Your membership guide

Bupa Dental Choice v18

Group Policy - Sponsor Pay September 2018 **Please retain**



About this guide

Welcome to your Bupa Dental Choice membership guide.

At Bupa, we know that insurance can be hard to follow. That's why we've made this guide as simple as possible. You'll find individual chapters that deal with each aspect of your Bupa cover, including a step-by-step guide to making a claim.

Please make sure that you keep this guide somewhere safe. You'll need it when you come to claim.

Wherever you see words or phrases in **bold italics**, these have technical meanings which are set out in the glossary towards the end.

How does the membership guide work with my membership certificate?

Your membership certificate lists the cover option you have chosen. This membership guide explains the benefits available to you for that level of cover. Please read this membership guide together with your membership certificate as together they set out full details of how your dental insurance works.

Statement of demands and needs

The cover provided under the membership of the *scheme* is generally suitable for someone who is looking to cover the cost of a range of dental treatment expenses. We have not provided you with any advice about your cover and how it meets your individual needs. Please read your membership certificate and membership guide to make sure that this policy still meets your needs.

How do I contact Bupa?

We're always on hand to help.

For any queries about your cover please call us on 0800 237 777*.

You can also write to us at Bupa, Anchorage Quay, Salford Quays, Salford M50 3XL

If you require correspondence and marketing literature in an alternative format, we offer a choice of Braille, large print or audio. Please get in touch to let us know which you would prefer.

For those with hearing or speech difficulties who use a textphone, call us on 0345 606 6863.

^{*}We may record or monitor our calls.

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Introduction

Bupa Dental Choice is a group insurance policy governed by the **agreement**. The terms and conditions of your membership have been agreed between your **sponsor** and **Bupa**. There is no legal contract between you and us for your cover under the **agreement**. Only **Bupa** and your **sponsor** have rights under the contract of insurance, although you and your **dependants** will have access to the claims and complaints process as set out in this membership guide.

This membership guide describes the rules and benefits that apply to your membership. This membership guide should be read in conjunction with your membership certificate. Together these documents set out the details of your membership and that of your *dependants* (if any) of the *scheme*.

How your membership works

Enrolment

Your date of enrolment in the **scheme** will be the date shown as the **cover start date** on your first membership certificate. The date will be the start of your current continuous period of membership of the **scheme** under the **agreement** between the **sponsor** and **Bupa**.

The membership of any *dependants* will start on the date shown as the *cover start date* as shown on your membership certificate. This date will be the start of their current continuous period of membership for the *scheme* under the *agreement* between the *sponsor* and *Bupa*.

Eligibility criteria

Who can be a *main member*?

Anyone who is:

- aged 18 or over,
- a resident in the *UK* and an employee of the *sponsor*, or
- a retired employee who, at the time of retirement was a main member of the scheme

You can add your **partner** as a **dependant**. If you wish to add a child as a **dependant**, they must be at the **cover start date**:

- under 24 years old and not married, and
- a resident in the UK.

Renewal

Bupa Dental Choice is an annual contract between your **sponsor** and **Bupa**. Your membership of the **scheme** will renew on the **annual renewal date** in accordance with the terms and conditions of this membership guide subject to the **sponsor** renewing the **scheme**.

Payment of subscriptions

The **sponsor** must pay to us subscriptions and any other payment due for your membership and that of any **dependants** covered under the **agreement**, as and when they are due.

Bupa Insurance Services Limited acts as **our** agent for arranging and administering your policy. Subscriptions are collected by Bupa Insurance Services Limited as our agent for the purpose of receiving, holding and refunding premiums and claims monies.

How your membership can end

Bupa can end a person's membership, void a person's membership as if it never existed or refuse to pay a claim in full or part if there is reasonable evidence that you or a **dependant** did not take reasonable care in answering **our** questions. By this **we** mean giving false information or keeping necessary information from **us**.

- If intentional, we may void your membership and refuse all claims.
- If careless, **we** may:
 - end your membership and refund any subscriptions you have paid (and other associated taxes) which relates to the period after the membership ended, or
 - void your membership and refuse all claims and refund all of your subscriptions, or
 - change the cover, or
 - need to increase your subscription or we could reduce any claim payment by the same proportion.

The **sponsor** may terminate your membership of the **scheme** or that of your **dependants** at any time by notifying **Bupa** in writing.

Your membership of this **scheme** and that of your **dependants** will immediately come to an end if:

- the agreement between Bupa and the sponsor under which you were enrolled as a member of the scheme terminates
- the sponsor does not pay on or before its due date the required subscriptions and any other payment due under the agreement for you and your dependants
- you cease to meet the eligibility criteria for membership of the scheme as agreed between Bupa and the sponsor (see the section 'Eligibility criteria' on page 5)
- you die.

The cover for any child you add as a *dependant* will end at the next *annual renewal date* following their 24th birthday.

In the event of your membership terminating as a result of ceasing to be employed by the *sponsor*, or the company, association or organisation ceases to be a *sponsor*, *Bupa* will give the *main member* the opportunity to join an alternative Bupa Dental product, where available, and subject to amendment from time to time, although this cannot be guaranteed. If you transfer within one month, *we* will not add any special restrictions or exclusions to your cover under the new product, that are personal to you, other than these which apply to you under this *scheme*.

Alterations to the agreement

We can make changes to the terms and conditions of your membership of the **scheme** and that of the **agreement** between the **sponsor** and **Bupa** at the **annual renewal date** or at any time if required to by law or regulation.

These changes could affect the amount and type of cover provided under the **scheme**.

We may also change or withdraw the amount of any discount or preferential rates at the **annual renewal date**.

We can, at any time, change the amount to be paid to **us** in respect of Insurance Premium Tax (IPT) or any other taxes, levies or charges that may be introduced and which are payable in respect of your cover if there is a change in the rate of IPT or if any such taxes, levies or charges are introduced.

If **we** do make any changes to the terms and conditions of your membership **we** will write to tell you at least 28 days before the change takes effect. If the changes are required to be made more quickly by law or regulation **we** will notify you as early as possible.

