

Student Medical Insurance Benefits

Benefits	Manulife Financial	TuGo
Maximum Limit	\$2,000,000	\$2,000,000
Hospital expenses	<p>a) A semi-private hospital room, or a private intensive or coronary care unit when medically necessary;</p> <p>b) Your treatment while in hospital up to sixty (60) days per injury or illness;</p> <p>c) Your treatment while in the emergency department, and/or as an out-patient at a hospital; or</p> <p>d) Emergency hospitalization required for psychiatric treatment, to a maximum of thirty (30) days per policy.</p>	<p>Emergency hospital confinement (limited to semi-private accommodation) and/or emergency medical treatment by a physician for the actual, usual and customary charges for reasonable and necessary hospital and medical expenses.</p> <p>Up to a maximum of \$10,000 for in-patient hospitalization due to psychiatric, psychological, mental or emotional disorders (see Psychiatric/ psychological care below)</p>
Physician services	For emergency medical attention received from a physician in or out of hospital and up to five (5) follow-up visits.	The services of a physician for emergency and up to a maximum of \$3,000 to continue medical treatment provided treatment is a direct result of the initial emergency medical treatment.
Diagnostic services	Tests that are required as a result of an emergency and requested by your physician due to an emergency and to diagnose or learn more about your medical condition. Prior approval is required by the Assistance Centre for all major diagnostic testing, including but not limited to magnetic resonance imaging (MRI), computer axial tomography (CAT) scans, sonograms, ultrasounds and biopsies	X-ray examinations and diagnostic laboratory procedures.
Private duty nurse	When medically necessary, and recommended by a physician, the services of a licensed registered nurse up to a maximum of \$10,000.	Up to a maximum of \$15,000 for private duty nursing services, when ordered in writing by the attending physician.
Ambulance	Up to \$5,000 per unrelated illness or injury for a licensed ground or air ambulance to the nearest hospital or medical facility.	The services of a licensed ambulance and paramedics, including mountain and sea rescue, from the scene of the accident or place of onset of the sickness to the nearest hospital.

Prescription drugs	Up to a thirty (30) day supply of drugs that are prescribed for you and are available only by prescription from a physician or dentist and dispensed by a licensed pharmacist	Up to a maximum of \$10,000 to a limit of a 30-day supply for medicines and/or drugs that require a physician's written prescription following a Consultation. While you are confined to hospital, the company will reimburse the total cost of such medicines and/or drugs.
Paramedical services	Up to \$500 per profession for care received from a licensed chiropractor, podiatrist, physiotherapist, chiropractor, or osteopath.	Up to a maximum of \$600 per practitioner for the services of a physiotherapist, chiropractor, chiropractor, osteopath, podiatrist, acupuncturist, naturopath for the relief of acute emergency pain or speech therapist. A referral from a physician is required for acupuncturist and naturopath.
Accidental dental injury	Up to \$2,500 for emergency dental treatment to repair or replace your natural or permanently attached artificial teeth (including caps and crowns) where treatment is required as a result of an accidental blow to the mouth and within thirty (30) days of-the accident.	Up to a maximum of \$5,000 for an accident requiring the repair or replacement of sound natural teeth or permanently attached artificial teeth. This includes the repair of restorative dental work including amalgam and composite fillings, retentive pins and prefabricated posts for fillings and standard metal crowns and bridges.
Emergency dental treatment –	Up to \$100 for the relief of dental pain, and up to \$250 per tooth to extract impacted wisdom teeth	Dental expenses you incur for dental pain relief other than pain caused by an accident, up to a maximum of \$600 and up to \$150 per tooth for the extraction of impacted wisdom teeth when medically necessary and performed in a dental or oral surgeon's office
Psychiatric/ psychological care	Up to \$5,000 for services of a legally qualified psychiatrist while you are an in-patient following an emergency, plus up to five (5) follow-up visits with a physician. Emergency hospitalization required for psychiatric treatment, to a maximum of thirty (30) days per policy.	a) Up to a maximum of \$1,000 for out-patient care by a physician, a licensed psychiatrist or psychologist including psychiatric or psychological counselling, following an emergency; OR b) Up to a maximum of \$10,000 for in-patient hospitalization due to psychiatric, psychological, mental or emotional disorders.

