



Public Service Dental Care Plan (PSDCP)

Member Booklet

January 2025

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Introduction

Welcome to the Public Service Dental Care Plan (PSDCP)

The Public Service Dental Care Plan (PSDCP) is an employer-paid dental plan for eligible employees of the federal public service, including the eligible dependant(s) of the Royal Canadian Mounted Police (RCMP), the eligible dependant(s) of the Canadian Armed Forces (CAF), participating employers, members of certain designated groups and their eligible dependant(s).

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

This booklet is not a substitute for the **PSDCP Rules** (canada.ca/en/treasury-board-secretariat/topics/benefit-plans/plans/dental-care-plan/rules-dental-care-plan-public-service-canada), which provides the complete terms and conditions of the PSDCP. Where there is a discrepancy between this booklet and the PSDCP Rules, the PSDCP Rules will apply.

The Public Service Dental Care Plan (PSDCP)

The PSDCP 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 PSDCP reimburses eligible expenses on a **Reasonable and Customary** basis, subject to limitations identified in the **PSDCP Rules** (canada.ca/en/treasury-board-secretariat/topics/benefit-plans/plans/dental-care-plan/rules-dental-care-plan-public-service-canada).

Governance of the PSDCP

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

Government of Canada

The Government of Canada, as plan sponsor, is responsible for the oversight and management of the PSDCP. The Government of Canada assumes full liability for the payment of all expenses related to the operation of the PSDCP and the payment of eligible claims. The cost of the PSDCP is fully paid by the Employer except in certain [Leave Without Pay](#) (LWOP) situations.

The Boards of Management

The Boards of Management are mandated to resolve member appeals related to claims and eligibility, monitor the performance of the plan administration, oversee the plan's financial information and provide feedback on plan design.

The PSDCP has 4 boards of management representing their respective members. Each board is comprised of Employer and bargaining agent/member representatives.

The Public Service Dental Care Plan Boards of Management are:

- National Joint Council (NJC) Component for employees represented by the bargaining agents of the NJC, all unrepresented and excluded employees except employees represented by Public Service Alliance of Canada (PSAC)
- PSAC Component for employees represented by PSAC
- Canadian Armed Forces (CAF) Component for the dependants of the Regular Force members and the Reserve Force members
- Royal Canadian Mounted Police (RCMP) Component for dependants of the RCMP and Civilian Members

Canada Life

The PSDCP is administered by The Canada Life Assurance Company (Canada Life). On behalf of the Government of Canada, the administrator's role is to process claims, answer benefit inquiries in accordance with the [PSDCP Rules](#) (canada.ca/en/treasury-board-secretariat/topics/benefit-plans/plans/dental-care-plan/rules-dental-care-plan-public-service-canada), and provide services as specified in the PSDCP Administrative Services Only Contract.

Departmental compensation office or Public Service Pay Centre

The departmental compensation office or Public Service Pay Centre (Pay Centre) is responsible for confirming member eligibility to the PSDCP and informing Canada Life of the effective date of coverage for all new and existing employees. Your departmental compensation office or Pay Centre will also provide instructions, collect contributions and process payments related to [Leave Without Pay](#) (LWOP).

Membership

Joining the PSDCP

Eligibility

To become a member of the PSDCP, you must meet the eligibility requirements described in the [PSDCP Rules](https://canada.ca/en/treasury-board-secretariat/topics/benefit-plans/plans/dental-care-plan/rules-dental-care-plan-public-service-canada) (canada.ca/en/treasury-board-secretariat/topics/benefit-plans/plans/dental-care-plan/rules-dental-care-plan-public-service-canada).

Eligible employee

- an indeterminate employee
 - seasonal employee
 - full-time term employee appointed for more than 6 months or who has completed 6 months of continuous employment
 - part-time employee whose assigned work week is more than 1/3 of the normal work week for a full-time employee of the same occupational group
- an excluded or unrepresented employee
- an executive
- an employee of a number of participating employers
- a member of the Royal Canadian Mounted Police (RCMP) (only eligible dependant(s) are covered)
- a civilian member of the RCMP
- a member of the Canadian Armed Forces (CAF) (only eligible dependant(s) are covered)
- a member of the Canadian Armed Forces (CAF) Primary Reserve (consult your unit orderly room)
- members of Parliament, Senators and their staff
- the Governor General and Lieutenant Governors

Eligible dependants

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

Note: If you have both a legal spouse and a common-law partner, you can cover only one. The PSDCP will only cover the person you include in your [positive enrolment](#). During separation, a married spouse may remain on the PSDCP. A divorced spouse cannot be covered under the PSDCP. Upon divorce or the end of a common-law partnership, it is your responsibility to notify the plan administrator and your departmental compensation officer or the Pay Centre to avoid risk of overpayments.

