

DSU HEALTH & DENTAL PLAN FAQ



YOUR VOTE, YOUR CHOICE

1. WHY A STUDENT HEALTH & DENTAL PLAN?

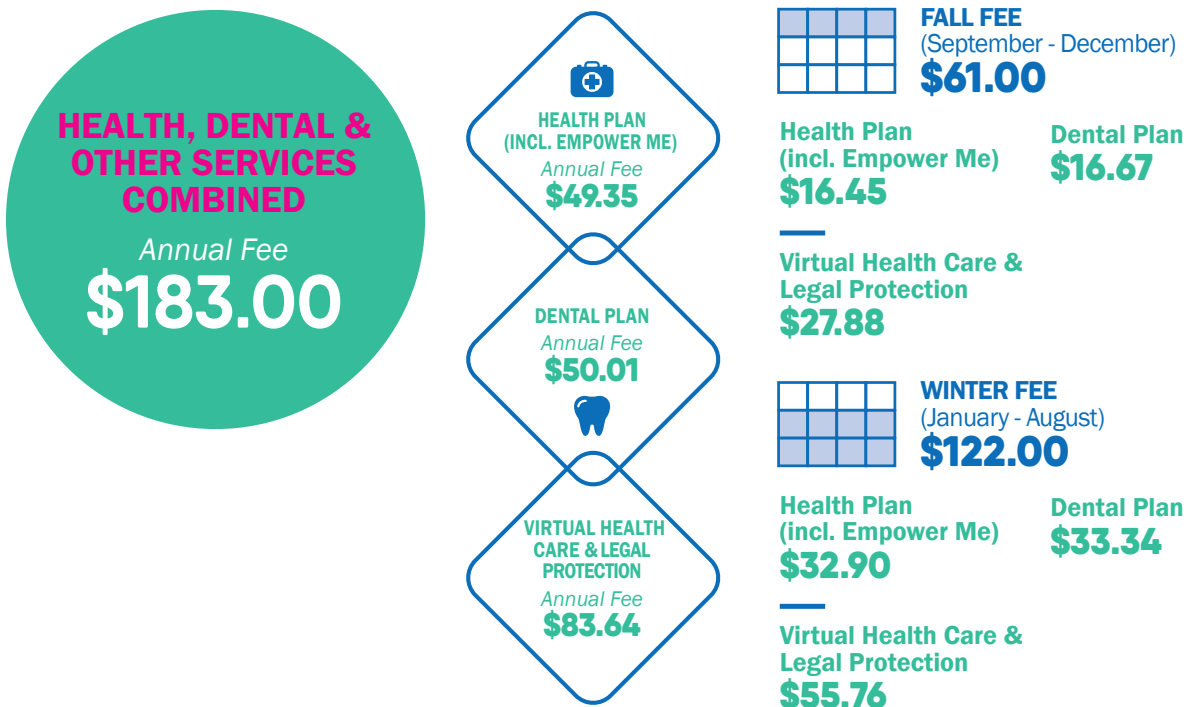
A number of important health-care services are often not covered by provincial health care or a private insurance plan, such as ambulance fees, dental care, etc.

For many students, paying for these services can lead to financial hardship, while others cannot afford them at all. A student health and dental plan provided by your student union would help fill gaps in government health care, allowing you to maximize your overall coverage up to 100%.

2. HOW MUCH WOULD IT COST?

The total full-year fee for coverage from Sept. - Aug. would be \$183 (or \$122 for winter semester coverage from Jan. - Aug.), automatically included in your tuition and other fees. The fee would provide access to:

- Health Plan (including health, vision, and travel benefits, and the mental health and wellness service Empower Me)
- Dental Plan (dental benefits)
- Separate from the Health & Dental Plan, access to Virtual Health Care provided by Dialogue and a Legal Protection Program



3. WHO WOULD BE AUTOMATICALLY ENROLLED?

All DSU members would be automatically enrolled in the DSU Health & Dental Plan and would have access to Empower Me, Virtual Health Care, and the Legal Protection Program.

4. WHEN WOULD THIS PLAN TAKE EFFECT?

The Plan would likely take effect on Jan. 1, 2022, in which case students would pay 2/3 of the annual fee for coverage from Jan. - Aug.

5. WHAT WOULD BE THE POLICY YEAR?

The regular 12-month full policy year (for students registered in the fall semester) would be from Sept. 1 - Aug. 31. For students who start in the winter semester, it would be Jan. 1 - Aug. 31.

In 2022, the Plan would likely begin with an 8-month policy year for all eligible students from Jan. 1 - Aug. 31, 2022.

