



## IN THE EVENT OF AN EMERGENCY, YOU MUST CALL CHARTIS INSURANCE COMPANY OF CANADA IMMEDIATELY:

From Canada and U.S., call toll free 1-800-411-0118 From anywhere, call collect (416) 977-0504

Do not assume that someone will contact Chartis Insurance Company of Canada on your behalf. It remains *your* responsibility to ensure that Chartis Insurance Company of Canada has been contacted prior to receiving treatment or as soon as reasonably possible.

### SECTION I General Information

#### Why You Need Emergency Coverage while in Canada

Health care costs in Canada are very expensive. Hospitals can charge thousands of dollars per day. Without emergency hospital and medical insurance, you or your eligible dependents or parents would be responsible for these high costs, which can create a significant financial burden. It is important to note that such expenses are covered provided that they were unexpected and of an emergency nature. The Plan does not provide benefits for medical treatment if the purpose of your trip to Canada is to obtain that medical treatment.

#### How It Works

You and your eligible dependents or parents are automatically covered under this plan, if you are a student, who is enrolled in a recognized institution of learning within Canada, an eligible dependent or parent, of foreign nationality, not a Canadian citizen or a permanent resident of Canada, and you are under age 69.

#### Here's What You Get

*Broad Emergency Medical coverage and Accidental Death and Dismemberment coverage while in Canada-* Your plan provides extensive coverage for medical emergencies and Accidental Death and Dismemberment coverage for the period in which you are in Canada.

### SECTION II Definitions

"Insured Person" means you, if you are a student who is enrolled in a recognized institution of learning within Canada, an eligible dependent or parent, of foreign nationality, not a Canadian citizen or a permanent resident of Canada, and you are under age 69.

#### Eligible Dependents:

"Spouse" means a person who is under the age of 69 and who is either legally married to you, or if there is no such person, is a person who, although not legally married to you, is cohabitating with you for a period of at least one year and is publicly represented as your domestic partner in the community in which you reside

"Dependent Child" means a person who is either your natural child, adopted child or step-child or a child to whom you are in loco parentis and who is (i) under 23 years of age, unmarried and dependent upon you for maintenance and support or (ii) under 26 years of age, unmarried and enrolled in post-secondary education and dependent upon you for maintenance and support and not employed for more than 25 hours per week; or (iii) by reason of mental or physical infirmity is incapable of self-sustaining employment and who is considered your Dependent Child within the terms of the Income Tax Act(Canada).

"Injury" means bodily injury which is sustained by an Insured Person as a direct result of an unintended and unanticipated accident that is external to the body, which causes a loss covered by the Policy.

"Sickness" means the onset of sickness or disease requiring medical treatment, care or advice which causes a loss covered by the Policy.

"Emergency" means medical treatment or surgery for an unforeseen Sickness or Injury which makes it necessary to receive immediate treatment from a Physician or Surgeon for the immediate relief of an acute symptom of which upon the advice of a Physician or Surgeon cannot be delayed until you or your eligible insured dependents return to your country of residence.

"Period of Coverage" means You and your eligible dependents are covered for emergency treatment under this plan while in Canada, or while outside of Canada provided at least 51% of your time is spent in Canada. It does not cover any expenses incurred during Home Country visits.

"Effective Date" means your coverage begins on the date you satisfy the definition of "Insured Person".

"Termination Date" means coverage ends on the earliest of: (1) the date the policy is terminated; (2) the premium due date if premiums are not paid when due; (3) the date you no longer satisfy the definition of an "Insured Person".

### SECTION III Eligibility

1. All international students in a recognized Canadian institution of learning
2. Under age of 69

3. Be in good health (Stable Condition)
4. Student's Parent under age 69 and are living in Canada with student.

### SECTION IV Benefits & Coverages

**In order to be covered, some benefits listed in this section require the prior approval of Chartis Insurance Company of Canada.**

**Lifetime Maximum: \$2,000,000 Reimbursement: 100%**

#### Emergency Coverage for Hospital, Medical and Therapeutic Services While in Canada

If you or your eligible insured dependents suffer a Sickness or an Injury that results in Emergency Stay in a Hospital or Emergency medical or therapeutic services as specifically listed herein, the Company will pay benefits, for the period the plan is in force, not to exceed \$2,000,000 for the actual expenses you or your eligible insured dependents incur in Canada that exceed the amount which is payable with respect to such expenses under any Group Medical Plan or your private individual plan.

