

# Flow

B2C

Generic Page

Product Page

Select product

Minimum eligibility questions

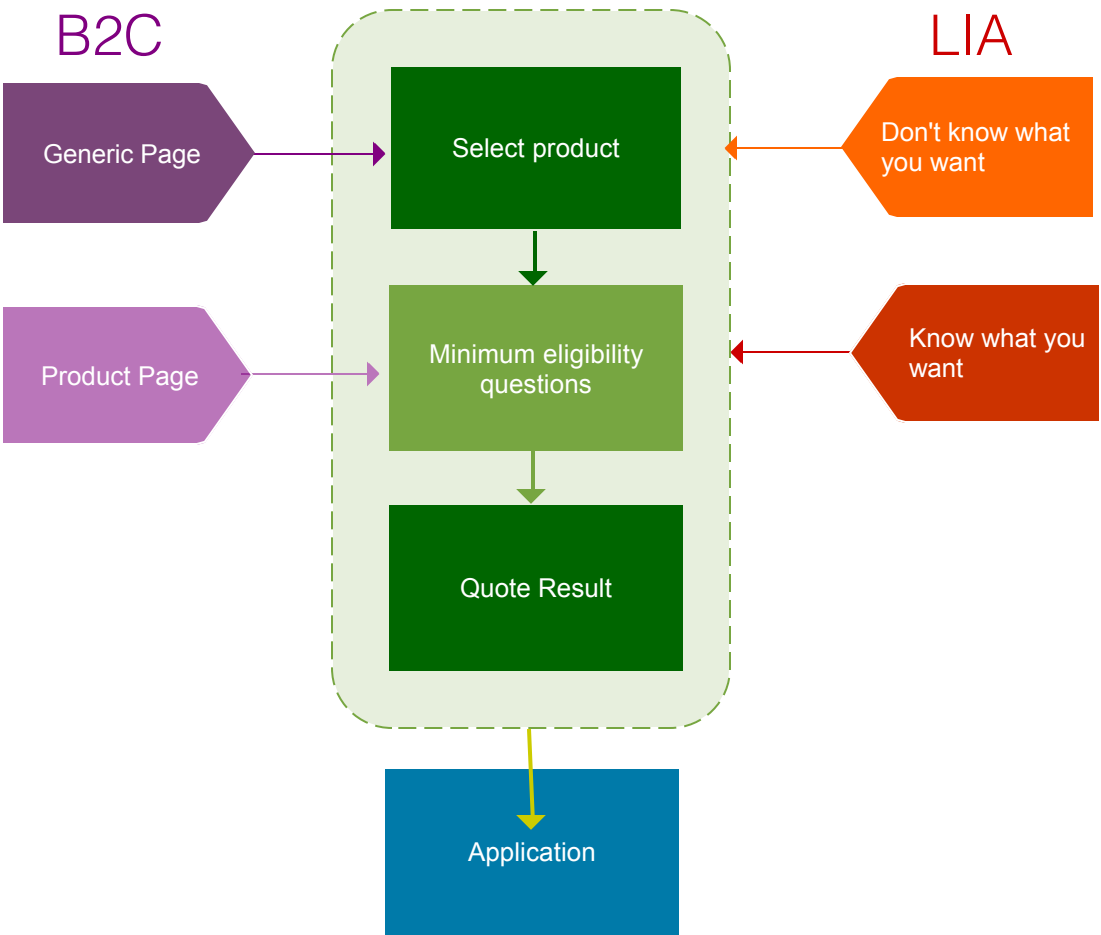
Quote Result

Application

LIA

Don't know what you want

Know what you want



Started your quote already?

RETRIEVE A SAVED QUOTE >

1

1

2

3

4

GET YOUR QUOTE

SELECT YOUR PLAN

APPLICATION

PURCHASED

What do I need?

I am

a Canadian Travelling Abroad or Out of Province

a student studying in Canada or Abroad

a visitor to Canada or new Immigrant

need a top-up to an already purchased multi-trip plan?

?

2

Annotation

1

Click to retrieve a saved quote, to page 0.1.0

2

Provide "Help" to define this term. Hover to show information

×

Lorem ipsum dolor sit amet, consectetur adipiscing elit. Aenean euismod bibendum laoreet. Proin gravida d

Started your quote already?

RETRIEVE A SAVED QUOTE

1

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GET YOUR QUOTE

SELECT YOUR PLAN

APPLICATION

PURCHASED

What do I need?

I 

am a Canadian Travelling Abroad or Out of Province

am a student studying in Canada or Abroad

am a visitor to Canada or new Immigrant

need a top-up to an already purchased multi-trip plan?

?

I will travel

one trip this time

more than one trip this year

?

Annotation

- 1 Select Out of Province will open the single/multiple trip questions
- 2 Open the questions on the same page

Started your quote already?

RETRIEVE A SAVED QUOTE

1

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4

GET YOUR QUOTE

SELECT YOUR PLAN

APPLICATION

PURCHASED

What do I need?

I 

am a Canadian Travelling Abroad or Out of Province

am a student studying in Canada or Abroad

am a visitor to Canada or new Immigrant

need a top-up to an already purchased multi-trip plan?

?

I will travel 

one trip this time

more than one trip this year

?

My trip detail:

Destination city:

My trip coverage begins on:

My trip coverage ends on:

My information:

Province of Residence

Trip Cost

Number of Travellers

Date of birth

GET A QUOTE >

Annotation

1 Select the single trip to open the related eligible questions

2 Open the questions on the same page

1234

GET YOUR QUOTESELECT YOUR PLANAPPLICATIONPURCHASED

Started your quote already?

