



 **ROGERS** bank™

# Certificate of Insurance

Rogers™ World Elite® Mastercard®

 **ROGERS**™



**Rogers™ World Elite® Mastercard®**  
**Certificate of Insurance**  
Effective Date: February 27, 2019



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## EMERGENCY MEDICAL & TRIP CANCELLATION / INTERRUPTION PROTECTION COVERAGE

### IMPORTANT NOTICE

Read this *certificate of insurance* carefully.

This *certificate of insurance* is designed to cover losses arising from sudden and unforeseeable circumstances only. It is important that **you** read and understand this *certificate of insurance* as coverage is subject to limitations and exclusions.

**The inclusive Out-of-Province/Out-of-Country Emergency Medical benefit of this certificate of insurance is available only if you are age 75 or under.** This age restriction applies to the *primary cardholder, primary cardholder's spouse, primary cardholder's dependent children* and *authorized user*.

**Out-of-Province/Out-of-Country Emergency Medical coverage is provided for the first 10 days of a trip if you are 64 years of age and under, or for the first 3 days of a trip if you are 65 years of age up to and including 75 years of age.**

**Warning:** Travel insurance doesn't cover everything; it is designed to cover losses arising from sudden and unforeseeable circumstances due to an **emergency**. It is important that **you** read and understand **your** coverage before **you** travel as coverage may be subject to certain limitations or exclusions.

The Out-of-Province/Out-of-Country Emergency Medical, Trip Cancellation, Trip Interruption/Trip Delay benefits contain a **pre-existing condition** exclusion for travellers of any age. This exclusion applies to **medical conditions** and/or **signs or symptoms** that existed on or prior to the date the **coverage period** began.

In the event of a medical **emergency**, **you** or someone on **your** behalf must notify the administrator, Allianz Global Assistance (toll free 1-866-856-7323 or worldwide collect (519) 742-1723) within 24 hours of admission to a **hospital** and before any surgery is performed. Also notify Allianz Global Assistance if **you** must cancel, interrupt or delay **your trip**, or **you** experience any **emergency**. Failure to notify Allianz Global Assistance as required will delay the processing and payment of claim and may limit the amount of claim payment.

In the event of an **accident, injury** or **sickness**, **your** prior medical history may be reviewed when a claim is reported.

The Out-of-Province/Out-of-Country Emergency Medical benefits described herein are underwritten by CUMIS General Insurance Company, a member of The Co-operators group of companies under Group Policy No. FC310040-A (referred to herein as the "Policy"). **You** and any claimant under this insurance may request a copy of the Policy subject to certain access restrictions. The Policy is issued to Rogers Bank (the "policyholder", "Rogers"). All other benefits, such as Trip Cancellation and Trip Interruption/Trip Delay are offered by CUMIS General Insurance Company under an individual policy. The last four digits of **your** Rogers World Elite **Mastercard** number is **your certificate of insurance** number. This insurance is administered by Allianz Global Assistance, which is a registered business name of AZGA Service Canada Inc.

**You** may contact the **insurer** at the following address:

CUMIS General Insurance Company  
P.O. Box 5065, 151 North Service Road  
Burlington, ON L7R 4C2  
1-800-263-9120

The insurance described in this *certificate of insurance* is for eligible Rogers World Elite **Mastercard** cardholders whose **accounts** are in **good standing** and where specified, **the primary cardholder's spouse, primary cardholder's dependent children** and **authorized users** (referred to herein as "**you** or **your**").

All benefits are subject, in every respect, to the terms of the Policy, which alone constitutes the agreement under which payments are made. Only Rogers may determine who is a **primary cardholder**, whether an **account** is in **good standing** and whether the insurance pursuant to this *certificate of insurance* has come into or is in force.

No person is eligible for coverage under more than one *certificate of insurance* providing insurance coverage similar to that provided hereunder. In the event that any person is recorded by the **insurer** under more than one such certificate or policy, such person shall be deemed to be insured only under the certificate or policy, which affords that person the greatest amount of insurance coverage. In no event will a corporation, partnership or business entity be eligible for any coverage under this *certificate of insurance*. This *certificate of insurance* supersedes any certificate or policy previously issued.

**IMPORTANT NOTICE: This certificate of insurance contains a provision removing or restricting the right of an insured person to designate persons to whom or for whose benefit insurance money is to be payable.**

## Definitions

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In this *certificate of insurance*, certain terms have defined meanings. Defined terms are in bold italics throughout this document.

**Accident(al)** means a sudden, unexpected, unforeseeable, unavoidable external event and excludes disease or infections.

**Account** means the *primary cardholder's* World Elite **Mastercard** account, which is in **good standing** with Rogers Bank.

**Act of terrorism** means an act, including but not limited to hijacking, the use of force or violence and/or the threat thereof or commission or threat of a dangerous act, of any person or group(s) or government(s), committed for political, religious, ideological, social, economic or similar purposes including the intention to intimidate, coerce or overthrow a government (whether de facto or de jure) or to influence, affect or protest against any government and/or to put the civilian population, or any section of the civilian population, in fear.

**Act of war** means any loss or damage arising directly or indirectly from, occasioned by, happening through or in the consequence of: war; invasion; acts of foreign enemies; hostilities or warlike operations (whether war is declared or not) by any government or sovereign, using military personnel or other agents; civil war; rebellion; revolution; insurrection; civil commotion assuming the proportions of or amounting to an uprising; military or usurped power.

**Authorized user** means any person whom a Rogers World Elite **Mastercard** was issued at the authorization of the **primary cardholder**.

**Canadian resident** means a person legally authorized to reside in Canada and who maintains a permanent residence in Canada to which they will return after their **trip**.

**Caregiver** means the person entrusted to care for dependents on a permanent full-time basis and whose absence cannot reasonably be replaced.

**Certificate of insurance** means a summary of the benefits provided under the group Policy issued to Rogers covering **accident** and **sickness**, and the individual policy of insurance for all other benefits.

**Commercial accommodation** means an establishment providing short-term accommodation for paying guests, licensed under the law of its jurisdiction, which provides proof of commercial transaction. This includes accommodation booked through an online marketplace or homestay network.

**Common carrier** means an airline, bus, taxi, car service, train, cruise ship or government-operated ferry system offering its transportation services to paying passengers at published rates and scheduled times.

**Coverage period** means the time coverage is in effect, as indicated in the various sections of this **certificate of insurance**.

**Default** means a complete cessation of operations as a result of a bankruptcy of a contracted **travel supplier**.

**Departure date** means the date on which **you** depart on **your trip** from **your** place of ordinary residence.

**Dependent child(ren)** means an unmarried natural, adopted or stepchild of a **primary cardholder** dependent on the **primary cardholder** for maintenance and support who is:

- 20 years old and under; or
- 25 years old and under and a full-time student attending a recognized college or university; or
- 21 years old and over, permanently mentally or physically challenged and incapable of self-support and became so while eligible as a **dependent child**.

**Effective date** means the date Rogers accepted the **primary cardholder's** application and issued a World Elite **Mastercard** and **you** meet all the eligibility requirements outlined herein.

**Emergency** means a sudden, unforeseen **sickness** or **injury** occurring during a **trip**, which requires immediate intervention by a **physician** or legally licensed dentist and cannot reasonably be delayed. An emergency is deemed to no longer exist when medical evidence indicates that **you** are able to continue on the **trip** or return to **your** place of ordinary residence in Canada.

**Emergency dental care** means the services or supplies provided by a licensed dentist, **hospital** or other licensed provider that are immediately and **medically necessary**.

**Family member** means **your spouse**, **dependent child**, parent, step-parents, sibling, step-siblings, legal guardian, parent-in-law, grandparents, grandchildren, daughter-in-law, son-in-law, brother-in-law and sister-in-law.

**Good standing** means being in full compliance with all of the provisions of the cardholder agreement (as determined at Rogers sole discretion) in force between the **primary cardholder** and Rogers.

**Heart condition** includes angina or chest pain, arrhythmia, arteriosclerosis, atrial fibrillation, congenital heart defect, heart failure, cardiomyopathy, carotid artery occlusion, heart attack (myocardial infarction), heart murmur, irregular heart rate or beat, any other condition relating to the heart or cardiovascular system.

**High-risk activity(ies)** means:

- heli-skiing;
- any skiing or snowboarding outside marked trails;
- ski jumping or bungee jumping;
- skydiving, sky-surfing or hang-gliding;
- scuba diving (except if certified by internationally recognized and accepted program such as NAUI or PADI, or if diving depth does not exceed 30 meters.);
- white water rafting (except grades 1 to 4.);
- street luge, skeleton activity;
- rock climbing (includes but is not limited to bouldering, ice climbing, lead or top-rope, multi-pitch, soloing, sport climbing, trad climbing or via ferrata. Rock climbing does not include climbing artificial rock walls when using proper safety equipment under supervision.);
- mountain climbing (the ascent or descent of a mountain requiring the use of specified equipment including crampons, pick axes, anchors, bolts, carabiners and lead-rope or top rope anchoring equipment.);
- parachuting or parasailing; or
- air travel other than as a ticketed passenger.

**Hospital** means a facility incorporated or licensed as a **hospital** by the jurisdiction where such services are provided and which has accommodation for resident **inpatients**, a laboratory, a registered graduate nurse and **physician** always on duty and an operating room where surgical operations are performed by a **physician**. In no event shall this include a convalescent or nursing home, home for the aged, health spa, or an institution for the care of drug addicts, alcoholics or persons suffering from mental or emotional disorders.

**Incident date** means the first date **you** exhibit **signs** or **symptoms** and/or sought **treatment** for a **medical condition, sickness** or **injury** or the date the non-medical cause of cancellation, interruption, delay or loss originated.

**Injury** means bodily harm, which is directly caused by or resulting from an **accident**, being a sudden and unforeseen event, excluding bodily harm that results from deliberate or voluntary action, and independent of **sickness** and all other causes.

**Inpatient** means a person who is treated as a registered bed patient in a **hospital** or other facility and for whom is charged room and board.

**Insurer** means CUMIS General Insurance Company, a member of The Co-operators group of companies.

**Lung/respiratory condition** includes asbestosis, bronchiectasis, chronic bronchitis, chronic obstructive pulmonary disease (COPD), emphysema, pulmonary embolism, pulmonary fibrosis, pulmonary edema, tuberculosis.

**Mastercard** means a World Elite **Mastercard** issued by Rogers.

**Medical condition** means any **sickness, injury** or **symptom**.

**Medical consultation** means any medical services obtained from a licensed medical practitioner for a **sickness, injury** or **medical condition**, including but not limited to any or all of: history taking, medical examination, investigative testing, advice or **treatment**, and during which a diagnosis of the condition need not have been definitively made. This does not include regular medical check-ups where no medical **signs** or **symptoms** existed between check-ups or were found during the check-up. **Treatment** provided when medical evidence indicates **you** could delay **treatment** or return to Canada for such **treatment** is not considered a medical **emergency** and is not covered.

**Medically necessary** means the services or supplies provided by a **hospital, physician**, licensed dentist or other licensed provider that are required to identify or treat **your sickness** or **injury** and that the **insurer** determines are:

- consistent with the **symptom** or diagnosis and **treatment** of **your** condition, **sickness**, ailment or **injury**;
- appropriate with regard to standards of good medical practice;
- not solely for the convenience of **you**, a **physician** or other licensed provider;
- the most appropriate supply or level of service that can be safely provided to **you**; and
- when applied to the care of an **inpatient**, it further means that **your** medical **symptoms** or condition require that the services cannot be safely provided to **you** as an **outpatient**.

**Minor ailment** means a **sickness** or **injury** which ended more than 30 days prior to the **coverage period** and which did not require:

- a) **treatment** for a period longer than 15 consecutive days; or
- b) more than one follow-up visit to a **physician**; or
- c) hospitalization, surgery, or referral to a specialist.



