Canadian Dental Care Plan Régime canadien de soins dentaires

Coordination of benefits between the CDCP and Manitoba's dental program

April 2024 Version 1.0

This fact sheet is intended to provide information on the approach to coordination of benefits between the Canadian Dental Care Plan (CDCP) and Manitoba's dental program, as noted below.

Note: Individuals with private insurance are not eligible for the CDCP, and therefore there would be no coordination of benefits with the CDCP. Should clients have dental benefits through a private plan, then providers must not submit claims to the CDCP.

Program Name	Contact Information
Employment and Income Assistance (EIA) – Dental services	Dental intake line: 204-945-8767

Administrator	Contact Information
Department of Families	Dental intake line: 204-945-8767

What is the payer order between CDCP and Manitoba's dental program? The CDCP will be the **primary payer** relative to Manitoba's dental program.

How do providers submit CDCP claims to Sun Life?

Submitting claims under the CDCP will be done in the same way you are doing now with other insurance plans, so the process will be very familiar and easy.

Claims and CDCP client eligibility verification can be submitted through CDAnet, CDHAnet, and DACnet using oral health providers' existing Practice Management Software (PMS).



For more information on the claims submission process for CDCP, please consult the Sun Life claims submission information document.

Please note that **before November 2024**, **the CDCP will only accept electronic claims submission through Electronic Data Interchange (EDI)**. If a provider does not have EDI capability, they will be unable to seek reimbursement from Sun Life until November 2024 and will not be able to coordinate benefits with a secondary payer. Please contact Manitoba's dental program directly to discuss options.

How will the CDCP and Manitoba coordinate benefits?

COB claim submission process - through EDI:

Where patients are eligible for CDCP and dental benefits under Manitoba's program, providers will need to:

- Indicate in the patient's profile of their PMS that CDCP is the primary payer and Manitoba's program is the secondary payer.
- Submit the claim through EDI:
 - The claim will automatically go to Sun Life first. Sun Life will generate an Explanation of Benefits (EOB) that will show the eligible amount covered under the CDCP (*Total Payable to Provider*).
 - Make sure to indicate Pay to Provider, Assignment of Benefits, or equivalent (depending on the software) in your PMS - otherwise, your claim submission will be rejected by Sun Life. You will have to choose to assign benefits in your PMS and resubmit your claim.
 - Providers will then need to send the EOB and an accompanying secondary payer claim form to the Manitoba Department of Families, who will process the claim for any remaining charges according to their program policies.
- In cases where Manitoba's program fees are greater than CDCP fee rates, providers
 will be able to seek additional reimbursement from Manitoba's program up to the
 Manitoba program fee guide rates, through coordination of benefits.
- Some services covered by the CDCP and by Manitoba's program are subject to frequency limits. These frequency limits are not cumulative – neither the CDCP nor Manitoba's program will provide coverage for services beyond their respective frequency limits.
- Note for restorative treatments: Members of the Manitoba dental program can seek reimbursement from the Manitoba Department of Families for any fees not covered by the CDCP, up to a limit of \$600 in any 12 month period.
- Any balance remaining after coordination of benefits through the Manitoba dental program is not to be charged to the clients.
- Clients will only be responsible for paying any applicable co-payment or services that are not covered by the CDCP or Manitoba' dental program.



 Providers must submit the EOB to the Manitoba Department of Families within 14 months, either electronically or by paper in accordance with the existing process for Manitoba's program.

More details concerning updates to the COB process effective November 2024 will be shared in the coming months.

What if services under CDCP require preauthorization?

CDCP will start accepting requests for preauthorizations effective November 2024. There is no coverage under CDCP for services requiring preauthorization prior to November 2024 and there will be no coordination of benefits.

