

INSURANCE

Insurance Provider

This insurance is underwritten by Envisage Global Insurance. Envisage a specialized international group insurance broker for the J1, work and travel, youth travel and cultural exchange markets.

Period of Cover

Provided that the Insured Journey starts and ends within the Policy Period and that the appropriate declaration and premium payment have been made: In respect of Cancellation, for EEA originating trips only, cover starts on the date the Insured Journey is booked and ends with the start of the Insured Journey. In respect of all other insurance in the Policy, cover starts upon arrival in the Academic Course host country and ends when you depart the host country.

Significant Features & Benefits

Medical Maximum	\$ 5,000,000
Per injury or Illness limit	\$1,000,000
Deductible	\$ 0
Hospital Room and Board Inpatient Hospital Services Outpatient Hospital Services Doctor's office visits Urgent care visits Prescription drugs Home Health Care Local Ambulance	URC up to Medical Maximum
Emergency Room Services	URC up to Medical Maximum Subject to a \$250 Deductible for each Emergency Room visit for Treatment that does not result in a direct Hospital admission
Inpatient Mental or Nervous / Substance Abuse	\$10,000

Covid 19 Treatment	URC
Dental Treatment	Period of Coverage Limit: \$350 (Treatment due to Unexpected pain to sound, natural teeth) Period of Coverage Limit per Injury: \$500 (Non-emergency Treatment by a Dental Provider due to an Accident)
Prescription Drugs	\$250,000
Emergency Medical Evacuation and Repatriation	\$ 100,000
Emergency Medical Reunion	\$ 30,000 maximum
Return of Mortal Remains	\$ 50,000
Political Evacuation and Repatriation	\$ 10,000
Terrorist Activity	\$ 50,000
Accidental Death and Dismemberment	\$ 25,000
Loss of Checked Baggage	\$ 1,500
Personal Liability	Combined Maximum Limit: \$25,000 Injury to third person: • Per Injury Deductible: \$100 Damage to third person's property: • Per damage Deductible: \$100

* £ shall mean UK Sterling; € shall mean Euro, \$ mean USD

Aggregate Limit of Liability

The Company will pay or reimburse You up to the amount set forth in the Schedule of Benefits and subject to the condition, restrictions, and exclusions and contained in this Section 6.5 for eligible court-entered judgments or Company-approved settlements arising as a result of or in connection with the personal liability You incurred for acts, omissions, and other occurrences covered under this Certificate for losses or damages solely, directly, and proximately caused by Your negligent acts or omissions during the Period of Coverage that result in the following:

- (a) Injury to a third person occurring during the Period of Coverage;

(b) Damage or loss to a third person's personal property during the Period of Coverage; and

(c) Damage or loss to a Relative's personal property during the Period of Coverage.

The maximum payable under this Section is up to the maximum stated in the Schedule of Benefits. With respect to covered and eligible personal liability claims, the Company will pay You for associated reasonable legal fees and out-of-pocket costs incurred by You with respect to the determination and settlement of such legal liability.

Significant Exclusions

(See General Exclusions and the Specific Exclusions for each Section of the policy)

There are some situations for which the Insured Student is not covered. These generally involve anything the Student already knows about or that are caused by deliberate or illegal acts on the part of the Insured Student. The most significant exclusions of this policy are set out here.

- Pre-Existing Condition(s)
- Economic Sanctions
- The Company shall not be liable for and will not provide coverage or benefits for any claim or Charges incurred with respect to any Illness, Injury, death and dismemberment, or other consequence, whether directly or indirectly, proximately or remotely occasioned by, contributed to by, or traceable to or arising or incurred in connection with or as a result of any of the following acts or occurrences:
 - a) war, invasion, act of foreign enemy hostilities, warlike operations (whether war be declared or not), or civil war
 - b) mutiny, riot, strike, military or popular uprising, insurrection, rebellion, revolution, military or usurped power
 - c) any act of any person acting on behalf of or in connection with any organization with activities directed towards the overthrow by force of the Government de jure or de facto or to the influencing of it by violence of any type
 - d) martial law or state of siege or any events or causes which determine the proclamation or maintenance of martial law or state of siege

- e) any use of radiological, chemical, nuclear or biological weapons or any other radiological, chemical, nuclear or biological events of any type (including in connection with an act of Terrorism).
- All Charges for pre-natal care, delivery, post-natal care, and care of Newborns, including complications of Pregnancy, miscarriage, complications of delivery and/or of Newborns, the Pregnancy is a result of in vitro fertilization (IVF), artificial insemination or conception was the direct result of infertility Treatment received by the Insured Person, the Spouse of the Insured Person or the father of the Newborn are excluded from this insurance.
- Charges for Treatment of Mental or Nervous Disorders are excluded from coverage under this insurance, except as otherwise expressly provided by eDocAmerica.
- Charges for Routine Physical Examinations and immunizations are excluded from coverage under this insurance.

Other Exclusions:

- Charges for any Treatment or supplies that are:
 - a) not incurred, obtained or received by an Insured Person during the Period of Coverage
 - b) not presented to the Company for payment by way of a completed Proof of Claim within one hundred eighty (180) days from the date such Charges are incurred
 - c) not administered or ordered by a Physician
 - d) not Medically Necessary for the diagnosis, care or Treatment of the physical or mental condition involved. This also applies when and if they are prescribed, recommended or approved by the attending Physician
 - e) provided at no cost to the Insured Person or for which the Insured Person is not otherwise liable
 - f) in excess of Usual, Reasonable, and Customary
 - g) related to Hospice care
 - h) incurred by an Insured Person who was HIV + on or before the Initial Effective Date of this insurance, whether or not the Insured Person had knowledge of his/her HIV status prior

to the Effective Date, and whether or not the Charges are incurred in relation to or as a result of said status. This exclusion includes Charges for any Treatment or supplies relating to or arising or resulting directly or indirectly from HIV, AIDS virus, AIDS related Illness, ARC Syndrome, AIDS and/or any other Illness arising or resulting from any complications or consequences of any of the foregoing conditions

- i) provided by or at the direction or recommendation of a chiropractor, unless ordered in advance by a Physician
 - j) performed or provided by a Relative of the Insured Person
 - k) not expressly included in the ELIGIBLE MEDICAL EXPENSES
- Charges incurred for Surgeries, Treatment or supplies which are Investigational, Experimental, and for research purposes
 - Charges incurred related to genetic medicine
 - Charges incurred for Custodial Care 8. Charges incurred for Educational or Rehabilitative Care that specifically relates to training or retraining an Insured Person to function in a normal or near-normal manner.
 - Charges for weight modification or any Inpatient, Outpatient, Surgical or other Treatment of obesity
 - Elective Surgery or Treatment of any kind
 - Any Illness or Injury sustained while taking part in, practicing or training for: Amateur Athletics; Professional Athletics; or athletic activities
 - Any Injury or Illness sustained as a result of being under the influence of or due wholly or partly to the effects of alcohol, liquor, intoxicating substance, narcotics or drugs other than drugs taken in accordance with Treatment prescribed and directed by a Physician but not for the Treatment of Substance Abuse
 - Any willfully Self-inflicted Injury or Illness
 - Any sexually transmitted or venereal disease
 - Any testing for the following when not Medically Necessary: HIV, seropositivity to the AIDS virus,

AIDS related Illnesses, ARC Syndrome, AIDS

- Others