

TIPS on T.I.P.S. - February 2024

A Closer Look at the Pre-Existing Condition Exclusions on the Visitor to Canada Plans

When you sell 21st Century Visitor to Canada Insurance, it is very important that you know the difference between the Basic, Standard and Enhanced plan. One of the biggest differences between the three plans is how they treat pre-existing conditions. Be sure you are selling the appropriate coverage to your client. If they have any pre-existing conditions, they will not usually be covered with Basic or Standard. Only the Enhanced Plan covers pre-existing conditions and then, only if the condition is stable.

Basic

With the Basic Plan, there is **NO coverage for pre-existing conditions**. This means if an insured has been treated for a condition at any point in their lifetime, that condition would be excluded from coverage on the policy.

*It is also important to note that Basic is a Reduced Benefit Plan, meaning there are some coverages that are not included, in addition to having no coverage for pre-existing conditions. In the Introduction on page 2 of the <u>Basic Policy Wording</u>, you can review a summary of what is NOT covered on the Basic Plan compared to the other plans.

Standard

With the Standard Plan, there is **NO coverage for any pre-existing conditions that exist in the 180 days prior to the policy effective date**.

For example, if your client currently has hypertension, that condition clearly *exists* in the 180 days prior to their effective date, and there would be no coverage for hypertension on the policy. On the other hand, if your client was treated for hypertension more than 180 days in the past, but it has not required any medication or treatment and has not displayed any symptoms for more than 180 days, they would have coverage for a new diagnosis of hypertension under the Standard Plan.

As another example, if your client was treated for an ear infection two years ago and the condition was resolved and has not reoccurred since then, they would have coverage for a new ear infection under a Standard Plan policy since the ear infection did not exist in the 180 prior to their effective date.

Essentially, if a client has a claim with Standard coverage, the Claims department will only look for the existence of the condition in the 180 days prior to the effective date. Any conditions that <u>exist</u> in that 180-day period would be excluded from coverage.

Enhanced

With the Enhanced Plan, we cover **pre-existing conditions that have been STABLE in the 180 days prior to the policy effective date**. The key here is that the pre-existing condition must not meet the definition of an "Unstable condition". You can view the definition of Unstable Condition on page 10 of the <u>Enhanced Policy Wording</u>. If any of the listed items apply, the condition would be considered unstable, and would not be covered on the Enhanced Plan.

Here are three examples to illustrate how a pre-existing condition would be treated with Basic, Standard, or Enhanced coverage.

Example 1

Condition	Basic	Standard	Enhanced
takes medication for it. In the last 180 days, there has been no change to his condition, no worsening	will not cover any pre- existing condition, no matter when it existed in their lifetime	existing condition that existed in the 180 days prior to the policy	COVERED [*] . Enhanced will cover a pre-existing condition provided it has been stable in the 180 days prior to the policy effective date.

*Subject to the terms, limitations, and exclusions of the policy.

Example 2

Condition	Basic	Standard	Enhanced
hypertension 3 years ago, and currently takes medication for it. Two months ago, their doctor	NOT COVERED. Basic will not cover any pre- existing condition, no matter when it existed in their lifetime	existing condition that existed in the 180 days prior to the policy	NOT COVERED. Inhanced will NOT cover pre-existing condition hat has been unstable in he 180 days prior to the policy effective date.

Example 3

Condition	Basic	Standard	Enhanced
diabetes 10 years ago, but by implementing lifestyle changes they were able to normalize their blood	will not cover any pre- existing condition, no matter when it existed	COVERED*. Standard will cover a pre-existing condition if it <i>did not exist</i> in the 180 days prior to the policy effective date.	condition provided it

*Subject to the terms, limitations, and exclusions of the policy.

Acceptable Methods of Payments for Policies

The only acceptable methods of payment in TIPS are Visa and MasterCard. If your client does not have a Visa or MasterCard, please have them e-transfer full payment to <u>wendy@21stcenturytravelins.com</u> make sure they include the quote number in the transfer. Our office will process the payment and notify you when the policy has been issued. E-transfer is not available for the Visitor to Canada monthly payment plan. **REMEMBER** – you are not allowed to use your own credit card for a client's policy as per insurance regulations.

> 1040 Division Street, Unit 18 Cobourg, ON K9A 5Y5 Phone: 1-800-567-0021 Fax: 1-866-285-5727