

StudentSure



INTERNATIONAL  
STUDENT MEDICAL  
AND  
HOSPITAL INSURANCE POLICY  
#SRG9028300

Underwritten by

American Home Assurance

# **STUDENTSURE**

## **INTERNATIONAL STUDENT MEDICAL AND HOSPITAL INSURANCE POLICY #SRG9028300**

### **ELIGIBILITY FOR INSURANCE**

All students, spouses and dependent children who are ineligible under either a Canadian federal or provincial hospital and medical insurance plan or the Policyholder's other group hospital and medical insurance plans.

### **MEDICAL REIMBURSEMENT EXPENSES BENEFIT**

When by reason of Injury of Sickness, an Insured Person incurs eligible expenses as described in this section, the Insurer will reimburse the reasonable, necessary and customary charges for services or supplies received by the Insured Person in accordance with the following:

1. Hospital charges including those from room and board, up to and including the semi-private accommodation level;
2. Hospital charges for out-patient services when medically required;
3. Expenses for the services of a Nurse ordered or prescribed by a Physician, provided the Nurse does not ordinarily reside in the Insured Person's Residence, subject to a maximum of \$10,000 per accident or Sickness;
4. Charges for prescription drugs, sera and vaccines, obtainable only upon a written prescription by a Physician or legally qualified dentist and dispensed by a registered pharmacist or Physician, but excluding any charges made for the administration of injectable drugs, sera and vaccines. Subject to a dispensing maximum or a 90 day supply;
5. Expenses charged for the services of a licensed professional physiotherapist for physiotherapy treatment ordered or prescribed by a Physician, provided such physiotherapist does not ordinarily reside in the Insured Person's Residence and is not a Member of the Immediate Family, subject to a maximum of \$1,000 per insurance period;
6. Expenses for a licensed ground ambulance service or, when recommended by a Physician, by any other conveyance licensed to carry

passengers for hire, including air ambulance, to or from the nearest Hospital which is equipped to provide the required treatment, subject to a maximum of \$500 per accident to Sickness.

7. Expenses incurred for the following:
  - a) Blood plasma, whole blood or oxygen, including the administration thereof;
  - b) X-rays and laboratory examinations which are required for diagnostic purposes;
  - c) Artificial limbs, eyes or other prosthetic appliances, subject to a maximum of \$2000 per insurance period;
  - d) Rental or purchase of casts, cervical collars, crutches, trusses, splints and braces (except dental braces and splints) or orthopedic shoes if part of a brace (limited to \$100 per pair and maximum of one pair per Insured Person per calendar year), including any fee charged by a Physician for designing, construction, fitting or applying such device, subject to a maximum of \$2000 for all expenses per insurance period;
  - e) Rental of a wheelchair, an iron lung and other durable medical equipment for temporary therapeutic treatment, subject to a maximum of \$5000 per accident or Sickness;
8. Expenses for medical care and treatment rendered or surgical procedure performed by a Physician;
9. Expenses for the services of a licensed anesthetist when recommended by a physician;
10. Expenses for the services of any of the following licensed practitioners, provided such practitioner does not ordinarily reside in the Insured Person's Residence and is not a Member of the Immediate Family, subject to a maximum of \$300 per specialty per insurance period (such services do not require the recommendation of a Physician except as indicated below):
  - ✓ Chiropractor
  - ✓ Osteopath
  - ✓ Chiropodist or podiatrist
  - ✓ Licensed masseur, on the recommendation of a Physician
  - ✓ Speech therapist
  - ✓ Licensed psychologist

Expenses for diagnostic x-rays and laboratory tests ordered by a chiropractor, osteopath, chiropodist or podiatrist will be allowed as expenses under the services of such practitioners, subject to a maximum

of one x-ray per practitioner for each Insured Person in any one insurance period.

#### **ACCIDENTAL DENTAL TREATMENT BENEFIT**

When Injury to whole or sound teeth (capped or crowned teeth will for the purposes of this policy, be considered whole and sound), due to a force or blow external to the mouth, requires treatment, replacement or x-rays by a legally qualified dentist or oral surgeon, the Insurer will pay the reasonable and necessary expenses actually incurred by the Insured Person within 52 weeks after the date of the accident for such treatment or services. The maximum amount payable under this section for reimbursement of all expenses, which an Insured Person has incurred as the result of all Injuries, caused by any one accident is \$2000. Any payments made under this section will be in accordance with the current Fee Guide for General Practitioners published by the Dental Association in the province or territory of the Insured Person's Residence.

#### **EMERGENCY TREATMENT BENEFIT**

Injury and Sickness are extended to include expenses incurred outside of Canada. When by reason of Injury or Sickness, an Insured Person incurs eligible expenses while on a Trip outside of Canada, the Insurer will reimburse the reasonable and necessary charges stated in the section entitled "Medical Reimbursement Benefit" and the following benefit:

##### **Repatriation Benefit**

All expenses must be incurred on a non-elective Emergency basis outside of Canada.

"*Trip*" means travel, undertaken by the Insured Person, which commences on the date of departure from Canada and continues until the return date to Canada, subject to a maximum duration of 4 consecutive days.

