

Emergency Medical Insurance

Product Summary
SINGLE TRIP PLAN, CANADA PLAN,
ANNUAL PLAN AND TOP-UP



Insurance

September 1, 2026

How to Contact Us

Insurer:	Echelon Insurance Registered with the Autorité des marchés financiers under client number 2000702152 Attn: Orion Travel Insurance 60 Commerce Valley Drive East Thornhill, Ontario L3T 7P9 Phone: 905-747-4900 Toll free: 1-855-674-6684 Email: orioninfo@orionti.ca Website: www.oriontravelinsurance.ca
Distributor:	Agence de voyages de l'automobile et Touring club du Québec inc. 444 Bouvier Street, Quebec (Quebec) G2J 1E3 Phone: 1-800-686-9243 Email: assurances@caaquebec.com Website: www.caaquebec.com/travel-insurance
Autorité des marchés financiers :	The Autorité des marchés financiers can provide <i>you</i> with information about <i>your insurer's</i> or <i>your insurance distributor's</i> obligations. Website: www.lautorite.qc.ca

Things to Consider

This is a summary. For complete details, please refer to the insurance *policy*. *You* can get a copy from the CAA-Quebec Travel Centre where *you* purchased this insurance, as well as on the website at <https://www.caaquebec.com/en/for-your-insurance/documentation/>.

If *you* have any questions, *you* may contact CAA-Quebec at 1-833-861-0112 (in Canada & United States) or +1-514-861-0112 (call collect elsewhere in the world).

NOTE: This product only covers emergency medical care. If *you* want protection for trip cancellation or trip interruption, consider buying other CAA-Quebec Travel Insurance products.

Benefit amounts stated on this summary are in Canadian Dollars, and deductibles are in U.S. Dollars.

Key Definitions

Government health insurance plan (GHIP) means a Canadian provincial or territorial *government health insurance plan*.

Insurer means Echelon Insurance.

Medical treatment means any reasonable procedure which is medical, therapeutic or diagnostic in nature, which is medically necessary and which is prescribed by a physician. *Medical treatment* includes hospitalization, basic investigative testing, surgery, prescription medication (including prescribed as needed) or other treatment directly related to the sickness, injury or symptom.

Minor ailment means any illness, injury or condition related to a medical condition which ends at least 30 days prior to the effective date of coverage and does not require:

- the use of medication for a period greater than 15 days; or

Things to Consider

- b. more than one (1) follow-up visit to a physician; or
- c. a hospitalization; or
- d. a surgical intervention; or
- e. consultation with a medical specialist.

A chronic medical condition or the complication of a chronic medical condition is not a *minor ailment*.

Policy means the insurance policy, any riders or amendments to this document, the application, any medical questionnaire(s) (if applicable), and *your* Declaration Page, all of which form the entire contract and must be read as a whole.

Pre-existing medical condition means any medical condition(s) that exists prior to the date of departure of *your trip* or effective date of *your policy* for which *you* have received a diagnosis and/or had *medical treatment* and/or been hospitalized and/or been prescribed or taken medication and/or had a change in medication and/or had a change in *medical treatment* and/or experienced new or more frequent symptoms and/or are requiring investigation (other than a routine check-up).

Trip means the period of time between *your* date of departure and *your* date of return. For travel within *your* province or territory of residence, a trip qualifies only if it includes at least one overnight stay with a travel supplier.

We, us or **our** means the *Insurer*.

You and **your** means the *Insured*.

WARNING: The insurance *policy* will be issued on the basis of information in or provided in connection with *your* application, including answers to the medical questionnaire, if any. *Your* answers must be complete and accurate. If it is found that *you* have not answered any question asked in the medical questionnaire truthfully and accurately, *you* will be responsible for the first \$5,000 of any claim, in addition to any applicable deductible. *You* will also be required to pay the additional premium necessary based on true and accurate answers to the medical questionnaire, otherwise no future coverage will be provided under this *contract*.

We will not pay a claim if *you*, any person insured under this *policy* or anyone acting on *your* behalf, attempt to deceive *us* or makes a fraudulent, false or exaggerated statement or claim.

Who is Eligible to Purchase This Insurance

To be eligible *you* must:

- be a Canadian resident covered by a *government health insurance plan (GHIP)* for the full duration of the *trip*.

