*** defaults.

- The default must result in you definitively losing at least some of the money you paid for your trip.
- You must give us the right in writing to sue the ***travel service supplier*** on your behalf for the amount paid.
- The ***travel service supplier*** must have an office in Canada and hold all the licences and operating certificates required by the competent Canadian authorities.

**Cause 15** – After the date on which you purchased your trip, the **Canadian government** advises **Canadians** against **visiting the destination country or region** due to a particular situation in that country.

**Cause 16 – You are *quarantined*.**

**Cause 17 – The *plane* you are travelling on is hijacked.**

**Cause 18 – Due to a crisis or emergency situation, you are called on to serve as a *police officer, firefighter or member of the military* in active duty or as a reservist, or to provide *essential health care services*.**

### **Expenses reimbursed**

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For any trip:

- reimbursement of your *living expenses* is limited to **\$200 per day** and **\$2,000 in total**;
- reimbursement of your **other expenses** is limited to your **insurance amount** (see Table of Coverage);
- we consider travel vouchers issued by the *travel service supplier* to be a reimbursement.

**1** If you have to completely cancel your trip or cruise due to one of the recognized causes.

**We will reimburse** the non-refundable fees you paid in advance to a *travel service supplier* on the date the cause for cancellation occurs.

In this case, you must:

- cancel your trip or cruise with the *travel service suppliers* in question as soon as possible. Important: we will not reimburse any penalties charged by a *travel service supplier* because you waited too long to cancel.
- also contact us to let us know at the same time you cancel your trip or cruise.

**2** If your *travelling companion* has to **completely cancel their trip** due to one of the recognized causes and you decide to still proceed with your trip.

**We will reimburse** the additional expenses incurred due to the absence of your *travelling companion* (for example: additional charge for hotel room).

**3** If you **miss your departure or it is delayed** due to one of the recognized causes.

**We will reimburse:**

- a) The *living expenses* you incur.
- b) The additional cost for changing the date or time of the ticket you purchased with your *credit card* from a scheduled carrier (*plane*, boat, train, bus). The new ticket must be a one-way economy ticket and be used to get you to the planned destination by the most direct route.
- c) The unused and non-refundable portion of the costs you paid in advance to a *travel service supplier* for land arrangements.

**4** If you have to **return early or later than planned** due to one of the recognized causes.

**We will reimburse:**

- a) The *living expenses* you incur.
- b) The additional cost for changing the date or time of the ticket you purchased with your *credit card* from a scheduled carrier (*plane*, boat, train, bus). The new ticket must be a one-way economy ticket and be used to return to your point of departure by the most direct route.

**If you have to return later than planned:**

If an *illness* or *accident* delays your return by more than 7 days after the scheduled return date, we will only reimburse the additional cost of the return ticket if you or your *travelling companion* were hospitalized. In this case, we require proof of hospitalization.

- c) The unused and non-refundable portion of the costs you paid in advance to a *travel service supplier* for land arrangements.

**5 If you miss a part of your trip because:**

- you or a *travelling companion* are hospitalized for at least 3 full continuous days during the trip; or
- a *travelling companion* dies during the trip.

**We will reimburse:**

- a) The *living expenses* you incur.
- b) If you missed a transportation you were supposed to take: the additional cost for changing the date or time of the ticket you purchased with your *credit card* from a scheduled carrier (*plane, boat, train, bus*). The new ticket must be a one-way economy ticket and be used to get you to the planned destination by the most direct route.
- c) The unused and non-refundable portion of the costs you paid in advance to a *travel service supplier* for land arrangements.

### 3. Baggage coverage

#### Important note

**Baggage coverage** only insures you for the number of days indicated in the Table of Coverage. If the duration of your trip exceeds the number of days indicated and you want to be insured under this coverage for the entire duration of your trip, you must ask us to extend your coverage.

- We will pay **the amounts indicated on page 22** if your baggage or identification are lost, stolen or damaged while you are insured under the Baggage coverage.
- **For any trip**, we will pay the applicable amounts, depending on the situation, **up to your insurance amount** (see Table of Coverage).
- You must:
  - notify us as soon as you become aware of the loss, damage or theft;
  - in case of theft, also notify the police;
  - obtain a written statement of the loss, theft or damage, such as a police report, or a statement from the hotel manager, tour guide or representatives of the transportation company;
  - take all reasonable steps to protect or recover your property.
- This insurance also covers your *spouse* and your *dependent children* if they accompany you throughout their trip.

#### **Amounts paid or reimbursed**

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- a) Your baggage or personal effects are damaged or lost by the *common carrier* or are stolen.

**We will reimburse** the actual value of your baggage or personal effects at the time the covered loss or damage occurred.