RETRIEVE A SAVED QUOTE

What do I need?

I

☒ am a Canadian Travelling Abroad or Out of Province

☐ am a student studying in Canada or Abroad

☐ am a visitor to Canada or new Immigrant

☐ need a top-up to an already purchased multi-trip plan? ?

I will travel

☒ one trip this time

☐ more than one trip this year ?

My trip detail:

Destination city:

Hongkong

My trip coverage begins on:

2015

04

09

My trip coverage ends on:

2015

04

20

My information:

Province of Residence

Ontario

Number of Travellers

3

1

Primary applicant date of birth

1964

08

09

2

My

spouse

▼

3

1968

06

20

My

dependent child

▼

1990

04

20

GET A QUOTE >

Annotation

- 1Input number of travellers to open the relevent number of DOB filled box
- 2System automatically generate the age after users input the DOB
- 3Select the relation ship with the primary traveller, depend on what the user input the system will drive them to the right plan and provide correct discount

select

▼

spouse

companion

couple (TBD)

dependent child/ grandchild

Started your quote already?  
RETRIEVE A SAVED QUOTE

1

2

3

4

GET YOUR QUOTESELECT YOUR PLANAPPLICATIONPURCHASED

What do I need?

I ☒ am a Canadian Travelling Abroad or Out of Province

☐ am a student studying in Canada or Abroad

☐ am a visitor to Canada or new Immigrant

☐ need a top-up to an already purchased multi-trip plan?

I will travel ☒ one trip this time

☐ more than one trip this year ?

My trip detail:

Destination city:

Hongkong

My trip coverage begins on:

2015

04

09

My trip coverage ends on:

2015

04

20

My information:

Province of Residence

Ontario

Number of Travellers

3

Primary applicant date of birth

1964

08

09

My 

spouse

1968

06

20

My 

child

1990

04

20

GET A QUOTE >

Number of travellers

1

Primary applicant date of birth

1964

08

09

Age:50

Number of travellers

2

Primary applicant date of birth

1964

08

09

Age:50

My 

spouse

1968

06

20

Age:46

Number of travellers

3

Primary applicant date of birth

1964

08

09

Age:50

My 

spouse

1944

06

20

Age:70

My 

Dependent child/ grandchild

1990

04

20

Age:24

Number of travellers

3

Primary applicant date of birth

1964

08

09

Age:50

My 

companion

1968

06

20

Age:46

My 

companion

1968

06

20

Age:46

Annotation

examples for different discount / plan

1Family discout

2Individual

3Couple discount

4Companion (age over 55, not eligible for family discount)

5Companion

1

2

3

4

GET YOUR QUOTE

SELECT YOUR PLAN

APPLICATION

PURCHASED

Single Trip		Multiple Trip	
	Single Trip Emergency Medical	Single Trip All- Inclusive	Trip Cancellation/ Interruption
Emergency Medical	✓	✓	
Trip Cancellation and Interruption		✓	✓
Baggage Loss, Delay and Damage		✓	
Flight and Travel Accident		✓	
Sub Total: (family discount)	\$72	\$75	\$78
	<div><div><input type="checkbox"/> Bounce Back</div><div>Number of travellers</div><div>select ▼</div><div>what is this?</div></div>	<div><div><input type="checkbox"/> Bounce Back</div><div>Number of travellers</div><div>select ▼</div><div>what is this?</div></div>	
	<div><div>Deductible Amount:</div><div>\$500 ▼</div><div>what is this?</div></div>		<div><div>Covered Amount Before Departure:</div><div>\$0 ▼</div><div>what is this?</div></div>
Total (Tax included)	\$82	\$75	\$78

3

☐ SELECT PLAN

☐ SELECT PLAN

☐ SELECT PLAN

Need help to choose? ☐ Yes

< BACK

APPLY >

Annotation

Comparison Chart for family

- 1

Show comparison chart which include coverage details and price.  
Business requirement: BRD006  
Ability to provide the end user with more quoted plans for comparison purposes.
- 2

Optional rider, example BounceBack
- 3

Select plan function, can be multiple selected if eligible

1

2

3

4

GET YOUR QUOTE

SELECT YOUR PLAN

APPLICATION

PURCHASED

Single Trip		Multiple Trip	
	Single Trip Emergency Medical	Single Trip All- Inclusive	Trip Cancellation/ Interruption
Emergency Medical	✓	✓	
Trip Cancellation and Interruption		✓	✓
Baggage Loss, Delay and Damage		✓	
Flight and Travel Accident		✓	
Sub Total: (family discount)	\$72	\$75	\$78
	<div><div><input type="checkbox"/> Bounce Back</div><div>Number of travellers</div><div>select ▼</div><div>what is this?</div></div>	<div><div><input type="checkbox"/> Bounce Back</div><div>Number of travellers</div><div>select ▼</div><div>what is this?</div></div>	
	<div><div>Deductible Amount:</div><div>\$500 ▼</div><div>what is this?</div></div>		<div><div>Covered Amount Before Departure:</div><div>\$0 ▼</div><div>what is this?</div></div>
Total (Tax included)	\$82	\$75	\$78

☐ SELECT PLAN

☐ SELECT PLAN

Need help to choose? ☒ Yes 1

☒ QUESTION #1

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☒ QUESTION #1

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adipiscing elit. Aenean  
euismod bibendum  
laoreet. Proin?

