

How the CDCP compares with CoverMe health and dental plans

Feature	CDCP	CoverMe
Eligibility	<ul style="list-style-type: none"> Available only to Canadian residents with adjusted family income (after-tax) of less than \$90,000. You must meet the requirements and apply every year for coverage. 	<ul style="list-style-type: none"> You need to be a resident of Canada and have provincial/territorial healthcare coverage when you apply. Your coverage stays in place as long as you continue to pay your premiums (unless you choose to cancel). There's no need to reapply every year.
Dental coverage	<ul style="list-style-type: none"> Fees are set by the CDCP and may not be the same as what your provider charges. If your family income is more than \$70,000, you may have to cover part of the total cost (up to 60%) yourself. 	<ul style="list-style-type: none"> Coverage varies by plan. Most plans cover 80% of total cost; fees are based on current territorial and provincial fee guides.
Additional health coverage	<ul style="list-style-type: none"> None 	<ul style="list-style-type: none"> Our plans include not only dental coverage but also vision care, prescription drugs, mental healthcare, ambulance services, virtual healthcare and more.
Integration with other plans	<ul style="list-style-type: none"> None. If you have coverage under another plan (including your spouse's plan), you're not eligible for CDCP. 	<ul style="list-style-type: none"> Yes. If you have some coverage at work or under your spouse's plan, we'll help ensure the plans work together to maximize the value of your benefits.