

## HOW TO GET DENTAL CARE IN THE CALGARY ZONE

PROGRAM	WHO IS ELIGIBLE	ELIGIBILITY CRITERIA	COVERAGE
<b>Alberta Health Services, Calgary Zone Community Oral Health</b>  <b>Phone:</b> 403-943-6797 <b>Web:</b> <a href="http://www.albertahealthservices.ca/services.asp?pid=service&amp;rid=1042857">http://www.albertahealthservices.ca/services.asp?pid=service&amp;rid=1042857</a>	<input checked="" type="checkbox"/> Children <input checked="" type="checkbox"/> Adults <input checked="" type="checkbox"/> Seniors	<ul style="list-style-type: none"> <li>• Infants, children, families, adults and seniors.</li> <li>• Targeted communities and groups.</li> </ul>	<ul style="list-style-type: none"> <li>• Preventative services only</li> <li>• Varies according to client/age group.</li> <li>• Visit the website for details.</li> </ul>
<b>Alberta Health Services, Calgary Zone Public Health Dental Clinics</b> Chumir 403-955-6888 Northeast 403-944-9999  <b>Web:</b> <a href="http://www.albertahealthservices.ca/services/Page13202.aspx">http://www.albertahealthservices.ca/services/P age13202.aspx</a>	<input checked="" type="checkbox"/> Children <input checked="" type="checkbox"/> Adults <input type="checkbox"/> Seniors	<ul style="list-style-type: none"> <li>• Individuals and families with limited income that do not have a dental plan.</li> <li>• Eligibility based on income and family size.</li> <li>• Clients must apply. Download application from website.</li> </ul>	<ul style="list-style-type: none"> <li>• Reduced fee dental care.</li> <li>• Emergency dental care involving extractions, and basic services including checkups, cleanings, x-rays, and fillings</li> <li>• Clinic does not operate like a private dental office and does see dental emergencies. Appointment times are an estimate and wait times may vary</li> </ul>
<b>Alberta Health Services, Calgary Zone Alberta Children's Hospital Dental Clinic</b>  <b>Phone:</b> 403-955-7836 <b>Fax:</b> 403-955-5000 <b>Web:</b> <a href="http://www.albertahealthservices.ca/services.asp?pid=service&amp;rid=1006554">http://www.albertahealthservices.ca/services.asp?pid=service&amp;rid=1006554</a>	<input checked="" type="checkbox"/> Children <input type="checkbox"/> Adults <input type="checkbox"/> Seniors	<ul style="list-style-type: none"> <li>• Children, infants and teens with medical, physical and/or mental health conditions.</li> <li>• Referral letter required and can be faxed.</li> </ul>	<ul style="list-style-type: none"> <li>• There is a fee for dental services provided.</li> <li>• The dental clinic will complete and submit insurance/benefit forms as required.</li> <li>• Linked to Cleft Palate and Craniofacial clinic.</li> </ul>
<b>Alberta Health Services, Calgary Zone Foothills Medical Centre Dental Clinic</b>  <b>Phone:</b> 403-944-2401 <b>Fax:</b> 403-283-5260 <b>Web:</b> <a href="http://www.albertahealthservices.ca/info/service.aspx?id=1781">http://www.albertahealthservices.ca/info/service.aspx?id=1781</a>	<input type="checkbox"/> Children <input checked="" type="checkbox"/> Adults <input checked="" type="checkbox"/> Seniors	<ul style="list-style-type: none"> <li>• People with medical, physical and/or mental health conditions.</li> <li>• Referral required and can be faxed or mailed.</li> </ul>	<ul style="list-style-type: none"> <li>• There is a fee for dental services provided.</li> <li>• The dental clinic will complete and submit insurance/benefit forms as required.</li> </ul>