6. WHAT WOULD BE COVERED?

BENEFITS

ORAL CONTRACEPTIVES, ANTIDEPRESSANTS & NEUROSTIMULANTS		Second payer
VACCINATIONS		100%, up to \$150/policy year
DIAGNOSTIC SERVICES		100%
AMBULANCE		100%
HEALTH PROFESSIONALS	CHIROPRACTORS, PHYSIOTHERAPISTS, MASSAGE THERAPISTS, DIETITIANS, OSTEOPATHS, PODIATRISTS/CHIROPODISTS (COMBINED), SPEECH THERAPISTS, ATHLETIC THERAPISTS	\$40/visit, up to \$400/policy year/specialist
EYE EXAM		\$50/policy year
EYEGASSES & CONTACT LENSES		\$75/24 months
HEALTH & VISION	ANNUAL MAXIMUM	\$5,000
TRAVEL		120 days/trip, \$5 million/lifetime
TRAVEL	TRIP CANCELLATION	\$3,000/trip
TRAVEL	TRIP INTERRUPTION	\$7,500/trip
EMPOWER ME	WELL-BEING RESOURCES: CONFIDENTIAL SUPPORT SERVICE	Available 24/7
DENTAL	PREVENTIVE SERVICES (RECALL EXAMS, CLEANINGS)	50%
DENTAL	BASIC SERVICES (FILLINGS, ROOT CANALS, GUM TREATMENTS)	50%
DENTAL	WISDOM TEETH REMOVAL	50%
DENTAL	ANNUAL MAXIMUM	\$750/policy year
LEGAL PROTECTION PROGRAM	TOLL-FREE ASSISTANCE HELPLINE	Access to a legal consultation service
LEGAL PROTECTION PROGRAM	HOUSING, EMPLOYMENT, ACADEMIC, HUMAN RIGHTS, CIVIL MEDIATION, SMALL CLAIMS	A lawyer will take charge of proceedings
VIRTUAL HEALTH CARE	CONNECT WITH NURSES AND PHYSICIANS VIA A MOBILE OR WEB APP (PROVIDED BY DIALOGUE)	Anywhere in Canada

YOU PAY **\$183.00**

7. WHAT ELSE WOULD BE COVERED?

You would also have access to the following benefits.

	Per policy year
DENTAL ACCIDENT	100%, UP TO \$5,000
ACCIDENTAL DEATH & DISMEMBERMENT	UP TO \$5,000
MEDICAL EQUIPMENT	100%
TUTORIAL SERVICE	\$25/HOUR, UP TO \$1,000
HOSPITALIZATION	100%
HOSPITAL CASH BENEFIT	\$50/DAY

8. WHAT IF I'M ALREADY COVERED BY ANOTHER PLAN?

If you're already covered by another plan, you could combine plans to maximize your overall coverage, up to 100%.

A parent's insurance plan could also stop covering you completely if you're a part-time student over 21 or a full-time student over 25.

9. COULD I ENROL MY FAMILY?

Yes. You would be able to enrol your family (spouse and/or dependent children) each year by paying an additional fee, over and above your fee as a member of the Plan. Common law couples would be eligible.



**ADD ONE DEPENDANT FOR
\$183.00
(FULL-YEAR COVERAGE)**



**ADD UNLIMITED DEPENDANTS FOR
\$366.00
(FULL-YEAR COVERAGE)**

10. IF I DON'T WANT TO BE COVERED, COULD I OPT OUT?

Yes. If you do not wish to be covered by the Plan, a secure online opt-out processing system, available at the beginning of the semester, would allow you to opt out without having to provide proof of alternative coverage.

Students could choose to keep the Plan or opt out partially or entirely.

11. WHY WOULD I HAVE TO OPT OUT IF I DON'T WANT COVERAGE? WHY CAN'T I JUST SIGN UP FOR HEALTH AND DENTAL INSURANCE ON AN INDIVIDUAL BASIS?

Individual insurance plans have always been available for purchase. These plans suffer from several drawbacks:

- A - They're very expensive—often several times the cost of a student health and dental plan.
- B - They discriminate by sex and age.
- C - They exclude individuals with pre-existing illnesses (people who need a plan the most).

As a result, individual health and dental plans aren't a real solution. Experience shows that only group insurance programs can meet students' health and dental needs at a reasonable cost.

A student health and dental plan is a collective investment to ensure a minimum standard of health care for the student body.

12. HOW WOULD I CLAIM BENEFITS?

Health and dental claims could be sent to the insurer through the following methods:

- Via the Studentcare mobile app, available for download from the App Store and Google Play
- By mail

13. WOULD I HAVE ACCESS TO OTHER SERVICES AND DISCOUNTS?

Yes. Plan administrator Studentcare has developed the Studentcare Networks, networks of health professionals who offer additional discounts to students enrolled in the Plan, over and above any amount covered by the insurance portion of the Plan.

The following Studentcare Networks would provide additional discounts to DSU Plan members: dental, vision, psychology, physiotherapy, and chiropractic.

You would be covered for the insured portion of your Plan regardless of the health-care practitioner you chose. By consulting a Network professional, you would get additional coverage.