If you do not accept any of the changes you can end your membership by informing your **sponsor** either:

- within 28 days of the date on which the change takes effect, or
- within 28 days of **us** telling you about the change

whichever is later.

General

The terms and conditions of your membership and that of your *dependants* shall be governed by English law and all matters regarding your membership and theirs shall be subject to the exclusive jurisdiction of the courts of England and Wales.

Bupa will not return, and may dispose of, any documents submitted in support of any application or claim made in connection with your membership or that of your **dependants** unless requested to the contrary in writing at the time of submission.

No amendment or variation to the terms and conditions of your membership or that of your *dependants* shall be valid and effective unless made in accordance with these rules and benefits or specifically agreed between your *sponsor* and *Bupa* and also confirmed in writing. Unconfirmed verbal communications cannot override the written terms and conditions of your membership or those of your *dependants*, nor amount to any agreement to vary any of its terms. No third party is authorised to effect any such amendment or variation on behalf of *Bupa*, or to waive any of *Bupa's* rights.

Any failure by **Bupa** to exercise, or any delay by **Bupa** in exercising, any of its legal rights or remedies under the **agreement** shall not amount to any waiver by **Bupa** of any such rights or remedies.

You must notify **Bupa** in writing as soon as is reasonably practicable of any claim or right of action you or any of your **dependants** have against any third party in connection with circumstances which may give, or has given, rise to a claim against **Bupa** for the payment of **benefits**.

Benefits are paid on condition that you and your **dependants** take all steps which **Bupa** may reasonably require, for the purpose of reimbursing **Bupa**, to recover from a third party any sums paid to you by **Bupa**.

You must take any reasonable steps **we** ask of you to recover from the third party the cost of the **treatment** paid for by **us** and claim interest if you are entitled to do so.

Notices

Any notice or communication which is given under or in connection with this **scheme** shall be in writing and shall be sent by pre-paid post, recorded delivery or delivered personally in the case of **Bupa** to **Bupa's** administrative address at Anchorage Quay, Salford Quays, Salford M50 3XL and in your case or the case of the **sponsor** to your address, or the **sponsor's** address, as the case may be, last notified in writing to **Bupa**. In the absence of evidence of earlier receipt, any notice or communication shall be deemed to have been received on the day following delivery if delivered personally, or three days after posting if sent by pre-paid post.

Claiming

Before your treatment

Before you or your *dependants* have any *treatment* unless it's for *emergency dental treatment*, it's important to check your policy and what you're covered for.

Always call us first if:

- you're unsure of what your benefit limits are
- you or your dependants are unsure what's covered
- oral cancer treatment is required, as this needs to be pre-authorised prior to receiving any treatment. Please refer to oral cancer treatment section on page 20.

Call the Bupa Dental helpline on 0800 237 777*.

After your treatment

What happens about paying?

How you pay for your *treatment* depends on which centre you visit:

In selected Bupa dental centres

We'll usually be able to settle your claim in certain dental centres, so there's no need to pay unless there are any costs that fall outside the limits of your cover.

To check which Bupa dental centres offer this service please call **0800 237 7777*** or visit **finder.bupa.co.uk**

Remember to take your membership number with you and give it to the receptionist.

^{*}We may record or monitor our calls.

In any other dental centre

You'll need to pay for your treatment yourself and claim some or all of it back, depending on the limits of your cover.

- Remember to get a receipt as you'll need this to make your claim.
 Your receipt must show: name and contact details of the dentist, date and type of *treatment*, and the name of the person who has had the *treatment*.
- 2. You can make your claim online or by post. Either way, make sure you include: your Bupa membership number, your receipt and the bank account you would like your authorised claim to be paid into.

Online

- Visit bupa.co.uk/dental/ finance-and-insurance/ make-claim
- Scan and upload your receipt
- Submit your claim

By post

- Download a claim form at bupa.co.uk/dental/ finance-and-insurance/ make-claim
- Fill in the form and post it, along with your receipt, to:
 Bupa Dental, Anchorage
 Quay, Salford Quays,
 Salford M50 3XL
- 3. As long as we have all the information we need from you, you can expect your claim to be processed within seven to ten days. Your money will be paid directly into your bank account or by cheque depending on which payment method you've chosen.
 - For any **dental treatment** received outside the **United Kingdom**, the amount of any **benefits** to be paid to you shall be calculated by **Bupa** using the average of currency exchange rates shown on www.oanda.com applicable on the date on which the claim is paid.

Any **treatment** costs you incur that are not covered under your **benefits** are your responsibility.

Payment of **benefits** is conditional upon your **sponsor** having paid all subscriptions due on or before the date of the **treatment** for which you are claiming benefits.

Claims should be submitted to **Bupa** as soon as is reasonably practicable and not later than six months after **treatment** is completed (where reasonably possible).

Payment of **benefits** is conditional upon **Bupa** receiving:

- a written claim for payment within six months from the date of the completion of the *treatment* (where reasonably possible), such proof of entitlement to receive the *benefits* claimed as *Bupa* may reasonably request (including but not limited to (i) any dental reports and other information, and (ii) the results of an independent dental examination which *Bupa* may require you to undergo at its expense)
- copies or uploads of your original itemised receipts/fully paid invoices, scans or clear photographs are accepted.

Should a claim be made for the payment of **benefits** in respect of the cost of **emergency dental treatment**, **general dental treatment** and **dental injury treatment** received outside the **United Kingdom**, the amount of any **benefits** to be paid to you shall be calculated by **Bupa** using the average of currency exchange rates as applicable on www.oanda.com on the date on which the claim is paid. Also see section on 'General rules on benefits'.

We may not pay a claim in full or part if there is reasonable evidence that you or a **dependant** did not take reasonable care in answering **our** questions. By this **we** mean giving false information or keeping necessary information from **us** if:

- intentional, we may void your membership and refuse all claims
- if careless, **we** may:
 - end your membership and refund any subscriptions you have paid (and other associated taxes) which relates to the period after the membership ended or
 - void your membership and refuse all claims and refund all of your subscriptions, or change the cover, or
 - need to increase your subscription or we could reduce any claim payment by the same proportion.