**Nuclear, chemical or biological** means the use of any nuclear weapon or device or the emission, discharge, dispersal, release or escape of any solid, liquid or gaseous chemical agent and/or biological agent, including the resultant contamination where:

- **Nuclear** means any occurrence causing bodily **injury, sickness**, disease, or death, or loss of or damage to property, or for loss of use of property, arising out of or resulting from the radioactive, toxic, explosive, or other hazardous properties of source, special nuclear, or by-product material.
- **Chemical** agent means any compound which, when suitably disseminated, produces incapacitating, damaging or lethal effects on people, animals, plants or material property.
- **Biological** agent means any pathogenic (disease producing) micro-organism(s) and/or biologically produced toxin(s) (including genetically modified organisms and chemically synthesized toxins) which cause illness and/or death in humans, animals or plants.

**Outpatient** means someone who receives a covered service while not an **inpatient**.

**Physician** means a person other than **you**, who is legally qualified and licensed to practice medicine or perform surgery in the location where the services are performed, and who is not related to **you** by blood or marriage.

**Pre-existing condition** means a **sickness, injury or medical condition**, whether or not diagnosed by a **physician** that **you**:

- exhibited **signs** or **symptoms**;
- required or received **medical consultation**;
- are waiting for test results;
- have been referred to see a specialist for additional testing; or
- had prior to the **departure date** or any **trip** payment.

**Primary cardholder** means the cardholder who has signed the application for a World Elite **Mastercard**, as primary cardholder and for whom the **Mastercard account** is established by Rogers.

**Professional** means an individual who is considered as such by the governing body of the sport and are paid for participation whether they win or lose.

**Reasonable and customary** means the services customarily provided or the costs customarily incurred for covered losses, which are not in excess of the standard practice or fee in the geographical area where the services are provided or costs are incurred for comparable **treatment**, services or supplies for a similar **sickness** or **injury**.

**Recurrence** means the appearance of **symptoms** caused by or related to a **medical condition**, which was previously diagnosed by a **physician** or for which **treatment** was previously received.

**Sickness** means any illness or disease.

**Signs** or **symptoms** means any evidence of disease experienced by **you** or recognized through observation.

**Spouse** means the person who is legally married to the **primary cardholder** or the person who has lived in the same household for one year with the **primary cardholder** in a conjugal relationship and is publicly represented as the spouse of the **primary cardholder**. For the purposes of this insurance the **primary cardholder** may have only one spouse.

**Stable** describes any **medical condition** or related condition, including any **heart condition** or **lung/respiratory condition**, for which:

- a) there has been no new **treatment**;
- b) there has been no change in **treatment** or change in **treatment** frequency or type;
- c) there have been no **signs or symptoms** or new diagnosis;
- d) there have been no test results showing deterioration;
- e) there has been no hospitalization; and
- f) there has been no referral to a specialist (made or recommended) and are not awaiting surgery or the results of investigations performed by any medical professional.

The following are also considered **stable**:

- a) Routine (not prescribed by a **physician**) adjustment of insulin to control diabetes provided the insulin was not first prescribed during the time period specified in the **pre-existing conditions** exclusion.
- b) Change from a brand name medication to a generic medication provided the medication was not first prescribed during the time period specified in the **pre-existing conditions** exclusion and there is no increase or decrease in dosage.
- c) Routine adjustment of Coumadin or Warfarin provided the Coumadin or Warfarin was not first prescribed during the time period specified in the **pre-existing conditions** exclusion.
- d) A **minor ailment**.

**Ticket** means evidence of full fare paid for travel on a **common carrier**, which the full cost including taxes and/or fees has been charged to the **account**.

**Travel advisory** means a formal written notice issued by the Canadian government instructing travellers to avoid all travel or avoid non-essential travel to a country, region or city. This does not include travel information reports.

**Travel companion** means a person with whom **you** have coordinated travel arrangements and with whom **you** intend to travel during the **trip**. Exception: No more than three individuals (including **you**) will be considered travel companions on any one **trip**.

**Travel supplier** means a tour operator, travel wholesaler, airline, cruise line, provider of ground transportation or provider of **commercial accommodation** that is contracted to provide travel services to **you** and that is licensed, registered or otherwise legally authorized to operate and provide travel services.

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

**Trip** means a period during which **you** are travelling outside of **your** province or territory of residence and for which coverage is in effect. For Trip Cancellation & Trip Interruption and Delay benefits, a trip begins when **you** leave **your** place of ordinary residence.

**Vehicle** means a private passenger automobile or motorcycle that is used exclusively for the transportation of passengers; and is either owned or rented by **you**.

**You** or **your** means the **primary cardholder, primary cardholder's spouse, primary cardholder's dependent children** and **authorized user**. NOTE: The **authorized user's spouse** and **dependent children** are not insured persons.

## Assistance Services

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Assistance services are available to **you** and all Rogers World Elite **Mastercard** cardholders 24 hours a day, 7 days a week. Allianz Global Assistance can provide **you** with important information **you** need before **your trip** and **emergency** medical services or non-medical **emergency** services **you** may require during **your trip**. **You** do not need to charge **your trip** to **your Mastercard** to use these services.

**NOTE:** The following assistance services are for **your** convenience only, expenses related to these helpful services may not be covered under this **certificate of insurance**. Please refer to the benefit wording for details of what is covered.

### Pre-Trip Assistance

- Passport and travel visa information
- Health hazards and **travel advisories**
- Inoculation and vaccination requirements
- Weather information
- Currency exchange information
- Consulate and embassy locations
- Coverage-related questions and inquiries

### Medical Emergency Assistance

- Monitoring the status of **your** medical case and communicating between patient, family **physician**, employer, **travel supplier**, consulate, etc.
- Coordinating travel arrangements as follows:
  - **emergency** medical transportation and **treatment** en route, at the request of **you** or **your physician**;
  - escort and transportation home for stranded **dependent children** and/or other extended family members or friends while **you** are in **hospital**;
  - **your** return home if ill or injured;
  - should **you** die away from home, services for the repatriation of **your** remains.

### Non-Medical Emergency Assistance

- Cash services – in the event of an **emergency**, Allianz Global Assistance will coordinate between **you** and **your** friend, family member, business or credit card company for a cash transfer.
- Message services – Allianz Global Assistance will take **emergency** messages from or for **you**.
- **Ticket** document replacement – Allianz Global Assistance will help **you** replace lost or stolen airline **tickets** or travel documents.
- Legal services – Allianz Global Assistance will help **you** contact a local attorney or the appropriate consular officer if **you** are arrested or detained, are in a traffic **accident** or otherwise require legal help.
- Bail bond services – these can be coordinated for **you** in all locations where they are available.
- Interpretation services – Allianz Global Assistance can connect **you** with an interpreter when required for **emergency** services abroad.

## Emergency Procedures

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In the event of a medical **emergency**, **you** or someone acting on **your** behalf must notify Allianz Global Assistance as soon as possible upon admission to a **hospital** and before any surgery is performed.

For Trip Cancellation and Trip Interruption Claims: **You** must contact **your travel supplier** as soon as possible following a trip cancellation or trip interruption as **you** may be eligible for reimbursement.

### Limits on Coverage

If Allianz Global Assistance is not notified at an early stage in the claim, **you** may receive inappropriate or unnecessary medical **treatment**, which may not be covered by this insurance. **You** will be responsible for any expenses that are not payable by the **insurer**.

From Canada and the United States call: 1-866-856-7323

From elsewhere call collect: (519) 742-1723

Fax: (519) 742-9471

Allianz Global Assistance is here to help with service 24 hours a day, 7 days a week. Allianz Global Assistance will assist in finding and arranging medical care; provide claims management and payment assistance under this insurance; pay **hospitals** and other medical providers directly whenever possible; and coordinate claims with **your** government health insurance plan whenever possible.

If the covered medical expense is relatively small, the **hospital** or **physician** may ask **you** to pay. The **primary cardholder** will be reimbursed for covered expenses upon submission of a claim.

Subject to the limitations of this insurance, Allianz Global Assistance will offer to all **hospitals**, which provide **you** with **medically necessary treatment**, a guarantee of coverage for covered services. If the guarantee is not accepted, Allianz Global Assistance will assist in arranging and coordinating payment wherever possible.

Please call Allianz Global Assistance at 1-866-856-7323 or (519) 742-1723 if **you** have any questions regarding what is not covered.

## Certificate Effective and Termination Date

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Unless otherwise stated, this **certificate of insurance** comes into effect on the date Rogers receives and approves the **primary cardholder's** application for the Rogers World Elite **Mastercard**, which includes the benefits described in this **certificate of insurance** as a feature of their **Mastercard**.

Unless otherwise stated, this **certificate of insurance** terminates on the earliest of:

- the date **you** are no longer eligible to participate;
- the date the **account** is determined to be ineligible as defined by Rogers;
- the date Rogers ceases to pay premium to the **insurer**; or
- the date the Policy is terminated.

## Extending Your Trip

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If **you** decide to extend **your trip** please call Allianz Global Assistance toll-free 1-866-856-7323 or collect at (519) 742-1723.

### Prior to Departure

**You** can extend **your** coverage before **you** leave **your** province or territory of residence.

### After Departure

If **you** decide to apply for additional coverage after **you** have left **your** province or territory of residence, **you** may apply for a new term of coverage if **you**:

- a) purchase additional coverage prior to the **expiry date** of **your** current coverage; and
- b) have no reason to file a claim during the new term of coverage.

If **you** have incurred a claim or experienced a change in health, Allianz Global Assistance will review **your** file before deciding on granting additional coverage.

Each **certificate** or term of coverage is considered a separate contract and all limitations and exclusions will apply. Allianz Global Assistance reserves the right to decline any request for new terms of coverage.



# Out-of-Province/Out-of-Country Emergency Medical Coverage

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## Coverage Eligibility

To be eligible for the Out-of-Province/Out-of-Country Emergency Medical Coverage benefits **you** must meet the following conditions:

- be a **Canadian resident** listed on a Rogers World Elite **Mastercard account**;
- be age 75 or under; and
- be covered by a government health insurance plan for the duration of the **trip**.

**You** do not need to charge **your trip** to the **Mastercard** to be eligible for this coverage, providing **you** are travelling outside **your** province or territory of residence and the Rogers World Elite **Mastercard account** is in **good standing**.

## Coverage Period

Coverage for each **trip** is effective upon the **departure date** from **your** province or territory of residence.

Coverage for each **trip** will terminate on the earliest of the following:

- the date **you** return to **your** Canadian province or territory of residence;
- the date **you** attain age 76 (for **dependent children** see the definition for age limits); or
- the date **you** reach the maximum number of days permitted for each **trip** (including **your departure date**):
  - 10 days for ages 64 and under; or
  - 3 days for ages 65 up to and including age 75.

## Automatic Extension of Coverage

If **you** cannot return home as originally scheduled, coverage will automatically be extended under the following circumstances:

- a) Delay of transportation (a vehicle, airline, bus, train, or government-operated ferry system): Coverage will be automatically extended for up to 72 hours in the event of a delay, due to circumstances beyond **your** control, of the transportation in which **you** are riding or are scheduled to ride as a passenger that causes **you** to miss **your** scheduled return date.
- b) Medically unfit to travel: Coverage will be automatically extended for up to five days, if medical evidence supports that **you** or **your travel companion** are medically unfit to travel due on their scheduled return date due to a covered **sickness** or **injury**.
- c) Hospitalization: Coverage will be automatically extended during the period of **hospital** confinement, plus five days after release to travel home, if **you** or **your travel companion** are hospitalized as a result of a covered **injury** or **sickness** during the **trip**. This coverage will be extended to the **travel companion** remaining with **you** when reasonable and necessary, under their respective policy.

## Benefits

The **insurer** agrees to cover the **reasonable and customary** charges up to a maximum of \$1 million incurred by **you** for the medical **treatment** and covered services arising from a medical **emergency** when the **incident date** occurs during the **coverage period**.

The following are eligible expenses covered by this insurance, subject to all exclusions and limitations described in this **certificate of insurance**. Any **treatment** or service not listed below is not covered. Neither the **insurer**, nor Allianz Global Assistance, nor Rogers are responsible for the availability, quality or results of any medical **treatment** or transportation, or **your** failure to obtain medical **treatment**.