Choose different plan for each traveller? ? ☐ Yes

< BACK

APPLY >

Annotation

Comparison Chart for family

- 1 Help tool, questions to help user to select the right plan
- 2 Highlight the recommended plan according to user's answer in the help tool



1

2

3

4

GET YOUR QUOTESELECT YOUR PLANAPPLICATIONPURCHASED

Single Trip

Multiple Trip

Multiple Trip  
Emergency Medical

Multiple Trip  
All-Inclusive

Trip Duration ?4 days1

Emergency Medical

✓

✓

Trip Cancellation and Interruption

✓

Baggage Loss, Delay and Damage

✓

Flight and Travel Accident

✓

Deductible Amount:  
\$500

Sub Total:

\$20

\$28

Top up ?

4 days2

Top up deductible

\$500

Top -up:

\$4

\$4

Total:  
(Tax included)

\$29

\$39

Need help to choose? ☒ Yes

☒ QUESTION #1  
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☒ QUESTION #1  
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APPLY >

Annotation

Comparison Chart for family

- 1BRD009 Provide the ability to quote & Issue different plan for each traveler
- 2Select their own plan for each traveller

Single Trip Emergency Medical

Single Trip All-Inclusive  
Trip Cancellation/Interruption

1

2

3

4

GET YOUR QUOTESELECT YOUR PLANAPPLICATIONPURCHASED

	Single Trip Emergency Medical	Single Trip All- Inclusive	Trip Cancellation/ Interruption
Emergency Medical	✓	✓	
Trip Cancellation and Interruption		✓	✓
Baggage Loss, Delay and Damage		✓	
Flight and Travel Accident		✓	
Sub Total	\$23	\$ 29	\$18
	<div><input type="checkbox"/> Bounce Back Number of travellers: select what is this?</div>	<div><input type="checkbox"/> Bounce Back Number of travellers: select what is this?</div>	
	<div>Deductible Amount: \$500 what is this?</div>		<div>Covered Amount Before Departure: \$0 what is this?</div>
Total	\$26	\$ 29	\$18

☐ SELECT PLAN

☐ SELECT PLAN

☐ SELECT PLAN

Need help to choose? ☒ Yes

☒ QUESTION #1  
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APPLY >

Annotation

Comparison Chart for Individual

1

2

3

4

GET YOUR QUOTESELECT YOUR PLANAPPLICATIONPURCHASED

Single Trip		Multiple Trip	
	Single Trip Emergency Medical	Single Trip All-Inclusive	Trip Cancellation/ Interruption
Emergency Medical	✓	✓	
Trip Cancellation and Interruption		✓	✓
Baggage Loss, Delay and Damage		✓	
Flight and Travel Accident		✓	
Sub Total	?	?	\$78
	<div><div><input type="checkbox"/> Bounce Back</div><div>Number of travellers</div><div>select</div><div>what is this?</div></div>	<div><div><input type="checkbox"/> Bounce Back</div><div>Number of travellers</div><div>select</div><div>what is this?</div></div>	
	<div><div>Deductible Amount:</div><div>\$500</div><div>what is this?</div></div>		<div><div>Covered Amount Before Departure:</div><div>\$0</div><div>what is this?</div></div>
Total	?	?	\$78

☐ SELECT PLAN

☐ SELECT PLAN

☐ SELECT PLAN

Need help to choose? ☒ Yes

☒ QUESTION #1

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☒ QUESTION #1

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APPLY >

Annotation

Comparison Chart for Individual (age above 60)

1 Hover to show medical questionnaire request

MEDICAL QUESTIONNAIRE REQUIRED

For a quote on this plan, you are required to fill out a short medical questionnaire.

2

CLICK TO START

2 Click to open the MQ



1

2

3

4

GET YOUR QUOTESELECT YOUR PLANAPPLICATIONPURCHASED

Recommend

Single Trip Emergency

Single Trip All-

Trip Cancellation/

MEDICAL QUESTIONNAIRE

1.Lorem ipsum dolor sit amet, consectetur adipiscing elit. Aenean euismod bibendum laoreet.

YESNO

2.Lorem ipsum dolor sit amet, consectetur adipiscing elit. Aenean euismod bibendum laoreet.

YESNO

3.Lorem ipsum dolor sit amet, consectetur adipiscing elit. Aenean euismod bibendum laoreet.

YESNO

4.Lorem ipsum dolor sit amet, consectetur adipiscing elit. Aenean euismod bibendum laoreet.

YESNO

5.Lorem ipsum dolor sit amet, consectetur adipiscing elit. Aenean euismod bibendum laoreet.

YESNO

Next

	<div><div><div><div><div><div></div></div></div><div>Bounce Back</div><div>what is this?</div></div></div></div>	<div><div><div><div><div></div></div></div><div>Bounce Back</div><div>what is this?</div></div></div>	
	<div><div><div><div><div></div></div></div><div>Deductible Amount:</div><div>\$500</div><div>what is this?</div></div></div>		<div><div><div><div><div></div></div></div><div>Covered Amount Before Departure:</div><div>\$0</div><div>what is this?</div></div></div>
Total	<div><div></div></div>	<div><div></div></div>	\$78

SELECT PLAN

SELECT PLAN

SELECT PLAN

Need help to choose? 

