



SUMMARY

National Bank[®] Travel Insurance

Emergency medical care outside of your province of residence

10 important facts you should know about travel insurance

Are you planning to take a trip soon? The right Emergency medical care protection will help you travel with peace of mind.

Read this summary!

It presents key points about travel insurance.

Understanding these points will help you determine if this insurance product meets your needs so you can make an informed decision about your enrollment.

This summary is an explanatory document. It is not part of the insurance contract. Only the insurance certificate and the Conditions Summary are your insurance contract.



For all the coverage details, consult the insurance certificate, available at nbc-insurance.ca/documents.

Right of review

If you decide to cancel your insurance within the 10 days following your purchase, you are entitled to a full or partial refund of your premium.



Consult section A, article 9, of the insurance certificate for details.

For any questions regarding travel insurance, or if you wish to modify your coverage, contact our customer service at 1-877-871-7500 or 514-871-7500.



ASSISTANCE PROVIDER INFORMATION

› CanAssistance Inc.

1981 McGill College Avenue, Suite 400
Montreal, QC H3A 2W9

Telephone

Canada and the U.S.: **1-844-783-7603**
Elsewhere (call collect): **514-394-0075**

INFORMATION ABOUT THE INSURER

› National Bank Life Insurance Company

800 Saint-Jacques Street, Office 16701
Montreal, Quebec H3C 1A3

Montreal: 514-871-7500

Toll-free: 1-877-871-7500

By email: insurance@nbc.ca
nbc-insurance.ca

Client number delivered by the Autorité des marchés financiers: 2000891377

To check the status of the insurer in the AMF registry: lautorite.qc.ca

DISTRIBUTOR INFORMATION

› National Bank of Canada

800 Saint-Jacques Street
Montreal, Quebec H3C 1A3

Montreal: 514-394-5555

Toll-free: 1-888-483-5628

nbc.ca

10 important facts you should know about travel insurance

1. Travel insurance offers an Emergency medical care coverage and assistance service in the event of unforeseen circumstances

Getting sick or suffering an accident is never pleasant—even less so when these situations occur when you are far from home.

You also benefit from assistance services at no additional cost.

This travel insurance provides **an emergency medical care coverage outside of your province of residence** with indemnities when a medical emergency (illness or accident) occurs while you are travelling.

Here are examples of the expenses we cover, under certain conditions:

- › Medical, paramedical and hospitalization expenses;
- › Transport and subsistence allowance expenses, such as:
 - accommodation and meal expenses when you or a travel companion require emergency medical treatment;
 - transportation home;
 - transportation of a relative to your bedside;
 - etc.

You may purchase insurance for a single trip or choose the annual protection plan.

- › **Coverage for a single trip** provides coverage for the duration of a single trip, based on the departure and return dates.
- › **The annual coverage plan** covers all of trips made in a year. The duration of each trip must respect the maximum duration indicated on the *Conditions Summary*.



Complete information on the coverage is available in Section B of the certificate.

2. You must meet certain eligibility criteria and medical requirements to apply for insurance

2.1 Eligibility

- › Be between 31 days and 84 years old at the date of departure for your trip
- › Be a client of the Bank or one of its subsidiaries or affiliates, or be a family member of such a client
- › Be living in Canada, and
- › Be covered by the public medical insurance plans for the services normally rendered in your province of residence at all times during your trip.

IMPORTANT: A child born to an insured person during a trip is covered only if the birth takes place during the first 32 weeks of pregnancy.

2.2 Medical requirements

You can be insured if:

- › no doctor has advised you not to travel

- › you have not been diagnosed with a terminal medical condition
- › you do not suffer from any kidney problem requiring dialysis
- › you have not had a cancer with metastases (including positive lymph nodes) or undergone chemotherapy in the last 24 months;
- › you have never received a transplant or you are not in waiting to receive one, other than a corneal transplant
- › you have not received a prescription for or undergone oxygen therapy (use of oxygen at home) for a chronic pulmonary condition in the 12 months preceding the purchase of the insurance;
- › you do not have heart failure;
- › you do not have cirrhosis of the liver;
- › you do not have AIDS;
- › you have not received a prescription for or are taking the medication ENTRESTO (sacubitril/valsartan).

