Supplementary Dental Injury & Emergency Insurance Policy

This document should be read in conjunction with the Policy Summary and your dental plan information leaflet. It contains full details, terms and conditions of the Supplementary Dental Injury and Emergency Insurance which is an integral part of your dental plan. You should check the details of the Policy carefully to make sure that the cover provided meets your needs.

Answers to some frequently asked questions are also included, so that you fully understand the cover and benefits available under the Policy. Should you have any additional queries, please contact the DPAS Insurance Team on 01747 873230.

Frequently asked questions

Q1: How does my dental plan work?

A1: As a member of a dental plan, you will have the peace of mind that your preventive dental care is provided by your dentist in return for convenient monthly payments. The monthly amount that you pay depends on the type of plan. DPAS Limited (‘DPAS’) manages and administers your dental plan payments using its Direct Debit Originator status. DPAS also arranges this Supplementary Insurance Policy, which forms an integral part of the dental plan and provides further cover in the event of dental injuries and dental emergencies. DPAS charges you a monthly fee for managing and administering your dental plan, which includes the premium payable to the insurers, ACE European Group Limited, for this insurance. DPAS’s charges are deducted from your monthly payment and the balance is paid to your dentist for the dental care services that he/she provides.

Q2: What happens in a dental emergency?

A2: (i.) At home (within 15 miles of your dental practice): when you are at home you should call your practice to access your dentist’s own emergency arrangements, including the out-of-hours emergency arrangements if appropriate. In the unlikely event that your dentist’s emergency arrangements are not available, you may see a dentist of your choice, or you may call the dental helpline for assistance (see Page 6 for details).

When you are at home, unless the emergency treatment is required as a result of a dental injury, you cannot claim for emergency treatment under this Supplementary Insurance (see Exclusion A, Page 5, Section 2). Emergency treatment may be covered by your dental plan if provided by your dentist or any rota dentist. Your practice will be able to advise you if your plan includes emergency treatment.

(ii.) Away from home (more than 15 miles from your dental practice): if you are away from home or overseas you may see a dentist of your choice. Your hotel, holiday representative or hosts may also be able to provide contact details for a dentist in the area. If you need help in obtaining emergency dental treatment, you may call the dental helpline (see Page 6 for details).

When you are away from home you are covered under this Supplementary Insurance for temporary emergency treatment required at the initial appointment. You should pay for the treatment, obtain a receipt and submit a claim upon your return home. You can claim the actual cost of the temporary emergency treatment up to Policy limits, subject to the overall limit (see Page 5, Section 2).

Q3: What service does the dental helpline provide?

A3: The helpline will endeavour to find a dentist in the local area. If successful, the operator will make an appointment for you or provide you with contact details if you prefer. Whilst every endeavour will be made to source a dentist and make an appointment, the dental helpline cannot guarantee that a dentist will be available to see you.

Q4: What is temporary emergency treatment?

A4: Temporary emergency treatment is dental treatment that is urgent and necessarily required to stabilise your oral condition pending subsequent permanent treatment.

Q5: Can I claim for permanent treatment received during an emergency appointment?

A5: No. Unless the emergency appointment is required as a result of a dental injury (see Page 4, Section 1), you are covered for temporary emergency treatment only. If permanent treatment is received, any claim settlement will be based on the likely cost of temporary emergency treatment had this been delivered in isolation.

Q6: I have tripped and damaged a tooth (e.g. in a fall whilst running for a bus). The tooth had already been identified as a tooth requiring treatment; can I make a claim?

A6: You should complete a Claim Form (See Page 3 – Making a claim). DPAS will investigate both the circumstances surrounding the injury incident and the pre-incident condition of the tooth to determine how much benefit should be paid (see Exclusion B, Page 4, Section 1).
Policy terms and conditions

While you are a member of a dental plan administered and managed by DPAS Limited (‘DPAS’) you are covered by Supplementary Dental Injury and Emergency Insurance underwritten by ACE European Group Limited (‘ACE’). ACE is registered in England and Wales (Registration No. 01112892). ACE is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. This can be checked on the Financial Services Register at https://register.fca.org.uk (Registration No.202803). ACE’s main business is General Insurance and its Registered Office in the United Kingdom is ACE Building, 100 Leadenhall Street, London EC3A 3BP. This Policy is also administered and managed by DPAS, DPAS is authorised and regulated by the Financial Conduct Authority (Registration No: FRN315179). DPAS acts as agent of ACE and only for ACE in the administration of this Policy.

