

Urban School Insurance Consortium  
(The Policyholder)

Policy No. 100006766

**The Program**

A specialized program of travel insurance to protect you.

**Who Is Eligible?**

Eligible Insured Persons are Students and chaperones under age 70 of a participating school board of the Policyholder for whom the appropriate premium has been paid. Foreign exchange students and international students are excluded.

**When Does Coverage Apply?**

Coverage is restricted to the following Option if coverage has been applied for by the participating school board of the Policyholder. Contact your school to confirm your coverage.

**Option 3** - Plan 1 and "Freedom Multi Trip Annual Travel Insurance" (as provided under Master Group Policy No. IAP001 or its replacement underwritten by Travel Underwriters)

Plan 1 of Policy No. 100006766 takes effect when you leave your residence to undertake an insured trip approved by a participating school board of the Policyholder and continues until you return to your residence upon completion of the trip.

Please refer to Travel Underwriters Master Group Policy No. IAP001 issued to the Policyholder for all details regarding "Freedom Multi Trip Annual Travel Insurance".

**Definitions**

"Chronic Condition" whenever used in Policy No. 100006766 means a disease or disorder which has existed for a minimum of six months. Only one, the first, occurrence per Insured Person per insured trip is eligible as the basis of claim.

"Injury" whenever used in Policy No. 100006766 means bodily injury caused by an accident occurring while the policy is in force as to the Insured Person whose injury is the basis of claim and resulting directly and independently of all other causes in loss covered by the policy, and that is not caused or contributed to, directly or indirectly, by physical or mental illness or disease, or treatment for the illness or disease.

"Sickness" whenever used in Policy No. 100006766 means a sickness, disease or Chronic Condition occurring while the policy is in force as to the Insured Person whose sickness is the basis of claim.

"Student" whenever used in Policy No. 100006766 means a resident of Canada over six months of age, who is presently enrolled with and attending regularly any Canadian licensed or registered day care, preschool, playschool, kindergarten, elementary or secondary school of a participating school board of the Policyholder, who is not a foreign exchange student or an international student and who has not taken or arranged to take full-time permanent employment.

**Definitions (Continued...)**

"Travel Advisory" whenever used in Policy No. 100006766 means a formal written travel advisory and/or travel warning issued by the Department of Foreign Affairs and International Trade Canada (DFAIT) or Public Health Canada (PHC) recommending that, on the Insured Person's scheduled departure date, the Insured Person avoid all travel or avoid non-essential travel to the scheduled destination. The travel advisory/warning must be issued after the date the trip is booked or after the effective date of the policy, whichever is later, and must still be in effect on the Insured Person's scheduled departure date.

**What Benefits Are Provided?**

**Plan 1**

**ACCIDENTAL DEATH, DISMEMBERMENT AND SPECIFIC LOSS INDEMNITY**

If, within **12 months** of the date of the accident, Injury results in any of the following losses, the insurer will pay for loss of **or permanent and total loss of use of:**

|   |             |
|---|-------------|
| Life.....                                     | \$25,000.00 |
| Both Hands.....                               | \$25,000.00 |
| Both Feet.....                                | \$25,000.00 |
| Entire Sight of Both Eyes.....                | \$25,000.00 |
| One Hand and One Foot.....                    | \$25,000.00 |
| One Hand and the Entire Sight of One Eye..... | \$25,000.00 |
| One Foot and the Entire Sight of One Eye..... | \$25,000.00 |
| Speech and Hearing in Both Ears.....          | \$25,000.00 |
| One Arm.....                                  | \$18,750.00 |
| One Leg.....                                  | \$18,750.00 |
| One Hand.....                                 | \$16,500.00 |
| One Foot.....                                 | \$16,500.00 |
| Entire Sight of One Eye.....                  | \$16,500.00 |
| Speech or Hearing in Both Ears.....           | \$16,500.00 |
| Thumb and Index Finger of Either Hand.....    | \$ 8,250.00 |
| Four Fingers of Either Hand.....              | \$ 8,250.00 |
| Hearing in One Ear.....                       | \$ 8,250.00 |
| All Toes of One Foot.....                     | \$ 6,250.00 |

