



# THE DEAS INFORMATION BOOKLET

HDP's Discretionary Dental Emergency  
Assistance Support Product

**Created by dentists  
Working for patients**

# IMPORTANT INFORMATION

This document contains details of the DEAS and how it works. The DEAS is administered by the DEAS Administrators on behalf of HDP. The DEAS forms an integral part of your Dental Plan. Please note that your Dental Plan membership does not automatically entitle you to benefit from the DEAS. It is not an insurance product and any entitlement to any Benefits under it is Discretionary. In order to be eligible to receive Benefits in terms of the DEAS, all payments due in terms of your Dental Plan must be up to date.

## Patients who are party to a Dental Plan may submit a Request in respect of the following:

- Emergency Temporary Treatment whilst away from home
- Emergency Evening, Weekend and Bank Holiday callouts
- Dental Injury/Trauma
- Hospital Benefit
- Oral Cancer

More detailed information on the above can be found in the individual Sections within this document.

Requests will be considered on an entirely Discretionary basis. If a Request is approved by the DEAS Administrators, then Benefits will be paid by HDP up to the limits set out in the individual Sections within this document.

The Patient must provide any information or documentation as may be reasonably required in order for the DEAS Administrators to assess a Request. If any false declaration or statement is made the Patient may not be entitled to receive any Benefit under the DEAS.

Please note that Requests, along with any evidence/paperwork (receipts etc) required to assist the DEAS Administrators to assess your Requests, should be in English.

This document is governed by and shall be construed according to the Laws of Scotland.

The DEAS Benefits may be altered by HDP on the 1st of January in any year with not less than 30 days prior written notification of such alterations from HDP to the Patient.

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## Sensitive Information

Some of the information we ask you for may be sensitive personal data as defined by the Data Protection Act 1998 (such as information about health or criminal convictions). We will not use such personal data about you or others except for the specific purpose for which you provide it and to carry out the services as described in this document. Please ensure that you only provide us with sensitive information about other people with their agreement.

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## Resource Review and Governance

In order to try and predict the nature of the Requests that are likely to arise in future and the amount that the DEAS may be required to pay in response to future Requests, the DEAS Administrators require to continually review (with the assistance of actuaries) the financial resources available to the DEAS.

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## Limits of Amounts Payable

- 1) The total that may be payable to you in respect of or arising out of any Emergency Temporary Treatment as a result of or attributable to one source or original cause shall not exceed **£500**.
- 2) The total that may be payable to you shall not exceed **£10,000** per annum.

# DEFINITIONS

The words in this document will have the following meanings:

**'Benefits'** means any sums determined by the DEAS Administrators (on an entirely Discretionary basis) to be paid to a Patient (or on their behalf) in terms of the DEAS following receipt of a Request.

**'Dental Plan'** means the contract entered into between the member dentist of HDP and the Patient.

**'the DEAS'** means the entirely discretionary worldwide Dental Emergency Assistance Support product administered by the DEAS Administrators on behalf of HDP to offer support and assistance to Patients following a Dental Emergency and/or Dental Injury/Trauma or Oral Cancer.

**'DEAS Administrators'** means those members of HDP appointed to administer the DEAS and to ascertain whether a Benefit will be paid on receipt of a Request.

**'Dental Injury/Trauma'** means injury by direct and unexpected extra-oral impact to a Patient's dentition and supporting structure (including damage to dentures whilst being worn).

**'Discretionary'** means at the absolute judgement and discretion of the DEAS Administrators on a case by case basis, with no obligation to act in a particular manner.

**'Emergency Temporary Treatment'** means any element of urgent dental treatment (as set out in TABLE A) that is administered by a registered dentist, his associates and partners (other than at the Patient's registered dental practice) for the sole purpose of enhancing the comfort of the Patient and relieving the pain of the Patient, in both cases on an immediate or short term basis, and that is administered on the basis that it does not offer a permanent solution.

**'HDP'** means Highland Dental Plan Limited. Registration No. SP2448RS, a Society registered under the Co-operative and Community Benefit Societies Act 2014, having its Registered Office at River House, Young Street, Inverness IV3 5BL.

**'In-Patient'** means a Patient who has been admitted to hospital and in respect of whom a clinical case record has been opened and whose confinement is necessary for the purpose of medical care and treatment under the care of a consultant specialising in dental or maxilla-facial surgery.

**'Oral Cancer'** means a malignant (invasive) tumour inside the mouth (excluding non-invasive cancers and tumours of the throat), that has been diagnosed by a consultant who is recognised as a specialist in cancer treatment by the NHS.

**'Mouth'** means lips, tongue, gums, major salivary glands, hard and soft palate and floor of mouth extending distally as far as the tonsillar pillars.

**'Patient'** means any person who is a registered patient of a member dentist of HDP.

**'Request'** means a written request from a Patient to receive Benefits under the DEAS and **'Requests'** shall be construed accordingly.

