PART IV

PLAN BENEFITS AND ELIGIBLE SERVICES

1. **How is my payment determined?**

   Payments are based on the charges listed in the Fee Guide(s) of the College of Dental Surgeons of Saskatchewan in use by the Plan at the time such services and supplies are received.

2. **How much of the charge will be paid by the Plan?**

   The Plan will pay the following percentages of the applicable charges:

   (a) 95% for Basic Treatment.

   (b) 90% for Major Treatment. (If due to an accident – 95% is paid.)

   (c) 60% for Orthodontic Treatment.

   Payment will not exceed the maximum charge applicable under the applicable Saskatchewan Dental Fee Guide.

3. **What are eligible Basic Services?**

   Basic Dental Services includes fillings, stainless steel crowns, uncomplicated extractions, and drugs prescribed by the dentist. Also included are recall examinations, cleaning (i.e. polishing), fluoride treatment and bite-wing x-rays once every nine (9) months.

4. **What are eligible Major Services?**

   Major Dental Services includes crowns, root canals, dentures, periodontal treatment of gums, and other necessary oral surgery. It should be noted that periodontal scaling/root planning is limited to a maximum of 8 units per individual per calendar year. Reimbursement of claims for Major and Orthodontic treatment may be subject to the approval of the Dental Consultant.

5. **What are the eligible Orthodontic Services?**

   Orthodontic Services include treatment or surgery for the correction of malposed teeth.

   Reimbursement of claims for Major and Orthodontic treatment may be subject to the approval of the Dental Consultant.

PART V

LIMITS AND CO-ORDINATION OF BENEFITS

1. **Is there any limit in the amount of benefits which will be paid?**

   YES - $2,500 per person in each calendar year plus a lifetime maximum of $3,500 for Orthodontic Services.

2. **What happens if my spouse is a member of another Plan?**

   The charges are shared. The procedure is as follows:

   (a) If you are receiving dental care this Plan will pay benefits as the first payor.

   (b) If your spouse is receiving dental care, this Plan will be second payor. Your spouse's claim should be sent to the other plan first. When your spouse receives payment from them, submit the claim to this Plan. Enclose documentation of the amount the other Plan has paid.

   (c) If your children are receiving dental care, the first payor is the Plan whose member has the earliest birth month in the year.

3. **What happens if both my spouse and I are members of this Plan?**

   If the person receiving dental care is eligible from two (2) sources within the Plan, the Plan will pay up to 100% of the eligible charges, however, no greater than the maximum charge applicable under the current Saskatchewan Dental Fee Guide.

   The maximum benefit indicated in Question 1 above will be doubled.

   You must indicate that both you and your spouse are members of the Plan, each time you submit a claim.

4. **What happens if I elect a more expensive procedure?**

   The Plan will pay on the basis of the least expensive procedure that is consistent with good dental care. You are responsible for the balance of the charge.

PART VI

HOW TO MAKE A CLAIM

There are two options available to submit a Dental claim listed below. A separate claim must be submitted for each eligible person who has received dental treatment.

1. **Electronic Data Interchange (EDI)**

   With EDI, ***an insured Participant's dental claim can be sent directly from the Participant's dental office*** to the Plan Administrator for claims adjudication. *The Plan Administrator's EDI* service uses the secure data networks of CDAnet, the dedicated claims processing network sponsored by the Canadian Dental Association.

   To take advantage of Coughlin's ***EDI*** service, just tell the dentist/denturist /orthodontist that Coughlin & Associates Ltd. is your claims administrator and present him/her with the following security codes:

   - the Coughlin & Associates Ltd. CDAnet carrier identification number (also known as the BIN number), which is **610105 on the Emergis network**; and
   - your unique employee identification number, which is your Social Insurance Number for this purpose;
   - the policy number of your Group Benefit Plan, which is **150919.**

   Not all dental offices are members of CDAnet. So, be sure to first ask your dentist/denturist/orthodontist or his/her office administrator about CDAnet access.

2. **In case an Insured Participant's Dentist is not set up for EDI:**

   - Obtain a claim form from your Employer, the Union Steward at your place of employment, the Union Office, or the Plan Administrator or alternatively from the Plan Administrator's website at www.coughlin.ca
   - Have the dentist/denturist/orthodontist complete Part 1 of the form. You must sign at the appropriate place in Part 1 if you want the dentist/denturist /orthodontist to be paid directly by the Dental Plan; otherwise, the payment will be made to you. You will be notified of any payments made to the dentist/denturist/orthodontist.
   - Complete and sign Part 2 of the form.
   - Mail the completed form promptly to the Plan Administrator, but no later than fifteen (15) months after the dental treatment to the address below:

SASKATCHEWAN UNITED FOOD AND COMMERCIAL WORKERS DENTAL BENEFIT PLAN
P.O. Box 764
Winnipeg, Manitoba
R3C 2L4

Please note that the portion of your Dental claim not covered by the Plan is payable immediately to your dentist/denturist/ orthodontist.

Pre-determination for extensive dental work

You should find out how much will be paid by the Plan (and hence, how much will be left for you to pay) before you have extensive work done.

To find out in advance how much of your expected dental charge the Plan will pay, follow the procedures outlined below:

(a) Have your dentist/denturist/orthodontist complete their portion of the claim form.

(b) If treatment involves major dental work, ask your dentist/denturist/orthodontist to include pre-treatment x-rays with the form.

(c) Mail the claim form to the Administrator.