What you should know concerning the annual coverage plan

- › You must meet all the eligibility criteria and medical requirements at the date of departure of each trip.
- › If your health condition changes between two trips, the exclusion for pre-existing medical conditions may apply to your situation, even if it did not apply during your previous trip.



Find all the eligibility criteria and medical requirements in the certificate in section A, article 4.

3. Travel insurance involves coverage exclusions, limitations and reductions

We may refuse to pay a claim because of the exclusions set out in the insurance certificate.

Please review them immediately. The details are summarized here.



WARNING – Exclusions, limitations and coverage reductions

No payments will be made in the following situations:

- › Misrepresentation of your health and medical information;
- › Misrepresentation of significant facts other than those related to your health and medical information;
- › Failure to comply with the requirement to be covered by a public health insurance plan.

Limitation

The payable benefit is reduced by any reimbursement made by another entity or insurer.

Pre-existing conditions

Any pre-existing medical condition that has not been stable in the 3 months prior to the date of departure (6 months prior if you are aged 55 to 64 or 12 months prior if you are aged 65 and over).

A medical condition is considered stable when all the following statements are true:

- › No new treatment has been prescribed or recommended, or the current treatment has not been changed or stopped;

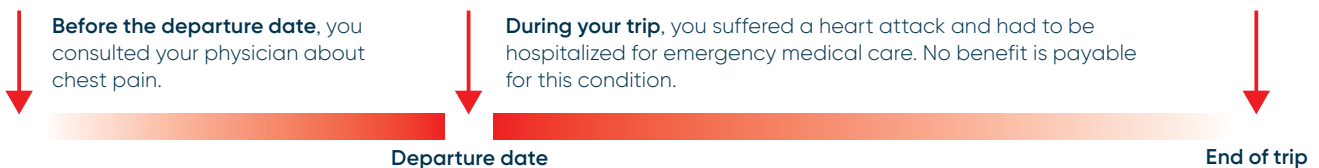
- › No change has been made to a prescribed medication (increase or decrease in dosage or stopping the medication) or no other medication has been recommended or prescribed;
- › The medical condition did not worsen;
- › No new symptoms appeared or there was no worsening or increase in the frequency of existing symptoms;
- › There was no hospitalization or referral to a specialist;
- › There are no examinations, investigative medical tests or recommended treatments that have not been completed or for which results are pending;
- › There is no planned or pending treatment.



Avoid unpleasant surprises. Before leaving, review the following articles in the certificate to confirm that you are covered and that this travel insurance works for your situation:

- › Section A, article 4.3 and
- › Section B, article 3.

Example to illustrate the pre-existing conditions clause



Under age 55: During the 3 months before the departure date.

Age 55 to 64: During the 6 months before the departure date.

Age 65 and over: During the 12 months before the departure date.

Situations not covered

We do not pay any benefits if the medical condition is directly or indirectly related to one of the following causes:

1. Any symptom or condition for which:
 - › you did not seek medical advice when it would have been reasonable to do so, or
 - › diagnostic tests requested by a physician were not carried out, or
 - › the recommended medication or treatment was not followed;
 - › you expected, prior to the date of departure, to require medical attention during the trip.
2. Pregnancy or childbirth, including complications, during the last 8 weeks before the expected delivery date;
3. Participation in one of the following activities:
 - › activity in which participants receive money,
 - › motor vehicle competition,
 - › speeding event,
 - › dangerous or non-routine activity or one that is non-routine and carries a high risk of injury;
4. Abuse of drugs (prescribed or not) or alcohol;
5. Use of drugs or non-prescribed medication or any other form of addiction, including withdrawal effects;
6. Criminal act or attempt to commit a criminal act;
7. Travel for the purpose of obtaining medical advice or treatment;
8. Travel to a location for which the Canadian government has issued a warning, prior to your departure date, to avoid non-essential travel to the location;
9. Suicide, attempted suicide or self-inflicted injury;
10. Any mental, psychological or psychiatric disorder;
11. Any of the following situations:
 - › Any act of war, whether declared or not,
 - › Voluntary participation in a riot or insurrection,
 - › Revolt, revolution, hijacking, kidnapping, terrorist act,
 - › Exposure to nuclear reaction or radiation, radioactive, biological or chemical contamination,
 - › Any participation in the armed forces.

