

GROUP INSURANCE PLAN

insured by



With the collaboration of:
Samson Groupe Conseil inc.

Dawson Teachers Union
Executives - Contract 2054
Contract amended on December 1, 2015

IMPORTANT

This document contains general provisions relating to the insurance contract.

This document does not mention all the clauses concerning definitions, eligibility, participation, end of insurance and other miscellaneous provisions. Nonetheless, you may find out more about policy contents by consulting the contract available from Policyholder or Employer group administrators.



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Preventive services4

Basic restorative services.....

Limitation

A maximum of one radiograph, sitting per consecutive 6 month period will be refundable; excepting for a radiograph sitting performed during an emergency examination; furthermore, a complete series of periapical and bitewing films is only refundable once per consecutive 36 month period.

3. Prevention

- polishing of coronal portion of teeth (prophylaxis), up to one treatment per consecutive six (6) month period
- periodontal scaling up to one treatment per consecutive six (6) month period relating to each of these dental procedures
- topical application of fluoride, up to one treatment per consecutive six (6) month period
- finishing restorations
- pit and fissure sealants
- carries control
- interproximal discing
- prophylactic odontotomy and enameloplasty

B) BASIC RESTORATIVE SERVICES

1. Restorations:

- Primary teeth
 - a) Amalgam posteriors
 - b) Composite anteriors
 - c) Composite posteriors
- Permanent teeth
 - a) Amalgam anteriors and bicuspid
 - b) Amalgam molars
 - c) Composite anteriors
 - d) Composite bicuspid
 - e) Composite molars
- Retentive pins

C) MAJOR RESTORATIVE SERVICES

1. Endodontics

- Endodontic emergency
 - a) pulpotomy
 - b) emergency pulpotomy as a separate procedure
- Endodontic traumatism
- General endodontic treatments
- Apexification
- Endodontic surgery
 - a) apectomy
 - b) apectomy and root canal
 - c) retrograde obturation
 - d) root amputation
 - e) removal
 - f) hemisection
 - g) endosseous implants for root stabilization
- Bleaching, in office, of non-vital tooth, carried out by dentist, subject to an overall maximum of 10 sessions per calendar year per insured
- Bleaching, in office, of vital teeth carried out by dentist, subject to a maximum of one session per calendar year per insured for all teeth

2. Periodontics

- management of acute infections and other oral lesions
- desensitization up to an overall maximum of ten (10) visits per year per insured person for all teeth
- Periodontal Surgery

Periodontal curettage and root planning:

- a) first tooth
- b) each additional tooth same quadrant
- c) gingivoplasty, per sextant
- d) gingivectomy
- e) flap approach with osteoplasty/osteotomy, per sextant
- f) flap approach with curettage of osseous defect, per sextant
- g) osseous graft, multiple sites, in the same sextant
- h) pedicle soft tissue and free soft tissue graft, per site
- i) vestibuloplasty, per sextant
- j) gingival fiber resection (supra crestal fibrotomy), per sextant

- k) distal wedge or Mesial wedge operation
- l) exploratory surgery, flap approach, per sextant
- m) grafts, free connective tissue, per site
- n) osseous grafts, autograft
- o) guided tissue regeneration, per sextant
- p) osseous graft, allograft
- q) post surgical periodontal treatment visit for dressing change

- splinting
- removal of fixed periodontal splints
- occlusal equilibration
- periodontal appliances
- intra-oral appliance and maintenance

D) DESCRIPTION OF EXPENSES FOR COMPLEX RESTORATIONS

1. Denture adjustments

- minor adjustments provided that these adjustments be made more than 6 months after the initial insertion of the denture
- equilibration of complete or partial dentures

2. Complete or partial denture repairs

- without an impression
- with an impression
- structure additions to the partial denture

3. Rebasing and relining

- reline removable complete or partial denture
- rebase (jump)
- tissue conditioning

4. Restriction concerning point 3

These dental services are refundable provided they be performed more than 6 months after the insertion of the said denture and that at least 36 consecutive months have

- Transitional or immediate partial denture
- Removable partial denture cast. Frame/connector of chrome cobalt with rests and clasps
- Removable partial denture with precision attachments
- Semi-precision cast partial denture
- Partial denture, remake

9. Fixed prosthodontic

- Pontics
- Butterfly bridge or Californian bridge

10. Fixed prosthodontics repairs

- Removal of fixed bridge to be reinserted

- these dental services are refundable provided they be performed more than 6 months after the insertion of the said denture and that at least 36 consecutive months have lapsed since the last relining or rebasing, whichever applies.

