



Dalhousie University

Early Retirees

Dental Insurance

Plan Number: 2146-800

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ABOUT THIS BOOKLET

Medavie Blue Cross administers the following dental benefits on behalf of Dalhousie University:

- Dental Benefit

The information contained in this booklet summarizes the important features of your group program; is prepared as information only; and does not, in itself, constitute an agreement. The exact terms and conditions of your group benefit program are described in the group policy held by your employer.

The information contained in this booklet is important, and we suggest it be kept in a safe place.

This booklet replaces any previously issued booklet.

If you are interested in viewing your personal benefit coverages please go to Dalhousie's "Web for Employees."(<https://dalonline.dal.ca>)

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DENTAL BENEFIT

Your dental program covers you and your dependents for a wide range of dental services including the following benefits. Dental benefits are based on the usual and customary charges up to the Nova Scotia Dental Fee Guide for General Practitioners as stated in the contract.

PLAN COVERAGE

All eligible regular staff who are employed in a department or division that elected to join the dental insurance plan available through the University may elect on an optional basis to join the program.

The Dalhousie Dental Insurance Plan provides coverage for both basic and major restorative dental treatments. Medavie Blue Cross administers the plan and will determine the amount of benefit to which a participant is entitled, and issue any payment associated with all claims.

ELIGIBILITY

The employee and his/her spouse and each dependent child under age 21 or under age 25 if a full-time student, or a dependent child regardless of age if mentally or physically disabled may be insured for the basic and major restorative benefits. A dependent child includes a natural, adopted child or step child who is unmarried, unemployed and dependent upon the employee for financial support and care.

TREATMENT PLAN

Before your dentist starts a course of treatment, he/she will upon request, prepare a “treatment plan” – a written report describing the recommendations as to necessary treatment and cost.

You are requested to submit a “treatment plan” to Medavie Blue Cross before treatment commences for any basic or major treatment expected to cost more than \$500. This enables Medavie Blue Cross to determine in advance its share of the cost of the proposed treatment, and thus allows you to know the extent of any part of the cost you will have to pay.

BASIC BENEFITS

Co-insurance: 100%

- Oral examination. (limited to once in any calendar year);
- Scaling (1st unit reimbursed at 100%, all remaining units at 90%, in a calendar year);
- Bite-wing x-rays (limited to two per calendar year);
- Topical application of fluoride solutions. (limited to once in any calendar year);
- Full-mouth series of x-rays, provided that a period of at least 12 consecutive months has elapsed since the last such series of X-rays was performed;
- Extractions and alveolectomy at the time of tooth extraction;
- Amalgam, silicate, acrylic and composite restorations;

DENTAL BENEFIT

BASIC BENEFITS - CONT'D

- Pit and fissure sealants;
- Dental surgery;
- Diagnostic x-ray and laboratory procedures required in relation to dental surgery;
- General anaesthesia required in relation to dental surgery;
- Necessary treatment for relief of dental pain;
- The cost of medication and its administration when provided by injection in the dentist's office;
- Space maintainers for missing primary teeth and habit-breaking appliances;
- Consultations required by the attending dentist;
- Relines, rebases, adjustments and repairs to existing dentures;
- Stainless steel crowns.

ENDODONTIC AND PERIODONTIC SERVICES

Co-insurance: 90% Plan 10% Employee

- Endodontic treatment;
- Periodontic treatment.

DENTAL BENEFIT

MAJOR RESTORATIVE BENEFITS

Co-insurance: 70%
Maximum: \$1,000 in a calendar year. The maximum payment for implants is \$1,000 per participant in a two calendar year period.

1. Provision of crowns (other than stainless steel)
2. Provision of an initial prosthodontic appliance (i.e. fixed bridge restoration, removable partial or complete dentures).
3. Replacement of an existing prosthodontic appliance if;
 - (a) the replacement appliance is required because at least one additional natural tooth was necessarily extracted before or after the date the insured first became covered under this benefit provision, in respect of the person requiring the replacement appliance, and the existing appliance could not have been made serviceable.

