



Pensioners' Dental Services Plan

Member booklet

November 2024

Table of Contents

Introduction	5
Welcome to the Pensioners' Dental Services Plan (PDSP).....	5
The Pensioners' Dental Services Plan (PDSP)	5
Governance of the PDSP	6
Membership	7
Joining the PDSP	7
Eligibility.....	7
How to apply	8
Coverage start date	9
Mandatory enrolment period	9
Positive enrolment.....	10
PDSP benefit card (plan number and certificate number).....	12
Protecting your private information	12
Keep your positive enrolment information up to date.....	13
Registering for online and digital tools.....	13
PDSP Member Services account	14
My Canada Life at Work (online and mobile app).....	15
Contributions	16
Categories of coverage.....	16
Changes to coverage	16
When and how to report changes that affect dental benefits coverage	16
Leaving the PDSP.....	17
Coverage termination date	17
Voluntary termination of coverage	17
31-calendar-day exception	17
Accessing claim summary reports	17
Before incurring an expense.....	18
Reasonable and Customary Charges	18
Out-of-Canada Benefit	18
Annual deductible	18
Co-payment.....	18
Maximum reimbursement amounts	19
Estimate of reimbursement	19

Benefits	21
General	21
Eligible expenses, exclusions and limitations	21
Preventive dental services	21
Basic dental services	22
Major dental services	24
Orthodontic services.....	24
Claims Management	25
How to submit a claim for dental services incurred in Canada	25
How to submit a claim for dental services incurred outside of Canada	27
Deadline to submit a dental claim	28
Explanation of benefits statement.....	28
Overpayments	29
How to appeal	29
Coordination of benefits with other plans	31
Coverage under a provincial or territorial plan	33
Coverage under the Public Service Health Care Plan (Accident/Surgery)	33
Audit	34
Prevent fraud and abuse.....	34
Dependant Eligibility Verification Program	34
Annual Student Eligibility Verification.....	35
Contact Information	35
Canada Life.....	35
Government of Canada	36
Definitions	37



Introduction

Welcome to the Pensioners' Dental Services Plan (PDSP)

The Pensioners' Dental Services Plan (PDSP) is a Government of Canada sponsored voluntary dental plan offered to eligible federal pensioners (retired members) from the federal public service, the Royal Canadian Mounted Police (RCMP), the Canadian Armed Forces (CAF), members of Parliament, federal judges, designated agencies and corporations in receipt of a pension, annuity or annual allowance, including a survivor pension under one of a number of federal superannuation acts, and their eligible dependant(s).

The purpose of this PDSP Member booklet is to provide you and your eligible dependant(s) with information about joining the PDSP, your PDSP membership, benefits, exclusions and limitations, your claims management and contact information.

This booklet is not a substitute for the [PDSP Rules \(canada.ca/en/treasury-board-secretariat/services/benefit-plans/pensioner-dental-services-plan/pensioners-dental-services-plan-rules\)](https://canada.ca/en/treasury-board-secretariat/services/benefit-plans/pensioner-dental-services-plan/pensioners-dental-services-plan-rules), which provides the complete terms and conditions of the PDSP. Where there is a discrepancy between this booklet and the PDSP Rules, the PDSP Rules will apply.

The Pensioners' Dental Services Plan (PDSP)

The PDSP provides reimbursement for certain dental services necessary to prevent or correct dental disease or defect if the services are consistent with generally accepted dental practices. The services must be performed by a dental provider licensed or otherwise authorized in accordance with the applicable law to practice in the jurisdiction in which the services are received.

The PDSP reimburses eligible expenses on a **Reasonable and Customary** basis, subject to limitations identified in the **PDSP Rules** (canada.ca/en/treasury-board-secretariat/services/benefit-plans/pensioner-dental-services-plan/pensioners-dental-services-plan-rules).

Governance of the PDSP

The governance framework of the PDSP is made up of the following entities. Each plays a role in ensuring the proper administration of the PDSP.

Government of Canada

The Government of Canada, as plan sponsor, is responsible for the PDSP and establishes PDSP policy. The Government of Canada assumes full liability for the payment of all expenses related to the operation of the PDSP and the payment of eligible claims. The cost of the PDSP is equally shared between the Government of Canada and PDSP members (i.e., 50% paid by Employer and 50% paid by member).

The PDSP Board

The PDSP Board is comprised of Employer and pensioner representatives from the public service, Canadian Armed Forces (CAF) and Royal Canadian Mounted Police (RCMP). The PDSP Board is mandated to provide advice to the President of the Treasury Board or designated officials on all aspects of the PDSP including contribution rates, plan design, performance of the plan administrator, and the resolution of member appeals.

Canada Life

The PDSP is administered by The Canada Life Assurance Company (Canada Life) on behalf of the Government of Canada. Canada Life's role is to process claims, answer benefit inquiries in accordance with the **PDSP Rules** (canada.ca/en/treasury-board-secretariat/services/benefit-plans/pensioner-dental-services-plan/pensioners-dental-services-plan-rules), and provide services as specified in the PDSP Administrative Services Only Contract.

The Pension Centre

The Pension Centre is responsible for verifying eligibility requirements in accordance with the PDSP Rules, registering eligible pensioners or survivors into the plan and collecting and adjusting contribution rates upon written requests from plan members. They are responsible for notifying **Canada Life** of the effective date of coverage for all new and existing pensioners.

Membership

Joining the PDSP

Eligibility

To become a member of the PDSP, you must meet the eligibility requirements described in the [PDSP Rules](#) (canada.ca/en/treasury-board-secretariat/services/benefit-plans/pensioner-dental-services-plan/pensioners-dental-services-plan-rules).

Eligible pensioner

- You are a pensioner in receipt of an ongoing recognized [monthly pension](#) from the Canadian federal government (some exceptions apply, please consult the PDSP Rules to learn more) (canada.ca/en/treasury-board-secretariat/services/benefit-plans/pensioner-dental-services-plan/pensioners-dental-services-plan-rules.html#Toc129481895).
- You are an eligible surviving dependant of a pensioner who has died, and you are eligible for coverage under the PDSP because you are in receipt of an ongoing recognized [monthly pension](#) from the Canadian federal government (canada.ca/en/treasury-board-secretariat/services/benefit-plans/pensioner-dental-services-plan/pensioners-dental-services-plan-rules.html#Toc129481895).

Eligible dependant

- Your spouse
- Your common-law partner, the person you are cohabiting with in a conjugal relationship for a period of at least 1 year (12 months)

Note: If you have both a legal spouse and a common-law partner, you can cover only one. The PDSP will only cover the person you include in your [positive enrolment](#). Divorced spouses cannot be covered under the PDSP. If you voluntarily terminate coverage of a dependant, they cannot be covered under the PDSP as your dependant again in the future.

- Your or your spouse's or common-law partner's unmarried children including a natural child, adopted child, stepchild or a child for whom you stand in place of a parent (conditions apply, see [Pensioners' Dental Services Plan \(PDSP\) Appeal Checklist](#) (canada.ca/en/treasury-board-secretariat/services/benefit-plans/pensioner-dental-services-plan/appeal-checklist)) if:
 - the child is under 21 years of age
 - the child is between 21 and 25 years of age and attending an accredited school, college or university on a full-time basis
 - the child is over 21 or 25 years of age who was an eligible dependant child under the PDSP or Public Service Dental Care Plan (PSDCP) when becoming incapable of self-sustaining employment by reason of mental or physical impairment or on the date the pensioner is eligible for the PDSP. To apply for coverage of a dependant child with a disability, complete and submit the [PDSP Application for Dependant with a Disability Coverage Form](#) ([welcome.canadalife.com/content/dam/rfp/welcome-sites/pdsp/M7450\(PDSP\).pdf](https://welcome.canadalife.com/content/dam/rfp/welcome-sites/pdsp/M7450(PDSP).pdf)) to Canada Life within 31 days of the child turning 21 years of age or 25 years of age if the child is a full-time student.

Note: If you have a child between 21 and 25 years of age in school, college or university, coverage is suspended at the end of each academic year and reinstated when Canada Life receives proof of re-enrolment. For example, if your child's school term is from September to April, claims cannot be submitted from May to August. Once coverage is reinstated, any dental work completed during the summer months can be submitted for reimbursement under the PDSP.

Note about how a child is defined: A child who does not meet the definition of child for the purposes of the PDSP, but for whom you stand in place of a parent, may be eligible for coverage with the approval of the PDSP Board. To obtain coverage for such a child, you must provide supporting documentation to the PDSP Board, such as one of the following:

- a permanent guardianship (court) order
- a custodial (court) order
- a notarized private guardianship agreement, caregiving agreement or a notarized voluntary surrender of custody and guardianship that indicates that the parent or parents relinquish their parental responsibility to you

The PDSP Board will also consider:

- the extent to which you, your spouse or common-law partner are financially responsible for the support and maintenance of the child
- whether your relationship is that of parent and child
- the expected duration of this relationship

How to apply

The Pensioners' Dental Services Plan Form is a multipurpose form used to apply, amend or terminate PDSP coverage.

