

Top-up Coverage

If you require coverage for trips longer than specified in your group policy, for an additional cost, GMS can offer **TravelStar**[®]. You can purchase:

- Top-up Emergency Medical Coverage for your additional travel days
- Trip Cancellation Insurance
- Baggage Loss, Damage and Delay

Call **1.800.667.3699** to talk to a GMS Customer Service Representative, or visit online at **www.gms.ca**.

Please note: Top-up **Emergency Medical Coverage** can be purchased any time prior to your trip departure date (not available in Quebec, New Brunswick or Nunavut).

In the event you require top-up **Emergency Medical Coverage** once your trip has begun, you must contact the GMS Customer Care Centre and indicate you are insured with Johnston Group Retiree Plans. To extend the number of days you are covered, the following restrictions apply:

- Notify GMS within two (2) business days prior to the expiry of your group coverage;
- You must be claims free (i.e. you have not incurred a claim, required medical treatment, or had a medical consultation during the trip);
- Coverage cannot exceed the total number of days allowed under your Government Health Plan.

Retiree Plans



Retiree Plans



Travel Insurance

Underwritten by



Your **Johnston Group Retiree Plan** includes Out-of-Province/Canada health benefits. In the event of a sudden or unexpected medical emergency that occurs outside your province of residence, the plan will pay reasonable and customary expenses in excess of the amount reimbursed by the government health insurance plan, and/or any other insurance plan, for the following:

- Hospitalization/Physicians and Surgeons/Private Duty Nursing/Emergency Transport/In-Flight Medical Attendant/Return of Remains – Unlimited*
- Prescription Drugs – \$300 per calendar year
- Health Practitioners – \$300 combined per calendar year
- Accidental Injury To Natural Teeth – \$1,000 per calendar year
- Vehicle Return – \$1,000 per trip

* Lifetime maximum of \$1,000,000 when combined with all other Extended Health Care Travel benefits.

It also includes **24 Hour Travel Assistance Services** which provides the following anywhere in the world:

- co-ordination of medical treatment
- co-ordination of medical care and transportation
- coverage verification and support in areas of foreign languages

The plan provides you and your dependents protection for an unlimited number of trips per year to a maximum duration per trip. Please refer to your booklet for details on the maximum trip duration under your plan.



CONTACT US IMMEDIATELY!

In the event of a medical emergency you must call GMS Travel Assistance no later than 24 hours after receiving medical treatment or being admitted to a hospital. Failure to contact GMS Travel Assistance may limit your benefits.

Toll Free: 1.800.877.3061
(within Canada or U.S.)

Collect: 905.762.5197
(from all other locations)

What if I do not contact the Assistance Centre?

Failure to contact our travel assistance firm within 24 hours of medical treatment or admission to hospital will result in restricted coverage under the policy, otherwise payable, to 70% of eligible charges to a maximum of \$50,000.

What is not covered?

This policy does not cover injury or sickness, directly or indirectly related to, for which diagnosis has been made, treatment has been recommended, treatment has been rendered or expenses have been incurred if the injury or sickness originated or was not stable:

EXECUTIVE PLAN

- 90 days prior to departure from your province of residence for members under age 75; or
- 180 days prior to departure from your province of residence for members 75 years of age and over.

EMPLOYEE PLAN

- 90 days prior to departure from your province of residence for members under age 80.

A medical condition is stable if, during the period of time specified, you have not:

- received new medical treatment;
- been prescribed a new prescription medication;
- had a change in medical treatment;
- had an alteration in a prescribed medication;
- experienced a deterioration in your condition;
- experienced new, more frequent or more severe symptoms;
- had a required medical consultation to investigate symptoms that remain undiagnosed;
- required in-hospital care or a referral to a specialist, including initial follow-up visits, test or investigations related to the medical condition and pending results; and/or
- anticipated further medical treatment after departure from your province of residence.

What should I expect if I make a claim?

In the event of an accident, injury or sickness, your prior medical history may be reviewed. You will also be asked to provide proof of travel dates and original expense invoices. Examples of this documentation include airline tickets/itineraries, gas receipts and hotel receipts. Refer to the *Medical Emergency* section to better understand your obligations when making a claim.

Please Read Your Booklet Carefully Before You Travel