In return for payment of the premium, ACE agrees to insure you during the period of insurance in the manner and to the extent provided, and subject to the Policy Terms, Conditions and Exclusions. This Policy shows the most ACE will pay for each benefit. Any charge, which exceeds the specified limit, must be paid directly by you to the treating dentist.

Andrew Kendrick
President
For ACE European Group Limited

DEFINITIONS APPLICABLE TO ALL SECTIONS:
The following words or phrases used in this Policy have a specific meaning wherever they appear;

You, your insured member of a dental plan
Dental plan the Payment Plan or the Membership Plan available from the dental practice with which you are registered
Mouth cancer an invasive malignant tumour with its primary site inside the mouth
Mouth the lips, tongue, gums, major salivary glands, floor of the mouth, gland tissue associated with the mucosal lining, oropharynx, nasopharynx and hypopharynx, but excluding the tonsils
Period of insurance the period for which you have paid the required premium. All dates refer to local standard time at your address
Implant an intra-osseous fixture designed to integrate with the bone and replace the root of a tooth including the abutment
Locality within 15 miles radius of the dental practice with which you are registered.

CONDITIONS APPLICABLE TO ALL SECTIONS:
1. You must take all reasonable precautions to protect yourself against dental injury and mouth cancer.
2. If you make a representation which is later found to be untrue or misleading but that information is relevant to ACE, then ACE may have the option to void the policy.
3. This Policy is evidence of the contract between you and ACE and it shall be governed and construed in accordance with the Law of England and Wales and the English Courts alone shall have jurisdiction in any dispute.
4. Any communication in connection with this Policy shall be in the English language.
5. If you stay outside of the UK for more than 180 consecutive days, all cover under this Policy shall be suspended from the 181st day until you return to the UK.
6. ACE reserves the right to recover the cost of a claim under this Policy from any third party.
7. If there is any other insurance in force providing any of the same benefits, ACE will only be liable to pay or contribute its reasonable proportion of any claim.
8. ACE is required to notify you that other taxes or costs may exist which are not imposed by ACE.

COST AND DURATION OF COVER:
This is a monthly contract. The premium payable for this insurance cover is £0.88 per month inclusive of the current rate of IPT. Your dentist does not receive any mark-up or commission from this premium. Your cover commences on the day you become a member of the dental plan or the day you sign the dental plan Registration form (whichever is the later) and continues for as long as you pay your monthly premiums. For each premium you pay, we will provide cover until the next premium date. Once the premium is received by DPAS, it is deemed to have been received by ACE.

CANCELLATION:
If you decide within 14 days of receiving this Policy that this insurance does not meet your requirements, you may cancel this policy. A full refund of any premium paid will be allowed, provided no claims have been made.

You may also cancel after 14 days, without charge, providing you give DPAS not less than 21 days’ notice for the policy to end on the last day of that month.

To cancel please contact DPAS in writing, including email, or by telephone. (See contact details on page 6). As this insurance is an integral part of the dental plan, cancellation of this insurance will automatically cancel your membership of the dental plan. ACE also reserves the right to cancel this policy if you fail to make your monthly premium payment or due to fraud or attempted fraud, misrepresentation and/or non-disclosure of material facts by you.
MAKING A CLAIM:
The cover provided by and the level of benefits available under this Policy are reviewed annually. Before making a claim, please make sure you are in possession of the most up-to-date Policy Document. Claim Forms and the latest version of the Policy Document (see bottom right hand corner of page 1) can be downloaded from the DPAS website at www.dpas.co.uk. Claim Forms and Policy Documents are also available either from DPAS (see page 6) or from the practice with which you are registered. A Claim Form must be completed by you (and the treating dentist where specified) and must be sent to the Insurance Team at DPAS within 30 days of the injury incident or emergency incident (or 60 days if the incident happened abroad). Costs will be reimbursed up to the limits shown in this Policy. DPAS will at its sole discretion settle the claim directly either with you or the treating dentist. Any charge, which exceeds the specified limit, must be paid directly by you to the treating dentist.