Yes

QUESTION #1

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QUESTION #1

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QUESTION #1

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< BACK

APPLY >

Annotation

1 Questionnaire for individual traveler

2 Questionnaire for multiple traveler

If you haven't finish the questionnaire and try to close the window, the follow window will pop up

You haven't finish the questionnaire, if you quit now, you can not get your premium, are you sure you want to quit?  
(wording can be changed)

Continue

Cancel

1

2

3

4

GET YOUR QUOTESELECT YOUR PLANAPPLICATIONPURCHASED

Recommend

	Single Trip Emergency Medical	Single Trip All- Inclusive	Trip Cancellation/ Interruption
Emergency Medical	✓	✓	
Trip Cancellation and Interruption		✓	✓
Baggage Loss, Delay and Damage		✓	
Flight and Travel Accident		✓	
Sub Total	\$23	\$ 29	\$18
	<div><input type="checkbox"/> Bounce Back Number of travellers: select what is this?</div>	<div><input type="checkbox"/> Bounce Back Number of travellers: select what is this?</div>	
	<div>Deductible Amount: \$500 what is this?</div>		<div>Covered Amount Before Departure: \$0 what is this?</div>
Total	\$26	\$ 29	\$18

☐ SELECT PLAN

☐ SELECT PLAN

☐ SELECT PLAN

Need help to choose? ☒ Yes

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laoreet. Proin?

< BACK

APPLY >

Annotation

- INDIVIDUAL FINISH THE QUESTIONNAIRE AND ELIGIBLE TO GET THEIR PREMIUM

-NOT ELEGIBLE TO GET THEIR PREMIUM

1

2

3

4

GET YOUR QUOTESELECT YOUR PLANAPPLICATIONPURCHASED

Recommend

Single Trip Emergency Medical

Single Trip All-Inclusive

Trip Cancellation/ Interruption

Emergency Medical

Trip Cancellation/ Interruption

Base Premium

Flight and Travel Accident

✓

Sub Total

\$23

\$ 29

\$18

Bounce Back

Number of travellers

select

what is this?

Bounce Back

Number of travellers

select

what is this?

Deductible Amount:

\$500

what is this?

Covered Amount Before Departure:

\$0

what is this?

Total

\$26

\$ 29

\$18

SELECT PLAN

SELECT PLAN

SELECT PLAN

Need help to choose? ☒ Yes

☒ QUESTION #1

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☒ QUESTION #1

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☒ QUESTION #1

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< BACK

APPLY >

Annotation

1 Individual traveler not eligible to get the premium

2 For the scenarios where multiple people are doing the Medical Questionnaire, and one person "finish" before the other

MEDICAL QUESTIONNAIRE

X

1.Lorem ipsum dolor sit amet, consectetur adipiscing elit. Aenean euismod bibendum laoreet.

# Traveller 1

☐ YES ☐ NO

# Traveller 2

☐ YES ☐ NO

# Traveller 3

☐ YES ☐ NO

2.Lorem ipsum dolor sit amet, consectetur adipiscing elit. Aenean euismod bibendum laoreet.

# Traveller 1

☐ YES ☐ NO

# Traveller 2

☐ YES ☐ NO

# Traveller 3

☐ YES ☐ NO

3.Lorem ipsum dolor sit amet, consectetur adipiscing elit. Aenean euismod bibendum laoreet.

# Traveller 1

☐ YES ☐ NO

# Traveller 2

☐ YES ☐ NO

# Traveller 3

☐ YES ☐ NO

4.Lorem ipsum dolor sit amet, consectetur adipiscing elit. Aenean euismod bibendum laoreet.

# Traveller 1

☐ YES ☐ NO

# Traveller 2

☐ YES ☐ NO

# Traveller 3

☐ YES ☐ NO

5.Lorem ipsum dolor sit amet, consectetur adipiscing elit. Aenean euismod bibendum laoreet.

# Traveller 1

☐ YES ☐ NO

# Traveller 2

☐ YES ☐ NO

# Traveller 3

☐ YES ☐ NO

NEXT

! Traveller 2 is not eligible for the premium

- Show client the eligible plan

1

2

3

4

GET YOUR QUOTESELECT YOUR PLANAPPLICATIONPURCHASED

	Single Trip Emergency Medical	Single Trip All- Inclusive	Trip Cancellation/ Interruption
Emergency Medical	✓	✓	
Trip Cancellation and Interruption		✓	✓
Baggage Loss, Delay and Damage		✓	
Flight and Travel Accident		✓	
Sub Total			\$18
	<div><input type="checkbox"/> Bounce Back Number of travellers: select what is this?</div>		
			<div>Covered Amount Before Departure: \$0 what is this?</div>
Total			\$18

☐ SELECT PLAN

☐ SELECT PLAN

☐ SELECT PLAN

Need help to choose? ☒ Yes

☐ QUESTION #1  
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< BACK

Next >

Annotation

1 Show the eligible plan only

1

2

3

4

GET YOUR QUOTESELECT YOUR PLANAPPLICATIONPURCHASED

What do I need?

I am a Canadian Travelling Abroad or Out of Province

I will travel one trip this time

EDIT

My trip detail:

Destination city: Hongkong

My trip coverage begins on: 2015-04-09

My trip coverage ends on: 2015-04-20

EDIT

My information:

Residence province: Ontario

I need coverage for my family

Number of Traveler :3

Primary's date of birth: 1974-08-09

Spouse's date of birth: 1974-01-09

Dependent child's date of birth: 1990-04-20

1 EDIT

TRAVEL CANADA EMERGENCY MEDICAL \*\*\*

SELECTED PLAN

[Plan detail](#)

TOTAL: \$ 71.00

< BACK

SAVE QUOTE2

APPLY >

Annotation

- 1 Edit my information
- 2 Save Quote



Started your quote already?