**PARALYSIS BENEFITS**

|   |             |
|---|-------------|
| Quadriplegia (complete paralysis of both upper and lower limbs).....              | \$50,000.00 |
| Paraplegia (complete paralysis of both lower limbs).....                          | \$50,000.00 |
| Hemiplegia (complete paralysis of upper and lower limbs of one side of body)..... | \$50,000.00 |

Indemnity provided under this part for all losses sustained by an Insured Person as the result of any one accident will not exceed, with the exception of Quadriplegia, Paraplegia and Hemiplegia, \$25,000.00, and with respect to Quadriplegia, Paraplegia and Hemiplegia, \$50,000.00 or \$25,000.00 if loss of life occurs within 90 days after the date of the accident.

In no event will indemnity payable for all losses under this part exceed, in the aggregate, \$50,000.00 as the result of the same accident.

**ARTIFICIAL LIMBS, EYES, HEARING AIDS AND OTHER PROSTHETIC APPLIANCES BENEFIT**

When Injury results in these appliances prescribed by a physician and purchased within one year from the date of the accident, the insurer will pay the cost to a maximum of \$2,000.00.

**What Benefits Are Provided? (Continued...)**

**Plan 1 (Continued...)**

**DOUBLE INDEMNITY**

If you sustain Injury while riding as a passenger in or on, including boarding or alighting from or being struck by any public conveyance licensed for the conveyance of passengers for hire which results in a loss payable under "Accidental Death, Dismemberment and Specific Loss Indemnity" of the policy, the Principal Sum payable will be doubled.

**HOSPITAL AND MEDICAL EXPENSES**

If your Injury or Sickness requires:

- (a) treatment at a hospital;
- (b) blood plasma, whole blood or oxygen, including administration thereof;
- (c) emergency treatment by a legally qualified physician or surgeon;
- (d) medical care and treatment rendered or surgical procedure performed by a physician, subject to the health insurance plan schedule of fees published by the province or territory of your residence;
- (e) x-rays and laboratory examinations which are required for diagnostic purposes;
- (f) the service of a licensed ambulance from the scene of the accident or place of onset of the Sickness to the nearest hospital;
- (g) drugs or medicines prescribed by the attending physician (oral contraceptives and patent medicines excluded);
- (h) employment of a nurse or certified nursing aid when recommended by the attending physician;
- (i) treatment by a licensed chiropractor, osteopath, chiroprapist or podiatrist;
- (j) the service of a licensed anaesthetist when recommended by the attending physician, subject to the health insurance plan schedule of fees published by the province or territory of your residence;
- (k) rental of crutches and appliances, or hospital-type bed;
- (l) rental of a wheelchair, iron lung and other durable equipment for therapeutic treatment, not to exceed the purchase price prevailing at the time rental became necessary;
- (m) splints, trusses and braces; or
- (n) physiotherapy when recommended by the attending physician,

the insurer will pay the reasonable and customary expense incurred within three years from the date of the accident or onset of the Sickness for such treatment or services. Benefits payable shall be reduced by any benefits paid or payable under any government sponsored hospital or medical plans or any other student insurance plan underwritten by the insurer.

Benefits payable which are also paid or payable under any other insurance program shall be reduced to the extent that in no event will payment from all sources exceed 100% of the actual expenses incurred for such treatment or service.

The lifetime maximum amount payable by the insurer under this part with respect to you is \$1,000,000.00.

## What Benefits Are Provided? (Continued...)

### Plan 1 (Continued...)

#### REPATRIATION, BOARD, LODGING AND ADDITIONAL TRAVEL EXPENSES

In the event of:

- (a) your death;
- (b) your Injury or Sickness and as certified as medically necessary by your attending physician;
- (c) the death of a member of your immediate family; or
- (d) the Injury or Sickness of a member of your immediate family certified by the attending physician to be of a severity requiring your attendance

you require transportation to your residence, the insurer will pay the necessary actual expense incurred for such transportation, less any refund due as the result of cancellation or rescheduling of transportation previously arranged.

