



Welcome to
Denplan for Schools
Denplan for schools covers
pupils of Independent
Schools Across the UK
for dental injuries
and emergencies.

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Get in touch



You can get in touch with one of our team by:

Email: schools@denplan.co.uk

Phone: **0800 214 357**

Lines are open from 8:00am to 5:30pm Monday to Thursday and 8:00am to 4:30pm on Fridays.

What is a dental plan?

A dental payment plan gives you money back towards the cost of dental injury and dental emergency treatment.

How does it work?



Step 1

When the treatment has finished, pay the dentist in the usual way.



Step 2

Submit your receipt and claim form to Denplan by email or by post within 60 days of treatment.



Step 3

Wait for the money to be reimbursed from Denplan to your designated bank account.

What to do in a dental emergency

Dental pain can be a distressing experience – here is what you can do in a dental emergency.

In the UK – the child can visit any dentist and we'll help to find one where needed. Denplan for Schools covers dental injury and dental emergency treatment (see the Policy Summary for details).

Overseas – if the child has a dental emergency while abroad, they can still visit any dentist. Call the 24-hour Worldwide Dental Emergency Helpline on +44 1962 844 999. We will explain the best action to take to find a dentist in the local area.

Out of hours – If the child is in dental pain during the night or over the weekend, they can still receive dental treatment as Denplan for Schools includes cover for call-out fees and emergency treatment (see the Policy Summary for full details).



Policy Summary

This is a brief description of the Denplan for Schools plan which is underwritten by Simplyhealth. It does not contain the full terms and conditions which can be found in the Policy Terms and Conditions on pages 9-14 of this booklet.

| Benefits | Entitlement |
|--|---|
| Worldwide dental injury | Up to £10,000 each policy year |
| Cash compensation for complete loss of teeth | £1,500 for a front tooth £750 for a back tooth £100 for a wisdom tooth Overall maximum of £5,000 each policy year for this benefit. |
| Worldwide dental emergency treatment | Up to £2,000 each policy year |
| Dentist call-out fees | 100% re-imbursement |
| Hospital cash benefit For each night spent in hospital for dental treatment under the care of a consultant specialising in dental or maxillofacial surgery in relation to a dental condition | £100 each night |
| Incidental expenses Transport costs incurred for travelling to receive emergency dental treatment. Telephone costs incurred for locating a dentist. | Up to £30 each incident |
| Mouth cancer cover Towards one course of treatment for up to 18 months following diagnosis | Up to £12,000 |
| 24-Hour Worldwide Dental Emergency helpline | ✓ |

What are the main exclusions and limitations of the Denplan for Schools plan?

As with all insurance policies general exclusions and limitations apply. Here is a summary of the main exclusions and limitations of the policy.

| Exclusions | For full information please see | |
|---|---------------------------------|--|
| Claims under the dental injury or dental emergency benefit for treatment required as a result of a dental incident that occurred prior to the commencement date of the policy. | | |
| Treatment in connection with dental injuries must commence within a period of six months and must be completed within 72 months of the date of the original incident. Claims must be logged at time of injury. | be | |
| Any treatment relating to damage or injury caused whilst participating in contact sports (including training) unless the recommended mouth protection is worn. | | |
| Dental injury caused other than by a sudden, unexpected, direct external impact to the mouth. | e mouth. 9-14, Section 3. | |
| Any treatment not deemed to be clinically necessary, including but not limited to cosmetic treatment, bleaching or other tooth whitening and orthodontics unless the treatment is specifically related to a dental injury covered by this policy. | Benefits | |
| Routine dental care and check-ups. | | |
| Treatment for mouth cancer diagnosed before or within 90 days after joining Denplan or for which tests or consultations began within those 90 days, even if the diagnosis is not made until later. | | |



Policy terms and conditions

This document constitutes the full terms and conditions of **your** dental policy, which is for one **year**.