## Emergency Hospital, Ambulance & Medical Expenses

1. The **insurer** agrees to provide coverage for **hospital** accommodation, including private or semi-private room, and for **reasonable and customary** services and supplies necessary for **your emergency** care while a resident **inpatient**, including drugs or medications prescribed by a **physician**.
2. The **insurer** agrees to provide coverage for the following services, supplies or **treatment**, when received during **your trip** and provided by a licensed health practitioner who is not related to **you** by blood or marriage.
  - a) The services of a legally licensed **physician**, surgeon, anaesthetist or registered graduate nurse.
  - b) Up to \$5,000 for private duty services of a registered nurse when approved in advance by Allianz Global Assistance.

- c) The services of the following legally licensed practitioners for **treatment** of a covered **injury**, up to \$150 per profession:
  - chiropractor
  - osteopath
  - chiroprapist
  - podiatrist
  - acupuncturist
  - physiotherapist
- d) When performed at the time of the initial **emergency**, lab tests and/or X-ray examinations as ordered by a **physician** for the purpose of diagnosis.
- e) The use of a licensed local air, land, or sea ambulance (including mountain or sea evacuation), or taxi to and from the nearest **hospital** when reasonable and necessary.
- f) Rental of crutches or hospital-type bed, not exceeding the purchase price, and the cost of splints, trusses, braces or other prosthetic appliances approved in advance by Allianz Global Assistance.
- g) **Emergency outpatient** services provided by a **hospital**.
- h) Drugs or medications that require a **physician's** written prescription, other than those required to continue to stabilize a **medical condition** or related condition which **you** had before **your trip**, up to a 30 day supply, except during hospitalization as an **inpatient**.

#### Emergency Air Transportation or Evacuation

3. If required, Allianz Global Assistance, on the **insurer's** behalf, agrees to arrange **your** transport to the nearest appropriate medical facility or to a Canadian **hospital** due to a covered **emergency sickness** or **injury**. Any **emergency** transportation such as air ambulance, one-way airfare, stretcher, and/or a medical attendant, must be pre-approved and arranged by Allianz Global Assistance.

#### Attendant / Return of Travel Companion

4. If **you** are returned to Canada under the Emergency Air Transportation or Evacuation benefit, the **insurer** agrees to cover the extra cost of a one-way economy class airfare to return **your dependent children** and/or **travel companion** to their province or territory of residence; and if required, the cost of an attendant's return economy class airfare (not related to **you** by blood or marriage) to travel with **your dependent children** or **travel companion** who are physically or intellectually disabled and reliant on **you** for assistance to their province or territory of residence. Benefits are payable only when approved in advance and arranged by Allianz Global Assistance.

#### Emergency Dental Care Expenses

5. The **insurer** agrees to cover the cost to repair or replace natural teeth or permanently attached artificial teeth required as the result of an **accidental** blow to the mouth, to a maximum of \$2,000 per insured person. Chewing **accidents** are not covered. To be eligible for coverage, dental **treatment** must take place during the **trip**. **Treatment** for the **emergency** relief of dental pain is covered to a maximum of \$150 per insured person.

#### Transportation to Bedside

6. The **insurer** agrees to reimburse the cost of one round-trip economy airfare by the most direct and cost effective route from Canada, plus **commercial accommodation** and meals up to a maximum of \$200 per day to a maximum of 10 days per **account**, for any one **family member** or friend to:
  - be with **you, if you are** travelling alone and have been admitted to a **hospital** due to a covered **sickness** or **injury** as an **inpatient**. **You** must be expected to be an **inpatient** for at least seven days outside **your** home province or territory and have verification from the attending **physician** that the situation is serious enough to require the visit; or
  - identify **your** remains in the event of death due to a covered **sickness** or **injury** and the local authorities legally require the attendance of a family member or close friend before the release of the body.

#### Return of Deceased (Repatriation)

7. If during **your trip** a covered **sickness** or **injury** results in death, the **insurer** agrees to reimburse up to \$3,000 for the preparation (including cremation) and transportation of the deceased's remains to **your** province or territory of residence. The cost of a burial coffin or urn is not covered.

#### Additional Hotel and Meal Expenses

8. If **your** return to Canada is delayed due to a medical **emergency**, the **insurer** agrees to reimburse the cost for **commercial accommodation** and meal expenses incurred after **your** planned return date up to \$200 per day to a maximum of 10 days per **account**. Original receipts must be submitted to receive reimbursement.

#### Return of Vehicle

9. If as a result of a covered **sickness** or **injury**, **you** are unable to return to Canada with the **vehicle** used for **your trip**,

this insurance will reimburse up to \$1,000 the cost of a commercial agency to return the **vehicle** to its point of origin. Benefits will only be payable when the return of the **vehicle** is pre-approved and/or arranged by Allianz Global Assistance and the **vehicle** is returned to **your** normal place of residence or the nearest appropriate rental agency within 30 days of **your** return to Canada.

Original itemized receipts must be submitted to receive reimbursement.

## Exclusions

1. Benefits are not payable for costs incurred due to, contributed to by, or resulting from:

### Pre-existing Conditions

#### Pre-existing conditions applicable to **you**, if you are up to and including age 64:

- a) any **medical condition** or related condition, other than a **minor ailment**, that was not **stable** within the six months immediately before the **departure date** or any **trip** payment; or
- b) any **heart condition** if nitroglycerine in any form has been used for a **heart condition** within the six months immediately before the **departure date** or any **trip** payment; or
- c) any **lung/respiratory condition** if home oxygen or prednisone has been prescribed or used for a **lung/respiratory condition** within the six months immediately before the **departure date** or any **trip** payment.

#### Pre-existing conditions applicable to **you**, if you are age 65 up to and including 75:

- a) any **medical condition** or related condition, other than a **minor ailment**, that was not **stable** within one year immediately before the **departure date** or any **trip** payment; or
- b) any **heart condition** if nitroglycerine in any form has been used for a **heart condition** within one year immediately before the **departure date** or any **trip** payment; or
- c) any **lung/respiratory condition** if home oxygen or prednisone has been prescribed or used for a **lung/respiratory condition** within the one year immediately before the **departure date** or any **trip** payment.

2. Benefits are not payable for costs incurred due to, contributed to by, or resulting from:

- continued **treatment** or a **recurrence** or complication of the **sickness, injury or medical condition** for which **you** refused to be transferred or transported when declared medically fit to travel; or
- any **treatment**, investigation or hospitalization that is a continuation of, or subsequent to, any previous **emergency treatment** of a **sickness** or **injury** for the same diagnosis.

3. Benefits are not payable for costs incurred due to, contributed to by, or resulting from any of the following not approved in advance by Allianz Global Assistance:

- surgery except in extreme circumstances where performed on an **emergency** basis immediately following **hospital** admission; or
- MRI (Magnetic Resonance Imaging); or
- CAT (Computer Axial Tomography) scans; or
- sonograms; or
- ultrasounds; or
- biopsies; or
- emergency air transportation.

4. Benefits are not payable for any costs incurred due to, contributed to by, or resulting from any **treatment** not performed by or under the supervision of a legally licensed **physician** or dentist.

5. Benefits are not payable for costs incurred due to, contributed to by, or resulting from any of the following conditions or complications thereof occurring within nine weeks of the expected date of birth:

- pregnancy; or
- routine pre-natal care; or
- miscarriage; or
- childbirth.

6. Benefits are not payable for costs incurred due to, contributed to by, or resulting from **you** exposing yourself to risk from or participation in:

- riot or civil disorder; or
- committing or attempting to commit a criminal offence; or
- **act of war** (declared or undeclared); or
- rebellion or revolution; or
- **act of terrorism**; or
- service in the armed forces.

7. Benefits are not payable for costs or losses incurred due to, contributed to by, or resulting from:
  - nuclear reaction/radiation; or
  - **nuclear, chemical** or **biological** occurrence, however caused; or
  - radioactive, seepage, pollution or contamination.
8. Benefits are not payable for costs or losses incurred due to, contributed to by, or resulting from:
  - mental or nervous disorders that do not require immediate hospitalization; or
  - intentional self-**injury**; or
  - suicide or attempted suicide.
9. Benefits are not payable for costs incurred due to, contributed to by, or resulting from any **injury** or **accident** occurring while **you** are under the influence of illicit drugs or alcohol (where the concentration of alcohol in **your** blood exceeds 80 milligrams of alcohol in 100 millilitres of blood or when **you** illustrate a visible impairment due to alcohol or illicit drugs) and any chronic **sickness** or hospitalization related to, or exacerbated by, the habitual use of alcohol or illicit drugs.
10. Benefits are not payable for any costs incurred due to, contributed to by, or resulting from:
  - abuse of any medication or non-compliance with prescribed medical **treatment** or therapy; or
  - drugs or medications commonly available without a prescription; or
  - drugs or medications which are not legally registered and approved in Canada; or
  - prescription refills.
11. Benefits are not payable for costs incurred due to, contributed to by, or resulting from **injury** as a result of training for, competing or participating in:
  - any speed contests; or
  - **high-risk activities**; or
  - full contact bodily sports; or
  - **professional** sport activities.
12. Benefits are not payable for any costs incurred due to, contributed to by, or resulting from epidemic, pandemic or organ harvesting surgery.
13. Benefits are not payable for any costs incurred due to, contributed to by, or resulting from any **treatment** or surgery, where **you** can return to **your** province or territory of residence for such **treatment** without adversely affecting **your medical condition**.
14. Benefits are not payable for any costs incurred due to, contributed to by, or resulting from any **sickness, injury** or **medical condition** if **you** undertook **your trip** with the prior knowledge that **treatment**, palliative care or alternative therapy of any kind would be required.
15. Benefits are not payable for costs incurred due to, contributed to by, or resulting from a **trip** commenced or continued against the advice of **your physician**.
16. Benefits are not payable for costs incurred due to, contributed to by, or resulting from any **medical consultation** that is non-**emergency** or elective.
17. Benefits are not payable for any costs incurred due to, contributed to by, or resulting from any **sickness, injury** or **medical condition** for which future investigation or **treatment** (other than routine monitoring) is planned or recommended before **your departure date**.
18. Benefits are not payable for costs incurred due to the loss, damage or replacement of eyeglasses, contact lenses or hearing aids.
19. Benefits are not payable for costs incurred due to, contributed to by, or resulting from any **sickness** or **injury** when such **sickness** or **injury** occurs in a city, region, or country for which the Canadian government issued a written **travel advisory** prior to the **departure date** to avoid all travel, or to avoid non-essential travel, to that city, region, or country, and such **sickness** or **injury** is due to, contributed to by, or resulting from the reason for the **travel advisory**.

# Trip Cancellation and Trip Interruption and Trip Delay Coverage

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**IMPORTANT NOTE:** If **you** cancel **your trip** before the scheduled **departure date**, **you** must cancel the **trip** with the **travel supplier** within 48 hours of the **incident date**. Failure to do so may reduce the amount payable. The benefit amount is calculated based on the date of the event that caused the cancellation and not the date **you** cancelled the **trip**. **You** are not covered for circumstances which **you** were aware of at time of purchasing **your trip**.

## Trip Cancellation

### Coverage Eligibility

To be eligible for the Trip Cancellation Coverage benefits **you** must meet the following conditions:

- be a **Canadian resident** listed on a Rogers World Elite **Mastercard account**; and
- the full cost of **your trip** is charged to the **account** prior to departure.

### Coverage Period (Prior to Departure)

Coverage begins on the date of the first **trip** payment and before any cancellation penalties have been incurred.

Coverage ends at the time of the **trip's** scheduled departure or the date of cancellation, whichever is earliest.

### Benefits

If **your trip** is cancelled due to a Covered Reason listed below, the **insurer** agrees to reimburse for the prepaid portion of the **trip** which is non-refundable or non-transferable to another travel date, up to \$1,000 per insured person to an overall maximum of \$5,000 per **account**, per **trip**.