***You* are not eligible for coverage if:**

- *you* have been diagnosed with a terminal illness for which a physician has estimated that *you* have less than 6 months to live;
- *you* have been advised by a physician against travel at this time;
- *you* require kidney dialysis;
- *you* have ever received a bone marrow or organ transplant (except cornea or skin transplant);

Who is Eligible to Purchase This Insurance

- *you* have been diagnosed with and/or received *medical treatment* for metastatic cancer in the last 5 years; or
- *you* have been prescribed or taken home oxygen for a lung condition in the last 12 months.

IMPORTANT: A medical questionnaire, if required, must be completed within **6 months** before the date of departure or effective date so *we* can determine eligibility.

A new medical questionnaire may be required for an extension or Top-Up to determine eligibility and premium.

What Does the Insurance Cover

This insurance provides coverage for a medical emergency while *you* are travelling. Benefits covers **up to \$10 million*** for reasonable charges incurred following an emergency resulting from a sudden accident, sickness or injury which occurs on a *trip*. It includes:

- hospitalization, medical, dental and paramedical expenses;
- transportation expenses, such as ambulances, taxis or repatriation costs;
- transportation costs for a family member or a close friend to visit *you*;
- return of vehicle, baggage and pet;
- child care;
- reimbursement of the cost of returning *your* remains or burial/cremation costs;
- subsistence costs, medical follow-up and domestic services in Canada.

*Maximum of **\$25,000** if at time of claim:

- your GHIP* coverage has lapsed; and/or
- you* did not have *GHIP* authorization to cover *your trip* days exceeding the days *your government health insurance plan* covers outside *your* province or territory of residence.

This insurance can be purchased as:

- **Single Trip Plan:** covers a single *trip* taken place in Canada or abroad.
- **Canada Plan:** covers a single *trip* taken entirely within Canada.
- **Annual Plan:** the insurance provides coverage for several *trips* outside or within *your* province or territory of residence for a maximum of 4, 8, 15, 30, 60 or 90 days, depending on the option chosen.
- **Top-Up:** to extend *your trip* days beyond the duration covered under an Annual Plan, Annual Vacation Package Plan or another insurer's contract.
- **Immediate family coverage** is available for 3 or more immediate family members. All immediate family members must be insured under one *policy* and must be listed on *your* Declaration Page with the appropriate paid premium for this coverage. Refer to the definition of immediate family in the *policy*.

Optional coverages under the Emergency Medical Care benefit:

- **Pre-Existing Medical Condition Coverage:** this coverage is payable as part of a covered medical emergency up to a maximum of \$300,000 per insured, per *trip*, for eligible hospital and medical related expenses for sickness or injury incurred as a result of a **pre-existing medical condition** that was stable within seven (7) days prior to the date of departure of *your trip*.

What Does the Insurance Cover

- **Adventurous Air Activities Rider:** where *you* will be **reimbursed** for expenses incurred as a result of an injury or sickness while participating in activities which include ballooning, parasailing and helicopter excursions.
- **Professional Sports and Participation in Speed Contests Coverage:** *you* will be **reimbursed** for expenses incurred as a result of an injury or sickness while participating in training, practicing or competing in a professional sport or motorized speed contest.

OTHER COVERAGE DETAILS

Maximum Trip Duration	• Single Trip Plan and Canada Plan – 365 days with <i>GHIP</i> approval* • Annual Plan – from 4 to 90 days per <i>trip</i>, based on the maximum days selected as shown on <i>your</i> Declaration Page, up to 365 days including extensions with <i>GHIP</i> approval*
Medical Questionnaire	• Not required if aged 59 or less • 60 years old and over – requested for all trips • Might be required for Top-Ups and extensions • Medical Questionnaire is not required for the Canada Plan.
Deductible Options	• \$0, \$300, \$500, \$1,000, \$3,000, \$5,000, \$10,000, \$25,000 or \$50,000 • Applies per insured and per <i>trip</i>

* Maximum *trip* days may not exceed the period for which *your GHIP* covers *you* or 365 days.

Coverage Starts	The latest of: • <i>your</i> date of departure; or • the date <i>you</i> leave <i>your</i> departure point as defined in the <i>policy</i>.
Coverage Ends	The earliest of: • <i>your</i> date of return; or • the date <i>you</i> return to <i>your</i> departure point as defined in the <i>policy</i>.

- Coverage will be extended automatically without additional premium if *your* return is delayed beyond the date of return as shown on *your* Declaration Page under certain conditions, for certain situations beyond *your* reasonable control. *You* must notify CAA Assistance of the delay prior to the date of return.
- Coverage can be voluntarily extended provided that *you* apply prior to the date of return as shown on *your* Declaration Page, *we* approve the extension, a supplemental premium is paid and that all required conditions are met.

