Medical Questionnaire

Visitors to Canada
TuGo Travel Insurance

What do you need to know?

It's important to answer the Medical Questionnaire correctly. If you qualify for the insurance but you or a representative buying insurance on your behalf inaccurately answer any of the Rate Qualification questions, a **$15,000 CAD** deductible applies to any incident claimed, in addition to any other deductible you may have selected.

At the time of a claim, if the answers are not complete or accurate, coverage won't be provided until you correct your answers and, if applicable, you pay any additional premium that may be required.

Q. When do you need to complete the Medical Questionnaire?

A. If you are 60 years of age or older, you must answer the Medical Questionnaire to purchase Emergency Medical Insurance.

Q. Why do you need to complete the Medical Questionnaire?

A. Your answers will determine the premium (cost) of your insurance.

Q. Does answering the Medical Questionnaire mean you're covered for pre-existing medical conditions?

A. No, it determines the premium of your insurance. Details about Pre-existing Medical Condition coverage are in the policy.

Q. Can a representative answer the Medical Questionnaire on your behalf?

A. Yes, but you should verify that the answers shown on the policy declaration are complete and accurate. If any of the answers are incorrect on your Medical Questionnaire, please let your agent know.

Q. What should you do if you don't know how to answer a question?

A. Refer to the "What else do you need to consider?" section. If you're still unsure, talk to your physician for advice before completing the Medical Questionnaire.

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Are you eligible for coverage?

At the time of application, you are eligible for coverage if:

1. You know of no reason for which you may seek medical attention.
2. You are:
   a) A foreign worker, international student studying in Canada or a visitor to Canada with valid legal status in Canada; or,
   b) An immigrant awaiting provincial or territorial government health care coverage; or,
   c) A Canadian returning to Canada from an extended leave who is eligible for but not yet covered by a provincial or territorial government health care plan.
3. You are not travelling against a physician or other registered medical practitioner's advice.
4. You have not been diagnosed with a terminal condition.
5. You are not receiving palliative care or palliative care has not been recommended.
6. You do not have Chronic Obstructive Pulmonary Disease (COPD), including emphysema, requiring home oxygen.
7. You do not have pancreatic cancer, liver cancer or any type of cancer that has metastasized or that required a bone marrow transplant.
8. You do not have kidney disease requiring dialysis.
9. You have not had or are not waiting for an organ transplant.
10. You have not been diagnosed with congestive heart failure also known as pulmonary edema.

Rate Qualification Questions

Applicable to travellers 60 years or older

All words marked with an asterisk (*) have supporting information available. Refer to the "What else do you need to consider?" section below for details.

1. **Have you had any of the following in the last 12 months?**
   - ○ Myocardial infarction also known as heart attack
   - ○ Stroke and/or Transient Ischemic Attack (TIA) also known as mini-stroke
   - ○ Arterial by-pass, angioplasty and/or placement of a stent for a cardiovascular condition
   - ○ None

2. **Have you had any of these conditions in the last 12 months?**

   Choose a condition if, in the specified timeframe, you had the condition, whether or not you received any medical care for it. This includes conditions controlled or managed by medication, a medical device, diet or exercise.

   - ○ Atrial fibrillation*
   - ○ Diabetes requiring insulin
   - ○ Liver disease, excluding liver cancer
   - ○ Pneumonia
   - ○ Coronary artery disease (CAD)*
   - ○ Arteriosclerosis and/or atherosclerosis also known as hardening of the arteries
   - ○ Chronic Obstructive Pulmonary Disease (COPD), including emphysema, not requiring home oxygen
   - ○ Asthma
   - ○ None

3. **In the last 12 months, have you smoked any tobacco products, or vaped any nicotine products (including e-cigarettes)?**
   - ○ Yes   ○ No

What else do you need to consider?

The following information is for general reference only. You should consult your physician(s) for more detailed information about medical conditions that may affect you.

Atrial fibrillation

Atrial fibrillation is a type of arrhythmia. Choose this condition if you've been diagnosed specifically with atrial fibrillation and not any other type of arrhythmia or dysrhythmia.

Coronary Artery Disease (CAD)

Coronary Artery Disease can be caused by arteriosclerosis and/or atherosclerosis. If you've been diagnosed with CAD and arteriosclerosis and/or atherosclerosis, choose all these conditions.

Experimental treatment

If you've been diagnosed with a condition and are receiving experimental treatment for it, whether the experimental treatment has been approved by Health Canada or not, choose that condition.

Medical study

If you've been diagnosed with a condition and are participating in a medical study for it, choose that condition.

I confirm that I have answered this Medical Questionnaire accurately as it relates to my health conditions.

_____
Name of Insured/Patient

X_____
Signature

_____
Policy Number

_____
Date   DD | MM | YYYY

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