- your or your spouse's or common-law partner's unmarried children including a natural child, adopted child, or stepchild or a child for whom you stand in place of a parent (conditions apply, see [Public Service Dental Care Plan \(PSDCP\) Appeal Checklist](https://canada.ca/en/treasury-board-secretariat/topics/benefit-plans/plans/dental-care-plan/public-service-dental-care-plan-appeal-checklist) (canada.ca/en/treasury-board-secretariat/topics/benefit-plans/plans/dental-care-plan/public-service-dental-care-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 PSDCP when becoming incapable of self-sustaining employment by reason of mental or physical impairment (to apply for coverage of a dependant child with a disability, complete and submit the [PSDCP Application for Dependant with a Disability Coverage Form](https://welcome.canadalife.com/content/dam/rfp/psdcp/M7450(PSDCP).pdf) ([welcome.canadalife.com/content/dam/rfp/psdcp/M7450\(PSDCP\).pdf](https://welcome.canadalife.com/content/dam/rfp/psdcp/M7450(PSDCP).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 PSDCP.

Note about how a child is defined: A child who does not meet the definition of child for the purposes of the PSDCP, but for whom you stand in place of a parent, may be eligible for coverage with the approval of a Board of Management. To obtain coverage for such a child, you must provide the Board of Management responsible for your component with supporting documentation 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 Board of Management will also consider:

- the extent to which you are financially responsible for the child
- whether your relationship is that of parent and child
- the expected duration of this relationship

Coverage start date

PSDCP coverage starts exactly 3 months from the date you become an eligible employee. This period is commonly known as the 3-month waiting period.

Example:

- You were hired as an indeterminate employee, appointed on a continuous basis with no preset end date, on May 3, 2024. Your PSDCP coverage start date will be August 3, 2024.
- You were hired as a term employee for a period of 3 months on May 3, 2024, and then you were hired for a 1-year term with no break in service. Your PSDCP coverage start date will be February 3, 2025. This is based on the first 3 months term employment (not eligible), followed by 6 months of continuous service, followed by the 3-month waiting period.

PSDCP coverage for new eligible dependant(s) starts on the dependant(s) coverage start date.

Example:

- You get married on May 3, 2024. Your spouse's coverage start date will be May 3, 2024, if your coverage was effective on that date.
- Your child is born on May 3, 2024. Your child's coverage start date will be May 3, 2024, if your coverage was effective on that date.

If you are on Leave Without Pay (LWOP) or on a seasonal layoff on the day that you would normally have become a member of the PSDCP, your dental benefits coverage and the coverage for your eligible dependant(s) will begin on the first day of the month after the month you resume paid work. For example, if you resumed paid work on October 15, your coverage would begin on November 1.

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:
 - January to March 72111
 - April to June 72112
 - July to September 72113
 - October to December 72114

For example, if you are an employee born in the month of November, your plan number is 72114.

If you need to make any updates to your personal information such as last name or date of birth, contact your [departmental compensation office or Pay Centre](#).

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

- print, complete and sign a PSDCP Direct Deposit form, which you can find on the [Forms](#) page of the PSDCP Member Services website (welcome.canadalife.com/psdcp/forms)
- sign in to your PSDCP Member Services account through [My Canada Life at Work™](#) (canadalife.com/psdcp) or the My Canada Life at Work mobile app, go to the 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 PSDCP 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/psdcp/positive-enrolment) (welcome.canadalife.com/psdcp/positive-enrolment) and select **Complete positive enrolment**. This will bring you to the PSDCP positive enrolment page. This page is only to be used for initial positive enrolment. See [Keeping your positive enrolment information up to date](#) for instructions on how to update your positive enrolment information.
2. On the PSDCP positive enrolment page, enter your last name, date of birth and PSDCP 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 PSDCP benefit card.
4. Once positive enrolment is completed, create your PSDCP Member Services account through [My Canada Life at Work™](https://canadalife.com/psdcp) (canadalife.com/psdcp) (see [Benefits of a PSDCP 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 PSDCP Member Services account.

How to complete your initial positive enrolment by mail

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

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

Once you have your paper PSDCP Positive Enrolment Form:

1. Fill out the double-sided PSDCP 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 PSDCP Positive Enrolment Form, that includes a confirmation statement and a paper PSDCP 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.

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

PSDCP benefit card (plan number and certificate number)

Your PSDCP 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 PSDCP benefit card and must provide the plan number and the certificate number seen on the plan member's PSDCP benefit card to 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 benefit card, sign in to your [PSDCP Member Services account](https://canadalife.com/psdcp) (canadalife.com/psdcp) to download and print one or contact [Canada Life](#) to request that a benefit card be sent to you by mail. You can also contact your [departmental compensation office or the Pay Centre](#) 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 PSDCP Boards of Management 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](https://canada.ca/en/treasury-board-secretariat/topics/benefit-plans/plans/dental-care-plan/public-service-dental-care-plan-privacy-statement) (canada.ca/en/treasury-board-secretariat/topics/benefit-plans/plans/dental-care-plan/public-service-dental-care-plan-privacy-statement) for further information on how your privacy is protected. For a copy of the [Privacy policy](https://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](https://canadalife.com/contact-us/corporate/privacy-rights-request) (canadalife.com/contact-us/corporate/privacy-rights-request).