1. Definitions

The words, which appear in this policy in bold, have specific meanings, which are explained below:

benefit(s) - the benefit(s) that we will pay to you.

call-out fee – the fee claimed for the provision of temporary emergency treatment or treatment in the event of a dental injury where it has been necessary to re open the practice in the UK between the hours of 6.00pm and 8.00am on weekdays, weekends and Bank Holidays. Where a fee is claimed for re-opening a practice overseas, treatment must have been provided outside the practice's normal working hours.

claim - a claim for benefit under this policy.

commencement date – the first academic school day of the term in which we receive the premium for an **insured child**.

contact sports – specifically: rugby, lacrosse, hockey, boxing, wrestling, ice hockey and any sport where it is common practice to wear mouth protection.

dental injury – an injury to the teeth or supporting structures (including damage to orthodontic appliances whilst being worn) which is directly caused suddenly and unexpectedly by means of a direct external impact to the mouth.

emergency dental treatment – emergency dental treatment or pre-authorised permanent dental treatment provided at the initial emergency appointment, urgently required for the relief of severe pain, inability to eat, arrest of haemorrhage, the control of acute infection or a condition which causes a severe threat to your general health.

insured child – the child attending the independent school and accepted for cover by us.

mouth cancer – a malignant tumour, with its primary site being in the hard and soft palate, gland tissue (including accessory, salivary, lymph and other gland tissue) in the mucosal lining of the oral cavity but excluding the tonsils, which is characterised by the uncontrolled growth and spread of malignant cells and the invasion of tissue.

United Kingdom (UK) - England, Wales, Scotland, Northern Ireland, Isle of Man and the Channel Islands.

we, us, our – Denplan Limited, registered number 1981238.

year – 1st September to 31st August or the period of time between the commencement date and 31st August.

you or your – parent or legal guardian of the insured child.

2. Eligibility

The insured child can only be covered under the Terms and Conditions of this policy, from the commencement date, if your child is entitled to enter the scheme in accordance with the eligibility rules defined by the school.

Your child will be covered during all school holidays until the end of the school term in which the insured child ceases attendance at the school.

3. Benefits

The **insured child** has the cover described in this policy document.

We will pay the benefits shown below to you or the insured child provided that you and the insured child comply with the Terms & Conditions of this policy:

- i. Worldwide Dental injury
 - For the costs of dental treatment received by the insured child in connection with a dental injury which happens after the commencement date up to a limit of £10.000 per year. Benefit will only be payable for treatments in connection with dental injuries that commence within a period of six months of the date of the original incident, and while the policy is in force. If this spans a renewal period we will continue to cover the insured child's treatment after the renewal date. However **benefit** is not payable for treatment received more than 72 months after the date of the dental injury. If treatment cannot be completed within 72 months, please contact Denplan for advice.
- ii. Cash compensation for loss of teeth As an additional part of the dental injury cover, compensation is payable for complete loss of the insured child's adult teeth following a dental injury, up to £5,000 each year.
- £1,500 for the complete loss of a front tooth (incisor or canine)
- £750 for the complete loss of a back tooth (premolar or molar)
- £100 for the complete loss of a wisdom tooth

- iii. Worldwide emergency dental treatment
 For the cost of emergency dental treatment
 anywhere in the world up to £2,000 each
 year. For the avoidance of doubt any
 subsequent treatment required after the initial
 appointment is specifically excluded.
- iv. Dentist call-out fees.
 - We will pay 100% of the cost of emergency dental call-out fees and/or the cost of an emergency telephone consultation with a dentist. By call-out we mean the necessity for a dentist in the UK to re-open the practice between the hours of 6.00pm and 8.00am on weekdays or weekend and bank holidays or outside the UK, outside the practice's normal working hours to provide emergency dental treatment or treatment in the event of a dental injury.
- V. Hospital cash benefit.
 If the insured child is admitted overnight as an in-patient to a licensed medical or surgical hospital under the care of a consultant specialising in dental or maxillofacial surgery in relation to a dental condition, £100 each night.
- vi. Incidental expenses Cover for the cost of incidental expenses in relation to emergency dental treatment (for example telephone costs for locating a dentist, transport costs incurred for travelling to receive emergency dental treatment) up to £30 for each incident. Receipts will be required.
- vii. Mouth cancer cover

This benefit covers the insured child for treatment charges up to £12,000 for treatment of mouth cancer.