General rules on benefits

Bupa agrees to pay **benefits** in respect of **dental treatment** received by you and each of your **dependants** in accordance with the terms and conditions of your membership current when the **dental treatment** was received provided that whoever receives the **dental treatment** does so during their period of membership.

We only pay for the **dental treatment** and **oral cancer treatment** specified in the Bupa Dental Choice benefits section of this membership guide.

Benefits are only payable by **us** to the extent that the fees and expenses incurred for **dental treatment** and **oral cancer treatment** are up to an amount which is reasonable and customary and up to the maximum benefit limits set out in this membership guide or the **consultant fees schedule**.

By reasonable and customary **we** mean the amount you are charged by **dental professionals**, **recognised practitioner** or **partnership facility** and what you are charged for has to be in line with what the majority of **our** other members are charged for similar **treatment** or services.

Bupa will only pay **benefits** for necessary **dental treatment** provided by a **dental professional**. Where a **dependant** makes a valid claim **Bupa** will only reimburse the **main member** for that claim. **Benefits** are payable by **Bupa** only to reimburse fees and expenses actually incurred by you or your **dependants**.

Orthodontic treatment is only available when it is grade 4-5 on the **IOTN scale** (**Index of Orthodontic Treatment Need**) and is **clinically necessary**. It must be carried out by an orthodontic specialist who is registered with the General Dental Council.

In exceptional circumstances, **we** may agree to pay for the costs of **dental treatment** to which you are not entitled under your cover. If **we** do, this payment will count towards the maximum amount **we** will pay under your related cover. Making these payments does not oblige us to make them in the future.

Oral cancer rules on benefits

Being referred for oral cancer treatment using a recognised practitioner and partnership facility.

See also section 2 Oral cancer section page 20.

Your consultation or **treatment** must follow an initial referral by a **dental professional** or **GP** after you have seen the **dental professional** or **GP** in person. However, for **day-patient treatment** or **in-patient treatment** provided by a **consultant** such referral is not required in the case of a medical emergency.

Your cover for **oral cancer treatment** costs depends on you using certain **recognised practitioners** and **partnership facilities**. Please see benefits table for **oral cancer treatment** on page 20.

Please note: The medical practitioners other healthcare professionals and facilities you use can affect the amount **we** pay you.

Your **treatment** costs are only covered when the person who has overall responsibility for your **oral cancer treatment** is a **consultant**. If the person who has overall responsibility for your **treatment** is not a **consultant**, then none of your **oral cancer treatment** costs are covered.

Important: Always call *us* before arranging any *oral cancer treatment* to check your *benefits* and whether the chosen medical practitioner or other healthcare professional or *partnership facility* is recognised by *us* for treating the medical condition you have and provides the type of *treatment* you need. Any *treatment* costs you incur that are not covered under your *benefits* are your responsibility.

Exclusions on benefits

Benefits are not payable for:

- cosmetic treatment
- surgical implants where they are to be used for the correction of pre-existing
 gaps that occurred prior to the cover start date of your policy (including any
 gaps which have previously been corrected with the use of a bridge or crowns)
- any fees in relation to any arrangement you may have with a third party to cover dental services
- sports mouthguards and snoring devices
- the replacement of a removable prosthetic appliance which has been lost or stolen
- the replacement of a prosthetic appliance which could have been repaired according to generally accepted dental standards
- the replacement of a prosthetic appliance within five years (except dentures) of it having been fitted

- any dental treatment resulting from or related to any injury sustained whilst participating in a physical contact sport such as rugby or boxing
- any dental treatment resulting from or related to a self-inflicted injury
- any dental treatment required as a result of nuclear or chemical contamination, war, invasion, acts of foreign enemies, hostilities (whether war be declared or not), civil war, rebellion, revolution, terrorism, insurrection, or military or usurped power
- any costs or expenses for experimental or unproven dental treatment and oral cancer treatment will not be reimbursed unless incurred with Bupa's prior written approval
- self-administered drugs such as antibiotics and painkillers or prescription charges
- any oral cancer treatment received by you or any of your dependants if the oral cancer was diagnosed:
 - before the **cover start date**
 - during the first six months of **cover start date**
- any oral cancer treatment if the person receiving the treatment has not been referred to the specialist registered medical practitioner by their GP or dental professional
- any dental injury treatment arising as a direct or indirect result of an external impact which occurred before the cover start date
- dental procedures carried out in hospital, for example wisdom teeth extractions
- dental consumables such as toothbrushes, mouthwash and dental floss
- treatment care or repair to gums, teeth, mouth or tongue in connection with mouth jewellery
- damage caused by toothbrushing or oral hygiene procedures.

Important: Other than *cash benefit for hospital stay*, the Bupa Dental Choice *scheme* is not intended to provide cover for *in-patient treatment* or *day-patient treatment*, such as wisdom tooth extraction. *Consultants* and hospital fees will only be covered for *oral cancer treatment*. Please refer to the '*oral cancer section*' on page 20 for full details.

Bupa Dental Choice benefits

There are four main sections to this part of the membership guide:

Section 1: Overall annual benefit limits and benefit limits for individuals for *general* dental treatment, emergency dental treatment and dental injury treatment

Section 2: Benefit limits for oral cancer treatment, UK only

Section 3: Annual cash benefit limit for hospital stay, UK only

Section 4: About NHS treatment

Section 1: Annual benefit limits and benefit schedule for general dental treatment, emergency dental treatment and dental injury treatment

Use this section to understand the financial limits of your chosen level of cover for:

- emergency dental treatment
- dental injury treatment and
- general dental treatment

Table one: Overall annual benefit limits

This shows the total amount of **benefits** we pay up to in each year depending on which level of cover you have chosen.

If you have a partner included on your cover: we will pay up to the limits below for you and your **partner** individually.

If you have children included on your cover: we will pay up to the limits below for your children collectively and not per child.

