

Dental Cover Definitions

Contact Sport

Any sport in which contact with players either deliberate or incidental is allowed and where it is common practice to wear mouth protection.

Country Of Residence

The country in which the Benefit Participant is resident.

Dental Implant

A titanium root-shaped fixture designed to integrate with the bone to replace the root of a tooth and support the replacement teeth.

Dental Injury

An injury to the teeth or supporting structures (including damage to dentures whilst being worn) which is caused suddenly and unexpectedly by means of a direct external impact.

Dental Specialist

A specialist dental practitioner accredited by the General Dental Council (GDC) in Britain practising in one of the recognised dental specialist areas contained within 'The Specialist List' held by the GDC at www.gdc-uk.org.

Dentist

In Britain - a dental surgeon who is currently registered with the General Dental Council (GDC) together with any other regulatory authority Outside of Britain – a dental surgeon who is currently registered with the appropriate national regulatory authority.

Dentist Call-Out

The necessity for a Dentist in Britain to re-open the practice between the hours of 6.00pm and 8.00am on weekdays or weekends and Bank Holidays or if outside of Britain then outside the practice's normal working hours.

Emergency Dental Treatment

Initial dental treatment provided at the initial emergency appointment urgently required for the relief of severe pain, arrest or haemorrhage, the control of acute infection or condition which causes a severe threat to the Benefit Participant's general health. Any subsequent treatment required after the initial emergency appointment is specifically excluded.

Mouth Cancer

A malignant tumour with its primary site being in the hard and soft palate gland tissue (including accessory salivary lymph and other gland tissue in the mucosal lining of the oral cavity but excluding the tonsils, which is characterised by the uncontrolled growth and spread of malignant cells and the invasion of tissue). This excludes non-invasive cancer in situ and HIV related tumours.

Mouth Protection

A sports mouth guard.

Permanent Treatment

Definitive treatment that is clinically necessary to secure and maintain oral health.

Restorative Dental Treatment

Clinically necessary dental treatment required to maintain the oral health of a patient in the opinion of the Insured's Dentist. This may include treatment such as fillings, crowns, bridges and dentures.

Specialist Dental Treatment

Dental treatment carried out by a Dental Specialist within their specialist area.

Additional Claims Settlement Conditions applicable to the Dental Cover Extension

Claim Notification

The Benefit Participant must provide written notification of a claim to the Company no later than 60 days from the date they first received dental treatment.

Evidence Required

The Benefit Participant must produce for the Society, at the Benefit Participant's own expense, all the detailed particulars and evidence relating to the cause detailing the dates and costs of each individual treatment. Evidence must comprise of a fully itemised receipt or an official document issued by the treating practice, in English.

Where a receipt or an official document is unobtainable, the treating dental surgery must sign the completed claim form. Where necessary the Benefit Participant may be required to provide relevant x-rays and/or

dental records in support of a claim. No Benefit will be payable if the Society have not received proof of all facts relevant to the Benefit Participant's claim. This shall include but not be limited to:-

1) Proof of the Benefit Participant's eligibility for cover on the date of treatment.

2) Proof of the dental treatment including type of treatment received and the date of treatment. This may be by way of a medical report at the Benefit Participant's own expense.

3) Where applicable, details of the circumstances of the injury incurred.

If the Society considers it necessary, each Benefit Participant must also agree to a dental examination (which the Society will pay for) as often as the Society may require. The Society (at its own expense) may refer to a Dentist or other medical specialist chosen by the Society to advise about medical facts relating to a claim.

Foreign Currency

Claims involving foreign currency will be converted into the appropriate currency at the selling rate of exchange published on www.oanda.com on the day nearest to the date of the loss or, as otherwise paid via documented credit or debit card transaction or, as agreed in advance in writing with the Society.

Other Interests

The Benefit Participant's receipt shall discharge the Society's liability to pay any amount in respect of a claim. The Benefit Participant or the Benefit Participant's personal representatives shall have no right to claim from or sue the Society.

Reasonable Care

The Benefit Participant must take all reasonable steps to avoid or minimise any injury, damage or expense.

General Exclusions applicable to the Dental Cover Extension - Sections 1 to 5

The Society will not pay any claim for:-

- 1) treatment not deemed to be clinically necessary.
- 2) any dental treatment which was prescribed, planned, diagnosed as necessary or was ongoing at the date the Benefit Participant's cover commenced with the Society.
- 3) damage caused by tooth brushing or other oral hygiene procedures.
- 4) loss of or damage to dentures other than whilst in the mouth.
- 5) reimbursement of travelling expenses, incidental expenses or telephone costs.
- 6) treatment care or repair of teeth, gums, mouth or tongue in connection with 'mouth jewellery'.
- 7) toothbrushes, mouthwash or dental floss or any other dental consumables.
- 8) wisdom teeth extractions or any other dental procedures carried out by a hospital.

9) routine examinations.