However, these services will not be refundable if they are performed on a transitional denture.

- when fixed prostheses are used as retainers for an extensive fixed prosthesis, said prostheses are refundable under the same conditions as extensive fixed prostheses.

GENERAL INFORMATION

1. Definitions

Spouse:

The man or woman who, on the date of the event giving entitlement to benefits :

- is married to the participant; or ;
- has been living as husband and wife with a participant for less than one year if he is the father or she is the mother of a participant's child; or;
- has been living as husband and wife with a participant and had already lived as husband and wife with a participant for a full period of at least one year.

The status of spouse is forfeited through dissolution of such marriage by divorce or judicial separation or, in the case of a marriage not legally contracted, by separation for more than 90 days.

If a participant has a spouse who corresponds to the definition under i) and another spouse corresponding to the definition under ii) or iii), the Insurer shall recognize as spouse the one that the participant has designated in writing.

Dependent child:

A single child of the participant or his or her spouse, who resides with him or she and whose needs are looked after wholly or to a large degree and who is over 24 hours of age and is under age 21, or is over 21 but less than age 25 and attends on a full-time basis as a duly registered student, a recognized educational institution, or whatever his or her age, if the child has been the victim of total disability while he or she satisfied any one of the preceding conditions and has remained totally and continuously disabled since that date.

Participants who are required to hold a government permit or licence to perform the tasks of their regular employment are not considered totally disabled solely because such permit or licence has been revoked or has not been renewed.

Total disability beginning more than 31 days following an accident is deemed to be resulting from illness.

4. Waiver of Premiums

If prior of age of 65, a member becomes totally disabled while this coverage is in force, the Insurer waives the payment of any premium in such respect which falls due following the expiry of a period of 6 months of disability. Nonetheless, the waiver of premiums ends if the contract is terminated.

5. Termination of insurance

A member's insurance expires at the earliest of the following dates:

- a) the date of the end of the contract;
- b) the date on which the participant terminates his or her employment for some reason other than retirement, subject to the provisions of clause "Conversion privilege".
- c) the expiry date of any premium that is not paid subject to the participant who wants to terminate his or her insurance under the dental care coverage or the termination date written on such notice, whichever date is the furthest;
- d) the reception date by the Insurer of the written notice by the participant who wants to terminate his or her insurance under the dental care coverage or the termination date written on such notice, whichever date is the furthest;
- e) the effective date of retirement, if no contrary notice has been received by the Insurer within 31 days following the effective date of retirement.

6. Conversion privilege

Participant's Dental Care Insurance

Participants who cease to be insured under the terms of this coverage because they are no longer eligible for any reason other than retirement may, by filing a written request to the Insurer within 31 days following the date their eligibility terminates, obtain an individual dental care insurance contract of a type then issued by the Insurer in such circumstances.

7. Extension

Upon the death of a participant, the insurance of his or her dependents is extended without premium payments until the nearest of the following dates:

- 24 months following the death of the participant;
- the date on which the dependents' insurance have ended if the participant had been alive;
- the date on which the contract terminates.

- post-surgical treatment.
- Parenterally administered intravenous or intramuscular conscious sedation;
- Intramuscular or intravenous therapeutic injections or any other medication;
- fixed splints during periodontal treatments;
- the following diagnostic casts :
 - transversal axis location and transfer;
 - pantographic data;
 - diagnostic photographs;
 - any pilot occlusal equilibration;
 - diagnostic wax-up to evaluate dental interdigitation;
 - gnathological wax-up;
 - mounted casts;
 - preparing diagnostic casts to determine a treatment with extensive or complex restorations;
 - for orthodontics;
- cleaning and polishing of removable dentures;
- duplication of a removable denture;
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PROCEDURE FOR FILING CLAIM

Dental care – Automated payment service

The insured person presents his or her Service Card to the dentist. The system validates the card and states if the dental care is covered and includes the percentage of refund to which the insured is entitled. There is no need to fill out a claims form since the insured

FOR COMPLETE INFORMATION

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P.O. Box 1500

Québec (Québec) G1K 8X9

Montréal (Branch office)

425, De Maisonneuve Blvd. W., Office 700

Montréal (Québec)

The policyholder may, at any time following an agreement with the Insurer, make modifications to the contract concerning the classes of persons eligible, the scope of coverages and the sharing of costs between classes of insureds. Such modifications can also apply to all insured, whether they be active, disabled or retired.

This document is only for information purposes and in no way modifies the terms and conditions of the contract.

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