If the existing appliance could have been made serviceable, only the expense for that portion of replacement appliance which replaces the extracted teeth shall be covered.
 - (b) the replacement appliance replaces an existing appliance which is at least five years old and cannot be made serviceable.
 - (c) the replacement appliance replaces an existing appliance which was temporarily installed after the date the insured first became covered under this benefit provision in respect of the person requiring the replacement appliance; in this event such replacement appliance shall be considered a permanent (as opposed to temporary) installation.
 - (d) the replacement appliance is required as the result of the installation of an initial opposing denture after the date the insured became covered under this benefit provision in respect of the person requiring the replacement appliance.
 - (e) the replacement appliance is required as the result of accidental dental injury which occurs after the date the insured first became covered under this benefit provision in respect of the person requiring the replacement appliance.
4. Repairs to existing bridgework.
5. Adjustments to initial or replacement bridgework after the three-month post-insertion care period.
6. Procedures involving the use of gold if such treatment could not have been rendered at lower cost by means of a reasonable substitute consistent with generally accepted dental practice.

If such treatment could have been rendered at lower cost by means of a reasonable substitute, only the expense that would have been incurred for treatment by means of the reasonable substitution shall be covered.

DENTAL BENEFIT

ORTHODONTIC SERVICES (Applicable to Plan Code "S" only as noted on your MBC card)

Co-insurance: 50%
Maximum: \$3,000 per person per lifetime

- removable and fixed appliances (braces)
- observations and adjustments

BENEFITS FOR LATE APPLICANTS

If you do not enroll in the dental program within 60 days of first becoming eligible or acquiring you first dependent, for dependent coverage, and you subsequently make application for coverage for you and/your dependents, benefits for late entrants will be restricted to basic treatment only to a maximum of \$150 per late entrant in the first 12 months after the effective date of coverage. Full routine and major benefits will be provided after this period.

For plans that include orthodontic coverage, orthodontic treatment will not be considered for benefit payment until 24 months after the effective date of coverage.

WHEN AND HOW TO MAKE A CLAIM

Dental benefits are reimbursed to the employee. The employee must pay the provider of service, obtain an official paid in full receipt and submit to Medavie Blue Cross for processing. Dental services will require a completed claim form to accompany the receipt. To make a claim, complete the claim form that is available. Some dental providers may offer electronic billing. Please check with your provider to see if this service is available.

Claims must be submitted within no later than 24 months of receiving services or supplies or the end of your Dental benefit.

DENTAL EXCLUSIONS AND LIMITATIONS

Medavie Blue Cross does not cover the following expenses:

1. Services performed by an unqualified practitioner.
2. Benefits the covered person receives or is entitled to receive from Workers' Compensation.
3. Treatment furnished without charge or paid for directly or indirectly by any government or for which a government prohibits payment of benefits.
4. Replacement dentures required less than 5 years after initial or replacement dentures were provided by the plan.
5. Cosmetic treatment, experimental treatment, dietary planning, plaque control, oral hygiene instructions, congenital or development malformation.
6. Treatment received from a dental or medical department maintained by a mutual benefit association, labour union, trustee or similar type of group.
7. Expense of dentures which have been lost, mislaid or stolen.
8. Expense of dental treatment required as a result of any self-inflicted injury, war or if engaging in a riot or insurrections.
9. Charges made by a dentist for broken appointments or which are in excess of the charges that would have been made if a reasonable substitute could have been used.
10. Orthodontic treatment; unless provided for this plan.
11. Services for supplies rendered for full mouth reconstruction, for vertical dimension corrections.
12. Veneers for cosmetic purposes.
13. Accidental dental services do not form part of the Dental Benefits being offered.
14. Services rendered by a dental hygienist but not administered under the supervision of a dentist.

DENTAL INFORMATION

TERMINATION OF BENEFITS

Early Retirement: Coverage for you and your dependents will cease on the earliest of:

- the contract termination date,
- the date you cease to be eligible upon death or attainment of age 65.

CO-ORDINATION OF BENEFITS

In the event that benefits may be claimed under more than one section of the dental plan, the claim will be assessed in a manner that provides the greatest benefit to the employee.

If you are eligible for similar benefits under another group benefit plan the amount payable through this plan shall be co-ordinated with all benefit plans and will not exceed 100% of the eligible expense. Where both spouses of a family have coverage through their own employer benefit plans, the first payer of each spouse's claim is their own employer's plan. Any amount not paid by the first payer can then be submitted for consideration to the other spouse's benefit plan (the second-payer).

Claims for dependent children should be submitted first to the benefit plan of the spouse who has the earlier birth month in the calendar year, and then to the other spouse's benefit plan. When submitting a claim to a second payer, be sure to include payment details provided by the first payer.

