

## » ONLINE OPTIONS

The following is a partial list of services that are available online at [www.wespeakstudent.com](http://www.wespeakstudent.com)

- Chat with a live operator
- Purchase coverage for your spouse and/or dependent(s) before the deadline date
- Find practitioners
- Download claim forms and plan booklet
- General inquiries

## » COORDINATION OF BENEFITS

Benefits under two insurance plans can be co-ordinated to increase your coverage up to a total of 100%.

For example, if you have other coverage in place following payment under this plan, you can submit outstanding balances to the other plan for consideration.

## » FAMILY ADD-ON

For an additional fee, you are able to add family members (spouse and/or dependents) to the plan. Visit [www.wespeakstudent.com](http://www.wespeakstudent.com) to complete the family application form by the required deadline. Please verify you have entered all information.

## » OPTING OUT

Upon providing proof of alternative coverage students may "opt-out" of the Health Plan at [www.wespeakstudent.com](http://www.wespeakstudent.com) and receive a Health Plan refund.

## » DEADLINE DATES

September Start Students: Friday, October 9th at 4pm  
January Start Students: Friday, February 5th at 4pm

**WE SPEAK**  
STUDENT

## » HOW TO FILE YOUR CLAIM

Your drug/dental and extended health care claims are paid by ClaimSecure.

**Pay Direct (drug/dental claims):** The **Pharmacy/Dental Office** can submit your claim electronically for you, limiting your out of pocket expense. You will need to give the pharmacy the following:

- **Your Group Number is 514926**
- **Provider: ClaimSecure**
- **Your Student ID #: V 0 0 \_ \_ \_ \_ \_ \_ \_ \_**  
(10 digit numeric number)

**Example:** If your student ID # is 7 digits, the correct ID # would be V007654321.

**By Mail:** Fill out the appropriate claim form (all claim forms can be downloaded from [wespeakstudent.com](http://wespeakstudent.com)), **attach your original receipts and mail directly to ClaimSecure at:**

**ClaimSecure Inc.**  
**P.O. Box 6500, Station A**  
**Sudbury, ON, P3A 5N5**

## » COVERAGE PERIOD

September Start Students: September 1 - August 31  
January Start Students: January 1 - August 31

Visit [www.wespeakstudent.com](http://www.wespeakstudent.com) for more detailed information about your Health & Dental Plan coverage or call WeSpeakStudent toll free at **1-800-315-1108**.



NIPISSING UNIVERSITY STUDENT UNION

**NUSU**

**2020-2021**



NIPISSING UNIVERSITY STUDENT UNION

**HEALTH & DENTAL PLAN**

**WE SPEAK**  
STUDENT

# YOUR HEALTH & DENTAL PLAN

## Prescription Drugs



80% co-insurance

90% at Shoppers Drug Mart

Unlimited maximum\*

\* Mirena, Kyleena, Jaydess IUD (\$200 maximum)

\* Nuva Ring contraceptive (\$178 maximum)

\* Gardasil vaccine (subject to a maximum of \$150.00 per Insured per policy year, only when purchased through the Campus Health Centre)

## Dental



Basic and Preventative: 100% co-insurance

Minor Restorative: 70% co-insurance, 95% with Network

Major Restorative: 10% co-insurance, 30% with Network

Maximum of \$750

## Extended Health Care



Vision: \$60 maximum for one eye exam

Prescribed lenses and frames or contacts: \$200 maximum  
every 24 consecutive months

Paramedical Practitioners: \$40 per visit (\$400 maximum)