### Covered Reasons

#### Health

1. The unexpected death, **sickness, injury**, or quarantine of **you, your family member, your travel companion or your travel companion's family member**. **Sickness** and **injury** must require the care and attendance of a **physician** and the **physician** must recommend in writing cancellation of the **trip**.
2. The unexpected death, **sickness** or **injury** of a **caregiver** with whom **you** have contracted to care for a dependent in **your** absence. **Sickness** and **injury** must require the care and attendance of a **physician** and the **physician** must then recommend in writing cancellation of the **trip**.
3. Side effects and/or adverse reactions to vaccinations required for **your trip**.
4. Hospitalization or death of **your** host at the principal destination.
5. Complications of **your** or **your travel companion's** pregnancy within the first 28 weeks of pregnancy or complications following the normal full term birth of a child.

#### Work

6. Cancellation of a planned business meeting due to death or hospitalization of the person with whom **you** are to meet, or cancellation of a conference (for which **you** have paid registration fees) due to circumstances beyond **your** or **your** employer's control. Benefits are only payable to insured person(s) who are attending the meeting. Proof of registration will be required in the event of a claim.
7. A transfer by **your** employer that requires a change of **your** permanent residence.
8. **You** are called to service by the Canadian government with respect to reservists, military, police or fire personnel.
9. After having been with the same employer for at least one-consecutive year, **you** are terminated or laid-off through no fault of **your** own after the **coverage period** began.

#### Travel advisories and weather

10. A disaster renders **your**, or **your travel companion's**, principal residence uninhabitable or place of business unusable.
11. A **travel advisory** issued by the Canadian government for **your** destination after the **trip** was booked. An itinerary, hotel booking or other documentation showing **you** were travelling to the destination with the **travel advisory** is required.
12. Weather conditions delay **your** scheduled carrier for 30% or more of the total duration of the **trip** and **you** elect not to continue with the **trip**.

#### Other

13. Refusal of an **your** or **your travel companion's** visa application for the destination country provided that documentation shows that **you** were eligible to apply, that refusal is not due to late application, and that the application is not a subsequent attempt for a visa that had been previously refused.
14. **You** or **your travel companion** is selected for jury duty or subpoenaed to appear as witness in court whereby the date of the hearing conflicts with the **trip**.



15. **Default** whereby a contracted **travel supplier** stops all service completely as a result of bankruptcy or insolvency and the losses are not recoverable from any other source.
16. As a result of the delay of a connecting vehicle, **you** miss the scheduled departure as **ticketed** due to: inclement weather; mechanical failure or **accident** of a **common carrier**; a traffic **accident**; or an emergency police-directed road closure. Such delay due to traffic **accident** or emergency police-directed road closure must be substantiated by an official police report. All such misconnections are subject to the connecting **vehicle** arriving at the point of departure not less than two hours prior to scheduled departure time. In the event of a misconnection this insurance covers the entire **trip**, up to the coverage limits, as originally **ticketed** or the cost of a one-way economy fare, via the most cost-effective route, to catch up to the tour or to continue the **trip** as originally booked.

## Trip Interruption and Trip Delay

### Coverage Eligibility

To be eligible for the Trip Interruption & Delay Coverage benefits **you** must meet the following conditions:

- be a **Canadian resident** listed on a Rogers World Elite **Mastercard account**; and
- the full cost **your trip** is charged to the **account** prior to departure.

### Coverage Period (After Departure)

Coverage begins when **you** depart on **your trip**.

Coverage ends at the time **you** return to **your** original point of departure.

### Benefits

If **your trip** is interrupted due to a Covered Reason listed below, the **insurer** agrees to reimburse for the extra cost of a one-way economy airfare to the departure point or to the destination point and any prepaid, unused non-refundable, non-transferable **trip** expenses up to a maximum of \$1,000 per insured person, to a maximum of \$5,000 per **account**, per **trip**.

#### Covered Reasons

##### Health

1. The unexpected death, **sickness, injury** or quarantine of **you, your family member, your travel companion** or **your travel companion's family member**. **Sickness** and **injury** must require the care and attendance of a **physician** and the **physician** recommends in writing the interruption or delay of the **trip**.
2. The unexpected death, **sickness** or **injury** of a **caregiver** whom **you** have contracted to care for a dependent in **your** absence. **Sickness** and **injury** must require the care and attendance of a **physician** and the **physician** recommends in writing the interruption or delay of the **trip**.
3. Complications of **your** or **your travel companion's** pregnancy within the first 28 weeks of pregnancy or complications following the normal full term birth of a child.
4. Side effects and/or adverse reactions to vaccinations required for **your trip**.
5. Hospitalization or death of **your** host at **your** principal destination.

##### Work

6. Cancellation of a planned business meeting due to death or hospitalization of the person whom **you** are to meet, or cancellation of a conference (for which **you** have paid registration fees) due to circumstances beyond **your** or **your** employer's control. Benefits are only payable to insured person(s) who are attending the meeting. Proof of registration will be required in the event of a claim.
7. **You** are called to service by the Canadian government with respect to reservists, military, police or fire personnel.

##### Travel advisories and weather

8. A disaster renders **your** or **your travel companion's** principal residence uninhabitable or place of business unusable.
9. Weather conditions delay **your** connecting scheduled carrier for 30% or more of the total duration of the **trip** and **you** elect not to continue with the **trip**.
10. A **travel advisory** is issued by the Canadian government for **your** travel destination after departure on **your trip**. An itinerary, hotel booking or other documentation showing **you** were travelling to the destination with the **travel advisory** is required.

##### Other

11. **You** or **your travel companion** are selected for jury duty or subpoenaed to appear as witness in court whereby the date of the hearing conflicts with the **trip**.
12. Hijacking of **your common carrier** while en route to the scheduled destination point.

If for one of the reasons listed above **you** must interrupt a **trip** already commenced or if **you** must delay **your** return beyond the scheduled return date, expenses will be reimbursed up to an aggregate of \$1,000 per insured person for:

- the extra cost to change **your** return **ticket** to a one-way economy fare, via the most cost-effective route, back to **your** departure point; or

- if **your** existing **ticket** cannot be changed, the cost of a one-way economy fare transportation to **your** departure point; and
- the non-refundable portion of any unused prepaid travel arrangements if **your trip** is interrupted; and
- if **your travel companion's trip** is interrupted for any of the reasons stated under the Trip Interruption and Trip Delay benefits, the **insurer** agrees to reimburse for the cost incurred to adjust the prepaid accommodations to a single supplement.

If for one of the reasons listed above **you** must delay the scheduled return, reimbursement for the costs of **commercial accommodation** and meals up to \$150 a day, per insured person to a maximum of three days or up to the benefit maximum (whichever comes first) will be paid.

## Trip Cancellation, Trip Interruption & Delay Exclusions

1. Benefits are not payable for costs incurred due to, contributed to by, or resulting from:

### Pre-existing conditions

#### Pre-existing conditions applicable to **you** if **you** are up to and including age 64

- a) any **medical condition** or related condition, other than a **minor ailment**, that was not **stable** within the six months immediately before the **departure date** or any **trip** payment; or
- b) any **heart condition** if nitroglycerine in any form has been used for a **heart condition** within the six months immediately before the **departure date** or any **trip** payment; or
- c) any **lung/respiratory condition** if home oxygen or prednisone has been prescribed or used for a **lung/respiratory condition** within the six months immediately before the **departure date** or any **trip** payment.

#### Pre-existing conditions applicable to **you** if **you** are age 65 up to and including age 75

- a) any **medical condition** or related condition, other than a **minor ailment**, that was not **stable** within one year immediately before the **departure date** or any **trip** payment; or
- b) any **heart condition** if nitroglycerine in any form has been used for a **heart condition** within one year immediately before the **departure date** or any **trip** payment; or
- c) any **lung/respiratory condition** if home oxygen or prednisone has been prescribed or used for a **lung/respiratory condition** within the one year immediately before the **departure date**.

2. Benefits are not payable for costs incurred due to, contributed to by, or resulting from any of the following conditions or complications thereof occurring within nine weeks of the expected date of birth:
  - pregnancy; or
  - routine prenatal care; or
  - miscarriage; or
  - childbirth.
3. Benefits are not payable for costs incurred due to, contributed to by, or resulting from **you** exposing yourself to risk from or participation in:
  - **act of war** (declared or undeclared);
  - **act of terrorism**; or
  - hijacking; or
  - kidnapping; or
  - riot or civil disorder; or
  - rebellion or revolution; or
  - service in the armed forces; or
  - unlawful visit in any country; or
  - participation in the commission or attempted commission of any criminal offence.
4. Benefits are not payable for costs incurred due to, contributed by, or resulting from any:
  - nuclear reaction/radiation; or
  - **nuclear, chemical** or **biological** occurrence, however caused; or
  - radioactive, seepage, pollution or contamination.
5. Benefits are not payable for costs incurred due to, contributed to by, or resulting from a **trip** undertaken for the purpose of visiting or attending to an ailing person whose **medical condition** or ensuing death is the cause of cancellation or curtailment of the **trip** or delays **your** return home.
6. Benefits are not payable for costs incurred due to losses arising as a result of the **default** of a **travel supplier** if, at the time of booking and/or application, the **travel supplier** is bankrupt, insolvent, in receivership, or has sought protection from creditors under any bankruptcy or related legislation.

7. Benefits are not payable for costs incurred due to, contributed to by, or resulting from:
  - any event prior to **your departure date**, which might reasonably have been expected to necessitate **your** immediate return or delayed return; or
  - any event which, on the **departure date** or date of **trip** payment, could reasonably have been expected to prevent **you** from travelling as booked.
8. Benefits are not payable for costs incurred due to, contributed to by, or resulting from epidemic or pandemic.
9. Benefits are not payable for costs or losses due to, contributed to by, or resulting from:
  - mental or emotional disorders not requiring immediate hospitalization; or
  - suicide or attempted suicide; or
  - intentional self-inflicted injury.
10. Benefits are not payable for costs or losses due to, contributed to by, or resulting from:
  - chronic use of alcohol or drugs before or after the **departure date**; or
  - abuse of alcohol (where the concentration of alcohol in **your** blood exceeds 80 milligrams of alcohol in 100 millilitres of blood or when **you** illustrate a visible impairment due to alcohol or illicit drugs) during the **trip**; or
  - use of prohibited drugs or any other intoxicant during the **trip**; or
  - non-compliance with prescribed **treatment** or medical therapy before or after the **departure date**; or
  - misuse of medication before or after the **departure date**.
11. Benefits are not payable for costs incurred due to, contributed to by, or resulting from **injury** as a result of training for, competing or participating in:
  - motorized speed contests; or
  - **high-risk activities**; or
  - stunt activities; or
  - **professional** sport activities; or
  - a flight **accident**, except as a passenger on a commercially licensed airline.
12. Benefits are not payable for costs incurred due to failure to obtain a valid travel visa as a result of a late or previously denied application or non-presentation of travel documents (passport, visa, vaccination reports).
13. Benefits are not payable when **you** booked, commenced or continued a **trip** against the advice of a **physician**.
14. Benefits are not payable for costs incurred due to, contributed to by, or resulting from **your** booking travel or **your** travel a location for which the Canadian government has issued a **travel advisory** prior to **your** booking date or **departure date**.

## Conditions

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1. **Patient Transfers:** In consultation with **your** attending **physician**, the **insurer** reserves the right to transfer **you** to another **hospital** or to return **you** to **your** province or territory of residence. **Your** refusal to comply will release the **insurer** of any liability for expenses incurred after the proposed transfer date.
2. **False Claims:** If **you** make any claim knowing it to be false or fraudulent in any respect, coverage under this **certificate of insurance** shall cease and there shall be no payment of any claim made under this **certificate of insurance**.
3. **Subrogation:** In the event of a payment under this **certificate of insurance**, the **insurer** has the right to proceed in **your** name against third parties who may be responsible for giving rise to a claim under this insurance. The **insurer** has full rights of subrogation. **You** will execute and deliver such documents, and fully cooperate with the **insurer**, so as to allow the **insurer** to fully assert their right to subrogation. **You** will not do anything after the loss to prejudice such rights.
4. **Unauthorized Payments:** **You** must repay to the **insurer** amounts paid or authorized for payment on **your** behalf if later determined that the amount is not payable under this insurance.
5. **Co-operation:** **You** agree to cooperate fully with the **insurer**, and as a condition precedent to the payment of benefits, Allianz Global Assistance reserves the right to obtain all pertinent records or information from any **physician**, dentist, practitioner, **hospital**, clinic, **insurer**, individual or institution to assess the validity of a claim submitted by **you** or on **your** behalf. Failure to provide the requested documentation to substantiate a claim under this **certificate of insurance** will invalidate the claim.
6. **Physical Examination:** Allianz Global Assistance, on the **insurer's** behalf, has the right to investigate the circumstances of loss and to require a medical examination so often as it reasonably requires while a claim is pending; and in the event of death to require an autopsy at the cost of the **insurer**, if not prohibited by law.