RETRIEVE A SAVED QUOTE

1

2

3

4

GET YOUR QUOTE

SELECT YOUR PLAN

APPLICATION

PURCHASED

What do I need?

I

☒

am a Canadian Travelling Abroad or Out of Province

☐

am a student studying in Canada or Abroad

☐

am a visitor to Canada or new Immigrant

☐

need a top-up to an already purchased multi-trip plan?

I will travel

☒

one trip this time

☐

more than one trip this year

My trip detail:

Destination city:

Hongkong

My trip coverage begins on:

2015

04

09

My trip coverage ends on:

2015

04

20

My information:

Province of Residence

Ontario

Number of Travellers

3

Primary applicant date of birth

1964

08

09

Age:50

My

spouse

1968

06

20

Age:36

My

child

1990

04

20

Age:25

GET A QUOTE >

Annotation

Edit my information

- 1
- Edit the section which the user want to change

1

2

3

4

GET YOUR QUOTESELECT YOUR PLANAPPLICATIONPURCHASED

Started your quote already?

RETRIEVE A SAVED QUOTE

What do I need?

I ☒ am a Canadian Travelling Abroad or Out of Province

☐ am a student studying in Canada or Abroad

☐ am a visitor to Canada or new Immigrant

☐ need a top-up to an already purchased multi-trip plan? 

?

I will travel ☐ one trip this time

☒ more than one trip this year 

?

My trip detail:

My trip coverage begins on: 

?

YYYY

MM

DD

Select your trip duration option. 

?

1

☐ 4 Days

☐ 10 Days

☐ 18 Days

☐ 30 Days

If your first trip is longer than the duration option you selected above, you can purchase additional "top-up" coverage for the additional number of days required. (Top-ups for future trips throughout the year can be purchased by a stand-alone product). Do you need top-up coverage at this time?

☐ Yes

days

My information:

Province of Residence

Ontario

Number of Travellers

GET A QUOTE >

Annotation

1 Top up selection

Started your quote already?

RETRIEVE A SAVED QUOTE

1

2

3

4

GET YOUR QUOTE

SELECT YOUR PLAN

APPLICATION

PURCHASED

What do I need?

I

☒

am a Canadian Travelling Abroad or Out of Province

☐

am a student studying in Canada or Abroad

☐

am a visitor to Canada or new Immigrant

☐

need a top-up to an already purchased multi-trip plan? ?

I will travel

☐

one trip this time

☒

more than one trip this year ?

My trip detail:

My trip coverage begins on: ?

2015

04

20

Select your trip duration option. ?

☒ 4 Days

☐ 10 Days

☐ 18 Days

☐ 30 Days

If your first trip is longer than the duration option you selected above, you can purchase additional "top-up" coverage for the additional number of days required. (Top-ups for future trips throughout the year can be purchased by a stand-alone product). Do you need top-up coverage at this time?

☒ Yes

4

days

My information:

Province of Residence

Ontario

Number of travellers

1

Primary applicant date of birth

1964

08

09

Age:50

☐ Do you have a travel companion ? ?

GET A QUOTE >

Annotation

1 Travel companion



- 1

GET YOUR QUOTE
- 2

SELECT YOUR PLAN
- 3

APPLICATION
- 4

PURCHASED

	Multiple Trip Emergency Medical	Multiple Trip All-Inclusive
Trip Duration <span>?</span> 4 days <span>1</span>		
Emergency Medical	✓	✓
Trip Cancellation and Interruption		✓
Baggage Loss, Delay and Damage		✓
Flight and Travel Accident		✓
	<div>Deductible Amount: \$500 <span>▼</span></div>	
Sub Total:	\$20	\$28
Top up <span>?</span> 4 days <span>2</span> Top up deductible \$500 <span>▼</span>		
Top -up:	\$4	\$4
Total: (Tax included)	\$29	\$39

Select Plan

Select Plan

Need help to choose? ☒ Yes

☒ QUESTION #1  
Lorem ipsum dolor sit amet, consectetur adipiscing elit. Aenean euismod bibendum laoreet. Proin?

☒ QUESTION #1  
Lorem ipsum dolor sit amet, consectetur adipiscing elit. Aenean euismod bibendum laoreet. Proin?

☒ QUESTION #1  
Lorem ipsum dolor sit amet, consectetur adipiscing elit. Aenean euismod bibendum laoreet. Proin?

< BACK

NEXT >

Annotation

- 1

Show trip duration days, easy to duration in this page in order to see the price difference
- 2

Show top up days selection

Started your quote already?

RETRIEVE A SAVED QUOTE

1

2

3

4

GET YOUR QUOTE

SELECT YOUR PLAN

APPLICATION

PURCHASED

What do I need?

I

☒

am a Canadian Travelling Abroad or Out of Province

☐

am a student studying in Canada or Abroad

☐

am a visitor to Canada or new Immigrant

☐

need a top-up to an already purchased multi-trip plan?

I will travel

☐

one trip this time

☒

more than one trip this year

My trip detail:

My trip coverage begins on:

2015

04

20

Select your trip duration option.

☒4 Days

☐10 Days

☐18 Days

☐30 Days

If your first trip is longer than the duration option you selected above, you can purchase additional "top-up" coverage for the additional number of days required. (Top-ups for future trips throughout the year can be purchased by a stand-alone product). Do you need top-up coverage at this time?

