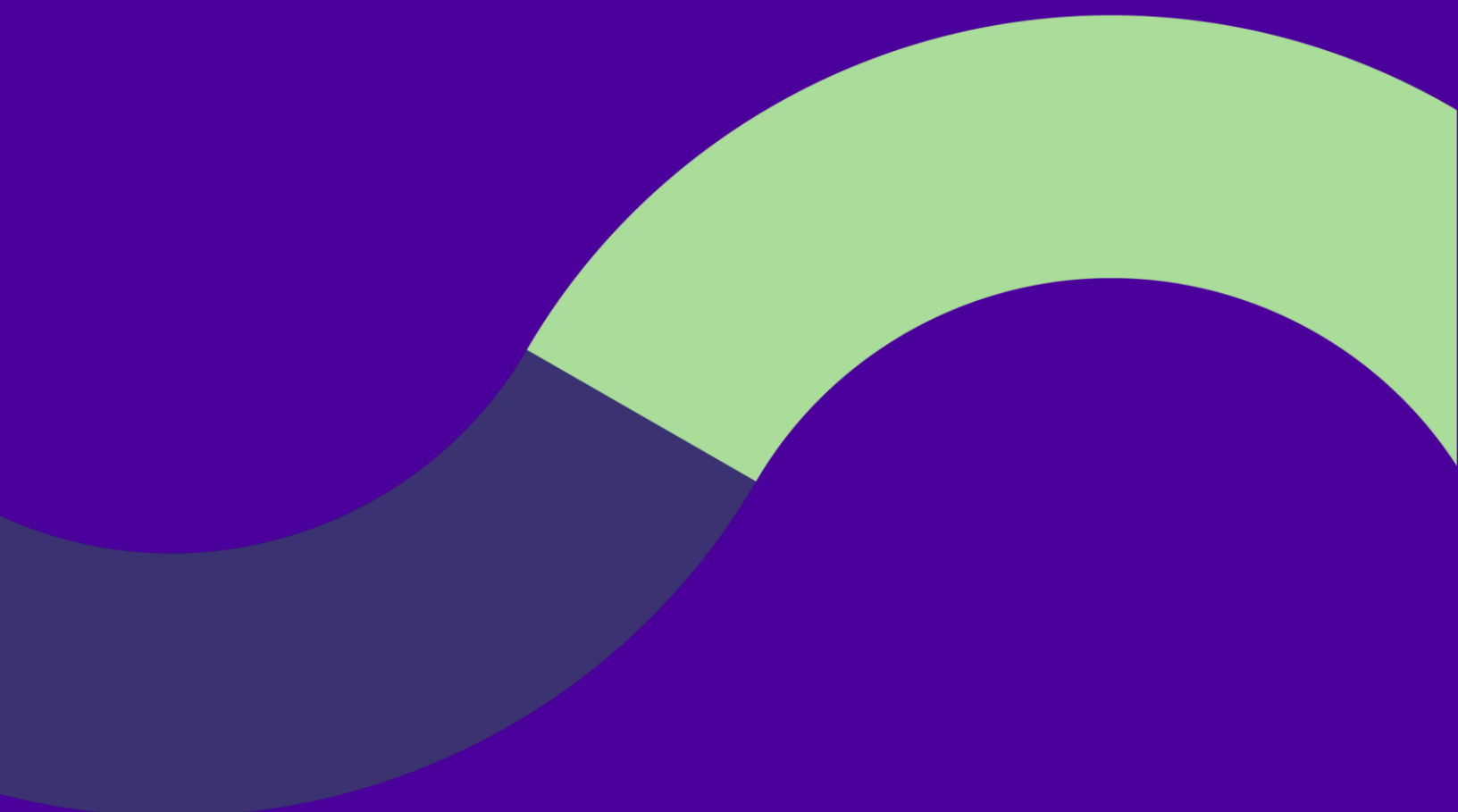


Frequently Asked Questions



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Interuniversity Services Inc. - Active Members

Emergency Medical Travel	\$2,000,000 per incident, per member
Coverage period (# of days per trip)	180 consecutive days
Referral Out of Country	\$500,000 per lifetime
Trip Cancellation	No coverage

What if I need medical attention while travelling?