Pensioner

If you are about to retire, you should receive the Pensioners' Dental Services Plan Form in your retirement package or you can contact the [Pension Centre or your pension office](#) to request that one be mailed to you.

If you are already retired, you can get the Pensioners' Dental Services Plan Form mailed to you by contacting the [Pension Centre or your pension office](#).

Survivor

If you become entitled to a survivor pension, you may be eligible to apply to the PDSP as a member in your own right. To apply for survivor coverage under the PDSP, contact the [Pension Centre or your pension office](#) of the deceased member and send the PDSP member's death certificate. If you are eligible, a Pensioners' Dental Services Plan Form will be mailed to you.

Important: Once your initial PDSP application as a survivor is approved by the Pension Centre or your pension office, you will receive your PDSP plan number (e.g. 92115) and your certificate number. Your certificate number is your unique identification number under the PDSP. You must then complete [positive enrolment](#) with Canada Life before you submit claims.

If you complete positive enrolment online, you will immediately receive a confirmation email and you will be able to view, download and print a PDF copy of your PDSP benefit card. You can also save your PDSP benefit card directly to your phone through the My Canada Life at Work™ mobile app.

If you complete positive enrolment by mail, you will receive a letter in approximately 3 weeks from the date Canada Life receives your completed PDSP Positive Enrolment Form that includes a confirmation statement and a paper PDSP benefit card.

You and your eligible dependant(s) must provide your plan number and your certificate number to Canada Life when submitting a claim either online or by mail and to your dental provider, so that they can submit claims on your behalf. Eligible dependants will not receive their own PDSP benefit card and must present the plan number and the certificate number seen on the plan member's PDSP benefit card to dental providers.

Coverage start date

If you apply for PDSP coverage before or within 60 days of your pension eligibility date, your coverage, including coverage for eligible dependants, will start on the eligibility date.

Example: If your pension eligibility date is April 2, 2024, and your application for coverage under the PDSP is received by the Pension Centre or your pension office on May 20, 2024 (within 60 days), your coverage starts on April 2, 2024.

If you apply more than 60 days after your pension eligibility date, your coverage, including coverage for eligible dependants, will start on the first day of the second month following the date your completed and signed application form is received by the Pension Centre or your pension office.

Example: If your pension eligibility date is May 1, 2024, and the Pension Centre or your pension office receives your completed and signed form on October 25, 2024, your coverage will begin on December 1, 2024.

Important: Expenses incurred between your pension start date and your PDSP start date will not be covered.

Important: If you and your spouse or common-law partner are eligible under the PDSP, you may both become a member in your own right or one of you may be covered as an eligible dependant of the other. The same person cannot be covered as both a member and an eligible dependant. In addition, your eligible dependant children can only be covered under 1 PDSP member. Coordination of benefits is not allowed between 2 PDSP members.

Mandatory enrolment period

When you apply for PDSP coverage for you and your eligible dependant(s), you agree to participate in the PDSP for a minimum of 3 complete calendar years before you can voluntarily terminate coverage.

Example: If you became a member (Category 1 - Pensioner only) on June 1, 2024, you cannot voluntarily terminate coverage until after December 31, 2027.

If you add an eligible dependant to your PDSP, the same 3 complete calendar year mandatory enrolment period applies, after you add the eligible dependant.

Example: If you became a member on June 1, 2024, and add an eligible dependant on June 1, 2025, you cannot voluntarily terminate coverage until after December 31, 2028.

Exception to the mandatory enrolment period: You may voluntarily terminate coverage under the PDSP at any time if you become a member of the Public Service Dental Care Plan (PSDCP) or if you become eligible for dental benefits with the Canadian Armed Forces or Royal Canadian Mounted Police. You may also voluntarily terminate PDSP coverage for your eligible dependant(s) at any time due to certain life events such as dependant child's graduation, death, divorce or separation from a common-law partner. Some exceptions apply. Contact the [Pension Centre or your pension office](#) for more information.

Positive enrolment

Positive enrolment is the process where you provide Canada Life with information about you and your eligible dependant(s) to ensure your claims can be processed accurately. Through positive enrolment, you must provide consent for the use of your personal information. See [Protecting your private information](#). If you do not complete positive enrolment and provide consent, Canada Life cannot process your claims.

To complete positive enrolment, you will need to provide the following information about you and your eligible dependant(s), if applicable:

- first and last name
- date of birth
- gender – male, female, other or prefer not to answer
- certificate number
- contact information, including complete address
- bank account information (required, only if you wish to set up direct deposit for faster claim payments)
- your plan number which is determined by your birth month or member status:
 - January to March 92111
 - April to June 92112
 - July to September 92113
 - October to December 92114
 - eligible surviving dependant (eligible spouse/common-law partner and children) 92115

For example, if you are a pensioner born in the month of November, your plan number is 92114. If you are an eligible surviving dependant, your plan number is 92115, regardless of your month of birth.

If you are new to the PDSP or you are unable to locate your certificate number, please call the [Pension Centre or your pension office](#).

If you need to make any updates to your personal information such as last name, date of birth, or change your category of coverage I, II, III, which are all associated with your pension file, contact the [Pension Centre or your pension office](#).

If you need to make any updates to your banking information, you can choose one of the following methods:

- print, complete and sign a PDSP Direct Deposit form, which you can find on the [Forms](#) page of the PDSP Member Services website (welcome.canadalife.com/pdsp/forms)

- sign in to your PDSP Member Services account through [My Canada Life at Work™](https://canadalife.com/pdsp) (canadalife.com/pdsp) or the My Canada Life at Work mobile app, go to the **profile icon** in the top right corner (top left corner for mobile app) of the screen, select **Your profile**, then select **Banking**
- contact [Canada Life](#) to request that a PDSP Direct Deposit form be sent to you by mail

How to complete your initial positive enrolment online

1. Visit [Positive enrolment](https://welcome.canadalife.com/pdsp/positive-enrolment) (welcome.canadalife.com/pdsp/positive-enrolment) and select **Complete positive enrolment**. This will bring you to the PDSP positive enrolment page. This page is only to be used for initial positive enrolment. See [Keep your positive enrolment information up to date](#) for instructions on how to update your positive enrolment information.
2. On the PDSP positive enrolment page, enter your last name, date of birth and PDSP certificate number, then select **Continue**.
3. You will need to complete the steps outlined on the screens, provide consent and submit your positive enrolment information. You will immediately receive a confirmation email and you will be able to view, download and print a PDF copy of your PDSP benefit card.
4. Once positive enrolment is completed, create your PDSP Member Services account through [My Canada Life at Work™](https://canadalife.com/pdsp) (canadalife.com/pdsp) (see [Benefits of a PDSP Member Services account](#)).
 - **Note:** If you are also a Public Service Health Care Plan (PSHCP) member and have a PSHCP Member Services account, use the same email address and password to sign in to your PDSP Member Services account.

How to complete your initial positive enrolment by mail

There are 2 ways to get a paper PDSP Positive Enrolment Form:

1. Visit the [PDSP Member Services website](https://canadalife.com/pdsp) (canadalife.com/pdsp):
 - i. Select **Forms**.
 - ii. Find, download and print the **Positive Enrolment Form**.
2. Contact [Canada Life](#) to request that a PDSP Positive Enrolment Form be sent to you by mail.

Once you have your paper PDSP Positive Enrolment Form:

1. Fill out the double-sided PDSP Positive Enrolment Form legibly.
2. Double check the form to make sure your information is complete and accurate.
3. Sign and date the form.
4. Mail your Positive Enrolment Form to the address indicated on the form.

You will receive a letter, in approximately 3 weeks from the date Canada Life receives your completed PDSP Positive Enrolment Form, that includes a confirmation statement and a paper PDSP benefit card.

If your form was incomplete or illegible, your form will be returned to you by mail, within 3 weeks, and you will need to resubmit a new form to Canada Life. If you submit a claim before your positive enrolment is completed, the claim will not be assessed or retained, and you will need to resubmit the claim after you complete positive enrolment.

Additionally, if your form does not match your PDSP positive enrolment information, your form will be returned to you by mail with instructions to contact the [Pension Centre or your pension office](#) to update your category of coverage.

Once you have completed positive enrolment, you may submit claims under the PDSP (see [Claims management](#)).