**Maximum amount paid:**

- **\$500** for all the following items:  
jewellery, watches or articles made of silver, gold or platinum;
- **\$500** for any other item, including related accessories.

- b) Your passport, driver's licence, birth certificate or visa is stolen, damaged or lost.

**We will reimburse** the costs you incur to replace them.

**Maximum amount reimbursed:**

**\$250** for all these documents.

- c) Return of your baggage or personal effects is delayed for more than 6 hours because they were not routed as planned by the *common carrier* **AND** you have to purchase toiletries and essential clothing before returning to your point of departure in your *province of residence*.

**We will reimburse** the expenses incurred **up to \$500** for toiletries and clothing you need to buy before recovering your baggage.

If your baggage is officially considered to be lost, we will deduct the amount paid for the delay of your baggage from the amount payable for the loss of your baggage.

#### 4. Common Carrier Accident coverage

- We will pay **the applicable amount indicated on the following page**, depending on the situation, if during your trip:
  - you are involved in an *accident* while in a situation covered under this coverage; **and**
  - this *accident* causes your death or the loss of use of a body part (hand, foot, eye, finger or toe).
- To be covered, you must have purchased a ticket for yourself with your *credit card* to travel in a *common carrier vehicle*.
- Your *spouse* and *dependent children* will also be insured under this coverage if you purchased their tickets with your *credit card* and they accompany you throughout their trip.

#### Covered situations

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##### **You are insured under this coverage:**

- a) while travelling as a paying passenger in a *common carrier vehicle*, including when boarding or disembarking;
- b) while using, during your trip, another means of transportation provided by the carrier that sold you the ticket for the *common carrier vehicle* or by the airport, station or port authorities. You must have used this means of transportation to get to the airport, station or harbour (wharf), or to come back from there, in order to use, or immediately after using the *common carrier vehicle*;
- c) while you are on the grounds of the airport, station or harbour with the intention of using, or immediately after using, the *common carrier vehicle*.

| Amount that will be paid  |             |
|---|-------------|
| If you die  | \$1,000,000 |
| If you suffer loss of use (without dying)                           |             |
| • loss of use of two of the following body parts: foot, hand or eye | \$750,000   |
| • loss of use of one of the following body parts: foot, hand or eye | \$500,000   |
| • loss of use of the thumb and index finger of the same hand        | \$250,000   |
| • loss of use of one finger or one toe                              | \$100,000   |

### Definition of “loss of use”

“Loss of use” means:

- of a hand: the total and permanent loss of use of one hand **and** the wrist;
- of a foot: the total and permanent loss of use of one foot **and** the ankle;
- of an eye: the total and permanent loss of use of sight in one eye;
- of a thumb and the index finger of the same hand: the total and permanent loss of use of all the phalanges of the thumb and index finger of the same hand;
- of a finger or toe: the total and permanent loss of use of all the phalanges of the finger or toe.

### Time period in which the death or loss of use must occur

The death or loss of use must occur in the 12 months following the *accident*.

However, if the *accident* results in a **coma**, we will wait until the coma is over to determine if an amount is payable, even if it ends more than 12 months after the *accident*.



## In case of disappearance

In case of the disappearance of an *insured* following an *accident*, we will presume that this person is deceased:

- if, based on the circumstances surrounding their disappearance, it may be assumed beyond any doubt that the *insured* is dead;
- if their body is not found in the 12 months following the *accident*.

## Insurance start date

The insurance start date depends on the coverage in accordance with the indications below.

The **Emergency Health Care** coverage takes effect on the later of the following dates:

- a) the date of your departure, i.e., the date you leave your *province of residence*;
- b) the date indicated in the document entitled "Your insurance choices," if you extended this coverage.

The **Common Carrier Accident** coverage starts when you are in a covered situation.

The **Trip Cancellation** coverage starts on the date of the initial payment (partial or total) of the cost of the trip using your *credit card*. However, if you increased the insurance amount of this coverage, the insurance starts on the date indicated in the document entitled "Your insurance choices" for the increase in question.

The **Baggage** coverage starts on the date of your departure, i.e., the date you leave your residence.

## Insurance end date

The insurance end date depends on the coverage in accordance with the indications below.

The **Emergency Health Care** coverage ends on the earlier of the following dates:

- a) the date you return to your *province of residence*;
- b) the date indicated in the document entitled "Your insurance choices," if you extended this coverage.

The **Common Carrier Accident** coverage ends when you are no longer in a covered situation.

The **Trip Cancellation** coverage ends on the earlier of the following dates:

- a) the date the cause of cancellation of your trip occurs before the planned departure date;
- b) the date you return to your *province of residence*.

The **Baggage** coverage ends on the earlier of the following dates:

- a) the date you return to your residence;
- b) the date the maximum number of days of coverage indicated in the Table of Coverage has elapsed **OR**, if you extended this coverage, the date indicated in the document entitled "Your insurance choices."

