2026

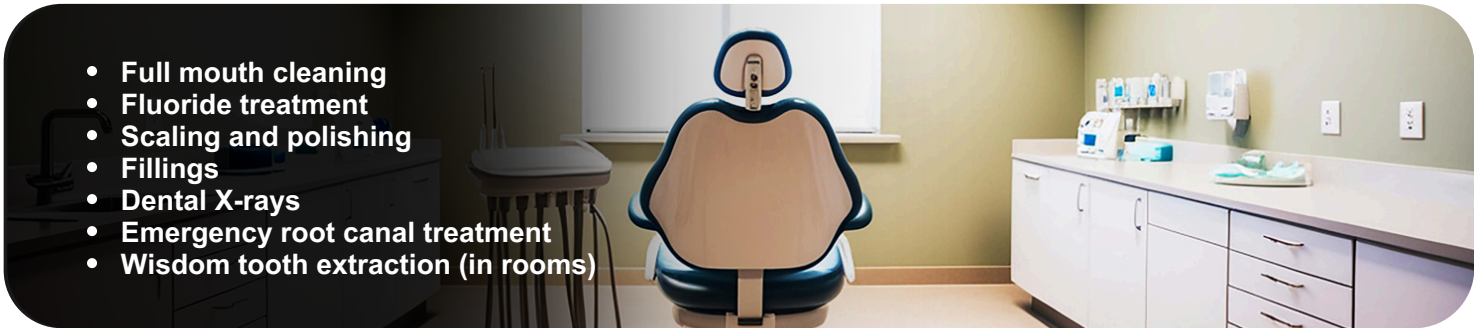
Comprehensive Dental Cover
Ntsika Option

Overview

The Ntsika Option provides comprehensive dental cover focused on prevention, early intervention, and cost-effective treatment. Benefits are structured to ensure members receive high-quality care through Designated Service Providers (DSPs).

BASIC DENTISTRY (DSP PROVIDERS) | 100% OF SCHEME RATE (SR)

Covered services (2 consultations per beneficiary per year):



- **Full mouth cleaning**
- **Fluoride treatment**
- **Scaling and polishing**
- **Fillings**
- **Dental X-rays**
- **Emergency root canal treatment**
- **Wisdom tooth extraction (in rooms)**

Important: Benefits apply only when using a Designated Service Provider (DSP).

TYPES OF DENTAL COVER

Basic Dentistry

100% of Scheme Rate (SR)

- Out-of-network visits/procedures are covered at 100% SR.
- Involuntary PMB emergencies will be covered at cost.

Specialised Dentistry

100% of Scheme Rate (SR)

- Subject to pre-authorisation and clinical protocols.
- No benefit unless PMB.

Dentures

100% of Scheme Rate (SR)

- One set of plastic dentures per beneficiary every four years (subject to protocols).
- No cover for high-impact acrylic dentures.

CLINICAL PROTOCOLS

1. Full mouth examinations: 1 every 6 months.
2. Restorations on the same tooth: covered once every 9 months.
3. Code 8132 (filling & polishing):
    - When this code is claimed, no restorations may be claimed on the same tooth number and same service date.

No Benefits for the Following Procedures

- Laboratory-fabricated crowns on primary teeth
- Root canal treatment on primary teeth
- Root canal treatment on wisdom teeth (18, 28, 38, 48)
- Crowns on wisdom teeth (18, 28, 38, 48)
- Pontics on second molars (17, 27, 37, 47) unless:
    - The third molars are fully functional, and
    - Pre-authorisation has been obtained

General Rules

1. If a procedure is declined or if no benefit exists, all associated treatments linked to that event will also not be covered.
2. Any discrepancy between authorised vs claimed codes or tooth numbers will result in claim rejection.
    - Providers must submit updates prior to claim submission.
3. Only one restoration per tooth surface per day is payable.

HOW TO JOIN THE WCMAS DENTAL NETWORK

Dentists wishing to join the network may follow the process below:

Step 1: Submit Registration Request
Email: providers@wcmas.co.za
Include:

- Practice number
- Physical address & DSP interest
- Contact details

Step 2: Contracting & Documentation
You will receive onboarding documents and tariff schedules.

Step 3: Activation on the Network
Once approved, you will be added to the WCMAS Dental DSP Network and appear on our provider list.

Important links:

The full dental tariff schedule is available via the PPSHA Provider Portal
CLICK HERE

Before treatment, providers can confirm a member's active status:
CLICK HERE

WCMAS
Our members Our passion
Witbank Coalfields Medical Aid Scheme

Need assistance?
For queries, pre-authorisation, or provider guidance:
WCMAS Call Centre
0800 132 345