

STANDARD DENTAL CLAIM FORM



Approved by the Canadian **Dental Association**

IMPORTANT:

- Please read the instructions on the reverse side before completing this form.

 All dental information received under this plan is confidential. As part of audits and administrative reports, your employer may have access to statistical and financial information, but your name will not appear on any dental information released to your employer.

 Fraudulent claims are very costly for employers and for all participants in benefit plans. As administrator of this plan, we may check the accuracy of the information given in

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HOW TO CLAIM DENTAL BENEFITS

As soon as you or a covered dependent incurs covered dental expenses;

- 1 Take this form to your dentist and have him/her complete the DENTIST'S STATEMENT (PART 1) on the reverse side of this form.
- 2 Complete and sign the EMPLOYEE'S STATEMENT (Part 2). Please be sure you fully answer all questions.

Mail the completed form to the claims office for the region in which you live:

Atlantic Canada and Quebec

Sun Life of Canada Health Claims Office PO Box 6076 Stn CV Montreal QC H3C 4S3

Ontario

Sun Life of Canada Health Claims Office PO Box 4023 Stn A Toronto ON M5W 2P7

Western Canada, N.W.T. and Yukon

Sun Life of Canada Health Claims Office PO Box 2880 Stn Main Edmonton AB T5J 4S6

Important: All claims should be submitted as soon as possible after the date you receive covered dental treatment. You should keep in mind, though, that there is a deadline for submitting your dental to Sun Life. To find out what the deadline is, look in your employee booklet or talk to your employer. If your dental coverage ends for any reason, we must receive your claim within 90 days of that date. If you are under a treatment program which will involve a series of treatments for an extended period you should file a claim periodically and indicate on the claim form that it is part of an on-going treatment plan.

HOW TO FILE FOR PREDETERMINATION OF BENEFITS

If the dental treatment recommended by your dentist is expected to exceed the Predetermination limit specified in your Dental Plan, details of the treatment plan and estimated costs should be submitted to Sun Life for consideration before treatment starts. To submit a treatment plan for Predetermination:

- 1 Ask your dentist to complete the DENTIST'S STATEMENT (PART 1) on the reverse side of this form itemizing the proposed treatment and the estimated costs.
- 2 You should then complete and sign the EMPLOYEE'S STATEMENT (PART 2) and submit the form to Sun Life at the above address clearly indicating that it is being submitted for Predetermination.

Sun Life will review the treatment plan and send you a statement outlining the approximate amount of benefits which will be payable if that treatment is carried out. It is in your best interest to await a reply from Sun Life before starting treatment.

The purpose of Predetermination is to let you and your dentist know what treatment is covered and the approximate amount of benefits available before beginning a course of treatment. If Predetermination of benefits is not requested and a claim is received for expenses in excess of the Predetermination limit, Sun Life reserves the right to determine benefits based on a less expensive procedure than the one actually performed. Any difference in the amount of those benefits and the total charges will be your responsibility.