

Emergency Travel Medical Benefit Rider



This rider is issued by The Canada Life Assurance Company as part of the policy to which it is attached, and is subject to the provisions of the policy, except as modified by this rider.

Terms used in this rider are to be given the same interpretation and meaning as set out in the policy, unless the context requires otherwise.

IMPORTANT NOTICE - READ CAREFULLY BEFORE YOU TRAVEL

This optional Emergency Travel rider has been purchased for travel insurance – what's next? We want you to understand (and it is in your best interest to know) what your policy includes, what it excludes, and what is limited (payable but with limits). Please take time to read through your policy before you travel.

- Travel insurance covers claims arising from sudden and unexpected situations (ex: accidents and emergencies).
- To qualify for this insurance, the Insured must meet all of the eligibility requirements (ex: meet certain criteria).
- This insurance contains limitations and exclusions. Examples may include: Medical Conditions that are not Stable, pregnancy, child born on trip, high risk activities, etc.
- This insurance may not cover claims related to an Injury or Sickness which resulted from a Medical Condition that existed prior to booking your trip.

Contact our service provider at the appropriate contact number on page 2, before seeking Treatment or your benefit may be limited.

In the event of a claim your prior medical history may be reviewed. If you have been asked to complete a medical questionnaire and any of your answers are not accurate or complete, this policy will be voidable.

IT IS IMPORTANT AND YOUR RESPONSIBILITY TO UNDERSTAND YOUR COVERAGE

- Please carry this document with you when you travel.
- If you have questions regarding coverage under this policy call 1-866-430-2863.
- If you would like a printed Travel Assistance wallet card, please sign into mycanadalifeatwork.com. For assistance on how to enroll refer to your User Guide included with your policy documents.

Travel Assistance contact information

For help with a medical emergency while travelling, call the number of the location nearest you.

Service is available 24 hours a day.

Canada or U.S.A.: 1-855-222-4051

All other countries: 1-204-946-2577*

*Submit long distance charges to Canada Life for reimbursement.

Tips before travelling

Telecommunications systems and standards differ throughout the world. We recommend that before travelling, you become familiar with the service and technology available in your destination location.

Some telecommunications systems don't recognize the tonality of mobile devices so they can't be used. In this case, you may have to use a public phone.

Some hotels and resorts offer payphones on location with outside line accessible by using the resort calling card.

Ask the hotel's reception about long distance call access.

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Section 1: Terms Used

Assistance Centre means the network that provides 24-hour telephone emergency medical assistance services and courtesy assistance services on behalf of Canada Life. This network helps locate emergency medical and dental care and obtains Canada Life's prior approval for medical services, and supplies, and assistance services, where required. Assistance services are described in Section 6 – Medical Services and Supplies, under Emergency Medical Assistance Services and Courtesy Assistance Services.

Covered Trip means:

- the first 60 consecutive days per trip for Insureds up to age 80.

In all cases, Insureds of any age must be absent from Canada or travelling more than 500 kilometres from home while this rider is in effect. A Covered Trip must begin and end in Canada.

Departure Date means the date an Insured leaves on a Covered Trip.

Emergency Medical Treatment means services performed or recommended by a Physician for an Injury or Sickness. This includes, but is not limited to Medical Treatment, diagnostic testing or prescribed medications.

Emergency Medical Assistance Services means the Emergency Medical Assistance Services described in Section 6.

Extended Family means the child, spouse, parent, guardian, brother, sister, grandchild and grandparent of the *Owner* or the Insurable Spouse.

Medical Condition means any Sickness or Injury (including symptoms of undiagnosed conditions).

Medical Emergency means:

- any sudden and unforeseen Injury or Sickness that requires immediate Emergency Medical Treatment; or
- an acute episode of a Sickness that did not present signs or symptoms, or was not being treated prior to the Insured's Departure Date from Canada; or
- an unexpected and unforeseen acute episode of an Injury or Sickness that was a previously identified as Stable and controlled on the Insured's Departure Date, and which requires Emergency Medical Treatment.

A Medical Emergency ends on the earlier of the date when the Insured is no longer receiving Emergency Medical Treatment, or the attending Physician has confirmed that the Insured's Injury or Sickness has improved or stabilized to the extent of allowing the Insured to travel.