Providing consent

Whether completing positive enrolment online or by mail, you must carefully read the [Authorization and Declaration](https://welcome.canadalife.com/psdcp/positive-enrolment/review-authorizations-and-declarations) (welcome.canadalife.com/psdcp/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, and you will not receive payment.

Note: Make sure to read the [Authorization and Declaration](https://welcome.canadalife.com/psdcp/positive-enrolment/review-authorizations-and-declarations) (welcome.canadalife.com/psdcp/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 or date of birth, contact your [departmental compensation office or Pay Centre](#).

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

- print, complete and sign a PSDCP Direct Deposit form, which you can find on the [Forms](#) page of the PSDCP Member Services website (welcome.canadalife.com/psdcp/forms)
- sign in to your PSDCP Member Services account through [My Canada Life at Work™](#) (canadalife.com/psdcp) or the My Canada Life at Work mobile app, go to the 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 PSDCP 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 [PSDCP Member Services account](#) (canadalife.com/psdcp) and go to the profile section to update your information.
2. Print and complete the PSDCP Positive Enrolment Form and submit it to Canada Life.
3. Contact [Canada Life](#) to request that a PSDCP 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 PSDCP correspondence, claims and personal information online. Sign in to your [PSDCP Member Services account](#) (canadalife.com/psdcp), 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**.

PSDCP Member Services account

Benefits of a PSDCP Member Services account

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

- access your PSDCP benefit card and save it directly to your mobile device
- view your plan number and your certificate number
- provide your 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 between 2 Canada Life plans or submit the remaining balance of a claim already processed through other insurance
- submit photos of receipts for all dental claims
- send supporting documentation requested by Canada Life
- review your coverage and balances
- submit a Canada Life 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 PSDCP Member Services account

Positive enrolment must be completed before you create a PSDCP Member Services account. Allow at least 48 hours after completing positive enrolment before creating 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 [PSDCP Member Services website \(canadalife.com/psdcp\)](https://canadalife.com/psdcp).
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 [PSDCP Member Services account \(canadalife.com/psdcp\)](https://canadalife.com/psdcp) using your existing login credentials. You will be prompted to view coverage information for each of your benefit plans and can switch between 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 [PSDCP Member Services account](https://canadalife.com/psdcp) (canadalife.com/psdcp) 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 PSDCP 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) 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 the 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 [PSDCP Member Services account](https://canadalife.com/psdcp) (canadalife.com/psdcp) 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/psdcp/2-step-verification-faq).

Contributions

The Government of Canada, as the Employer pays 100% of the PSDCP contributions for eligible members with some [exceptions](https://canada.ca/en/treasury-board-secretariat/topics/benefit-plans/plans/dental-care-plan/rules-dental-care-plan-public-service-canada) (canada.ca/en/treasury-board-secretariat/topics/benefit-plans/plans/dental-care-plan/rules-dental-care-plan-public-service-canada).

Leave Without Pay

Some types of Leave Without Pay (LWOP) do not require you to pay the full cost of your dental benefits coverage to keep your coverage while on leave.

Before taking LWOP, contact your [departmental compensation office or Pay Centre](#). You will be provided with a letter that contains further information and instructions. If you wish to retain your PSDCP coverage while on LWOP, you must inform your departmental compensation office or Pay Centre or your coverage will be suspended while on leave. See [PSDCP contribution rates](#). If you need to change your category of coverage, you can do so with your [departmental compensation office or Pay Centre](#).

Important: It is your departmental compensation or Pay Centre's responsibility to collect your contributions upon your return to work.

If you choose to not retain your PSDCP coverage before your LWOP begins, your coverage will be cancelled on the first day of the following month of your LWOP start date.

Example: If your LWOP begins on June 15, 2024 and you did not opt to retain your PSDCP while on leave, your coverage will be cancelled on July 1, 2024.

No employee contributions are to be paid for the following types of LWOP:

- maternity leave or parental leave (standard or extended)
- caregiving leave
- sick LWOP
- disability or long-term disability leave
- educational LWOP at the request of the employer
- leave to serve in another organization if doing so is recognized as being to the advantage of the department or to the Government of Canada
- leave for training or other activities as part of service in the Canadian Armed Forces or Reserves
- leave taken as part of leave with income averaging and pre-retirement transition leave

Employee contributions must be paid for any other type of LWOP. The following will apply:

- Your employer-paid coverage will continue during the first 3 consecutive calendar months of approved LWOP.
- As of the fourth month of your leave of absence, if you wish to keep your dental benefits coverage, you must pay your monthly contribution amount for the category of coverage you wish to retain (including the applicable provincial sales tax) to the Receiver General of Canada. You can pay your contributions in advance or when you return to work. If you choose to pay them when you return to work, you must make payments on a schedule that does not exceed the time you were on leave.
- You cannot change your type of coverage during your LWOP.

Example:

You take LWOP from February 21, 2024, to November 3, 2024, because your spouse needs to relocate, you return to work on November 5, 2024.

