

# WE SPEAK STUDENT

## » 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
- Opt-out if you have alternative coverage
- 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.

## » FAMILY ADD-ON DEADLINE DATES

**September Start Students:**  
October 13, 2020 @ 4:00pm

**January Start Students:**  
February 16, 2021 @ 4:00pm

**May Start Students:**  
June 7, 2021 @ 4:00pm

\* Family coverage must be purchased prior to the deadline date of the start of your first semester in the policy year.

i.e Fall semester student would not be able to purchase family coverage in the Winter semester.

## » 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 510005**
- **Provider: ClaimSecure**
- **Certificate ID #: \_ \_ \_ \_ \_ C C S**  
(10 digit numeric number)

As your student ID number is 9 digits long, please list the LAST 7 digits of your ID followed by CCS

**i.e. If your student id is 300456789,  
the correct ID # would be 0456789CCS**

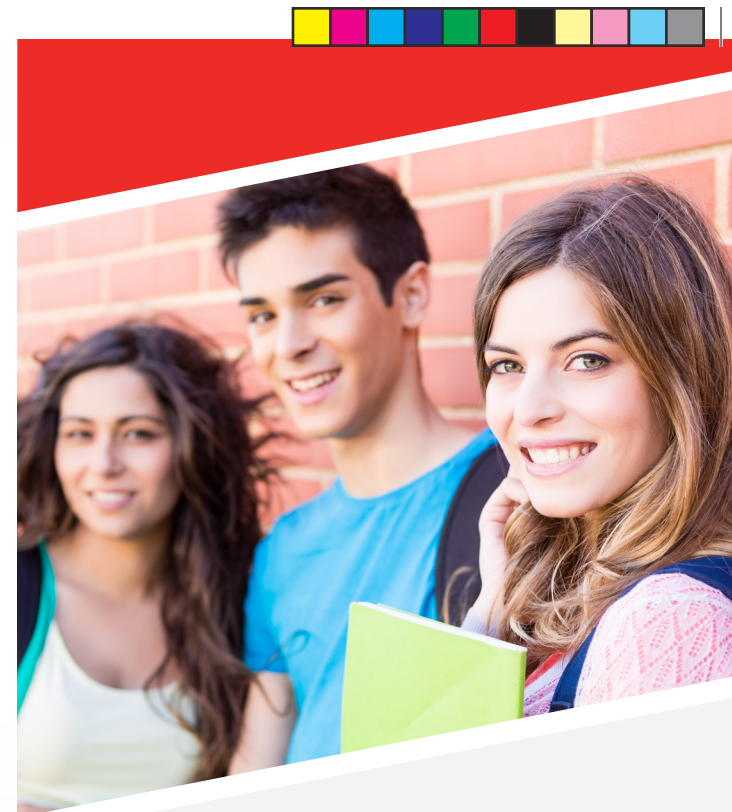
**By Mail:** Fill out the appropriate claim form (all claim forms can be downloaded from [wespeakstudent.com](http://wespeakstudent.com)), **attach your original receipts and mail directly to ClaimSecure at:**

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

## » COVERAGE PERIOD

September Start Students: September 1 - December 31  
January Start Students: January 1 - April 31  
May Start Students: May 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.**



## NEW FOR 2020-2021



YOUR CENTENNIAL COLLEGE STUDENT ASSOCIATION INC.

## HEALTH & DENTAL PLAN

For Full Time Domestic Students Only

**WE SPEAK STUDENT**

POLICY # 100011704

GROUP # 510005



# YOUR NEW HEALTH & DENTAL PLAN

## Prescription Drugs



90% co-insurance

\$1,200 Maximum

**Including:** TwinRix, Contraception up to \$200

## Dental



**Basic and Preventative:** 70% (95% with a Network Dentist)

**Minor Restorative:** 50% (75% with a Network Dentist)

**Extractions (limit 2 wisdom teeth):**  
15% (40% with a Network Dentist)

**Maximum: \$400**

## Extended Health Care



**Vision:**

\$80 maximum for one eye exam every 24 consecutive months

**Prescribed lenses and frames or contacts:**

\$100 maximum every 24 consecutive months

**Paramedical Practitioners:** 80% coverage per treatment

\$500 for combined coverage of a clinical psychologist/speech therapist

\$300 for combined coverage of a registered massage therapist /physiotherapist\*

\*physician referral required