Exclusions, Limitations and Conditions

The following are some of the main exclusions of the policy. Please consult the contract for a full list of all the exclusions and limitations which could impact *your* coverage.

General Exclusions

There will be no coverage **and no payment will be made** for any claim resulting from:

1. Being a driver, operator, co-driver, crew member, or passenger on a commercial vehicle used to deliver goods or carry a load. This exclusion does not apply if the commercial vehicle is used during your trip solely for pleasure purposes and not for delivering goods or carrying a load.
2. Losses arising from a supplier's failure to perform its contractual obligations or deliver its services, unless otherwise stated in this *policy*.
3. Any medical condition resulting from *you* not following a treatment as prescribed to *you*, including prescribed medication.
4. Suicide, attempted suicide, or self-inflicted injury, regardless of your mental state.
5. *Your* negligent behaviour, or *your* involvement in the commission or attempted commission of a criminal or illegal act.
6. Expenses for which no charge would normally be made in the absence of insurance.
7. Acts of war whether declared or undeclared.
8. Situations where an official travel advisory was issued by the Canadian government stating to "Avoid non-essential travel" or "Avoid all travel" regarding the country, region or city of your destination, before the effective date of coverage.

This exclusion does not apply to claims related to an emergency or a medical condition unrelated to the travel advisory.

9. Acts of terrorism involving biological, chemical, nuclear, or radioactive means, regardless of any other contributing cause.
10. Professional or other services rendered by a family member.

Some examples of Emergency Medical Insurance Exclusions:

There will be no coverage **and no payment will be made** for any claim resulting from:

1. *You* have any sickness, injury or medical condition that has not been stable for at least 3 months prior to *your* date of departure (or 6 months if *you* are 70 years of age or older).

Note: If *you* are under 60 years of age, this exclusion applies if *you* have a lung condition in the 3 months prior to the date of departure and required treatment with Prednisone.

This exclusion does not apply for *trips* taken within Canada.

2. *Medical treatment* is non-emergent, experimental or elective;
3. Child born during the *trip*;
4. Sickness or medical condition related to a birth defect for an insured child(ren) under two years of age;
5. *You* are pregnant and have any complications from pregnancy or delivery;
6. *You* participate in certain sports and high risk leisure activities;
7. *You* abuse alcohol, drugs or intoxicants;
8. *You* are travelling specifically to obtain *medical treatment*;

Exclusions, Limitations and Conditions

9. *You* are travelling when *medical treatment* has been planned or could be expected during the *trip*;
10. *You* are a patient in a chronic care or convalescent home, nursing home or rehabilitation centre;
11. *You* receive *medical treatment* outside *your* province of permanent residence which *you* could have obtained in *your* province except for necessary *medical treatment* due to an accident or sudden illness;
12. *You* purchased certain products not approved in Canada, even when prescribed, including dietary or food supplements, over-the-counter medication, and processed food for infants or medication;
13. *You* had certain surgery and diagnostic testing, including cardiac catheterization, angioplasty and/or cardiovascular surgery (except as a medical emergency) or magnetic resonance imaging (MRIs), computerized axial tomography (CAT) scans, sonograms, ultrasounds or biopsies without pre-approval from CAA Assistance;
14. Services are for continuing / recurrent care or *medical treatment* after the initial medical emergency has ended;
15. Medical services rendered in *your* province of residence is related to a change in *your* health while on a temporary return in *your* Canadian province or territory of residence;
16. For a Top-Up insurance, any accident, sickness or injury that occurred while *you* were covered by another insurer if, on the effective date of coverage of the CAA-Quebec Top-up Insurance *contract you*:
 - i. are hospitalized due to this accident, sickness or injury; or
 - ii. refused to be repatriated; or
 - iii. should have been hospitalized or repatriated to *your* province of residence.
17. *You* are travelling against the medical advice of a physician.

Please refer to the *policy* for the complete list of exclusions.