First 3 months

You have employer-paid coverage for the first 3 full months of your LWOP (March, April and May 2024). Your dental benefits coverage stops on May 31, 2024.

Before the end of the third month

If you wish to continue your dental benefits coverage for the rest of your LWOP, you can pay your contributions in advance or when you return to work. If you choose to pay them when you return to work, you must make payments on a schedule that does not exceed the time you were on leave or in this example, 7 months following your return to work.

Consult your [departmental compensation office or Pay Centre](#) about your options prior to beginning LWOP.

Return to work

If you chose to terminate your coverage for the period on LWOP, your employer-paid coverage will be reinstated on December 1, 2024 (the first of the month after you return to work). You cannot restart coverage while on LWOP.

Suspension

If you are covered by the PSDCP and your employment is suspended, you can continue your dental benefits coverage if you pay the [required contributions](#) (canada.ca/en/treasury-board-secretariat/services/benefit-plans/dental-care-plan/contribution-rates) quarterly, in advance, before the first of the month following the month in which the suspension period began. Your employer-paid coverage will resume on the first of the month following the date you return to duty. Your departmental compensation office or Pay Centre will provide reasonable notice to pay your contributions.

Layoff

If you are covered by the PSDCP and you are laid off, your dental benefits coverage may continue for a period of up to 12 months if you pay the appropriate [monthly contribution amount](#) in advance (canada.ca/en/treasury-board-secretariat/services/benefit-plans/dental-care-plan/contribution-rates).

PSDCP contribution rates (not including applicable provincial or territorial sales tax)

For PSDCP contribution rates, please review [Canada.ca/pension-benefits](#) (canada.ca/en/treasury-board-secretariat/services/benefit-plans/dental-care-plan/contribution-rates).

Categories of coverage:

- Plan member only
- Plan member and spouse/common-law partner or plan member with children
- Plan member, spouse/common-law partner and children

Leaving the PSDCP

Coverage termination date

Your PSDCP coverage will terminate automatically on the earliest of the following:

1. on the date when you are no longer an eligible employee

For example:

- i. the date you resign from the public service
- ii. the date you become a part-time employee and work less than 1/3 of the normal work week

Your dependant(s)' PSDCP coverage will terminate on the earliest of the following:

1. the date your coverage terminates
2. the date your eligible dependant(s) no longer meet the definition of eligible spouse, common-law partner or child

For example:

- i. the date of a divorce
- ii. the date the common-law partnership ends
- iii. the date a child turns 21 years of age, if no longer in full-time attendance at an accredited school, college or university
- iv. the date a child turns 25 years of age
- v. the last day of the month a child between 21 and 25 years is in full-time attendance at an accredited school, college or university
- vi. the date the dependant child marries
- vii. the date the dependant child becomes a member of the plan in their own right (as an eligible employee as defined above)

It is your responsibility to promptly notify [Canada Life](#) and your [departmental compensation office or Pay Centre](#) of these changes.

Retirement

Dental benefits coverage ends on your last day of employment. If you retire with an immediate public service pension, you may be eligible to apply for coverage under the [Pensioners' Dental Services Plan \(PDSP\)](#) (canada.ca/en/treasury-board-secretariat/topics/benefit-plans/plans/pensioner-dental-services-plan). If you apply for the PDSP up to 60 days in advance of your retirement date or your application is received by the Pension Centre or your pension office before 60 days after your retirement date, your dental benefits coverage will be seamless. Refer to the [PDSP Member Booklet](#) (canadalife.com/content/dam/rfp/welcome-sites/pdsp/pdsp-member-booklet.pdf).

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 if you were undergoing 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 PSDCP Member Services account through [My Canada Life at Work™ \(canadalife.com/psdcp\)](https://canadalife.com/psdcp).
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 PSDCP 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 PSDCP Member Contact Centre.

Before incurring an expense

Some products and services may be costly. Before you incur dental expenses, know what your PSDCP will reimburse. For procedures that may exceed \$300, submit an estimate to be certain of what is eligible for reimbursement. Plan members in discussion with their dental provider can decide on the most appropriate treatment for their situation.

Reasonable and Customary Charges

The PSDCP provides reimbursement for eligible dental services based on the provincial or territorial dental association 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 PSDCP will provide reimbursement based on the previous year's dental fee guide of your province or territory of residence.

If you live outside of Canada, the PSDCP provides reimbursement for eligible dental services based on the Reasonable and Customary Charges in the location where the services are received. Reimbursement is paid in Canadian dollars. Members residing in the United States can choose to receive reimbursement in US dollars by cheque.

Foreign Service Directives: If a member who is deployed or posted outside Canada, incurs eligible dental expenses outside of Canada that are higher than the fee for the same service as set out in the Ontario fee guide, they may be required to pay a higher co-payment amount as defined in the PSDCP. In such cases, the member can submit a claim for payment under these Directives to cover the portion of the co-payment amount that exceeds what they would have paid if the treatment had occurred in Ontario.