You must, at your expense, provide all necessary reports, receipts or other documentation in support of your claim when asked to do so by DPAS. DPAS is entitled to request that you undergo a dental or medical examination to assist with the investigation of a claim. If such a request is made, DPAS will pay for and reimburse you for any reasonable expense incurred in connection with the examination.

Dental Injury Claims: Please note that you may not claim more than £225.00 in total unless DPAS has previously approved a costed treatment plan.

Dental Emergency Claims: The Claim Form should be sent together with the treating dentist’s signed receipt showing details of the temporary treatment given.

MATERIAL INFORMATION:
You must ensure that all of the information which is provided to DPAS/ACE during registration, by correspondence, over the telephone, on a Claim Form and in other documents is true, complete and accurate. Please note that knowingly providing incomplete, false or misleading information could affect the validity of this Policy and may mean that all or part of a claim may not be paid.

GENERAL EXCLUSION
ACE will not pay any claims which would result in ACE being in breach of United Nations resolutions or trade or economic sanctions or other laws of the European Union, United Kingdom, or United States of America.

DATA PROTECTION:
DPAS Limited (‘DPAS’) and ACE European Group Limited (‘ACE’) are both data controllers (as defined in the Data Protection Act 1998) and accept fully their responsibility to protect the privacy of customers and the confidentiality and security of Personal Information entrusted to them. In this notice, DPAS and ACE are collectively referred to as ‘we, us and our.’

In this notice, where we refer to ‘Personal Information’, this means any information that identifies an individual and includes any Sensitive Personal Information (e.g. information about health or medical condition(s)). Where it refers to ‘you’ or ‘your’ Personal Information, this will include any information that identifies another person whose information you have provided to us (as we will assume that they have appointed you to act for them). You agree to receive on their behalf any data protection notices from us.

We will use your Personal Information for the purpose of providing insurance services. By providing Personal Information, you consent that your Personal Information, will be used by us, ACE group companies*, our reinsurers, our service providers/business partners, and our agents for administration, customer service, claims handling, assistance services, customer profiling, and for management and audit of our business operations. We may also pass your Personal Information to other insurers and regulatory and law enforcement bodies for the prevention of fraud, financial crime or where the law requires us to do so. We will not share your Personal Information which is sensitive personal data (as defined in the Data Protection Act 1998) unless we have either specific consent from you or your nominated personal representative or we are required to do so by law.

We may transfer your Personal Information to countries outside the EEA which may not have the same level of data protection as in the UK, but if we do, we will ensure appropriate safeguards are put in place to protect your Personal Information.

If you ask us, we will tell you what Personal Information we hold about you and provide it to you in accordance with applicable law. We are permitted to charge a fee of £10 for this. Any Personal Information which is found to be incorrect will be corrected promptly. We may monitor and/or record your communication with us either ourselves or using reputable organisations selected by us, to ensure consistent servicing levels and account operation. We will keep information about you only for so long as it is appropriate.

If you have any questions regarding the use or type of information held, please contact the Data Protection Officer at DPAS. Contact details can be found on page 6.

* The ACE Group of companies includes ACE European Group Limited and ACE Europe Life Limited – insurance companies registered in the United Kingdom, and wholly owned subsidiaries of ultimate parent company ACE Limited, a company registered in Switzerland and listed on the New York Stock Exchange.
**Section 1. Dental injury**

If during the *period of insurance* you suffer a dental injury, including loss or damage to any prostheses (e.g., dentures) while in the *mouth*, caused suddenly and unexpectedly by a direct external impact to the *mouth*, you may claim the actual cost of any of the following items which is required and provided by any dentist, up to the limits shown but with an overall limit of £10,000 per injury incident.

