

# Exclusions and Limitations

*Emergency Medical Benefits are provided as a result of a medical emergency due to an unforeseen accident or illness which occurs outside the eligible plan member's or eligible dependent's province of residence.*

The maximum benefit payable for Out-of-Province/Out-of-Country Emergency Travel is \$5,000,000 per eligible member/dependent, per incident. Your Alberta Blue Cross® ID card contains the information you will need to use the emergency medical travel plan. Keep your card with you at all times while traveling and contact the Travel Assist line immediately if you or a family member requires medical attention.

## EXCLUSIONS AND LIMITATIONS

1. Coverage shall become effective on the latter of
  - a. the time of crossing the provincial border, or
  - b. the effective date of the Participant's Out-of-Province Emergency Travel Benefits.
2. The coverage shall terminate on the earliest of
  - a. the end of the benefit period as specified in the benefit summary,
  - b. the provincial border on the return trip home, or
  - c. 12:00 a.m. on the member's termination date.
3. Benefits are payable for eligible expenses incurred only during the period this coverage and major medical and dental plan is in force.
4. The total amount payable for all eligible expenses will not exceed the Out-of-Province/Out-of-Country Emergency Travel maximum as indicated in the benefit summary
5. Alberta Blue Cross shall not accept liability if services are provided by a provider who is related to the member.
6. Alberta Blue Cross shall not pay for any benefit relating to pregnancy or childbirth complications, including treatment for the newborn if the medical emergency occurs after the 32nd week of gestation or is a result of the deliberate inducement of a miscarriage.
7. Alberta Blue Cross may not accept liability for hospitalization and related expenses if the travel assistance service is not contacted within 24 hours of admission. Failure to contact the travel assistance service may result in the payment of medical expenses being denied or delayed.
8. Alberta Blue Cross, in consultation with the provider or travel assistance service medical advisor, reserves the right to transfer the member to another hospital or to return the member to their province or territory of residence. If a member is medically able to return to their province or territory of residence and refuses to comply with the transfer request,

Alberta Blue Cross will be absolved of any further liability, whether related to the initial incident or not.

9. Benefits are not covered if expenses are incurred when the member could have been returned to their province or territory of residence without endangering their life or health, even if the treatment available in their province or territory of residence could be of lesser quality than the treatment available outside their province or territory of residence or even if the member must go on a waiting list for that treatment.
10. Alberta Blue Cross's liability is limited to expenses incurred as a result of a sudden illness or accident which occurs outside the member's province or territory of residence.
11. Benefits are not covered if travel is booked or commenced contrary to medical advice or if medical attention is anticipated during the travel period. Alberta Blue Cross shall have the right to obtain medical information from the member's physician(s) and may request an assessment by an independent physician(s) or specialist(s).
12. Services or treatments are not covered, regardless of the nature of the claim, if a member travels to another province or country primarily for hospitalization or services rendered in connection with
  - a. seeking medical advice, surgery, a second opinion or treatment, intentionally or incidentally, even if the trip is on the medical recommendation of a provider;
  - b. general health examinations for check-up purposes;
  - c. rehabilitation or ongoing care in connection with drugs, alcohol or any other substance abuse;
  - d. a rest cure or travel for health;
  - e. cosmetic purposes;
  - f. experimental or unconventional procedures;
  - g. elective services; or
  - h. ongoing maintenance of an existing condition.
13. Benefits are not covered for hospital accommodation or treatment that is received in a hospital other than a general active treatment hospital, such as a chronic care hospital, a chronic care unit of a general active treatment hospital, a convalescent hospital, a nursing home or a health spa.
14. Benefits are not covered if emergency medical care expenses are incurred in a country, region or city when a written formal notice was issued by the Department of Foreign Affairs, Trade and Development of the Canadian government or its equivalent prior to the departure date advising Canadians to avoid non-essential travel or avoid all travel to that country, region or city unless the incident is unrelated to the posted warning.
15. This coverage is only available to members who are covered by a Canadian federal and/or provincial government health program.
16. The following benefits are not covered unless prior approval is received from the travel assistance provider and are subject to the discretion of Alberta Blue Cross:
  - a. Medical evacuation air ambulance services.
  - b. Medical evacuation repatriation.
  - c. Friend/family hospital visits.
  - d. Friend/family identification of deceased.
  - e. Vehicle services.
  - f. Return of dependent children.
  - g. Return of personal items.
  - h. Return of pet(s).
17. Payment will be made by Alberta Blue Cross upon receipt and appraisal of the necessary charges and information concerning the accounts as detailed. Claims must be supported by receipts from commercial organizations. Payment will be made in Canadian currency, based on the rate of exchange in effect at the time the service was performed or supply was obtained.

18. Benefits are not covered if expenses are incurred due to
  - a. abuse of medication, toxic substances, alcohol or the use of non-prescription drugs;
  - b. driving a motorized vehicle while impaired by drugs, toxic substances or an alcohol level of more than 80 milligrams in 100 millilitres of blood;
  - c. commission of or attempt to commit, directly or indirectly, a criminal act under legislation in the area of commission of the offense;
  - d. treatment, services or supplies required in connection with any injury or disease resulting from participation in an insurrection, war or act of war (declared or not); participation in any civil commotion, riot public confrontation, hijacking, terrorism or any other act of aggression; the hostile action of the armed forces of any country; or service in the armed forces of any country.
19. All eligible expenses listed in the Out-of-Province Emergency Travel Section shall be payable upon submission of certification by the member that services included in the eligible expenses have been required for emergency treatment.
20. Alberta Blue Cross may request proof of departure upon receipt of the claim.
21. The benefits described herein are available to the member and their eligible dependents.
22. Neither Alberta Blue Cross nor the travel assistance service shall be responsible for the availability, quality or results of any medical treatment or transportation or the failure of the member to obtain medical treatment.
23. Amounts payable as a result of a medical emergency incurred outside of the member's province or territory of residence are in excess of any amounts available or collectible under any existing coverage or insurance concurrently in force held by the member or available to the Participant. All other sources of recovery, indemnity payments or insurance coverage must be exhausted before payments will be made by Alberta Blue Cross. Payment by all insurers cannot exceed 100 per cent of the eligible expense.

## EXTENSION OF COVERAGE

Coverage will be extended for a maximum of 72 hours following the lesser of the benefit period or reduction limitation as outlined in the benefit summary when

24. return is delayed due to hospitalization in which case the extension of coverage begins on the hospital discharge date;
25. return is delayed by order of the attending physician or the travel assistance service medical advisor due to a covered illness or accidental injury; or
26. return is delayed due to the delay of a common carrier (airplane, bus, taxi or train) on which the member is a passenger or the delay caused by a traffic accident or mechanical failure of a private automobile enroute to the departure point. Claims must be supported by documentary proof.