Canadian Armed Forces members should refer to [Chapter 10 - Foreign Services Instructions - Canada.ca](#).

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 out of pocket 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 PSDCP will reimburse you for a percentage of the eligible expenses. The PSDCP covers 90% for eligible preventive and basic dental services, 65% for eligible major restorative services and 50% for eligible 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	PSDCP pays	What you pay (co-payment)
Preventive and basic dental services	90%	10%
Major restorative services	65%	35%
Orthodontic services	50%	50%

Important: You are responsible for any amount not reimbursed by the PSDCP, including 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 (%)	PSDCP pays (2)	What you pay
Recall exam	\$65	\$60	\$25	\$35 reimbursed at 90%	\$31.50	\$33.50
Crown including lab fees	\$1,500	\$1,300	Already paid	\$1,300 reimbursed at 65%	\$845	\$655

1. Up to the amount in the applicable dental fee guide in effect the previous year.
2. Any amounts over the 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 PSDCP will reimburse up to an annual maximum amount for each covered person for preventive, basic and major restorative dental services. This excludes orthodontic services, which have a separate lifetime maximum limit.

The yearly annual maximum reimbursement for dental services is:

- \$3,000 per year January 1, 2025 to December 31, 2026
- \$3,250 per year starting on January 1, 2027

Exception: If your PSDCP coverage starts on or after July 1, the maximum amount that the PSDCP will reimburse for that calendar year will be 50% of the annual maximum. The full annual maximum will apply in the next calendar year.

Orthodontic services – lifetime maximum

The PSDCP will reimburse up to a lifetime maximum amount for each covered person for orthodontic services.

The lifetime maximum reimbursement for orthodontic services is:

- \$3,000 per lifetime from January 1, 2025 until December 31, 2026
- \$3,250 per lifetime starting January 1, 2027

Important: Before January 1, 2025, the orthodontic lifetime maximum was \$2,500. If you claimed \$2,500 for orthodontic services, you may be eligible to claim the balance, up to the new lifetime maximum on services incurred after January 1, 2025.

To be eligible, the initial orthodontic appliance must not have been installed before the start of your PSDCP coverage.

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. All claims will require the provider's signature or office stamp.

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 graduates from post-secondary education or turns 25, or you may reach the annual maximum amount during the 180 days.

How to submit a treatment plan or estimate online:

If your dental provider does not submit an estimate of reimbursement on your behalf, you can do so yourself. To submit a treatment plan/estimate through your PSDCP Member Services account on [My Canada Life at Work™ \(canadalife.com/psdcp\)](#), 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 [PSDCP Member Services account \(canadalife.com/psdcp\)](#),
 - 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](#) page of the PSDCP Member Services website ([welcome.canadalife.com/psdcp/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 or estimate does not need a dental provider signature.

How to submit a treatment plan or 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 [PSDCP Member Services account \(canadalife.com/psdcp\)](#)

- 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](#) page of the PSDCP Member Services website (welcome.canadalife.com/psdcp/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](#) 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 method of communication indicated in your file. It will include:

- a decision on whether the expense is covered by the PSDCP
- 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), see [Coordination of benefits with other plans](#) for more information

Benefits

General

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

The PSDCP 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 PSDCP and the Public Service Health Care Plan (PSHCP), you may coordinate benefits between both plans for accidental dental injury or dental 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 PSDCP, consult the [PSDCP Rules](#) (canada.ca/en/treasury-board-secretariat/topics/benefit-plans/plans/dental-care-plan/rules-dental-care-plan-public-service-canada) and look for:

- the list of all eligible dental services (see Rule 6.(2) of the PSDCP Rules)

- the list of exclusions and limitations (see Rules 6.(3) and 6.(12) of the PSDCP Rules)
- the table of benefits (see Rule 6.(5) of the PSDCP Rules)

Preventive dental services

Diagnostic services: reimbursed at 90% of the eligible expenses

The PSDCP 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	Once every 36 months (this limitation does not apply to a limited new patient examination)
Recall examination	Once every 9 months or once every 6 months for eligible dependant children
Specific oral examination	No limitations
Emergency oral examination	No limitations
Treatment planning	No limitations
Analysis of mixed dentition	Covered when a complete examination is not performed in the previous 12-month period

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 or once every 6 months for eligible dependant children
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	No limitations, including cone beam computed tomography

Other services	Limitations
Polishing	Once every 9 months or once every 6 months for eligible dependant children. A temporary suspension of the frequency limitation will apply to those who will be or are undergoing chemotherapy to treat cancer*.

Other services	Limitations
Topical fluoride treatment	Once every 9 months or once every 6 months for eligible dependant children. A temporary suspension of the frequency limitation will apply to those who will be or are undergoing chemotherapy to treat cancer*.
Oral hygiene instruction	Once per calendar year for eligible dependant children and once per lifetime for any other person
Pit and fissure sealants	No age limitation
Space maintainers	Not involving movement of teeth, service costs will not be eligible if the service is in response to a needed adjustment that occurred within 31 days from the date the space maintainer was originally inserted
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
Injections, appliances and assessments	For those with temporo-mandibular joint disorder

*To ensure that claims for scaling/root planning, fluoride and polishing are not declined due to reaching the standard frequency limitation, Canada Life **must** be informed by the member or provider that the claiming patient is going to receive or is receiving chemotherapy to treat cancer. Claims will be approved based on confirmation from the member, provider or supporting medical documentation.