PDSP benefit card (plan number and certificate number)

Your PDSP benefit card includes your plan number and your certificate number

- You and your eligible dependant(s) must provide your plan number and your certificate number to Canada Life when submitting a claim either online or by mail, and to your dental provider, if they can submit claims on your behalf.
 - **Note:** Eligible dependants will not receive their own PDSP benefit card and must present the plan number and the certificate number seen on the plan member's PDSP benefit card to their dental providers.
- Your plan number and your certificate number are needed:
 - on all claims submitted for yourself and your eligible dependant(s)
 - in all correspondence with Canada Life
- Your benefit card also includes Canada Life contact information.

Should you lose your paper PDSP benefit card, sign in to your [PDSP Member Services account](#) (canadalife.com/pdsp) to download and print one or contact [Canada Life](#) to request that a paper benefit card be sent to you by mail. You can also contact the [Pension Centre or your pension office](#) to get your certificate number. Your plan number is determined by your birth month (see [Positive enrolment](#)).

Protecting your private information

Canada Life takes your privacy very seriously. It is a legal requirement to collect consent and indicate how and when Canada Life will use private information and who will not be able to access private information. This includes providing consent to the Government of Canada, the PDSP Board and Canada Life to access your personal information. Your consent allows Canada Life to collect, use and disclose personal information about you and your eligible dependant(s) for the purpose of processing claims in and out of Canada. Refer to the [Privacy Statement](http://canada.ca/en/treasury-board-secretariat/topics/benefit-plans/plans/pensioner-dental-services-plan/resources/pensioners-dental-services-plan-privacy-statement) (canada.ca/en/treasury-board-secretariat/topics/benefit-plans/plans/pensioner-dental-services-plan/resources/pensioners-dental-services-plan-privacy-statement) for further information on how your privacy is protected. For a copy of the [Privacy policy](http://canadalife.com/privacy) (canadalife.com/privacy), or if there are any questions about Canada Life's personal information policies and practices, including with respect to service providers, reach out to Canada Life's Chief Compliance Officer by referring to [Contact Us: Privacy rights request](#) (canadalife.com).

Providing consent

Whether completing positive enrolment online or by mail, you must carefully read the [Authorization and Declaration](#) (welcome.canadalife.com/pdsp/positive-enrolment/review-authorizations-and-declarations) section and provide consent. If you do not provide consent, Canada Life cannot process your claims. If you submit a claim but have not completed positive enrolment or provided consent, your claim will not be processed.

Note: Make sure to read the [Authorization and Declaration](https://welcome.canadalife.com/pdsp/positive-enrolment/review-authorizations-and-declarations) (welcome.canadalife.com/pdsp/positive-enrolment/review-authorizations-and-declarations) section during online positive enrolment or on the paper Positive Enrolment Form carefully before providing consent. For more information, please visit Canada Life's [Privacy policy](https://canadalife.com/privacy) (canadalife.com/privacy).

Keep your positive enrolment information up to date

You can update or change your positive enrolment information at any time. To avoid any disruption of your claims being processed, you are responsible for keeping your personal information up to date.

Important: If you need to make any updates to your personal information such as last name, date of birth or change your category of coverage I, II, III, which are all associated with your pension file, contact the [Pension Centre or your pension office](#).

If you need to make any updates to your banking information, you can choose one of the following methods:

- print, complete and sign a PDSP Direct Deposit form, which you can find on the [Forms](#) page of the PDSP Member Services website (welcome.canadalife.com/pdsp/forms)
- sign in to your PDSP Member Services account through [My Canada Life at Work™](#) (canadalife.com/pdsp) or the My Canada Life at Work mobile app, go to the **profile icon** in the top right corner (top left corner for mobile app) of the screen, select **Your profile**, then select **Banking**
- contact [Canada Life](#) to request that a PDSP Direct Deposit form be sent to you by mail

It is important to note that the changes would also need to be updated separately for the [Public Service Health Care Plan \(PSHCP\)](#) (canada.ca/en/treasury-board-secretariat/services/benefit-plans/contacts-group-insurance-benefit-plans), where applicable.

To make changes to your positive enrolment information, you have 3 options:

1. Sign in to your [PDSP Member Services account](#) (canadalife.com/pdsp) and go to the profile section to update your information.
2. Print and complete the PDSP Positive Enrolment Form and submit it to Canada Life.
3. Contact [Canada Life](#) to request that a PDSP Positive Enrolment Form be sent to you by mail. Complete and return the form to Canada Life.

Registering for online and digital tools

Commitment to the Environment

The Government of Canada and Canada Life are working to protect and preserve our planet for future generations. You can help reduce paper waste by managing your PDSP correspondence, claims and personal information online. Sign in to your [PDSP Member Services account](#) (canadalife.com/pdsp), go to the **profile icon** in the top right corner (top left corner for mobile app) of the screen, select **Your profile** and then **Communications preferences**.

PDSP Member Services account

Benefits of a PDSP Member Services account

By creating a PDSP Member Services account through [My Canada Life at Work](#) (online and mobile app) (canadalife.com/pdsp), you can:

- access your PDSP benefit card and save it directly to your mobile device
- view your plan number and your certificate number
- provide positive enrolment consent
- update your positive enrolment information
- view, edit or terminate dependant(s)
- add or update your banking information
- sign up for direct deposit for claim payments
- submit claims online and access claims history
- submit a treatment plan or estimate
- get notified when claims have been processed
- access the details of benefits, claim forms and other important information
- find a provider
- submit coordination of benefits claims (restrictions apply to coordinating benefits between 2 PDSP members) or submit the remaining balance of a claim already processed through other insurance
- submit photos of receipts for all dental care expenses
- send supporting documentation requested by Canada Life
- review your coverage and balances
- submit an appeal through the Contact us page
- use biometrics (face recognition, touch or fingerprint ID) to sign in
- access the Help Centre
- contact [Canada Life](#) using the secure online chat or secure email from the Contact us page

How to create a PDSP Member Services account

Positive enrolment must be completed before you create a PDSP Member Services account. Allow at least 48 hours after completing positive enrolment to create your account. This will allow for your information to transfer through the system and appear in your account.

To create an account:

1. You will need your plan number and your certificate number.
2. Go to the [PDSP Member Services website](#) (canadalife.com/pdsp).
3. If you already have a Canada Life account, select **Sign in**.
4. If you do not have a Canada Life account, select **Register**.
5. Select **Start now**.
6. Follow the prompts on the screen.

If you already have an account with Canada Life for any of your benefit plans, please sign in to your [PDSP Member Services account \(canadalife.com/pdsp\)](https://canadalife.com/pdsp) using your existing login credentials. You will be prompted to view coverage information for each of your benefit plans and can switch between the plans.

If you do not see one of your benefit plans online, please contact [Canada Life](#).

If you have any questions, contact [Canada Life](#).

My Canada Life at Work (online and mobile app)

How to get started

1. Create a [PDSP Member Services account \(canadalife.com/pdsp\)](https://canadalife.com/pdsp) if you have not already done so.
2. Download the My Canada Life at Work mobile app from your app store (App Store or Google Play).
3. Sign in using the same email address and password you use for your PDSP Member Services account.

If you are already a Public Service Health Care Plan member and have the Canada Life at Work mobile app

If you are a Public Service Health Care Plan (PSHCP) or Public Service Dental Care Plan (PSDCP) member and are already using the My Canada Life at Work mobile app, make sure your device is set up for automatic updates. Your app will automatically update to include coverage information for all your benefit plans. If your device is not set up for automatic updates, you will need to manually update the app from the App Store or Google Play.

Once the app has updated, and you sign in, you will be prompted to view coverage information for each of your benefit plans and you will be able to switch views between the plans.

If you use biometrics (face recognition, touch or fingerprint ID) to sign in to the app, you will need to use the **Switch Plan** function, which you can access by selecting the **profile icon** located in the top left corner of your screen.

If you have any questions, please contact [Canada Life](#).

Important device settings

- It is important to turn on your automatic updates to ensure fixes and updates download immediately to your device.
- The mobile app presents in the language set on your mobile device and may be different than the language preference you indicated during positive enrolment with Canada Life. Be sure to set your mobile device to your language preference.
- If you require Telephone Teletype (TTY), ensure the device setting for this option is on.

2-step verification

Keeping your information secure is important to us. That is why we have another layer of security to your [PDSP Member Services account \(canadalife.com/pdsp\)](https://canadalife.com/pdsp) for both online and mobile application. This 2-step verification process is a fast and easy way to verify your identity when signing in to your account.

For more information on 2-step verification, please review the [2-step verification FAQ \(welcome.canadalife.com/pdsp/2-step-verification-faq\)](https://canadalife.com/pdsp/2-step-verification-faq).