## Important – Exclusions and limitations



### Exclusions

#### Exclusion for unstable injuries or medical conditions

**Did you have an injury or medical condition before the insurance start date of the Emergency Health Care or Trip Cancellation coverage? Has this injury or medical condition been unstable in the months prior to this time?**

- You are not covered if you incur expenses for this reason, even if you declared it on the medical questionnaire or if a *physician* told you you could travel. Travel insurance only covers you for unforeseen events.
- How to determine the “insurance start date”?
  - For the Emergency Health Care coverage, the insurance start date is your departure date.
  - For the Trip Cancellation coverage, the insurance start date is the date of the initial payment (partial or total) of the cost of the trip using your *credit card*.
- To determine if an injury or medical condition has been unstable:

Answer the questions in the box below for EACH injury or medical condition and for EACH trip.

- For the Emergency Health Care coverage:
  - were you under age 55 on the insurance start date? Answer for the 3-month reference period;
  - were you age 55 or older on the insurance start date? Answer for the 6-month reference period.
- For the Trip Cancellation coverage: answer for the 3-month reference period.

**During the 3 months/6 months prior to the insurance start date, did you have an injury or medical condition for which:**

- 1) you had new symptoms or the existing symptoms were more frequent or more intense?**
- 2) you consulted a *physician* (except for a routine check-up)?**
- 3) a *physician* recommended that you undergo a test, you underwent a test or you are waiting for the results?**
- 4) you had surgery, were hospitalized or a *physician* recommended that you have surgery?**
- 5) you started a new treatment, including a new drug, or a new treatment was prescribed?**
- 6) you had a change in treatment or medication (quantity, frequency or the medication itself) or this change was prescribed?**

**We do not consider a routine adjustment to insulin or Coumadin, or the replacement of a brand-name drug for an identical generic drug if the dose is the same, to be a change of medication.**

**Did you answer YES to any  
of these 6 questions?**

**Your injury or medical condition has  
therefore been unstable in the months  
prior to the insurance start date.**

**We will not pay any expenses for this injury or medical condition or for any related injury or medical condition.**

**Exception: Is your medical condition a cold, flu, ear infection, sinus infection, sore throat or tonsillitis? You are covered for this medical condition:**

- **If you have recovered for at least 30 consecutive days on the insurance start date; AND**
- **If this medical condition is not a chronic illness or a complication of a chronic illness.**
- **In the case where coverage has been extended or an insurance amount has been increased**
  - **If you extend the Emergency Health Care coverage after your departure:  
The exclusion for unstable injuries or medical conditions applies again based on your age and state of health on the effective date of the extension.**
  - **If you increase the insurance amount of the Trip Cancellation coverage:  
The exclusion for unstable injuries or medical conditions applies to the amount of the increase based on your state of health on the date you apply for the increase.**



## Other exclusions

We will not pay any amount in the following cases. The X's indicate the coverages to which each exclusion applies.

### Baggage

#### Common Carrier Accident

#### Trip Cancellation

#### Emergency Health Care

x x x

1. Claim that results directly or indirectly from an injury you inflict yourself, a suicide or attempted suicide, whether or not you are aware of your actions.

x x x

2. Claim that results from an event that occurs while you are using narcotics or abusing drugs or alcohol.

- Drug abuse means exceeding the dosage recommended by a health specialist.
- Alcohol abuse means the consumption of alcohol resulting in a blood alcohol level of more than 80 mg of alcohol per 100 ml of blood.

| Baggage                 |   |     |   |
|-------------------------|---|-----|---|
| Common Carrier Accident |   |     |   |
| Trip Cancellation       |   |     |   |
| Emergency Health Care   |   |     |   |
| x                       | x | x   | <p><b>3. <i>Accident</i> that occurs while you are participating in:</b></p> <ul style="list-style-type: none"> <li>• any sporting activity for pay;</li> <li>• any sporting event for which the winners are awarded cash prizes;</li> <li>• any non-standard sport or activity involving a high level of risk, such as those indicated below, for instance: <ul style="list-style-type: none"> <li>◦ hang-gliding and paragliding;</li> <li>◦ parachuting and sky diving;</li> <li>◦ bungee jumping;</li> <li>◦ climbing or mountaineering;</li> <li>◦ freestyle skiing;</li> <li>◦ amateur scuba diving, unless you hold at least a basic scuba diving licence from a certified school;</li> <li>◦ any combat sport;</li> <li>◦ any competition, speed event or other high-risk activity involving the use of a motor vehicle, including training activities, whether on approved tracks or elsewhere.</li> </ul> </li> </ul> |
|                         |   | x x | <p><b>4. Claim that results from pregnancy, miscarriage, childbirth or their complications, if the event that gives rise to the claim occurs after the first 32 weeks of pregnancy.</b></p>   |
| x                       | x | x   | <p><b>5. Claim that results from an event that occurs while you are participating in a riot or criminal act.</b></p>  |

