

Supplementary Insurance Policy Summary

This is a brief description of your Supplementary Dental Injury and Emergency Insurance. It does not contain the full terms and conditions. Full details of the cover applicable, benefits payable, terms, conditions and exclusions are contained within the enclosed policy document. The policy document is also available from your dental practice. The Supplementary Insurance is underwritten by ACE European Group Limited and is administered by DPAS Ltd, both of which are authorised and regulated by the Financial Services Authority. DPAS is an agent of ACE and acts only for ACE in the arrangement of the Supplementary Insurance.

The Supplementary Insurance provides cover for costs incurred for temporary dental treatment as a result of a dental emergency when away from home or abroad, and cover towards the cost of permanent dental treatment following a dental injury. It also provides for the payment of out-of-hours fees when dentists are required to open their dental surgery to treat you in an emergency. There is also a hospital cash benefit payable when you are under the care of a dental or oral/maxillo facial surgeon and a cash benefit payable following the diagnosis of mouth cancer.

Policy Duration

The Supplementary Insurance is a monthly contract, which continues for as long as you continue to pay your monthly premiums. You should review and update your cover periodically to ensure it remains adequate.

Cancellation

If you decide within 14 days of receiving the policy document that this insurance does not meet your requirements, you may return the policy document to DPAS for cancellation. A full refund of any premium paid will be allowed, provided no claims have been made. As the Supplementary Insurance is an integral part of the Dental Plan, cancellation of the insurance will automatically cancel your membership of the Dental Plan.

How to make a claim under the Supplementary Insurance

A completed claim form, together with any necessary supporting documentation, should be submitted to the Insurance Department at DPAS as soon as possible (see also "How To Make A Claim" within the enclosed policy document). Claim forms are available either from your dental practice or DPAS (see Useful Contact Details). If you need to discuss your claim at any stage, please contact DPAS.

How to make a complaint in connection with the Supplementary Insurance

If you are dissatisfied with the service provided in relation to the Supplementary Insurance, or if you feel an incorrect decision has been made, please contact The Insurance Department at DPAS (see Useful Contact Details). If you are still not satisfied, please contact the Accident & Health Customer Service Manager at ACE, providing your name, address and policy details. ACE is a member of the Financial Ombudsman Service, so if your complaint still remains unresolved, you are entitled to approach the Financial Ombudsman for assistance. A leaflet explaining its procedure is available on request from ACE. These complaint procedures do not affect your legal rights.

Financial Services Compensation Scheme (FSCS)

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

Benefits	Notes
Treatment following dental injury.	To assist with the cost of treatment after a dental accident. Treatment limits and an overall limit per calendar year apply (see section 1 of the policy document).
Temporary emergency dental treatment in the UK and abroad.	Payment towards temporary emergency treatment when away from your own dentist. Treatment limits and an overall limit per incident and per calendar year apply (see section 2 of the policy document).
Out of hours consultation for dental emergency or dental injury.	Pays a call out charge to a dentist who opens their surgery to treat you in a dental emergency (weekends, Bank Holidays and 6pm to 8am weekdays. See section 2 of the policy document).
Hospital Cash Benefit.	Pays a benefit per night when staying overnight in hospital under the care of a dental or oral/maxillo facial surgeon (see section 3 of the policy document).
Mouth Cancer Benefit.	A benefit payable when first diagnosed by a qualified dentist or doctor (see section 4 of the policy document).

What are the main exclusions of the Supplementary Insurance?	Where can I find more information?
Dental injuries: i) where the need for treatment does not become apparent within one week of the injury incident; ii) resulting whilst participating in boxing or rugby unless appropriate mouth protection is worn.	Section 1 of the policy document.
Implants.	Section 1 of the policy document.
Permanent treatment in a dental emergency.	Section 2 of the policy document.
Emergency treatment provided by your own dentist or a dentist/specialist acting on your dentists behalf.	Section 2 of the policy document.
Mouth cancer diagnosed before joining the Dental Plan.	Section 4 of the policy document.

Useful Contact Details

DPAS Ltd, Place Farm Courtyard, Tisbury, Wiltshire SP3 6LW (Tel: 01747 870910 Fax: 01747 871806 Website: www.dpas.co.uk)
 ACE European Group Limited, 200 Broomielaw, Glasgow G1 4RU (Tel: 0845 8410056 Fax: 01293 597376 Email: A&Hcustserv.complaints@ace-ina.com)
 Financial Ombudsman Service, South Quay Plaza, 183 Marsh Wall, London, E14 9SR (Tel: 0845 080 1800 Fax: 02027 9641001 Website: www.financial-ombudsman.org.uk)
 Financial Services Compensation Scheme, 7th Floor Lloyds Chambers, Portoken Street, London E1 8BN Fax: 020 7892 7301



OAKDENE DENTAL CARE PLAN

Oakdene Dental Practice
 9 Long Lane
 Holbury
 Hampshire
 SO45 2LF
 023 8089 2559

OAKDENE DENTAL CARE PLAN

Most patients would prefer a payment scheme to help budget for their dental treatment. We have responded to this requirement by setting up our own scheme which we feel will suit the need for the vast majority of patients.

The Oakdene Dental Care Plan is a “maintenance care” plan. Maintenance is what all patients receive every year; examinations, cleaning, routine intra-oral x-rays, possibly emergency treatment. These basic requirements are covered by the plan in addition to a **10% discount on any other treatment required** (except implants, hygiene and cosmetic treatments)

Key Benefits

- Preventive care for long term dental health
- UK and Worldwide dental emergency cover with 24-hr helpline
- Cash benefit for dental related hospital admission
- 24-hour dental emergency help-line
- Discounts on treatment fees (10%) & oral health product (10%)
- Interest free instalment plans for treatment over £300
- Dental accident cover up to £10,000 per year for treatment required

OAKDENE DENTAL CARE PLAN

Oakdene Dental Practice Plan Level A:

£12.75 per month

- 2 full examinations per annum
- 2 cosmetic cleanings with the dentist per annum
- All routine intra-oral x-rays
- Temporary treatment of dental emergencies in the practice during surgery hours
- 10% discount on treatment fees
- 10% discount on oral hygiene care products
- UK and Worldwide accident and emergency insurance with 24hour helpline
- No joining fee

Joining the Plan

On joining the Practice your dentist will carry out a new patient examination, after which he or she will discuss your clinical treatment and advise you as to when you are able to join the plan.



To register please call into reception and speak to our friendly and helpful staff

OAKDENE DENTAL CARE PLAN

What happens if I have an emergency?

If you have an unexpected emergency whilst at home, such as an accident or toothache, then in normal circumstances you should ring our emergency number:

(Home) 023 8089 2559

If you are away from home, membership of our plan allows you to call the dental helpline who will put you in touch with a dentist who can help:

(UK) 0800 525631

If you are overseas when you need help, the dental helpline will endeavour to find an English-speaking dentist to assist you. In these circumstances please ring our helpline:

(Abroad) +44 1747 820841

How do I claim under the cover?

If you are away from home and have to see a dentist in an emergency, you should receive the temporary treatment necessary to render you in a comfortable condition. You pay that dentist and ask for a written receipt and details of treatment carried out. On your return home, we will help you complete a claim form and forward this to DPAS, who administer our plan.

We will also help you fill in a claim form should you need treatment for a dental injury. If the treatment is likely to cost more than £175 (and thus require prior authorisation from DPAS) we will provide a costed treatment plan. An assessment by an independent dentist may be requested before this permanent treatment is authorised.