Benefit payments will be co-ordinated with any other plan or arrangement, in accordance with the Canadian Life and Health Insurance Association (CLHIA) guidelines.

SURVIVOR BENEFITS

In the event of a retired employee's death, dental benefits for the surviving spouse and dependents may continue until the end of the month in which the member would have turned age 65.

DENTAL INFORMATION

EARLY RETIREES

Early retirees, who have taken a pension can continue dental coverage provided they are within 10 years of normal retirement, have 10 years of service and have subscribed to the Dental plan for 5 years.

In all cases above the subscriber is responsible for payment of the full premium.

CONVERSION PRIVILEGE

If you should terminate employment, you may convert to an individual dental plan currently issued by Medavie Blue Cross provided that application is made within 31 days following your date of termination. This conversion privilege is also available to the surviving spouse and/or dependents after the termination of the Survivor Benefit.

ELIGIBLE EMPLOYEES

To be eligible for group benefits, you must be a permanent employee who is a resident of Canada, covered under your provincial government plan, actively at work as least 50% of the normal work week on a regular basis for 8 months or more.

Early retirees may continue coverage, within 31 days of retirement if the employee is within 10 years of normal retirement, has 10 years of service and has subscribed to the plan for 5 years.

ELIGIBLE DEPENDENTS

Dependent means the Subscriber's spouse and unmarried dependent children as defined below.

Spouse shall mean a person who is either married through an ecclesiastical or civil ceremony to an employee, or although not legally married to an employee, co-habits with the employee for at least 12 months in a conjugal relationship. The term "conjugal relationship" shall be deemed to include a conjugal relationship between partners of the same sex. In the event of divorce, legal separation, or discontinuance of cohabitations ("common law" spouse), the Subscriber may elect to continue membership of the former Spouse or to provide notice to Medavie Blue Cross to terminate the Spouse. Medavie Blue Cross will at no time provide coverage for more than one Spouse under the same policy.

Children shall mean any natural, stepchild, adopted child or foster child of the employee and/or the employee's spouse, including a natural child of the unmarried minor female dependent of an employee, or a child to which the employee is in "loco parentis". Such children shall mean:

- a) an unmarried child under age 21, or under age 25 if a full-time student in attendance at university or similar institution of learning, who is dependent on the employee for support or maintenance.
- b) a child of any age who is incapable of self sustaining employment due to mental or retardation or physical handicap, who is dependent on the employee for support.

CARDHOLDER SITE

INSTRUCTION FOR MEMBERS

Medavie Blue Cross is continually developing its Web technology to respond to the needs of our customers. Our latest innovation, the Cardholder Site, will help you better understand, manage and co-ordinate your benefit plan.

The Cardholder Site is simple to use and is delivered in a secure environment. You can access general information about your plan, view your claims and payment history, or print generic claim forms, with a click of your mouse. The Cardholder Site is available 24 hours a day, seven days a week from home or work, all you need is an Internet connection.

FIRST-TIME ACCESS TO THE CARDHOLDER SITE

1. Log on to the Medavie Blue Cross Web site at www.medavie.bluecross.ca
2. Select “English” or “French”
3. Select “For Cardholders” from the left menu bar
4. Select “First Time, Register Now”
5. Complete the online registration form
6. Medavie Blue Cross immediately e-mails you a temporary password
7. Access your e-mail account to receive your temporary password
8. Repeat steps 1 and 2
9. Enter your selected user ID and your temporary password
10. You are prompted to change your password
11. You are in the Cardholder Site

** Please ensure you make note of your user ID and password for future reference. **

PLEASE NOTE:

For security reasons, the Cardholder Site is for use of the cardholder only. Dependents and other family members will not have access to the site.

For further information on the Cardholder Site, or for any questions about your Medavie Blue Cross benefit plan, please contact our Customer Information Center toll free at 1-800-667-4511 (Atlantic Region) or 1-800-355-9133 (Ontario Region) or e-mail inquiry@medavie.bluecross.ca.

MEDAVIE BLUE CROSS PRIVACY PROTECTION PRACTICES

In the course of providing customers with quality health, life and travel coverage, Medavie Blue Cross acquires and stores certain personal information about its clients and their dependents. The purpose of this document is to keep you informed about privacy protection practices at Medavie Blue Cross.