4. Exclusions

This policy does not provide dental cover for:

- Claims under the injury or dental emergency benefit for treatment required as a result of an incident that occurred prior to the commencement date of the policy.
- ii. Routine dental care and check-ups.
- Injury caused by food stuff (including foreign bodies therein) under the dental injury benefit.
- iv. Payments in excess of the maximum benefits for each year as stated above.
- Prescription charges unless related to claims paid under the worldwide dental injury or worldwide emergency dental treatment benefits
- The provision of mouthguards, gum shields or any dental appliances unless related to a dental injury covered under this policy.
- vii. Bleaching or other tooth whitening unless the treatment is specifically related to a dental injury covered by this policy.
- viii. Routine orthodontic treatment.
- ix. Cosmetic treatment, meaning dental treatment not necessary for the establishment or maintenance of oral health.
- x. Treatment, care or repair to or in connection with "tooth jewellery".
- xi. Mouth cancer diagnosed before or within 90 days of when the insured child was first provided with mouth cancer cover by us or for which tests or consultation began within those 90 days, even if the diagnosis is not made until later.
- xii. Charges for consultations or tests for noninvasive tumours under the mouth cancer cover benefit.
- xiii. Damage or injury caused whilst training for or participating in contact sports unless appropriate mouth protection is worn.
- xiv. Self-inflicted injuries.
- xv. Loss of, or damage to dentures or orthodontic appliance, other than whilst being worn.

5. Claims general

When determining claims Denplan acts on behalf of the underwriter, Simplyhealth. Denplan has the delegated authority to do so, and in this instance is not acting as **your** intermediary, but as the agent of Simplyhealth.

- i. (a) The insured child's claim must be notified to Denplan by completion of the official claim form.
 - (b) All claim forms must be fully completed and signed by you or a school representative and must quote the name of the insured child's attending school. Incomplete claim forms will be returned.
 - (c) Incomplete claim forms may cause a delay in your claim being assessed. In any event claim forms must be completed at your own expense and should be received by Denplan within 60 days of receiving treatment, if reasonably possible.
 - (d) Your claim must be supported by proof of payment detailing the dates and costs of each individual treatment (if appropriate).
- ii. No benefit will be payable if Denplan has not received proof of all facts relevant to your claim. This shall include but not be limited to:
 - (a) proof of the **insured child's** eligibility for cover on the date of treatment:
 - (b) proof of the treatment, this may be by way of a medical report (at your own expense);
 - (c) for claims under the worldwide dental injury benefit, details pertaining to the circumstances of the dental injury the insured child has experienced.

In all cases **we** retain the right to recover any incurred costs as a result of a third party's involvement. In addition, if the **insured child** is covered by another insurance policy **we** reserve the right to pay an appropriate apportionment of the **claim**.

- iii. If the treatment is received abroad then we will pay benefits in pounds sterling. This means we will need to convert the expenditure into sterling using FXConverter at www.oanda.com. The exchange rate will be calculated at the rate in force on the date of the receipt.
- iv. There may be instances where we are uncertain about the eligibility of a claim. If this is the case we ask to see a copy of the insured child's dental records.
- You must tell us if you can claim any of the cost from another insurance policy or other third party.

6. General

- This policy is a contract between the school and us, and the school pays the premium for the insured child directly to us.
- If we do not receive the premium we may suspend the insured child's benefits, and take all necessary action to recover monies outstanding.
- iii. The law of England and Wales will apply to this policy.
- iv. The policy is written in English and all other information and communications to you relating to the policy will also be in English.
- v. If you (or anyone acting on your behalf) make a claim under the policy or obtain cover knowing it to be false or fraudulent, we can refuse to make benefit payments for that claim and may declare the cover void, as if it never existed. If we have already paid benefit we can recover those from you. Where we have paid a claim later found to be fraudulent, (whether in whole, or in part), we will be able to recover those sums from you and/or take the appropriate legal action against you.

How is my personal data protected?

We will hold and use information relating to you. We call this information personal data. The main purpose which we hold and use personal data for is to enable us to provide insurance services to you in relation to this policy. Other purposes which we use personal data for are to identify, analyse and calculate insurance risks, to improve our services to you and our other customers, to comply with legal obligations which we are subject to, to protect our interests and for fraud detection and prevention.