As soon as possible: call the 24-hour emergency phone number located on the back of your Travel Card (see below). If you can't make the call yourself before seeking treatment, have a friend or family member call AXA Assistance from the hospital once you are there. AXA will ask some questions about your emergency and any potentially related medical history. Providing accurate information (which includes your full name, policy number) will help make sure you receive the right help and information about your coverage.



Travel card
Assistance program

Please carry this card with you!

In the event of an emergency, immediately call:

1-866-783-9473 Toll free from U.S.A. and Canada.

514-285-8195 Call collect from elsewhere in the world. Enter the international access code of the country before the above telephone number.

Service offered by AXA Assistance and available 24/7.

1-855-395-2520 For questions regarding claims.

Identification N°: _____

Policy N°: _____

SSQ, Life Insurance Company Inc.

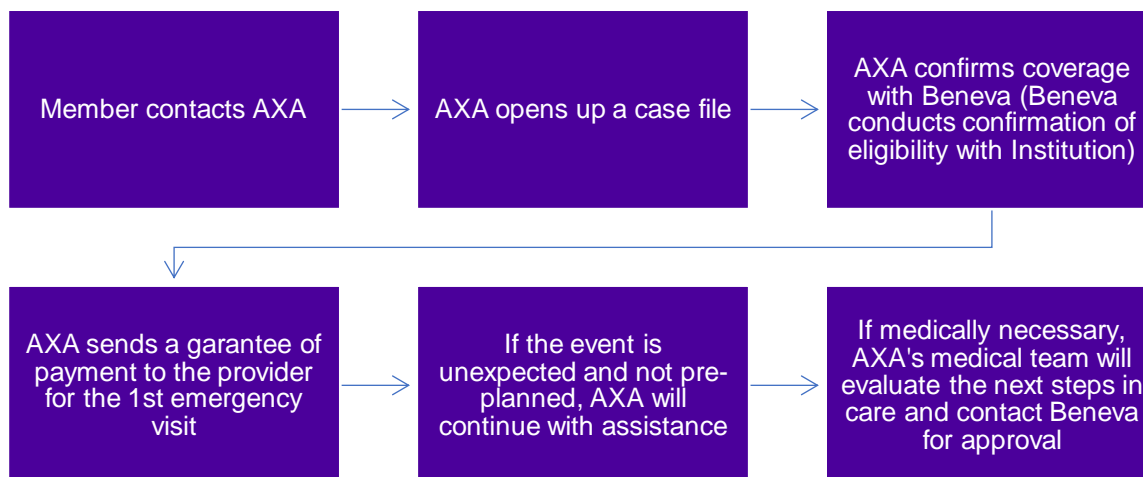
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For general inquiries – inquiries with respect to policy provisions should be directed to your Human Resources Department or Benefits department.

Is trip cancellation covered under the Beneva policy?

No, the emergency medical travel policy covers emergency medical expenses incurred while travelling out of province/country only. Costs associated with the cancellation of a trip are not covered.

What is the claims process if I contact AXA during a medical emergency while traveling?



How can I avoid paying for my claims out-of-pocket?

By contacting AXA as soon as possible when you experience a medical emergency while travelling. AXA will help coordinate with you the location of a nearby medical facility. Depending on the country you visit, AXA may be able to provide you with an insurance card intended for use within its provider network (in the United States.) This card will provide the medical facility with the necessary contact information and directions to bill AXA directly, so you won't have to pay out-of-pocket while you are there. Some physicians also bill patients separately in the United States, so this helps avoid any event where you may be mailed an invoice months after your trip has ended.

I paid for my claims out-of-pocket, how long will it take to be reimbursed?

On average, it takes between 5 and 10 business days to remit payment, assuming all necessary receipts are attached to the claim. You can obtain a claim form on your institution's website or by contacting your HR or Benefits department.

Ideally, you should always contact AXA Assistance any time you need medical attention while travelling abroad. AXA will advise you if you should pay for the incurred expense out-of-pocket and submit your receipts for reimbursement or avoid paying out of pocket.

Is there a pre-existing conditions clause under our program?