#### Emergency Hospital Confinement

If you or your eligible insured dependents suffer a Sickness or an Injury which results in an Emergency confinement as a resident inpatient in a Hospital, including semi-private accommodation, for reasonable and customary charges made by the Hospital for services and supplies to the extent that such are medically necessary, the Company will pay benefits hereunder, subject to all limitations and conditions of your policy. In the event you or your eligible insured dependents are confined to a Hospital at the end of your stay in Canada and thus prevented from returning to your country of residence, insurance will continue for the period of such confinement, but in no event for more than 12 months from the date the first covered expense was incurred.

#### Emergency Medical and Therapeutic Services:

The Company will pay benefits hereunder in the event you require Emergency medical or therapeutic services to treat an Injury or Sickness to the extent that such are Medically Necessary. Benefits are payable to reimburse Reasonable and Customary expenses for:

- (1) **Hospital Confinement and Medical Treatment:**
  - a) out-patient services provide by a Hospital
  - b) limited to semi-private accommodation
- (2) **Physician Charges:** the services of a legally qualified Physician or Surgeon (other than your Immediate Family Member).
- (3) **Diagnostic Services:** laboratory tests and X-ray examination ordered by a legally qualified Physician or Surgeon for the purpose of diagnosis.
- (4) **Private Duty Nursing:** the services of a registered graduate nurse (other than an Immediate Family Member), up to a maximum of \$12,000.
- (5) **Medical Appliances:** rental of crutches or Hospital type bed, or the cost of splints, canes, slings, trusses, braces or other prosthetic appliances approved by the Company.
- (6) **Anesthetist Services:** the services of a legally qualified Physician who is an anesthetist.
- (7) **Prescription Drug:** drug or medicines that require a legally qualified Physician or Surgeon's written prescription up to \$10,000 maximum, limited to a 30 day supply.
- (8) **Professional Medical Services:** services of a chiroprapist, chiropractor, osteopath, physiotherapist, podiatrist, speech therapist, acupuncturist or acupuncture treatment (other than your Immediate Family Member) up to a maximum of \$600 for each class of practitioner.  
\*Acupuncture Treatment (a minimum of 365 days policy must be purchased).
- (9) **Treatment of Dental Accident:** expenses for accidental Injury to natural and sound teeth (capped or crowned teeth are considered whole or sound natural teeth) which requires treatment by a legally qualified dentist or dental surgeon within 30 days from the date of accident, not to exceed in the aggregate the amount of \$4,000. as the result of any one accident.
- (10) **Impacted Wisdom Teeth:** extraction of impacted wisdom teeth, when medically necessary and performed in a hospital or dental or oral surgeon office, up to a maximum limit of \$150 per tooth.
- (11) **Emergency Relief of Dental Pain:** emergency treatment for relief of dental pain, other than a blow to the face, up to a maximum limit of \$600. Treatment must be initiated within 48 hours from the time the emergency began and completed no later than 90 days after the treatment has begun.
- (12) **Maternity:** Pre-natal care (including but not limited to tests and prescribed medication), involuntary termination of pregnancy or resulting complications provided that the pregnancy commenced during the period of coverage, up to a maximum limit of \$25,000.
- (13) **Annual Physician Visit:** expenses for an annual medical exam in Canada up to \$150. over a 12 consecutive month period for a general check-up. (a minimum of 365 days policy must be purchased).
- (14) **Non Emergency Treatment (Follow-up):** Pays up to \$3,000. limit per policy for non-emergency medical treatment resulting from the initial emergency.
