



MEDIA RELEASE

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Dentists treat you, not your dental plan

Vancouver, BC – While the majority of Canadians have dental insurance plans as an extended health benefit, coverage varies and what's included in each plan may not always address an individual's health needs. Patients should be aware that delaying or declining dental care based solely on dental plan coverage could impact their health and lead to more complex *and* costly treatment in the future.

"Dental plans are a valuable extended health benefit to offset some of the costs of dental treatment," says Dr. Bruce Ward, past-president of the British Columbia Dental Association (BCDA). "Dentists are obligated to treat patients and make recommendations based on their dental health needs, not their dental plan. Patients should know the details of their plan and work with their dental office to understand their coverage to make informed choices for their dental health."

The BCDA offers the following advice to help patients avoid any surprise costs and to make informed decisions for good dental health:

Recognize that dental plans vary. Your dental plan coverage is part of your benefits plan, not based on your (or your family's) dental care needs. Coverage varies based on what services are covered in the contract; percentage of fees covered for each service; and yearly maximums. What is covered by your plan is determined by your plan purchaser, such as your union or employer.

Know your plan. Contrary to popular belief, dental offices do not know what is covered in your dental plan. A dental plan is a contract between a third party (such as your employer) and the insurance company. Ask your benefits manager or insurance provider for a plan booklet or information on your specific coverage—before your dental appointment.

Understand your responsibility to pay the co-payment (deductible). Many dental plans cover a percentage of the cost of treatment. Regardless of the actual costs, most dental plans cover between 50% to 80% of the cost of dental care. Any cost not covered by the dental plan is called the *co-payment* and it is the patient's responsibility to pay the dentist this amount. This is similar to the deductible paid on home or car insurance. Dentists and dental specialists are legally and ethically required to collect the co-payment from all patients.

Treatment should be based on your dental health needs. Your dentist or dental specialist is obligated to treat you, not your dental plan. Treatment recommendations are based on your dental health needs, which may differ widely from your plan coverage. You have the right to accept or refuse treatment but ensure you understand the implications declining or delaying any recommended treatment may have on your health. Base your decision on an informed discussion with your dentist around your dental needs. This decision can impact your general health and should not be dictated by your dental plan coverage.

Work with your dental team. Your dental team can help you understand your coverage and assist you in getting pre-authorizations for treatment—to *estimate* what will be covered before treatment starts. Also ask your dentist about payment plans/options if a recommended procedure for your health is not covered by your plan.

Prevention is still the best treatment: brush and floss *daily*; limit sugary drinks, snacks and alcohol; don't smoke; and have an examination by a dentist at least once a year to diagnose problems before they become more complex *and* costly.

For more on dental health, visit www.bcdental.org.

About the British Columbia Dental Association:

The British Columbia Dental Association is the recognized voice of dentistry in this province, dedicated to serving the interests of its members and promoting oral health. There are over 3,000 practicing dentists in BC.

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