PROGRAM	WHO IS ELIGIBLE	ELIGIBILITY CRITERIA	COVERAGE
<p><b>Alex Dental Health Bus</b></p> <p><b>Phone:</b> 403-615-9052 <b>Web:</b> <a href="http://www.thealex.ca/clients/">http://www.thealex.ca/clients/</a></p>	<p><input checked="" type="checkbox"/> Children <input checked="" type="checkbox"/> Adults <input type="checkbox"/> Seniors</p>	<ul style="list-style-type: none"> <li>• Youth 6-24 years old</li> <li>• Clients of the Alex Youth Health Centre</li> <li>• Students at partnership schools</li> </ul>	<ul style="list-style-type: none"> <li>• Oral health screenings and referral for treatment</li> <li>• Hygiene services: scaling, polish, fluoride</li> <li>• Dental sealants</li> </ul>
<p><b>Alberta Works</b></p> <p><b>Phone:</b> 1-877-644-9992 <b>Web:</b> <a href="https://www.alberta.ca/health-insurance-benefits.aspx">https://www.alberta.ca/health-insurance-benefits.aspx</a> <b>E-mail:</b> <a href="mailto:hs.ascc@gov.ab.ca">hs.ascc@gov.ab.ca</a></p>	<p><input checked="" type="checkbox"/> Children <input checked="" type="checkbox"/> Adults <input checked="" type="checkbox"/> Seniors</p>	<ul style="list-style-type: none"> <li>• People and their dependants who are receiving income support (social assistance).</li> </ul>	<ul style="list-style-type: none"> <li>• People who cannot work are eligible for supplemental coverage (basic dental services and dentures). People who can work are eligible for standard coverage (limited to pain and oral infection relief, and dentures).</li> <li>• The health benefits card will indicate level of coverage (standard or supplemental dental).</li> <li>• Show health benefit card to a dental provider.</li> </ul>
<p><b>Alberta Works: Alberta Adult Health Benefit (AAHB)</b></p> <p><b>Phone:</b> 1-877-469-5437 <b>Web:</b> <a href="https://www.alberta.ca/alberta-adult-health-benefit.aspx">https://www.alberta.ca/alberta-adult-health-benefit.aspx</a> <b>E-mail:</b> <a href="mailto:hs.aahb@gov.ab.ca">hs.aahb@gov.ab.ca</a></p>	<p><input type="checkbox"/> Children <input checked="" type="checkbox"/> Adults <input type="checkbox"/> Seniors</p>	<ul style="list-style-type: none"> <li>• People who leave income support or AISH and have employment or Canada Pension Plan Disability program.</li> <li>• Pregnant women.</li> <li>• People with ongoing prescription drug needs.</li> <li>• Eligibility also based on income.</li> </ul>	<ul style="list-style-type: none"> <li>• Basic services (extractions, fillings, etc.) and in some cases teeth cleaning.</li> <li>• See on-line policy manual for details on who has what coverage.</li> <li>• Client must show benefit card to dental provider.</li> </ul>

PROGRAM	WHO IS ELIGIBLE	ELIGIBILITY CRITERIA	COVERAGE
<p><b>Alberta Works: Alberta Child Health Benefit (ACHB)</b></p> <p><b>Phone:</b> 1-877-469-5437 <b>Web:</b> <a href="https://www.alberta.ca/alberta-child-health-benefit.aspx">https://www.alberta.ca/alberta-child-health-benefit.aspx</a> <b>E-mail:</b> <a href="mailto:hs.achb@gov.ab.ca">hs.achb@gov.ab.ca</a></p>	<input checked="" type="checkbox"/> Children <input type="checkbox"/> Adults <input type="checkbox"/> Seniors	<ul style="list-style-type: none"> <li>Children under the age of 18 years (19 if attending high school) in low-income families.</li> <li>Eligibility based on income and number of eligible children in the family.</li> <li>Must apply. Call for an application or download from website.</li> </ul>	<ul style="list-style-type: none"> <li>Free basic health benefits and routine dental services.</li> <li>Show benefit card to a dental provider.</li> </ul>
<p><b>Assured Income for the Severely Handicapped (AISH)</b></p> <p><b>Phone:</b> 1-877-644-9992 <b>Web:</b> <a href="https://www.alberta.ca/aish.aspx">https://www.alberta.ca/aish.aspx</a> E-mail: <a href="mailto:hs.ascc@gov.ab.ca">hs.ascc@gov.ab.ca</a></p>	<input checked="" type="checkbox"/> Children <input checked="" type="checkbox"/> Adults <input checked="" type="checkbox"/> Seniors	<ul style="list-style-type: none"> <li>AISH clients and their dependants.</li> </ul>	<ul style="list-style-type: none"> <li>Routine dental services and dentures.</li> <li>Show health benefit card to a dental provider.</li> </ul>
<p><b>Burns Memorial Fund</b></p> <p><b>Phone:</b> 403-234-9396 ext 2 <b>Web:</b> <a href="http://www.burnsfund.com/programs/childrens-fund/oral-health/">http://www.burnsfund.com/programs/childrens-fund/oral-health/</a> <b>Email:</b> <a href="mailto:charlotte.chesnut@burnsfund.com">charlotte.chesnut@burnsfund.com</a></p>	<input checked="" type="checkbox"/> Children <input type="checkbox"/> Adults <input type="checkbox"/> Seniors	<ul style="list-style-type: none"> <li>Must be 20 years old or under and lived in Calgary for at least 6 months.</li> <li>Children in low income situations with <b>urgent</b> or <b>significant</b> dental needs that are <b>NOT</b> covered by ACHB or private insurance.</li> <li>Application form and treatment plan needed.</li> </ul>	<ul style="list-style-type: none"> <li>Payment or cost-sharing for dental or orthodontic treatment.</li> <li>Payments are <b>not</b> given for services already provided in a dental office before applying to the Burns Fund.</li> <li>Will consider up to \$2,000/family within a 3-year period.</li> </ul>
<p><b>Children's Oral Health Initiative (COHI)</b></p> <p><b>Phone:</b> Morley 403-881-2111 Siksika 403-734-3959 T'suu Tina 403-251-7575 Eden Valley 403-881-2111</p>	First Nations and Inuit <input checked="" type="checkbox"/> Children <input type="checkbox"/> Adults <input type="checkbox"/> Seniors	<ul style="list-style-type: none"> <li>For infants and children of First Nations Communities in Alberta.</li> </ul>	<ul style="list-style-type: none"> <li>Free services including fluoride varnish, sealants, fillings and teaching about tooth brushing and flossing.</li> </ul>