- (15) **Eye Examination:** expenses for an eye examination by a licensed optometrist or ophthalmologist in Canada to determine whether purchase or replacement of eye glasses or contact lenses is required up to a maximum of \$100 per exam if you purchase more than a minimum of 12 months of coverage. (This benefit applies to student only.)
- (16) **Prescription glasses/contact lenses/hearing aids:** Pays up to maximum \$200 for repair or replacement as a result of an accident.
- (17) **Repatriation Benefit:**  
In the event of your death during a trip:
  - a) Pays up to maximum \$15,000 (exclude cost of as burial coffin or urn).
  - b) Pays up to maximum \$5,000 for burial or cremation at the place of death (exclude cost of as burial coffin or urn).
- (18) **Identification Benefit:** Pays a benefit of up to \$5,000. for the transportation of an immediate family member and commercial incidental travel expenses up to a maximum of \$250., to identify your body if you or your eligible insured dependents suffer a covered death and a law enforcement agency requests such identification.
- (19) **Automobile Return Benefit:** Pays a benefit up to \$1,000. per occurrence to return your private or rental vehicle used for tour trip, to your country of residence or nearest rental agency if you or your eligible insured dependents become totally disabled due to a sickness or injury and you are unable to continue your trip.
- (20) **Out- Of-Pocket Expense Benefit:** Pays a benefit of up to \$150. per day to a maximum of \$1,500. per occurrence for reasonable and necessary commercial living expenses incurred by you or your travel companion if you or your eligible insured dependents become totally disabled and cannot continue your trip.
- (21) **Family Transportation Benefit:** Pays a benefit of up to \$5,000. per occurrence for the expenses incurred for the transportation of an immediate family member to your hospital if you or your eligible insured dependents suffer an injury for which you receive a benefit under the Plan and as a result are confined to a hospital if advised by attending physician as well as incidental travel expenses up to a maximum of \$1,500.
- (22) **Psychiatric/Psychological Therapy:** If, due to a covered emergency, an Insured Person requires, within two years from the date of such emergency, Psychological Therapy as prescribed by a Physician, the Company will pay the reasonable and customary expenses for Psychological Therapy.  
"Psychological Therapy" means treatment or counselling by a therapist or counsellor, who is licensed, registered, or certified to provide such treatment, whether such treatment is on an out-patient basis to a maximum of \$1,000.00 for any one accident or sickness per Insured Person or as in-patient due to psychiatric, psychological, mental or emotional disorders to a maximum of \$25,000.00 for any one accident or sickness, per Insured Person at a medical facility licensed to provide such treatment.  
The maximum amount payable for this benefit for all Injuries resulting from any one accident or sickness per Insured Person is \$1,000.00.
- (23) **Emergency Transportation Benefit**
  - a) *Ground Transportation:* Licensed ambulance and paramedics, including mountain and sea rescue. If ambulance services are not available, taxi expenses reimburse up to \$125.
  - b) *Air Transportation:* Pays up to \$1,000,000 per occurrence if you or your eligible insured dependents medical condition requires air transportation to the nearest hospital or to return you to your country of residence. This service must be coordinated and approved by World Travel Protection Canada Inc. (WTP)
- (24) **Tuberculosis testing and Vaccination:** Pays up to \$100. for tuberculosis testing and vaccination or immunization during a 12 consecutive month period, provided the minimum term of insurance purchased is 180 days. Coverage for tuberculosis testing is not payable if testing is mandated by the school board or school as a requirement for program enrolment.
- (25) **Tutorial Services:** Pays up to \$20./hour to a maximum of \$400 for the costs of a qualified private tutorial service in the event you are hospitalized for 30 consecutive days or more.

