



Dental Emergency and Accident Plan

Provided by Certra Assist Limited

Plan reference number: XXXXXXXXXXXXXXXX

Your worldwide Dental Emergency and Accident Plan (DEAP) has been provided to *you* as a Warranty Plan (Warranty) holder, **free of charge**.

Your DEAP is **not a contract of insurance** and any *benefits* available to *you* under this Plan are provided wholly at the unfettered discretion of the plan manager. The plan has been established to offer support and assistance to Warranty patients who require treatment following an accident, dental emergency, or diagnosis of mouth cancer.

This plan is provided to *you* as a complementary *benefit* to *your* Warranty. It was designed to provide *your* natural or *warranted teeth* with supplemental worldwide emergency dental and accidental dental injury assistance.

Warranty patients can request assistance if they have an accident, dental emergency or diagnosis of mouth cancer. Whilst the DEAP aims to provide *benefits* in most cases, it has no obligation to provide any *benefits*.

The *benefits* available to *you* under this plan are provided wholly at the discretion of the *Plan Manager* and are subject to the *benefit* limits, plan rules and exclusions specified in this document.

Some of the words used in this Plan have meanings that are specific to this Plan. These words bear these meanings wherever they are used in connection with this Plan. Please refer to the Glossary of Terms document, which is a separate document, to familiarise *yourself* with these definitions.

In the event of a **Dental Emergency** as described in Section 1 and where pain relief and/or temporary dental treatment was required on a warranted tooth. Please contact the Practice at the earliest possible opportunity upon your return for permanent restoration, repair or replacement to be considered under your warranty benefits.

In the event of an **Accidental Dental Injury** as described in Section 2, please contact the Practice at the earliest possible opportunity. We can help you request any available benefits under your DEAP. If restorative procedures are preapproved by the Plan Manager, you may not need to pay for any approved costs upfront and can instead instruct the Plan Manager to pay the Practice directly for the treatment on your behalf.

Glossary of terms

Certain words used in *your Dental Emergency and Accident Plan (DEAP)* terms and conditions have meanings that are specific to *your* DEAP. The definitions of these words, which are highlighted in this agreement in *Italics*, can be found in the Glossary of Terms, a separate accompanying document.

Terms and Conditions

Dental Emergency and Accident Plan

Your DEAP is divided into the following 3 sections. It is important that you read all sections of this plan document to familiarise *yourself* with the scope and extent of the protection that is available to *you* under this plan. This plan will provide *you* with 12 months *coverage* from the *commencement date* of your dental warranty.

Section 1 - Emergency Dental Protection Benefit

Section 1 of this plan identifies where *benefits* may be paid to *you* for worldwide emergency *dental treatment* for any of *your* natural or *warranted teeth* while *you* are travelling outside of a 50-mile radius of *your registered dental practice* at which *you* are a registered patient. *You* will be entitled to request reimbursement of any temporary *dental treatment* up to the value of £400 per incident, up to a maximum of £800 per plan year for the following *benefits*:

Scope and extent of protection available

- a) Examination and report to include all necessary smoothing and polishing of teeth and treatment of sensitivity up to £30 per incident.
- b) Radiographs up to £20 per tooth
- c) Fillings amalgam
 - i) small (1 surface) up to £40 per tooth
 - ii) medium (2 surfaces) up to £60 per tooth
 - iii) amalgam – large (3+ surface) up to £75 per tooth.
- d) Fillings composite
 - i) small (1 surface) up to £65 per tooth
 - ii) composite – medium (2 surfaces) up to £80 per tooth
 - iii) composite – large (3+ surfaces) up to £95 per tooth.
- e) Extractions
 - i) first tooth up to £50
 - ii) per additional tooth up to £25 per tooth
 - iii) surgical extraction up to £200 per tooth.
- f) Root extirpation to include dressing and any associated treatment of acute infection
 - i) 1 canal up to £45 per tooth
 - ii) 2 canals up to £50 per tooth
 - iii) 3 or more canals up to £70 per tooth.
- g) Treatment of acute infection (not associated with endodontic therapy) to include incising of abscesses and treating infected sockets up to £25 per incident.
- h) Investigation and dressing - first tooth up to £25. Per tooth thereafter up to £10.
- i) Re-cement crown or inlay - up to £25 per unit.
- j) Re-cement bridge - up to £35 per unit.
- k) Construction and fitting of Temporary Crown - up to £40 per unit
- l) Temporary bridge - up to £75 per unit.
- m) Arrest of abnormal haemorrhage - including aftercare and associated suture removal up to £75 per incident.
- n) Removal of sutures - placed by another practitioner up to £15 per incident.
- o) Adjustment to denture - up to £20 per incident.
- p) Repair of denture - up to £40 per incident.
- q) Any other *Emergency Treatment* - not otherwise specified under this policy up to £45 per incident.
- r) Evening, weekend and Bank Holiday call-out fees - where treatment is provided outside *your warranting dentist's* normal surgery hours up to £110 per incident. This *benefit* is also payable in the event of the *emergency treatment* being administered by *your warranting dentist* at *your registered dental practice* or any dental practice within a 50-mile radius of *your registered dental practice*.

