

## PARTICIPATING MEMBERS OF THE SASKATCHEWAN SCHOOL BOARDS ASSOCIATION (The Policyholder)

**Policy No. 100010601 issued by iA Special Markets,  
a division of Industrial Alliance Insurance and Financial Services Inc.**

### Blanket Student Accident Insurance (Enhanced Coverage) Plan Summary

#### ELIGIBILITY

Insured Persons are Full-Time Students under age 70 of a participating school board of the Policyholder for whom the appropriate premium has been paid. Part-time Students, Teachers and Non-Teaching Employees under age 70 of a participating school board of the Policyholder are also eligible if coverage has been applied for by the school board and the appropriate premium has been paid. Foreign exchange Students and international Students are excluded. Contact the school board to confirm coverage.

#### DEFINITIONS

"Accident" or "Accidental" means a sudden, unforeseen and unexpected event which arises from a source external to an Insured Person 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. This event must occur while the policy is in force and be the basis of claim.

"Full-Time" means enrollment consisting of three or more courses at any one time or, alternatively, attending classes for a minimum of six hours per day, five days per week. With respect to day care, preschool, playschool, pre-kindergarten or kindergarten children, full-time is as dictated by the day care, preschool, playschool, pre-kindergarten or kindergarten they attend.

"Injury" 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" means sickness or disease occurring or reoccurring while the policy is in force as to the Insured Person whose sickness is the basis of claim.

"Student" means:

- (a) a permanent resident of Canada;
- (b) a child of a parent in Canada on a temporary work visa; or
- (c) a child with refugee status as determined by the federal government

who is over six months of age and presently enrolled with and attending regularly, on a Full-Time or part-time (if eligible) basis, any Canadian licensed or registered Day Care, preschool, playschool, pre-kindergarten, kindergarten, elementary or secondary school of a participating school board of the Policyholder, and who has not taken or arranged to take full-time permanent employment. Home schooled, prospective and visiting students are only covered while in attendance at or participating in approved school-sponsored activities under the supervision of a proper school authority.

"Teacher" or "Non-Teaching Employee" means a person, residing in Canada, who is directly employed by a participating school board of the Policyholder.

#### BENEFITS

##### Accidental Death Benefit (\$5,000.00)

Payable if Injury results in loss of life within 12 months from the date of the Accident. This benefit will be the only amount payable under the policy unless benefits are payable under the parts titled "Counselling Benefit" or "Repatriation Benefit".

#### BENEFITS (Continued...)

##### Accidental Death Benefit (\$5,000.00) (Continued...)

**Double Indemnity:** The insurer will pay two times the amount applicable if loss of life occurs while riding in or on, including boarding or alighting from, any public conveyance operated under a license for the conveyance of passengers for hire or any vehicle owned or leased by a school authority.

##### Accidental Dental Reimbursement Benefit

Reimbursement for customary treatment by a dentist if required within 60 days from the date of the Accident due to Injury to whole or sound teeth. Capped or crowned teeth are considered whole or sound. Benefits are payable within five years from the date of the Accident for Students (within 12 months for a Teacher or Non-Teaching Employee if covered under the policy). Maximums payable are based on the fee specified in the General Practitioner Schedule of Fees and Treatment Services of the Provincial Dental Association or its equivalent as determined by the insurer.

If treatment cannot be completed within five years due to the development of a Student's teeth, the insurer will pay up to a maximum of \$3,000.00 per injured tooth for the expense incurred to cap, crown, replace or restore each injured tooth, provided treatment is completed prior to the Student reaching the age of 26.

Benefits will be paid for dental implants (subject to a maximum of three for any one Accident) required solely as a result of an Accident provided treatment is received within five years from the date of the Accident for Students (within 12 months for a Teacher or Non-Teaching Employee if covered under the policy), subject to a maximum of \$2,000.00 per implant per Accident.

Benefits will be paid for Injury-related orthodontic treatment required as a direct and sole result of an Accident provided treatment is received within five years from the date of the Accident for Students (within 12 months for a Teacher or Non-Teaching Employee if covered under the policy), subject to a maximum of \$1,500.00 per Accident.