☐Yes

days

My information:

Province of Residence

Ontario

Number of Travellers

3

Primary applicant date of birth

1964

08

09

My

companion

1968

06

20

My

companion

1968

06

20

GET A QUOTE >

Annotation

Multiple Individual

Annotation

Multiple Individual

- 1

Able to select different plan for each traveler

1

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GET YOUR QUOTE

SELECT YOUR PLAN

APPLICATION

PURCHASED

	Emergency Medical	All-Inclusive
Emergency Medical	✓	✓
Trip Cancellation and Interruption		✓
Baggage Loss, Delay and Damage		✓
Flight and Travel Accident		✓
Traveller 1	\$20	\$17
Traveller 2	\$20	\$17
Traveller 2	\$20	\$17

Select Plan

Select Plan

Need help to choose? ☒ Yes

☒ QUESTION #1

Lorem ipsum dolor sit amet, consectetur adipiscing elit. Aenean euismod bibendum laoreet. Proin?

☒ QUESTION #1

Lorem ipsum dolor sit amet, consectetur adipiscing elit. Aenean euismod bibendum laoreet. Proin?

☒ QUESTION #1

Lorem ipsum dolor sit amet, consectetur adipiscing elit. Aenean euismod bibendum laoreet. Proin?

Traveller 1

Emergency Medical

Trip Duration ? 4 days

Deductible Amount: ? \$500

☐ BounceBack ?

\$20

Traveller 2

All-inclusive

Trip Duration ? 4 days

Deductible Amount: ? \$500

☐ BounceBack ?

\$32

Traveller 3

All-inclusive

Trip Duration ? 4 days

Deductible Amount: ? \$500

☐ BounceBack ?

\$32

NO DISCOUNT TOTAL :

\$84

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NEXT >

Started your quote already?

RETRIEVE A SAVED QUOTE

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GET YOUR QUOTE

SELECT YOUR PLAN

APPLICATION

PURCHASED

What do I need?

I

☐

am a Canadian Travelling Abroad or Out of Province

☐

am a student studying in Canada or Abroad

☒

am a visitor to Canada or new Immigrant

☐

need a top-up to an already purchased multi-trip plan? 

?

My trip detail:

My trip coverage begins on: 

?

My trip coverage ends on:

My information:

Province of Residence

Number of Travellers

GET A QUOTE >

Started your quote already?  
RETRIEVE A SAVED QUOTE

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GET YOUR QUOTESELECT YOUR PLANAPPLICATIONPURCHASED

What do I need?

I

am a Canadian Travelling Abroad or Out of Province

am a student studying in Canada or Abroad

am a visitor to Canada or new Immigrant

?

need a top-up to an already purchased multi-trip plan?

?

My trip detail:

My trip coverage begins on: ?

20150409

My trip coverage ends on:

20150420

My information:

Province of Residence

Ontario

Number of Travellers

1

Primary applicant date of birth

19640809

Age:50

Do you have a travel companion?

?

GET A QUOTE >



1

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GET YOUR QUOTESELECT YOUR PLANAPPLICATIONPURCHASED

	Plan A (Have Recent Health Issues)	Plan B (No Recent Health Issues)
Eligibility	Plan A does not provide coverage for any medical condition, diagnosed or undiagnosed, which existed or for which you sought or received medical advice, consultation, investigation, or for which treatment was required or recommended by a physician, in the 180 days before the effective date.	Plan B provides coverage for your stable pre-existing medical conditions (within 180 days before the effective date of the insurance) and is available for applicants who meet the eligibility requirements.
Coverage Detail	<div><div>✓</div>Emergency Medical</div> <div><div>✓</div>Travel Accident</div> <div><div>✓</div>Side Trips Outside Canada</div> <div><div>✓</div>Trip Interruption (optional)</div>	
	Emergency Medical Coverage Amount: <div>\$15,000</div>	Emergency Medical Coverage Amount: <div>\$15,000</div>
	Deductible Amount: <div>\$15,000</div>	Deductible Amount: <div>\$15,000</div>
	<div><div><input type="checkbox"/> Trip interruption</div><div>what is this?</div></div>	<div><div><input type="checkbox"/> Trip interruption</div><div>what is this?</div></div>
Total	\$ 35.00	<div>?</div>

Select Plan

Select Plan

< BACK

NEXT >

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GET YOUR QUOTESELECT YOUR PLANAPPLICATIONPURCHASED

	Plan A (Have Recent Health Issues)	Plan B (No Recent Health Issues)
Eligibility	Plan A does not provide coverage for any medical condition, diagnosed or undiagnosed, which existed or for which you sought or received medical advice, consultation, investigation, or for which treatment was required or recommended by a physician, in the 180 days before the effective date.	Plan B provides coverage for your stable pre-existing medical conditions (within 180 days before the effective date of the insurance) and is available for applicants who meet the eligibility requirements.
Coverage Detail	<div><div>✓</div>Emergency Medical</div> <div><div>✓</div>Travel Accident</div> <div><div>✓</div>Side Trips Outside Canada <div>?</div></div> <div><div>✓</div>Trip Interruption (optional)</div>	
	Emergency Medical Coverage Amount: <div>\$15,000</div>	Emergency Medical Coverage Amount: <div>\$15,000</div>
	Deductible Amount: <div>\$15,000</div>	Deductible Amount: <div>\$15,000</div>
	<div><div><input type="checkbox"/> Trip interruption</div><div>what is this?</div></div>	<div><div><input type="checkbox"/> Trip interruption</div><div>what is this?</div></div>
Total	\$ 35.00	<div>?</div>

Select Plan

Select Plan

!

For Visitors to Canada; Canadians who are not eligible for a government health insurance plan; persons who are in Canada on a work or student visa; or new immigrants who are awaiting government health insurance plan coverage.

