For Canadian Students

Features & Benefits

This insurance provides coverage for medical expenses incurred by Canadian students enrolled in a school outside their province/territory of residence, as well as coverage for their accompanying family members. Coverage is also provided for COVID-19.

Maximum policy limit	\$2,000,000
Age limit	Students Up to 40 years Family Members Minimum of 15 days up to 40 years
Family coverage	Coverage is available for family members who are residing with the student while they are enrolled in school. The student must either be covered under a TuGo Student Insurance policy or meet the eligibility requirements for a TuGo Student policy. Eligible family members include: Legal or common-law spouse Parents (including step-parents and legal guardians) Siblings and step-siblings Unmarried dependent children* * Up to 21 years or up to 40 years if they have a cognitive, developmental, or physical disability
Travel worldwide	Travel Worldwide Travel worldwide is covered regardless of how much time the insured spends in their province/territory or country of study Note: Coverage while in the province/territory or country of study and for any other travel worldwide is limited to \$50,000 if the insured is not covered by their provincial or territorial government health care plan at the time of the claim Travel in Home Province/Territory Visits to the home province/territory are permitted; the Policy will not terminate but expenses in the home province/territory will not be covered
School breaks	Coverage is available during school breaks provided the student is still enrolled as a full-time or part-time student
KEY BENEFITS	MAXIMUM LIMIT
Emergency medical treatment	 Up to the policy limit for: Emergency treatment for in-patient or out-patient care Services of a physician X-rays and laboratory services Rental or purchase of essential medical appliances Up to \$20,000 for private duty nursing
Ambulance	Up to the policy limit for ground, air or sea ambulance (including paramedics) or taxi in lieu
Follow-up visits	Up to 5 follow-up visits within 14 days of the initial emergency treatment
Prescription drugs	Up to a 30-day supply following an emergency Note: The cost for one morning-after pill is also provided once during a 12 consecutive month period if the insured has purchased a 365-day policy

Student | For Canadian Students · Features & Benefits

KEY BENEFITS cont'd	MAXIMUM LIMIT
Other professional services	Up to \$600 per incident per practitioner for the services of a:
	 Physiotherapist - Podiatrist Chiropractor - Acupuncturist Chiropodist - Naturopath Osteopath - Speech therapist Up to \$1,000 combined for all practitioners per incident for the services of a:
	 Psychiatrist Psychotherapist Psychologist Nurse psychotherapist Clinical counsellor Social worker
Rehabilitation treatment	Up to \$250 per day to a maximum of 7 days for emergency treatment in a rehabilitation facility, when it's medically necessary after hospitalization
Fracture treatment	Up to \$1,000 for treatment related to fractures. This benefit includes: • X-rays • Re-examination physician visits • Medically necessary casting and re-casting • Cast removal
	Note: This benefit is only available in lieu of the Airfare to Return Home for Treatment benefit
Dental	 Up to \$6,000 for dental accidents Up to \$600 for any other dental emergencies
	Note: All treatment must be completed within 90 days after the treatment began and within the period of coverage
Impacted wisdom teeth	Up to \$150 per tooth
Maternity	 Up to \$25,000 for: Pre-natal care Complications related to pregnancy that arise within the 9 weeks before and after the expected due date Involuntary termination of pregnancy
Annual physician visit	Up to \$150 for one general check-up or one immigration medical examination in lieu
	Note: Coverage is also provided for preventative screening tests.
	This benefit is available once during a 12 consecutive month period if the insured has purchased a 180-day policy
Sexually transmitted infection testing	Up to \$100
	Note: This benefit is available once during a 12 consecutive month period if the insured has purchased a 180-day policy
Emergency air transportation	Up to the policy limit for medical air evacuation. If medically required, coverage also includes: • The cost of a qualified medical attendant (or family member or friend in lieu) • An airline seat upgrade
Airfare to return home for treatment	Up to a one-way economy airfare to return to the country of permanent residence for immediate treatment* Note: For fracture claims, this benefit is only available in lieu of the Fracture Treatment benefit
	* Treatment must be required within 10 days of returning home

Student | For Canadian Students · Features & Benefits

KEY BENEFITS cont'd	MAXIMUM LIMIT
Eye examination	One visit to an optometrist or ophthalmologist for a general eye examination
	Note: This benefit is available once during a 12 consecutive month period if the insured has purchased a 180-day policy
Prescription glasses/contact lenses/hearing aids	Up to \$200 if required because of an accident or injury
	Note: Includes the cost to repair existing glasses or hearing aids
	• Up to \$35,000 for preparation and return of the body
Repatriation	• Up to \$6,000 for burial or cremation at the place of death
	 Up to \$5,000 for transportation costs for one family member to identify the body, and up to \$400 per day to a maximum of \$2,000 for their meals and accommodation
	When an insured is hospitalized, this benefit includes:
Family transportation	 Up to \$5,000 for one round trip economy airfare or ground transportation costs for a family member or friend to be at their bedside
	 Up to \$400 per day to a maximum of \$2,000 for out-of-pocket expenses
Tutorial services	Up to \$20/hour to a maximum of \$400, if the insured is hospitalized for 30 consecutive days or more
Accidental Death and Dismemberment	Up to \$10,000
RE-EXISTING MEDICAL CON	NDITIONS
Pre-existing medical condition coverage	There is a 90-day stability period for pre-existing medical conditions before the effective date of the policy
IENTAL & EMOTIONAL CONI	DITIONS
Mental & emotional condition coverage	Mental and emotional disorders are covered up to the Policy limit for in-patient services under
	the Emergency Medical Treatment benefit in the same way that any other medical emergency
	is covered
	Coverage is also provided for out-patient and other services under any other related benefits that could apply (including but not limited to ambulance services, prescription drugs, family
	transportation, repatriation, other professional services, rehabilitation, etc.)
PTIONAL COVERAGE	
Accidental Death and Dismemberment	Insureds can purchase the Accidental Death and Dismemberment Optional Coverage
	to increase the limits of coverage as follows:
	Air Flight/Common Carrier - up to \$100,000 A bound a side to the control of the contro







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• 24-hour Accident - up to \$25,000