	Core	Classic	Premier	Platinum	Prestige
NHS treatment		No annual	benefit limits -	– paid in full*	
Emergency dental treatment (includes worldwide cover)	reimbursement for NHS treatment.* Reimbursement of private treatment up to the NHS Band limit applicable at the date of the treatment.	up to £800 per year	up to £800 per year	up to £800 per year	up to £800 per year
Dental injury treatment (includes worldwide cover)		up to £5,000 per <i>year</i>	up to £5,000 per year	up to £5,000 per <i>year</i>	up to £5,000 per <i>year</i>
General dental treatment (includes worldwide cover)			See benefits I	imits in table t	WO.
Oral cancer treatment (UK only)	N/A	No annual benefit limits – paid in full^ when being referred for treatment and using Bupa partnership consultants and partnership facilities .			

[^]Any *oral cancer treatment* received within the first six months of the *cover start date* will not be covered.

^{*}We explain how benefits for **NHS treatment** are paid in section 4, on pages 22 and 23.

Table two: Benefit limits for individual general dental treatments

This shows the maximum we will pay per **year** for each individual **general dental treatment**.

Important: Where we say per **course of treatment** – the reimbursement for these items include all visits relating to a full **course of treatment** including preparation, supply and fit.

	Classic	Premier	Platinum	Prestige
Dental examinations				
Routine examination maximum two per <i>year</i>	up to	up to	up to	up to
	£20	£28	£40	£52
New patient/specialist examination maximum one per <i>year</i>	up to	up to	up to	up to
	£40	£50	£65	£75
Dental X rays				
Small X-ray (bitewing or intra-oral) per X-ray	up to	up to	up to	up to
	£6	£8	£10	£12
Other X-rays per X-ray	up to	up to	up to	up to
	£15	£25	£30	£38
Scale and polish				
Scale and polish maximum four per <i>year</i>	up to	up to	up to	up to
	£25	£35	£50	£60
Fillings				
Silver/amalgam filling per tooth, per course of treatment	up to £25	up to £45	up to £60	up to £75
White filling per tooth, per course of treatment	up to	up to	up to	up to
	£35	£60	£80	£105
Fissure sealants per <i>year</i>	up to	up to	up to	up to
	£20	£25	£30	£35
Topical fluoride solution per <i>year</i>	up to	up to	up to	up to
	£30	£35	£40	£45
Root canal treatment				
Root canal treatment per tooth, per course of treatment	up to	up to	up to	up to
	£90	£150	£200	£300

	Classic	Premier	Platinum	Prestige
Extractions and surgical to	reatments			
Surgical implants	up to	up to	up to	up to
per <i>year</i>	£260	£450	£600	£750
Simple extraction per tooth	up to	up to	up to	up to
	£20	£32	£55	£75
Surgical extraction (flap raised) per tooth	up to £50	up to £55	up to £80	up to £100
Apicectomy per <i>treatment</i>	up to	up to	up to	up to
	£58	£100	£120	£150
Restorative dental treatm	ent			
Inlay/onlay	up to	up to	up to	up to
per course of treatment	£125	£175	£260	£350
Veneer per course of treatment	up to	up to	up to	up to
	£100	£165	£250	£390
Crowns per course of treatment	up to	up to	up to	up to
	£120	£230	£300	£480
Repair of bridge or crown per course of treatment	up to	up to	up to	up to
	£25	£30	£35	£55
Post for crown/cast post and core/pre fabricated post and core per course of treatment	up to £35	up to £56	up to £90	up to £110
Bridges per course of treatment	up to	up to	up to	up to
	£250	£400	£550	£700

	Classic	Premier	Platinum	Prestige
Dentures and mouthguard	İs			
Upper or lower denture (partial or full) per upper or lower denture	up to	up to	up to	up to
	£360	£450	£500	£650
Repair denture/reline denture per repair	up to	up to	up to	up to
	£30	£35	£40	£50
Mouthguards maximum one per year	up to	up to	up to	up to
	£82	£150	£175	£200
Orthodontic treatment				
Orthodontic treatment	up to	up to	up to	up to
IOTN Scale 4/5 per year	£400	450	£550	£650
Other treatment				
Periodontal treatment each visit, maximum four per year	up to £55	up to £70	up to £80	up to £110
Other clinically necessary restorative dental treatment, not listed per <i>year</i>	up to	up to	up to	up to
	£65	£75	£85	£115
Anaesthetist fees (sedation) per <i>year</i>	up to	up to	up to	up to
	£65	£70	£75	£80
Cash benefit for hospital stay (UK only)	up to £100	up to £100	up to £100	up to £100
	per night up	per night up	per night up	per night up
	to £1,000 per	to £1,000 per	to £1,000 per	to £1,000 per
	year	year	year	year

Section 2: Benefit limits for oral cancer treatment

Use this section to understand the financial limits of your chosen level of cover for **oral cancer treatment**, **UK** only.

Table 3: Benefit table for oral cancer treatment: UK only

We pay benefit for the types of **oral cancer treatment** and up to the benefit limits shown in this benefit table for you and each of your **dependants** individually.

You and your *dependants* are not covered for any *oral cancer treatment* received during the first six months of the *cover start date*.

Important: You are not covered for *oral cancer treatment* under the Core level.

Type of cover	Cover	Limits for each member (subject to rules on benefits)
Oral cancer treatment in hosp	ital	
Consultants ' fees	Yes	Partnership consultants, including anaesthetists, in a partnership facility – paid in full. Consultants, excluding anaesthetists, who are not partnership consultants, in a partnership facility – up to the limits of the consultant fees schedule. Consultant anaesthetists who are not partnership consultants in a partnership facility – paid in full.
Parent accommodation	Yes	Partnership facility charges for one parent for each night they need to stay with a dependant child up to age 16.
Facility charges for surgical operations carried out as out-patient treatment	Yes	Partnership facility – paid in full.
Facility charges for day-patient treatment and in-patient treatment	Yes	Partnership facility – paid in full.