(d) A letter will be sent to the dentist/denturist/orthodontist with a copy to you. It will show how much the Plan will pay and how much you will have to pay. When the work is completed, the dentist/denturist/orthodontist will need to submit a claim form with the dates of service completed, to the Administrator.

DENTAL BENEFIT PLAN

- DIVISION 01 -

SASKATCHEWAN

JANUARY 2017

This brochure contains only the highlights of the Dental Plan. All rights and benefits are determined in accordance with the Plan Text. If there are any discrepancies between this brochure and the Plan Text, the Plan Text will prevail.

THE BOARD OF TRUSTEES

Employer-Appointed Trustees	Union-Appointed Trustees
J. Weicht	N. Neault
D. Loewen	P. Meinema

CONSULTANTS AND ADMINISTRATORS

Coughlin & Associates Ltd.

If you have any questions please write or call the:

Plan Administrator,
Saskatchewan United Food and Commercial Workers Dental Benefit Plan
Suite 100 – 175 Hargrave Street
Winnipeg, Manitoba
R3C 3R8

Telephone Toll Free: 1-800-665-0122
E-mail: winnwebmaster@coughlin.ca

Mailing Instructions:

When writing, please include the following information:

(a) Your full name printed clearly.

(b) Your home address.

(c) Your telephone number.

Note: Benefit revisions are applicable to new treatment January 1, 2017, and beyond. Continuous treatment commencing prior to January 1, 2017, is subject to prior maximums.

PART I

COMMENCEMENT OF ELIGIBILITY FOR BENEFITS

1. **How do I join the Plan?**

   An Application card will be given to you by your employer. IT IS IMPORTANT TO COMPLETE THIS CARD AND RETURN IT TO THE ADMINISTRATOR IMMEDIATELY. BENEFITS WILL NOT BE PAID UNTIL THIS IS DONE. Changes can be made to the information on your Application card by completing a new card.

2. **When do I become eligible for benefits? When do my dependents become eligible for benefits?**

   You and your dependents become eligible for benefits on the first day of the month following a two (2) month waiting period after you have attained a required average number of hours of work per week in a processing period. (A processing period normally consists of twelve (12) weeks.) ELIGIBILITY FOR BENEFITS WILL NOT COMMENCE UNTIL YOU HAVE BEEN EMPLOYED FOR AT LEAST 5 MONTHS.

3. **What are the average hour requirements?**

   In a processing period, you require an average of ten (10) hours of work per week to be eligible for benefits and seventeen (17) hours of work per week for your dependents to be eligible for benefits.

4. **Will I be notified in writing when I become eligible for benefits? Will I be notified in writing when my dependents become eligible for benefits?**

   Yes. If you have mailed in an application card, you will be notified by the Administrator prior to the commencement of coverage.

   It is your responsibility to notify the Administrator of any change of address.

   If your hours vary, your eligibility may change. Before beginning any dental work, please call the Administrator at 1-800-665-0122 to verify your eligibility for benefits.

PART II

MAINTAINING ELIGIBILITY FOR BENEFITS

1. **What happens if I become disabled?**

   Your eligibility for benefits will remain in effect for up to four (4) months at no cost to you. You may make a self-payment to maintain your eligibility for benefits for an additional two (2) months.

2. **What happens if I am on an approved leave-of-absence, or on maternity or parental leave?**

   You may make self-payments to maintain your eligibility for benefits for up to twelve (12) months.

3. **How much is a self-payment?**

   A self-payment is $30.00 for each month you wish to maintain your eligibility for benefits.

4. **How do I make a self-payment?**

   The first payment must be mailed to the Administrator within two (2) weeks of the date your leave of absence, or maternity or parental leave began, and a payment must be remitted each month thereafter. DOCUMENTATION FROM YOUR EMPLOYER OF YOUR ABSENCE MUST BE PROVIDED WITH THE FIRST PAYMENT.

   Your cheque or money order must be made payable to the "**Saskatchewan United Food and Commercial Workers Dental Benefit Plan".**

5. **If I choose not to make self-payments, when will I become re-eligible for benefits? When will my dependents become re-eligible for benefits?**

   If you return to work after a leave of absence your eligibility for benefits will re-commence on the first day of the month following a two (2) month waiting period after you have attained a required average number of hours of work per week in a processing period.

   If you return to work immediately after a maternity or parental leave, you will, upon your return, have the same eligibility for benefits you had before leaving.

PART III

TERMINATION OF ELIGIBILITY FOR BENEFITS

1. **When does my eligibility for benefits terminate?**

   Your eligibility terminates when one of the following events occur:

   (a) the day on which your employment terminates, or you cease to be covered by a collective agreement,

   (b) the last day of the fifth (5th) month following the last three (3) month period during which an average of at least 10 hours per week was reported,

   (c) the date of termination of this dental plan, or

   (d) the last day of the month in which you are laid off, commence an approved leave of absence, maternity leave or parental leave, or are disabled for more than 4 consecutive months and choose not to make self-payments.

2. **When does my dependents' eligibility for benefits terminate?**

   Your dependents' eligibility terminates when one of the following events occur:

   (a) the day on which your eligibility terminates,

   (b) the last day of the month in which that person ceases to qualify as a dependent,

   (c) the last day of the fifth (5th) month following the last three (3) month period during which an average of at least seventeen (17) hours per week was reported.

3. **Will I be notified in writing when my eligibility for benefits terminates? Will I be notified in writing when my dependents eligibility for benefits terminates:**

   Yes. If you have mailed in your application card, you will be notified by the Administrator.