**Opting Out of Health & Dental:**Deadline: September 29, 2022

**When considering opting-out of your coverage, keep in mind the following:**  
  
~ A parent's insurance plan will stop covering you completely if you’re a part-time student over 21 or a full-time student over the age of 25.

~ You can coordinate 2 benefit plans and increase your coverage up to 100%! Find out more!

~ Only time you can get back on this student plan is at the start of next year or within 30 days of losing your alternate coverage.  
~ Does my [existing coverage](https://www.mystudentplan.ca/macewan/en/mybenefits) meet all the needs that I may have?  
~ What is in the best interest of my overall health and well-being?

**Coordinating Multiple Plans**

If you are an eligible student and also have other insurance, you may wish to coordinate your plans. Benefits under the two plans can be coordinated to increase your coverage up to 100%. For example, following payment under your student plan, you can submit outstanding balances to the other plan for consideration. Find out more about Coordination of benefits at www.mystudentplan.ca/macewan.

**Opting Out of Coverage**

All eligible students are automatically enrolled in the SAMU Balanced Benefit Plan however students who have comparable insurance are given one opportunity at the start of their academic year to opt out of the student plan. To opt out, you must submit an online opt out form before the applicable deadline. You will not be able to opt-out of coverage at any other point during the school year. This is a **one-time opt out** and you **will automatically be removed from the plan every year** for 5 years unless you lose your alternate coverage and inform us that you wish to re-enroll.

***No exceptions*** will be made if the deadline is missed. It is the student’s responsibility to pay the plan fees for the entire year should they miss the applicable opt-out deadline.

**Online Opt-Out**

1. Go to **www.mystudentplan.ca/macewan**
2. Click Online Forms and select the **Opt Out** form.
3. **Health Plan Opt Out**: Scroll down and check yes/no if you wish to opt out of the health portion of the student plan. Provide alternate insurance company name and policy number. Click **NEXT**.
4. **Dental Plan Opt Out**: Scroll down and select yes/no if you with to opt out of the dental portion of the student plan. Provide alternate insurance company name and policy number. **Click NEXT**. You must provide the information of your alternative coverage. Any forms without this information are considered invalid and will not be processed.
5. **Student Information:** Please use an email address that is active and checked regularly. It does not need to be your student email. Complete this section then click **NEXT**
6. **Terms & Conditions**: Read & check the agree to terms & conditions. Click **SUBMIT**.

**You will receive an automated confirmation email indicating we received the**

**opt out request. Please keep this for your records as its your only proof.**

**If you do not get this email confirmation, you will need to resubmit your form.**

**SAMU Benefit Plan Office |** [**macewanplan@mystudentplan.ca**](mailto:macewanplan@mystudentplan.ca) **| Ph: 780-497-4675**