## General Provisions

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1. **Coordination of Benefits:** The Emergency Medical Coverage benefit provided herein is supplemental in that it pays for covered expenses in excess of **your** government health insurance plan and any other insurance plan. The Trip Cancellation, Trip Interruption and Trip Delay benefits provided herein are supplemental in that they pay for covered expenses in excess of reimbursement from any **travel supplier** and any other insurance plan. Benefits payable under any other insurance plan under which **you** may have coverage will be coordinated in accordance with the current guidelines issued by the Canadian Life & Health Insurance Association. Payment under the insurance and any other plan shall not exceed 100% of the eligible charges incurred. This insurance also allows the **insurer** to receive in **your** name, and endorse and negotiate on **your** behalf, these eligible payments. When government health insurance plan and other insurance payments have been made, this releases government health insurance plan and the other insurers from any further liability in respect of that eligible claim.
2. **Currency:** All amounts stated in the **certificate of insurance** are in Canadian currency unless otherwise indicated. If **you** have paid a covered expense, **you** will be reimbursed in Canadian currency at the prevailing rate of exchange on the date the service was provided.
3. **Payment of Benefits:** Benefits payable under this **certificate of insurance** will be paid within 60 days of receipt of satisfactory proof of loss. Payment made in good faith will discharge the **insurer** to the extent of this claim.
4. **Legal Action:** Any action or proceeding to recover benefits hereunder cannot be taken prior to 60 days after satisfactory proof of loss has been furnished in accordance with the requirements of this **certificate of insurance**. Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the *Insurance Act* (for actions or proceedings governed by the laws of Alberta and British Columbia), *The Insurance Act* (for actions or proceedings governed by the laws of Manitoba), *Limitations Act, 2002* (for actions or proceedings governed by the laws of Ontario), *The Limitations Act* (for actions or proceedings governed by the laws of Saskatchewan) or other applicable legislation. For those actions or proceedings governed by the laws of Quebec, the prescriptive period is set out in the *Quebec Civil Code*.
5. **Waiver:** Notwithstanding anything to the contrary, no provision of this **certificate of insurance** shall be deemed to have been waived, either in whole or in part, unless the waiver is clearly stated in writing and signed by the **insurer**.
6. **Sanctions:** There is no coverage for any business or activity to the extent that would violate any applicable national economic or trade Sanction law or regulations.
7. **Governing Law:** The benefits, terms and conditions of this **certificate of insurance** shall be governed by the insurance laws of the province or territory in Canada where **you** normally reside.  
**Conflict with Laws:** Any provision of this **certificate of insurance**, which is in conflict with any federal, provincial or territorial law of **your** place of residence, is hereby amended to conform to the minimum requirements of that law.

## Notice and Proof of Claim

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### Notice of Claim

**You** or someone acting on **your** behalf, must give written notice of a claim to Allianz Global Assistance not later than 30 days from the date the claim arises. Allianz Global Assistance must be provided by **you** or someone acting on **your** behalf with satisfactory proof of loss no later than 90 days from the date the claim arises.

Satisfactory proof of loss means proof satisfactory to the **insurer** of:

- the **departure date**;
- the occurrence of the **injury** or the commencement of the **sickness**;
- the cause or nature of the **injury** or **sickness**;
- the loss, expense or service for which benefits are being claimed (original itemized receipts);
- the **primary cardholder's** age;
- the claimant's age; and
- the right of the claimant to receive payment.

### Failure to Give Notice and Proof

Failure to give notice of claim or furnish proof of claim within the time prescribed does not invalidate the claim if:

- a) the notice or proof is given or furnished as soon as reasonably possible. In no event later than one year from the date of the **accident** or the date a claim arises on account of **sickness** or disability, if it is shown that it was not reasonably possible to give notice or furnish proof within the time so prescribed; or
- b) in the case of death, if a declaration of presumption of death is necessary, the notice or proof is given or furnished no later than one year after the date a court makes the declaration.

Failure to provide the requested documentation to substantiate a claim under this **certificate of insurance** will invalidate the claim.

## Claim Filing Procedures

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Allianz Global Assistance must be immediately notified of any loss or occurrence. Upon receipt of such notice, Allianz Global Assistance will provide the appropriate claim forms. Please contact 1-866-856-7323 or (519) 742-1723 or visit [www.allianzassistanceclaims.ca](http://www.allianzassistanceclaims.ca) to obtain a claim form.

This insurance will not pay for any interest.

Any reimbursement issued under this certificate will be sent to the **primary cardholder**.

As a condition to the payment of benefits under this insurance, certain information will be required to file a claim. The **primary cardholder** shall be responsible for providing Allianz Global Assistance with the following:

- a) receipts from commercial organizations for all medical costs incurred and itemized accounts of all medical services which have been provided; and
- b) any payment made by any other insurance plan or contract, including a government health insurance plan; and supporting medical documentation, at the request of Allianz Global Assistance. If the required supporting documentation is not provided, the claim may not be paid.

Satisfactory proof of loss (proof satisfactory to the **insurer**) must be submitted and includes but is not limited to the following by coverage type:

### Out-of-Province/Country Emergency Medical Claims

- a fully completed claim form signed by the **primary cardholder** and patient (if applicable);
- documentation showing the **departure date**;
- the **incident date** of the **injury** or the date of commencement for the **sickness**;
- the cause or nature of the **injury** or **sickness**;
- the loss, expense or service for which benefits are being claimed (original itemized receipts);
- the **primary cardholder's** age;
- the claimant's age;
- the right of the claimant to receive payment; and
- any other documentation that may be required to process **your** claim.

### Trip Cancellation Claims

- a fully completed claim form signed by the **primary cardholder**;
- medical reasons: **physician** form completed by the **physician** stating the diagnosis that caused the cancellation;
- non-medical reasons: documentation supporting the cause of cancellation;
- the **incident date**;
- documentation showing the **departure date**;
- travel itinerary with passenger names, dates of travel and cost;
- receipts and proof of payment for any travel expenses including hotels;
- a copy of the **primary cardholder's** monthly billing statement reflecting the **trip** purchase(s); and
- any other documentation that may be required to process **your** claim.

### Trip Interruption / Delay Claims

- a fully completed claim form signed by the **primary cardholder**;
- medical reasons: **physician** form completed by the treating **physician** stating the diagnosis that caused the interruption or delay;
- non-medical reasons: documentation supporting the cause of interruption or delay;
- the **incident date**;
- documentation showing the **departure date** and return date;
- travel itineraries showing the passenger names, dates of travel and cost;
- receipts and proof of payment for any travel expenses including hotels;
- a copy of the **primary cardholder's** monthly billing statement reflecting the purchase(s); and
- any other documentation that may be required to process **your** claim.

## Privacy Information Notice

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See page 29.



## RENTAL CAR COLLISION/DAMAGE INSURANCE

### IMPORTANT NOTICE

Read this **certificate of insurance** carefully.

This **certificate of insurance** is designed to cover losses arising from sudden and unforeseeable circumstances only. It is important that **you** read and understand this **certificate of insurance** as coverage is subject to limitations and exclusions.

Coverage under this **certificate of insurance** is secondary to any other coverage **you** may have, but becomes primary in cases where there is no other applicable coverage.

The Rental Car Collision/Damage benefits described herein are underwritten by CUMIS General Insurance Company, a member of The Co-operators group of companies ("CUMIS" or "**insurer**") under master policy No. FC310040-B (the "Policy"), issued to Rogers Bank ("policyholder", "Rogers"). **You** and any claimant under this insurance may request a copy of the Policy subject to certain access restrictions. The insurance described in this **certificate of insurance** is for eligible World Elite **Mastercard primary cardholders** of Rogers whose **accounts** are in **good standing**. The last four digits of **your** Rogers World Elite **Mastercard** number is **your certificate of insurance** number. This insurance is administered by Allianz Global Assistance, which is a registered business name of AZGA Service Canada Inc.

**You** may contact the **insurer** at the following address:

CUMIS General Insurance Company  
P.O. Box 5065, 151 North Service Road  
Burlington, ON L7R 4C2  
1-800-263-9120

All benefits are subject, in every respect, to the terms of the Policy, which alone constitutes the agreement under which payments are made. Only Rogers may determine who is a **primary cardholder**, whether an **account** is in **good standing** and whether the insurance pursuant to this **certificate of insurance** has come into or is in force.

No person is eligible for coverage under more than one **certificate of insurance** providing insurance coverage similar to that provided hereunder. In the event that any person is recorded by the **insurer** under more than one such certificate, such person shall be deemed to be insured only under the certificate or policy which affords that person the greatest amount of insurance coverage. In no event will a corporation, partnership or business entity be eligible for this insurance coverage. This **certificate of insurance** supersedes any certificate or policy previously issued.

**IMPORTANT NOTICE: This certificate of insurance contains a clause which may limit the amount payable.**

**IMPORTANT NOTICE: This certificate of insurance contains a provision removing or restricting the right of an insured person to designate persons to whom or for whose benefit insurance money is to be payable.**

## Definitions

In this **certificate of insurance**, certain terms have defined meanings. Defined terms are in bold italics throughout this document.

**Account** means the **primary cardholder's** World Elite **Mastercard account**, which is in **good standing** with Rogers.

**Act of terrorism** means an act, including but not limited to hijacking, the use of force or violence and/or the threat thereof or commission or threat of a dangerous act, of any person or group(s) or government(s), committed for political, religious, ideological, social, economic or similar purposes including the intention to intimidate, coerce or overthrow a government (whether de facto or de jure) or to influence, affect or protest against any government and/or to put the civilian population, or any section of the civilian population, in fear.

**Act of war** means any loss or damage arising directly or indirectly from, occasioned by, happening through or in the consequence of: war; invasion; acts of foreign enemies; hostilities or warlike operations (whether war is declared or not) by any government or sovereign, using military personnel or other agents; civil war; rebellion; revolution; insurrection; civil commotion assuming the proportions of or amounting to an uprising; military or usurped power.

**Additional driver** means additional driver(s) whom **you** listed on the **rental car agreement** who is authorized to operate the **rental car**.

**Authorized user** means any person whom a Rogers World Elite **Mastercard** was issued at the authorization of the **primary cardholder**.

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

**Certificate of insurance** means a summary of the benefits provided to **you** under the master Policy issued to Rogers.

**Commercial rental car agency** means a rental car agency or car sharing program licensed under the laws of its jurisdiction.

**Coverage period** means the time insurance is in effect, as indicated in the various sections of this **certificate of insurance**.

**Default** means a complete cessation of operations as a result of a bankruptcy of a contracted **travel supplier**.

**Good standing** means being in full compliance with all of the provisions of the cardholder agreement (as determined at Rogers sole discretion) in force between the **primary cardholder** and Rogers.

**Incident date** means the date the damage, loss or theft occurred to the **rental car**.

**Injury** means bodily harm, which is directly caused by or resulting from an accident, being a sudden and unforeseen event, excluding bodily harm that results from deliberate or voluntary action, and independent of sickness and all other causes.

**Insurer** means CUMIS General Insurance Company, a member of The Co-operators group of companies.

**Mastercard** means a World Elite **Mastercard** issued by Rogers.

**Primary cardholder** means the cardholder who has signed the application for a **Mastercard**, as primary cardholder and for whom the **MasterCard account** is established by Rogers.

