Denplan for Schools
Welcome to Denplan for Schools

Denplan for Schools gives your child cover for dental injuries and dental emergencies. Denplan is the UK’s leading dental payment plan specialist and is now a part of the Simplyhealth Group.

The plan is summarised in this brochure along with everything you need to know about how the plan will benefit both you and your child.

Contact us

To find out more about how Denplan for Schools can benefit you and your child, please contact us using the following details.

Tel: 0800 214 357
Fax: 01962 828 180
Email: denplanforschools@denplan.co.uk
Website: www.denplan.co.uk/schools

Address:
Denplan for Schools,
Denplan Limited,
Denplan Court,
Victoria Road,
Winchester,
SO23 7RG

Lines are open 8.30am to 5.30pm Monday to Thursday and 8.30am to 4.30pm Friday.

24-Hour Worldwide Dental Emergency Helpline:
0800 844 999
About the plan

When your child is at school you want to know that they are being well cared for. That’s why Denplan has been working with Simplyhealth to arrange a plan your child may need.

Committed to your child’s wellbeing

Your school wants you to know that your child is in safe hands while away from home. Giving you access to this plan shows that your child’s welfare is a priority.

Unique plans and benefits

Simplyhealth are specialists in the healthcare industry and Denplan has extensive experience in arranging dental payment plans and know how essential it is for your child to have cover should they need it. That’s why these plans have been designed specifically for the independent school market to provide tangible benefits.

Denplan for Schools

Denplan is the UK’s leading dental payment plan specialist and has arranged Denplan for Schools for pupils of independent schools. Denplan will arrange cover for all eligible dental injuries and dental emergencies up to £12,000 and, if your child needs urgent treatment, will find them a dentist promptly. For more details on the benefits of Denplan for Schools please see page 9.
What to do in a dental emergency

Dental pain can be a distressing experience – here is what you can do in a dental emergency, as well as some dental first aid tips.

**In the UK** – your child can attend a dentist of your choice or the school can give us a call if they need help in finding one. Denplan for Schools includes cover for dental injury and dental emergency treatment only, see the Policy Summary for details.

**Overseas** – if your child has a dental emergency while they are away from home they can visit any dentist. If their school is unable to find a dentist we can try and find one for them.

**Out of hours** – don’t worry. If your child is in dental pain during the night or at 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 details.

**Dental first aid tips**

- Clean the area around the sore tooth thoroughly
- Rinse the mouth vigorously with lukewarm (body temperature) salt water to dislodge trapped food or debris
- Do not use very hot or very cold salt water as this may inflame the situation
- Do not place aspirin on the gum or on the aching tooth
- If the face is swollen, apply a cold compress and seek help from a dentist as soon as possible
- Cold water rinses may temporarily ease the pain from a throbbing tooth
- Avoid lying down as this raises the blood pressure and increases pain

**Emergency helpline (in the UK):** 0800 844 999
**Emergency helpline (outside the UK):** +44 (0) 1962 844 999

How to Claim

Claiming couldn’t be simpler with Denplan for Schools and you do not need pre-authorisation from us before receiving treatment. Once your child has received treatment all you need to do is follow these simple steps:

1. **Obtain proof and details of treatment from your dentist.** If a tooth has been lost, you must obtain written confirmation of this from your dentist. A breakdown of treatment costs must also be provided to Denplan.

2. **Complete a claim form and attach proof of treatment, proof of payment and any other relevant receipts**. You can find a claim form online at www.denplan.co.uk/schools or request one by calling 0800 214 357 or emailing us at denplanforschools@denplan.co.uk

3. **Send your completed form and receipts to Denplan at:** Denplan for Schools, Denplan Ltd, Denplan Court, Victoria Rd, Winchester, SO23 7RG.

   **Claim forms should be sent to Denplan within 60 days of receiving treatment.**

   *Payment can be made by pupils, parents or the school. We also have the facility to make direct payments to the dentist.*

   If you would like confirmation that any treatment received will be covered under the terms of this policy, or you would like confirmation of the benefits available to you, please do not hesitate to call us on 0800 214 357 or email denplanforschools@denplan.co.uk
Policy Summary

This policy summary provides a brief description of the Denplan for Schools Plan which is underwritten by Simplyhealth. It does not contain the full Terms & Conditions which can be found in the Policy Terms & Conditions on pages 12–18 of this booklet.

What is Denplan for Schools?