| Baggage                 |   |   |  |
|-------------------------|---|---|--|
| Common Carrier Accident |   |   |  |
| Trip Cancellation       |   |   |  |
| Emergency Health Care   |   |   |  |
| x                       | x | x | 6. Claim that results from an event that occurs while you are travelling in a country that the Canadian government had advised Canadians against visiting before the trip begins. However, we will accept your claim if you can demonstrate that the particular situation existing in the country visited did not contribute in any way to the event that gives rise to the claim.   |
|                         |   | x | 7. If you are taking the trip to receive medical care or services, even if the trip is recommended by a <i>physician</i> .   |
|                         |   | x | 8. Expenses related to hospital care not covered under the hospitalization insurance plan in your <i>province of residence</i> .   |
|                         |   | x | 9. Expenses incurred after the date you refuse the treatment prescribed by the attending <i>physician</i> or the Assistance Service, or if you refuse to follow any of the following instructions from the Assistance Service: <ul style="list-style-type: none"> <li>• change <i>hospitals</i> or <i>clinics</i>;</li> <li>• undergo a diagnostic examination;</li> <li>• return to your <i>province of residence</i>.</li> </ul> |



| Baggage                 |  |   |  |
|-------------------------|--|---|--|
| Common Carrier Accident |  |   |  |
| Trip Cancellation       |  |   |  |
| Emergency Health Care   |  |   |  |
|                         |  | x | 10. Expenses incurred for life-sustaining drugs that you take on an on-going basis, such as insulin, nitroglycerin and vitamins.   |
|                         |  | x | 11. Optional or non-emergency care, even if you receive it further to an emergency. This means care that can be obtained in your <i>province of residence</i> without endangering your life or health. |
|                         |  | x | 12. Care, treatment or surgery received for cosmetic purposes and any related complications.   |
|                         |  | x | 13. If a <i>physician</i> advised you not to travel.   |
|                         |  | x | 14. Claim related directly or indirectly to a mental, nervous, psychological or psychiatric disorder, except if you have to be hospitalized for this disorder.   |
|                         |  | x | 15. If an excursion, outing or activity lasting one day or less that you had planned during your trip is cancelled but does not end the trip before the planned return date.                           |
|                         |  | x | 16. If you are taking the trip to visit a sick person whose death or state of health causes you to cancel or change your trip.   |

| Baggage                 |  |   |   |
|-------------------------|--|---|---|
| Common Carrier Accident |  |   |   |
| Trip Cancellation       |  |   |   |
| Emergency Health Care   |  |   |   |
|                         |  | x | 17. If on the insurance start date you were aware of the reason requiring you to cancel or modify your trip.  |
| x                       |  |   | 18. Theft resulting from your lack of oversight or carelessness.  |
| x                       |  |   | 19. Damage to fragile or brittle objects.   |
| x                       |  |   | 20. Damage or theft of eyeglasses (prescription or sunglasses), contact lenses or their accessories.  |
| x                       |  |   | 21. Damage caused intentionally or through normal wear and tear or manufacturing defect.  |
| x                       |  |   | 22. Damage or theft of: <ul style="list-style-type: none"> <li>• money, tickets, bonds, securities and documents (other than identification and travel documents which are covered);</li> <li>• professional equipment;</li> <li>• food and drinks;</li> <li>• illegally acquired items;</li> <li>• an item for which you can request compensation from the <i>common carrier</i>.</li> </ul> |

| Baggage                 |   |  |  |
|-------------------------|---|--|--|
| Common Carrier Accident |   |  |  |
| Trip Cancellation       |   |  |  |
| Emergency Health Care   |   |  |  |
| x                       | x | <p>23. If you are the driver or pilot or a crew member or non-paying passenger travelling in a <i>commercial vehicle</i>, except if you are using the vehicle as a private means of transportation only, while on vacation, and it is one of the following vehicles:</p> <ul style="list-style-type: none"> <li>• a car;</li> <li>• a truck (or van);</li> <li>• a heavy vehicle in which you are not travelling as the driver.</li> </ul> |  |



## Limitations

### ➤ Emergency Health Care coverage

**Penalty if you don't contact the Assistance Service before going to a *hospital* or a *clinic***

If the obligation to contact the Assistance Service described on page 9 is not satisfied, you'll be required to pay 30% of the covered costs, up to \$3,000.

### ➤ Common Carrier Accident coverage

If you sustain more than one loss as the result of an *accident*, we will pay only the highest amount from among the losses sustained.