Protecting personal information is not new to Medavie Blue Cross. Ensuring the confidentiality of client information has always been fundamental to the way we do business and our staff takes the privacy policies and procedures we have in place to ensure that confidentiality very seriously.

What is personal information?

Personal information includes details about an identifiable individual and may include name, age, identification numbers, income, employment data, marital and dependent status, medical records, and financial information.

How is your personal information used?

Your personal information is necessary to allow Medavie Blue Cross to process your application for coverage under its health, life and travel plans. Your personal information is used:

- to provide the services outlined in your contract or the group contract of which you are an eligible member,
- * to understand your needs so that we can recommend suitable products and services,
- to manage our business.

**not applicable in Ontario and Quebec*

To whom could this personal information be disclosed?

Depending on the type of coverage you carry with us, release of selected personal information to the following may be necessary in order to provide the services outlined in your contract:

- other Canadian Blue Cross organizations in order to administer your benefit plan if you reside outside the Atlantic Provinces, Quebec or Ontario
- specialized health care professionals when necessary to assess benefit or product eligibility
- government and regulatory authorities in an emergency situation or where required by law
- Blue Cross Life Insurance Company of Canada and other third parties, on a confidential basis, when required to administer the benefits outlined in your contract or your group's contract, and
- To the cardholder of any dependant/partner who is a participant under the cardholder's plan

MEDAVIE BLUE CROSS PRIVACY PROTECTION PRACTICES

To whom could this personal information be disclosed? (Cont'd)

We do not provide or sell personal information about you to any outside company for use in marketing and solicitation. Personal information about you or your dependents is not released to a third party without permission unless necessary to fulfill the services Medavie Blue Cross is contracted to provide to you.

To ensure Medavie Blue Cross is able to provide you with the best possible service, it is important that the personal information we use is accurate and up to date. You can help by keeping us informed of changes of address, marital status and the addition or deletion of dependents. Should you become aware of errors in our information about you, please contact Dalhousie University Employee Benefits (494-1122).

By becoming a Medavie Blue Cross customer or filing a claim for benefits, you are agreeing to allow your personal information to be used and disclosed in the manner outlined above. If you prefer that we not use or disclose your personal information in those situations where it is not necessary to administer your benefit plan, please visit our Web site or write to us at the address provided.

Please note that not allowing Medavie Blue Cross to use information about you may mean we may not be able to provide you with certain products or services that may be of use to you.

For more information on Medavie Blue Cross's privacy policy, contact us using one of the following:

www.medavie.bluecross.ca

1-800-667-4511 or 1-800-355-9133 (in Ontario)

Chief Privacy Officer
Medavie Blue Cross
Risk Management Group
644 Main Street
PO Box 220
Moncton, NB E1C 8L3

or

privacyofficer@medavie.bluecross.ca

If the issue is not resolved to your satisfaction, you may file a complaint in writing to:

Office of the Privacy
Commissioner of Canada
112 Kent Street
Ottawa, Ontario K1A 1H3

Medavie Blue Cross has branch offices at the following locations to answer any inquiries you may have relating to your benefit plan.

NEW BRUNSWICK

Bathurst

*St. Anne Street Plaza
Unit 4 - 930 St. Anne Street
Bathurst, NB E2A 6X2*

Fredericton

*Unit 2 - 1055 Prospect Street
Fredericton, NB E3B 5B9*

Moncton

*644 Main Street
P. O. Box 220
Moncton, NB E1C 8L3*

Saint John

*47A Consumers Drive
Saint John, NB E2J 4Z7*

NOVA SCOTIA

Dartmouth

*7 Spectacle Lake Drive
P. O. Box 2200
Dartmouth, NS B3J 3C6*

Halifax

*Halifax Barrington Tower, Scotia Square
1894 Barrington Street
Halifax, NS B3J 2A8*

PRINCE EDWARD ISLAND

Charlottetown

*Suite 120 - 90 University Avenue
Charlottetown, PE C1A 4K9*

NEWFOUNDLAND

St. John's

*66 Kenmount Road
Suite 102 - Board of Trade Building
St. John's, NL A1B 3V7*

ONTARIO

Toronto

*Suite 1200 - 185 The West Mall
P. O. Box 2000
Etobicoke, ON M9C 5P1*

QUEBEC

Montreal

*550 Sherbrooke St. West
Montreal, QC H3A 1B9*

Toll-free Customer Information Line: 1-800-667-4511

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