**Reasonable and customary** means the services customarily provided or the costs customarily incurred for covered losses, which are not in excess of the standard practice or fee in the geographical area where the services are provided or costs are incurred for comparable services or supplies.

**Rental car** means a land motor vehicle with four wheels, that is designed for use mainly on public roads and which an **insured person** has rented from a **commercial rental car agency** or car sharing program for personal use for the period of time.

**Rental car agreement** means the entire written contract that **you** receive when renting a car from a **commercial rental car agency** that describes in full all of the terms and conditions of the rental, as well as the responsibilities of all parties under the **rental car agreement**. With regards to the Collision Damage Waiver Benefit, a **rental car agreement** may also include a commercial car sharing program of which **you** are a member and the terms and conditions thereof.

**Sickness** means any illness or disease.

**Travel advisory** means a formal written notice issued by the Canadian government instructing travellers to avoid all travel or avoid non-essential travel to a country, region or city. This does not include travel information reports.

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

**You or your** means the **primary cardholder** or an **authorized user**.

## Certificate Effective and Termination Date

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Unless otherwise stated, this **certificate of insurance** is effective on the date Rogers receives and approves the **primary cardholder's** application for a World Elite **MasterCard** which includes the benefits described in this **certificate of insurance** as a feature of the **MasterCard**.

Unless otherwise stated, this **certificate of insurance** shall terminate on the earliest of:

- the date the **account** is determined to be ineligible by Rogers;
  - the date Rogers ceases to pay premium to the **insurer**; or
  - the date the master Policy is terminated.
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## Rental Car Collision/Damage Insurance

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**IMPORTANT NOTE:** This coverage does not provide any form of third party automobile, property damage or personal injury liability insurance. It is **your** responsibility to have adequate third party insurance, either through **your** own automobile insurance policy, or by accepting the insurance offered through the rental agency. **This coverage only covers loss or damage to the rental car as stipulated herein.**

### Coverage Eligibility

The benefits apply when **you** enter into a non-renewable **rental car agreement** for a **rental car**, where the total rental period does not exceed 31 days, subject to exclusions as outlined herein and meeting the following requirements:

- **you** must be a **Canadian resident** listed on a Rogers World Elite **Mastercard account**; and
- the **rental car** must be rented by **you**; and
- the **rental car** must be rented from a **commercial rental car agency**; and
- the **incident date** falls within the **coverage period**; and
- the **rental car** must be reserved with **your** Rogers World Elite **MasterCard** and the full cost including applicable taxes and fees charged to the **account**. An eligible **rental car** included in a prepaid travel package is covered if the full cost of the travel package was charged to the **account**; and
- no more than one **rental car** per **account** may be rented during a rental period; and
- collision damage waiver (“CDW”) benefits (or similar provisions, such as “loss damage waiver”) offered by the **commercial rental car agency** (when not prohibited by law) must be declined. If there is no space on the **rental car agreement** to decline coverage, **you** must write on the contract “I decline the CDW provided by the rental agency.” If such coverage is not offered through the **commercial rental car agency**, then **you** are not eligible for the Rental Car Collision/Damage Insurance benefits under this **certificate of insurance**; and
- the **rental car** must be operated by **you** or **additional driver(s)** listed on the **rental car agreement** and authorized to operate the **rental car** under the **rental car agreement** in accordance with its conditions when the loss occurs.

In some countries, (e.g. Australia, New Zealand, the Republic of Ireland, Costa Rica, etc.) the law requires the rental agencies to provide Rental Car Collision/Damage coverage in the price of the car rental. In addition, some car sharing plans will include Rental Car Collision/Damage coverage in their membership fee. In these locations, this insurance will provide coverage for any deductible that may apply, provided all the procedures outlined in this **certificate of insurance** have been followed and if there is an option to do so, **you** have signed the **commercial rental car agency’s** deductible waiver.

### Coverage Period

Coverage begins when **you** are listed as an authorized driver on the **rental car agreement** and take control of the **rental car**. The total rental period must not exceed 31 consecutive days. In order to break the consecutive day cycle, a full calendar day must exist between rental periods. If the rental period exceeds 31 consecutive days, coverage under this **certificate of insurance** will be void.

Coverage ends at the earliest of:

- the **commercial rental car agency** taking control of the **rental car**, whether it be at its place of business or elsewhere. **Rental car** keys left in a locked drop box does not constitute that the **commercial rental car agency** has taken control of the **rental car**;
- the end of the rental period; or
- at 00:01 a.m. on the 32nd day (including date of rental pick-up).

### Benefits

Subject to the terms and conditions, **you** or an **additional driver** are eligible for the following benefits, provided the **rental car** has a manufacturer’s suggested retail price (MSRP), in its model year, up of no more than \$65,000 for:

- damage to the **rental car**; and
- theft of the **rental car** or any of its respective parts or accessories; and
- **commercial rental car agency** charges for valid loss-of-use, while the **rental car** is being repaired; and
- **reasonable and customary** charges for towing the **rental car** to the nearest available facility.

The amount of the benefit payable will be equal to the cost of the repair (including loss-of-use) or replacement cost of the **rental car** which has been damaged or stolen, less any amount or portion of the loss assumed, waived or paid by the **commercial rental car agency**, its insurer, or a third party insurer.

### Rental Car Collision/Damage Exclusions

1. Benefits are not payable for any **rental car** with a manufacturer’s suggested retail price (MSRP) in its model year, in excess of \$65,000.

2. Benefits are not payable for additional rental fees charged by the **commercial rental car agency** for a replacement **rental car** if required by **you** for the remainder of the rental period in the original **rental car agreement**.
3. Benefits do not apply to **rental cars** when the rental period is more than 31 consecutive days, or the rental period is extended for more than 31 days by renewing or taking out a new **rental car agreement** with the same or another **commercial rental car agency** for the same **rental car** or other vehicles.
4. Benefits are not payable for the cost of any insurance offered by or purchased through the **commercial rental car agency**, even if such cost is mandatory or included in the price of the **rental car**.
5. Benefits do not apply to **rental cars** used to transport property or passengers for hire or compensation.
6. Benefits do not apply to **rental cars** which belong to the following categories:
  - vans (except as defined below);
  - trucks (including pick-ups) or any vehicle that can be spontaneously reconfigured into a pick-up truck;
  - campers or trailers;
  - vehicles towing or propelling trailers or any other object;
  - off-road vehicles (sport utility vehicles are covered, provided they are not used as off-road vehicles, are driven on publicly maintained roads and do not have an open cargo bed);
  - motorcycles, mopeds or motorbikes;
  - expensive or exotic vehicles, which include any vehicle with an MSRP, in its model year, greater than \$65,000;
  - antique vehicles, which include any vehicle over 20 years old or when its model has not been manufactured for 10 years or more;
  - recreational vehicles or vehicles not licensed for road use;
  - leased vehicles, with buyback guarantee;
  - limousines, however, standard production models of these vehicles that are not used as limousines are not excluded provided that it has an MSRP, in its model year, of \$65,000 or less;
  - Vans are not excluded provided that they:
    - are for private passenger use with seating for no more than eight occupants including the driver; and
    - do not exceed a “3/4 ton” rating; and
    - are not designed for recreational use (such as but not limited to camping, operation on roads not maintained by a federal, provincial, state or local authority and is designed and manufactured for off road use); and
    - are not to be used for hire by others.
7. The **insurer** will not pay any benefits if a claim is incurred due to, contributed to by, or resulting from:
  - Damage - wear and tear, gradual deterioration, mechanical or electrical breakdown or failure, insects or vermin, inherent flaw or damage, damage caused by the use of incorrect fuel type;
  - Loss of **Rental Car** Entry Device – loss, damage or misplacement of the **rental car** entry devices;
  - Diminished Value - the amount by which the resale value of a damaged (or damage repaired) **rental car** has been reduced for having a significant damage history;
  - Violation of **Rental Car Agreement** - operation of the **rental car** in violation of the terms of the **rental car agreement**;
  - Intentional Acts - damage due to intentional acts;
  - Off-road operation – damage caused to the **rental car** by use off of publicly maintained roads;
  - Speed Contests - damage caused to the **rental car** while driving at a rate of speed that is a marked departure from the lawful rate of speed;
  - Intoxication - any event which occurs while **you** are under the influence of illicit drugs or alcohol (where the concentration of alcohol in **your** blood exceeds 80 milligrams of alcohol in 100 millilitres of blood) or when **you** illustrate a visible impairment due to alcohol or illicit drugs;
  - Drugs or Poison - any voluntary taking of poison, toxic substances or non-toxic substances or drugs, sedatives or narcotics, whether illicit or prescribed, in such quantity that they become toxic, or voluntary inhalation of a gas;
  - Disease - bodily or mental infirmity, **sickness**, illness, or disease of any kind;
  - Medical Complications - medical or surgical **treatment** or complications arising therefrom, except when required as a direct result of an accidental bodily **injury**;
  - Suicide - suicide, attempted suicide or self-inflicted **injury**;
  - Illegal Trade - transporting contraband or illegal trade;
  - Criminal Offence - committing or attempting to commit a criminal offence or dishonest or fraudulent acts, or committing or provoking an assault;
  - War or Insurrection - declared or undeclared war, or any **act of war, act of terrorism**, riot or insurrection; or service in the armed forces of any country or international organization; or hostilities, rebellion, revolution or usurped power;
  - Liability - other than for loss of, or damage to, the **rental car**;
  - Expenses - assumed waived or paid by the **commercial car rental agency** or its insurers or payable under any other insurance;
  - Confiscation - confiscation by order of any government or public authority;
  - Seizure or Destruction - seizure or destruction under a quarantine or customs regulation;

- Financial Collapse - **default** of any transport, tour or accommodation provider;
- Epidemic or Pandemic - damage caused by an epidemic or pandemic during the **coverage period**;
- Sanctions – any business or activity that would violate any applicable national economic or trade sanction law or regulations; or
- **Travel Advisory** – any expenses incurred, if **you** choose to travel to a country, region or city that the Canadian government issued a formal **travel advisory** prior to the **coverage period** and damage is directly or indirectly related to the reason the **travel advisory** was issued.

## Conditions

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1. **Due Diligence:** **You** shall use diligence and do all things reasonable to avoid or diminish any loss of or damage to property protected by this insurance.
2. **False Claims:** If **you** make any claim knowing it to be false or fraudulent in any respect, this **certificate of insurance** shall cease and there shall be no payment of any claim made under this **certificate of insurance**.
3. **Subrogation:** In the event of a payment under this **certificate of insurance**, the **insurer** will have the right to proceed in **your** name against third parties who may be responsible for giving rise to a claim under this insurance. The **insurer** will have full rights of subrogation. **You** will execute and deliver such documents, and fully cooperate with us, so as to allow the **insurer** to fully assert its right to subrogation. **You** will not do anything after the loss to prejudice such rights.
4. **Co-operation:** **You** agree to cooperate fully with the **insurer**, and as a condition precedent to the payment of benefits, Allianz Global Assistance reserves the right to obtain all pertinent records or information from any **physician**, dentist, practitioner, **hospital**, clinic, **insurer**, individual or institution to assess the validity of a claim submitted by or on behalf of **you**. Failure to provide the requested documentation to substantiate a claim under this **certificate of insurance** will invalidate the claim.

## General Provisions

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1. **Currency:** All amounts stated in the **certificate of insurance** are in Canadian currency unless otherwise indicated.
2. **Payment of Benefits:** Benefits payable under this **certificate of insurance** will be paid within 60 days of receipt of satisfactory proof of loss. Payment made in good faith will discharge **the insurer** to the extent of this claim.
3. **Legal Action:** Any action or proceeding to recover benefits hereunder cannot be taken prior to 60 days after satisfactory proof of loss has been furnished in accordance with the requirements of this **certificate of insurance**. Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the *Insurance Act* (for actions or proceedings governed by the laws of Alberta and British Columbia), *The Insurance Act* (for actions or proceedings governed by the laws of Manitoba), the *Limitations Act, 2002* (for actions or proceedings governed by the laws of Ontario), *The Limitations Act* (for actions or proceedings governed by the laws of Saskatchewan) or other applicable legislation. For those actions or proceedings governed by the laws of Quebec, the prescriptive period is set out in the *Quebec Civil Code*.
4. **Waiver:** Notwithstanding anything to the contrary, no provision of the policy shall be deemed to have been waived, either in whole or in part, unless the waiver is clearly stated in writing and signed by the **insurer**.
5. **Governing Law:** The benefits, terms and conditions of the policy shall be governed by the insurance laws of the province or territory in Canada where **you** normally reside.
6. **Conflict with Laws:** Any provision of the policy, which is in conflict with any federal, provincial or territorial law of **your** place of residence, is hereby amended to conform to the minimum requirements of that law.