The total amount that we will pay further to one *accident* is limited to \$10,000,000 for all Common Carrier Accident coverages issued by us under credit card programs.

### ➤ Trip Cancellation coverage

In case of default of a *travel service supplier*, the maximum amount we will reimburse is limited to \$2,500 per *insured*, per trip, and \$500,000 for all individual Travel Insurance contracts issued by us.

## Modifying your contract

You can modify your contract by contacting us at 1-800-463-1623.

- If you modify your contract for all your trips, we will send you insurance documents that explain the applicable conditions.
- If you modify your contract for a specific trip, the following conditions will apply.

Please note that the exclusion for unstable injuries or medical conditions may apply if you extend your coverage or increase the insurance amount under a coverage (see page 29).

## Extensions, increases or additions

### **1** If you extend your trip

**The Emergency Health Care coverage must cover the entire duration of each trip you take.** Therefore, if you decide to extend a trip beyond the number of days included with your *credit card*, you must also extend this coverage. Otherwise, you will **not be covered** under the **Emergency Health Care coverage for your trip**.

You are only insured under **Baggage** coverage for the number of days indicated in the Table of Coverage. If the duration of a trip exceeds this number of days, you can apply to extend this coverage.

Here's how to extend these coverages:

- request that we extend the coverages and pay the required premium before the coverages end;
- request that we extend the coverages for **all** the days added to your trip;
- for the **Emergency Health Care** coverage:
  - if we require it, you must answer a medical questionnaire; we may refuse to extend your coverage due to your state of health or decide to not cover certain health problems;
  - you must be covered under a government health and hospitalization insurance plan for the entire duration of your trip, including any added days.

We will then send you a document entitled "Your insurance choices," which will indicate the new end date of the coverage(s) in question.

## **2 To increase the insurance amount under a coverage**

You can increase the insurance amount under the **Trip Cancellation** and **Baggage** coverages for a specific trip.

Here's how:

- request that we increase it and pay the required premium before leaving your *province of residence*;
- for the **Trip Cancellation** coverage: if we require it, you must answer a medical questionnaire; we may refuse to increase the insurance amount due to your state of health.

We will then send you a document entitled "Your insurance choices," which will indicate the change made to your contract.

## **3 To add a coverage**

You can request that we add a coverage to your contract for a specific trip. We will then send you a document entitled "Your insurance choices," which will indicate the change made to your contract.

### **How the premium (cost) for changes made to your contract is calculated**

The premium is determined based on the following information:

- a) the age of the *insureds* in question on the start date of the coverages;
- b) the coverages and amounts selected;
- c) the additional number of days needed to cover the entire duration of the trip;

d) the health of the *insureds* if they belong to certain age groups.

The premium also includes any applicable taxes.

### **Payment of the premium**

When you request a modification to your contract, you authorize us to collect the premium for it to take effect. The premium will be withdrawn from a chequing account or charged to a credit card. The premium is payable in a lump sum and must be paid at the time the request is made for the modification to take effect.

### **10-day period to cancel a modification to your contract**

If you modify your contract, you have 10 days from the date you requested the modification to cancel it. The cancellation will apply retroactive to its effective date, which is indicated in the document entitled "Your insurance choices."

### **Cancellation of a modification to your contract**

- If you cancel a modification within 10 days following your request:  
We will refund any premium paid, except:
  - a) for the premium for the **Trip Cancellation** coverage only: if you requested the increase in the insurance amount 10 days or less before your departure date;
  - b) if your departure and return date fall within 10 days following the date you requested the modification; or
  - c) if you made a claim relating your trip.
- If you cancel the modification before your departure but more than 10 days after your request:

We will refund the premium paid for any modification other than for the **Trip Cancellation** coverage, except if you have made a claim relating to your trip.

- If you cancel the modification after your departure but before the scheduled end date due to an early return:

We will refund the premium for the unused coverage period of any modification other than for the **Trip Cancellation** coverage, except:

- if you made a claim relating to your trip;
- if you paid a family premium and not all the *insureds* are returning early.

We will then deduct cancellation fees from the amount of your refund. We calculate the unused coverage period as of the date we receive your request. You must submit your request at the latest two weeks after your early return.



## Free automatic extension

We will automatically extend your coverage free of charge if your return is delayed for any of the following reasons:

- a) if the *common carrier vehicle* in which you are travelling as a paying passenger is delayed or if the vehicle in which you are travelling is delayed due to a traffic accident or mechanical breakdown.

Duration of the coverage extensions: up to 72 hours after they were scheduled to end.

- b) if you or a *travelling companion* are hospitalized or are entitled to *living expenses* because you had an *accident* or suffer from an *illness*.

Duration of the coverage extensions: up to 72 hours after the later of the following:

- the end of the *living expense* payment period (maximum 10 days);
- the end of the hospitalization period, where applicable.