Contributions

The PDSP costs are equally shared between the Government of Canada and the PDSP members (i.e., 50% paid by Employer and 50% paid by member).

Categories of coverage

- Category I Pensioner only
- Category II Pensioner and one eligible dependant (family member)
- Category III Pensioner and more than one eligible dependant (family members)

For contribution rates, see the [PDSP Rules \(canada.ca/en/treasury-board-secretariat/services/benefit-plans/pensioner-dental-services-plan/pensioners-dental-services-plan-rules.html#Toc129481952\)](https://canada.ca/en/treasury-board-secretariat/services/benefit-plans/pensioner-dental-services-plan/pensioners-dental-services-plan-rules.html#Toc129481952).

If your net pension is not enough to cover the monthly contribution amount, you may still be eligible to join the PDSP. Contact the [Pension Centre or your pension office](#) for more information.

Important: It is your responsibility to make sure your category of coverage is up to date.

Changes to coverage

When and how to report changes that affect dental benefits coverage

From time to time, there may be circumstances that change your coverage needs. To ensure that your category of coverage, corresponding contribution rate and personal information are up to date, you are responsible for informing the [Pension Centre or your pension office](#) in writing about certain life changes that could affect your coverage, such as:

- a change of address
- a change in marital status (common-law partnership, marriage, separation, divorce, widowed)
- adding or removing an eligible dependant
- a dependant child turning 21 and no longer in full-time attendance at a recognized school
- a dependant child turning 25
- the death of an eligible dependant

The [Pension Centre or your pension office](#) can provide you with a multi-purpose form used to start, amend or terminate PDSP coverage.

Important: These changes should also be reported to the [Pension Centre or your pension office](#). The PDSP and PSHCP each require separate forms to make changes.

In general, changes to your PDSP coverage will take effect on the first day of the second month following the date the Pension Centre or your pension office receives your completed PDSP Form.

Example: If the Pension Centre or your pension office receives your PDSP Form for coverage changes on June 15, 2024, the changes will take effect on August 1, 2024.

Leaving the PDSP

Coverage termination date

Your PDSP coverage will terminate on the earliest of the following:

- the date of your death
- the first day of the second month following the date the Pension Centre or your pension office receives your voluntary request to terminate your PDSP coverage, provided you and your eligible dependant(s), if any, have been covered under the PDSP for the **mandatory enrolment period**

Example: If the Pension Centre or your pension office receives your voluntary request to terminate your PDSP coverage on June 15, 2024, your PDSP coverage will terminate on August 1, 2024.

- the first day of the second month following the month in which you cease to be an eligible pensioner

Example: If you cease to be an eligible pensioner on June 15, 2024, your PDSP coverage will terminate on August 1, 2024.

Voluntary termination of coverage

If you voluntarily terminate PDSP coverage for you or your eligible dependant(s), you cannot register for coverage under the plan again. Some exceptions apply. Please consult the **PDSP Rules** (canada.ca/en/treasury-board-secretariat/services/benefit-plans/pensioner-dental-services-plan/pensioners-dental-services-plan-rules.html#Toc129481904) for more information.

31-calendar-day exception

An exception will be made if a dental service was started before your coverage end date. You or your eligible dependant(s) will be covered if that service is completed within 31 calendar days of your coverage end date.

For example, this exception would apply for any of the following dental services:

- root canal where the pulp chamber was opened before the coverage end date
- a crown was being prepared and impressions had been taken before the coverage end date
- ongoing orthodontic treatment where the initial appliance was inserted before the coverage end date

Accessing claim summary reports

To access applicable claim summary reports, which can be used for income tax purposes:

1. Sign in to your PDSP Member Services account through **My Canada Life at Work™** (canadalife.com/pdsp).
2. From the lefthand navigation, Select **Benefits**, then **Claim History**.
3. Select the option **Create a claim summary**.

You can also call Canada Life's PDSP Member Contact Centre for inquiries within North America (toll-free) at 1-855-415-4414, Monday to Friday from 8 am to 5 pm, your local time, or for international inquiries (collect) at 1-431-489-4064, Monday to Friday from 8 am to 5 pm, ET.

Important: After termination you can only access your claim summary reports by calling the PDSP Member Contact Centre.

Before incurring an expense

Some products and services may be costly. Before you incur dental expenses, know your PDSP coverage and details and how they impact your reimbursements.

Reasonable and Customary Charges

The PDSP provides reimbursement for eligible dental services based on the provincial or territorial dental fee guides **in effect the previous year**. See [Claim calculation example](#) below.

A dental fee guide is a listing of Reasonable and Customary Charges recommended by the respective provincial or territorial dental association for specified services, provided by a specific practitioner type in a province or territory.

If services are provided by a qualified specialist in endodontics, prosthodontics, oral surgery, periodontics, pedodontics or orthodontics (whose dental practice is limited to that specialty), then the fee guide approved by the provincial or territorial dental association for that specialist will be used.

Out-of-Canada Benefit

If you are temporarily outside of Canada and need dental services, the PDSP will provide reimbursement based on the previous year's dental fee guide for your province or territory of residence.

If you live outside of Canada, the PDSP provides reimbursement for eligible dental services based on the Reasonable and Customary Charges in the location where the services are rendered up to the previous year's Ontario dental fee guide. Reimbursement is paid in Canadian dollars. Members residing in the United States can choose to receive reimbursement in US dollars by cheque.

Annual deductible

The annual deductible is the dollar amount you must pay each calendar year. The annual deductible amount is \$25 for one covered person or \$50 for more than one covered person and is deducted from your first claim(s) each calendar year. See [Claim calculation example](#).

The annual deductible may be carried over

If the annual deductible is paid for a dental expense in the last 3 months of the calendar year (October 1 to December 31), a new annual deductible will not be charged in the following calendar year.

Co-payment

After the annual deductible amount has been paid, the PDSP will reimburse you for a percentage of the eligible expenses. The PDSP covers 90% for eligible preventive and basic dental services, and 50% for eligible major restorative and orthodontic services. You are required to pay the remaining amount, which is therefore referred to as the co-payment amount.

The table below shows your co-payments depending on services received.

Eligible expense submitted	PDSP pays	What you pay (co-payment)
Preventive and basic dental services	90%	10%
Major restorative and orthodontic services	50%	50%

Important: You are responsible for any amount not reimbursed by the PDSP, even in cases where the dental provider charged more for a given service or procedure than the amount in the applicable dental fee guide for the previous year.

Claim calculation example

Dental service	Amount charged	Eligible expense (based on Reasonable and Customary Charges) (1)	Annual deductible	Covered eligible expense (%)	PDSP pays (2)	What you pay
Recall exam	\$65	\$60	\$25	\$35 at 90%	\$31.50	\$33.50
Crown including lab fees	\$1,500	\$1,300	Already paid	\$1,300 at 50%	\$650	\$850

1. Up to the amount in the applicable dental association fee guide in effect the previous year.
2. Any amounts over the \$1,500 annual maximum are paid by the member.

Important: Plan members are responsible for all ineligible expenses in excess of the previous year’s dental fee guide or services not covered due to exceptions or plan limitations.

Maximum reimbursement amounts

Preventive, basic and major restorative dental services – annual maximum

Each calendar year, the PDSP will reimburse up to an annual maximum amount of \$1,500 for each covered person for preventive, basic and major restorative dental services. This excludes orthodontic services, which have a separate lifetime maximum limit.

Exception: If your dental benefits coverage starts on or after July 1, the maximum amount that the PDSP will reimburse for that calendar year will be \$750. The full annual maximum will apply in the next calendar year.

Orthodontic services – lifetime maximum

The PDSP will reimburse up to a lifetime maximum amount of \$2,500 for each covered person for orthodontic services.

To be eligible, the initial orthodontic appliance must not have been installed before the start of your PDSP coverage unless the initial appliance was covered by the Public Service Dental Care Plan (PSDCP).

When submitting a treatment plan, the dental provider must clearly indicate the cost, length of treatment and fee breakdown, any financial arrangement and the payment plan or interval.

Estimate of reimbursement

Before you receive dental work or treatment that could be \$300 or more (such as a crown or orthodontics), it is recommended that you or your dental provider send a treatment plan or estimate online or by mail to **Canada Life**. Canada Life will provide a predetermination of benefits to confirm if the dental services are eligible, how much of the expenses will be reimbursed, and how much you will have to pay out of pocket (your co-payment).

Important: Predeterminations are only valid for 180 days from the date requested. There may be limitations or time restrictions that apply. For example, a child may reach the age limit for pits and fissure sealants, or you may reach the annual maximum amount during the 180 days.