"*Emergency*" means unexpected and not preplanned. Benefits under this policy for any covered expense as a result of treatment or service received by an Insured or Dependent outside of Canada shall be limited to the amount of benefit that would have been payable had such treatment or service occurred in Canada in the last province or territory where the Insured attended College before leaving Canada.

#### **REPATRIATION BENEFIT**

If, as the result of injury or Sickness, loss of life is sustained by an Insured Person, the Insurer will pay the reasonable and necessary expenses actually incurred for the transportation of the body of the deceased Insured Person to the first resting place (including but not limited to a funeral home or the place of interment) in the vicinity of their normal

place of residence in the country of origin of the deceased, including charges for the preparation of the body for such transportation, subject to a maximum amount of \$3000. The benefit payable under this section will be payable to the person who actually incurred the expenses.

#### **MAXIMUM LIMIT OF INDEMNITY**

With the exception of those benefits listed below, the total amount payable under this policy for reimbursement of all expenses, which an Insured Person has incurred as the result of all Injuries caused by any one accident or as the result of any one Sickness, will not exceed the Maximum Limit of Indemnity of one million dollars Canadian (\$1,000,000)

The following benefit is excluded from the Maximum Limit of Indemnity: Repatriation Benefit.

#### **INDEMNITY PAYMENTS**

Unless otherwise indicated, all benefits will be paid to or at the direction of the Insured Student. Accrued benefits, if any, unpaid at the time of the Insured Student's death will be paid to his/her estate.

#### **INDIVIDUAL TERMINATIONS**

Insurance provided under this policy will immediately terminate on the earliest of the following dates:

With respect to an Insured Student;

1. On the date this policy is terminated
2. On the premium due date if the Policyholder fails to pay the required premium for the Insured Student, except as the result of an inadvertent error;
3. On the date the Insured Student reaches 70 years of age;
4. On the date the Insured Student ceases to be associated with the Policyholder in a capacity making such a person eligible for insurance hereunder;
5. On the date the Insured Student becomes eligible under a Canadian federal or provincial medical plan;
6. On the date the Insured Student departs from Canada upon completion of his assignment.

Termination of the insurance of any Insured Person will not prejudice consideration of any claim as a result of Injury or Sickness, which occurred prior to such termination. In the event the Insured Person is hospitalized as a result of Injury or Sickness prior to the termination of insurance, benefits will be paid provided treatment is continuous for such Injury or Sickness, subject to the terms and provisions of this policy in effect as of the date of the termination of insurance. However, benefits will not be payable for

any expenses incurred after the Insured Person is no longer confined as a inpatient in a Hospital or 12 months from the first day of hospitalization, whichever comes first.

#### **EXCLUSIONS AND LIMITATIONS**

- A. This policy does not cover loss, fatal or non-fatal, caused by or resulting from:
1. Intentionally self-inflicted injury while sane or self-inflicted injury while insane;
  2. Declared or undeclared war or any thereof; perpetration of acts of terrorism; participation in a riot, insurrection or civil commotion;
  3. Active full-time service in the armed forces of any country;
  4. Pregnancy or childbirth, except complications of pregnancy which will be treated as any other Sickness
  5. A trip outside of Canada undertaken by the insured person for the purpose of obtaining medical treatment, assessment or consultation
  6. Participation in any professional athletics; or
  7. Participation in acrobatic or stunt flying, hang gliding and any racing or speed contests.
- B. This policy does not cover any of the following supplies or services or costs thereof:
1. Expenses paid or payable under any government/group hospital, medical, dental or health care plan or expenses for which insurance is prohibited by law;
  2. Medical examinations for the use of a third party, cosmetic surgery and dental services other than those required as a result of an accident;
  3. Charges for experimental drugs not approved by Drugs Directorate, Health Protection Branch of Health and Welfare Canada, oral contraceptives and patent medicines;
  4. Charges for any experimental medical treatments
  5. Services for which no charges would ordinarily be made if there was no insurance coverage;
  6. Expenses incurred for eyeglasses, contact lenses and hearing aids; or
  7. Treatments, consultations and drugs related to infertility
  8. Expenses incurred outside of Canada, except as provided under the section entitled "Emergency Treatment Benefit".
  9. For any condition for which the Insured Person has received medical treatment, counseling, or has taken prescription drugs, or any symptom for which the Insured Person has received medical treatment or counseling, even though not yet diagnosed, within 180 days prior to arriving in Canada except a chronic condition which is under treatment by a legally qualified A

physician or Surgeon and is stabilized by the regular use of prescription drugs which has not changed in its type or dosage for at least 180 days prior to arrival.

**-ENHANCEMENT WORDING FOR PREFERRED EDUCATIONAL FACILITIES** (please contact our office for additional information)

#### **GENERAL PROVISIONS**

Written notice of loss must be given to the Insurer within 30 days after the date of such loss. Failure to give notice within the time provided in this policy will not invalidate any claim, if it is shown not to have been reasonably possible to give such notice during such time and that notice was given as soon as was reasonably possible, but in no event later than one year after the date of the loss.

**Please send all claims to:  
WINRAM INSURANCE LTD.  
1108 WEST 8<sup>TH</sup> AVE.  
VANCOUVER, BC V6H 3Z5**