

Choose the Benefits Plan **that's *RIGHT* for you!**

POWERED BY YOUR
nCSAC

Flex Plan Option 1: Balanced Plan (Auto-Enrolled)

Drugs:

80% Coverage
\$5,000 Maximum

Dental:

100% Basic/Preventative
75% Extractions & Oral Surgery
75% Minor Restorative
10% Major Restorative
10% Endodontic/Periodontics
\$500 Maximum

Extended Health Care:

80% Coverage
Max of \$300 per benefit year
Physiotherapist
Registered Massage Therapist
Chiropractor and/or Naturopath
Acupuncturist
Dietician and/or Nutritionist
Osteopath
Max of \$300 per benefits year
Physiologist (Social Worker)
and/or Speech Therapy

Vision:

100% Coverage for
One eye exam and \$50 for
prescribed lenses and frames
and/or contact lenses every
24 consecutive months

Flex Plan Option 2: Enhanced Drug/Vision Plan

Drugs:

90% Coverage
\$6,000 Maximum

Dental:

80% Basic/Preventative
50% Extractions & Oral Surgery
50% Minor Restorative
0% Major Restorative
0% Endodontic/Periodontics
\$350 Maximum

Extended Health Care:

65% Coverage
Max of \$300 per benefit year
Physiotherapist
Registered Massage Therapist
Chiropractor and/or Naturopath
Acupuncturist
Dietician and/or Nutritionist
Osteopath
Max of \$200 per benefits year
Physiologist (Social Worker)
and/or Speech Therapy

Vision:

100% Coverage for
One eye exam and \$150 for
prescribed lenses and frames
and/or contact lenses every
24 consecutive months

Flex Plan Option 3: Enhanced Dental/Vision Plan

Drugs:

70% Coverage
\$1,500 Maximum

Dental:

100% Basic/Preventative
85% Extractions & Oral Surgery
85% Minor Restorative
0% Major Restorative
0% Endodontic/Periodontics
\$750 Maximum

Extended Health Care:

60% Coverage
Max of \$300 per benefit year
Physiotherapist
Registered Massage Therapist
Chiropractor and/or Naturopath
Acupuncturist
Dietician and/or Nutritionist
Osteopath
Max of \$200 per benefits year
Physiologist (Social Worker)
and/or Speech Therapy

Vision:

100% Coverage for
One eye exam and \$175 for
prescribed lenses and frames
and/or contact lenses every
24 consecutive months

Flex Plan Option 4: Enhanced EHC/Vision Plan

Drugs:

70% Coverage
\$2,500 Maximum

Dental:

85% Basic/Preventative
50% Extractions & Oral Surgery
50% Minor Restorative
0% Major Restorative
0% Endodontic/Periodontics
\$400 Maximum

Extended Health Care:

100% Coverage
Max of \$400 per benefit year
Physiotherapist
Registered Massage Therapist
Chiropractor and/or Naturopath
Acupuncturist
Dietician and/or Nutritionist
Osteopath
Max of \$400 per benefits year
Physiologist (Social Worker)
and/or Speech Therapy

Vision:

100% Coverage for
One eye exam and \$200 for
prescribed lenses and frames
and/or contact lenses every
24 consecutive months

Visit [WeSpeakStudent.com](https://www.wespeakstudent.com)
to choose your
plan, opt out, get
more information or
obtain your Student
Benefits Card.

Benefits are automatic for
full-time students only!

To confirm your coverage
or get more details,
be sure to visit the NCSAC
office at your campus.

**WE SPEAK
STUDENT**

**DEADLINES ALL
END AT 4PM:**

Fall 2023 Students - **Sep 1st to Sep 30th**

Winter 2024 Students - **Jan 1st to Jan 31st**

Summer 2024 Students - **May 1st to May 31st**

All plans include AD&D, Out of Country Travel, and True Life.

For detailed information please review your student health and dental benefits by visiting www.wespeakstudent.com