<table>
<thead>
<tr>
<th>Item No.</th>
<th>Treatment</th>
<th>Policy Limit</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Examination and report to include necessary smoothing and polishing</td>
<td>up to £47.00</td>
</tr>
<tr>
<td>2.</td>
<td>X-ray examination</td>
<td>up to £35.00</td>
</tr>
<tr>
<td>3.</td>
<td>Laboratory made temporary bridge following tooth loss (where required)</td>
<td>up to £180.00 per pontic/retainer</td>
</tr>
<tr>
<td>4.</td>
<td>Temporary denture following tooth loss (where required)</td>
<td>up to £300.00 per denture</td>
</tr>
<tr>
<td>5.</td>
<td>Bridges</td>
<td>up to £330.00 per retainer</td>
</tr>
<tr>
<td></td>
<td>– All metal*</td>
<td>up to £330.00 per pontic</td>
</tr>
<tr>
<td></td>
<td>– Bonded metal/porcelain*</td>
<td>up to £455.00 per retainer</td>
</tr>
<tr>
<td></td>
<td>– Bonded metal/porcelain*</td>
<td>up to £420.00 per pontic</td>
</tr>
<tr>
<td></td>
<td>– Adhesive</td>
<td>up to £260.00 per retainer</td>
</tr>
<tr>
<td></td>
<td>– Adhesive</td>
<td>up to £295.00 per pontic</td>
</tr>
<tr>
<td>6.</td>
<td>Crowns</td>
<td>up to £420.00 per crown</td>
</tr>
<tr>
<td></td>
<td>– Porcelain jacket*</td>
<td>up to £500.00 per crown</td>
</tr>
<tr>
<td></td>
<td>– Ceramic/Zirconia*</td>
<td>up to £435.00 per crown</td>
</tr>
<tr>
<td></td>
<td>– Full metal*</td>
<td>up to £435.00 per crown</td>
</tr>
<tr>
<td></td>
<td>– Metal bonded porcelain*</td>
<td>up to £455.00 per crown</td>
</tr>
<tr>
<td></td>
<td>– Dentine bonded</td>
<td>up to £460.00 per crown</td>
</tr>
<tr>
<td></td>
<td>– Post/core construction</td>
<td>up to £102.00</td>
</tr>
<tr>
<td>7.</td>
<td>Dentures</td>
<td>up to £450.00 per denture</td>
</tr>
<tr>
<td></td>
<td>– Permanent acrylic</td>
<td>up to £450.00 per denture</td>
</tr>
<tr>
<td></td>
<td>– Permanent metal</td>
<td>up to £660.00 per denture</td>
</tr>
<tr>
<td>8.</td>
<td>Root canal treatment</td>
<td>up to £300.00 per incisor/canine</td>
</tr>
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<td></td>
<td></td>
<td>up to £300.00 per premolar</td>
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<tr>
<td></td>
<td></td>
<td>up to £385.00 per molar</td>
</tr>
<tr>
<td>9.</td>
<td>Adhesive facing or veneer</td>
<td>up to £425.00 per unit</td>
</tr>
<tr>
<td>10.</td>
<td>Other necessary treatment (including emergency attention where required)</td>
<td>up to £615.00 per incident</td>
</tr>
</tbody>
</table>

* Includes any core and/or post required and any necessary interim covering.

**EXCLUDED FROM THE COVER PROVIDED BY SECTION 1 ARE:**

A) the treatment of a dental injury:
   i. caused by participation in rugby (other than rugby played as a school sport) or boxing, including training, in either case without wearing suitable protective gum shields
   ii. caused by any foodstuff (including any foreign body in food or drink) while being consumed, other than any associated temporary emergency treatment which will be covered
   iii. more than 2 years after the injury incident
   iv. which is the result of ordinary wear and tear

B) any dental treatment previously prescribed, diagnosed or planned at the time of the injury incident

C) the fitting or the repair of an implant. **

** Where an implant is sought as an alternative to fixed bridgework, an equivalent fee will be paid towards the cost of the implant.