Non-Emergency Treatment or Surgery means:

- any treatment or surgery not required for immediate relief of acute pain or suffering, or which could reasonably be delayed until the Insured returns home, including periodic check-ups or examinations and regular care for chronic conditions;
- any treatment received by the Insured outside of Canada following Emergency Medical Treatment, including follow-up visits and rehabilitation, if the Insured's Medical Condition permits the Insured to return home;
- any treatment or surgery for a Medical Condition where the Medical Condition would not have prevented the Insured from returning home for treatment or surgery; and
- any medical or Hospital services which the Insured specifically travelled to obtain, whether or not on the advice of a Physician.

Pre-Travel Period means:

- if the Insured is under age 60 on their Departure Date, the entire 6-month period immediately before the date the Insured left on their Covered Trip; or
- if the Insured is age 60 or over on their Departure Date, the entire 9-month period immediately before the date the Insured left on their Covered Trip.

Stable means for a particular Medical Condition to be considered Stable and controlled, all the following statements must be true in the Pre-Travel Period to an Insured's Departure Date;

- the Insured's Medical Condition must not have worsened;
- the Insured must have consistently been taking medications, as prescribed by the Insured's Physician, if any;
- the Insured's Physician has not prescribed or recommended any medical, surgical or diagnostic procedures for the Insured; and
- the Insured must not have had any new treatments or medications, or changes in dosages.

For this purpose, the following will not be considered to be new treatments or medications:

- a change from a brand name medication to a generic brand medication or from a generic brand medication to another generic brand medication for the same Medical Condition;
- a new medication prescribed because a drug manufacturer has discontinued the original medication or because the drug manufacturer cannot supply the original medication;
- Aspirin or Acetylsalicylic acid taken for cardiovascular protection;
- vitamins and minerals and non-prescription medications that are not required as treatment for a Medical Condition; or
- creams or ointments prescribed for cutaneous irritations.

And the following will not be considered to be changes in dosage:

- the routine adjustment of insulin or Warfarin;
- a decrease of the dosage of cholesterol medication; or
- a dosage change of thyroid or hormone replacement therapy medication.

Section 2: Insurance Provision

For benefits to be payable:

- Medical services and supplies must be incurred by an Insured as a result of a Medical Emergency occurring outside Canada;
- Emergency Medical Assistance Services must be incurred by an Insured as a result of a Medical Emergency occurring outside Canada or more than 500 kilometres from the Insured's home;
- The effective date of this rider must be prior to the Departure Date, unless this rider is renewed in accordance with the Term of Insurance and Renewability section

Payment is subject to the limitations and exceptions set out in the policy and in this rider.

Coverage is provided for all Covered Trips the Insured takes while this rider is in force. There is no limit to the number of Covered Trips any Insured may take while this rider is in force. Coverage is provided for a maximum of 60 days per trip.

Section 3: Deductible

Medical Emergency benefits for covered medical supplies and services are payable for claims in excess of \$100. The Insured is responsible for the first \$100 per claim.

Section 4: Renewal

If your policy is renewed in accordance with the Term of Insurance and Renewability section, this rider will also be renewed on the Annual Renewal Date.

Section 5: Termination of this Rider

This rider terminates, subject to the Extension of Coverage provision, on the earlier of:

- the date the policy terminates;
- the last day of the month in which the *Owner* reaches age 80; or
- the next Annual Renewal Date following the date on which Canada Life receives a Written Request for the *Owner* to terminate this rider. Such Written Request must be received by Canada Life at least 30 days before the Annual Renewal Date.

Coverage for an *Insured* other than the *Owner* will terminate on the earlier of:

- the date the policy or this rider terminates;
- the date coverage for the *Insured* terminates under the policy; or
- the last day of the month in which the *Insured* reaches age 80.

Section 6: Medical Services and Supplies

The following services and supplies are covered when provided during a Covered Trip. The provision of these services and supplies must be related to Emergency Medical Treatment resulting from a Medical Emergency.

Please Note: Important limitations to the coverage provided under this rider are set out under Section 9 – Limitations and Section 10 – Exclusions.

Emergency Medical Treatment

Ambulance Services

- ambulance services, including air ambulance, to the nearest centre where essential treatment is available.
- where air ambulance service is required, coverage for a medical attendant is also included if required.
- air ambulance services must be approved in advance by Canada Life and arranged by the Assistance Centre.

Hospital Services

- Hospital in-patient services and supplies, including room and board and general nursing care while confined to a Hospital semi-private room, ward, coronary care unit or intensive care unit for Acute Care;
- surgery; and
- Hospital outpatient services and supplies.