Continued eligibility for this temporary suspension will be assessed 12 months after the initial approval.

Basic dental services

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

The PSDCP 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 surface once every 24 months or once every 12 months for eligible dependant children

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	
Tooth isolation	No limitations if there is a substantiated medical condition

Periodontics	Limitations
Scaling and root planing	<p>6 time units every calendar year</p> <p>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 years from the date of approval. When you apply for reimbursement of additional units of scaling and/or root planing within 3 months of the treatment, you may be reimbursed for up to 2 time units.</p> <p>A temporary suspension of the frequency limitation will apply to those who will be or are undergoing chemotherapy to treat cancer*.</p>
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 extraction)	
Gingivoplasty (reshapes gum tissue)	
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)	

*To ensure that claims for scaling/root planning, fluoride and polishing are not declined due to reaching the standard frequency limitation, Canada Life **must** be informed by the member or provider that the claiming patient is going to receive or is receiving chemotherapy to treat cancer. Claims will be approved based on confirmation from the member, provider or supporting medical documentation.

Continued eligibility for this temporary suspension will be assessed 12 months after the initial approval.

**Excluding transplants and repositioning of the jaw.

Major dental services

Major dental services: reimbursed at 65% of the eligible expenses

The PSDCP 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, unless deemed necessary by the treating dental provider and Canada Life approves
Services and supplies for congenitally missing teeth	Coverage under age 23

Major prosthodontics	Limitations
Diagnostic services	Replacements are only covered under certain conditions – see PSDCP Rule 6.(3)b
Complete dentures	
Addition of a tooth to a removable denture	
Partial dentures	
Fixed bridges (abutments/retainers, pontics)	
Retentive pins in abutments	
Repairs of fixed appliances	
Implants	

Important: The PSDCP has an **Alternate Benefit Clause** for specific dental services. This means the PSDCP 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 will 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 PSDCP covers services used to treat misaligned or crooked teeth up to a lifetime maximum. See [Maximum reimbursement amounts](#).

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

Orthodontic	Limitations
Examinations	No limitations
X-rays	
Diagnostic casts	

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

Orthodontic	Limitations
Fixed or removable appliances, such as braces	No orthodontic benefits will be paid if the initial appliance was installed before the person was covered under the PSDCP. Orthodontic services purchased online from direct-to-consumer orthodontic treatment providers are not eligible under the PSDCP. Unless with documented professional responsibility of a dental provider demonstrated on the claim form.

Third-party products and appliances

Purchasing devices from third-party service providers

You can purchase direct-to-consumer devices from third-party service providers when the use of the product/appliance covered under the PSDCP is under the regular supervision of a licensed dental provider. This is done by ensuring that all related claim forms include the provider's signature or approved office stamp.

Claims Management

How to submit a claim for dental services incurred in Canada

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

1. Have your dental provider submit a claim electronically on your behalf
2. Submit a claim online (through your PSDCP 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 PSDCP 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 PSDCP benefit card and must present the plan number and the certificate number seen on the plan member's PSDCP 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 PSDCP 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

Note: CAF Primary Reserve must complete paper claim forms, that includes the appropriate unit orderly room stamp, and the Reservist submits it to Canada Life at:

Canada Life
Winnipeg Benefit Payments
PO Box 6025 Station Main
Winnipeg MB R3C 3C7

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

Once you have completed [positive enrolment](#) and registered for a [PSDCP Member Services account](#) (canadalife.com/psdcp), you can submit claims digitally through your PSDCP Member Services account or the 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 PSDCP 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 a receipt signed by your dental provider to get your reimbursement.

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 [PSDCP Member Services account](#) (canadalife.com/psdcp)
 - 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 PSDCP Member Services website ([welcome.canadalife.com/psdcp/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's or common-law partner's dental plan number and certificate number, if applicable
- your signature
- the dental provider's signature or office stamp in Part I of the claim form

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 PSDCP Member Services account or the My Canada Life at Work mobile app)

Once you have completed [positive enrolment](#) and registered for a [PSDCP Member Services account](#) ([canadalife.com/psdcp](#)), you can submit claims online through your PSDCP Member Services account 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 PSDCP 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 [PSDCP Member Services account](#) (canadalife.com/psdcp)
 - 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 PSDCP Member Services website (welcome.canadalife.com/psdcp/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
- for orthodontic dental services, the date the appliance is installed and the date of each monthly visit

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 [PSDCP Member Services account \(canadalife.com/psdcp\)](https://canadalife.com/psdcp). The explanation of benefits provides details on how your claim was processed and the amount being reimbursed under the PSDCP.