##### Artificial Limbs, Eyes, Hearing Aids and Other Prosthetic Appliances Benefit

Payable as the result of Injury which results in these appliances being prescribed by a physician and purchased within three years from the date of the Accident, subject to a maximum of \$10,000.00. If a prosthetic appliance is damaged in an Accident and requires commercial repair, the insurer will pay the cost of repair, subject to a maximum of \$250.00 during the term of the policy.

##### Confinement Disability Benefit (Students Only)

If an Injury results in home or hospital confinement while under the regular care and attendance of a physician and the Insured Person is unable to attend classes of any type, a monthly benefit of \$500.00 is payable commencing on the 31st day of confinement not to exceed 36 consecutive months.

##### Counselling Benefit

Payable as a result of the Accidental death, Injury, or Critical Illness of the Insured Person and upon the medical advice of the attending physician for expenses actually incurred within three years by the Insured Person or a member of the immediate family for counselling performed by a registered psychologist or professional counsellor, subject to a maximum of \$1,000.00.

## Blanket Student Accident Insurance (Enhanced Coverage) Plan Summary (Continued...)

### BENEFITS (Continued...)

#### Critical Illness Benefit

Payable if an Insured Person is diagnosed by a physician with AIDS, cancer, diphtheria, encephalitis, hemolytic uremic syndrome (renal failure resulting from e-coli bacteria), meningitis, multiple sclerosis, muscular dystrophy, myocarditis, poliomyelitis, rabies, scarlet fever, tetanus, tularemia or typhoid which first manifests while the policy is in force. The insurer will pay reasonable expenses actually incurred within three years from the date of first diagnosis for semi-private or private ward hospital services and the employment of a nurse or certified nursing aid if requested by the attending physician, subject to a maximum of \$5,600.00.

#### Dentures and Artificial Teeth Benefit (Students Only)

Payable as a result of Injury which requires and receives treatment by a dentist and results in repair or replacement of existing dentures or an artificial tooth or teeth, subject to a maximum of \$250.00 during the term of the policy.

#### Dismemberment and Specific Loss Indemnity

The policy provides benefits for Injury resulting in loss of, **or permanent and total loss of use of**, which occurs within **12 months** after the date of the Accident as follows:

Both Hands or Both Feet.....	\$50,000.00
One Hand and One Foot.....	\$50,000.00
One Hand and the Entire Sight of One Eye .....	\$50,000.00
One Foot and the Entire Sight of One Eye.....	\$50,000.00
The Entire Sight of Both Eyes .....	\$50,000.00
Speech and Hearing in Both Ears .....	\$50,000.00
One Arm or One Leg.....	\$20,000.00
One Hand or One Foot.....	\$15,000.00
The Entire Sight of One Eye.....	\$15,000.00
Speech or Hearing in Both Ears.....	\$15,000.00
Entire Thumb and Entire Index Finger of the Same Hand .....	\$10,000.00
Thumbs, Fingers, or Toes (Each Entire Thumb, Finger, or Toe) ....	\$ 1,500.00
One Entire Phalanx of Any One Finger.....	\$ 1,500.00
Hearing in One Ear .....	\$ 1,500.00

Indemnity provided under this part will be paid for one of the losses, the greatest, sustained by an Insured Person as the result of any one Accident, except that when death occurs within 90 days after the date of the Accident, indemnity will only be paid under the part titled "Accidental Death Benefit".

Benefits paid or payable for any of the above losses will be the only amounts payable under the policy except those benefits payable under the parts titled "Artificial Limbs, Eyes, Hearing Aids and Other Prosthetic Appliances Benefit" and "Hospital and Paramedical Reimbursement Benefit".

#### Emergency Out-Of-Province/Country Accident Benefit

If Injury during a trip outside the Insured Person's province of residence or Canada (maximum 30-day duration) requires emergency treatment by a physician or dentist, the insurer will pay the expense actually incurred for out-patient emergency room charges, standard hospital ward charges, physician's fees, surgeon's fees, emergency services of a dentist or dental surgeon, hospital expenses, and x-rays or laboratory services as may be requested by the attending physician or dentist less the amount allowed by any provincial health plan, subject to a maximum of \$50,000.00 in Canadian funds.

