



JF Elite Plus Student Insurance Plan (Berkley) Feature Sheet

Features and Benefits	Maximum Limit
Eligibility	<ul style="list-style-type: none"> An international student enrolled in a Canadian institution of learning, age of 4-69
Waiting period on sickness	<ul style="list-style-type: none"> No
Pre-existing condition coverage	<ul style="list-style-type: none"> Yes, if conditions are stable 90 days prior to the effective date of the policy
Travel Worldwide	<ul style="list-style-type: none"> Yes, if at least 51% of time is spent in Canada (no coverage during Home Country visits)
Maximum liability	<ul style="list-style-type: none"> \$5,000,000
Emergency Transportation	<ul style="list-style-type: none"> Ground: Licensed ambulance and paramedics. If ambulance services are not available, covers taxi fare in lieu of ground ambulance to the nearest hospital Air: Up to \$1,000,000 when <i>pre-approved/arranged by Ontime Care</i> to nearest hospital or to return to country of origin for medical treatment
Hospital accommodation	<ul style="list-style-type: none"> Yes, for a semi-private room
Eligible Medical Expenses	<ul style="list-style-type: none"> Emergency medical treatment for sickness or injury whether in-patient or out-patient Physician/Surgeon/Anesthetist services & charges X-Ray and diagnostic laboratory procedures (ultrasounds, MRI, & CAT scans NOT included) Rental of essential appliances (i.e. Casts, splints, canes, slings, crutches, wheelchair rentals)
Medicines and /or drugs	<ul style="list-style-type: none"> Up to maximum \$10,000, limited to a 30-day supply per prescriptions (unless hospitalized)
Private duty nursing (R.N.)	<ul style="list-style-type: none"> Yes, up to maximum of \$15,000 (when ordered by the attending physician)
Acupuncture Treatment	<ul style="list-style-type: none"> Yes, up to \$600 for 1-year JF Elite Plus Student coverage.
Paramedical Services	<ul style="list-style-type: none"> Up to maximum of \$600 per practitioner for Physiotherapist, chiropractor, chiroprapist, osteopath, podiatrist (A referral from a physician is required/ provided a minimum of 183 days of coverage has been purchased)
Tuberculosis (TB) Testing & Vaccination	<ul style="list-style-type: none"> Up to maximum of \$100 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
Annual Physician visit	<ul style="list-style-type: none"> Up to \$150 over a 12 consecutive month period for a general checkup (a minimum of 365 days policy must be purchased)
Non-Emergency Treatment (Follow-up)	<ul style="list-style-type: none"> When approved in advance by Ontime Care, up to \$3,000 for related non-emergency care
Impacted Wisdom Teeth Extraction	<ul style="list-style-type: none"> Up to maximum \$150 per tooth for the extraction of impacted wisdom teeth when <i>medically necessary</i> and performed in a dental or oral surgeon's office
Dental (services of a licensed dentist or dental surgeon for emergency relief of dental pain)	<ul style="list-style-type: none"> Up to maximum \$600 for emergency treatment for relief of acute pain to natural teeth, Treatment must be initiated within 48 hours from the time the emergency began and completed no later than 90 days after treatment has begun
Emergency Dental Accident	<ul style="list-style-type: none"> As the result of accidental injury not to exceed \$5000 per accident, & that requires treatment within 30 days of said accident as approved by a legally qualified dentist or oral surgeon
Repatriation (pre-arranged/arranged by Ontime Care)	<ul style="list-style-type: none"> Includes cost of one-way economy airfare to return insured to their country of origin Fare for additional airline seats to accommodate a stretcher or medical attendant to return the insured to their country of origin
Psychiatric / Psychological Therapy	<ul style="list-style-type: none"> Up to maximum \$1,000 for out-patient care by a licensed therapist, psychiatrist or psychologist Up to \$25,000 for in-patient hospitalization due to psychological, mental or emotional disorders
Transportation to Bedside (pre-approved/arranged by Ontime Care)	<ul style="list-style-type: none"> Up to maximum of \$5,000 of a person of the insured's choice to be with them while hospitalized as a result of a serious, covered emergency. \$150/day up to \$1,500 for meals
Eye Examination	<ul style="list-style-type: none"> Up to \$150 for one examination (minimum 12 months policy has been purchased).
Prescription glasses, contact lenses and hearing aids	<ul style="list-style-type: none"> Up to maximum of \$200 for repair or replacement of prescription glasses as a result of an accident
Tutorial expenses	<ul style="list-style-type: none"> Up to \$20/hour to a maximum of \$500 for the costs of a qualified private tutorial service in the event you are hospitalized for 30 consecutive days or more after the effective date of the policy
Automobile return (pre-approved/arranged by Ontime Care)	<ul style="list-style-type: none"> Up to a maximum of \$1,000 to return your private or rented vehicle to its point of origin, in the case of a covered emergency that prohibits you from returning the vehicle
Accidental Death & Dismemberment	<ul style="list-style-type: none"> Up to \$100,000 as a result of an accident
Trauma Counselling	<ul style="list-style-type: none"> Up to maximum of \$500 within 90 days from sickness or injury

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