

Canadian Dental Care Plan

Régime canadien de soins dentaires

Important Information for Providers

Member Eligibility Review

The Government of Canada has implemented a Member Eligibility Review (MER) process for the Canadian Dental Care Plan (CDCP), taking necessary steps to verify the continued eligibility of enrolled members. This process happens after a member has been confirmed as eligible for the plan and could result in members having their coverage end during the benefit year.

What does this mean for my CDCP clients?

- As part of the MER process, CDCP members may receive Notices of CDCP Eligibility Review from the Government of Canada requiring them to provide supporting documentation to confirm their eligibility (for example, documentation to explain why their T4 tax slip says their employer offers coverage but they attested that they do not have access to coverage).
- Unlike the annual CDCP renewal process, Eligibility Review is performed after a member is enrolled in the plan and could happen at any point throughout the benefit year. This means that if found ineligible through the MER process, CDCP members' coverage will end immediately, and their oral health services will no longer be covered under the plan. **It is for this reason that providers should always verify their clients' CDCP eligibility before appointments and their coverage at the time of treatment or services and not only during the renewal period.**
- Once the Review process is complete, CDCP members who are no longer eligible will receive a Notice of Decision on CDCP Eligibility Review letter confirming that they are no longer eligible with the end date of their coverage.
- CDCP members who received care during a period where they were ineligible may also have to repay the costs of the care they received while they were wrongly enrolled in the plan.
- If someone who has been deemed ineligible experiences a change in their situation in the future (e.g. they lose their job and don't have access to coverage anymore), and they become eligible for the plan, they may reapply to the CDCP but they may be asked to provide additional documentation given they were previously found to be ineligible.
- CDCP members can visit Canada.ca/dental for more information.

What does this mean for oral health providers?

- If your CDCP client is determined to be ineligible for the plan per the MER process, their coverage will end, and any claims for treatment or services provided on or after that date will be declined and not covered under the CDCP.
- If your CDCP client received care prior to their coverage end date, and you have yet to submit the claims, you have a year from the date of service to submit the claims.
- Providers should continue to verify clients' CDCP coverage before providing treatment or service at every appointment.
- The CDCP will not require oral health providers to reimburse the plan for services rendered to ineligible CDCP clients if their coverage has been terminated by the Government of Canada.
- If a provider is aware that their CDCP client has private dental insurance or coverage, they **should not bill the CDCP** and may wish to make their client aware that the Government of Canada does conduct MER processes and **that members found to be ineligible may have to repay the cost of any care they received.**
- Providers **should not** recommend that their clients cancel private dental insurance or coverage to obtain coverage under the CDCP.