## Notice and Proof of Claim

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### Notice of Claim

**You** or someone acting on their behalf, must give written notice of a claim to Allianz Global Assistance not later than 30 days from the date the claim arises. Allianz Global Assistance must be provided by the **primary cardholder** or someone acting on their behalf with satisfactory proof of loss no later than 90 days from the date the claim arises.

Satisfactory proof of loss means proof satisfactory to the **insurer** of:

- Original receipts and other documents described in this **certificate of insurance** must be presented to file a valid claim.



- **You** must notify the Allianz Global Assistance immediately after learning of any loss or occurrence. Upon receipt of such notice, the Allianz Global Assistance will provide the appropriate claim forms.

### **Failure to Give Notice and Proof**

Failure to give notice of claim or furnish proof of loss within the time prescribed does not invalidate the claim if it is shown that it was not reasonably possible to give notice or furnish proof within the time so prescribed and if the notice or proof is given or furnished as soon as reasonably possible, and in no event later than one year from the date of the event for which benefits are being claimed. Failure to provide the requested documentation to substantiate **your** claim under this **certificate of insurance** will invalidate the claim.

### **Claim Filing Procedures**

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Allianz Global Assistance must be immediately notified of any loss or occurrence. Upon receipt of such notice, Allianz Global Assistance will provide the appropriate claim forms. Please contact 1-866-856-7323 or (519) 742-1723 or visit [www.allianzassistanceclaims.ca](http://www.allianzassistanceclaims.ca) to obtain a claim form.

This insurance will not pay for any interest.

Any reimbursement issued under this certificate will be sent to the **primary cardholder**.

As a condition to the payment of benefits under this insurance, certain information will be required to file a claim.

Satisfactory proof of loss (proof satisfactory to the **insurer**) must be submitted and includes but is not limited to the following:

- a fully completed claim form signed by the **primary cardholder**;
- front and back of the open car rental agreement;
- front and back of the closed car rental agreement;
- a copy of the **primary cardholder's** monthly billing statement reflecting the charge for the **rental car**;
- accident or incident report from the rental agency;
- police report when the resulting loss from damage or theft was over \$1000;
- itemized repair bill from the facility that repaired the vehicle;
- final billing letter from the rental agency including any loss of use charges;
- proof of payment for expenses paid out-of-pocket; and
- any other documentation that may be required to process **your** claim.

### **Privacy Information Notice**

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See page 29.

## PURCHASE PROTECTION AND EXTENDED WARRANTY COVERAGE

### IMPORTANT NOTICE

Read this **certificate of insurance** carefully.

This **certificate of insurance** is designed to cover losses arising from sudden and unforeseeable circumstances only. It is important that **you** read and understand this **certificate of insurance** as **your** coverage is subject to limitations and exclusions.

Coverage under this **certificate of insurance** is secondary to any insurance under which an eligible item is otherwise insured in whole or in part.

The Purchase Protection and Extended Warranty benefits described herein are underwritten by CUMIS General Insurance Company, a member of The Co-operators group of companies (“CUMIS”, “**Insurer**”) under master policy No. FC310040-C (the “Policy”), issued to Rogers Bank (the “Policyholder”, “Rogers”). **You** and any claimant under this insurance may request a copy of the Policy subject to certain access restrictions. The insurance described in this **certificate of insurance** is for eligible World Elite **Mastercard primary cardholders** of Rogers whose **accounts** are in **good standing**. The last four digits of **your** Rogers World Elite **Mastercard** number is **your certificate of insurance** number. This insurance is administered by Allianz Global Assistance, which is a registered business name of AZGA Service Canada Inc.

**You** may contact the **insurer** at the following address:

CUMIS General Insurance Company  
P.O. Box 5065, 151 North Service Road  
Burlington ON L7R 4C2  
1-800-263-9120

All benefits are subject, in every respect, to the terms of the Policy, which alone constitutes the agreement under which payments are made. Only Rogers may determine who is a **primary cardholder**, whether an **account** is in **good standing** and whether the insurance pursuant to this **certificate of insurance** has come into or is in force.

No person is eligible for coverage under more than one **certificate of insurance** providing insurance coverage similar to that provided hereunder. In the event that any person is recorded by the **insurer** under more than one such certificate, such person shall be deemed to be insured only under the certificate or policy which affords that person the greatest amount of insurance coverage. In no event will a corporation, partnership or business entity be eligible for this insurance coverage. This **certificate of insurance** supersedes any certificate or policy previously issued.

**IMPORTANT: This certificate of insurance contains a clause which may limit the amount payable.**

**IMPORTANT: This certificate of insurance contains a provision removing or restricting the right of an insured person to designate persons to whom or for whose benefit insurance money is to be payable.**

### Definitions

In this **certificate of insurance**, certain terms have defined meanings. Defined terms are in bold italics throughout this document.

**Account** means the **primary cardholder’s** World Elite **Mastercard account**, which is in **good standing** with Rogers.

**Authorized user** means any person whom a Rogers World Elite **Mastercard** was issued at the authorization of the **primary cardholder**.

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

**Certificate of insurance** means a summary of the benefits provided to **you** under the master Policy issued to Rogers.

**Coverage period** means the time insurance is in effect, as indicated in the various sections of this **certificate of insurance**.

**Dependent child(ren)** means an unmarried natural, adopted or stepchild of a **primary cardholder** dependent on the **primary cardholder** for maintenance and support who is:

- 20 years old and under; or
- 25 years old and under and a full-time student attending a recognized college or university; or
- 21 years old and over, permanently mentally or physically challenged and incapable of self-support and became so while eligible as a **dependent child**.

**Good standing** means being in full compliance with all of the provisions of the cardholder agreement (as determined at Rogers sole discretion) in force between the **primary cardholder** and Rogers.

**Incident date** means:

**Purchase Protection:** The date the damage or theft occurred.

**Extended Warranty:** The date the flaw or defect eligible under the **original manufacturer's warranty** occurred.

**Insurer** means CUMIS General Insurance Company, a member of the Co-operators group of companies.

**Mastercard** means a World Elite Mastercard issued by Rogers.

**Original manufacturer's warranty** means an express written warranty valid in Canada and issued by the original manufacturer of personal property, excluding any extended warranty offered by the manufacturer or any third party.

**Personal property** means tangible, moveable property charged to the **account** and intended for personal use.

**Primary cardholder** means the cardholder who has signed the application for a **Mastercard**, as **primary cardholder** and for whom the **Mastercard account** is established by Rogers.

**Purchase price** means the full cost of an item (including taxes) evidenced by a receipt and charged to the **account**.

**You** or **your** means the **primary cardholder** and/or an **authorized user**.

## Certificate Effective and Termination Date

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Unless otherwise stated, this **certificate of insurance** is effective on the date Rogers receives and approves the **primary cardholder's** application for a World Elite **Mastercard** which includes the benefits described in this **certificate of insurance** as a feature of their **Mastercard**.

Unless otherwise stated, this **certificate of insurance** shall terminate on the earliest of:

- the date the **account** is determined to be ineligible by Rogers;
  - the date Rogers ceases to pay premium to the **insurer**; or
  - the date the master Policy is terminated.
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## Purchase Protection

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### Coverage Eligibility

The following benefits apply when **you** are a **Canadian resident** listed as a cardholder on a Rogers World Elite **Mastercard account** and the full **purchase price** of the item has been charged to the **account**.

### Coverage Period

Most items are automatically covered for 90 days from the date of purchase and are subject to the terms and conditions of this **certificate of insurance**. There is no registration required.

### Benefits

The **primary cardholder** will be reimbursed the lesser of the cost of repair, replacement or the **purchase price** of any covered item when it is damaged or stolen and the **incident date** falls within the coverage period.

The overall lifetime maximum for Purchase Protection and Extended Warranty combined is \$60,000 per **account**.

### Purchase Protection Exclusions

In addition to the General Exclusions, these specific exclusions apply to Purchase Protection benefits.

- Benefits are not payable for the following items:
  - items left behind;
  - traveler's cheques, money (paper or coin), tickets, documents, bullion, banknotes, negotiable instruments or other numismatic property;
  - animals, fish, birds or living plants;
  - consumable and/or perishable goods;
  - mail order purchases or purchases made from an online site, until delivered and accepted by **you** in perfect condition;
  - golf balls;
  - used and/or pre-owned items, newly purchased items that have been rebuilt, refurbished or returned and re-sold;
  - automobiles, trailers, motorcycles, motorboats, or accessories attached to or mounted on such property;
  - motor scooters or motorized wheelchairs;
  - snow blowers, riding lawnmowers, golf carts or lawn tractors;
  - airplanes or drones;
  - hoverboards or any other motorized vehicles except for miniature electrically powered vehicles intended for children or any of their respective parts or accessories;
  - cell phones or smartphones; and
  - property items and/or equipment intended for commercial or business use. **Personal property** used for a business is not covered. Example: office furniture and equipment.
- Where a covered item is part of a pair or set, **you** will receive no more than the value of the particular part or parts stolen or damaged regardless of any special value that the item may have as part of an aggregate **purchase price** of such pair or set.

## Extended Warranty

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### Coverage Eligibility

The following benefits apply when **you** are a **Canadian resident** listed as a cardholder on a Rogers World Elite **Mastercard account** and the full **purchase price** of the item has been charged to the **account**. Regardless of where the item is purchased, the **original manufacturer's warranty** must be valid in Canada.

Coverage is available automatically, except when the **original manufacturer's warranty** exceeds five years, in which case **you** must register the item with the **insurer** by contacting Allianz Global Assistance within one year of the purchase date. Items purchased for commercial purposes are not eligible under this **certificate of insurance**.

### Coverage Period

Coverage is provided for the same duration as the **original manufacturer's warranty** and commences upon the expiry of the original manufacturer's warranty, and will end no later than a maximum of one year from this date.

*Example:* If the original manufacturer's warranty was three months, this insurance will provide an additional three months of coverage, commencing on the expiry of the original manufacturer's warranty. If the original

manufacturer's warranty is two years, this insurance will only provide one additional year of coverage.

## Benefits

The **primary cardholder** will be reimbursed the lesser of the cost to repair or replace any covered item according to the terms of the **original manufacturer's warranty** not exceeding the original **purchase price** when the **incident date** falls within the coverage period

*Example:* If the **original manufacturer's warranty** did not have the option for replacement instead of repair, this insurance will not provide the option of replacement.

The overall lifetime maximum for Purchase Protection and Extended Warranty is \$60,000 per **account**.

## Extended Warranty Exclusions

**In addition to the General Exclusions, these specific exclusions apply to Extended Warranty benefits.**

1. Benefits are not payable when the original manufacturer ceases to carry on business for any reason whatsoever.
2. Benefits are not payable for the following items:
  - used and/or pre-owned items, newly purchased items that have been rebuilt, refurbished or returned and re-sold;
  - automobiles, trailers, motorcycles, motorboats, or accessories attached to or mounted on such property;
  - motor scooters or motorized wheelchairs;
  - snow blowers, riding lawnmowers, golf carts or lawn tractors;
  - airplanes or drones;
  - cell phones or smartphones;
  - hoverboards or any other motorized vehicles except for miniature electrically powered vehicles intended for children or any of their respective parts or accessories; and
  - items with a lifetime warranty.
3. The Extended Warranty benefits apply only to any parts and/or labour costs resulting from mechanical breakdown, failure of a covered item, or any other obligations that were specifically covered under the terms of the **original manufacturer's warranty** that is valid in Canada. The **insurer** may elect to replace the item should it prove to be less expensive than the cost of repair.