#### Emergency Return Transportation Benefit

Payable due to Injury or Sickness that requires treatment or services for which indemnity is payable under the policy and results in the Insured Person, when recommended by the attending physician, having to return to his residence early or missing scheduled return transportation during any approved and supervised school trip (maximum 30-day duration), including the cost of one way economy airfare, subject to a maximum of \$500.00.

#### Emergency Transportation Benefit

Payable for expenses to transport the Insured Person by private vehicle/taxi from the location of the Accident to a physician's office or the nearest hospital, including return to the Insured Person's residence or school, when Injury requires immediate medical attention but does not necessitate an ambulance, subject to a maximum of \$350.00.

### BENEFITS (Continued...)

#### Eyeglasses and Contact Lenses Benefit

Payable as the result of Injury which requires and receives treatment by a physician, dentist or nurse within 30 days from the date of the Accident. If the Injury results in broken eyeglasses or loss or breakage of a contact lens or lenses, the insurer will pay the cost of repair or replacement, subject to a maximum of \$400.00. If the Injury necessitates the purchase of eyeglasses or contact lenses (not previously required or worn) upon the advice of a physician, the insurer will pay the reasonable and necessary expense for the initial purchase.

#### Fracture, Dislocation, Tendon Severance and Miscellaneous Indemnity

Payable as the result of an Injury which requires medical or surgical treatment and results in a covered fracture, dislocation, tendon severance or other condition, subject to a maximum of \$1,500.00.

#### Hospital and Paramedical Reimbursement Benefit

Reimbursement for expenses incurred in Canada (except as otherwise provided under the part titled "Emergency Out-Of-Province/Country Accident Benefit") within three years from the date of the Accident that are not covered under provincial health care as follows:

- hospital charges in excess of standard ward accommodations;
- licensed ground and air ambulance service (including instances involving Sickness and other non-Injury emergencies, subject to a maximum of \$1,000.00 as a result of such Sickness or other non-Injury emergency);
- the employment of a nurse or certified nursing aid if requested by the attending physician;
- treatment by a licensed chiropractor or osteopath, subject to a maximum of \$1,000.00;
- treatment by a licensed physiotherapist or registered massage therapist when requested by the attending physician, subject to a maximum of \$1,000.00;
- rental of crutches and appliances, wheelchair, or hospital-type bed (limited to purchase price);
- prescription drugs;
- splints, trusses, pressure garments and braces requested by the attending physician for curative or therapeutic purposes only (braces are limited to one purchase only with respect to any one Injury); and
- medical supplies for the purpose of dressing changes when prescribed by the attending physician, subject to a maximum of \$500.00;
- services of a licensed ophthalmologist when requested by the attending physician including expenses for diagnostic eye tests required by the ophthalmologist, subject to a maximum of \$200.00.

#### Permanent Total Disability (Students Only) (\$50,000.00)

Payable for total and permanent disability commencing within 120 days from the date of the Accident. Total and permanent disability must continue for 12 consecutive months and be total, continuous and permanent at the end of the 12 months, and must prevent the Insured Person from ever engaging in any occupation or employment for compensation or profit. Benefits paid or payable under this part will be reduced by the amount payable under any other part of the policy for the same Injury.

#### Private Tuition Expense (Students Only)

Payable for expenses of a qualified teacher including labor charges, wiring and rental of equipment to provide tutorial services from the school to the residence or hospital where the Insured Person is disabled and totally confined, subject to a maximum of \$2,500.00. Confinement must begin within 100 days from the date of the Accident and continue for a period of 30 consecutive days. Approval must be obtained from the proper school authority.

#### Rehabilitation Benefit

Payable as the result of an Accident for training to engage in a special occupation which would not have been engaged except for the Injury. Benefit is payable within three years from of the Accident, subject to a maximum of \$5,000.00.

## Blanket Student Accident Insurance (Enhanced Coverage) Plan Summary (Continued...)

### BENEFITS (Continued...)

#### Repatriation Benefit

Reimbursement of the actual expense incurred for preparing the deceased Insured Person for burial or cremation and the shipment of the body to the city of residence of the Insured Person if loss of life occurs outside the province of residence within 12 months from the date of the Accident, subject to a maximum of \$5,000.00. Travelling expenses will be paid for a member of the immediate family to identify the remains, subject to a maximum of \$500.00.