Type of cover	Cover	Limits for each member (subject to rules on benefits)
Oral cancer treatment as an	out-patient	
Out-patient consultations, therapies and <i>diagnostic tests</i>	Yes	For out-patient consultations: • partnership consultants paid in full • consultants who are not partnership consultants – up to the limits in the consultant fees schedule • therapists' fees – paid in full • partnership facility charges for diagnostic tests – paid in full.
Out-patient MRI, CT and PET scans	Yes	Partnership facility – paid in full.
Out-patient cancer drugs	Yes [†]	Partnership facility charges – paid in full.
Additional benefits for oral	cancer treatmen	t
Treatment at home	Yes	We will pay for oral cancer treatment at home if it is feasible to provide your treatment at that location. You must have our agreement before the oral cancer treatment starts and we need full details from your consultant.

[†]We pay partnership facility charges for common drugs, advanced therapies and specialist drugs that are related specifically to planning and carrying out out-patient treatment for cancer. We do not pay for any complementary, homeopathic or alternative products, preparations or remedies (or substances) for treatment of cancer regardless of who they are prescribed or provided by or the type of treatment or medical condition they are used or prescribed for.

Section 3: Annual cash benefit for hospital stay, UK only

Use this section to understand the financial limits of your chosen cover level for *cash benefits for hospital stays* in the *UK*.

Table 4: Annual cash benefit for hospital stay: UK only

Annual benefit limit table

This benefit limit table for **cash benefit for hospital stay** applies to **general dental treatment**, **emergency dental treatment** and **dental injury treatment**.

For you, your partner and your dependant children

We pay cash benefit for hospital stay up to monetary limits shown in this benefit table for your dependant individually according to your scale of cover and also subject to your annual benefit limits for general dental treatment, emergency dental treatment and dental injury treatment.

Type of cover	Classic	Premier	Platinum	Prestige
Cash benefit for hospital stay £100 per night up to £1,000 per <i>year</i> .				

Section 4: About NHS treatment

If you receive **NHS treatment**, **we** will reimburse you for your **NHS treatment** costs up to a maximum of the relevant **NHS treatment** charge.

NHS treatment charges may change on an annual basis and you are covered up to the applicable limit currently charged by the NHS.

NHS treatment charges differ depending on your location in the UK. To understand what **NHS treatment** costs will apply please refer to your local NHS website for information or ask your dentist.

NHS England, Wales and Isle for Man

- **Band 1:** Includes an examination, diagnosis and advice. If necessary, it also includes X-rays, a scale and polish, and planning for further treatment. (All treatment covered by NHS Band 1 at the date of publication of this membership guide.)
- **Band 2:** Includes all treatment covered by Band 1, plus additional treatment, such as fillings, root canal treatment and removing teeth (extractions). (As above)
- **Band 3:** Includes all treatment covered by Bands 1 and 2, plus more complex procedures, such as crowns, dentures and bridges. (As above)

For a full list of applicable treatments covered under the NHS please refer to your local NHS website for information or ask your dentist.

Please note: If, within two months of completing a course of **NHS treatment**, you need more treatment from the same NHS band or a lower band **we** would expect that you would only be charged once for the same NHS band.

This means that if you receive treatment, and then you need further treatment within two months which is from:

- the same or a lower NHS Band, we will reimburse you for the first treatment you received in full (but we won't pay anything for the second treatment)
- a higher NHS Band, we would reimburse you for a total of the highest applicable NHS Band.

After two months, if you need more **dental treatment**, this would be treated as a new claim and **we** would reimburse you for the relevant NHS Band up to NHS limits.

Please note: that **we** will pay the same amount for treatment which is carried out on the NHS and privately, even if the cost of your private treatment is more than the relevant NHS Band charge.

Scotland and Northern Ireland

If you live in Scotland or Northern Ireland you will pay 80% of the cost of your **NHS treatment**, up to a maximum of permissible amount per treatment. For a full list of applicable treatments and cost covered under the NHS Scotland and Northern Ireland please refer to your local NHS website for information or ask your dentist.

Glossary

Words and phrases printed in bold and italic in these rules and benefits have the meanings set out below.

Meaning
Means the agreement between Bupa and the sponsor which governs the terms and conditions of the scheme .
Your renewal date will be the renewal date for the group. This date will be the anniversary of the 'group contract start date' as indicated on your membership certificate.
The fees and expenses that each individual member is covered for under the agreement , subject to all the terms and conditions, including the exclusions, of the agreement .
Bupa Insurance Limited. Registered in England and Wales No 3956433. Registered office: 1 Angel Court, London EC2R 7HJ. Bupa provides the cover.
Cash benefit we pay when you receive general dental treatment , emergency dental treatment or dental injury treatment which is provided in a UK hospital as in-patient treatment .
Dental treatment that is required in the reasonable clinical opinion of a dental professional .
A registered medical or dental practitioner who at the time you receive your <i>treatment</i> :
 is recognised by us as a consultant and has received written confirmation from us of this, unless we recognised them as being a consultant before 30 June 1996
 is recognised by us both for treating the medical condition you have and for providing the treatment you need
is in our list of consultants that applies to your benefits.
You can contact us to find out if a medical practitioner is recognised by us as a consultant and the type of treatment we recognise for them.

Word/phrase	Meaning			
Consultant fees schedule	 The schedule used by <i>Bupa</i> for the purpose of providing <i>benefits</i> which sets out the benefit limits for <i>consultants</i> fees based on: the type of treatment carried out for <i>surgical operations</i>, the type and complexity of the surgical operation according to the <i>schedule of procedures</i> – the benefits available for <i>consultant</i> surgeons and <i>consultant</i> anaesthetist may differ for the same <i>surgical operation</i> the <i>Bupa</i> recognition status of the <i>consultant</i>, and where the <i>treatment</i> is carried out both in terms of the treatment facility and the location. The schedule may change from time to time. Details of the schedule can be found at bupa.co.uk/codes 			
Cosmetic treatment	Any dental treatment of a cosmetic nature or which is not necessary for the maintenance of dental fitness.			
Course of treatment	includes all visits relating to a full course of treatment including preparation, supply and fit.			
Cover start date	The 'cover start date' shown on your membership certificate.			
Day-patient treatment	Dental treatment or Oral cancer treatment which, for medical reasons, means you have to go into a hospital or day-patient unit because you need a period of clinically supervised recovery but do not have to stay overnight.			
Dental treatment	General dental treatment, emergency dental treatment and dental injury treatment.			
Dental injury treatment	Dental treatment carried out in the UK or overseas which is required as a direct result of injury caused by an external impact.			
Dental professional	Any dental practitioner who is registered with the General Dental Council at the time you receive your dental treatment ; and for the purpose of dental treatment received outside the United Kingdom with a dental professional , shall be deemed to include any person of equivalent status and professional standing who is lawfully permitted to practice dentistry in the country in which the dental treatment was received.			
Dependant	Your <i>partner</i> , and/or any child of yours or your <i>partner's</i> , who is named on your membership certificate.			
Diagnostic tests	Investigations, such as X-rays or blood tests, to find or to help to find the cause of your symptoms.			