**SPECIAL PROVISIONS RELATING TO SECTION 1:**

A) if you are under 18 years of age when the dental injury occurred any treatment required for that particular dental injury will continue to be covered until you reach the age of 18, or for up to 5 years from the date of the injury incident, whichever is attained later

B) where treatment includes the repair or replacement of a crown, bridgework, a veneer or a denture, benefit will be paid according to the cost of a repair or replacement of similar type or quality.
### Section 2. Dental emergency – temporary emergency treatment

For guidance on what to do in a dental emergency see Q2, Page 1

If during the period of insurance you need emergency dental treatment in the United Kingdom when you are away from home and more than 15 miles from your practice and you could not reasonably access your dentist's own emergency arrangements, you may claim the actual cost of any of the following items required and provided by any dentist up to the limits shown, but subject to an overall limit of £460.00 per emergency incident:

<table>
<thead>
<tr>
<th>Item No.</th>
<th>Treatment</th>
<th>Policy Limit</th>
</tr>
</thead>
<tbody>
<tr>
<td>11.</td>
<td>Examination and treatment of sensitivity</td>
<td>up to £47.00</td>
</tr>
<tr>
<td>12.</td>
<td>X-ray examination</td>
<td>up to £31.00</td>
</tr>
<tr>
<td>13.</td>
<td>Treatment to stop haemorrhage including follow-up care</td>
<td>up to £50.00</td>
</tr>
<tr>
<td>14.</td>
<td>Tooth extraction (maximum two teeth)</td>
<td>up to £80.00 per tooth</td>
</tr>
<tr>
<td>15.</td>
<td>Root extirpation, including dressing and treatment of infection</td>
<td>up to £100.00 for 1 canal&lt;br&gt;up to £105.00 for 2 canals&lt;br&gt;up to £140.00 for 3+ canals</td>
</tr>
<tr>
<td>16.</td>
<td>Treatment of infection</td>
<td>up to £33.00</td>
</tr>
<tr>
<td>17.</td>
<td>Investigation &amp; dressing for first tooth</td>
<td>up to £43.00</td>
</tr>
<tr>
<td></td>
<td>– for additional teeth</td>
<td>up to £24.00</td>
</tr>
<tr>
<td>18.</td>
<td>Resecure</td>
<td>up to £43.00</td>
</tr>
<tr>
<td></td>
<td>– crown or inlay</td>
<td>up to £54.00</td>
</tr>
<tr>
<td>19.</td>
<td>Provision of temporary bridge</td>
<td>up to £155.00</td>
</tr>
<tr>
<td>20.</td>
<td>Provision of temporary crown</td>
<td>up to £67.00</td>
</tr>
<tr>
<td>21.</td>
<td>Provision of temporary post &amp; core</td>
<td>up to £75.00 per tooth</td>
</tr>
<tr>
<td>22.</td>
<td>Repair/adjust orthodontic appliance</td>
<td>up to £58.00</td>
</tr>
<tr>
<td>23.</td>
<td>Repair of denture to include re-fixing of teeth &amp; gums and repair of clasp</td>
<td>up to £52.00</td>
</tr>
<tr>
<td>24.</td>
<td>Denture adjustment</td>
<td>up to £32.00</td>
</tr>
<tr>
<td>25.</td>
<td>Remove sutures inserted by another dentist</td>
<td>up to £30.00</td>
</tr>
<tr>
<td>26.</td>
<td>Other temporary emergency treatment</td>
<td>up to £73.00</td>
</tr>
</tbody>
</table>

**Excluded from the cover provided by Section 2 are:**

A) treatment provided by your own dentist, another dentist at the same practice, the rota dentist or a dental practice in the locality – i.e. within 15 miles of your dental practice

B) permanent treatment.