OTHER IMPORTANT CONDITIONS

1. Application for an extension or Top-Up must be made prior to the expiry date of *your contract*.
2. *You* cannot receive more than 100% of *your* actual expenses by claiming from *us*. If *we* pay *your* health care provider or reimburse *you* for covered expenses, *we* will seek reimbursement from *your government health insurance plan* and from any other medical reimbursement plan under which *you* may have coverage.
3. If *you* undergo tests as part of a medical investigation, obtain treatment or surgery (including invasive testing) that is not pre-approved by CAA Assistance, *your* claim will not be paid except in extreme circumstances where it would delay surgery required to resolve a life-threatening crisis.
4. If *we* determine that *you* should transfer to another facility or return to *your* home province and *you* refuse, no further *medical treatment* will be paid.
5. *We* are not responsible for the availability, quality or results of *medical treatments* or transportation.
6. If CAA Assistance determines that *your* emergency has ended, *we* will not cover the continued treatment, recurrence or complication of a medical condition after the emergency.

For complete information, please refer to the *policy*.

How to File a Claim

STEP 1: NOTIFYING CAA ASSISTANCE OF A CLAIM

You must contact CAA Assistance at 1-866-580-2999 in Canada & mainland United States, or from elsewhere at 1-519-251-5179 prior to obtaining emergency *medical treatment* so that *we* may:

- confirm coverage; and
- provide pre-approval of *medical treatment*.

CAA Assistance will pay hospitals, physicians and other medical providers directly, whenever possible. Where direct payment cannot be arranged, *we* will reimburse eligible expenses.

Some benefits are reimbursable on *your* return. If applicable, consult the policy under the Emergency Medical Insurance section.

WARNING: *You* must contact CAA Assistance before obtaining emergency *medical treatment*. If it is medically impossible for *you* to contact them prior to obtaining the *medical treatment*, contact them as soon as possible or have someone contact them on *your* behalf. **If *you* fail to contact CAA Assistance before *you* obtain *medical treatment*, your maximum benefit will be reduced to 80% of expenses up to a maximum of \$25,000.**

Also keep in mind that certain treatments, such as magnetic resonance imaging (MRI), CAT scans, sonograms, ultrasounds, cardiac catheterization, angioplasties, and cardiovascular surgery will not be covered unless pre-approved by CAA Assistance.

STEP 2: SUBMITTING *YOUR* CLAIM

Submit, **within 90 days**, a claim form and all required documents (invoices, receipts and other back-up documentation) described in the applicable insurance coverage(s) in the policy (see section – How to File a Claim):

Online Claim Submission

To avoid mail delays, submit *your* claim online at **orion.xodus.ca** and follow the instructions.

Mail Claim Submission

You may also submit *your* claim by mail, sending *your* claim form completed and all requested documents at:

CAA Quebec Travel Insurance
Xodus Travel Services Inc.
PO Box 36, Station A
WINDSOR, ON
N9A 6J5

Phone numbers to reach us:

From Canada & Mainland US: **1-866-580-2999**
From Elsewhere: **1-519-251-5179**

STEP 3: REIMBURSEMENT

All money payable under this *contract* shall be paid by *us* within **60 days** after *we* have received proof of claim and all required documentation.

The Cost of This Insurance Product

Premiums for the Emergency Medical Insurance are personalized and are determined based on:

- *your* age upon purchase;
- type of plan (single or annual);

The Cost of This Insurance Product

- the exact number of days of *your trip*;
- *pre-existing medical conditions*, if applicable;
- chosen deductible;
- the applicable rebates, if any.

Premiums are subject to change before purchase without notice.

Your Right to Cancel

You may cancel a *contract* within **10 days of purchase** if *you* have not departed on *your trip* and there is no claim in progress.

By calling CAA-Quebec at 1-833-861-0112 (in Canada & United States) or +1-514-861-0112 (call collect elsewhere in the world), in person at any CAA-Quebec Travel centre (a list of locations is available online at <https://www.caaquebec.com/en/contact-us/> under Find a Service Outlet click on "Travel Centres") or by mailing the Notice of Recession found in Schedule I.

Refunds

Premium refunds may be available provided no claim has been paid, incurred or reported under this *contract*.

Emergency Medical Insurance (Single Trip Plan, Canada Plan or Top-up)

Full refunds:

- Eligible if requested and approved prior to the original departure or effective date of *trip*.

Partial refund of unused days if:

- *You* return to *your* Canadian province or territory of residence prior to *your* scheduled date of return and *you* provide proof of *your* departure from *your* destination (airline ticket/boarding pass or customs/immigration entry stamp) and return to *your* Canadian province or territory of residence.

Annual plan

- Non-refundable after the effective date.

Filing a Complaint

Our Customer Complaints office is in place to ensure the decision is fair, equitable and developed within company standards.