In all the situations indicated in a) and b), the **Trip Cancellation** and **Common Carrier Accident** coverages will be extended until the date you return to your *province of residence*.

### For Baggage coverage:

If you checked your baggage with a *common carrier* and the delivery is delayed, we will extend the **Baggage** coverage free of charge until the *common carrier* delivers your bags.

## Assistance Service

You can call the Assistance Service 24 hours a day.

From Canada and the U.S.  
(toll free): **1-888-419-2495**

From anywhere in the world  
(collect): **514-875-2495**

### Before leaving

The Assistance Service can provide you with some useful information and recommend preventive measures (e.g., precautions to take, itinerary, information on passports, visas and vaccinations required in the destination country, etc.).

### In case of a medical emergency during your trip

The Assistance Service can:

- refer you to *physicians* or *hospitals* or *clinics*;
- assist you with admission to a *hospital* or *clinic*;
- arrange for your transportation if you require emergency care;
- monitoring of your case by our *physicians* and nurses specialized in emergency medicine;
- arrange for your repatriation to your city of residence, as soon as your health permits;
- arrange for the repatriation of a *travelling companion*, your *spouse* or your *dependent children*;
- settle formalities in the event of death;
- help you make the necessary arrangements to send for a *family member* if your attending *physician* prescribes it;

- send messages to your loved ones in the event of an emergency.

### **For all other problems during your trip**

The Assistance Service can help you:

- replace lost, stolen or damaged tickets, identification or official documents so you can continue your trip;
- find lost or stolen baggage;
- in case of legal problems;
- in case of language barriers in the destination country.

## **Other information**

### **What documents make up your travel insurance contract?**

These documents include:

- this Travel Insurance guide;
- the personalized document entitled “Your insurance choices,” if you modified the contract;
- any document referred to as a “rider to your travel insurance contract” or any appendix confirming contract changes or updates;
- all medical questionnaires, if one or more *insureds* had to complete it to modify your contract.

### **Can we make changes to the contract?**

We can make changes to this Travel Insurance contract provided we give written notice to the issuer of your *credit card*, i.e., the Fédération des caisses Desjardins du Québec, at least 90 days in advance.

As a *cardholder*, you delegate the right to negotiate the terms and conditions of the insurance contract and any changes that may be made to the issuer of your *credit card*.

### Can we cancel the contract?

We can **cancel** the contract in any of the following situations:

- a) if you make a false statement, whether fraudulent or not;
- b) if you fail or refuse to provide us with information on any of the people insured under your contract;
- c) if you don't authorize us to collect the information needed to determine if we can insure someone or to process a claim from you.

We can also **terminate** the contract by sending you advance written notice. The contract will then terminate on the 30th day from receipt of this notice. However, we will continue the insurance for *insureds* who are already travelling when the notice is sent, up until they return to their *province of residence*.

### Termination of a coverage for an insured

We can terminate a given coverage for an *insured* for a trip that is underway if they refuse the treatment prescribed by the attending *physician* or the Assistance Service, or if they refuse to follow any of the following instructions from the Assistance Service:

- change *hospitals* or *clinics*;
- undergo a diagnostic examination;
- return to their *province of residence*.

## Submitting a claim

### Three steps

#### 1. Call us or visit our website

From Canada and the U.S.  
(toll free): **1-800-463-1623**

From anywhere in the world  
(collect call): **418-647-5299**  
[desjardinstravelinsurance.ca](http://desjardinstravelinsurance.ca)

#### 2. Send us the required form

There is a form to be completed for most claims. You can ask us to send it to you or get it on our website.

##### **Time limit:**

You must send us your claim within 90 days following the date of the event entitling you to a reimbursement.

#### 3. Send us the proof requested

We can request that you provide certain information, documents, proof and the authorizations needed to assess your claim.

##### **Time limit:**

You must send us this proof within 90 days following the date you sent us your claim.

### Examples of documents and proof that we may request

For the **Emergency Health Care** coverage, you must provide us with the original invoice for the care received. The invoice must include:

- a) the date the care was provided;
- b) the name of the *insured* who received the care;
- c) the diagnosis;
- d) the description of the care provided;

- e) the signature of the attending *physician*; and
- f) the cost of the care received.

For the **Trip Cancellation** coverage, you must, depending on the case, provide one or more of the following supporting documents:

- a) the unused transportation tickets;
- b) the official receipts for the additional transportation costs incurred;
- c) the receipts for the land arrangements (hotel reservations, car rental, etc.) or the cruise fees. The receipts must include the contracts that were officially issued through a *travel service supplier* and indicate the non-refundable amounts in the event of cancellation;
- d) an official document stating the cause of the claim. In the case of a medical cause, you must provide a medical certificate from the attending *physician* practising in the region where the *accident* or *illness* occurred. This medical consultation must have taken place before the date of departure or before the date of return, as the case may be. The medical certificate must also indicate the complete diagnosis and specify the exact reasons why the trip could not be carried out as planned;
- e) the receipts for the *living expenses* incurred.