If you suffer a dental emergency in the United Kingdom and obtain advice by telephone from, or call out, any dentist (including a dentist from the practice with which you are registered) during the times detailed below, you may claim the actual cost of one or other of the following items up to the amount shown:

<table>
<thead>
<tr>
<th>Item No.</th>
<th>Description</th>
<th>Policy Limit</th>
</tr>
</thead>
<tbody>
<tr>
<td>27.</td>
<td>Telephone consultation where no attendance follows</td>
<td>up to £36.00</td>
</tr>
<tr>
<td>28.</td>
<td>Call out fee&lt;br&gt;– 6am-8am and 6pm-10pm (weekdays)</td>
<td>up to £135.00</td>
</tr>
<tr>
<td></td>
<td>– 6am-10pm (weekends &amp; Bank Holidays)</td>
<td>up to £180.00</td>
</tr>
<tr>
<td></td>
<td>– 10pm-6am (weekdays &amp; weekends)</td>
<td>up to £200.00</td>
</tr>
</tbody>
</table>

You are responsible for the first £15.00 of the call out fee.

If you suffer a dental emergency outside the United Kingdom you may claim:

29. The actual cost of any temporary emergency treatment that is reasonably required subject to an overall limit of £460.00 per emergency incident and a maximum of £920.00 in any one calendar year.
Section 3. Hospital confinement

If during the period of insurance you are admitted to hospital for treatment as an inpatient either wholly or partly under the care of a consultant who specialises in dental or maxillofacial surgery, you may claim:

30. £68.00 for each overnight stay (maximum 365 nights) in hospital while your hospitalisation period necessarily continues.

EXCLUDED FROM the cover provided by Section 3 is:
A) hospitalisation for any condition for which treatment was diagnosed as necessary prior to your joining the dental plan.

Section 4. Mouth cancer

31. If during the period of insurance you are first diagnosed as having mouth cancer by a qualified dentist or doctor (including a specialist) who is licensed to practice, a fixed benefit of £2,500.00 will be payable.

EXCLUDED FROM the cover provided by Section 4 are:
A) mouth cancer which first manifested itself and/or for which investigations/diagnosis have been made either prior to or within the first 90 days of your joining the dental plan
B) tumours in the throat
C) non-invasive cancers
D) mouth cancer associated in any way with HIV related sickness including aids and/or any mutant derivatives or variations thereof
E) mouth cancer resulting from: i) the chewing of tobacco products or betel nuts; or ii) prolonged alcohol abuse.

Compensation:
In the unlikely event of ACE being unable to meet its liabilities, you may be entitled to compensation under the Financial Services Compensation Scheme (FSCS).

If you have cause to complain:
If you are dissatisfied with the service provided in relation to this insurance, or you feel that an incorrect claim decision has been made, please contact the Insurance Team at DPAS who will investigate your complaint. If you remain dissatisfied with their final response, you may approach the Financial Ombudsman Service (FOS) for assistance. A leaflet explaining its procedure is available on request. The existence of this complaint procedure does not reduce your statutory rights relating to this Policy. For further information about Statutory Rights you should contact the Citizens Advice Bureau.

Useful contact details:

DENTAL HELPLINE: in the UK: 0800 525631 overseas: (0044) 1747 820841

DPAS Limited
Place Farm Courtyard, Court Street, Tisbury, Wiltshire SP3 6LW
Enquiries relating to this insurance and/or insurance claims: 01747 873230
Fax: 01747 871806
Email: insurance@dpas.co.uk Website: www.dpas.co.uk
General enquiries relating to your dental plan: 01747 870910

ACE European Group Limited
200 Broomielaw, Glasgow G1 4RU
Tel: 0345 841 0056 Fax: 01293 597376
Email: customerrelations@acegroup.com

Financial Ombudsman Service
Exchange Tower, London E14 9SR
Tel: +44 (0) 800 023 4567 (calls are free from a UK landline or mobile).
+44 (0) 300 123 9 123 (calls charged at the same rate as 01 or 02 numbers on a mobile phone).
Fax: 0207 9641001 Website: www.financial-ombudsman.org.uk

Financial Services Compensation Scheme
10th Floor, Beaufort House, 15 St Botolph Street, London EC3A 7QU
Tel: 0800 678 1100 (calls are free from a UK landline or mobile) or 0207 741 4100
Email: enquiries@fscs.org.uk Website: www.fscs.org.uk