

ALUMO

2026-2027

International Student Program

Seneca Polytechnic

Policy: 181889

Prescription Drug,
Extended Health &
Dental Coverage Summary



ALUMO

**Questions? Call Alumo:
416-913-7950**

Please have your student ID readily available.

2255 Sheppard East, Atria 1, 2nd Floor Suite 202 Toronto, ON M2J 4Y1

www.alumo.ca

This booklet is provided for the purpose of explaining the benefits provided under the group policy and is not a contract of insurance.

The terms and conditions of the group policy will prevail. The complete terms, conditions, exclusions, limitations and restrictions governing the coverage are found in the group contracts issued by the insurers.

For questions regarding the information in this booklet or if additional information about the benefits is required, the Student should contact: Alumo. Content subject to change without notice.

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Alumo administers the group policy, however it is not the insurance carrier and it is not responsible for the approval, adjudication or payment of claims.

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Seneca Polytechnic

PRESCRIPTION DRUG, EXTENDED HEALTH & DENTAL

Coverage Summary

Policy: 181889

Underwritten by Canada Life, administered by Alumo

Extended Health Insurance

MEDICAL EXPENSES INCURRED IN CANADA

REIMBURSEMENT

Drugs	100%
All other covered expenses	100%

Deductible	None
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COVERED EXPENSES

MAXIMUMS PER INSURED PERSON

Ambulance	\$100 per student year
Emergency Taxi	\$50 per student year
Drugs including injectable vitamins	\$5,000 per student year
Preventive vaccines	\$150 per student year
Intra-uterine devices, oral contraceptive, contraceptive patches, contraceptive rings and contraceptive shots	Combined maximum of \$200 per student year
Diabetic monitoring devices and administration equipment	Combined maximum of \$1,000 per period of 5 consecutive calendar years
Breast prostheses months	\$150 per period of 24 consecutive months
Orthopedic shoes and foot orthoses	Combined maximum of \$150 per student year

Fees for the following paramedical practitioners:

Physiotherapists and physical rehabilitation therapists	Combined maximum of \$500 per student year
Psychologists, psychoanalysts and social workers	Combined maximum of \$1,000 per student year

SUMMARY OF BENEFITS

Osteopaths	Maximum of \$500 per student year
Chiropodists and podiatrist	Combined maximum of \$500 per student year
Artificial prostheses	\$200 per student year
Wheelchairs, including repairs	\$250 per lifetime
Accidental dental	\$2,000 per student year
Hearing aids years	\$500 per period of 5 consecutive years
Eye examinations	\$50 per period of 24 consecutive months One eye examination per period of 24 consecutive months
Eyeglasses and contact lenses	\$75 per period of 24 consecutive months
Corrective laser eye surgery	\$75 per eye per lifetime
Medical appliances other than those listed above	\$250 per lifetime
Medical supplies	\$250 per student year
Tutorial services	\$15 per hour, maximum of \$1,000 per student year

FRACTURE AND DISLOCATION BENEFIT

<u>Schedule of Losses</u>	<u>Maximum Per Insured Person</u>
Of the skull (depressed)	\$300
Of the skull (not depressed)	\$100
Of the nose	\$20
Of the upper jaw	\$75
Of the lower jaw	\$40
Of the collar bone	\$40
Of the shoulder blade	\$75
Of the spine (one or more vertebrae)	\$150
Of the spinous process	\$40
Of the transverse process	\$40
Of the sacrum or coccyx	\$50
Of the rib	\$20
Of two or more ribs	\$40
Of the sternum	\$40
Of the hip	\$150
Of the pelvis	\$150
Of the knee cap (patella)	\$50
Of the lower leg (one bone) tibia or fibula	\$75
Of the lower leg (two bones) tibia or fibula	\$100
Of the leg (femur)	\$150
Of the ankle	\$75
Of the upper arm (humerus)	\$75
Of the elbow	\$50
Of the lower arm (one bone) radius or ulna	\$75
Of the lower arm (two bones) radius or ulna	\$100
Of the wrist	\$75
Of the hand (one metacarpal)	\$20
Of the hand (one or more metacarpals)	\$40
Of the finger	\$20
Of the fingers (two or more)	\$40
Of the foot (one metacarpal)	\$20
Of the foot (two or more metacarpals)	\$40
Of the toe	\$20
Of the toes (two or more)	\$40
Of the heel	\$50
Of a bone not mentioned in this table	\$20
A chip or linear fracture of any of the above bone or bones	\$20

SUMMARY OF BENEFITS

HOME CARE BENEFIT

Deductible	None
Reimbursement	100%
Maximum per	\$60 per day, maximum of \$10,000 student year
Overall limitation	2 periods of convalescence per calendar year

Dental Insurance

REIMBURSEMENT

Preventative treatments	80%
Basic and Periodontic treatments	80%
Endodontic treatments	50%
Major treatments	50%

Deductible	None
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COVERED EXPENSES

Preventative, Basic, Periodontics,
Endodontics and Major treatments

MAXIMUM PER INSURED PERSON

\$750 per student year

Expenses are reimbursed according to the dental fee guide in effect for the current year in the insured person's province of residence, subject to any limits which are stated under the Dental Care Insurance benefit. If the insured person resides in Alberta, the current fee guide is considered to be the 1997 Alberta Dental Association Fee Guide for General Practitioners, plus an inflationary adjustment as determined by the insurer.

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