There is no pre-existing conditions clause under your program, but your medical emergency *must be a new condition first arising while you are travelling out of province.*

Your emergency travel policy provides coverage for emergencies resulting from unexpected illness, injury, and sickness while travelling abroad. However, it does not cover you for illnesses already underway when you leave home or for symptoms or events that could have reasonably been expected given the stability of your health when you left home. At time of claim, AXA provides the claims team with the medical report, and if there's any doubt about the said condition being unexpected, our medical team evaluates and determines if the claim is admissible as per the terms and conditions of the policy. For example, if you left your province of residence with a condition and while travelling, your symptoms worsened whereby you need medical attention, this is not viewed as unexpected or unforeseen and you risk the chance of your claim being denied. In addition, routine exams and prescription medications are not covered under your travel policy.

See the following scenarios as examples:

[Example 1](#)

[Example 3](#)

[Example 2](#)

[Example 4](#)

Example 1

Chris

Chris has COPD, a chronic condition. He has been followed by his physician since his diagnosis 3 years ago. His condition requires routine lab tests.

Chris is planning a trip to Europe and wants to know if his Emergency Medical Travel plan will cover him should he become sick during his trip.

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Chris reads his booklet and other information from his employer's website and is aware the pre-existing medical exclusion only applies to retirees. However, routine medical exams are not covered under his Emergency Medical Travel policy.

While in Europe, he has shortness of breath and requires medical attention. His spouse contacts AXA and he is taken to the nearest medical facility.

AXA contacts Beneva for confirmation of eligibility. Confirmation received: he is an active member and to proceed with his claim.

AXA coordinates all invoices issued for incurred medical services and Chris can continue with the last few days of his trip before returning home.

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Example 2

Alex

Alex is 4 months pregnant.

What should Alex do to find out if they are covered by their Emergency Medical Travel product?

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Alex is unsure where they can find their policy booklet. They reach out to their HR department to review their copy.

Alex will find the pre-existing medical exclusion only applies to retirees.

Alex's physician advises it is safe to travel by plane at this point in their pregnancy.

If Alex has complications (related or not) to their pregnancy, it is considered unexpected and therefore covered under the travel policy.

* Most airlines allow you to fly domestically until about 36 weeks of pregnancy. It's important to consult with your Health Care Provider prior to travelling while pregnant.

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Example 3

Steven

Steven injures his foot a week before his planned vacation to Mexico. He did not think his injury was serious so did not have it examined prior to his departure.



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Steven's pain became unmanageable during his trip so he went to an urgent care clinic, where they x-rayed and cast his foot. Steven will not be covered under his EMT policy for the medical expenses incurred during his vacation because *his injury occurred a week prior to his trip*.

Steven should have consulted a doctor prior to his trip, as his medical condition would have been covered under his provincial policy.



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Example 4

Adam

Adam requires surgery but has been put on a wait list in Canada. His wait may take up to 3 years.

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Adam plans a trip to visit family in the United States. He manages to be seen by a doctor who can perform his surgery immediately. Adam will not be covered under his Emergency Medical Travel policy, because the surgery was *expected*, and he *planned* for it to happen while he was travelling.

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What happens if I contract COVID-19 while travelling?

COVID-19 is not an exclusion under your current policy language. If you contract COVID-19 while out of province/country requiring emergency care, it would be covered subject to the terms and conditions of your contract.

Does our policy have any government advisory exclusions?

No, there are no government advisory exclusions on your policy. That being said, in the event you require emergency medical assistance, evacuation, or repatriation, countries under a government advisory may make it significantly harder for your travel assistance provider to intervene. For example, if all flights are grounded due to war or unrest, the ability to evacuate you will be severely impacted, or impossible.

Are my dependents eligible for group travel coverage?

Please contact your Human Resources Department for confirmation of who is covered under your Emergency Medical Travel program.

What if the country I'm travelling to requires proof of coverage?

Your Human Resources or Benefits department can provide you a letter confirming your eligibility and coverage.

Am I required to submit claims to my Provincial Plan prior to my submission to Beneva?

No, please send claims directly to Beneva who will arrange for any coordination required with the Provincial Program.

Do I need to contact AXA Assistance for non-emergencies?

Your Travel policy provides coverage for emergencies resulting from unexpected illness, injury, and sickness while travelling abroad. You can call AXA Assistance and they will advise if you should pay out-of-pocket for the incurred claim.