Exclusions Specific to Section 1

Dental treatment administered by *your registered dental practice* or any practitioner covering for *your registered dental practice* or any dental practice within a 50-mile radius of *your registered dental practice*, other than in respect of 'r' above.

Benefits are limited to emergency and temporary dental treatments and therefore the costs of routine restorative dental treatments will not be reimbursed.

Benefits are unlikely to be paid in response to any requests for assistance in respect of any emergency *dental treatment* where *You* have been outside the United Kingdom for longer than 90 consecutive days.

Section 2 - Accidental Dental Injury Benefit

Section 2 of this plan identifies where *benefits* may be paid towards the cost of restorative dental procedures required to repair or restore any of *your* natural or *warranted teeth* that are damaged as a result of an *accidental injury* and require repair or restoration to a structurally sound *warrantable state*. The scope and extent of *cover* available under this *benefit* is subject to the following *benefit* limits for *permanent treatment* (including appropriate temporary *coverage*) up to a maximum of £10,000 per dental injury and per plan year. Treatment must be carried out by or at the direction of *your* warranting dentist unless in the event of an emergency.

All benefits in this section are subject to pre-authorisation (see point 7b below)

- a) Crowns
 - i) porcelain jacket up to £320 per unit
 - ii) ceramic bonded up to £390 per unit.
- b) Metal bonded porcelain crown - up to £440 per unit.
- c) Bonded metal/porcelain bridge work - up to £390 per retainer up to £255 per pontic.
- d) Full metal crown - up to £320 per unit.
- e) All metal bridge work - up to £285 per retainer up to £165 per pontic.
- f) Laboratory constructed adhesive bridge - up to £285 per retainer up to £165 per pontic.
- g) Laboratory constructed adhesive facing or veneer - up to £300 per unit.
- h) Permanent denture
 - i) acrylic up to £365 per denture
 - ii) metal up to £490 per denture.
- i) Temporary denture following tooth loss where required - up to £165 per incident.
- j) Laboratory made temporary bridge following tooth loss where required - up to £100 per incident.
- k) Emergency and other treatment following dental injury not otherwise specified - up to £350 per incident
 - i) root canal treatment incisor up to £115 per incisor
 - ii) root canal treatment canine up to £115 per canine
 - iii) root canal treatment premolar up to £150 per premolar
 - iv) root canal treatment molar up to £500 per molar.

Conditions to Section 2

Where treatment involves replacing any crown, bridge facing, veneer or denture the *benefit* shall be according to the cost of a replacement of similar quality and subject to the specific *benefit* limits.

Exclusions specific to Section 2

The following fall outside the scope of any discretionary *benefit* which may otherwise be offered by this Plan:

- Injury caused by foodstuffs (including foreign bodies therein) in the course of consumption
- normal wear and tear

- injury whilst participating in boxing, martial arts, rugby, hockey and shinty (other than school rugby/shinty/hockey) unless appropriate mouth protection is worn
- injury caused otherwise than by direct extra-oral impact
- damage which is not apparent within seven days of the date of impact resulting in dental injury
- damage to dentures occurring other than whilst being worn.

We will not pay for any costs incurred by *you* if the date of an accident is after the expiration of *your* dental plan or warranty.

SECTION 3 - Mouth Cancer

Section 3 of this plan identifies where *benefits* may be paid in the event of a mouth cancer diagnosis. If *You* are first diagnosed as having mouth cancer by a registered dentist, or licensed and qualified doctor, whilst *Your* dental plan or warranty is in force and you are within the United Kingdom, a fixed *benefit* of £5,000 may be paid.