How to submit a treatment plan or estimate online

To submit a treatment plan/estimate through your PDSP Member Services account on [My Canada Life at Work™ \(canadalife.com/pdsp\)](https://canadalife.com/pdsp), sign in and select **Benefits**, then **Estimates**, and follow the instructions.

You can either:

- upload the claim form (same form used for estimates) provided by your dental provider
- access personalized claim forms by signing in to your [PDSP Member Services account \(canadalife.com/pdsp\)](https://canadalife.com/pdsp),
 - select **Info centre** in the lefthand navigation, then **View forms**
 - select or search for the form you require and complete it with the information provided by your dental provider (indicate on the form that it is for an estimate)
 - upload the form along with any supporting documents
- find blank claim forms on the [Forms](https://welcome.canadalife.com/pdsp/forms) page of the PDSP Member Services website (welcome.canadalife.com/pdsp/forms) and complete it with the information provided by your dental provider (indicate on the form that it is for an estimate) and upload it along with any supporting documents

A treatment plan/estimate does not need a dental provider signature.

How to submit a treatment plan or an estimate by mail

Print, complete and sign a claim form with your personal information, include all available information from your dental provider and mail it to Canada Life.

You can either:

- access personalized claim forms by signing in to your [PDSP Member Services account \(canadalife.com/pdsp\)](https://canadalife.com/pdsp)
 - select **Info centre** in the lefthand navigation, then **View forms**
 - select or search for the form you require
 - mail it to the following address
- find blank claim forms on the [Forms](https://welcome.canadalife.com/pdsp/forms) page of the PDSP Member Services website (welcome.canadalife.com/pdsp/forms) and mail it to the following address:

Winnipeg Benefit Payments
PO box 6025 Station Main
Winnipeg MB
R3C 3C7

You can also contact [Canada Life](https://canadalife.com) to request that a claim form be sent to you by mail. Canada Life will send you a predetermination of benefits indicating what is covered using the preferred method of communication indicated in your file. It will include:

- a decision to determine if the expense is covered by the PDSP

- an estimate of the dollar amount that is eligible for reimbursement when there is no coordination of benefits (this may differ from the actual amount that is covered)

Benefits

General

The PDSP provides reimbursement for specific dental services not covered under a provincial or territorial health or dental care plan. The PDSP provides reimbursement up to, but not exceeding, the amount shown in the previous year’s dental fee guide.

The PDSP will reimburse you for eligible expenses for dental services received by:

- dentists or dental specialists
- denturists
- independent dental hygienists
- anesthetists (in connection with oral surgery and drug injections)

The dental provider must be licensed to provide dental services in the province or territory where the service is received.

Important: If you are a member of both the PDSP and the Public Service Health Care Plan (PSHCP), you may coordinate benefits between both plans for accidental injury or surgery. See [Coverage under the Public Service Health Care Plan \(Accident/Surgery\)](#).

Eligible expenses, exclusions and limitations

Below are highlights of the covered services including most limitations. For complete information on the benefits covered under the PDSP, consult the [PDSP Rules \(canada.ca/en/treasury-board-secretariat/services/benefit-plans/pensioner-dental-services-plan/pensioners-dental-services-plan-rules\)](#) and look for:

- the list of all eligible dental services (See Schedule 2 of the PDSP Rules)
- the list of exclusions and limitations (see Schedule 3 of the PDSP Rules)
- the specific limitations with respect to major services (see Rule 6(2) of the PDSP Rules)

Preventive dental services

Diagnostic Services: reimbursed at 90% of the eligible expenses

The PDSP covers services used to help prevent or correct dental diseases and defects. They are services that dental providers perform regularly to help maintain good dental health.

Oral examinations	Limitations
Complete oral examination	No limitations
Recall examination	Once every 9 months
Specific oral examination	No limitations
Emergency oral examination	No limitations
Treatment planning	No limitations

X-rays	Limitations
Complete series of periapical x-rays	Once every 36 months
Occlusal x-rays	No limitations
Bitewing x-rays	Once every 9 months
Extra-oral films	No limitations
Sialography, use of dyes	No limitations
Panoramic x-ray	Once every 36 months
Interpretation of radiographs from another source	No limitations
Tomography	Cone-beam computed tomography is not covered under the PDSP

Other services	Limitations
Polishing	Once every 9 months
Topical fluoride treatment	Once every 9 months
Oral hygiene instruction	Once every calendar year
Pit and fissure sealants	Only eligible dependant children under the age of 15
Space maintainers	Not involving movement of teeth
Biopsy of oral tissue and pulp vitality tests	No limitations
Caries control	No limitations
Enameloplasty	No limitations
House calls, hospital calls and special office visits	No limitations
Emergency services	No limitations

Basic dental services

Basic dental services: reimbursed at 90% of the eligible expenses

The PDSP covers services used to treat basic dental diseases and defects. Below is a list of certain basic dental services that are covered.

Fillings	Limitations
Fillings (amalgam, silicate, composite, acrylic)	Replacement fillings for the same tooth and the same surface once every 24 months

Denture services	Limitations
Repair or adjustment of dentures	No limitations
Rebasing and relining of existing partial or complete denture	Once every 36 months

Endodontics	Limitations
Root canal	No limitations
Pulp capping	
Pulpotomy/pulpectomy	
Periapical services	

Periodontics	Limitations
Scaling and root planing	6 time units every calendar year Exception: up to 6 additional time units can be pre-approved by Canada Life with evidence of gum disease from your dental provider. Pre-approvals are valid for 3 full calendar years from the date of approval.
Occlusal equilibration	8 time units every calendar year
Non-surgical, surgical and post-surgical treatment of gums and supporting tissue	No limitations

Oral surgery and related anaesthesia*	Limitations
Uncomplicated removal	No limitations
Surgical removal	
Tooth repositioning	
Alveoloplasty (smooths and reshapes the jawbone after an extraction)	
Gingivoplasty (reshapes gum tissues)	
Stomatoplasty (reconstructive mouth surgery)	
Osteoplasty (reshapes and recontouring of bone)	
Tuberoplasty (reshapes or reduces the maxillary bone)	
Removal of excess mucosa	
Surgical excision	
Removal of cyst	
Surgical incision	
Removal of impacted teeth	
Repair of soft tissue	
Frenectomy (correction of tongue-tie or lip tie)	

*Excluding transplants and repositioning of the jaw.

Major dental services

Major dental services: reimbursed at 50% of the eligible expenses

The PDSP covers services used to treat major dental diseases and defects. Below is a list of certain major dental services that are covered.

Major restorative	Limitations
Gold foil	Once every 60 months
Porcelain veneers, metal and porcelain inlays, onlays	Once every 60 months with certain conditions
Retention pins, posts and cores	No limitations
Metal and porcelain crowns	Once every 60 months with certain conditions

Major prosthodontics	Limitations
Diagnostic services	Replacements are only covered under certain conditions. See PDSP Rule 6(2)b.
Addition of a tooth to a removable denture	
Complete dentures	
Partial dentures	
Fixed bridges (abutments/retainers, pontics)	
Retentive pins in abutments	
Repairs of fixed appliances	
Implants	Implants are not covered under the PDSP. The Alternate Benefit Clause may apply.

Important: The PDSP has an **Alternate Benefit Clause** for specific dental services. This means the PDSP may allow reimbursement towards an expense normally not covered or may limit reimbursement to the cost of a less expensive Reasonable and Customary dental service.

It is strongly advised that you ask Canada Life for a predetermination when a course of treatment is \$300 or more. Canada Life will let you know how much may be covered and how much you will have to pay out of pocket. Not all services are eligible for an alternate benefit. See [Estimate of reimbursement](#).

Orthodontic services

Orthodontic services: reimbursed at 50% of the eligible expenses

The PDSP covers services used to treat misaligned or crooked teeth up to a separate lifetime maximum of \$2,500.

The PDSP will reimburse 90% of the diagnostic services related to orthodontics.

Orthodontic	Limitations
Examinations	No limitations
X-rays	
Diagnostic casts	

The PDSP will reimburse 50% of the appliances related to orthodontics.

Orthodontic	Limitations
Fixed or removable appliances, such as braces	<p>No orthodontic benefits will be paid if the initial appliance was installed before the person was covered under the PDSP, unless that initial appliance was installed while the person was covered under the Public Service Dental Care Plan (PSDCP).</p> <p>Orthodontic services purchased online from direct to-consumer orthodontic treatment providers are not eligible under the PDSP.</p>

Claims Management

How to submit a claim for dental services incurred in Canada

There are 3 ways to submit a claim to Canada Life:

1. Have your dental provider submit a claim electronically on your behalf
2. Submit a claim online (through your PDSP Member Services account or through the My Canada Life at Work™ mobile app)
3. Submit a claim by mail

1. Have a claim submitted by your dental provider

Most dental providers can submit dental claims online to Canada Life on your behalf. Present your PDSP benefit card with your plan number and your certificate number. Your claim will be processed in real time, and your eligible expenses will be reimbursed by direct deposit or by cheque.