The Plan will not cover any losses caused in whole or in part by, or resulting in whole or in part from, the following:

- (a) injuries received while you are participating in any maneuvers or training exercises of the armed forces, national guard or organized reserve corps of any country or international authority;
- (b) Pregnancy, miscarriage, voluntary termination of pregnancy, childbirth or their complications except that in the case of an unexpected pregnancy complication of which occurred before the end of the seventh month; except as provided for under Item (m) of the Emergency Medical and Therapeutic Expenses;
- (c) Sickness or Injury where the trip is undertaken for the purpose of securing medical treatment or advice for such Sickness or Injury;
- (d) Dental surgery or cosmetic surgery unless such surgery is a result of a covered Injury;
- (e) Any Sickness or Injury if at the time of the Sickness or Injury, the Insured Person is under the influence of drugs, alcohol (blood level in excess of 80mg of alcohol per 100ml blood) or other intoxicant (unless administered on, and in strict accordance with the advice of a legally qualified Physician);
- (f) Sickness or Injury due to participation in professional sports;
- (g) Treatment or services that contravene any GHIP plan in Canada;
- (h) Expenses incurred on an elective (non- emergency) basis;
- (i) Suicide or any attempt at suicide while sane or insane;
- (j) Intentionally self-inflicted Injury or any attempt at intentionally self- inflicted Injury, while sane or insane;
- (k) An act of declared or undeclared war, civil war, rebellion, revolution, insurrection, military or usurped power or confiscation or nationalization or requisition by or under the order of any government or public or local authority;
- (l) Any services or supplies provided by you or any one of your Immediate Family Members;

- (m) A sickness or injury that, at the time of departure, might reasonably be expended to require you to undergo treatment surgery or hospitalization;
- (n) Any service, treatment, surgery or stay in Hospital not required for the immediate relief of acute pain or suffering or which is not Medically Necessary;
- (o) Any treatment or surgery which reasonably could be delayed until you return to country;
- (p) Anticipated medical treatments required on an ongoing basis or for continue stabilization of a medical condition known to you prior to your arrival in Canada; treatment or surgery, and you elect to have such treatment or services rendered or surgery performed outside your country, the expense of such continuing medical services, treatment or surgery will not be covered by this plan;
- (q) Any pre-existing condition as defined with the exception of any condition which has remained stable in the 90 days prior to the effective date of the policy. Pre-existing conditions that do not meet the criteria set out above are not covered.

- (r) That portion, if any, of any expenses for treatment, advice or hospitalization which are not Reasonable and Customary;
- (s) Treatment or services within your country after you have returned or being evacuated back to your country;
- (t) Chartis Insurance Company of Canada, in consultation with the attending physician, reserves the right to return you (the patient) to your country. If you are (on medical evidence) able to return to your country following the diagnosis of, or the emergency treatment for, a medical condition which requires continuing medical services, treatment or surgery, and you elect to have such treatment or services rendered or surgery performed outside of your country, the expense of such continuing medical services, treatment or surgery will not be covered by this plan;
- (u) If you decline to be transferred, or to return to your country when declared medically fit to travel by the Medical Director, any continuing expenses for such Sickness or Injury shall not be covered.

**SECTION VI**      **Accidental Death and Dismemberment**

Principal Sum - \$100,000.

**Table of Losses**

<u>Loss</u>	<u>Principal Sum</u>
Loss of Life.....	100%
Loss of both hands or loss of both feet.....	100%
Loss of entire sight of both eyes.....	100%
Loss of one hand and one foot .....	100%
Loss of one hand and the entire sight of one eye.....	100%
Loss of one foot and the entire sight one eye.....	100%
Loss of one arm.....	75%
Loss of one leg.....	75%
Loss of one hand.....	66 2/3%
Loss of one foot.....	66 2/3%
Loss of entire sight of one eye .....	66 2/3%
Loss of thumb and index finger of the same hand.....	33 1/3%
Loss of speech and hearing.....	100%
Loss of speech or hearing.....	66 2/3%
Loss of hearing in one ear.....	16 2/3%
Quadriplegia, Paraplegia, Hemiplegia.....	200%
Loss of use of both arms or both hands.....	100%
Loss of use of one hand or one foot.....	66 2/3%
Loss of use of one arm or one leg.....	75%
Loss of four fingers of one hand.....	33 1/3%
Loss of all toes of one foot.....	12 1/2%