The *Insurer* is also a member of the General Insurance Ombudservice, an independent dispute resolution service. Customers are encouraged to first attempt to resolve their complaint directly with the *Insurer* before accessing the General Insurance Ombudservice.

You may contact *our* Customer Complaints Office by phone, fax, email or by regular post:

Attention: Customer Complaints Office

Orion Travel Insurance

PO Box 8075 STN Industrial Park

Markham, Ontario L3R 0K4

Phone: 905-747-4900

Toll Free: 1-855-674-6684

Email: orioninfo@OrionTi.ca

More information on the Dispute Resolution process is available at www.oriontravelinsurance.ca.

SCHEDULE I

Notice of Cancellation of an Insurance Contract

NOTICE GIVEN BY DISTRIBUTOR

Article 440 of the Act respecting the distribution of financial products and services.

THE ACT RESPECTING THE DISTRIBUTION OF FINANCIAL PRODUCTS AND SERVICES GIVES YOU IMPORTANT RIGHTS

- The Act enables you to cancel the insurance contract you just signed at the same time as another contract, **without penalties, within 10 days of its signature**. To do so, you must send the insurer a notice by registered mail within this delay. You may use the enclosed model to that effect.
- Despite the cancellation of the insurance contract, the first contract entered into retains all its effects. Be careful, it is possible that you may incur the loss of favourable conditions extended upon signing this contract; please enquire from your distributor or consult your contract.
- After the expiry of the **10-day** delay, you have the option of cancelling your insurance at any time, but penalties may apply.

For further information, please contact the Autorité des marchés financiers at: (418) 525-0337 or 1-877-525-0337.

- Section 441 does not apply where the principal contract is for a period of 10 days or less and where it became effective at the time of the request for cancellation of the Trip Cancellation & Interruption Insurance.
- Section 441 does not apply where the Trip Cancellation is purchased within 11 days prior to the Trip.

NOTICE OF RECISSION OF AN INSURANCE CONTRACT

To: Echelon Insurance
Attn: Orion Travel Insurance
PO Box 8075 STN Industrial Park
Markham, Ontario L3R 0K4

Date: _____
(Date of sending of this Notice)

Under Article 441 of the Act respecting the distribution of financial products and services, I hereby cancel insurance contract no. _____
(Number of contract, if indicated)

entered into on: _____
(Date of signature of contract)

at: _____
(Place of signature of contract)

(Name of client)

(Signature of client)

The distributor must fill in this section beforehand.

This notice must be sent by registered mail.

The purpose of this fact sheet is to inform you of your rights.
It does not relieve the insurer or the distributor of their obligations to you.

LET'S TALK INSURANCE!

Name of distributor: Agence de voyages de l'automobile et Touring club du Québec inc

Name of insurer: Echelon Insurance

Name of insurance product: Emergency Medical Insurance – Single Trip Plan, Canada Plan, Annual Plan & Top-up.



IT'S YOUR CHOICE

You are never required to purchase insurance:

- that is offered by your distributor;
- from a person who is assigned to you; or
- to obtain a better interest rate or any other benefit.

Even if you are required to be insured, **you do not have to** purchase the insurance that is being offered. **You can choose** your insurance product and your insurer.



HOW TO CHOOSE

To choose the insurance product that's right for you, we recommend that you read the summary that describes the insurance product and that must be provided to you.



DISTRIBUTOR REMUNERATION

A portion of the amount you pay for the insurance will be paid to the distributor as remuneration.

The distributor **must** tell you when the remuneration exceeds 30% of that amount.



RIGHT TO CANCEL

The Act allows you to rescind an insurance contract, **at no cost**, within 10 days after the purchase of your insurance. However, the insurer may grant you a longer period of time. After that time, fees may apply if you cancel the insurance. **Ask** your distributor about the period of time granted to cancel it **at no cost**.

If the cost of the insurance is added to the financing amount and you cancel the insurance, your monthly financing payments might not change. Instead, the refund could be used **to shorten the financing period**. **Ask your distributor for details**.

The *Autorité des marchés financiers* can provide you with unbiased, objective information.

Visit www.lautorite.qc.ca or call the AMF at 1-877-525-0337.

Reserved for use by the insurer:

This fact sheet cannot be modified



Questions about your contract?

1-833-861-0112 – Canada & United States

+1-514-861-0112 – Elsewhere in the world, call collect

caaquebec.com

CAA-Quebec Travel Insurance, an Orion Travel Insurance product, is underwritten by Echelon Insurance. Terms and conditions apply.

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