Care not covered

1. Care for a child born during a trip after the first 32 weeks of pregnancy;
2. Care given after you have returned to your province of residence, except for a blow to the mouth;
3. Care or treatment that is not covered by your public health insurance plan;
4. Non-emergency, experimental or elective treatment.

Medications and products not covered

Any medication prescribed prior to the trip, as well as any medication or product available over the counter, even if prescribed.

Treatments not covered

Medical tests for investigation, treatment or surgery that you receive without prior approval from the assistance provider or that are not considered urgent by the assistance provider.

Other situations not covered

- › Failure to contact the assistance provider before incurring medical or transportation costs;
- › Travel against the advice of a physician;
- › Failure to follow the recommendations of a physician or assistance provider.



For more details, see the certificate at section B, article 3.

4. You must pay the insurance premium when you sign up for the insurance

This is one of the conditions that must be met to be insured during your trip. You must pay the total premium when you sign up for the insurance.



Find all the conditions that must be met to be insured during a trip in the certificate in section A, article 3.

5. The insurance premium you pay takes several factors into account

The premium is the amount you pay in order to be insured.

The following information is used to calculate the insurance premium:

- › age of insured persons;
- › duration of coverage;
- › the type of package (single trip or annual protection plan);
- › the answers provided in the medical questionnaire, if applicable.

Visit nbc.ca to find out applicable tax rates for the insurance premium based on your province of residence.



See all the information about premium calculation in the certificate in section A, article 5.

6. Duration of insurance

Start

The moment you leave your province of residence.

End

The insurance ends on the first of the following events:

- › The moment you return to your province of residence
- › The moment your trip is cancelled before the date of departure
- › 11:59 p.m. (according to your time zone) on the expected date of return or on the termination date (annual coverage plan), unless you benefit from automatic coverage extension, as explained in article 6 of section A of the certificate
- › Before the date of departure, if you no longer meet the eligibility criteria and medical requirements outlined in article 4 of section A of the certificate
- › The moment you cancel your insurance

- › **You can extend your coverage, free of charge, in certain emergency situations:** hospitalization, trip postponed by the carrier or by you in the event of an accident or illness.
- › **You must notify the assistance provider when you believe an extension will be necessary.** We may also ask you to provide proof to justify your request if it is an urgent situation. Exclusions may apply.
- › **You can also extend your coverages, for a new premium, to enjoy your trip a little longer,** whatever the reason—pleasure, business, or any other non-urgent reason. Extension may be declined or exclusions may apply.



Consult section A, articles 6 and 8, of the insurance certificate for all the details concerning insurance duration and extension.

7. You may cancel your insurance at any time and, in some circumstances, receive a refund for the premium

You may receive a full or partial refund if you cancel your insurance as follows, if you have not made any valid claims. Administrative fees may apply.

Before your departure date AND within 10 days of purchasing the insurance

You have 10 days to read and review your certificate and determine whether the coverage fully meets your needs.

We will refund the full premium if you decide to cancel your insurance within these 10 days.

Before your departure date AND more than 10 days after purchasing the insurance (single trip only).

If you cancel before your departure date, we will refund the premium.

On your scheduled departure date OR after (single trip only).

You may terminate your insurance contract if your trip is cancelled or if all insured persons have returned to their location of departure before the scheduled return date. We will refund the premium for the unused period of insurance.



For more information, see the certificate at section A, article 9.

8. There is a maximum amount payable

The amount payable for a claim cannot exceed the maximum of \$5,000,000.

There is also a maximum amount based on the type of fees disbursed (e.g., incidental expenses following a hospitalization, up to \$50 per day of hospitalization).



For more detailed information, see section B, article 2 of the insurance certificate.

9. If you make a false declaration, we may refuse your claim and cancel your insurance coverage

You must always provide accurate information about your health condition, trip details and any other information we deem necessary.