10) restorative treatment other than treatment necessitated as a result of Dental Injury.

11) hygiene treatment other than treatment necessitated as a result of Dental Injury.

12) dental x-rays other than x-rays necessitated as a result of Dental Injury.

Dental Cover - Section 1 - Dental Injury The Cover

If during the Operative Time the Benefit Participant sustains Dental Injury, the Society will pay for Dentist Specialist or Dentist expenses necessarily incurred within 2 years of the date the need for treatment first arose. The Society will pay:-

1) up to £2,500 per course of treatment per Dental Injury for up to a maximum of four incidents in any one Period of Insurance.

2) for dental prescription charges in connection with the Dental Injury for up to a maximum of four incidents in any one Period of Insurance.

3) for Dental Implants that are clinically required, we will pay up to £1,000 towards the cost of the equivalent bridgework treatment.

Extension to Section 1

Ongoing Treatment

Cover under this Section shall extend to include ongoing treatment for which the Benefit Participant was in receipt of prior to the Benefit Participant's cover commencing with the Society, provided that this cover immediately supersedes a similar annual insurance (whether provided by the Society or not) subject to a maximum treatment period of 90 days.

Exclusions to Section 1

The Society will not pay for Dentist Specialist or Dentist expenses as follows:

- 1) in connection with Dental Injuries where treatment commences more than 26 weeks after the date of the original incident or notification of an intention to claim.
- 2) incurred more than 2 years after the date of the Dental Injury. 3) where the Dental Injury occurs in the consumption of food including foreign bodies contained within food.
- 4) where Dental Injury occurs whilst training for, or participating in Contact Sports unless appropriate Mouth Protection is being worn at the time of the injury.
- 5) as a result of self inflicted Dental Injury.

6) as a result of Dental Injury caused by endoscopic procedures.

The Society will not pay for

7) Dental Implants.

Dental Cover - Section 2 - Emergency Dental Treatment

The Cover

If during the Operative Time the Benefit Participant requires Emergency Dental Treatment, the Society will pay for an initial emergency appointment with a Dentist Specialist or Dentist.

1) up to £200 of treatment per incident up to a maximum of four incidents in any one Period of Insurance for dental expenses incurred in Britain or

2) up to £400 of treatment per incident up to a maximum of two incidents in any one Period of Insurance for dental expenses incurred outside of Britain or

a combination of both subject to the Benefit Limits shown below up to an overall maximum of £800 in any one Period of Insurance.

3) for dental prescription charges in connection with the Emergency Dental Treatment provided under 1) and 2) above

Exclusions to Section 2 The Society will not pay

1) for any subsequent routine treatment required after the initial emergency appointment 2) for any costs of Permanent Treatment 3) for treatment exceeding £800 per Policy year under Benefit 7 **Dental**

Cover - Section 3 - Dentist Call-Out Fees

The Cover

If during the Operative Time the Benefit Participant incurs Dentist Call-Out fees in the event of a Dental Injury or Initial Emergency Dental Treatment.

The Company will pay

Up to £100 per incident up to a maximum of two incidents in any one Period of Insurance

Dental Cover - Section 4 - Hospitalisation

The Cover

If during the Operative Time a Dental Injury results in the Benefit Participant being admitted to a licensed medical or surgical hospital as an in-patient for dental treatment, under the care of a consultant specialising in dental or maxillofacial surgery in relation to a head or neck condition.

The Society will pay

£50 per night up to a maximum of £1,000 in any one Period of Insurance

Dental Cover - Section 5 - Mouth Cancer Cover

The Cover

If during the Operative Time the Benefit Participant is diagnosed with Mouth Cancer which requires medical treatment within 78 weeks of diagnosis, the Society will pay up to £12,000 towards the cost of one course of treatment for Mouth Cancer, provided by a consultant who is recognised as a specialist in cancer by the NHS or the States of Guernsey and Jersey or the Benefit Participant's Country of Residence or, treatment provided by another medical practitioner under referral from a consultant.

Exclusions to Section 5

The Society will not pay

- 1) for treatment of Mouth Cancer which was diagnosed prior to or within 90 days of when cover commenced with the Society.
- 2) for treatment of Mouth Cancer where the Benefit Participant has undergone tests or consultation prior to or within 90 days of when cover commenced with the Society, even where diagnosis was not made until after the 90 day period.
- 3) for any cost of treatment received after 78 weeks following the date of diagnosis of Mouth Cancer.

4) for not more than one course of treatment in connection with a specific occurrence of Mouth Cancer. No further benefits are payable in the event of a re-occurrence of the same cancer either at the same site or at a different location.

5) for fees for consultations or tests incurred as a result of non invasive tumors or tests not resulting in a diagnosis of Mouth Cancer.

6) Mouth Cancer related directly or indirectly to HIV infection or AIDS. 7) Mouth Cancer resulting from the chewing of tobacco products, betel nut or from prolonged alcohol abuse.