Trauma counselling	Up to six (6) sessions of trauma counselling	-
Medical appliances	Purchase or rental (whichever is less) of a hospital bed, wheelchair, crutches, splints, canes, slings, trusses, braces or other prosthetic appliance.	Rental of essential medical appliances including but not limited to wheelchairs, crutches and canes, but in no event will the rental amount payable exceed the total purchase price.
Emergency evacuation	Up to a maximum of \$100,000 for reasonable and customary charges to transport you home during your period of coverage and as a result of a covered emergency	Medical air evacuation to the nearest medical facility equipped to provide the required treatment, or for return to your home country.
Family member transportation	If you are hospitalized for at least seven (7) consecutive days or if you die, we will pay the return economy class airfare up to \$3,000, for an immediate family member to be with you or to identify your body. The company will also pay up to \$150 per day to a maximum of \$1,500 for the cost of meals, commercial accommodation, essential phone calls and taxi fares.	a) Up to a maximum of \$5,000 for the round trip transportation costs for one family member to be with you while you are in hospital if an attending physician considers it necessary and, b) \$150 per day up to a maximum of \$1,500 for meals and commercial accommodation.
Repatriation of mortal remains –	Up to \$10,000 for the actual expense to have your body prepared for burial or cremated plus up to \$3,000 for your burial where you die, or the cost to return your body or ashes home if you should die as a result of an emergency covered under this policy.	Up to a maximum of \$15,000 for the preparation and return of your body, including the cost of a standard shipping container (excluding the cost of a burial coffin), to your home country
Tuition reimbursement –	If you have an emergency which prevents you from attending school and, as a result, you are unable to obtain passing grades for the semester, as confirmed by your physician and registrar of the school you are attending, we will reimburse you for the actual tuition fee paid by you up to \$5,000 per semester, minus any amounts refunded by your school.	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.
Trip break	Up to twenty-one (21) consecutive days. If you have requested and received prior approval from our Assistance Centre, you may return home to attend special events.	Visits to your home country are permitted; your Policy will not terminate, however expenses will not be covered while in your home country.

Annual medical examination (if policy is purchased for one year)	Up to \$100 per year to a physician (general practitioner) for an exam and associated tests and for one consultation session	Up to a maximum of \$150 for one visit to a physician for a general check-up or one consultation session and prescription of the 'morning after pill' over a 12 consecutive month period
Eye examination (if policy is purchased for one year)	Up to one (1) visit per year to a registered optometrist for diagnostic procedures to determine the presence of any observed abnormality in the optic system.	One visit to a licensed optometrist or ophthalmologist over a 12 consecutive month period to examine an abnormality in the visual system.
Prescription glasses/contact lenses/hearing aids	-	Up to a maximum of \$200 for prescription glasses, contact lenses and hearing aids required as a result of an accident. This benefit does not cover the repair or replacement of prescription glasses, contact lenses and/or hearing aids.
Maternity benefit	Up to the following amounts for physician services and hospitalization, per pregnancy: - \$5,000 for normal childbirth, - \$7,000 for caesarian section or - \$20,000 for medical complications related to childbirth. To be eligible for this benefit, your pregnancy must have commenced after the effective date of the policy.	Up to \$25,000 for pre-natal care (including but not limited to tests and prescribed medication), involuntary termination of pregnancy or resulting complications provided the pregnancy commenced during the period of coverage
Accidental death or dismemberment	Up to \$10,000 in the event of an accidental death or dismemberment.	Up to a maximum of \$10,000 for death or dismemberment as a result of an accident during a covered trip

NOTE: This information for illustration only. Please refer to the policy wording for the complete terms, benefits, conditions & exclusions.

June, 2015