Exclusions specific to Section 3

The following fall outside the scope of any discretionary *benefit* which may otherwise be offered by this Plan and it is unlikely to provide *you* with any *benefits*:

- If the request for assistance has not been submitted within 30 days of first receiving *your* diagnosis
- if the mouth cancer as a result of the chewing of areca nuts, tobacco products or similar.
- if the mouth cancer is as a result of *Your* prolonged alcohol or substance abuse.
- if the mouth cancer was diagnosed before or within 90 days of the start of the dental plan or warranty.
- any cancers or tumours in the throat.
- any non-malignant cancers.
- any non-invasive cancers.
- if the mouth cancer is attributable in any way, directly or indirectly, to HIV (Human Immunodeficiency Virus) or any HIV related illness.

General Exclusions

In respect of all sections, *benefits* will not be available for any treatment which:

- a dentist is unable to provide, due to circumstances beyond the control of the dentist services or supplies which are not described in this plan
- *cosmetic treatments*; services, supplies or drugs which are experimental in nature, or not normally supplied by a dentist
- practice; dispensing and providing prescription drugs (unless they are antibiotics needed for *emergency treatment*)
- *orthodontics*
- any treatment resulting from self-inflicted injury
- any treatment resulting from participation in any illegal or unlawful activity
- any charges for the completion of a *benefit* request form or the submission of a dental *implants benefit* request unless clinically necessary
- any costs related to the administration of general anesthetics
- charges resulting from missed appointments
- any treatment which was prescribed, planned, diagnosed as necessary or is currently taking place at the *commencement date*

- treatment, care or repair to teeth, gums, mouth or tongue in relation to "mouth jewellery"
- damage caused by tooth brushing or other oral hygiene procedures
- injury whilst participating in contact sports including but not limited to boxing, martial arts, rugby, hockey, and gaelic games unless appropriate mouth protection is worn
- reimbursement for travelling expenses or telephone calls
- mouthguards, gum shields or any other dental appliances unless in conjunction with a dental injury.

Requests for assistance is unlikely to be provided where you would be entitled to be paid under any other insurance policy you hold.

General Conditions

- Payment of *benefits* available to *you*:** under this plan payments are payable wholly at the discretion of the Plan Manager and subject to the *benefit* limits, terms and conditions and both specific and general exclusions detailed in this plan document.
- Compliance with plan terms:** discretionary *benefits* available through this plan will be conditional upon *you* complying with its terms and conditions and is contingent upon *you* maintaining *your* dental plan or warranty. Nothing in these terms limits *our* liability for death or personal injury caused by *our* negligence or the negligence of *our* employees, agents or subcontractors; for fraud or fraudulent misrepresentation; and for breach of *your* legal rights in relation to your warranty. Subject to the above *our* total liability in respect of all losses is limited to the value of the warranty assessment you purchase. We will have no liability to *you* for any loss of profit, loss of business, business interruption or loss of business opportunity.
- Change of risk:** *you* must inform us, as soon as reasonably possible, of any changes relating to *your* status, such as a change of address or contact details such as phone number and email address that *We* have on record and that *We* need to maintain in order to maintain *your* DEAP and eligibility and access to any discretionary *benefits* under this plan.
- Discretion:** *we* have ultimate discretion with respect to the payment of the *benefits* available under this plan.
- Plan Duration:** 12 months from the *commencement date* of *your* dental warranty. This plan will automatically expire on the same date and at the same time as *your* warranty.
- Cancellation:** *you* can cancel this plan by cancelling *your* dental warranty or it may be cancelled by *us* in the event that *you* no longer meet the eligibility criteria under *your* dental warranty. *We* will not, however, cancel *your* plan because of your requests for any discretionary *benefits* that may be provided. *We* may, however, exercise the right to cancel this plan in the event of *you* did any of the following:
 - misled *us* by misstatement or concealment;
 - knowingly requested *benefits* for any purpose other than as are provided for under this Plan;
 - agreed to any attempt by a third party to obtain unreasonable financial gain to *our* detriment;
 - otherwise failed to observe the terms and conditions of this Plan or failed to act with utmost good faith.

If *we* do cancel *your* plan, *we* will give 30 days written notice which will be sent by first class post to *your* last known address.