PROGRAM	WHO IS ELIGIBLE	ELIGIBILITY CRITERIA	COVERAGE
<p><b>Calgary Urban Project Society (CUPS)</b></p> <p><b>Phone:</b> (403) 221-8797 (no insurance coverage)  <b>Web:</b> <a href="http://www.cupscalgary.com/">www.cupscalgary.com/</a></p>	<p><input type="checkbox"/> Children  <input checked="" type="checkbox"/> Adults  <input checked="" type="checkbox"/> Seniors</p>	<ul style="list-style-type: none"> <li>Friday Afternoons – Must be low income with no dental insurance. *Requires referral from CUPS nurse before extraction day.</li> </ul>	<ul style="list-style-type: none"> <li>Free extraction services ONLY, on a first come first serve basis.</li> </ul>
<p><b>Cleft Palate Dental Indemnity Program</b></p> <p><b>Phone:</b> 1-866-218-7811  <b>Web:</b> <a href="http://www.aboutface.ca/healthcare-contacts/cleft-palate-dental-indemnity-program/">http://www.aboutface.ca/healthcare-contacts/cleft-palate-dental-indemnity-program/</a>  <b>Email:</b> <a href="mailto:denise.buckler-mcculloch@albertahealthservices.ca">denise.buckler-mcculloch@albertahealthservices.ca</a></p>	<p><input checked="" type="checkbox"/> Children  <input checked="" type="checkbox"/> Adults  <input type="checkbox"/> Seniors</p>	<ul style="list-style-type: none"> <li>Alberta residents, under the age of 25 years and covered under Alberta Health Care Insurance Plan.</li> <li>Have a congenital cleft affecting the hard palate.</li> <li>Registered at a Cleft Palate Clinic in Alberta.</li> </ul>	<ul style="list-style-type: none"> <li>Funding for dental treatment directly related to the cleft site.</li> <li>Must use all 3<sup>rd</sup> party insurance coverage and all other government programs first.</li> </ul>
<p><b>Dental and Optical Assistance for Seniors Program (DASP)</b></p> <p><b>Phone (eligibility): 1-877-644-9992</b>  <b>(Dental claims – Alberta Dental Service Corp): 1-800-232-1997</b>  <b>Web:</b> <a href="https://www.alberta.ca/dental-optical-assistance-seniors.aspx">https://www.alberta.ca/dental-optical-assistance-seniors.aspx</a></p>	<p><input type="checkbox"/> Children  <input type="checkbox"/> Adults  <input checked="" type="checkbox"/> Seniors</p>	<ul style="list-style-type: none"> <li>Residents of Alberta who are 65 years of age and older (Canadian citizens or landed immigrants).</li> <li>Eligibility based on income.</li> <li>Must apply if not already enrolled in the Alberta Seniors Benefit Program or Optical Assistance for Seniors Program. Call for an application or download from website.</li> </ul>	<ul style="list-style-type: none"> <li>Coverage dependent upon annual income – maximum of \$5,000 coverage for eligible procedures every 5 years.</li> <li>Checkups, cleanings, fillings, extractions, root canals and basic dentures.</li> <li>Must pay for any amounts above the maximum amount covered by this program.</li> <li>Advise the dental provider of coverage.</li> </ul>