## General Exclusions

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**In addition to the specific coverage exclusions, these General Exclusions apply to the Purchase Protection and Extended Warranty benefits.**

1. Claims resulting from the following are not covered:
  - fraud;
  - abuse;
  - hostilities of any kind (including but not limited to war, invasion, rebellion, insurrection);
  - confiscation by authorities, risks of contraband or illegal activities;
  - delay, loss of use, or consequential damages;
  - normal wear and tear, gradual deterioration;
  - loss or damage while undergoing any installation process or while being worked on, where damage results from such installation process or work;
  - insects or vermin;
  - flood, earthquake or radioactive contamination;
  - setting, expansion or contraction, bulging, buckling or cracking, temperature changes, freezing, heating, atmospheric changes, dampness or dryness, evaporation and/or leakage of contents, exposure to light, change in texture, finish or colour, rust or corrosion;
  - loss or damage to sports equipment and/or goods due to the use thereof;
  - mysterious disappearance, which means when the article of **personal property** in question cannot be located, and the circumstances of its disappearance cannot be explained and do not lend themselves to a reasonable inference that a theft occurred;
  - inherent product defects;
  - one of a kind items that cannot be replaced; and
  - products purchased with an unconditional guarantee.
2. Theft from a vehicle or residence when evidence of forcible entry is not apparent regardless of whether or not all entry points were locked.



3. Injury, property damages, consequential damages, punitive damages, exemplary damages, attorney's fees and other ancillary costs are not covered.
4. No other person or entity shall have any right, remedy or claim (legal or equitable) to these benefits. **You** shall not assign the benefits provided in this **certificate of insurance**.
5. Benefits are only available to the extent that the item in question is not otherwise protected or insured in whole or in part. Benefits are in excess of all other applicable valid insurance, indemnity protection or warranty available to **you** in respect of the item subject to the claim. The **insurer** will only be liable for the excess of the amount of the loss or damage over the amount covered under such other insurance, indemnity or protection and for the amount of any applicable deductible, only if all other insurance has been exhausted and subject to the exclusions, terms and limits of liability set out in this **certificate of insurance**. This coverage will not apply as contributing insurance and this "non-contribution" provision shall prevail despite any "non-contribution" provision in other insurance, indemnity or protection policies or contracts.

## Conditions

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1. **Due Diligence:** **You** shall use diligence and do all things reasonable to avoid or diminish any loss of or damage to property protected by this insurance. Reasonable efforts must have been made by **you** to protect **your personal property** (e.g. Store **your personal property** in the locked trunk of a vehicle, not inside where visible).
2. **False Claims:** If **you** make any claim knowing it to be false or fraudulent in any respect, this **certificate of insurance** shall cease and there shall be no payment of any claim made under this **certificate of insurance**.
3. **Subrogation:** In the event of a payment under this **certificate of insurance**, the **insurer** has the right to proceed in **your** name against third parties who may be responsible for giving rise to a claim under this insurance. The **insurer** has full rights of subrogation. **You** will execute and deliver such documents, and fully cooperate with us, so as to allow the **insurer** to fully assert the **insurer's** right to subrogation. **You** will not do anything after the loss to prejudice such rights.

## General Provisions

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1. **Currency:** All amounts stated in the **certificate of insurance** are in Canadian currency unless otherwise indicated.
2. **Payment of Benefits:** Benefits payable under this **certificate of insurance** will be paid within 60 days of receipt of satisfactory proof of loss. Payment made in good faith will discharge the **insurer** to the extent of this claim.
3. **Legal Action:** Any action or proceeding to recover benefits hereunder cannot be taken prior to 60 days after satisfactory proof of loss has been furnished in accordance with the requirements of this **certificate of insurance**. Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the *Insurance Act* (for actions or proceedings governed by the laws of Alberta and British Columbia), *The Insurance Act* (for actions or proceedings governed by the laws of Manitoba), *the Limitations Act, 2002* (for actions or proceedings governed by the laws of Ontario), *The Limitations Act* (for actions or proceedings governed by the laws of Saskatchewan) or other applicable legislation. For those actions or proceedings governed by the laws of Quebec, the prescriptive period is set out in the *Quebec Civil Code*.
4. **Waiver:** Notwithstanding anything to the contrary, no provision of the policy shall be deemed to have been waived, either in whole or in part, unless the waiver is clearly stated in writing and signed by the **insurer**.
5. **Governing Law:** The benefits, terms and conditions of the policy shall be governed by the insurance laws of the province or territory in Canada where **you** normally reside.
6. **Conflict with Laws:** Any provision of the policy, which is in conflict with any federal, provincial or territorial law of **your** place of residence, is hereby amended to conform to the minimum requirements of that law.

## Notice and Proof of Claim

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### Notice of Claim

The **primary cardholder** or someone acting on their behalf, must give written notice of a claim to Allianz Global Assistance not later than 30 days from the date the claim arises. Allianz Global Assistance must be provided by the **primary cardholder** or someone acting on their behalf with satisfactory proof of loss no later than 90 days from the date the claim arises.

Satisfactory proof of loss means proof satisfactory to the **insurer** of:

- Original receipts, manufacturer's warranties and other documents described in this **certificate of insurance** must be presented to file a valid claim.
- The **primary cardholder** must notify the Allianz Global Assistance immediately after learning of any loss or occurrence. Upon receipt of such notice, the Allianz Global Assistance will provide the appropriate claim forms.

- At the sole discretion of the Allianz Global Assistance, the **primary cardholder** may be required to send at their own expense, the damaged item on which a claim is based to an address designated by Allianz Global Assistance.

### Failure to Give Notice and Proof

Failure to give notice of claim or furnish proof of loss within the time prescribed does not invalidate the claim if it is shown that it was not reasonably possible to give notice or furnish proof within the time so prescribed and if the notice or proof is given or furnished as soon as reasonably possible, and in no event later than one year from the date of the event for which benefits are being claimed. Failure to provide the requested documentation to substantiate **your** claim under this **certificate of insurance** will invalidate the claim.

## Claim Filing Procedures

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Allianz Global Assistance must be immediately notified of any loss or occurrence. Upon receipt of such notice, Allianz Global Assistance will provide the appropriate claim forms. Please contact 1-866-856-7323 or (519) 742-1723 or visit [www.allianzassistanceclaims.ca](http://www.allianzassistanceclaims.ca) to obtain a claim form.

This insurance will not pay for any interest.

Any reimbursement issued under this certificate will be sent to the **primary cardholder**.

As a condition to the payment of benefits under this insurance, certain information will be required to file a claim.

Satisfactory proof of loss (proof satisfactory to the **insurer**) must be submitted and includes but is not limited to the following by coverage type:

### Purchase Protection

- a fully completed claim form signed by the **primary cardholder**;
- a copy of the original store receipt for the item purchased;
- a copy of the **primary cardholder's** monthly billing statement reflecting the full cost of the item;
- declaration page (including the deductible amount) from any other applicable insurance or a notarized statement that the **primary cardholder** has no other insurance;
- original police report or other report to local authorities, if applicable;
- estimate of repairs, if applicable;
- a copy of the original store receipt for the replacement item, if applicable;
- photo of the damaged item or the damaged item, if applicable; and
- any other documentation that may be required to process your claim.

### Extended Warranty

- a fully completed claim form signed by the **primary cardholder**;
- a copy of the original store receipt for the item purchased;
- a copy of the **primary cardholder's** monthly billing statement reflecting the full cost of the item;
- a copy of the original manufacturer's warranty, valid in Canada;
- a copy of the repair bill or estimate from the manufacturer's authorized repair facility;
- a copy of the original store receipt for the replacement item, if applicable;
- photo of the damaged item or the damaged item, if applicable; and
- any other documentation that may be required to process your claim.

# PRIVACY INFORMATION NOTICE

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## Protecting *your* personal information

Protecting **Your** personal information is a top priority. This Privacy Notice explains how and what types of personal data will be collected, why it is collected and to whom it is shared or disclosed. PLEASE READ THIS NOTICE CAREFULLY.

CUMIS General Insurance Company (the “insurer”) and the insurer’s insurance administrator, Allianz Global Assistance, and the insurer’s agents, representatives and reinsurers (for the purpose of this Privacy Notice collectively “We” “Us” and “Our”) require **Your** personal information.

## Personal Information We collect

We will collect **Your** personal information including but not limited to:

- Surname, First name
- Address
- Date of Birth
- Telephone numbers
- Email addresses
- Credit/debit card and bank account information
- Sensitive personal information such as: Medical information relating to **Your** health status, excluding genetic test results.

## How will we obtain and use *your* personal information?

This personal information is collected for the following insurance purposes when offering and providing insurance and related services:

- To identify and communicate with **You**
- To consider any application for insurance
- If approved, to issue a Policy or Certificate of Insurance
- To administer insurance and related benefits
- To evaluate insurance risk, manage and coordinate claims, re-price medical expenses and negotiate payment of claims expenses
- To adjudicate claims and to determine eligibility for insurance benefits
- To provide assistance services
- For fraud prevention and debt collection purposes
- As required or permitted by law

We reserve our right to collect personal information, necessary for insurance purposes, from the following individuals:

- Individuals who apply for insurance products
- Certificate holder and/or Policyholders
- Insureds and/or Claimants
- Family Members, spouses, or as a last resort friends or travelling companions of a Certificate or Policyholder, Insured or Claimant, in cases where the proper individual is unable, for medical or other reasons, to communicate directly with Us.

## Who will have access to *Your* personal information?

We disclose information for insurance purposes, to and with, third parties such as, but not necessarily limited to, health care practitioners and facilities in Canada and abroad, government and private health insurers and family members and friends/travelling companions of the Certificate holder or Policyholder, Insured or Claimant and agencies. We may also use and disclose information from Our existing files for insurance purposes. Our employees who require this information for the purposes of their duties will have access to this file. Upon **Your** request and authorization, We may also disclose this information to other persons. From time to time, and if permitted by applicable law, We may also collect, use or disclose personal information in order to offer additional or upgraded products and services (the “optional purposes”). In some instances We may additionally maintain or communicate or transfer information to health care and other service providers located outside of Canada. As a result, personal information may be accessible to regulatory authorities in accordance with the law of these other jurisdictions.

## What are *Your* rights in respect of *Your* personal data?

When permitted by applicable law and regulations **You** have the right to:

- Access **Your** personal data held about **You**

- Withdraw consent at any time where **Your** personal data is processed
- Update or correct **Your** personal information so that it is always accurate
- Delete **Your** personal information from our records, if it is no longer needed for the purposes indicated above
- File a complaint with Us and/or relevant data protection authority

**You** may exercise these rights by contacting the Privacy Officer at [privacy@allianz-assistance.ca](mailto:privacy@allianz-assistance.ca).

### **How long do We keep **Your** personal data?**

We will retain the personal information We collect for a specified period of time and in a storage method appropriate with legal and Our internal corporate requirements. Personal information will be securely destroyed following the expiration of the appropriate retention period. Individuals have a right to request to access or correct personal information We have on file by contacting the Privacy Officer at [privacy@allianz-assistance.ca](mailto:privacy@allianz-assistance.ca) or by writing to:

Privacy Officer  
Allianz Global Assistance  
4273 King Street East  
Kitchener, ON  
N2P 2E9

### **How can **You** contact Us?**

For information about how to obtain access to written information about Our policies and procedures with respect to service providers outside of Canada, please contact the Privacy Officer at [privacy@allianz-assistance.ca](mailto:privacy@allianz-assistance.ca).

For a complete copy of Our Privacy Policy please visit [www.allianz-assistance.ca](http://www.allianz-assistance.ca).

### **CONTACT INFORMATION**

ALLIANZ GLOBAL ASSISTANCE

Please contact Allianz Global Assistance with any questions or claims.

Toll-free: **1-866-856-7323** (In Canada & U.S.)

### **How often do We update this privacy notice?**

We regularly review this Privacy Notice. We will ensure the most recent version is available on Our website, [www.allianz-assistance.ca](http://www.allianz-assistance.ca).

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