7 a) Reimbursement request for emergency treatment already completed and paid for

The plan is designed to consider reimbursement of temporary treatments required for immediate relief of pain following an accident or dental emergency. It is a condition of this plan that all claims are accompanied by a fully itemised treatment invoice and proof of payment. The treatment invoice should include the following details:

- treatment description and date of each treatment
- tooth number of each treated tooth
- fully itemised fee breakdown
- Dentist registration details and practice address

The treatment invoice and receipts should be sent directly to the plan administrator, preferably by email DEAP@certraassist.com or by post to DEAP, Certra Assist Ltd, c/o Denis UK, PO Box 6833, Basingstoke, RG24 4PR

Reimbursement is only available if completed treatment was necessary, provided by a registered Dentist and falls within the scope of limits and restrictions detailed in the plan.

b) Benefit request Procedure for follow up treatment at your regular dentist

If the accident or emergency requires follow up treatment you need to obtain prior approval for this treatment by submitting the following to the plan administrator at DEAP@certraassist.com. Please note that follow up treatment benefits will not be available unless authorised prior to treatment. Please follow the below process:

- i) Obtain a treatment plan from your regular dentist. This treatment plan should include itemized treatments showing tooth numbers and fees.
- ii) Include an accident and or emergency report describing the incident including the date, time and place of the incident and what action you took to seek professional help if any.
- iii) Forward the accident report and treatment plan along with the details of the treating practice to the Plan Administrator at DEAP@certraassist.com. Alternatively, please post to DEAP, Certra Assist, c/o Denis UK, PO Box 6833, Basingstoke RG24 4PR
- iv) The Plan Manager will provide you with an estimate of what will be paid if you go ahead with the treatment.

The plan administrator may request further clinical information if required directly from your regular dentist.

Settlement of Benefit requests: All benefits are paid on behalf of the Plan administrator Certra Assist Ltd wholly at the discretion of the plan manager. Settlements will be paid by way of direct transfer to your designated UK bank account.

If any *benefit* is provided or any payment is made under this plan as a result of an action by a third party, *you* must:

- i) provide full details of the potential claim against a third party
- ii) allow *us* to pursue any loss under this plan at *our* expense
- iii) help *us* to take legal action if *We* ask *you*

8 Overseas Emergency Treatment – Benefit request Procedure:

Subject to condition 8 above, if *you* require *emergency treatment* when abroad *you* should obtain the *emergency treatment* needed and ask for the invoice to be written in English and on return to the UK forward it to the plan administrator. Any fees for the translating of foreign documents into English for the purposes of *benefit* request settlement or administration shall be charged to *you* and deducted from *your benefit* request settlement. Benefit reimbursements will be paid in sterling at the equivalent UK *benefit* scale using the exchange rate applicable at settlement date.

9 Fraudulent or Unfounded benefit requests: If any request under this plan is in any respect fraudulent or unfounded all *benefit* paid and/or payable in relation to that claim shall be forfeited and (if appropriate) recoverable by us.

10 Waiver: waiver by *us* of any term or condition of this plan will not prevent *us* from relying on such term or condition afterwards.

11 Settlement of Benefit requests: All *benefits* are paid on behalf of the Plan administrator, wholly at the discretion of the *plan manager*. Settlements will be paid by way of direct transfer to *your* designated UK bank account.

12 Governing law and interpretation. The plan is construed under and governed by the laws of England and Wales and *you* can bring legal proceedings in respect of the products in the English courts.

13 Glossary of Terms. A separate document that defines the meaning of the words and phrases that are specific to this plan and can be identified in italics.

14 Other important terms

- a) *We* will only use *your* personal information as set out in our data protection, cookies and privacy policy as advised from time to time.
- b) *We* may transfer *our* rights and obligations under these terms to another organisation. *We* will always tell *you* in writing if this happens and *we* will ensure that the transfer will not affect *your* rights under the plan.
- c) *You* may not transfer *your* rights under the plan to any other person.
- d) Each of the paragraphs in these terms operates separately. If any court or relevant authority decides that any of them are unlawful, the remaining paragraphs will remain in full force and effect.

Glossary of Terms

Terms that are applicable to dental emergency and accident plan (DEAP)

Commencement date - The date on which *your warranting dentist* completes a *qualifying dental* examination and on which *you* agree to the applicable terms and conditions and agree to pay the required fee.

Warranty period - 12 months from the date of commencement unless cancelled beforehand.

Warrantable state - Natural teeth that are unrepaired or unrestored or that have otherwise been repaired or restored and that have been identified by *your warranting dentist* following a mandatory dental examination to be in a structurally sound and cavity free state and for which there is no clinical evidence to suggest that the identified teeth will not continue to remain in such state for the 12-month *warranty period* and beyond.