PROGRAM	WHO IS ELIGIBLE	ELIGIBILITY CRITERIA	COVERAGE
<p><b>Dental Assistant Training Programs</b></p> <p><b>Phone:</b> SAIT 403-284-8380 Columbia College 403-235-9314</p>	<p><input checked="" type="checkbox"/> Children <input checked="" type="checkbox"/> Adults <input checked="" type="checkbox"/> Seniors</p>	<ul style="list-style-type: none"> <li>Adults and children who have seen their regular dental service provider within the past year.</li> <li>People with or without dental insurance</li> </ul>	<ul style="list-style-type: none"> <li>Low-fee services.</li> <li>Services include teeth polishing, fluoride treatment, and x-rays.</li> <li>Scaling of teeth may be offered.</li> <li>Services available only during some months</li> </ul>
<p><b>Interim Federal Health Program (IFHP)</b></p> <p><b>Phone:</b> 1-888-242-2100</p> <p><b>Web:</b> <a href="https://www.canada.ca/en/immigration-refugees-citizenship/services/refugees/help-within-canada/health-care/interim-federal-health-program.html">https://www.canada.ca/en/immigration-refugees-citizenship/services/refugees/help-within-canada/health-care/interim-federal-health-program.html</a></p>	<p>Refugees</p> <p><input checked="" type="checkbox"/> Children <input checked="" type="checkbox"/> Adults <input checked="" type="checkbox"/> Seniors</p>	<ul style="list-style-type: none"> <li>Individuals covered under the <b>Supplemental Coverage</b> – coverage length varies based on your eligible group</li> </ul>	<ul style="list-style-type: none"> <li>Emergency dental care</li> <li>Contact dental provider or Alberta Health Services Public Health Dental Clinics</li> </ul>
<p><b>Mosaic Primary Health Network (MPCN)</b></p> <p><b>Phone:</b> 403-250-5066 ext. 1</p> <p><b>Website:</b> <a href="http://mosaicpcn.ca/services/Pages/Oral-Health-Services.aspx">http://mosaicpcn.ca/services/Pages/Oral-Health-Services.aspx</a></p>	<p><input checked="" type="checkbox"/> Children <input type="checkbox"/> Adults <input type="checkbox"/> Seniors</p>	<ul style="list-style-type: none"> <li>Residents of Calgary living within the MPCN catchment area.</li> </ul>	<ul style="list-style-type: none"> <li>Free of charge: dental screenings and fluoride varnish for children age 1 to 5 years on the Ronald McDonald Care Mobile.</li> <li>Check website for monthly schedule</li> </ul>
<p><b>Mustard Seed</b></p> <p><b>Phone:</b> 403-269-1319 <b>Email:</b> <a href="mailto:info@theseed.ca">info@theseed.ca</a></p> <p><b>Website:</b> <a href="http://www.theseed.ca">www.theseed.ca</a></p>	<p><input type="checkbox"/> Children <input checked="" type="checkbox"/> Adults <input type="checkbox"/> Seniors</p>	<ul style="list-style-type: none"> <li>Must be a resident of the Mustard Seed.</li> </ul>	<ul style="list-style-type: none"> <li>Contact Mustard Seed for dental services offered.</li> </ul>

PROGRAM	WHO IS ELIGIBLE	ELIGIBILITY CRITERIA	COVERAGE
<p><b>Non-Insured Health Benefits Program (NIHB)</b></p> <p>Phone: 1-855-618-6291</p> <p>Website: <a href="https://www.canada.ca/en/indigenous-services-canada/services/non-insured-health-benefits-first-nations-inuit/benefits-services-under-non-insured-health-benefits-program/dental-care-benefits.html">https://www.canada.ca/en/indigenous-services-canada/services/non-insured-health-benefits-first-nations-inuit/benefits-services-under-non-insured-health-benefits-program/dental-care-benefits.html</a></p>	<p>First Nations and Inuit</p> <p><input checked="" type="checkbox"/> Children</p> <p><input checked="" type="checkbox"/> Adults</p> <p><input checked="" type="checkbox"/> Seniors</p>	<ul style="list-style-type: none"> <li>All registered First Nations and Inuit persons that are residents in Canada.</li> </ul>	<ul style="list-style-type: none"> <li>Routine services and comprehensive (with pre-approval) dental services.</li> <li>Show identification card to a dental provider.</li> </ul>
<p><b>Smiles 4 Canada</b></p> <p>Email: <a href="mailto:administration@smiles4canada.ca">administration@smiles4canada.ca</a></p> <p>Website: <a href="http://smiles4canada.ca/">http://smiles4canada.ca/</a></p>	<p><input checked="" type="checkbox"/> Children</p> <p><input type="checkbox"/> Adults</p> <p><input type="checkbox"/> Seniors</p>	<ul style="list-style-type: none"> <li>Low income youths before their 14<sup>th</sup> birthday with orthodontic needs</li> <li>See website for application form and program information</li> </ul>	<ul style="list-style-type: none"> <li>Orthodontic services</li> </ul>