Physician Services

- the services of a licensed Physician.

Emergency Dental Treatment

- emergency dental treatment provided for treatment to a Sound Natural Tooth.

Private Duty Nursing Services

- a Professional Nurse, who is not a member of the Insured's family, when provided during Hospital confinement for Emergency Medical Treatment that is ordered by a Physician.

Miscellaneous Services and Supplies

The following miscellaneous services and supplies are covered when provided on an in-patient or outpatient basis:

- anaesthesia and its administration;
- diagnostic X-ray and laboratory examination;
- whole blood, blood plasma and blood products;
- oxygen and its administration;
- casts, dressings, crutches, canes, slings and splints;
- prescription drugs requiring a prescription by law; and
- rental of medical appliances, a hospital-type bed, wheelchair, crutches, braces, etc. (not to exceed the cost of purchase).

Emergency Medical Assistance Services

Where Canada Life has given its prior approval, Canada Life will pay for, or reimburse expenses for, Emergency Medical Assistance Services resulting from a Medical Emergency, when arranged by the Assistance Centre.

Medical Evacuation and Repatriation

- transportation to the nearest Hospital where treatment is available or to a Hospital in Canada.
- coverage for a medical attendant is also included, if required.

Canada Life reserves the right to transfer the Insured to another Hospital or return the Insured to his or her home province or territory. Canada Life will be absolved of any further liability for that Medical Emergency if the transfer request is refused.

Return home

- return home of an Insured by economy seating (or by upgraded seating or air ambulance if medically necessary), as well as additional seats for a stretcher, if required.
- if an Insured is hospitalized and unable to accompany home any other Insured who is on a Covered Trip with the Insured, a one-way economy flight for each such Insured to return home.
- return or round trip transportation for an attendant for any Insured who is unable to travel alone may be covered when considered necessary by Canada Life.

Extended Stay

- If the Insured is unable to return to his or her home province or territory by the originally scheduled date of return because the Insured is hospitalized on that date, any unexpected additional hotel accommodations and meals incurred by the Insured, and by a person who accompanied the Insured on the Covered Trip and who wishes to stay with the Insured or at the bedside of the Insured. Coverage begins on the day after the originally scheduled date of return.

Identification of Deceased Insured

- In the event of death of an Insured during a Covered Trip, reasonable travel, hotel accommodation and meal expenses for one person to identify the remains.

Repatriation of Deceased Insured

- In the event of death of an Insured during a Covered Trip, the cost of services and supplies legally required for the preparation of the body, and the cost for its return transportation to Canada.

Burial or Cremation of Deceased Insured at the Place of Death

- In the event of death of an Insured during a Covered Trip, the cost of services and supplies legally required for the preparation of the Insured's body for burial or cremation at the place of death.
- The determination to have an Insured's body buried or cremated or returned to Canada will be made by the Insured's closest relative.

Transportation to Bedside

- If the Insured is on a Covered Trip alone, is hospitalized and expected to remain in Hospital for more than seven consecutive days, the cost for reasonable travel, hotel accommodation and meal expenses for one person to visit the Insured.

Trip Cancellation for Medical Reasons

If prior to a scheduled departure, an Insured is required to cancel a trip due to:

- The death of an Insured or an Extended Family member occurring within 22 days of the scheduled Departure Date;
- An Injury or Sickness, which did not result from a Medical Condition that existed prior to booking your trip. The attending Physician must substantiate in writing that prior to the scheduled Departure Date, they advised the Insured to cancel the trip, or that the Injury or Sickness made it impossible for the Insured to start the trip; or
 - The Injury or Sickness of an Extended Family Member, which required immediate hospitalization with an expected stay of at least three days and did not result from a Medical Condition that existed prior to booking your trip.

Canada Life will reimburse the cost of pre-paid travel expenses which are not refundable or recoverable from any other source.

Trip Interruption for Medical Reasons

- If an Insured has to end a Covered Trip and return to their province or territory of residence because the Insured experienced a Medical Emergency, we will cover the cost of any non-refundable prepaid travel for the Insured and for each Insured travelling with the Insured who has to return home.
- If the Insured does not return home and opts to continue travelling after the Medical Emergency has ended, we will cover the additional cost of travel for the Insured and for each Insured person traveling with the Insured.
- If required, Canada Life will reimburse the additional cost for hotel accommodation and meals incurred by an Insured travelling with the Insured on account of the interruption.