Warranted teeth - Are warrantable teeth that have not been permanently *excluded* or ring-fenced and are included in *your* dental warranty.

Qualifying dental examination - A mandatory assessment of the structural soundness of *your* natural teeth that involves a detailed tooth by tooth examination and evidential x-rays that is carried out by *your warranting dentist* that is sufficient in scope and detail to identify all active factors capable of causing or contributing to the deterioration or loss of soundness of any of *your* natural teeth during a 12 month *warranty period*.

Excluded Teeth - Any teeth identified by *your warranting dentist* during a *qualifying dental* examination that are not natural, missing or otherwise not in a *warrantable state* and that could not be repaired or restored to such a state by or under the direction of *your warranting dentist*. They are permanently excluded from any *benefits* available through *your* warranty.

Ring-fenced Teeth - Any natural teeth identified by *your warranting dentist* during a *qualifying dental examination* as not in a *warrantable state* and that can, at *your* expense, be repaired or restored to *warrantable state* by or under the direction of *your warranting dentist*. Once they have been restored or repaired to a *warrantable state* they will be included in *your* warranty.

Warranting dentist - A dentist that is appropriately qualified and that holds a current licence to practice in the United Kingdom that has completed a warranty training and certification programme and who is certified to warrant the structural soundness of his or her patient's natural teeth.

You/Your/Yourself - A patient that has undergone a *qualifying dental examination* and whose teeth have been assessed and determined by a *warranting dentist* to be in a *warrantable state* and has agreed to the applicable terms and conditions and where applicable paid the required fee.

Registered dental practice - A dental practice at which *you* are registered as a patient at the *warranting dentist*. If the registered practice is part of a group of practices the warranty will be subject to the approval of the *warranting dentist* be valid at all practices within the group within the United Kingdom.

Benefit/benefits/Cover/Coverage - The benefits or discretionary benefits available under this plan is limited to covering *your* natural or warranted natural teeth. The available benefits, type of benefit, benefit limits and scope of potential benefits available is detailed in the plan wording and subject to the specified terms and conditions and exclusions.

We/Our/Us - The plan managers that hold the power of discretion with respect to the payment of any of the *benefits* or assistance provided under this plan.

Dental treatment - Dental services or supplies described in the plan document that are clinically necessary for the maintenance and/or restoration of the oral health of *your warranted teeth* provided that such services are:

- a) provided by a dentist that is appropriately qualified and that holds a current licence to practice; and
- b) provided in accordance with accepted standards of dental practice; and
- c) received by *you* during a period of cover.

Emergency treatment - Dental services or supplies provided to *you* for the immediate relief of severe pain, trauma, swelling or bleeding by a dentist that is not *your warranting Dentist* or associated with *your warranting dentist* where *your* emergency occurred more than 50 miles from *your warranting dentist*.

Accidental injury - An injury caused by an involuntary accident involving sufficient force to damage *your warranted teeth* to the extent that they need to be repaired, restored or where that is not possible to extract and replace the damaged teeth under the applicable terms.

Permanent treatment - Final treatment undertaken to permanently repair or restore damaged natural teeth that have been temporarily repaired to a structurally sound and cavity free *warrantable state*.

Cosmetic treatment - Treatment that is not necessary to maintain oral health, and which is solely for the purpose of improving *your* appearance.

Implants - A dental implant refers to the manufactured item that is inserted into a surgically prepared hole or existing tooth socket in the jawbone. The fixture (if applicable) refers to a second item that is attached to the implant and protrudes through the gum and provides a mechanism for the attachment of either a crown or a denture.

Orthodontics - Treatment undertaken by a dentist for the prevention and correction of irregularities of the teeth.

Plan Manager and Administrator - Certra Assist Limited (15390902) Registered Office Atkinson Evans Limited, The Old Drill Hall, 10 Arnot Hill Road, Arnold, Nottingham, United Kingdom, NG5 6LJ is the Plan Manager and Administrator of the Dental Emergency and Accident Plan 'DEAP'.

Any benefits available under the plan are provided wholly at the discretion of the Plan Manager and are subject to the benefit limits, plan rules and exclusions.

Certra Assist Limited have outsourced certain aspects of the Dental Emergency and Accident Plan 'DEAP' administration to Denis UK Limited (06399615), The Manor House, Lutyens Close, Lychpit, Basingstoke, England, RG24 8AG.