COVERAGE ELIGIBILITY

You are not eligible for coverage under this policy if any of the following apply to you:  
You are travelling against the advice of a physician;  
You have been diagnosed with a terminal illness with less than 2 years to live;  
You have a kidney condition requiring dialysis;  
You have used home oxygen during the 12 months prior to the date of application;  
You have been diagnosed with Alzheimer's disease or any other form of dementia;  
You are under 30 days or over 85 years of age (over 69 years of age for \$150,000);  
You reside in a nursing home, home for the aged, other long term care facility or rehabilitation centre;  
You require assistance with activities of daily living (eating, bathing, using the toilet, changing positions (including getting in and out of a bed or chair) and dressing).

Click the next button certifies you have read and accept the conditions

< BACK

NEXT >

Annotation

Select Plan A

- 1 Show eligible condition after select a plan

1

2

3

4

GET YOUR QUOTE

SELECT YOUR PLAN

APPLICATION

PURCHASED

What do I need?

I am a Vistor to Canada

EDIT

My trip detail:

My trip coverage begins on: 2015-04-09

My trip coverage ends on: 2015-04-20

EDIT

My information:

Residence province: Ontario

Number of traveller: 1

Date of Birth: 1990-04-20

EDIT

TRAVEL CANADA EMERGENCY MEDICAL

SELECTED PLAN

[Plan detail](#)

TOTAL: \$ 35.00

!

1

Pre-Existing Condition Exclusion

We will not pay any expenses relating to:  
any medical condition, diagnosed or undiagnosed, which existed or for which you sought or received medical advice, consultation, investigation, or for which treatment was required or recommended by a physician, within the 180 days prior to the effective date;  
any heart condition if, in the 180 days before the effective date, you required any form of nitroglycerine for the relief of angina pain; and/or  
any lung condition, if in the 180 days before the effective date, you required treatment with oxygen or prednisone for a lung condition.

Click the apply button certifies you have read and accept the conditions

< BACK

SAVE QUOTE

APPLY >

Annotation

Select Plan A

1 Each Plan A and Plan B has different pre-existing exclusion




Started your quote already?

RETRIEVE A SAVED QUOTE



What do I need?

- I ☐ am a Canadian Travelling Abroad or Out of Province  
☒ am a student studying in Canada or Abroad  
☐ am a visitor to Canada or new Immigrant  
☐ need a top-up to an already purchased multi-trip plan? 

- I am ☐ a Canadian studying outside Canada  
☐ a Canadian studying within Canada but away from my principal province of residence  
☐ an International student studying in Canada

GET A QUOTE >



Started your quote already?

RETRIEVE A SAVED QUOTE

- 1

2

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4
- GET YOUR QUOTESELECT YOUR PLANAPPLICATIONPURCHASED

What do I need?

- I ☐ am a Canadian Travelling Abroad or Out of Province
- ☒ am a student studying in Canada or Abroad
- ☐ am a visitor to Canada or new Immigrant
- ☐ need a top-up to an already purchased multi-trip plan? ?

- I am ☒ a Canadian studying outside Canada
- ☐ a Canadian studying within Canada but away from my principal province of residence
- ☐ an International student studying in Canada

My trip detail:

Education Start Date?

Departure Date:?

My trip coverage begins on: ?

My trip coverage ends on: ?

My information:

2 Province of Residence 

Ontario

Number of Travellers 

1

Primary applicant date of birth 

1990

04

20

 Age:25

GET A QUOTE >

Annotation

Select Plan A

- 1 If select Inbound Student above the following question instead

Education Start Date:

Arrival Date in Canada:

- 2 If Inbound

Province of Residence in Canada

Ontario

If National

Home Province of Residence

Ontario

If Outbound

Province of Residence

Ontario

1

2

3

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GET YOUR QUOTE

SELECT YOUR PLAN

APPLICATION

PURCHASED

	Outbound Student plan
Coverage Detail	<div><div>✓</div>Emergency Medical &amp; Non-Emergency Medical</div> <div><div>✓</div>Maternity Benefit</div> <div><div>✓</div>Annual Medical Examination</div> <div><div>✓</div>Accidental Death or Dismemberment</div> <div><div>✓</div>Accidental Death or Dismemberment</div>
Total	\$ 35.00

!

1

Lorem ipsum dolor sit amet, consectetur adipiscing elit. Aenean euismod bibendum laoreet. Proin gravida dolor sit amet lacus accumsan et viverra justo commodo. Proin sodales pulvinar tempor. Cum sociis natoque penatibus et magnis dis parturient montes, nascetur ridiculus mus. Nam fermentum, nulla luctus pharetra vulputate, felis tellus mollis orci, sed rhoncus sapien nunc eget odio.

Click the next button certifies you have read and accept the conditions

< BACK

NEXT >

Annotation

1 Eligible condition

1

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GET YOUR QUOTESELECT YOUR PLANAPPLICATIONPURCHASED

What do I need?

I am a student studying in Canada or Abroad  
I am a Canadian studying outside Canada (Outbound Student)

EDIT

My trip detail:

My trip coverage begins on: 2015-04-09  
My trip coverage ends on: 2015-04-20

EDIT

My information:

Residence province: Ontario  
Number of Travllers: 1  
Date of birth :1990-04-20

EDIT

TRAVEL CANADA EMERGENCY MEDICAL

SELECTED PLAN

[Plan detail](#)

TOTAL: \$ 71.00

!

