



EFFICIENT SAFE HEALTHCARE

Accident & Emergency Dental Policy

Insurance Product Information Document

Underwritten by Capacity Insights on behalf of the insurer, Hamilton Insurance DAC. Hamilton Insurance DAC are a designated activity company authorized by the Conduct Central Bank of Ireland and subject to limited regulation by the Financial Authority and the Prudential Regulation Authority in connection with its UK branch. Registered office: 2, Shelborne Buildings, Crampton Avenue, Ballsbridge, Dublin 4, D04W3V6, Ireland.

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Accident & Emergency Dental Insurance



Insurance Product Information Document

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Company: Capacity Insights | Product: Accident and Emergency Dental Policy for registered patients of CodePlan Ltd

This document is only intended to provide a summary of the main policy coverages and exclusions and is not personalised to your specific needs in any way. Complete pre-contractual and contractual information on the product and the insurer is provided in your policy document.

What is this type of insurance?

This insurance policy provides reimbursement for a range of eligible routine and essential dental treatment..



What is insured?

This insurance covers you for the reimbursement of the following dental costs, incurred during the period of cover and up to the individual treatment limits set out in your policy document.

<input checked="" type="checkbox"/>	Emergency Treatment Benefits including:	Up to £400 in total per incident and an annual aggregate limit of £800
	Examination and polishing and treatment of sensitivity	£45 per incident
	Radiographs	Up to £30 per tooth
	Fillings	Between £40 and £95 per tooth depending on the tooth and type of filling
	Extractions	Up to £50 for 1 st tooth, £25 per additional tooth, £200 per tooth for surgical extraction
	Root extirpation	Between £45 and £70 per tooth depending on how many canals
	Treatment of acute infection	Up to £35 per incident
	Investigation and dressing	Up to £25 for 1 st tooth, £10 per additional tooth
	Re-cement crown or inlay	Up to £45 per unit
	Re-cement bridge	Up to £55 per unit
	Construction and fitting of temporary crown	Up to £65 per unit
	Temporary bridge	Up to £150 per unit
	Arrest of abnormal haemorrhage	Up to £75 per incident
	Removal of sutures placed by another practitioner	Up to £30 per incident
	Adjustment to denture	Up to £30 per incident
	Repair of denture	Up to £50 per incident
	Any other emergency treatment not already specified	Up to £70 per incident
	Out of hours call out fees	Up to £180 per incident (£25 for telephone advice only per incident)
<input checked="" type="checkbox"/>	Treatment following Accident including:	Up to a maximum of £10,000 in total per dental injury
	Extra-Oral Trauma Limits –	
	Crowns	Porcelain jacket up to £410 per unit/Ceramic bonded up to £445 per unit
	Metal bonded porcelain crown	Up to £440 per unit
	Bonded metal/porcelain bridgework	Up to £430 per retainer/£400 per pontic
	Full metal crown	Up to £320 per unit
	All metal bridge work	Up to £430 per retainer/£400 per pontic
	Laboratory constructed adhesive bridge	Up to £285 per retainer/Up to £235 per pontic
	Laboratory constructed adhesive facing or veneer	Up to £400 per unit
	Permanent denture	Up to £430 per acrylic denture/Up to £640 per metal denture
	Temporary denture following tooth loss	Up to £185 per incident
	Laboratory made temporary bridge following tooth loss	Up to £150 per incident
	Treatment not otherwise specified including:	Up to £350 per incident in total
	Root canal treatment	Between £250 and £400 per treatment depending on the type of tooth
	Implants if you do not have enhanced implant cover	The cost of clinically required implants up to the value of the equivalent bridgework within the specified limits above or replacement implants up to £1400 in total
<input checked="" type="checkbox"/>	Intra-Oral Trauma Limits-	
	Treatment on a non-restored tooth	Up to £150 per incident
	Fixed bridge repair	Up to £150 per incident
	Adhesive bridges and veneers – re-cementing only	Up to £50 per incident
	All other treatment carried out on restored tooth	Up to £50 per incident
<input checked="" type="checkbox"/>	Hospital Benefit	Up to £50 per 24 hours up to a lifetime limit of 365 days
<input checked="" type="checkbox"/>	Oral Cancer	£12,000 lifetime limit



What is not insured?

Please refer to the General Exclusions section of your policy document for a full list of exclusions.

No benefits will be paid for:

- ✗ Cosmetic treatments and treatments not clinically necessary.
- ✗ Any treatment resulting from self-inflicted injury.
- ✗ Treatment which was prescribed, planned, diagnosed as necessary or is currently taking place at the commencement date of the policy.
- ✗ Any treatment once the annual maximum number of treatments or maximum annual benefit limit has been reached for that treatment.
- ✗ Any charges for completing the claim form or submission of a claim.
- ✗ Dental implants unless clinically necessary.
- ✗ Emergency treatment received within a 20 mile radius of your registered dental practice.
- ✗ Any treatment relating to damage or injury caused whilst participating in any contact sport when the appropriate tooth, mouth or head protection was not being worn.
- ✗ Oral cancer diagnosed or suspected prior to the commencement date of the policy or is in any way due to your failure to follow medical advice.



Are there any restrictions on cover?

- ! Treatment following an accident must be undertaken by your registered dental practice unless in an emergency.
- ! All charges for treatment must be reasonable, fair, clinically necessary and in line with the normal published treatment charges of the treating dental practice.
- ! Any damage following an accident must be notified to us within 30 days and must be apparent within 7 days of the accident.
- ! We will not pay for any costs incurred by a plan member more than 18 months after the date of the accident.



Where am I covered?

Cover is provided in the UK for non-emergency treatment and on a worldwide basis in the event of a dental emergency.



What are my obligations?

- You must submit your claim as soon as possible and in any event within 31 days of completion of treatment, unless there is a justifiable reason for the delay. Ensure your dentist has provided you with the appropriate treatment invoice and submit this, along with any other required information, via one of the four methods detailed in the claims section of your policy wording.
- You must give consent for us to get, at our expense, any dental records, photographs or x-rays we need to assess the eligibility of a claim from the practitioner who has treated you.
- You must only receive treatment from a qualified dental practitioner registered with the General Medical Dental Council or another person properly qualified to perform the required treatment.



When and how do I pay?

You pay your premium to the policyholder via your registered dentist



When does the cover start and end?

Your cover starts on the day you are included under this policy, defined as the date of entry in your policy document, subject to any qualifying conditions and ends on the date that the dental practice notifies us of your removal from the policy, or the review date, whichever occurs first.



How do I cancel the contract?

If you decide that for any reason this policy does not meet your needs you can cancel your policy within the first 14 days of receiving your policy documents. Your cover will cease and you will receive a full refund of any premiums that have been paid during the 14 days, provided no claim has been made or is pending. There will be no refund of premiums if you choose to cancel your policy after the first 14 days and your cover will continue until the next review date.

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