Unexpected Return

- If an Insured must return to their province or territory of residence because an Extended Family member who is not on the Covered Trip with the Insured is suffering from an unforeseeable Sickness or Injury requiring intensive care treatment or has died, Canada Life will reimburse the cost of any non-refundable prepaid travel for each Insured who is on the Covered Trip. Canada Life will pay any extra cost for a one-way economy flight home.

Vehicle Return

- If for medical reasons, an Insured or any accompanying person is unable to drive an automobile owned or leased by the Insured to his or her home or to the place to which the automobile must be returned, Canada Life will pay the cost of returning the automobile.

Courtesy Assistance Services

The Assistance Centre will provide the following courtesy assistance services to an Insured by toll-free telephone, 365-days a year, 24-hours a day:

- referrals to help locate appropriate medical care;
- assistance in contacting the family, employer, Physician or other medical professional;
- assistance in obtaining a second opinion if the Insured has doubts about his or her treatment or progress;
- assistance in arranging payments, transfers of funds and payment guarantees to medical facilities;
- confirmation to medical facilities of insurance coverage;
- assistance in locating legal assistance;
- telephone interpretation services;
- assistance in replacing lost or stolen travel documents and recovering misdirected luggage; and
- assistance with the transmission of urgent messages, emergency travel arrangements and other details.

Section 7: Extension of Coverage

Involuntary Extension

If an Insured's return is delayed beyond the scheduled date of return to his or her home province or territory, due to:

- a delay in transportation by the scheduled carrier; or
- inclement weather or vehicle mechanical problems, if the Insured is driving and had commenced his or her return trip before the delay,
- coverage is extended automatically for up to a maximum of 72 hours without additional premium, provided this rider is in force at the time of the delay.

Extension of Medical Benefits

- If an Insured is still confined in a Hospital as a result of a Medical Emergency on the date coverage under this rider ends, Canada Life will continue to pay for expenses incurred in connection with the Medical Emergency for which the Insured was hospitalized, until the date the Medical Emergency ends.
- If, as a result of Emergency Medical Treatment or Emergency Medical Assistance Services, an authorized evacuation or transportation service is delayed beyond the date coverage under this rider terminates, Canada Life will continue to pay expenses until the completion of the transportation or evacuation trip.
- The extension of coverage provided under this section is subject to the limitations and exceptions set out in this rider.

Section 8: Claim Provisions

What to Do in the Event of an Emergency

An Insured, or any other person acting on behalf of the Insured, must contact the Assistance Centre at one of the toll-free numbers shown on your emergency travel assistance card, issued with this rider, prior to admission to a Hospital or prior to the commencement of Emergency Medical Treatment or Emergency Medical Assistance Services.

If, in case of a Medical Emergency, advance notice is not possible, contact must be made within 24 hours following admission to Hospital or provision of Emergency Medical Treatment.

If, due to the severity of a Medical Emergency, contact within 24 hours is not possible, notification must be made as soon as reasonably possible.

If the Assistance Centre is not notified as required above, benefits payable for medical services and supplies will be reduced as set out under Section 9 – Limitations.

Payment Directly to Providers

Many providers of Emergency Medical Treatment will accept assignment of benefits payable to them in place of full payment. Unless advised to do otherwise, Canada Life will make benefit payments directly to these providers. A direct payment to a provider does not affect the Insured's liability for any portion of an expense that is not covered by Canada Life's payment. In the event that Canada Life makes a payment directly to a provider for charges that are not for services and supplies covered under this rider, Canada Life has the right to recover the amount of that payment from the *Owner*.

Government Plan

Canada Life will pay the Government Plan's share of a claim, on the Government Plan's behalf. The Government Plan requires that the Insured, or a person acting on behalf of the Insured, sign a release permitting the Government Plan to reimburse Canada Life for the Government Plan portion of the claim.

Many Government Plans have time limitations on the submission of claims. If the applicable Government Plan refuses payment because the time limitations have expired for reasons other than those caused by Canada Life, the *Owner* must reimburse Canada Life for any amount Canada Life may already have paid on their behalf.

Other payments

If an Insured has paid a provider for services and supplies covered under this rider, the *Owner* must contact Canada Life immediately upon the Insured's return home. Canada Life will send the *Owner* the necessary forms and will assist in preparing and submitting a claim.