We may receive and share personal data with persons appointed by you or who provide a service to you, for example your healthcare providers (such as an insurance intermediary, or a hospital or specialist). We may provide personal data to persons appointed by us who assist us in relation to the services we provide to you, including companies operating outside the United Kingdom and to organisations responsible for fraud prevention.

Where we have your agreement we will use your personal data to provide you with offers of products and services from Simplyhealth. Where you have agreed we will share your personal data with other companies within the Simplyhealth Group and carefully selected third parties in order for them to provide you with offers of products and services.

We operate strict procedures to ensure that personal data is kept secure.

You have the right to see your personal data which is held by us. There may be a charge if you want to do this. If you have any questions or concerns about the personal data we hold and how we use it please write to: The Data Protection Officer, Denplan Corporate, Denplan Court, Victoria Road, Winchester, SO23 7RG. Denplan records telephone calls for training and quality assurance purposes.

What regulatory protection do I have?

Denplan Limited is an appointed representative of Simplyhealth Access, which is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority (FCA) and Prudential Regulation Authority (PRA).

Financial services in the UK are regulated by both the PRA and FCA. Both regulators are committed to securing the appropriate degree of protection for consumers and promoting public understanding of the financial system. The PRA and FCA have set out rules which regulate the sale and administration of general insurance which Simplyhealth and Denplan must follow when dealing with you. Simplyhealth Access Financial Services Register number is 202183. You can check this on the Financial Services Register by visiting the Financial Conduct Authority's website www.fsa.gov.uk/register/home.do or by contacting the Financial Conduct Authority on 0800 111 6768.

The Financial Services Compensation Scheme (FSCS)

In the unlikely event that Simplyhealth Access becomes insolvent and is unable to pay the benefits under **your** scheme, **you** may be entitled to claim compensation from the Financial Services Compensation Scheme (the FSCS). You will need to meet specific FSCS criteria depending on your particular circumstances. Further information about the operation of the scheme is available on the FSCS website: www.fscs.org.uk. To find out whether **you** would be eligible to claim under the scheme **you** should contact the FSCS (0800 678 1100).

How to complain

It is always **our** intention to provide a first class standard of service. However, should **you** wish to raise any concern, complaint or recommendation **you** can do so in the following way:

 a. In the first instance, you should contact Customer Services on 0800 838 951 or write to:

Corporate Customer Service Manager

Denplan Corporate, Denplan Court, Victoria Road, Winchester SO23 7RG

Email: corporate@denplan.co.uk

Please quote **your** personal policy or claim number. **We** will investigate any complaint and issue a final response.

 b. If you are not satisfied with our response, or we have not replied within eight weeks, you have the right to refer your complaint to:

Financial Ombudsman Service

Exchange Tower London E14 9SR

Fmail:

complaint.info@financial-ombudsman.org.uk

The Financial Ombudsman Service will only consider **your** complaint if **you** have given **us** the opportunity to resolve the matter first.

This procedure will not prejudice **your** right to take legal proceedings. However, please note that there are some instances when the Financial Ombudsman Service cannot consider complaints.

Dental first aid tips

Rinse the mouth vigorously with luke-warm (body temperature) salt water to dislodge trapped food or debris

Clean the area around the sore tooth thoroughly



Get in touch



You can get in touch with one of our team by: Email: **schools@denplan.co.uk**

Phone: **0800 214 357**

Lines are open from 8:00am to 5:30pm Monday to Thursday and 8:00am to 4:30pm on Fridays.





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Part of Simplyhealth, Denplan Ltd is an Appointed Representative of Simplyhealth Access for arranging and administering dental insurance. Simplyhealth Access is incorporated in England and Wales, registered no. 183035 and is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Denplan Ltd is regulated by the Jersey Financial Services Commission for General Insurance Mediation Business. Denplan Ltd only arranges insurance underwritten by Simplyhealth Access. Premiums received by Denplan Ltd are held by us as an agent of the insurer. Denplan Ltd is registered in England No. 1981238. The registered offices for these companies is Hambleden House, Waterloo Court, Andover, Hampshire SP10 1LQ.