

// Important Information

Opting Out

Upon providing proof of alternate coverage, students may "opt out" of the Health and Dental prior to the deadline date and a refund will be issued direct deposit. Opt Out online at www.wespeakstudent.com by clicking the Opt Out tab and completing the opt out application.

Deadline Dates

Fall semester start students: September 30, 2024 at 4pm
Winter semester start students: January 31, 2025 at 4pm
Summer semester start students: May 31, 2025 at 4pm

Online Options

The following is a partial list of services that are available online at www.wespeakstudent.com:

- Choose your plan (deadline applies)
- Chat with a live operator
- Purchase coverage for your spouse and/or dependent(s) before the deadline date
- Find practitioners
- Create a Profile to submit/track your claims
- Download claim forms and plan booklet
- General inquiries
- Get information on your Out of Province/Canada Medical Emergency Insurance

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 to complete the family application form by the required deadline. Please verify you have entered all information correctly, print & keep your confirmation #.

Student Assistance Program

The WeConnect Student Assistance Program (SAP) provides eligible students and their dependents with short-term therapy, lifestyle counselling, courses, tools and events to improve mental and physical health.

- Access is available 24/7 by phone or virtual resources, worldwide.
- Care is immediate by connecting with the intake team and there is no level of payment required.

Call 1-888-377-0002 or find more information through www.wespeakstudent.com.

// Claims Submission

How to File Your Claim

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

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

Your Group Number is: 513983

**WE SPEAK
STUDENT**

Provider: ClaimSecure

- (formerly RxPlus/Merx Health Corporation)

Your Certificate/Student ID #: i _____

- (10 digit alpha numeric number)
- I.E. If your student ID # is 7 digits, the correct Certificate/Student ID # would be i007654321

All Dental Inquiries, call toll-free at 1-888-513-4464.

Submit Online: You are also able to submit your claim electronically by creating a profile with the insurer. You will need to provide your Group number, Student ID number and date of birth when setting up your profile. You must also set up a direct deposit account for reimbursement. Please go to www.wespeakstudent.com and select the Create a Profile button.

By Mail: Fill out the appropriate claim form. All claim forms can be downloaded from www.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 Begin and End Dates

September Start Students: September 1 - August 31

January Start Students: January 1 - August 31

May Start Students: May 1 - August 31

Plan Consultants

2255 Sheppard East, Atria 1
2nd Floor Suite 202 Toronto, ON M2J 4Y1
Tel: 416-216-0296 Fax: 416-216-1179
Toll-Free: 1-800-315-1108
Website: www.wespeakstudent.com
Email: help@aclstudentbenefits.com

DOMESTIC STUDENT INSURANCE PLAN


St. Lawrence
College

Student Insurance Plan

(Full-time Students Only)

2024-2025

- Policy # 100011722
- Group # 513983

Designed for the students of
St. Lawrence College

**WE SPEAK
STUDENT**

As a full-time registered student you are automatically covered for the benefits described herein.



What Plan Works Best For You?

All full time **Domestic** students who have paid the compulsory Student Insurance Fees are **automatically** enrolled in the **Balanced Plan**. If you wish to select an alternate plan you must do so prior to the deadline date at no additional cost.

All full time **International** students who have paid the compulsory Dental Plan Fee have dental coverage as outlined in the **Balanced Plan**.



Flex Plan Selection - Deadline Dates Apply:

September Start Students: September 30, 2024 at 4pm

January Start Students: January 31, 2025 at 4pm (new students ONLY)

May Start Students: May 31, 2025 at 4pm (new students ONLY)

FLEX PLAN OPTION 1

BALANCED PLAN (AUTO-ENROLLED)

PRESCRIPTIONS:

80% co-insurance
\$8.00 Dispensing Fee Max
Maximum: \$5,000

DENTAL:

Basic and Preventative: 100%
Minor Restorative: 75%
Extractions (limit 2 wisdom teeth): 75%
Major Restorative: 10%
Maximum: \$500

EXTENDED HEALTH CARE:

Vision: 100% coverage to a maximum of \$65 for a general eye exam and \$80 for prescribed lenses and frames and/or contact lenses every 24 consecutive months.

AD&D Coverage Included

FLEX PLAN OPTION 2

ENHANCED DRUG/VISION PLAN

PRESCRIPTIONS:

90% co-insurance
\$8.00 Dispensing Fee Max
Maximum: \$6,500

DENTAL:

Basic and Preventative: 80%
Minor Restorative: 50%
Extractions (does not include wisdom teeth): 50%
Major Restorative: 10%
Maximum: \$350

EXTENDED HEALTH CARE:

Vision: 100% coverage for a general eye exam and \$120 for prescribed lenses and frames and/or contact lenses every 24 consecutive months.

AD&D Coverage Included

FLEX PLAN OPTION 3

ENHANCED DRUG & EXTENDED HEALTH CARE/VISION PLAN

PRESCRIPTIONS:

90% co-insurance
\$8.00 Dispensing Fee Max
Maximum: \$6,000

EXTENDED HEALTH CARE:

Paramedical Practitioners:
80% coverage to a maximum of \$300 per year for: massage*, physiotherapist*, clinical psychologist* and naturopath/chiropractor.
*physician referral required

Vision: 100% coverage for a general eye exam and \$160 for prescribed lenses and frames and/or contact lenses every 24 consecutive months.

AD&D Coverage Included

FLEX PLAN OPTION 4

ENHANCED DENTAL PLAN

PRESCRIPTIONS:

65% co-insurance
\$8.00 Dispensing Fee Max
Maximum: \$2,500

DENTAL:

Basic and Preventative: 100%
Minor Restorative: 80%
Extractions (limit 2 wisdom teeth): 80%
Major Restorative: 20%
Maximum: \$750

EXTENDED HEALTH CARE:

Vision: 80% coverage to a maximum of \$65 for a general eye exam and \$65 for prescribed lenses and frames or contact lenses every 24 consecutive months.

AD&D Coverage Included



LIVE HELP MESSAGING

Have a question? Chat with a live member of the WeSpeakStudent team. **Visit www.wespeakstudent.com, Student ID # is required.**



How do I choose one of the Enhanced Plans?

- 1) Please visit www.wespeakstudent.com before the deadline date.
- 2) Click on the Choose Your Plan option, select one of the plans, enter the required information and submit.
- 3) Print & keep your confirmation # for your records.

Please refer to the student insurance booklet available at www.wespeakstudent.com for plan details such as eligible providers, required referrals, exclusions etc.