1

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Click the next button certifies you have read and accept the conditions

< BACK

SAVE QUOTE

APPLY >

Annotation

1

 Legal condition

Started your quote already?

RETRIEVE A SAVED QUOTE

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GET YOUR QUOTE

SELECT YOUR PLAN

APPLICATION

PURCHASED

What do I need?

I ☐ am a Canadian Travelling Abroad or Out of Province

☐ am a student studying in Canada or Abroad

☐ am a visitor to Canada or new Immigrant

☒ need a top-up to an already purchased multi-trip plan? 

?

My trip detail:

My trip begins on:

My trip ends on:

Number of coverage days with your other travel insurance plan:  days 

?

My information:

Province of Residence

Number of Travellers

GET A QUOTE >



Started your quote already?

RETRIEVE A SAVED QUOTE

1

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GET YOUR QUOTE

SELECT YOUR PLAN

APPLICATION

PURCHASED

What do I need?

I

☐ am a Canadian Travelling Abroad or Out of Province

☐ am a student studying in Canada or Abroad

☐ am a visitor to Canada or new Immigrant

☒ need a top-up to an already purchased multi-trip plan?

My trip detail:

My trip coverage begins on:

2015

04

09

My trip coverage ends on:

2015

04

20

Number of coverage days with your other travel insurance plan:

3

 days

My information:

Province of Residence

Ontario

Number of Travellers

1

Primary applicant date of birth

1990

04

20

Age:25

GET A QUOTE >

1

2

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4

GET YOUR QUOTESELECT YOUR PLANAPPLICATIONPURCHASED

	3 DAYS TOP UP
Coverage Detail	<div><div>✓</div><div>Coverage Amount ?</div></div> <div><div>✓</div><div>Emergency Medical ?</div></div> <div><div>✓</div><div>Deductible Savings ?</div></div>
	Deductible Amount: <div>\$15,000</div>
Total	\$ 35.00

< BACK

NEXT >

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4

GET YOUR QUOTE

SELECT YOUR PLAN

APPLICATION

PURCHASED

SAVE QUOTE

First Name:Last Name:

Date of birth:

YYYY

MM

DD

Email:

YYYY

What do I need?

I am a Canadian Travelling Abroad or Out of Province

I will travel one trip this time

My trip detail:

Destination city: Hongkong

My trip coverage begins on: 2015-04-09

My trip coverage ends on: 2015-04-20

My information:

Residence province: Ontario

I need coverage for my family

Number of family member :3

Traveller 1's date of birth: 1974-08-09

Traveller 1's date of birth: 1974-01-09

Traveller 1's date of birth: 1990-04-20

< BACK

SAVE QUOTE >

1

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3

4

GET YOUR QUOTE

SELECT YOUR PLAN

APPLICATION

PURCHASED

SAVE QUOTE

First Name: Robert

Last Name: Green

Date of birth: 1974-08-09

QUOTE NUMBER: 00020394

We have send a confirmation message to your email:  
xxxxxxx@gmail.com

Continue

Started your quote already?

RETRIEVE A SAVED QUOTE >

1

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4

GET YOUR QUOTE

SELECT YOUR PLAN

APPLICATION

PURCHASED

Select Plans

OTP

☐Single-Trip Emergency Medical

☐Single-Trip All-Inclusive

☐Single-Trip Travel Canada Emergency Medical

☐Emergency Medical Top-Up

☐Trip Cancellation/Interruption

☐Multi-Trip Emergency Medical

☐Multi-Trip All Inclusive

VTC

☐Visitors to Canada Single-Trip Emergency Medical

STUDENT

☐Outbound Student travel plan

☐National Student travel plan

☐Inbound Student travel plan

1

2

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4

GET YOUR QUOTE   SELECT YOUR PLAN   APPLICATION   PURCHASED

Started your quote already?

RETRIEVE A SAVED QUOTE

What do I need?

I ☒ am a Canadian Travelling Abroad or Out of Province

☐ am a student studying in Canada or Abroad

☐ am a visitor to Canada or new Immigrant

☐ need a top-up to an already purchased multi-trip plan? ?

I will travel ☒ one trip this time

☐ more than one trip this year ?

My trip detail:

Destination city:

My trip coverage begins on:

YYYY

MM

DD

My trip coverage ends on:

YYYY

MM

DD

My information:

Residence province:

How many family member will go to the trip?

GET A QUOTE >

Script

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CANCEL

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GET YOUR QUOTE   SELECT YOUR PLAN   APPLICATION   PURCHASED

GET A NEW QUOTE1

RETRIEVE YOUR SAVED QUOTE

Quote Number:

First Name:  Last Name: 2

Date of birth:

Email:

< Back

Retreive >

Annotation

- 1 Click to back to landing page  
0.0.0
- 2 Marketing team suggest that only quote number, DOB and email are required to retrieve the quote(TBD)

Travel Insurance

Get a quote

Products

OTP Single Trip - Medical Emergency

Get a Quote

OTP Single Trip - Canadian Medical Emergency

Get a Quote

OTP Single Trip - All-inclusive

Get a Quote

OTP Single Trip - Trip Cancellation

Get a Quote

OTP Multiple Trip - All-inclusive

Get a Quote

OTP Multiple Trip - Medical Emergency

Get a Quote

VTC

Get a Quote

STUDENT

Get a Quote



# OTP Single Trip - Medical Emergency

My trip detail:

Destination city:

coverage begins

coverage ends

My information:

Trip cost

Province of Residence

Number of Travellers 

-

1

+

Date of birth

Get a quote