Word/phrase	Meaning
Emergency dental treatment	The following temporary <i>dental treatment</i> carried out by a <i>dental professional</i> , which is urgently required in order to alleviate pain, an inability to eat or any acute dental condition which presents an immediate and serious threat to general health: • examinations • X-rays • extractions • root canal extirpation • initial relief treatment of dental or gingival infection • temporary filling, or provision of permanent filling if a temporary filling is not required • construction of temporary crown/bridge/veneer • re-cement of crown/inlay/bridge/veneer • temporary post and core, repair or replacement of orthodontic appliance • repair or adjustment to denture • other temporary <i>emergency dental treatment</i> as determined by the <i>dental professional</i> eg stopping bleeding, re-fixing orthodontic
	retainer wire. We may review claims for emergency dental treatment and may request additional information in order to ensure the claim is eligible.
GP/General Practitioner	A doctor who, at the time he/she refers for your consultation or treatment, is on the UK General Medical Council's General Practitioner Register.
General dental treatment	Dental treatment carried out in the UK or overseas for routine treatment (check-up, scale and polish and X-rays) and restorative dental treatment , when carried out by a dental professional .
In-patient treatment	Dental treatment or Oral Cancer Treatment which, for medical reasons, means you have to stay in hospital overnight or for longer.

Word/phrase	Meaning
IOTN scale	 Index of Orthodontic Treatment Need (IOTN) is a scale used to determine severity of irregularities of teeth and impact on health. Grade 4 – severe irregularities of the teeth that need orthodontic treatment for health reasons, for example: protrusion of front teeth by more than 6mm from the normal position position of the upper and lower teeth is more than 2mm out in terms of symmetry and interferes with normal function lower front teeth protrude in front of the upper teeth by more than 3.5mm teeth that are more than 4mm out of line from the normal position a deep bite that affects normal function. Grade 5 – most severe dental health problems, for example: teeth are prevented coming through into the mouth due to an obstruction eg crowding or additional teeth multiple missing teeth the position of upper front teeth that protrude by more than 9mm from the normal position congenital or developmental problems with the skull or jaw such as cleft lip and palate.
Main member	The person named as the main member on the membership certificate who is eligible to be covered in his or her own right rather than as a dependant.
Mouthguards	A device required to be fitted for one of the following reasons: splint for bruxist and/or TMJ Dysfunction Mandibular Advancement Device for Obstructive Sleep Apnoea mouthguard for fluoride application fixed stabilization splint following trauma.
NHS treatment	Any course of treatment carried out on the NHS in England, Scotland, Northern Ireland, Isle of Man and Wales.
Oral cancer treatment	Any medical treatment provided by a specialist registered medical practitioner for treating cancer of the oral cavity, lips, tongue and pharynx.
Orthodontic treatment	Any dental treatment provided for the correction or prevention of malocclusion or any other irregular alignment or positioning of teeth.

Word/phrase	Meaning
Out-patient treatment	Dental treatment or oral cancer treatment given at a hospital, consulting room or out-patient clinic where you do not go in for day-patient treatment or in-patient treatment .
Partner	Your husband, wife, civil partner or the person you live with in a relationship similar to that of a marriage or civil partnership.
Partnership consultant	Consultant who at the time you receive your treatment is recognised by us as a partnership consultant. You can contact us to find out if a consultant is a partnership consultant.
Partnership facility	 a hospital or a treatment facility, centre or unit that, at the time you receive your eligible <i>treatment</i>, is in <i>our</i> partnership facility list that applies to your <i>benefits</i> and is recognised by <i>us</i> for both: treating the medical condition you have, and carrying out the type of <i>treatment</i> you need any other establishment which <i>we</i> may decide to treat as a partnership facility for the purpose of the <i>scheme</i>. The hospitals, treatment facilities, centres and units in the list and the medical conditions and types of <i>treatment we</i> recognise them for may change from time to time. Details of the facilities in the list and the categories of accommodation, the medical conditions and types of <i>treatment we</i> recognise them for are available on our consultant and facilities website at <i>finder.bupa.co.uk</i>.
Prosthetic appliance	Any artificial aid used in the restoration of a patient's dentition.
Physical contact sports	Rugby, football, hockey, boxing, wrestling, lacrosse, ice hockey or any other sport where it is common practice to wear mouth or gum protection.
Recognised practitioner	 A healthcare practitioner who at the time of your <i>treatment</i>: is recognised by <i>us</i> for the purpose of <i>our</i> private medical insurance schemes for treating the medical condition you have and for providing the type of <i>treatment</i> you need, and is in <i>our</i> list of recognised practitioners that applies to your <i>benefits</i>.