If we obtain information at the time of a claim or at any other time during the term of the insurance that differs from the information you provided, **we may deny your claim and cancel your insurance** retroactive to the effective date.



Consult section A, article 4.3 of the insurance certificate for more details.

10. How to file a claim and applicable timeframes

Insurance can give you peace of mind should the unexpected occur. Here's how to file an insurance claim.

1. **Contact the assistance provider as soon as possible** to confirm your coverage before you incur any expenses. at **1-844-783-7603** or **514-394-0075** (collect calls accepted).

The assistance provider will open a file in your name and send you the form to fill out.

2. **Complete and sign the forms**, collect the documents required to assess the claim, where necessary, and send them to:

CanAssistance inc.

1981 McGill College Avenue, Suite 400
Montreal, QC H3A 2W9

You must provide the assistance provider with the documents in the year following the event that gave rise to the claim.

3. **We will notify you of our decision following review of your application** and, if applicable, we will pay the benefit.

The regular timeframe to process a claim is approximately 60 days following the receipt of all the necessary documents.



For more details about claims and payment of benefits, consult section A, articles 10 and 11, of the insurance certificate.

Don't agree with a decision regarding your claim?

Contact us:

National Bank Life Insurance Company

800 Saint-Jacques Street, Office 16701

Montreal, Quebec H3C 1A3

Phone: 1-877-871-7500

Email: insurance@nbc.ca

If we were not able to process your complaint within a period of 14 days, it will automatically be handled by the National Bank Client Complaint Appeal Office.

If you received a response within the 14-day period but you remain dissatisfied, you may contact the Client Complaint Appeal Office:

Telephone: 514-394-8655 or 1-888-300-9004

Website: nbc.ca

Email: complaintappeal@nbc.ca

If you are still not satisfied and want to continue with the process, you may at your discretion:

- › Request a review of your file;
- › Consult your legal advisor;
- › Contact one of the following organizations:

Autorité des marchés financiers (AMF)

Place de la Cité, Cominar Tower

2640 Laurier Boulevard, 4th Floor

Quebec, QC G1V 5C1

Phone

Quebec City: 418-525-0337

Montreal: 514-395-0337

Elsewhere in Quebec: 1-877-525-0337

Fax: 1-877-285-4378

Website: lautorite.qc.ca

OmbudService for Life & Health Insurance (OLHI)

Toll-free number

Canada: 1-888-295-8112

Toronto: 416-777-9002

Website: olhi.ca

For applicable limitation periods, consult your provincial regulatory body or your legal advisor.



The client experience is our top priority

We're here to listen and help.

If you have any questions, call the assistance provider at **1-844-783-7603** or **514-394-0075**, or you can visit our website nbc-insurance.ca/your-opinion to learn about our complaint management process, make a complaint and consult our complaints policy.

Notice given by a distributor

Section 440 of the *Act respecting the distribution of financial products and services* (chapter D-9.2)

The Act respecting the distribution of financial products and services gives you important rights.

The Act allows you to rescind an insurance contract, **without penalty**, within 10 days of the date on which it is signed. However, the insurer may grant you a longer period.

To rescind the contract, you must give the insurer notice, within that time, by registered mail or any other means that allows you to obtain an acknowledgement of receipt.

Despite the rescission of the insurance contract, the first contract entered into will remain in force. Caution, it is

possible that you may lose advantageous conditions as a result of this insurance contract; contact your distributor or consult your contract.

After the expiry of the applicable time, you may rescind the insurance contract at any time; however, penalties may apply.

For further information, contact the Autorité des marchés financiers at 1-877-525-0337 or visit www.lautorite.qc.ca.

Notice of rescission of an insurance contract

Send to:

National Bank Life Insurance
800 Saint-Jacques Street, Office 16701
Montreal, Quebec H3C 1A3

Date: _____ (date of sending of notice)

Pursuant to section 441 of the *Act respecting the distribution of financial products and services*,

I hereby rescind insurance contract no.: _____ (number of contract, if indicated)

Entered into on: _____ (date of signature of contract)

In: _____ (place of signature of contract)

(name of client)

(signature of client)



Insurer: National Bank Life Insurance Company.

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