

Dental

1st choice

A benefits program for managers and non-union employees

Alberta
PERSONNEL
ADMINISTRATION OFFICE

1st choice Dental Plan

The Dental Plan offers you a choice of Core or Enhanced coverage. The premiums for Core coverage are paid by the Employer. If you want Enhanced coverage, you will pay a premium. For premium information, refer to your *1st choice Premium Rate Sheet*.

Summary of Benefits

Dental Service	Core Coverage	Enhanced Coverage
Basic Services	80%	80%
Major Services	50%	80%, Dental Implant \$3,000
Orthodontics	50%	60%
Maximums	\$1,750 per person in a benefit year on Basic & Major services combined. \$2,000 per person in a lifetime on Orthodontics.	No maximums.

The Plan will pay for dental service charges up to and including the fees in the fee schedule in effect at the time the service is provided. Charges exceeding the fee schedule will not be paid by the Plan.

Opt Out — No Coverage:
If you choose, you may opt out of coverage from this plan.

Benefit Year:
July 1 to June 30.

Claims Administrator:
All claims are administered by Alberta Blue Cross.

Core Coverage

Basic Services — 80% Reimbursement

- oral exams, bite-wing x-rays, polishing and scaling; limited to once per year
- fluoride application (children only)
- full mouth series of x-rays every 24 months
- panoramic x-rays once every 5 years
- space maintainers
- oral hygiene instruction; adults limited to once per lifetime; children twice per year
- fillings
- extractions
- oral surgery
- drugs and injections
- endodontic treatment (root canals)
- periodontic treatment
- consultations
- rebases and relines of existing dentures
- necessary treatment for relief of dental pain

Major Services — 50% Reimbursement

- inlays and crowns (once every 5 years per tooth)
- initial prosthodontic appliance (e.g. dentures)
- replacement of prosthodontic appliances (under some circumstances; once every 5 years per appliance)
- procedures using gold (in the absence of a reasonable substitution)
- denture adjustments
- dental implant (one per benefit year within the maximum of \$1,750 on Basic and Major Services combined)

Orthodontics — 50% Reimbursement

- oral exam
- surgery
- observations and adjustment to orthodontic appliances
- diagnostic procedures

Maximums

- \$1,750 per person in a benefit year on Basic and Major Services combined
- \$2,000 per person in a lifetime on Orthodontic Services

Limitations

There is no coverage for:

- services provided free
- services paid for by an extended medical care plan
- procedures not recognized by the Alberta Dental Association
- prosthetics ordered while the claimant was covered but which were installed after termination of coverage
- crowns and veneers on a tooth not functionally impaired
- treatment covered by Workers' Compensation
- cosmetic services
- lost or stolen dentures
- completion of claim forms
- missed appointments
- services or supplies for full mouth reconstructions, vertical dimension corrections or as a treatment for temporal mandibular joint dysfunction (TMJ)

Enhanced Coverage

All services under Core coverage are covered under the Enhanced coverage. The Enhanced coverage is at a higher level for the following:

Basic Services

- oral exams, bite-wing x-rays, polishing and scaling; twice in a benefit year (once under Core coverage).

Major Services

- reimburses 80% (50% under Core coverage).
- dental implant (two per benefit year to a maximum of \$3,000).

Orthodontic Services

- reimburses 60% (50% under Core coverage).

Maximums

- there is no benefit year maximum for Basic or Major Services;
- there is no lifetime maximum for Orthodontic Services.

Pre-Approval of Services over \$500

If you expect that your dental service charges will be higher than \$500, you should ask your dentist to complete a claim form before treatment starts. Your dentist should submit this form to Alberta Blue Cross for pre-approval. Alberta Blue Cross will advise you as to how much of this treatment will be covered under the Dental Plan.

Claim Procedure

Alberta Blue Cross allows all Alberta dental offices to bill Alberta Blue Cross directly for services provided to you. If your dentist accepts this method, this means you will only be required to pay amounts not covered by your plan.

If your dentist does not accept this method, you should pay your dentist directly and claim reimbursement by completing a Dental Claim form. Your dentist must complete a section of this form also. Forms are available from Alberta Blue Cross, their website at www.ab.bluecross.ca and most dental offices. You then mail your form to Alberta Blue Cross. Your reimbursement cheque will be payable to you the insured employee, and sent to your home address. The financial settlement of the cost of dental services is between you and your dentist.

Claims must be submitted within 12 months of the expense being incurred.

Co-ordination of Benefits

If your spouse or benefit partner has a dental plan, you can co-ordinate your claims so that you can receive payment of up to 100% of eligible expenses from both plans combined.

After you are reimbursed from this plan, you can submit a claim to your spouse's or benefit partner's plan to be reimbursed for any remaining expenses. You and your spouse or benefit partner should submit claims under your own benefit plans first. If your spouse or benefit partner works for the Government of Alberta and is covered under this dental plan, or the Bargaining Unit employee's dental plan, your claim will be co-ordinated by Alberta Blue Cross provided all the necessary information has been submitted.

If your dependent children are covered under both your and your spouse's or benefit partner's plans, the claims should first be submitted to the plan of the parent with the birthday earliest in the calendar year, then to the other parent's plan.

Considerations in Choosing Dental Coverage

- Think about your present and anticipated need of dental services — both for yourself and your family.
- Do you have coverage through your spouse's or benefit partner's employer?
- Are you better off paying a premium for four or more years of Enhanced coverage or choosing Core and paying out-of-pocket for additional expenses?
- Do you anticipate orthodontic expenses exceeding \$4,000 per course of treatment?

Changing Your Benefit Coverage

Dental Plan	Anytime	Choice Time	Life Event Gain a Spouse or Benefit Partner or First Child	Life Event Lose a Spouse or Benefit Partner or Dependent Child's Loss of Coverage	Lose Coverage Under Spouse's or Benefit Partner's Plan or Change in Child's Eligibility
Coverage Level	No change allowed.	- increase one or two levels - decrease one level if one Choice Time has passed.	- increase one or two levels	- increase one or two levels	- increase one or two levels
Choose Single or Family	Yes	Yes	Yes	Yes	Yes
When to Change		Between specified dates	Within 31 days of event occurring	Within 31 days of event occurring	Within 31 days

For Further Information

Contact Alberta Blue Cross if you have questions on a claim, or the benefits and services covered under this plan (have your plan identification card handy when you call). Your Group Number is 5.

Calgary (403) 234-9666
 Edmonton (780) 498-8000
 Fort McMurray (780) 790-3390
 Grande Prairie (780) 532-3505
 Lethbridge (403) 328-1785
 Medicine Hat (403) 529-5553
 Red Deer (403) 343-7009

A toll free line is available for people living outside these major areas: 1-800-661-6995.

Contact your Ministry Human Resources Office for any additional information.

This booklet provides a summary of the principal features of the Dental Plan for management and non-union employees of the Government of Alberta. The terms and conditions of the plan are governed by a Trust Agreement approved by the Government of Alberta.