Please ensure that the Insured obtains an itemized account of the services and supplies provided by the Physician or Hospital. Note that it is much easier to obtain this while at the Hospital or with the Physician than it is when the Insured returns home.

Advance Approval

As described in Section 9 – Limitations, certain expenses, including air ambulance, transportation to bedside and vehicle return, are subject to advance approval by Canada Life.

Co-ordination of Benefits

Benefits under this rider are co-ordinated when other similar coverage is in effect.

For example, when coverage is in effect under another insurance plan such as a credit card plan or an employer's group plan, each expense is co-ordinated with the other plan, so that the total payment does not exceed 100% of eligible paid expenses. Benefits payable under this rider are subject to a \$100 deductible as set out in Section 3 – Deductible, to limitations as set out in Section 9 – Limitations and to exclusions as set out in Section 10 – Exclusions.

Where both a third party and Canada Life have reimbursed the *Owner* for the same expenses, the *Owner* will repay Canada Life for Canada Life's portion of the expense.

Unless otherwise provided in this rider, Canada Life follows the Canadian Life and Health Insurance Association co-ordination of benefits guidelines for travel plans.

Right of Subrogation

If Canada Life paid a benefit under this rider for a loss that a third party is or may be liable for, Canada Life will be subrogated to all the Insured's rights of recovery up to the amount Canada Life paid. The *Owner* may be required to sign an acknowledgement of this right and do whatever is necessary to assist in exercising this right.

Proof of Claim

Canada Life will only pay for expenses for which it has received satisfactory proof that payment is due. Satisfactory proof may include, but is not limited to, original receipts issued by the provider, evidence of the Departure Date and date of return from a trip, and any information regarding the health, medical history, and treatment received by an Insured, as well as copies of Hospital and medical records.

Section 9: Limitations

In the event of a Medical Emergency, you must call the Assistance Centre before obtaining Emergency Medical Treatment, so that we may confirm coverage and provide pre-approval of treatment. If it is medically impossible for you to call prior to you obtaining Emergency Medical Treatment, we ask you to have someone call on your behalf as referenced in Section 8 - Claims Provisions. Otherwise, if you do not, benefits payable may be reduced by 20 per cent, up to a maximum of \$10,000. This reduction in benefits payable does not apply if the total expenses incurred for medical services and supplies do not exceed \$500.

After your Emergency Medical Treatment has started, ongoing Emergency Medical Treatment requires pre-approval. If you undergo tests as part of a medical investigation, treatment or surgery, that is not pre-approved, your claim may not be paid.

The *Owner* or the *Owner's* agent shall submit satisfactory proof to Canada Life of any expenses incurred no later than 12 months after the expenses were incurred. It is in the best interest of the *Owner* to submit claims within the time limitations set out in the applicable Government Plan, as failure to do so may result in the *Owner* having to reimburse Canada Life for expenses Canada Life paid on the Government Plan's behalf.

The *Maximum Benefit Amount* payable for Emergency Medical Treatment and Emergency Medical Assistance Services, as shown in the *Optional Benefit Riders* section of the *Policy Specifications* under Emergency Travel Medical, is limited to \$1,000,000 per Covered Trip.

Benefits payable for Emergency Medical Treatment and Emergency Medical Assistance Services, are limited to Customary Charges for the service or supply provided.

Benefits payable for emergency dental treatment required:

- as a result of a blow from an external force, are limited to \$1,000 per Covered Trip; or
- for a reason other than a blow from an external force, are limited to \$200 per Covered Trip.

Benefits payable for Emergency Medical Assistance Services:

- under the Identification of a Deceased Insured provision are limited to \$5,000 per Insured;
- under the Repatriation of a Deceased Insured provision are limited to \$5,000 per Insured;
- under the Burial or Cremation of a Deceased Insured at the Place of Death provision are limited to \$3,000 per Insured;
- under the Extended Stay provision are limited to \$200 per day to a maximum of \$2,000 per Covered Trip;
- under the Transportation to Bedside provision are limited to \$5,000 per Covered Trip;
- under the Trip Cancellation provision are limited to \$2,500 per Insured or \$5,000 for all Insureds per Covered Trip;
- under the Trip Interruption provision are limited to \$2,500 per Insured or \$5,000 for all Insureds per Covered Trip;
- under the Unexpected Return provision are limited to \$5,000 per Insured per Covered Trip;
- under the Return Home provision are limited to \$5,000 per Insured per Covered Trip;
- under the Vehicle Return provision are limited to \$2,000 per Covered Trip.