Denplan for Schools provides pupils of independent schools with cover for treatment necessary as a result of a dental injury or dental emergency anywhere in the world and for treatment of mouth cancer. The following is a summary of the key benefits of the policy:

<table>
<thead>
<tr>
<th>Benefits</th>
<th>Denplan for Schools</th>
</tr>
</thead>
<tbody>
<tr>
<td>Worldwide dental injury</td>
<td>Up to £10,000 per policy year</td>
</tr>
</tbody>
</table>
| Cash compensation for complete loss of teeth | £1,500 for a front tooth  
 £750 for a back tooth  
 £100 for a wisdom tooth  
 There is an overall maximum of £5,000 per policy year for this benefit |
| Worldwide dental emergency treatment | Up to £2,000 per policy year           |
| Dentist call-out fees             | 100% reimbursement                      |
| Hospital cash benefit             | £100 per night                          |
| For each night you stay overnight in hospital, for dental treatment under the care of a consultant specialising in dental or maxillofacial surgery in relation to a head or neck condition. |
| Incidental expenses               | Up to £30 per incident                  |
| Transport costs incurred for travelling to receive emergency dental treatment. Telephone costs incurred for locating a dentist. |
| Mouth cancer cover                | Up to £12,000                           |
| Towards one course of treatment for up to 18 months following diagnosis. |
| 24-Hour Worldwide Dental Emergency Helpline | ✔                                      |
What are the main exclusions and limitations of Denplan for Schools?

As with all insurance policies general exclusions and limitations apply. The following is a summary of the main exclusions and limitations of the policy. Please ensure that you have read the general points that relate to the policy which can be found on page 11.

<table>
<thead>
<tr>
<th>Exclusions</th>
<th>For full information please see</th>
</tr>
</thead>
<tbody>
<tr>
<td>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.</td>
<td>The Terms &amp; Conditions section on pages 14-15, Section 3. Schedule of benefits &amp; exclusions.</td>
</tr>
<tr>
<td>Treatment in connection with dental injuries must commence within a period of six months and must be completed within 48 months of the date of the original incident. Claim must be logged at time of injury.</td>
<td>The Terms &amp; Conditions section on pages 14-15, Section 3. Schedule of benefits &amp; exclusions.</td>
</tr>
<tr>
<td>Any treatment relating to damage or injury caused whilst participating in contact sports (including training) unless the recommended mouth protection is worn.</td>
<td>The Terms &amp; Conditions section on pages 14-15, Section 3. Schedule of benefits &amp; exclusions.</td>
</tr>
<tr>
<td>Dental injury caused other than by a sudden, unexpected, direct external impact to the mouth.</td>
<td>The Terms &amp; Conditions section on pages 14-15, Section 3. Schedule of benefits &amp; exclusions.</td>
</tr>
<tr>
<td>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.</td>
<td>The Terms &amp; Conditions section on pages 14-15, Section 3. Schedule of benefits &amp; exclusions.</td>
</tr>
<tr>
<td>Treatment for mouth cancer diagnosed before or within 90 days after you joined Denplan or for which tests or consultations began within those 90 days, even if the diagnosis is not made until later.</td>
<td>The Terms &amp; Conditions section on pages 14-15, Section 3. Schedule of benefits &amp; exclusions.</td>
</tr>
</tbody>
</table>

General Information on the plan

How long will my cover last?

The policy is for one year unless we have agreed something different.

What do I do if I want to make a claim?

If you need advice about making a claim simply call 0800 838 951. Full details of how to make a claim are included in the Terms & Conditions on page 16.

How do I complain?

We aim to provide you with the highest possible standards of service but accept there may be occasions when you feel that things have gone wrong for you and you are unhappy with us.

If you have a complaint about any matter please contact Denplan and we will do our best to address your concerns. Your feedback is vital to helping us improve.

If you are dissatisfied with the outcome of our investigation, you can ask the Financial Ombudsman Service (the FOS) to consider your complaint. However, you should contact the FOS (0845 080 1800) to find out whether you will be eligible to have your complaint considered by the FOS if you have purchased a group scheme as you will need to meet specific criteria depending on your particular circumstances.

Further details on how to complain can be found in the terms and conditions section, within your Policy Handbook.
Policy Terms & 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. The table of benefits shows the maximum benefit the insured child can receive.
- **call-out fee** – 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 temporary emergency dental treatment or treatment in the event of a dental injury.
- **chosen policies** – the plans you have selected from the range of plans available.
- **claim** – a claim for benefit under this policy.
- **commencement date** – the first academic school day of the term in which you make your first payment for your chosen policies.
- **contact sports** – 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 dentures 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. This excludes non-invasive cancer in situ and HIV related tumours.
- **premium** – the money due to us with regard to the provision of your chosen policies.
- **range of plans** – Denplan for Schools and Denplan Sports Physiotherapy Plan.

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

we, us, our – Simplyhealth Access trading as and referred to in this document as “Simplyhealth”.

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 & Conditions of this policy, from the commencement date. If you are:

i. resident in the UK for at least 180 days during the year; or

ii. your child is entitled to enter the scheme in accordance with the eligibility rules defined by the authorised representative of the school.

Your insurance cover under this policy will end at the earliest of the following:

iii. the expiry of the year; or

iv. at the end of the term in which the insured child ceases attendance at the school.

