

The Canadian Dental Care Plan in 2026: What to Confirm Before You Book

By JoD Money & Benefits · 6 min read

If you have heard about the Canadian Dental Care Plan and wondered whether it could help you, the most useful thing you can do before booking an appointment is a little homework. A few checks up front, on your eligibility and on how a given office handles the plan, can save confusion later and help you walk into your visit knowing roughly what to expect.

This is a practical walkthrough of what to confirm in 2026, written for someone who simply wants a clear path to their first visit.

First, confirm whether you are eligible

The plan is open to eligible residents, and eligibility rests on a few conditions that all need to be met. According to the Government of Canada, to qualify you must:

- Not have access to private dental insurance.
- Have an adjusted family net income under \$90,000.
- Be a Canadian resident for tax purposes.
- Have filed your tax return for the relevant year (and your spouse's or common-law partner's, if that applies to you).

Because eligibility is tied to your tax return, keeping your filing up to date is part of staying eligible from year to year. The official eligibility details and the application process live on the federal government's dental page, and that is the authoritative place to check your own situation before anything else.

Why the "no private insurance" condition trips people up

People sometimes assume that because their workplace plan is limited, or because they are not using it, they count as uninsured. The condition is about *access* to private coverage, not whether you currently use it. If you are unsure whether a plan available through work, a spouse, a pension, or a program counts, the government's guidance addresses this directly, and it is worth reading before you apply rather than guessing.

How the plan is administered

The Canadian Dental Care Plan is administered with Sun Life. If you are accepted, Sun Life handles the coverage side, and you receive information about what the plan involves. Depending on your income, there may be a co-payment, meaning a share of the cost you pay yourself. The specifics of any co-payment depend on your circumstances, so rather than relying on a figure you heard secondhand, confirm the details through the official channels for your own case.

The plan has grown considerably since it launched; the Government of Canada reports that more than 6.5 million people were enrolled as of 2026. For current enrolment and eligibility specifics, the [federal dental page](#) is the source to rely on rather than any third-party summary.

Then, confirm how a specific office handles the plan

Eligibility is only half the picture. The other half is practical: how a particular dental office works with the plan. This is where a quick phone call before booking pays off. It is reasonable to [contact the clinic](#) you are considering and ask how they handle Canadian Dental Care Plan patients, so there are no surprises on the day of your appointment. Offices differ in how they manage participation, billing, and any patient portion, and a short conversation clears most of it up.

Questions worth asking the office

- Do you see patients through the Canadian Dental Care Plan, and how do you handle the billing?
- If there is a co-payment in my case, how and when would I pay my portion?
- Will you confirm what is covered before treatment, so I know my share in advance?
- What information should I bring that relates to my coverage?

Asking these ahead of time means the visit itself can focus on your teeth rather than on paperwork you are seeing for the first time in the waiting room.

A simple order of operations

1. Check your eligibility against the four conditions on the government's dental page, and make sure your tax return is filed.
2. Apply through the official process if you qualify, and keep the information you receive about your coverage.
3. Before booking, call the office to confirm how they work with the plan and what your portion might be.

4. Bring your coverage details to the appointment so the office can confirm what applies.

Working through those steps in order turns a program that can feel complicated into a manageable checklist.

Frequently asked questions

Who qualifies for the CDCP in 2026?

Eligibility requires meeting all of a few conditions: you do not have access to private dental insurance, your adjusted family net income is under \$90,000, you are a Canadian resident for tax purposes, and you have filed your tax return (and your spouse's or common-law partner's, where that applies). The Government of Canada's dental page is the authoritative place to confirm your own eligibility.

What should I confirm before booking?

Confirm two things. First, your own eligibility through the official government process. Second, how the specific dental office handles the plan: whether they see plan patients, how billing works, and whether any co-payment would apply in your case. A short call to the office before you book usually answers the practical questions.

Will there be a cost to me?

Depending on your income, the plan may involve a co-payment, which is a portion of the cost you pay yourself. The exact details depend on your situation, so check the government's dental page for how co-payments work and confirm specifics for your own case rather than relying on a general figure.

Sources & further reading

- [Government of Canada — Canadian Dental Care Plan](#) — eligibility, enrolment numbers, co-payment, and how to apply.
- [Canadian Dental Association — Your Oral Health](#) — general patient guidance on dental visits and care.
- [Ontario Dental Association — Your Oral Health](#) — Ontario-specific information for dental patients.