Frequently Asked Questions

Please see the list of questions regarding plan details and operations for the upcoming 2021-2022 policy year.

Q1. Who is eligible for coverage?

Full-time students enrolled in 3 or more courses and paying full time fees for the September term at Dalhousie are automatically covered under the Health & Dental benefits.

The following students are not covered automatically and must Opt-In:

- Study abroad / exchange students
- Co-op students on a work term
- Part-time students
- Distance education students
- Students beginning in January & May (Opt-In during the appropriate opt-in period)

Q2. How much do the benefits cost?

The DSU Health and Dental Plan for the 2021-2022 policy year will cost $468.46.

Q3. How can I see an outline of my coverage?

You can find an outline of all of your coverage in the Benefits Brochure, or see an outline of coverage broken down by Drug, Extended Health, Vision, Dental, Travel and Accident coverage.

Q4. How do I know if I am covered by the extended health and dental benefits?

Check the breakdown of your annual general fees; if they include the health and dental fees, you are automatically enrolled in the benefits. In order to confirm that your coverage is in-force and to confirm the period of coverage you can reach us at: 1-888-918-5056. If your annual general fees do not include the health and dental fees, you can enroll yourself during the month of your annual registration.
Q5. What are my coverage effective dates?

The current policy year will run from September 1, 2020 - August 31, 2021. For Fall enrolments, coverage begins September 1, 2021. Winter enrolments begin January 1, 2021 and Spring enrolments begin May 1, 2022. All students on the benefits will have the same termination date of August 31, 2022.

Q6. Where can I access my Benefits Card?

You can download a printable copy of your plan card here, or visit your health plan office for a plastic card.

Q7. Where can I find Discounted Service Providers?

Student VIP offers a wide variety of discounted providers. You can use a VIP Preferred Practitioner to save up to 20% on eligible services near your campus or home. To access the full network listing, please utilize our Provider Search Tool. Enter an address, select the type of practitioner, and the area you would like to search. The results will display, with any discount providers highlighted at the top of the search results. To set up an appointment, simply give them a call.

If your health service provider is not on the network, please ask them to Contact Us!

Q8. Can I still use Student VIP Perks, even if I opt-out of the benefits?

Yes! Many Student VIP Perks are available to all Dalhousie Students, regardless of whether or not they are currently covered under the Student Health and Dental benefits.

Q9. Do I need to submit a prescription with my claim?

Drug Claims & Vision Appliances always require a prescription.

Registered Massage Therapy (RMT)
Requires a physician's prescription on your first claim submission, each policy year.

Orthotics & Orthopedics
Must be prescribed by an attending physician, orthopedic surgeon, physiatrist, rheumatologist or chiropodist/podiatrist.

Hearing Aids
Must be prescribed by an otorhinolaryngologist or otologist, or recommended by an audiologist.

Q10. Travel

Some travel expenses may require copies of receipts or prescriptions depending on the claim. For more information on this please contact Blue Cross directly at 1-833-867-3468 or dalhousie@medavie.bluecross.ca.

Q11. Do students at different campuses have the same coverage?
Yes, students at all campuses will have the same coverage.

Q12. I am a mature student, at what age will my coverage terminate?

The current age cap on your DSU student benefits is age 99 for Drug Coverage, age 70 for Extended Health, Dental, Travel & Accident Coverage.

Q13. I'm graduating this year, how can I get coverage after graduation?

If you're graduating this year, you're about to lose the health and dental coverage available to you as a student. If you've already graduated, you may have found provincial government health benefits do not fully cover the cost of many health care services, leaving you vulnerable. Grad Perks offers supplemental health and dental benefits that can help to fill those gaps and provide you with the protection you need. Click here for more information.

Q14. How can I see if my medication is covered under my benefits?

If you want to know if your drug is eligible for coverage, check out the Eligible Drug Search tool. Just enter in the name of the drug or DIN (drug identification number) and you'll find out if it's eligible under the benefits and for Direct2U Prescriptions, as well as if it's a Brand or Generic drug.

Q15. What if the only medication that works isn't covered?

In the event that the therapeutic alternatives, which are eligible under the benefits, prove to be ineffective for treating your particular condition, it is possible to have a special care approval for your medication. These approvals are done on a case-by-case basis. You must complete the Special Authorization Request Form. You will be notified in writing if your application has been approved or not.

Q16. What is the turn-around time for Special Authorization Drug Requests?

Your request will be confidentially reviewed by a health care professional according to the payment criteria established. When all the required information is received by Blue Cross, the standard turn-around time for Special Authorization decisions is 7 to 10 working days.

Q17. What is Direct2U Prescriptions?

Direct2U is a prescription delivery service available to DSU Health Benefits members. This service offers up to 100% coverage for Generic Medications and 80% for Brand Name Medications. For more information please click here.

