Hospital Accommodation •Reasonable and customary cost for inpatient and outpatient treatment

Physician Charges •Medical treatment by a physician

Diagnostic Services •Reasonable and customary cost for x-rays and laboratory tests

Private Duty Nursing during Hospitalization •Up to the sum insured

Ambulance Services

•When reasonable and medically necessary, licensed ground ambulance service to the nearest hospital

Prescription Drugs •Up to \$500, limited to a 30-day supply per prescription unless you are hospitalized

Medical Appliances •Cast, splints, trusses, braces, crutches, rental of a wheelchair or other minor medical appliances

Paramedical Services

•Chiropodist, chiropractor, osteopath, physiotherapist or podiatrist, up to \$500 per type of practitioner provided such treatment is prescribed by a physicianand approved by Ontime Care

Acupuncture •Up to \$500 with a 365-day policy

Treatment of Dental Accident •Up to \$3,000

Emergency Relief of Dental Pain •Up to \$500

Flight Accident •Up to sum insured

Repatriation •When approved in advance by World Travel Protection Inc.

Preparation and Return of Remains •Up to \$10,000

JF Insurance Agency Group Inc.													
Berkley Insurance Company Rates - Effective January 1, 2015 JF ROYAL VISITORS TO CANADA Rate Schedule 1 - Daily Rates With stable pre-existing conditions coverage option													
							\$0 Deductible						
								\$10,000	\$15,000	\$25,000	\$50,000	\$100,000	
							Up to 25	\$1.70	\$2.04	\$2.27	\$2.49	\$3.59	\$4.3
26-40	\$1.86	\$2.22	\$2.49	\$2.74	\$4.02	\$4.6							
41-60	\$2.14	\$2.55	\$2.86	\$3.11	\$4.95	\$5.7							
61-64	\$2.44	\$3.11	\$3.73	\$4.02	\$4.98	\$6.1							
65-69	\$3.00	\$3.91	\$4.72	\$5.09	\$5.94	\$7.4							
70-74	\$4.85	\$6.32	\$7.60	\$8.35	\$9.79	\$12.1							
75-79	\$5.80	\$7.54	\$8.96	\$9.88	\$11.59	\$14.4							
80-85	\$11.48	N/A	\$17.76	\$19.58	\$22.95	N/A							
86+	N/A	N/A	N/A	N/A	N/A	N//							
Deductible	e Options:												
\$100 Deductible 5% Discount													
\$1,000 Deductible 20% Discount													
\$2,500 Deductible(Disappearing) 30% Discount													
Applies to	\$25,000 Pol	icy Limit or	nly - Any Ag	e - Per Pers	ion, per sick	aness							
\$2,500 Deductible(Disappearing) 25% Discount													
Applies to \$50,000 Policy Limit only - Up to Age 85 - Per Person, per sickness													
\$3,000 Deductible 30% Discount													

Rate Schedule 2 - Daily Rates Without stable pre-existing conditions coverage option Age 70 to Age 85: \$0 Deductible Age 86 and older: \$500 Deductible \$10.000 \$15,000 \$25,000 \$50,000 \$100,000 \$150,000 Up to 2 N/A 26-40 N/A N/A N/A N/A N/A N/A 41-60 N/A N/A N/A N/A N/A N/A 61-64 N/A N/A N/A 65-69 N/A N/A N/A 70-74 \$3.82 \$4.99 \$5.99 \$6.59 \$8.12 N/A N/A \$4.59 \$5.98 \$7.11 \$7.83 75-79 \$10.32 80-85 \$6.23 \$7.88 \$9.69 \$10.43 \$13.94 N/A \$9.57 \$12.37 \$14.90 \$16.40 \$22.30 N/A 86+ Deductible Options: (Not Available to Age 86 and older) \$1,000 Deductible 20% Discount

30% Discount

\$3,000 Deductible

To be eligible for coverage under this plan, the applicant must:

1.be a visitor to Canada, a person with a Canadian work visa or super visa, an immigrant to Canada or a Canadian resident, who is not eligible for a provincial or territorial government health insurance plan in Canada;

2.not have been in Canada for more than 2 consecutive years prior to the policy effective date;

3.be at least 15 days of age on the date of purchase;

4. not be travelling against the medical advice of a physician and/or have been diagnosed with a terminal illness. A terminal illness means that you have a medical condition that is cause for a physician to estimate that you have less than 6 months to live or for which palliative care has been received.

5.not have a kidney disease requiring dialysis;

6.not have Congestive Heart Failure, AIDS or require the use of home oxygen;

7.not be experiencing new or undiagnosed symptoms and/or know of any reason to seek medical attention.

Note: Your spouse and/or child(ren) must also meet all the criteria to be eligible for family coverage under this plan.