If you have signed the Public Service Dental Care Plan (PSDCP) Authorization for Claims Submission and Redirection of Payment form, which can be found on the [Forms](https://welcome.canadalife.com/psdcp/forms) page of the PSDCP Member Services website (welcome.canadalife.com/psdcp/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 PSDCP, 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 in 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 if you do not agree with a decision regarding your claim or your coverage.

You may also wish to review the [PSDCP Rules \(canada.ca/en/treasury-board-secretariat/topics/benefit-plans/plans/dental-care-plan/rules-dental-care-plan-public-service-canada\)](https://canada.ca/en/treasury-board-secretariat/topics/benefit-plans/plans/dental-care-plan/rules-dental-care-plan-public-service-canada) to determine if your claim is eligible under the PSDCP.

Before you submit a Board of Management Appeal, you must first try to resolve the issue with:

- Canada Life, if your appeal is claim-related
- your [departmental compensation office or Pay Centre](#), 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 or 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 PSDCP Member Services account

1. Sign in to your [PSDCP Member Services account](#) (canadalife.com/psdcp) 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, you can appeal a second time. This can be done in writing through your [PSDCP Member Services account](#) (canadalife.com/psdcp) or by calling the PSDCP Member Contact Centre (contact [Canada Life](#)). In order to appeal a second time, you must send all the claim details, which must include all additional information that was not previously submitted for review, and why you disagree with the initial Canada Life claim decision.

Board of Management Appeal

If you have submitted a Canada Life appeal and are still not satisfied with the decision, you may submit an appeal to the Board of Management responsible for your component.

Note: This appeal process is also used to apply for PSDCP coverage for a child from whom you stand in place of a parent such as custodial or guardianship situations. The relevant Board of Management will review your case and issue a decision.

See [Public Service Dental Care Plan \(PSDCP\) Appeal Checklist](https://canada.ca/en/treasury-board-secretariat/topics/benefit-plans/plans/dental-care-plan/public-service-dental-care-plan-appeal-checklist) (canada.ca/en/treasury-board-secretariat/topics/benefit-plans/plans/dental-care-plan/public-service-dental-care-plan-appeal-checklist) for more information.

What to include in an appeal

If you wish to ask the applicable PSDCP Board of Management to review your case, mail your appeal to one of the following addresses. 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 relevant documentation
- the plan member's PSDCP 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 or your departmental compensation office or Pay Centre 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 applicable PSDCP Board of Management 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 Boards of Management may meet bi-monthly, quarterly or less frequently depending on the volume of appeals. The response to an appeal may take a few months.

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

Where to send an appeal

Appeal documentation should be mailed to the appropriate Board of Management. Medical and dental records as well as information on eligible dependant child(ren) custody are considered Protected B and cannot be emailed.

If you are represented by the Public Service Alliance of Canada (PSAC):

**Board of Management
Dental Care Plan (PSAC) Component
90 Elgin Street
3rd Floor, Suite 3026
Ottawa, Ontario
K1A 0R5**

If you are a member of the Canadian Armed Forces (CAF) or the Primary Reserve:

**Canadian Armed Forces Dental Care Plan Board
Director General Compensation and Benefits
Directorate of Pensions and Social Programs
MGen George R. Pearkes Building
101 Colonel By Drive
Ottawa, Ontario
K1A 0K2**

If you are a member of the Royal Canadian Mounted Police (RCMP):

**RCMP Dental Care Plan Board of Management
National Compensation Services: Insurance
73 Leikin Drive, M5-4-101
Mail stop 31
Ottawa, Ontario
K1A 0R2**

For all other members:

**Board of Management
Dental Care Plan National Joint Council (NJC)
P.O. Box 1525, Station B
240 Sparks Street West
7th floor
Ottawa, Ontario
K1P 5V2**

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 the time of claim.

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

The combined reimbursement from your PSDCP and your spouse's 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.

If you and your spouse or common-law partner both have dental plans 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 and certificate numbers of your spouse's or common-law partner's dental plan on the claim form or when submitting a claim in your PSDCP Member Services account. Canada Life will process the eligible claims under both memberships.

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

- If you are a CAF member, consult the [Dependants' Dental Care Plan \(DDCP\)](https://canada.ca/en/department-national-defence/services/benefits-military/pay-pension-benefits/benefits/medical-dental/dependant-dental-care-plan) (canada.ca/en/department-national-defence/services/benefits-military/pay-pension-benefits/benefits/medical-dental/dependant-dental-care-plan).
- If you are a CAF Primary Reservist, consult the [Reserve Dental Care Plan Administrative Instructions](https://canada.ca/en/department-national-defence/services/benefits-military/pay-pension-benefits/benefits/medical-dental/reserve-dental-care-plan) (canada.ca/en/department-national-defence/services/benefits-military/pay-pension-benefits/benefits/medical-dental/reserve-dental-care-plan).
- If you are covered under the PSDCP and the Pensioners' Dental Services Plan (PDSP) 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 [PSDCP Rules](https://canada.ca/en/treasury-board-secretariat/topics/benefit-plans/plans/dental-care-plan/rules-dental-care-plan-public-service-canada) (canada.ca/en/treasury-board-secretariat/topics/benefit-plans/plans/dental-care-plan/rules-dental-care-plan-public-service-canada). The remaining amount, if applicable, would be paid by your spouse or common-law partner's plan.