Word/phrase	Meaning
Restorative dental treatment	 The following dental treatments as carried out by a dental professional: chronic periodontal treatment simple gingivectomy treatments inlay/onlay veneer full gold crown, porcelain crown, porcelain bonded to metal crown bridge, adhesive bridge, cast post and core, pre-fabricated post and core re-fix or re-cement of existing crown, re-cement of adhesive bridge, and re-cement of any other bridge dentures (acrylic/metal, partial/full, upper/lower), reline denture, addition of tooth, repair denture mouthguards surgical implants.
Scale of cover	Your cover option at the time you receive your <i>dental treatment</i> , being either Level 1, Level 2, Level 3 and Level 4 and as shown on your current membership certificate.
Schedule of procedures	The schedule used by Bupa for the purpose of providing benefits which classifies surgical operations according to their type and complexity. The schedule may change from time to time. Not all procedures listed in the schedule are covered under Bupa schemes. Further information on the schedule is available on request.
Scheme	the cover we provide as shown on your membership certificate together with this membership guide subject to the terms and conditions of the agreement .
Sponsor	The company, association or organisation for whom Bupa has for the time being agreed to operate the Bupa Dental Choice group scheme for the time being of which you are a member.
Surgical implant	A surgical implant is a surgical component that interfaces with the bones of the jaw or skull to support a dental prosthesis such as a crown, bridge denture, facial prosthesis or acts an orthodontic anchor.
Surgical operation	A surgical procedure or complex investigative/diagnostic procedure including all medically necessary <i>treatment</i> related to the procedure and all consultations carried out from the time you are admitted to a <i>partnership facility</i> until the time you are discharged, or if it is carried out as <i>out-patient treatment</i> , all medically necessary <i>treatment</i> related to the operation and any consultation on the same day which is integral to the operation.

Word/phrase	Meaning
Therapist	 a chartered physiotherapist a British Association of Occupational Therapists registered occupational therapist a British and Irish Orthoptic Society registered orthoptist, or a Royal College of Speech and Language Therapists registered speech and language therapist who is Health Professions Council Registered and is a recognised practitioner. You can contact us to find out if a practitioner is a recognised practitioner and the type of treatment we recognise
	them for.
Treatment	Any <i>dental treatment</i> or <i>oral cancer treatment</i> .
United Kingdom/ UK	Great Britain, Northern Ireland, the Channel Islands and the Isle of Man.
We/our/us	Вира.
Year	In relation to you and each of your dependants , a period starting on the effective from date or an annual renewal date and ending on the day immediately prior to the next annual renewal date .

Protecting your information and rights

Status disclosure

Private health insurance, health expenses insurance, dental insurance and travel insurance are provided by Bupa Insurance Limited and arranged and administered by Bupa Insurance Services Limited as an agent of Bupa Insurance Limited. Subscriptions are collected by Bupa Insurance Services Limited as an agent of Bupa Insurance Limited for the purpose of receiving, holding and refunding subscriptions and claims monies. These companies (using the trading name Bupa) are wholly owned subsidiaries of the British United Provident Association Limited.

Bupa Insurance Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Bupa Insurance Services Limited is authorised and regulated by the Financial Conduct Authority. The firm reference numbers are 203332 and 312526 respectively. This information can be checked by visiting the Financial Conduct Authority website **www.fca.org.uk**

Bupa Insurance Limited is registered in England and Wales with company registration No. 3956433 and Bupa Insurance Services Limited is registered in England and Wales with company registration No. 3829851. They have the same registered office: **1 Angel Court, London EC2R 7HJ**.

Getting in touch

The Bupa helpline is always the first number to call if you need help or support.

You can call us on **0800 237 777**. We may record or monitor our calls.

The Staff at Bupa are trained and supervised to provide our customers and members with information only on Bupa's own insurance products and health related services.

Making a complaint

We're committed to providing you with a first class service at all times and will make every effort to meet the high standards we've set. If you feel that we've not achieved the standard of service you would expect or if you are unhappy in any other way, then please get in touch.

If Bupa, or any representative of Bupa, did not sell you this policy and your complaint is about the sale of your policy, please contact the party who sold the policy. Their details can be found on the status disclosure document or the terms of business document they provided to you. If you are a member of a company or corporate *scheme* please call your dedicated Bupa helpline, this will be detailed on your membership certificate.

For any other complaint our member services department is always the first number to call if you need help or support or if you have any comments or complaints. You can contact us in several ways:

By phone: **0800 237 777***

In writing: Customer Relations, Bupa, Salford Quays, Salford M50 3XL

By email: customerrelations@bupa.com

Please be aware information submitted to us via email is normally unsecure and may be copied, read or altered by others before it reaches us.

Via our website: bupa.co.uk/members/member-feedback

Or via twitter: @AskBupaUK

How will we deal with your complaint and how long is this likely to take?

If we can resolve your complaint within three working days after the day you made your complaint, we'll write to you to confirm this. Where we're unable to resolve your complaint within this time, we'll promptly write to you to acknowledge receipt. We'll then continue to investigate your complaint and aim to send you our final written decision within four weeks from the day of receipt. If we're unable to resolve your complaint within four weeks following receipt, we'll write to you to confirm that we're still investigating it.

Within eight weeks of receiving your complaint we'll either send you a final written decision explaining the results of our investigation or we'll send you a letter advising that we have been unable to reach a decision at this time.

If you remain unhappy with our response, or after eight weeks you do not wish to wait for us to complete our review, you may refer your complaint to the Financial Ombudsman Service. You can write to them at: Exchange Tower, London E14 9SR or contact them via email at complaint.info@financial-ombudsman.org.uk or call them on **0800 023 4567** (calls to this number are now free on mobile phones and landlines) or **0300 123 9123** (free for mobile phone users who pay a monthly charge for calls to numbers starting 01 or 02).

For more information you can visit www.financial-ombudsman.org.uk

Your complaint will be dealt with confidentially and will not affect how we treat you in the future.

Whilst we are bound by the decision of the Financial Ombudsman Service, you are not.

^{*}We may record or monitor our calls.

The European Commission also provides an online dispute resolution (ODR) platform which allows consumers who purchase online to submit complaints through a central site which forwards the complaint to the relevant Alternative Dispute Resolution (ADR) scheme. For Bupa, complaints will be forwarded to the Financial Ombudsman Service and you can refer complaints directly to them using the details above. For more information about ODR please visit http://ec.europa.eu/consumers/odr/

The Financial Services Compensation Scheme (FSCS)

In the unlikely event that we cannot meet our financial obligations, you may be entitled to compensation from the Financial Services Compensation Scheme. This will depend on the type of business and the circumstances of your claim.

