

Your Student Health Plan  
**Benefit Card**



When making a pay direct drug/dental claim the pharmacy/dentist will need to know the following:

GROUP NUMBER: **513970**

PROVIDER: **ClaimSecure**  
(formerly RxPlus/Merx Health Corporation)

CERTIFICATE ID:  
(10 digit alpha numeric number)

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Add your student number.

**FOR ALL HEALTH INQUIRES REACH US TOLL FREE AT 1-800-315-1108**  
**ALL DENTAL INQUIRIES CALL TOLL FREE 1-888-513-4464**

If mailing your claim, please mail your prescription drug/dental claim directly to ClaimSecure at PO Box 6500, Station A, Sudbury, ON, P3A 5N5

# Create an eProfile Today

Visit [www.wespeakstudent.com](http://www.wespeakstudent.com) or  
get the ClaimSecure eProfile App



**WE**SPEAK  
STUDENT