“Loss” as above used with reference to quadriplegia, paraplegia, and hemiplegia means the complete and irreversible paralysis of such limbs; as above used with reference to hand or foot means complete severance through or above the wrist or ankle joint, but below the elbow or knee joint; as used with reference to arm or leg means complete severance through or above the elbow or joint; as used with reference to thumb and index finger means complete severance through or above the first phalange; as used with reference to fingers means complete severance through or above the first phalange of all four fingers of one hand; as used with reference to toes means, complete severance of both phalanges of all the toes of one foot and as used with reference to eye means the irrecoverable loss of the entire sight thereof; as used with reference to speech means complete and irrecoverable loss of the ability to utter intelligible sounds; as used with reference to hearing means complete and irrecoverable loss of hearing in both ears.

“Loss” as used with reference to “Loss of Use” means the total and irrecoverable loss of use provided the loss is continuous for 12 consecutive months and such loss of use is determined to be permanent.

**Rehabilitation Benefit**

Reimburses your expenses for occupational training to a maximum of \$15,000. if such expenses are incurred within two years of an as a result of an injury for which you receive a benefit under the Plan.

**Home Alteration and Vehicle Modification Benefit**

Pays a benefit of up to \$15,000. for modification to your home or vehicle if you suffer an injury for which you receive a benefit under the Plan and require a wheelchair to be ambulatory.

**Seat Belt Benefit**

Pays an additional benefit of 10% of the Principal Sum to maximum of \$50,000 if you suffer a covered accidental death while operating or riding as a passenger in a private passenger automobile in which your seat belt was properly fastened.

**Dependent Child Educational Benefit**

Pays an annual benefit of up to 5% of the Principal Sum to a maximum of \$5,000 per school year for tuition costs of each Dependent Child who is enrolled in post- secondary education if you suffer a covered accidental death. The benefit is payable for up to four consecutive years.

**Spousal Educational Benefit**

Pays a benefit of up to \$15,000 for your Spouse’s expenses in enrolling in a professional or trades training program for the purpose of obtaining an independent source of income, if you suffer a covered accidental death and such expenses are incurred within 30 months of your death.

**Common Carrier Benefit**

If you suffer death or dismemberment as a result of an injury sustained during the period of coverage while you are riding as a fare-paying passenger in a common carrier or while entering or leaving a lawfully operated licensed common carrier, your principal sum amount will be increased to \$100,000.

“Common Carrier” means any land, water, or air conveyance operated under the license for the transportation of passenger for hire. Common Carrier does not include any conveyance that is hired or used for a sport, gamesmanship, contest, sightseeing, observatory and /or recreational activity, regardless of whether such conveyance is licensed.

**Beneficiary**

The Insured Person may designate a beneficiary to receive the amount payable hereunder for his or her Loss of Life. In the absence of such a beneficiary designation, the benefit for Loss of Life of an Insured Person shall be payable to the estate of the Insured Person. All other benefits are payable to the Insured Person.

**SECTION VII**      **Accidental Death and Dismemberment Exclusion**

The Plan will not cover any losses caused in whole or in part by, or resulting in whole or in part from, the following:

- (a) suicide or any attempt thereat by you while sane;
- (b) self inflicted injury or any attempt thereat by you while sane or insane;
- (c) declared or undeclared war or any act thereof;
- (d) sickness, disease, or bodily infirmity whether the loss or claim results directly or indirectly from any of these;
- (e) mental incapacity whether the Loss or claim results directly or indirectly from any mental incapacity;
- (f) sustained while you are undergoing the medical or surgical treatment of sickness, disease, or bodily or mental infirmity;
- (g) stroke or cerebrovascular accident or event; cardiovascular

accident or event; myocardial infarction or heart attract; coronary thrombosis; aneurysm;

