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## Boots Dental Plan

### Benefit Schedule

this benefit schedule must be read in conjunction with the policy booklet to obtain the full terms and conditions

Plan Type : Core Plan

*This product has been designed to cover the costs of NHS treatment charged by NHS dentists only in England and Wales.*

Category of treatment	Total maximum claim amount per year per insured person
Routine Benefit	£500 (subject to the individual treatment amounts shown in the Benefit Schedule)
Accidental Dental Injury Benefit	£500 (subject to the band reimbursement levels shown below)
Hospital Cash Benefit	£3,750 (£75 per day, per insured person up to a maximum of 50 nights per policy year)

Every time you make a claim in **England or Wales**, whether for one treatment or many, your dentist will advise you which Band is applicable to you. If you require treatment across different bands we shall reimburse you to the limits applicable for the highest band only.

Every time you make a claim in **Scotland and Northern Ireland** we shall pay an amount equal to the lowest of either; what you have paid or the banding appropriate for your most expensive treatment.

Regardless as to where the treatment is carried out, all claim forms must be fully completed and accompanied by the original receipts and submitted within 2 months of the last date of treatment. **Failure to do so SHALL result in non settlement of the claim.**

The benefits provided for the treatments listed below will only be provided where they are offered under the NHS regulations, e.g. white fillings and white crowns are only provided for the "smile line" and not the back teeth.

BAND	What's Covered	Reimbursement Level in England and Wales	Reimbursement Level in Scotland and Northern Ireland
BAND 1	All types of Examinations Small / Medium / Large X-Rays Lateral head plate X-Rays Study Casts Colour photographs Simple Scaling / Hygiene Advice Stoning / smoothing Sensitive cementum / dentine treatment Removal of fractured crowns Preparation of tooth for over denture Acute condition treatment	Any treatment or combination of treatments listed in Band 1 only, carried out over a course of treatment from the date your dentist first identifies the treatment as medically necessary, shall be reimbursed to a maximum of <b>£17.50</b> .  Reimbursement is limited to the annual maximum limit of £500 for routine and accidental treatment  If you require treatment listed under other Bands we shall reimburse you to the limits applicable for the highest Band only.	Any treatment or combination of treatments listed in Band 1 only, carried out over a course of treatment from the date your dentist first identifies the treatment as medically necessary, shall be reimbursed to a maximum of <b>£17.50</b> or the amount you have paid if this is a lesser amount.  Reimbursement is limited to the annual maximum limit of £500 for routine and accidental treatment  If you require treatment listed under other Bands we shall reimburse you to a maximum of the limit applicable for the highest Band only or the amount you have paid if this is a lesser amount.
BAND 2 (Inclusive of Band 1)	Chronic Periodontal Care Fillings Root Canal Treatments Extractions & Removals Dentures – Adjustments & Additions Dental Appliances Repairs to dentures and appliances Amalgam fillings (1 to 3 surfaces) Composite filling Restoration (1 to 2 incisal angles) Restoration (1 to 2 incisal edge) Glass ionomer	Any treatment or combination of treatments listed in Band 1 and 2 only, carried out over a course of treatment from the date your dentist first identifies the treatment as medically necessary, shall be reimbursed to a maximum of <b>£48.00</b>  Reimbursement is limited to the annual maximum limit of £500 for routine and accidental treatment.  If you require treatment listed under other Bands we shall reimburse you to	Any treatment or combination of treatments listed in Band 1 and 2 only, carried out over a course of treatment from the date your dentist first identifies the treatment as medically necessary, shall be reimbursed to a maximum of <b>£48.00</b> or the amount you have paid if this is a lesser amount.  Reimbursement is limited to the annual maximum limit of £500 for routine and accidental treatment.  If you require treatment listed under other

This Schedule is valid from: 1<sup>st</sup> April 2013 to 31<sup>st</sup> March 2014 but specific cover may vary subject to the actual renewal date of a policy



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	Pin or screw retention Replacement of temporary bridge All other temporary bridges	the limits applicable for the highest Band only.	Bands we shall reimburse you to the limits applicable for the highest Band only or the amount you have paid if this is a lesser amount.
<b>BAND 3</b> (Inclusive of Band 1 and Band 2)	Porcelain Veneers Inlays (1 – 3 surface cavities) Crown – precious metal Crown – porcelain jacket Core & post Pin screw retention Bridgework Dentures Dentures in resin Obturator Impressions	Any treatment or combination of treatments listed in Band 1, 2 and 3 only, carried out over a course of treatment from the date your dentist first identifies the treatment as medically necessary, shall be reimbursed to a maximum of <b>£209.00</b>  You can submit two band 3 claims in a policy year up to the annual maximum limit of £500 for routine and accidental treatment	Any treatment or combination of treatments listed in Band 1, 2 and 3 only, carried out over a course of treatment from the date your dentist first identifies the treatment as medically necessary, shall be reimbursed to a maximum of <b>£209.00</b> or the amount you have paid if this is a lesser amount.  Reimbursement is limited to the annual maximum limit of £500 for routine and accidental treatment
Occasional & Emergency Dental Treatment  Emergency treatment is defined as, <i>"Dental treatment required for the immediate relief of severe pain, trauma, swelling or hemorrhage".</i>	Temporary bridge or crown Re-fix / Repairs to inlays, crowns & bridges Dressings Incision of abscess Treatment of infected sockets Removal of crown fracture Domiciliary & Emergency visits	<b>Up to £17.50</b> for each Occasional & Emergency Treatment claim  No limits to the number of claims in a policy year.  Annual limits for Routine & Accidental apply	<b>Up to £17.50</b> for each Occasional & Emergency Treatment claim  No limits to the number of claims in a policy year.  Annual limits for Routine & Accidental apply

**THIS PLAN COVERS NHS TREATMENT BY AN NHS DENTIST ONLY**  
*IT CANNOT BE USED TO CONTRIBUTE TO THE COSTS OF ANY PRIVATE DENTAL TREATMENT*