
HOW TO FILE A CLAIM

PAYMENT TO MEDICAL PROVIDERS

CAA Assistance will pay *hospitals, physicians* and other medical providers directly, whenever possible. While most medical providers will agree to accept direct payment from *us*, there are some providers who will require that *you* pay them directly.

Where direct payment cannot be arranged, *we* will **reimburse** eligible expenses on the basis of *reasonable and customary costs*. If *you* pay eligible expenses directly to a health service provider without prior approval by CAA Assistance, these services will be reimbursed to *you* on the basis of the *reasonable and customary costs* that would have been paid directly to such provider by the *Insurer*. Medical charges that *you* pay may be higher than this amount, therefore *you* will be responsible for any difference between the amount *you* paid and the *reasonable and customary costs* reimbursed by the *Insurer*.

Please note that some benefits are **reimbursable** on *your* return. Check the benefits section for the insurance coverage(s) *you* have purchased to see which benefit(s) this applies to.

SUBMITTING YOUR CLAIM

You must substantiate *your* claim by providing the documents described in the applicable insurance coverage(s) below. (The *Insurer* is not responsible for charges levied in relation to any such documents.)

Indicate *your* *policy* number on all correspondence and send the claim form and all required documents to:

CAA Travel Insurance

9th Floor, 150 Commerce Valley Drive West,
Thornhill, Ontario L3T 7Z3

- 1-866-696-6355 in Canada and mainland U.S.
- +1-905-669-7355 collect from anywhere else

EMERGENCY MEDICAL INSURANCE and VISITORS TO CANADA INSURANCE

1. A completed Medical Expenses Claim Form (provided by CAA Assistance upon notification of claim).
2. Original itemized bills from the licensed medical provider(s) stating the patient's name, diagnosis, date and type of treatment, and the name, address and telephone number of the provider, as well as the original transaction documents proving that payment was made to the provider. (For Canadians covered by GHIP, copies of itemized bills are accepted only if the *Insured* has already dealt directly with GHIP).
3. Original prescription drug receipts from the pharmacist, *physician* or *hospital* indicating the name of the prescribing *physician*, prescription number, name of preparation, date, quantity and total cost.
4. For out of pocket expenses: an explanation of expenses accompanied by the original receipts.

HOLIDAY PROTECTION In addition to the items required under Trip Cancellation & Interruption Insurance, *you* must also submit:

1. Satisfactory evidence that *you* have booked and paid for a replacement *trip*.
2. An itemized CAA Travel Agency invoice, for the replacement *trip*, showing fares, deposits, travel dates, final payment and date thereof.
3. A copy of the CAA Travel Insurance *policy* for the replacement *trip* and the name of the CAA travel professional.

TRIP CANCELLATION & INTERRUPTION INSURANCE

Benefits under this insurance coverage are payable to *you* unless *you* authorize and direct the *Insurer*, in writing, to pay the eligible claim amount to a third party.

1. A completed Trip Cancellation & Interruption Claim Form (available by contacting CAA Assistance at the phone numbers above. *We* need proof of the cause of the claim, including:
 - a. if *your* claim is for medical reasons, a medical certificate completed by the attending *physician* stating why travel was not possible as booked and a copy of the entire medical file of any person whose health or medical condition is the reason for *your* claim; or
 - b. a report from the police or other responsible authority documenting the reason for the delay if *your* claim is due to misconnection.
2. Original invoices and receipts.
3. Original tickets.

4. Other supporting documentation as requested.

TRIP CANCELLATION

1. For cancellation due to a disaster or event independent of any intentional act or negligence, accident on the way to departure, jury duty, subpoena, transfer or involuntary loss of employment: a legal certificate (police report, the summons and/or subpoena, record of employment) confirming the circumstances of the cancellation and a letter from *your* employer (if applicable).
2. For penalties: a copy of the *travel supplier's* or the airline's publication confirming the cancellation penalties imposed.
3. For default coverage: written notice of claim must be submitted within 60 *days* of the *day* on which the *travel supplier* announces that it is in *default* :
 - a. copies of receipts and proofs of payment to *travel suppliers*;
 - b. copies of unused transportation or accommodation documents; and
 - c. where appropriate, evidence of claim to or reimbursement from any federal, provincial or other compensation fund or any other source (including credit card companies) that is legally responsible or under contract to reimburse *you* for the cost of the undelivered *travel services*.

TRIP INTERRUPTION

1. For out of pocket expenses: an explanation of expenses in the event of a late return, along with original receipts.
2. For death or repatriation: a death certificate accompanied by receipts from the funeral home, airline, etc.
3. For default coverage: written notice of claim must be submitted within 60 *days* of the *day* on which the *travel supplier* announces that it is in *default*:
 - a. copies of receipts and proofs of payment to *travel suppliers*;
 - b. copies of unused transportation or accommodation documents; and
 - c. where appropriate, evidence of claim to or reimbursement from any federal, provincial or other compensation fund or any other source (including credit card companies) that is legally responsible or under contract to reimburse *you* for the cost of the undelivered *travel services*.
4. For BounceBack benefit, contact CAA Assistance at the phone number(s) above for claim form and instructions.
5. Other supporting documentation as requested.

TRAVEL ACCIDENT INSURANCE

For forms and instructions, contact CAA Assistance at the phone number(s) above.

BAGGAGE INSURANCE

1. A completed claim form (available by contacting CAA Assistance) at the phone number(s) above.
2. For loss:
 - a. a report by the police or the hotel manager, tour guide or transportation authorities in whose custody the insured property was at the time of loss;
 - b. adequate proof of loss, (original purchase receipts, original replacement receipts or original replacement estimates on store stationery or letterhead) ownership and itemized value.
 - c. a Property Irregularity Report when luggage is lost or damaged while in the custody of the airline or *common carrier*.
3. For baggage delay *you* must supply proof of delay of checked baggage from the *common carrier* and original receipts of purchase:
 - a. original itemized receipts for expenses actually incurred;
 - b. a copy of the baggage claim ticket;
 - c. a copy of *your* airline or *common carrier* ticket;
 - d. verification of the delay of checked baggage from the airline or *common carrier* including the reason and the duration of the delay; and
 - e. a copy of the delivery receipt.

RENTAL VEHICLE INSURANCE

1. A completed claim form, available by contacting CAA Assistance) at the phone number(s) above.
2. An official police accident report for losses in excess of \$1,000.

3. A copy of the signed rental agreement.
4. A copy of the *commercial rental agency's* damage report.
5. A complete copy (front and back) of driver's license.
6. A copy of damage or repair estimate.
7. A copy of personal or business vehicle insurance policy.
8. Proof of settlement (denial or payment) from personal or business vehicle insurance policy.