For the **Baggage** coverage, you must provide:

- a) a written statement of the theft or damage, such as a police report, or a statement from the hotel manager, tour guide or representatives of the transportation company;
- b) proof of the value of the property (receipts, credit card statements, etc.);

- c) if your baggage is delayed: proof that the baggage was delayed indicating that it was checked with the *common carrier*, as well as receipts of purchases for toiletries and clothing.

## **Medical examination**

When a claim is made, we may have the *insured* examined by a health care professional. We will choose the professional and pay the cost of the examination.

## **Our response to your claim**

### **If we approve your claim**

The payment will be made within **60 days** once we have received all the required documents.

### **If we do not approve your claim or we only pay a portion of the amount**

We will send you a letter explaining the reasons for our decision within **60 days** once we have received all the required documents.

## **If you do not agree with our decision (appeal process)**

If we do not approve a claim or only pay a portion of the amount claimed, you can submit additional information and request that we review your file.

Please note that if you want to appeal our decision in court, you must do so within the time limit provided for by law. This time limit is **3 years in Quebec. It may be shorter in other provinces.** To find out the time limit, please refer to the applicable legislation in your *province of residence*.

For more information about your rights, contact the regulatory agency in your *province of residence*.

## **Payment of your claim**

### **Person to whom we make the payment**

We will pay any amount payable to the *cardholder*.

However, for the **Common Carrier Accident** coverage, we will pay any amount payable in case of death to the *cardholder*, or to their legal heirs if they are deceased. For an accidental loss of use, we will pay all amounts to the *cardholder* if they are of the age of majority, otherwise to their legal guardian.

As the individuals to whom we will pay all amounts owing are already determined, you cannot designate anyone else.

### **Payment method**

We will pay all amounts by direct deposit (you must provide a void cheque) or by cheque.

### **Currency**

Unless otherwise indicated, all amounts payable specified in this contract are expressed in Canadian dollars. As needed, we will determine the amount payable using the prevailing exchange rate on the date of payment.

### **Situations in which we will not pay any amount**

We will not pay any amount:

- 1) if the person for whom you are requesting a payment, or their legal representative, does not authorize us to collect the personal information needed to examine the claim;
- 2) if your claim relates to a coverage that was modified or added to your contract and we have refunded part or all of the premium for this coverage before receiving your claim.



## **Division of expense reimbursements**

In accordance with insurance rules, a person can never be reimbursed for more than the expenses they paid, even if they are covered under more than one insurance contract or plan.

If you make a claim for expenses that are also covered under another insurance (private or public), we are the “last payer.” In other words, we will only reimburse the portion of expenses that are not reimbursable under this other insurance. However, if this other insurance also states that it is the last payer or if it includes a coordination of benefits clause, the reimbursement will be divided between it and this travel insurance contract, based on the amounts that should have been paid by each.

## **Assignment of your right of recourse in the event of a claim (right of subrogation)**

In the event of a claim due to damage caused by a third party, you assign us your right to sue this third party and any other right that you may have against them. We will exercise this recourse on your behalf and at our expense, up to an amount equal to what we paid you for the damage in question.

## Definitions

**Accident:** A sudden and unforeseen event due to an external cause, which occurs independently from any illness or other cause and results in bodily injury or death. The injury or death must be confirmed by a *physician* and be directly and solely the result of the accident. The injury must also require immediate emergency care.

**Canadian resident:** A person legally authorized to reside in Canada and who lives there at least 6 months a year.

**Cardholder:** Individual who owns a *credit card* issued in their name and for which the annual fees have been paid.

**Clinic:** Clinic or any other health care facility recognized as such under legislation in effect in the country where it is located.

**Commercial vehicle:** Any type of vehicle (air, sea or land) used for business purposes, including revenue-producing activities or activities for which expenses may be deducted from business income or as a self-employed worker.

**Common carrier:** Any carrier registered with the competent authorities for the transportation (air, sea, land) of passengers.

**Common carrier vehicle:** Any means of transportation (air, sea or land) operated by a carrier approved by the competent authorities to transport passengers.

**Credit card:** A Desjardins Odyssey Gold, Travel Gold or Odyssey World Elite credit card.

**Dependent child:** Any child or grandchild of yours or of your *spouse*. To be considered a dependent child, the child must be over 15 days old and under age 18 and have no *spouse*. If the child is a full-time student at

an educational institution recognized by the competent authorities, the child must be age 24 or under. In the case of a grandchild, the child must be under your direct responsibility and the child's parents must not accompany you on the trip.