Note: Eligible dependants will not receive their own PDSP benefit card and must present the plan number and the certificate number seen on the plan member's PDSP benefit card to dental providers.

It is your responsibility to:

- authorize your dental provider to submit claims
- ensure that your personal information, including your plan number, your certificate number and address are correct and current in both your PDSP Member Services account and with your dental provider
- at time of claim provide information to your dental provider about any other dental coverage you or your eligible dependants may have for coordination of benefits

2. Submit a claim online (through your PDSP Member Services account or the My Canada Life at Work mobile app)

Once you have completed [positive enrolment](#) and registered for a [PDSP Member Services account](#) (canadalife.com/pdsp), you can submit claims digitally through the PDSP Member Services website or My Canada Life at Work mobile app, if your dental provider has not already submitted the claim on your behalf.

To submit a claim online:

- i. Sign in to your PDSP Member Services account or the My Canada Life at Work mobile app.
- ii. Select **Make a claim**.
- iii. Choose the appropriate claim type and follow the steps to complete the claim. You will need to upload a claim form or receipt signed by your dental provider.

3. Submit a claim by mail

To submit a claim by mail using one of the following options:

- i. Print, complete and sign an authorized claim form.

You can either:

- access personalized claim forms by signing in to your [PDSP Member Services account](#) (canadalife.com/pdsp)
 - select **Info centre** in the lefthand navigation, then **View forms**
 - select or search for the form you require
- find blank claim forms on the [Forms](#) page of the PDSP Member Services website (welcome.canadalife.com/pdsp/forms)
- contact [Canada Life](#) to request that a claim form be sent to you by mail

Complete the claim form with the appropriate information, including:

- your full name and address, including your postal code
- your plan number and your certificate number
- your spouse or common-law partner's dental plan number and certificate number, if applicable
- your signature
- the appropriate section of the claim form completed by your dental provider including the dental provider's signature/stamp

Attach any invoices or receipts that you may have and ensure that they provide full details of the services rendered or purchases made.

Incomplete claim forms will be returned to you for completion.

- ii. Mail a claim form from your dental provider to the following address, along with the originals of the supporting documentation (original receipts, invoices, dental provider statements, and/or questionnaires, etc.). Keep a copy for your own files, Canada Life will not return original receipts after claims are processed.

Winnipeg Benefit Payments
PO box 6025 Station Main
Winnipeg MB
R3C 3C7

When submitting a claim under the coordination of benefits provision you must also include any claim statements received from another benefit plan(s).

How to submit a claim for dental services incurred outside of Canada

Claims for dental services incurred outside of Canada can be submitted online or by mail.

Submit a claim online (through your PDSP Member Services account or the My Canada Life at Work mobile app)

Once you have completed [positive enrolment](#) and registered for a [PDSP Member Services account](#) (canadalife.com/pdsp), you can submit claims online through the PDSP Member Services website or the My Canada Life at Work mobile app. Dental providers outside of Canada are not able to submit claims on behalf of the member.

To submit a claim online:

1. Sign in to your PDSP Member Services account or the My Canada Life at Work mobile app.
2. Select **Make a claim**.
3. Select **Start a claim**.
4. Select whom the claim is for, then select **Continue**.
5. Select **Out-of-Canada**, then select **Continue** and follow the steps to complete the claim.
6. You will need to upload a claim form or receipt signed by your dental provider.

To submit a claim by mail using one of the following options:

1. Print, complete and sign a claim form.

You can either:

- access personalized claim forms by signing in to your [PDSP Member Services account](#) (canadalife.com/pdsp)
 - select **Info centre** in the lefthand navigation, then **View forms**
 - select or search for the form you require
- find blank claim forms on the [Forms](#) page of the PDSP Member Services website (welcome.canadalife.com/pdsp/forms)
- contact [Canada Life](#) to request that a claim form be sent to you by mail

Complete the claim form with the appropriate information, including:

- your full name and address, including your postal code
- your plan number and your certificate number
- your spouse or common-law partner's dental plan and certificate number, if applicable
- your signature
- the appropriate section of the claim form completed by your dental provider including the dental provider's signature/stamp

Attach any invoices or receipts that you may have and ensure that they provide full details of the services rendered or purchases made.

Incomplete claim forms will be returned to you for completion.

2. Mail a claim form from your dental provider to the following address, along with the originals of the supporting documentation (original receipts, invoices, dental provider statements, and/or questionnaires, etc.). Keep a copy for your own files, Canada Life will not return original receipts after claims are processed.

Winnipeg Benefit Payments
PO box 6025 Station Main
Winnipeg MB
R3C 3C7

When submitting a claim under the coordination of benefits provision you must also include any claim statements received from another benefit plan(s).

Deadline to submit a dental claim

To be eligible for reimbursement, Canada Life must receive your claims within 15 months of the date the expenses were incurred.

An expense is incurred:

- on the date of your single appointment for dental services
- on the date of your last appointment for dental services that take more than one appointment, such as on the date an appliance is installed
- the date the appliance is installed and the date of each monthly visit, for orthodontic dental services

Claims submitted after the 15-month period will not be paid unless you can demonstrate that it was impossible for you to submit your claim within 15 months from the date you incurred the expense.

Important: Claims submitted more than 24 months after the expense was incurred will not be paid except in the case of legal incapacity.

If a child between 21 and 25 years of age, who is a full-time student, receives dental services during an academic break, claims for those services should not be sent to Canada Life until the student has returned to school full-time.

Explanation of benefits statement

Once your claim is processed, you will receive a notification by text, email or mail (depending on your notification method of choice) informing you that an explanation of benefits from Canada Life can be accessed online through your **PDSP Member Services account** (canadalife.com/pdsp). The explanation of benefits provides details on how your claim was processed and the amount being reimbursed under the PDSP.

If you have signed the Pensioners' Dental Services Plan (PDSP) Authorization for Claims Submission and Re-direction of Payment form, which can be found on the **Forms** page of the PDSP Member Services website (welcome.canadalife.com/pdsp/forms), for your eligible dependant child(ren)'s claims, payment may be issued to your spouse or common-law partner.

Overpayments

Administrative error: In situations where you were reimbursed more than what was eligible under the PDSP, Canada Life is authorized to recover the overpayment. You will be advised of the overpayment and provided with different options on how you would like to repay the amount.

You can choose one of the following:

- by cheque for the amount of the overpayment or
- by deduction from future claims

If you do not acknowledge the overpayment and inform Canada Life of what you would like to do within 30 days, Canada Life will automatically deduct the overpayment from future claim reimbursements.

Adjudication Error: In situations where an adjudication error is made or an adjudication decision is reversed based on additional information, Canada Life will not recover the overpayment but will advise you in writing that these expenses will no longer be reimbursed.

How to appeal

An appeal process is available to you if you do not agree with a decision regarding your claim or coverage. Please consult the [Pensioners' Dental Services \(PDSP\) Appeal Checklist](https://canada.ca/en/treasury-board-secretariat/services/benefit-plans/pensioner-dental-services-plan/appeal-checklist) (canada.ca/en/treasury-board-secretariat/services/benefit-plans/pensioner-dental-services-plan/appeal-checklist) for more information.

You may also wish to review the [PDSP Rules](https://canada.ca/en/treasury-board-secretariat/services/benefit-plans/pensioner-dental-services-plan/pensioners-dental-services-plan-rules) (canada.ca/en/treasury-board-secretariat/services/benefit-plans/pensioner-dental-services-plan/pensioners-dental-services-plan-rules) to determine if your claim is eligible under the PDSP.

Before you submit an appeal, you should try to first resolve the issue with:

- Canada Life, if your appeal is claim-related
- the [Pension Centre or your pension office](#), if your appeal is coverage-related

Canada Life claim-related appeal

You have the right to appeal a denial of all or part of your claim if you submit a request within 15 months from the date Canada Life completed the initial assessment of your claim treatment plan.

Appeals should be submitted to Canada Life in writing or can be submitted online. If you wish to submit a Canada Life appeal over the phone, supporting documents (legible originals or copies) or dental information must be sent to Canada Life by mail for the review.

Each request must include why you:

- disagree with the claim decision
- believe the claim is eligible

In writing

Mail your supporting documents or dental information to:

Winnipeg Benefit Payments
PO box 6025 Station Main
Winnipeg MB
R3C 3C7

Online

How to submit a Canada Life appeal online through your PDSP Member Services account

1. Sign in to your [PDSP Member Services account](https://canadalife.com/pdsp) (canadalife.com/pdsp) and go to the Contact us page.
2. Under Subject, select **Benefits**.
3. Under Detailed subject, select **Submit a Canada Life appeal**.
4. Complete all remaining fields and upload supporting documentation.