Q18. How do I get a quote for dental work?

If you'd like to see exactly what will be covered for specific dental procedure(s), have your dentist submit a pre-determination, along with your name and student ID #, to Medavie Blue Cross™ via fax at 506-867-4651. Pre-determinations are strongly recommended for extensive dental procedures such as wisdom teeth extractions, crowns, and other major services.
Q19. How can I check to see if a dental code is covered?

You can check to see if a dental code on your pre-determination is eligible under the benefits. Login to the Blue Cross Member Portal to find out!

Note: this does not say how much is eligible, just if the code itself is eligible under your benefits.

Q20. Orthodontic Coverage

Unfortunately the Health & Dental Benefits do not cover Orthodontic services or supplies. Braces, Invisalign and services related to these items would not be eligible for coverage.

Q21. Does Direct2U Doctors provide sick notes?

Yes. However, sick notes will only be issued for completed visits through Direct2U Doctors and are only issued for certain medical conditions and on standard GOeVisit-issued stationery.

Q22. Are sick notes issued by Direct2U Doctors valid?

Your institution may have specific requirements for approved medical documentation and, as such, sick notes issued through Direct2U Doctors may not be accepted. Please refer to your institution’s policy on sick notes.

Q23. Can I add family onto my benefits?

Yes, students may enroll their spouse and/or dependent children onto the benefits for an additional fee during the opt-in period in which they begin their studies.

Q24. If I already have coverage, can I opt-out of my Student Health & Dental benefits?

Yes, if you have comparable alternative coverage you may opt-out of the Student VIP benefits during the appropriate opt-out period. You should be aware that your DSU Student Health & Dental Benefits offers benefits specifically designed for students, so you may find it advantageous to remain enrolled on these benefits and coordinate your benefits with your existing coverage.

Q25. What is the opt-out process?

If you choose to request an opt-out from the Student VIP benefits, you must provide comparable coverage online during the opt-out period.

Note: There are no exceptions or extensions to the opt-out deadline. If you submit a claim during the opt-out period and have requested to opt-out of the plan your opt-out request will be declined and your fee will not be reversed.

Q26. If I opted out and I lose my alternative coverage, can I opt back into the benefits?
No. By opting out of the Student VIP Health & Dental Benefits you will not be eligible to opt back into the benefits until the next policy year begins, even if you lose your existing coverage. If you do not meet the Auto-Enrol criteria next year, please see the Opting In FAQ section for the applicable opt-in periods.

Examples:
• If your coverage is through your parents/spouse and they lose their coverage;
• If you reach the age of maturity as a dependent on your parent’s benefits (i.e. age 21 for some benefits, 25 for others)

Please carefully consider your decision to opt-out.

Q27. When can I opt-out?
You can opt-out of the benefits during the period in which you begin your studies.

Q28. What is Pharmacare?

The Nova Scotia Pharmacare Programs, which are Nova Scotia’s public drug plans, helps residents with the cost of prescribed drugs and devices which are indicated as benefits in the Nova Scotia Formulary, as well as with the cost for some services to which a level of coverage applies under a particular program.

Q29. Where can I find information on provincial drug coverage?

For more information visit the Government of Nova Scotia website.

Seniors’ Pharmacare Program
Details of the provincial plan are available online HERE.

Eligible participants should be sent an information package from the province 3 months prior to their 65th birthday.

Q30. How do I submit a claim?
The easiest and fastest way to make a claim is via the Medavie Blue Cross™ Portal or the Medavie Blue Cross™ Mobile App. For instructions on how to make a claim, click here.

Q31. How long do I have to submit a claim?
All claims must be submitted to Medavie Blue Cross™ no later than 12 months from the date the expense was incurred. In the event of termination of coverage, claims incurred prior to the termination date must be submitted to Medavie Blue Cross™ within 90 days of the termination date.

Q32. How long does it take for my claim to be processed?
It takes 3-5 business days to process a claim, starting the first business day after submitting.

Q33. How do I get a letter confirming that I have travel coverage?
If you need a letter confirming that you have travel coverage, you can complete a Student VIP Coverage Letter Request. Your request will be reviewed and a letter emailed to you in 3-5 business days.

Q34. Who do I contact if I need to use my travel coverage while away?
Within Canada (not your home province) and the United States: 1-800-563-4444
Anywhere else in the world, call collect: 1-506-854-2222

Please have the following information ready:

Personal Information
Your name and Student ID
Your Policy Number - 0091936000

Travel Information
Travel dates: departure date and return date (from/to) the home province
Travel destination: City, State/Province (when applicable), Country
Travel purpose

Medical Information
Description of the medical emergency or need (symptoms, circumstances, etc.)
Date of medical emergency or first onset of symptoms

Q35. How to contact the DSU Health Plan Office?

Email: dsuhlth@dal.ca
Phone: (902)489-2850