For a benefit to become payable under the Trip Cancellation provision, the *Owner* must notify Canada Life within seven days of any cancellation in travel arrangements. Canada Life must receive satisfactory proof of the reason for cancellation within seven days thereafter.

Canada Life is entitled to recover from the *Owner* any credit or refund the *Owner* or *Insured* may obtain on the unused portion of airline tickets.

Payment to the *Owner* or to a provider will discharge Canada Life's obligation under this rider, whether the loss is sustained by the *Owner* or another *Insured*. Canada Life may also, at our discretion and to the extent the law permits, pay another person on behalf of the *Owner*.

Section 10: Exclusions

Travel insurance is designed to cover losses arising from sudden and unforeseeable circumstances.

No benefits are payable for losses resulting from, inhalation of gas, participation in hazardous sports, or flying other than as a passenger on a commercial airline. For further clarification;

No benefits will be paid for any expenses:

- for a Medical Condition that is not consider Stable prior to departure;
- for a Medical Condition or any symptom for which it is reasonable to believe or expect that treatments will be required during your trip;
- incurred for Non-Emergency Treatment or Surgery, including periodic check-ups or examinations;
- incurred when traveling for the purposes of obtaining medical services and supplies, dental services (other than those covered in the Emergency Medical Treatment provision), elective or cosmetic surgery, palliative care, or any alternative therapy, as well as any directly or indirectly-related complication;
- incurred for experimental or investigative medical drugs or procedures;
- for medical services and supplies incurred before the *Rider Effective Date*, or after coverage terminates unless the Insured was hospitalized prior to that date, and except as provided in Section 7 – Extension of Coverage;
- covered by a provincial worker's compensation plan or similar plan;
- for which insurance is not permitted;
- resulting from pregnancy, childbirth or miscarriage, or any complications incident to pregnancy occurring within eight weeks of the expected delivery date, or at any time if the pregnancy has been considered high risk;
- if it is determined that the Insured should transfer to another facility or return to the Insured's home province/territory of residence for treatment and should the Insured choose not to, no benefits will be paid for further treatment or investigation, a reoccurrence or complication, which arose from, or related to the initial Medical Emergency for any Emergency Medical Treatment or Emergency Medical Assistance Services;
- the continued treatment, recurrence or complication of a Medical Condition or related condition, following Emergency Treatment during your trip, if our medical advisors we determine that your Emergency has ended;

- the continued treatment, recurrence or complication of a Medical Condition or related condition where Emergency Treatment was received without notification to our Assistance Centre and your Emergency has ended.
- any Medical Condition that is the result of you not following Treatment as prescribed to you, including prescribed or over-the-counter medication;
- incurred for medical services or supplies or any Emergency Medical Assistance Services, if travel is undertaken against the advice of a Physician;
- caused by or related to:
 - participation in hazardous activity and sport, including but not limited to, scuba diving (unless the Insured holds a scuba diving designation from a certified school or other licensing body), parachute jumping, motor vehicle racing, mountain climbing, or bungee jumping;
 - participation as a professional in athletic competition or demonstration.

Section 11: General Provisions

Currency

Claims under this rider are payable in Canadian currency. All references to dollar amounts in this rider are in Canadian dollars. Where currency conversion is necessary, the rate of exchange shall be based upon the rate in effect on the date that the last service is rendered. No sum payable under this rider shall bear interest.

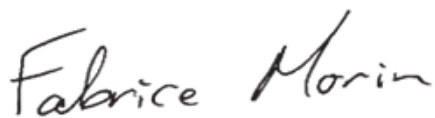
Fraud

If an Insured attempts, through deceit, to obtain benefits that otherwise would not be provided or payable, coverage under this rider will terminate automatically, without notice.

Failure to Obtain Medical Services

Neither Canada Life nor the Assistance Centre shall be held responsible for the availability, quantity, quality, or results of any medical treatment an Insured may require or receive, or for failure by an Insured to obtain medical services.

Signed for The Canada Life Assurance Company at Winnipeg, Manitoba as of the *Rider Effective Date* shown on the *Policy Specifications*.



Fabrice Morin
President and Chief Operating Officer, Canada



Paul A. Mahon
President and Chief Executive Officer

This rider should be kept with your policy.