If you are not satisfied with the decision of this initial Canada Life appeal, you may appeal a second time in writing through your [PDSP Member Services account](https://canadalife.com/pdsp) (canadalife.com/pdsp) or call the PDSP Member Contact Centre (contact [Canada Life](#)) and send Canada Life all the claim details and any additional information for review. You must explain why you continue to disagree with the claim decision.

PDSP Board Appeal

If you have submitted a Canada Life appeal and are not satisfied with their decision you may submit an appeal to the PDSP Board.

Note: This appeal process is also used to apply for PDSP coverage for a child from whom you stand in place of a parent. The PDSP Board will review your case and issue a decision. See [Pensioners' Dental Services \(PDSP\) Appeal Checklist](https://canada.ca/en/treasury-board-secretariat/services/benefit-plans/pensioner-dental-services-plan/appeal-checklist) (canada.ca/en/treasury-board-secretariat/services/benefit-plans/pensioner-dental-services-plan/appeal-checklist).

What to include in an appeal

If you wish to ask the PDSP Board to review your case, send your appeal in writing by mail to the address below. Your appeal should include why you disagree with the claim or coverage decision and the following information:

- the plan member's name, address, telephone number and email address
 - if the appeal is for an eligible dependant, include their full name and date of birth, medical certificate, if referring to a medical condition, and any original documentation
- the plan member's PDSP certificate number
- the category of the appeal: coverage, enrolment or other
- copies of supporting documents such as:
 - the explanation of benefits statement from Canada Life
 - correspondences with Canada Life, the Pension Centre or your pension office related to the appeal
 - documentation from the dental provider including a treatment plan, additional medical information or a rationale for the dental services
 - additional information may be requested by the PDSP Board before an appeal decision is final
 - if applicable, the latest decision from the Canada Life process outlining their rationale for denial (which could include the explanation of benefits)

The PDSP Board may meet bi-monthly, quarterly or less frequently depending on the volume of appeals. The response to an appeal may therefore take a few months.

The decision of the Board is final unless an appellant can provide new information not previously considered.

Where to send an appeal

Appeal documentation must be sent by mail to the Treasury Board of Canada Secretariat at the following address. Medical and dental records as well as information on eligible dependant child(ren) custody are considered Protected B and cannot be emailed.

**The Pensioners' Dental Services Plan
Treasury Board of Canada Secretariat
Benefits Programs Operations
90 Elgin Street
3rd Floor, Suite 3026
Ottawa, Ontario
K1A 0R5**

Coordination of benefits with other plans

It is important to always keep your coordination of benefits information up to date with Canada Life and your dental provider(s) to ensure that you and your eligible dependant(s) receive the benefits to which you are entitled. You must provide coordination of benefits information each time you submit a claim online or by mail.

Consult with your dental provider to see if they can submit a coordination of benefit on your behalf at time of claim.

If you are a PDSP member and you have dental benefits coverage under other insurance, such as your spouse or common-law partner's plan, you may be eligible to coordinate your benefits and receive up to 100% of the actual eligible dental expenses.

For example, if you are covered under the PDSP and the Public Service Dental Care Plan (PSDCP), you can coordinate benefits between both plans. If you are a PSDCP member, your claim will first be paid through the PSDCP, followed by the PDSP (some exceptions apply, please consult the [PDSP Rules \(canada.ca/en/treasury-board-secretariat/services/benefit-plans/pensioner-dental-services-plan/pensioners-dental-services-plan-rules\)](https://canada.ca/en/treasury-board-secretariat/services/benefit-plans/pensioner-dental-services-plan/pensioners-dental-services-plan-rules)). The remaining amount, if applicable, would be paid by your spouse or common-law partner's plan.

The combined reimbursement from your PDSP and your spouse or common-law partner's other insurance cannot exceed the lesser of either of the following:

- the expenses incurred
- the amount specified in the previous year's dental fee guide of the province or territory where the services were rendered

Exclusions, frequency limitations and annual maximums for each calendar year apply separately under each plan.

Note: Coordination of benefits between 2 PDSP members is not permitted. A PDSP member cannot be enrolled as both a member and an eligible dependant. You can coordinate your benefits with other insurance plans, provided the other insurance is not the PDSP.

If you and your spouse or common-law partner both have dental plans that are administered by Canada Life, review the following guidelines to determine which plan you should submit your expenses to first. You do not need to submit a second claim for the unpaid balance if you provide the plan number and the certificate number of your spouse or common-law partner's dental plan on the claim form or when submitting a claim in your PDSP Member Services account. Canada Life will process the eligible claims under both memberships.

Claims made under your spouse or common-law partner's plan number and certificate number will be paid to them unless the benefits are assigned to the dental provider.

If you or your eligible dependant(s) have dental benefits coverage under other insurance, you must provide this information to your dental provider at time of claim. If your dental provider does not provide coordination of benefits services, you will need to submit the claim to Canada Life with the other insurance's information.

Canada Life can help you determine which plan you should claim from first.

Coordination of benefits guidelines

- For dental services required because of an accidental injury to natural teeth covered under both the Public Service Health Care Plan (PSHCP) and the PDSP, the coverage will be determined under the PSHCP first. Claims should be submitted to the PSHCP first.
- For specific oral surgical procedures covered under both the PSHCP and the PDSP, the coverage will be determined under the PDSP first.
- If you are a member of the PDSP and are also covered under your spouse or common-law partner's plan as an eligible dependant, you should submit your claim to your PDSP first.
- If your spouse or common-law partner is covered under other insurance and is also covered as an eligible dependant under your PDSP, your spouse or common-law partner should submit their expenses to their own plan first.
- When your eligible dependant child(ren) are covered under both your PDSP and your spouse or common-law partner's plan as eligible dependant(s), the plan that pays first is determined by the [Canadian Life and Health Insurance Association \(clhia.ca/web/CLHIA_LP4W_LND_Webstation.nsf/page/28DE0F1EE2ACED4285257841005B27F8!OpenDocument\)](http://clhia.ca/web/CLHIA_LP4W_LND_Webstation.nsf/page/28DE0F1EE2ACED4285257841005B27F8!OpenDocument) for coordination of benefits. Under these guidelines, the parent whose birthday falls earlier (month and day) in the year must claim the children's expenses first under their plan. For example, if your birthday is May 1 and your spouse's or common-law partner's birthday is June 5, you must claim under the PDSP first.
- The maximum amount that you can receive from all plans for expenses is up to 100% of the actual eligible expenses.

How to coordinate your claims after separation or divorce from your spouse or common-law partner

In case of divorce or separation, where both parents share custody of a child, the following order of submission must be followed for the eligible dependant child(ren)'s expenses:

1. the plan of the parent whose birthday falls earlier in the year
2. the plan of the parent whose birthday comes later in the year
3. the plan of the spouse or common-law partner of the parent whose birthday falls earlier in the year
4. the plan of the spouse or common-law partner of the parent whose birthday comes later in the year

If one parent has custody of a child, the following order of submission must be followed for the child's expenses:

1. the plan of the parent who has custody of the child
2. the plan of the spouse or common-law partner of the parent who has custody of the child
3. the plan of the parent who does not have custody of the child
4. the plan of the spouse or common-law partner of the parent who does not have custody of the child

If you do not have care and custody of your child(ren), you can authorize the person who does have care and custody of the child(ren) to submit claims and receive payment for the eligible dependant child(ren).

To authorize direct payment to the person who has custody of the child or children, complete and submit the Pensioners' Dental Services Plan (PDSP) Authorization for Claims Submission and Re-direction of Payment form, which can be found on the [Forms](#) page of the PDSP Member Services website (welcome.canadalife.com/pdsp/forms).

Should you later wish to rescind this authorization, you can do so by writing to [Canada Life](#).

Coverage under a provincial or territorial plan

If you are entitled to dental benefits under a provincial or territorial plan or any other third-party source of dental care assistance for which you have legal right and are also covered under the PDSP, you must submit to the other plan first as follows:

Process

1. Submit a claim to your provincial or territorial plan or any other third-party source of dental care assistance for which you have a legal right.
2. Wait for the claim to be processed.
3. Submit a claim for the remaining eligible expenses to Canada Life with the explanation of benefits statement from the other plan.