**Family member:** *Spouse*, sons, daughters, father, mother, brothers, sisters, father-in-law, mother-in-law, grandparents, grandchildren, half-brothers, half-sisters, brothers-in-law, sisters-in-law, sons-in-law, daughters-in-law, stepsons, stepdaughters, uncles, aunts, cousins, nephews and nieces.

**Hospital:** Hospital or any other health care facility recognized as such under legislation in effect in the country where it is located.

**Illness:** A serious disturbance in the normal state of the organs or functions of the human body. To be considered an illness, this disturbance must also occur suddenly and unexpectedly and require immediate emergency care. An illness must also be certified by a *physician*.

**Insured:** Any eligible *cardholder*, their *spouse* and eligible *dependent children*.

**Living expenses:** Reasonable and necessary expenses incurred for room and board, child care expenses for *dependent children* not accompanying you, as well as telephone and local transportation charges.

**Physician:** A person legally authorized to practise medicine in the region where the medical services are provided.

**Plane:** An aircraft weighing at least 4,536 kg licensed and operated by a scheduled or charter airline. The airline must hold a valid license from the Canadian Transportation Agency or foreign equivalent. Special or chartered flights authorized under any of

the above licences will be covered only when made with an aircraft of the type regularly used by the carrier on its scheduled or charter air carrier service. All military aircraft are excluded.

**Province of residence:** The Canadian province or territory where a person lives.

**Spouse:** The *cardholder's* spouse is the person who:

- a) is married to or in a civil union with the *cardholder*;
- b) can prove that they have been living conjugally with the *cardholder* for at least 12 months and that they have not been separated for 3 months or more due to a breakdown of their relationship; or
- c) can prove that they have been living conjugally with the *cardholder*, that they have a child together and that they have not been separated from the *cardholder* for 3 months or more due to a breakdown of their relationship.

We recognize only one spouse. We are not responsible for the validity of the designation of spouse.

**Travelling companion:** Person who shares the *insured's* travel arrangements.

**Travel service supplier:** Any travel agency, travel wholesaler, charter tour operator, cruise line, *common carrier* or accommodation facility authorized or accredited to operate such a business or provide these types of services.

## Similar travel insurance products

Other similar travel insurance products are available on the market that may meet your needs.

## Referral to the Autorité des marchés financiers

More information on the obligations of insurers can be obtained through the Autorité des marchés financiers.

Here's how to contact them:

Place de la Cité, Tour Cominar  
400–2640 boul. Laurier  
Quebec City QC G1V 5C1

Website: [lautorite.qc.ca](http://lautorite.qc.ca)

Phone:

Quebec  
418-525-0337

Toll free  
1-877-525-0337

Montreal  
514-395-0337

Fax:  
418-525-9512

## Are you dissatisfied with our service?

### Let us know

Do you have any concerns or are you dissatisfied with your contract or the service we have provided? Let us know by contacting our customer service department at **1-866-647-5013**.

To file a formal complaint, you can either:

- contact our Dispute Resolution Officer at 1-877-838-8185; or
- use the complaint form available on our website at [dfs.ca/complaint](http://dfs.ca/complaint).

## Personal information management

We handle the personal information we have on you in a confidential manner. We keep this information on file so that you can benefit from the financial services (insurance, annuities, credit, etc.) we offer. This information is consulted solely by our employees who need to do so in the course of their work.

You have the right to consult your file. You may also have information corrected if you demonstrate that it is inaccurate, incomplete, ambiguous or unnecessary. To do so, you must send a written request to the following address: **Privacy Officer, Desjardins Financial Security Life Assurance Company, 200 rue des Commandeurs, Lévis QC G6V 6R2.**

We may send promotional information or offer new products to individuals whose names appear on our client list. We may also give our client list to another component of the Desjardins Group for the same purposes. If you do not want to receive such offers, you may have your name removed from the list by sending a written request to the Privacy Officer at the address indicated above.

We use service providers located outside of Canada to perform certain specific activities in our normal course of business. As such, some of your personal information may be transferred to another country and be subject to the laws of that country. For information about our policies and practices regarding the transfer of personal information outside of Canada, visit our website at [dsf-dfs.com](http://dsf-dfs.com) or write to our Privacy Officer at the address indicated above.

Our Privacy Officer can also answer any questions about the transfer of personal information to service providers located outside of Canada.



**Denis Berthiaume**

President and Chief Operating Officer  
Desjardins Financial Security Life Assurance Company



**Linda Fiset**

Senior Vice-President  
Creditor and Direct Insurance  
Desjardins Financial Security Life Assurance Company



**Sylvie Paquette**

President and Chief Operating Officer  
The Personal Insurance Company

