

Important information.

Changes to the Dental Plan insurance policy.



We have made some changes to the Dental Plan Insurance policy which will apply when your cover renews on or after 1 September 2021.

This document is designed to help you understand these changes and should be read alongside your membership guide and membership certificate, which set out the full terms and conditions of your cover.

These changes apply to all levels of cover unless stated separately.

Level of cover

We have introduced a new level of cover, Level 5. Full details can be found in your membership guide (Section 2, 'Dental Plan Table of Cover') which shows the maximum amount of benefits you can claim up to per person per policy year. Your membership certificate will show which level of cover you have.

Policy changes

Virtual routine examinations

For all levels of cover aside from Core, we have extended our preventative cover to include a virtual routine examination benefit enabling you to claim up to £20 per policy year towards the cost. We do not pay for virtual appointments for other types of dental treatment.

Orthodontic treatment

For all levels of cover aside from Core, the Orthodontic benefit has been extended to include treatment provided by your dentist (as well as an orthodontic specialist). It must begin with an initial consultation and Index of Orthodontic Treatment Need (IOTN) assessment in person.

Anaesthetist fees

We have removed the benefit for anaesthetist fees. This is because the cost of the anaesthetic is included within the costs of the dental treatment which is covered from the relevant restorative benefit (for example, a filling).

Emergency dental treatment

For all levels of cover aside from Core, we have increased the emergency dental treatment benefit to £1,000 per policy year which consists of four emergencies where you can claim up to £250 per emergency. We also now provide cover for prescription charges and emergency dentist call out fees within this benefit.