

Canadian Dental Care Plan

Régime canadien de soins dentaires

CDCP Renewal – Provider Factsheet

All Canadian Dental Care Plan (CDCP) clients must renew their eligibility annually. Renewals are set to start **April 15, 2026**, for the **2026–27 benefit year (July 1, 2026 – June 30, 2027)**.

Key Dates

- **April 15, 2026:** Renewal period opens
- **June 1, 2026:** Renewal deadline to avoid gaps
- **June 30, 2026:** End of current benefit year
- **July 1, 2026 - June 30, 2027:** New benefit year

CDCP Clients Renewal Requirements

- Clients need to submit their renewal application by June 1, 2026, to avoid a gap in coverage.
- Renewal pre-requirement:
 - Filing their 2025 tax return in Canada (including their spouse/common-law partner's, if applicable)
 - Receiving their 2025 Notice of Assessment from the Canada Revenue Agency (CRA)
- Each client will receive a direct communication from the Government of Canada, explaining what they need to do to renew.
- After renewing, clients will receive a determination letter once their eligibility has been assessed

How Clients Renew:

- Through My Service Canada Account (MSCA)
- Online at Canada.ca/dental
- By phone at 1-833-537-4342 (TTY: 1-833-677-6262)

Renewal confirmation:

- Clients' continued eligibility, new coverage start date (typically July 1, 2026, unless they renewed after June 1, in which case it could be later) and updated co-payment tier for the new benefit year, if applicable, will be communicated to members during the renewal period.

What Providers Must Do

- **Verify eligibility and co-payment:**
 - Always confirm a CDCP client's coverage and co-payment level before providing services, and do so at each appointment.
 - A client's eligibility and/or coverage level under the CDCP **may change over the course of a benefit period** as a result of the renewal process, regular member

eligibility reviews, changes to tax information on file and/or members voluntarily withdrawing from the CDCP.

- **How to Confirm Coverage:**
 - Submit an EDI estimate
 - Call Sun Life CDCP Contact Centre: 1-888-888-8110
 - Use the CDCP coverage look-up tool in Sun Life Direct

Co-Payments and Billing

- Claims are paid based on the coverage and co-payment tier in effect on the date the service is rendered.
- If a client remains eligible, previous estimates and preauthorizations remain valid but will be reimbursed with co-payment amounts in effect on the date of service and may vary from the amounts in the original preauthorization if the co-payment amount has changed for that client.

Example:

- If a client's co-payment increases (e.g., from 40% to 60%), they will pay more than what was originally estimated.
- If it decreases (e.g., from 40% to 0%), they will pay less when the services are rendered.
- If a preauthorization was approved but the client is no longer eligible for the CDCP on the day of service, the claim will be denied.

Member ID

Clients who remain eligible will keep the same CDCP member ID and file (meaning their frequency limits do not reset)

Clients Who Do Not Renew

- For clients who do not renew or are no longer eligible:
 - **Their coverage will end as of June 30, 2026** (unless it ends sooner due to a member eligibility review finding them ineligible).
 - They will receive notice in their renewal letter that their coverage will end on June 30, 2026.
 - No additional letter will be sent to confirm that coverage has ended.

Late Renewals

- Clients may still renew after June 1, 2026, but:
 - A **gap in coverage** may occur.
 - Services received during the gap are **not covered, nor are they reimbursed retroactively**.

Reminder for Providers

- Discuss non-covered services and costs with clients before treatment.
- Coverage confirmation remains a joint responsibility between the provider and the client to avoid any surprises in the amount due once treatment is completed.