The FSCS may arrange to transfer your policy to another insurer, provide a new policy or, where appropriate, provide compensation. Further information about compensation scheme arrangements is available from the FSCS on **0800 678 1100** or **020 7741 4100** or on its website at: **www.fscs.org.uk**

Privacy notice - in brief

We are committed to protecting your privacy when dealing with your personal information. This privacy notice provides an overview of the information we collect about you, how we use and protect it. It also provides information about your rights. Further details can be found in our Full Privacy Notice available at **bupa.co.uk/privacy**. If you do not have access to the internet and would like a paper copy of the Full Privacy Notice, please contact the Bupa Privacy team on +44 (0) 1784 893706. Alternatively you can email the team at dataprotection@bupa.com or write to Bupa Data Protection, Willow House, 4 Pine Trees, Chertsey Lane, Staines-Upon-Thames, Middlesex TW18 3DZ. If you have any questions about how we handle your information, please contact us at dataprotection@bupa.com

Information about Bupa

In this privacy notice, references to 'we' or 'us' or 'our' are to Bupa. Bupa is registered with the Information Commissioner's Office, registration number Z6831692. Bupa is comprised of a number of trading companies, many of which also have their own data protection registrations. For company contact details, visit **bupa.co.uk/legal-notices**

Scope of our privacy notice

This privacy notice applies to anyone who interacts with us in relation to our products and services ('you', 'your'), via any channel (eg email, website, telephone, app etc).

Ways in which we obtain personal information

We obtain personal information from you and from certain third parties (eg those acting on your behalf, like brokers, healthcare providers etc). Where you provide us with information about other individuals, you must ensure that they have seen a copy of this privacy notice and are comfortable with you doing this.

Categories of personal information

We process two categories of personal information about you and/or, where applicable, your dependants, namely standard personal information (eg information we use to contact you, identify you or manage our relationship with you); and special categories of information (eg health information, information about race, ethnic origin and religion that allows us to tailor your care, and information about crime in connection with screening).

Purposes and lawful grounds of our processing personal information

We process your personal information for the purposes set out in our Full Privacy Notice, including to administer our relationship with you (including for claims and complaints handling), for research and analysis, to monitor our expectations of performance (including of health providers relevant to you) and in order to protect the rights, property, or safety of Bupa, our customers, or others. The legal ground upon which we process personal information depends on what category of personal information we process. Standard personal information is normally processed by us on the basis that it is necessary for the performance of a contract, our or a third parties' legitimate interests or it is required or permitted by applicable law.

Marketing and preferences

We may use your personal information to send you marketing by post, telephone, social media platforms, email and text. We only use your personal information to send you marketing if we have either your consent or a legitimate interest. If you don't want to receive personalised marketing about similar Bupa products and services that we think are relevant to you, please contact us at optmeout@bupa.com or write to Bupa Data Protection, Willow House, 4 Pine Trees, Chertsey Lane, Staines-Upon-Thames, Middlesex TW18 3DZ

Processing for Profiling and Automated Decision Making

Like many businesses, we sometimes use automation to provide you with a quicker, better, more consistent and fair service, as well as with marketing information we think will be of interest (including discounts on our products and services). This may involve evaluating information about you and, in some limited cases, using technology to provide you with automatic responses or decisions. You can read more about this in our Full Privacy Notice. You have the right to object to direct marketing and profiling relating to direct marketing. You may also have rights to object to other types of profiling and automated decision-making. Further details are available in our Full Privacy Notice.

Sharing your information

We share your information within the Bupa Group, with relevant policyholders (including your employer if you are covered under a group scheme), with funders commissioning services on your behalf, those acting on your behalf (eg brokers and other intermediaries) and with others who help us provide services to you (eg healthcare providers) or from whom we need information to handle or verify claims or entitlements (eg professional associations). We also share your information in accordance with the law. You can read more about what information may be shared in what circumstances in our Full Privacy Notice.

Transfers outside of the European Economic Area (EEA)

Bupa deals with many international organisations and uses global information systems. As a result, Bupa transfers your personal information to countries outside of the European Economic Area ('EEA'), (the EU member states plus Norway, Liechtenstein and Iceland) for the purposes set out in this privacy policy.

How long we retain your personal information

Bupa retains your personal information in accordance with retention periods calculated in accordance with the criteria detailed in the Full Privacy Notice available on our website.

Your rights

You have rights to have access to your information and to ask us to rectify, erase and restrict use of your information. You also have rights to object to your information being used, to ask for the transfer of information you have made available to us, to withdraw consent to the use of your information and not to be subject to automated decision-making which produce legal effects concerning you or similarly significantly affects you.

Data Protection Contacts

If you have any questions, comments, complaints or suggestions in relation to this notice, or any other concerns about the way in which we process information about you, please contact us at **dataprotection@bupa.com**

You also have a right to make a complaint to your local privacy supervisory authority. Bupa's main establishment is in the UK, where the local supervisory authority is the Information Commissioner, who can be contacted at: Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire SK9 5AF, United Kingdom. Tel: 0303 123 1113 (local rate) or 01625 545 745 (national rate).

Financial crime and sanctions

Financial crime

The company agree to comply with all applicable UK legislation relating to the detection and prevention of financial crime (including, without limitation, the Bribery Act 2010 and the Proceeds of Crime Act 2002).

Sanctions

Bupa, through this policy, shall not provide cover or be liable to pay any claim where this would expose Bupa to any sanction, prohibition or restriction under United Nations resolutions, or trade or economic sanctions, laws or regulations of the European Union, United Kingdom, United States of America, and/or all other jurisdictions where Bupa transacts its business, including but not limited to providing medical coverage inside Sudan, Iran, North Korea, Syria, and Cuba.

Notes

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Notes

Bupa dental insurance is provided by:

Bupa Insurance Limited. Registered in England and Wales No. 3956433. Bupa Insurance Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Financial Services Register No. 203332.

Bupa insurance policies are arranged and administered by:

Bupa Insurance Services Limited. Registered in England and Wales No. 3829851. Bupa Insurance Services Limited is authorised and regulated by the Financial Conduct Authority. Financial Services Register No. 312526.

You can check the Financial Services Register by visiting https://register.fca.org.uk or by contacting the Financial Conduct Authority on 0800 111 6768.

Registered office: 1 Angel Court, London EC2R 7HJ

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