Coverage under the Public Service Health Care Plan (Accident/Surgery)

If you are a member of both the PDSP and the Public Service Health Care Plan (PSHCP), you benefit from combined coverage for:

- dental services needed as a result of injury to natural teeth provided the treatment occurs within 12 months of the accident or, in the case of an eligible dependant child under 17 years of age, before attaining 18 years of age
- certain types of surgical dental services

Reason for receiving a dental service	Steps that you need to take to coordinate benefits under the PDSP and PSHCP
Injury	<ol style="list-style-type: none"> 1. Send a claim to the PSHCP. 2. If the claim is not fully reimbursed by the PSHCP, send a claim to the PDSP with: <ul style="list-style-type: none"> • a copy of your PSHCP claim form • a copy of the PSHCP explanation of benefits.

Reason for receiving a dental service	Steps that you need to take to coordinate benefits under the PDSP and PSHCP
Surgical procedure	<ol style="list-style-type: none"> 1. Send a claim to the PDSP. 2. If the claim is not fully reimbursed by the PDSP, send a claim to the PSHCP with: <ul style="list-style-type: none"> • a copy of your PDSP claim form • a copy of the PDSP explanation of benefits. <p>Note: limitations for oral surgery can be found in 6.6 Dental Benefit (njc-cnm.gc.ca/directive/d9/v283/s832/en#s832-tc-tm_6) of the PSHCP Directive.</p>

Audit

Prevent fraud and abuse

You can help protect your dental benefits coverage by following these steps to reduce the incidence of fraud and abuse:

- confirm that a service is necessary before you have it performed
- check your invoice to make sure you were charged for:
 - the correct amount
 - the services or supplies that you received
- review your explanation of benefits statement to ensure that the listed services are correct
- refuse receipts for services or supplies that you did not receive
- do not sign blank claim forms
- check your claims history on your PDSP Member Services account through [My Canada Life at Work™](#) (canadalife.com/pdsp) to make sure that you are aware of all submitted claims
- Notify [Canada Life](#) if your spouse, common-law partner or eligible dependant child(ren) are no longer covered under the PDSP

If you see something suspicious, report it to Canada Life:

- Confidential tip line: 1-866-810-8477
- Email: confide@canadalife.com

Dependant Eligibility Verification Program

The purpose of the Dependant Eligibility Verification Program (DEVP)

The purpose is to verify, with supporting documents, that dependant(s) who are enrolled under the PDSP are eligible for dental benefits coverage according to the [PDSP Rules](#) (canada.ca/en/treasury-board-secretariat/services/benefit-plans/pensioner-dental-services-plan/pensioners-dental-services-plan-rules). If Canada Life determines that a dependant is no longer eligible, their PDSP coverage will be terminated, and you may be responsible to pay back any claims that were reimbursed after the date the dependant was no longer eligible.

If you do not respond to the request for documents supporting the eligibility of your enrolled dependant(s), the processing of claims for your dependant(s) may be suspended or terminated until the required documents are received and the eligibility under the PDSP is verified. You may be responsible to pay back any claims that were reimbursed.

Why you were selected

This program is based on a random selection of PDSP members who have enrolled dependant(s). You will be asked to provide supporting documents to verify your enrolled dependant(s) meet the eligibility criteria under the PDSP.

If you have any questions about the DEVP, you can contact [Canada Life](#).

Annual Student Eligibility Verification

The purpose of the Annual Student Eligibility Verification (ASEV)

The purpose is to verify, with supporting documents, that the enrolled dependant(s) are eligible for dental benefits coverage as a full-time student according to the [PDSP Rules \(canada.ca/en/treasury-board-secretariat/services/benefit-plans/pensioner-dental-services-plan/pensioners-dental-services-plan-rules\)](#). If Canada Life determines that a dependant is no longer eligible, their PDSP coverage will be terminated, and you may be responsible to pay back any claims that were reimbursed after the student was no longer eligible.

If you do not respond to the request for documents supporting the full-time student eligibility of your enrolled dependant(s), the processing of claims for your dependant(s) may be suspended or terminated until the required documents are received and the eligibility under the PDSP as a student is verified.

Why you were selected

If you are selected to participate in the ASEV, it is because claims have been submitted over the last year for your full-time student(s). You will be asked to provide supporting documents to verify the student status every year that claims are submitted for your full-time student(s) until they are no longer eligible for coverage under the PDSP.

If you have any questions about the Annual Student Eligibility Verification, you can contact [Canada Life](#).

Contact Information

Canada Life

PDSP Member Contact Centre

- North America (toll-free): 1-855-415-4414, Monday to Friday from 8 am to 5 pm, your local time
- International (collect): 1-431-489-4064, Monday to Friday from 8 am to 5 pm, ET

Deaf or hard of hearing access to a telecommunications relay service

- Telephone Teletype (TTY) to Voice: 771
- Voice to Telephone Teletype (TTY): 1-800-855-0511

Secure online chat

Sign in to your PDSP Member Services account through [My Canada Life at Work™](https://canadalife.com/pdsp) (canadalife.com/pdsp) and go to the **Contact Us** page.

Secure email

Sign in to your PDSP Member Services account through [My Canada Life at Work™](https://canadalife.com/pdsp) (canadalife.com/pdsp) and go to the **Contact Us** page to email Canada Life.

My Canada Life at Work mobile app

Sign in to your PDSP Member Services account through the My Canada Life at Work™ mobile app and select **More** to go to the **Contact Us** page. Select **Message us**, **Call us** or **Mail us**.

Government of Canada

For more information on registration, eligibility of coverage, benefits and pension deductions or to amend your category of coverage, contact the Pension Centre or your pension office.

Pensioner	Mail	Phone	Email
Retired members of the Public Service and their eligible surviving dependant(s)	Public Services and Procurement Canada Government of Canada Pension Centre – Mail Facility PO Box 8000 Matane QC G4W 4T6	In Canada and United States (toll-free): 1-800-561-7930 Monday to Friday • from 7 am to 5 pm ET Outside Canada and United States (collect): 1-506-533-5800 Monday to Friday • from 7 am to 4 pm ET Telephone Teletype (TTY) (collect): 1-506-533-5990 Monday to Friday • from 7 am to 4 pm ET	PWGSC.PensionCentre-Centredespensions. TPSGC@pwgsc-tpsgc.gc.ca
Retired members of the Royal Canadian Mounted Police (for PDSP purposes only) and their eligible surviving dependant(s)	Public Services and Procurement Canada Government of Canada Pension Centre PO Box 8500 Matane QC G4W 0E2	In Canada and US (toll-free): 1-800-502-7090 Monday to Friday • from 7 am to 5 pm ET Outside Canada and US (collect): 1-506-533-5800 Monday to Friday • from 7 am to 4 pm ET Telephone Teletype (TTY) (collect): 1-506-533-5990 Monday to Friday • from 7 am to 4 pm ET	pensioncentrercmp.centredespensionsgrc@pwgsc-tpsgc.gc.ca

Pensioner	Mail	Phone	Email
Retired members of the Canadian Armed Forces and their surviving dependant(s)	Public Services and Procurement Canada Government of Canada Pension Centre – Mail Facility PO Box 9500 Matane QC G4W 0H3	In Canada and US (toll-free): 1-800-267-0325 Monday to Friday • from 7 am to 5pm ET Outside Canada and US (collect): 613-946-1093 Monday to Friday • from 7 am to 5 pm ET Telephone teletype (TTY) (collect): 1-855-255-9935 Monday to Friday • from 7 am to 5 pm ET	pensioncentrecaf. centredespensionsfac@ pwgsc-tpsgc.gc.ca
Retired members of Parliament	House of Commons Pension Office 1451 Coldrey Avenue Ottawa ON K1A 0S5	Local: 613-957-0440 bilingual service In Canada and US (toll-free): 1-800-883-2456 bilingual service Outside Canada and US (collect): 613-957-0440 bilingual service	
Retired members of the Senate of Canada	Senate of Canada Pension Office 40 Elgin Street Ottawa ON K1A 0A4	Local: 613-415-5875 bilingual service In Canada and US (toll-free): 1-800-267-7362 bilingual service Outside Canada and US (collect): 613-415-5875 bilingual service	
Retired members of the <i>Judges Act</i>	Office of Commissioner for Federal Judicial Affairs 99 Metcalfe Street, 8th Floor Ottawa ON K1A 1E3	Local: 613-995-5140 bilingual service In Canada and US (toll-free): 1-877-583-4266 bilingual service Outside Canada and US (collect): 613-995-5140 bilingual service	

Definitions

For a complete listing of of PDSP terminology definitions, please visit the [PDSP Rules \(canada.ca/en/treasury-board-secretariat/services/benefit-plans/pensioner-dental-services-plan/pensioners-dental-services-plan-rules.html#Toc129481894\)](https://canada.ca/en/treasury-board-secretariat/services/benefit-plans/pensioner-dental-services-plan/pensioners-dental-services-plan-rules.html#Toc129481894).