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 due to an accidental injury to natural teeth covered under both the Public Service Health Care Plan (PSHCP) and the PSDCP, 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 PSDCP, the coverage will be determined under the PSDCP first.
- If you are a member of the PSDCP and are also covered under your spouse's or common-law partner's plan as an eligible dependant, you should submit your claim to your PSDCP first.
- If your spouse or common-law partner is covered under other insurance and is also covered as an eligible dependant under your PSDCP, 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 PSDCP and your spouse's 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](https://clhia.ca/web/CLHIA_LP4W_LND_Webstation.nsf/page/28DE0F1EE2ACED4285257841005B27F8!OpenDocument) (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 PSDCP first.

- The maximum amount that you can receive from all plans for eligible 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 file claims and receive payment for the eligible dependant child(ren)'s dental services.

To authorize direct payment to the person who has custody of the child or children, complete and submit the PSDCP Authorization for Claims Submission and Re-direction of Payment form, which can be found on the [Forms](#) page of the PSDCP Member Services website (welcome.canadalife.com/psdcp/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 a legal right and are also covered under the PSDCP, 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 the PSDCP with the explanation of benefits from the other plan.

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

If you are a member of both the PSDCP 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 PSDCP 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 PSDCP with: <ul style="list-style-type: none"> • a copy of your PSHCP claim form • a copy of the PSHCP explanation of benefits.
Surgical procedure	<ol style="list-style-type: none"> 1. Send a claim to the PSDCP. 2. If the claim is not fully reimbursed by the PSDCP, send a claim to the PSHCP with: <ul style="list-style-type: none"> • a copy of your PSDCP claim form • a copy of the PSDCP explanation of benefits. <p>Note: Limitations for Accidental Injury and Oral Surgical Procedures can be found in the PSHCP Directive, Section 6.6 Dental Benefit (njc-cnm.gc.ca/directive/d9/v283/s832/en#s832-tc-tm_6).</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 PSDCP Member services account through [My Canada Life at Work™](https://canadalife.com/psdcp) (canadalife.com/psdcp) to make sure that you are aware of all submitted claims
- notify [Canada Life](https://canadalife.com) if your spouse, common-law partner or eligible dependent child(ren) are no longer covered under the PSDCP

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 PSDCP are eligible for dental benefits coverage according to the [PSDCP Rules \(canada.ca/en/treasury-board-secretariat/topics/benefit-plans/plans/dental-care-plan/rules-dental-care-plan-public-service-canada\)](https://canada.ca/en/treasury-board-secretariat/topics/benefit-plans/plans/dental-care-plan/rules-dental-care-plan-public-service-canada). If Canada Life determines that a dependant is no longer eligible, their PSDCP coverage will be terminated, and you may be responsible to repay 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 PSDCP is verified. You may be responsible to repay any claims that were reimbursed for ineligible dependants.

Why you were selected

This program is based on a random selection of PSDCP 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 PSDCP.

If you have any questions about the DEVP, 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 [PSDCP Rules \(canada.ca/en/treasury-board-secretariat/topics/benefit-plans/plans/dental-care-plan/rules-dental-care-plan-public-service-canada\)](https://canada.ca/en/treasury-board-secretariat/topics/benefit-plans/plans/dental-care-plan/rules-dental-care-plan-public-service-canada). If Canada Life determines that a dependant is no longer eligible, their PSDCP coverage will be terminated, and you may be responsible to repay 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 PSDCP as a student is verified. You may be responsible to repay any claims that were reimbursed for ineligible dependants not enrolled in full-time studies.

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 dependant 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 PSDCP.

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

Contact Information

Canada Life

PSDCP 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 PSDCP Member Services account through [My Canada Life at Work™](https://canadalife.com/psdcp) (canadalife.com/psdcp) and go to the **Contact us** page.

Secure email

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

My Canada Life at Work mobile app

Sign in to your PSDCP 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 pay deductions while on Leave Without Pay (LWOP), contact your [departmental compensation office or Pay Centre](#). The Pay Centre can assist with redirecting your inquiry to the appropriate compensation unit.

Telephone numbers for the Public Service Pay Centre

- In Canada or the United States: 1-855-686-4729
- Outside of Canada and the United States: 1-506-424-4330
- Hours of operation: Monday to Friday, 7 am to 7 pm, ET

Definitions

For a complete listing of PSDCP terminology definitions, please visit the [PSDCP Rules](https://canada.ca/en/treasury-board-secretariat/topics/benefit-plans/plans/dental-care-plan/rules-dental-care-plan-public-service-canada) (canada.ca/en/treasury-board-secretariat/topics/benefit-plans/plans/dental-care-plan/rules-dental-care-plan-public-service-canada).