In the event of:

- (a) your death; or
- (b) your Injury or Sickness certified by your attending physician to be of a severity requiring the attendance of a medical attendant, chaperone or member of your immediate family

the insurer will pay the reasonable board, lodging and additional travel expenses incurred by such medical attendant, chaperone or member of your immediate family to remain with you or accompany you on return to your residence. Board and lodging expenses are restricted to a maximum of \$100.00 per day and for a maximum period of 30 consecutive days. All benefits payable for such board, lodging and additional travel expenses are limited to an aggregate of \$5,000.00 as the result of any one Injury, Sickness or death. Additional travel expenses are restricted to the round-trip economy airfare for a member of your immediate family or medical attendant (not accompanying you prior to such Injury, Sickness or death) and the one-way economy airfare for a chaperone.

The total of all benefits payable under this part shall not exceed an aggregate amount of \$10,000.00 as the result of any one Injury, Sickness or death.

#### When Does Plan 1 Insurance Not Apply?

Policy No. 100006766 does not cover loss, fatal or non-fatal, caused by or resulting from:

- declared or undeclared war or any act thereof;
- pregnancy or childbirth;
- air travel except as a fare paying passenger in a scheduled aircraft;
- suicide or any attempt thereat or intentionally self-inflicted Injury, while sane or insane;
- participating in terrorist activities of any kind;
- any loss as the sole result of the utilization of nuclear, chemical or biological weapons of mass destruction howsoever these may be distributed or combined;
- any ailment or condition for which you undertake a journey for the purpose of securing or with the intent of receiving medical attention, prescription drugs or medicine, or hospital services.

## How Do I Make A Plan 1 Claim?

Claim forms are available from the participating school board or the insurer. The insurer reserves the right to request additional information when processing the claim. Written notice of accidental death, dismemberment, loss of sight, hearing, paralysis, or loss of use of limbs is to be given to the insurer within a period of 30 days from the date of the accident. For all other Plan 1 claims, completed claim forms and/or applicable documentation must be filed with the insurer within 90 days after the date of the Injury or Sickness, regardless of whether expenses have been incurred. Attach original receipts for all eligible expenses being claimed.

**During regular business hours**, contact the insurer's Claims Department at (800) 266-5667 (in Canada and the USA) or at (604) 737-9377 collect (outside North America).

**After hours or for medical emergencies**, call (800) 255-2008 (in Canada and the USA) or (305) 865-8895 collect (outside North America).

## How Do I Make A Travel Underwriters Claim?

Please refer to the "Travel Underwriters - Option 3 Claim Procedure Guidelines" issued by Travel Underwriters to the participating school board of the Policyholder.

## To Whom Are Benefits Paid?

Benefits payable under Policy No. 100006766 are payable to the parent or guardian when you are a minor, otherwise to you or your estate.

## When Does This Insurance Terminate?

Your insurance under Policy No. 100006766 will immediately terminate on the earliest of the following dates:

- (a) the date the policy is terminated;
- (b) the premium due date if the participating school board of the Policyholder fails to remit the required premium to the insurer, except as the result of an inadvertent error;
- (c) the date you reach 70 years of age;
- (d) the date you cease to be associated with the participating school board of the Policyholder in a capacity making you eligible for insurance.

**The policy contains a provision removing or restricting the right of the group person insured to designate persons to whom or for whose benefit insurance money is to be payable.**

Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the *Insurance Act* or other applicable legislation.

*This brochure is for information purposes only. For further details, refer to the Master Policy which is on file with the Policyholder. This group Master Policy sets forth in detail the terms and conditions of Plan 1 and all rights and obligations are determined in accordance with the Master Policy, not this brochure.*

FORM C1505 (MAR/2014)



Innovative Special Risk Insurance

## Urban School Insurance Consortium



## Blanket Student Travel Insurance Plan

### Option 3

Brokered by Mercer Canada Limited