#### Special Treatment Travel Benefit

If Injury requires special medical or dental treatment by (or prescribed by) a physician or dentist that is unavailable in the municipality of the Insured Person's residence, the insurer will pay the reasonable travel and/or fuel expense to obtain it. If the Insured Person's age necessitates an escort or parent, the escort or parent will be paid for reasonable travel and/or fuel expenses plus up to a maximum of \$300.00 per day for commercial accommodation and meals, provided all receipts are submitted to the insurer. All benefits under this part are payable for 12 months from the date of the Accident and are subject to a maximum of \$2,500.00.

### EXCLUSIONS

- Sickness or disease either as a cause or effect except as otherwise provided;
- suicide or any attempt thereat or intentionally self-inflicted Injury, regardless of any impairment, illness or state of mind;
- Injury for which there are expenses incurred for a brace or similar device used for non-therapeutic purposes or solely for the purpose of participating in sports or other leisure activities;
- Injury for which there are expenses incurred for mouthguards or treatment of Temporal Mandibular Joint (TMJ) dysfunction, whatever the cause;
- Injury resulting from repetitive/strenuous activity (i.e., overexertion, strains, etc.);
- declared or undeclared war or any act thereof;
- active full-time service in the armed forces of any country;
- flying as a pilot or crew member in any aircraft;
- flying in owned, operated or leased aircraft of the Policyholder or a participating school board of the Policyholder.

No benefits or expenses are payable under the policy for treatment or services which are insured services or basic health services (i.e., physician's fees) under the provincial medical care or hospital plan applicable to the Insured Person whether or not the Insured Person is covered thereunder.

Benefits payable for dental expense shall be for excess of expenses paid, payable or insured under any government sponsored dental care plan or other dental plan or policy.

If the Insured Person is entitled to similar reimbursement benefits through any other insurer or plan, the benefits payable under the policy shall be coordinated, so that the total benefits from all insurers or plans shall not exceed the actual loss incurred.

An Insured Person can be covered under both a Blanket Student Accident policy and a Kids Plus™ Accident policy, but an Insured Person cannot be covered under more than one of each. In the event an Insured Person is enrolled under more than one Blanket Student Accident policy issued to different Policyholders, benefits with respect to any one Accident will only be made under one such policy.

**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 summary is for information purposes only and carries no contractual or other rights. All rights with respect to the benefits of an Insured Person will be governed by the Group Master Policy, a copy of which is filed with the Policyholder.*

### EXPOSURE AND DISAPPEARANCE

If due to Accident the Insured Person is unavoidably exposed to the elements and such exposure, within 12 months of the date of the Accident, results in a loss for which indemnity would otherwise have been payable under the policy, such loss will be deemed to be the result of Injury.

Where, due to the Accidental wrecking, sinking or disappearance of a conveyance in which the Insured Person was riding, the Insured Person disappears, and if the body is not found within 12 months after the date of such wrecking, sinking or disappearance, it will be presumed, subject to there being no evidence to the contrary and subject to all other terms and conditions of the policy, that the Insured Person suffered loss of life as a result of Injury.

### BENEFICIARY

Benefits payable in the event of the loss of life of an Insured Person are payable to the parent or guardian where a minor, otherwise to the estate of the Insured Person. All other indemnities payable are payable to the parent or guardian where a minor, otherwise to the Insured Person.

### TERMINATION OF INSURANCE

Insurance 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 an Insured Person reaches 70 years of age;
- (d) the date an Insured Person ceases to be associated with the participating school board of the Policyholder in a capacity making such person eligible for insurance.

### A.D.&D. CLAIMS PROCEDURES

Written notice of claim is to be given to the insurer within a period of 30 days from the date of the Accident. Claim forms are available from the plan administrator or from the insurer at (800) 266-5667. The insurer reserves the right to request additional information when processing the claim. Completed claim forms must be filed with the insurer within 90 days after the date of the Injury and no later than one year regardless of whether the full extent of loss is known.