3. Schedule of benefits & Exclusions

The insured child has cover under your chosen policies as described below. Full details of the limits for each benefit can be found in the Policy Summary.

Benefits

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 in no event will benefit be payable for treatment received more than 48 months after the date of the dental injury.

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 per 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 per year. For the avoidance of doubt any subsequent treatment required after the initial appointment is specifically excluded.

iv. Dentist call-out fees

For 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 head or neck condition, £100 per 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 per 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.

Exclusions

This policy does not provide dental cover for:

i. 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.

iii. 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.

v. Prescription charges unless related to claims paid under the worldwide dental injury or worldwide emergency dental treatment benefits.

vi. Mouthguards, gum shields or any dental appliances.

vii. Bleaching or other tooth whitening unless the treatment is specifically related to a dental injury covered by this policy.


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 non-invasive 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.

xvi. Mouth cancer which is related in any way to HIV infection or AIDS.
4. Claims general

When determining claims Denplan act on behalf of the underwriter, Simplyhealth. Denplan has the delegated authority to do so, and in this instance are 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 the policyholder, guardian or authorised persons and must quote 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.

ii. No benefit will be payable if Denplan have 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 may at our own cost ask a dentist or other medical specialist, chosen by us, to advise us about the medical facts relating to a claim or to examine the insured child in connection with the claim. In choosing a relevant dentist or specialist we will take into account the insured child's personal circumstances. The insured child must co-operate with any dentist or specialist chosen by us or we will not pay your claim.

v. You must tell us if you can claim any of the cost from another insurance policy or other third party. If another insurance policy is involved we will only pay our proper share.

5. General

i. This contract between you and us is made up of these Terms & Conditions, your schedule of cover and any endorsement provided by us.

ii. Non-payment of premium will result in us suspending the insured child's benefits, and taking all necessary action to recover monies outstanding.

iii. You and we are free to choose the law that applies to this policy. In the absence of an agreement to the contrary, the law of England and Wales will apply.

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 pay your premium directly to Denplan, Denplan will write to you prior to the end of any policy year to let you know that we wish to renew your policy and on what terms. If Denplan do not hear from you in response, then we may at our option assume that you wish to renew your current policy on those new terms. Where you have opted to pay the premium by Direct Debit, continuous credit card payments or other payment method, Denplan may continue to collect premiums by such method for the new policy year. Please note that if Denplan do not receive your premium, this may affect your cover. We reserve the right to refuse renewal of the policy.

vi. If you (or anyone acting on your behalf) make a claim under your 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 policy 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?

Please ensure that you show the following information to others covered under your policy, or make them aware of its contents. Denplan will deal with all personal information supplied in the strictest confidence as required by the Data Protection Act 1998. Denplan may send personal and sensitive personal information in confidence for processing by other companies and intermediaries and to Simplyhealth as the underwriter of this policy. Denplan will extend the same duty of confidentiality to any third parties to whom it may subcontract the administration of your policy, including those based outside the European Economic Area.

Denplan will hold and use information about you and any family members covered by your policy, supplied by you and any family members to provide the services set out under the terms of this policy, administer your policy and develop customer relationships and services. In certain circumstances Denplan may ask medical service providers (or others) to supply Denplan with further information.

When you give Denplan information about family members Denplan will take this as confirmation that you have their consent to do so. As the policyholder is acting on behalf of any family member covered by this policy, Denplan will send all correspondence about the policy, including any claims correspondence, to the policyholder unless advised to do otherwise.

Denplan are required by law, in certain circumstances, to disclose information to law enforcement agencies about suspicions of fraudulent claims and other crime. Denplan will disclose information to third parties including other insurers for the purposes of prevention or investigation of crime including reasonable suspicion about fraud or otherwise improper claims.

If you have agreed, Denplan may use the information you have provided to Denplan to contact you by post, telephone or electronically with details of other products and services. With your agreement Denplan may also share some of your details with other Simplyhealth Group companies and other carefully selected companies based in the European Economic Area to enable them to contact you about their products and services.

If you change your mind please contact Denplan on 0800 214 357.

Otherwise Denplan will assume that, for the time being, you are happy to be contacted in this way.

What regulatory protection do I have?

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

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's 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.
In the unlikely event that Simplyhealth 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 the intention of Denplan to provide a first class standard of service. However, should you have reason to complain you can do so in the following way:

i. In the first instance, you should document your complaint and send it to Denplan at:

   Customer Services Manager
   Denplan Limited
   Denplan Court
   Victoria Road
   Winchester
   SO23 7RG

   Please quote your claim number and or attending school so that your enquiry can be dealt with quickly.

ii. Should the matter still not be resolved to your satisfaction, you have the right to refer your complaint to:

   Financial Ombudsman Service
   South Quay Plaza
   183 Marsh Wall
   London
   E14 9SR

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.