- (h) travel or flight in or on (including getting in or out of, or on or off of) any vehicle used for aerial navigation, if you are:
  - I. riding as a passenger in any aircraft not intended or licensed for the transportation of passengers;
  - II. performing, learning to perform or instructing others to perform as a pilot or crew member of any aircraft; or
  - III. riding as a passenger in an aircraft owned or leased by the Policyholder;
- (i) infections of any kind regardless of how contracted, except bacterial infections that are directly caused by botulism ptomaine poisoning or an accidental cut or wound independent and in the absence of any underlying sickness, disease or condition including but not limited to diabetes;

- (j) injury or Loss sustained if you are on full-time active duty in the armed forces or organized reserve corps of any country or international authority (Unearned premium for any period for which you are on full-time active duty shall, upon application to the Company by the Policy holder, be refunded);
- (k) injury or Loss sustained while you are under the influence of alcohol and operating any vehicle or means of transportation or conveyance while your blood alcohol is over 80 milligrams in 100 milliliters of blood;
- (l) injury or Loss sustained while you are under the influence of a drug or substance which is controlled as specified under the

- Controlled Drug and Substance Act (Canada) unless taken pursuant to the advice of and in strict accordance with the instructions of a duly licensed physician;
- (m) Commission or attempted commission by you or injury incurred while you are in the course of committing or attempting to commit any act which if adjudicated by a court would be an indictable offence under the laws of the jurisdiction where the act was committed; and
- (n) Any attempt at self- asphyxiation whether with intent to harm yourself or not.

## SECTION VIII

## Refund Premium

- a) If cancellation of your policy is requested prior to the effective date of your policy, the full amount of premium paid may be refunded
- b) A refund for the unused portion of the premium may be granted if:
  - I. The required visa necessary for admission to a recognized Canadian institution of learning has been refused;
  - II. You permanently leave the recognized Canadian institution of learning;
  - III. You permanently return to your country of origin; or
  - IV. You become eligible for a government health insurance plan in your province or territory of residence

- c) A request for premium refund will be considered only if no claim has been paid or is pending, subject to a \$40 administrative fee
- d) Request for refunds must be made in writing to your broker or sale agent. If your broker or sales agents receives satisfactory proof (ex. Airline ticket or customs/immigration stamp) of your actual return date to your country of origin, your refund will be calculated from the date. No refund will be issued if the amount of premium to be reimbursed is less than \$10 per policy.

## SECTION IX

## Emergency Travel Assistance

Travel Assistance is provided by World Travel Protection Canada Inc. (WTP). With centres worldwide they will:


1. help you locate the most appropriate medical facility for you
2. confirm coverage with Chartis Insurance Company of Canada and assure the hospital that you are covered
3. guarantee payment for hospitalization, if necessary
4. arrange for admission to a hospital

5. provide translation services
6. contact your own doctor for recommendations, when required
7. arrange for /co-ordinate emergency medical evacuation
8. co-ordinate your return home

## SECTION X

## How to Submit a Claim

**Please Contact:**

 Johnson Fu Insurance Agency Inc.  
15 Wertheim Court, Suite 501, Richmond Hill, ON, L4B 3H7  
Phone: 905-707-1512, Fax: 905-707-1513, Toll free: 1-877-832-5541

Telephone WTP at the numbers listed below.

**1 800 411 0118 From Canada & US**  
**416 977 0504 Worldwide (Collect)**

**For emergencies that required hospitalization or surgery, here is what to do:**

You or someone acting on your behalf must call WTP immediately. Their operations are backed by a team of emergency care professionals-physician and nurses who work closely with the doctor looking after you and, if necessary, your family doctor, to help ensure that you receive the medical care you need.

Chartis Insurance Company of Canada  
145 Wellington Street West  
Toronto, Ontario  
M5J 1H8

## SECTION XI

## Identification of Insurer

This certificate provides a description of the coverage available. The full details of the coverage are contained in the policy including limitations, exclusions and termination provisions. If there are any conflicts between this document and the Policy, the Policy shall govern. Insurance is underwritten by Chartis Insurance Company of Canada.

Administer by: JOHNSON FU INSURANCE AGENCY INC. under group policy number: SRG 9116092-1