**'Specialist'** means any qualified medical consultant (excluding the Patient or any member of the Patient's immediate family) who specialises in the treatment of oral cancer and who is qualified to practice medicine in any of the following countries: United Kingdom, European Union, Isle of Man, Channel Islands, Canada or the United States of America.

**'We/us/our'** means HDP.

# COMPLAINTS PROCEDURE

If you believe that we have not delivered the service you expected we want to hear from you so that we can try to put things right.

## Our promise to you.

### We will:

- Acknowledge all complaints promptly
- Investigate quickly and thoroughly
- Keep you informed of progress
- Do everything possible to resolve your complaint
- Ensure you are clear on how to escalate your complaint if necessary

If your complaint relates to the DEAS or a Request you should initially contact:

**Highland Dental Plan Limited**  
**River House**  
**Young Street**  
**Inverness IV3 5BL**  
**Telephone: 01463 712585**

HDP will aim to resolve your concerns on an informal basis within three business days. They will send you a letter confirming this and will also explain how you may be able to refer the matter to the Financial Ombudsman Service if you subsequently decide that you are unhappy with the outcome.

## SECTION 1: Emergency Treatment

If you require and receive Emergency Temporary Treatment, we may pay Benefit for the cost of treatment up to the amounts specified in **TABLE A** (below) subject to the maximum amounts shown in the section of this document entitled 'Limits of Amounts Payable'.

**TABLE A: Benefits**

Item of treatments	Limit Per	Limit Payable
1 Examination and report to include all necessary smoothing and polishing of teeth and treatment of sensitivity	Incident	Up to £48.00
2 Radiographic examination	Incident	Up to £36.00
3 Tooth extraction up to 2 teeth	Tooth	Up to £74.00
4 Root extirpation, including dressing and any associated treatment of acute infection	1 Canal 2 Canals 3+ Canals	Up to £81.00 Up to £102.00 Up to £130.00
5 Treatment of acute infection to include incising of abscesses/treatment of infected sockets/any prescribed medication	Incident	Up to £36.00
6 Investigation and dressing	First tooth	Up to £39.00
7 Investigation and dressing	Each additional tooth	Up to £29.00
8 Recement crown, inlay or veneer	Tooth	Up to £41.00
9 Recement bridge	Bridge	Up to £51.00
10 Construction and fitting of temporary crown	Tooth	Up to £75.00
11 Construction and fitting of temporary bridge	Unit	Up to £48.00
12 Provision of temporary post and core	Tooth	Up to £40.00
13 Temporary denture after tooth loss		Up to £196.00
14 Arrest abnormal haemorrhage including aftercare and associated suture removal		Up to £53.00
15 Removal of sutures placed by another dentist		Up to £35.00
16 Repair/adjustment of orthodontic appliance		Up to £72.00
17 Adjustment to denture		Up to £33.00
18 Repair of denture to include re fixing of teeth and gum and repair of clasp		Up to £63.00
19 Any other Emergency Temporary Treatment not otherwise specified		Up to £83.00
20 Evening/Weekend/Bank Holiday call-out fees where the dentist returns to the practice to re-open it to provide emergency treatment when the surgery would not normally be open		Up to £160.00
21 From 6pm on 24th December until 12:01am on 27th December and again, from 6pm on 31st December until 12:01am on 3rd January any call-out fees where the dentist returns to the practice to re-open it to provide emergency treatment when the surgery would not normally be open		Up to £226.00

## SECTION 1: General Conditions

The Patient must take all reasonable steps to avoid or minimise any potential dental Injury/Trauma.

On submission of a Request, Benefits may (on a Discretionary Basis) be payable up to the limits set out in **TABLE A** within this document.

Worldwide assistance may be requested for Emergency Temporary Treatment or Dental Injury/Trauma if you are on holiday outside the United Kingdom for a period of up to 45 days or employed outside the United Kingdom on a contract of up to 90 days duration in any twelve month period. As regards any treatment carried out outside of the United Kingdom, any Benefits that may be paid in response to a Request shall be paid in Pounds Sterling (with the rate being calculated at the date of payment using the XE Currency Converter tool) unless contrary Sterling conversion evidence is submitted with the Request.

Any Benefits that the DEAS Administrators determine are appropriate to be paid, will be paid at the Benefit level in-force at the date the Emergency Temporary Treatment was carried out.

Emergency Temporary Treatment is limited to the benefit listed in **TABLE A**.

The Request for Assistance form should be submitted within 90 days of the Emergency Temporary Treatment.

## SECTION 1: Exclusions

**We will not pay any Benefit in respect of the following:**

- A) Dental treatment administered by your dental practice or any practitioner covering for your dental practice other than for **Item 20 and Item 21** in **TABLE A**.
- B) Any treatment administered on a permanent basis, or with the intention of it being a permanent solution to the Patient's dental problem (unless it arises as a result of Dental Injury/Trauma).
- C) The first £15 of each and every Request under **Item 20 and Item 21** in **TABLE A**.
- D) The DEAS administrators may, at their discretion, decline to pay a benefit for repeated restoration of the same tooth/teeth.

## SECTION 2: Dental Injury / Trauma

If the Patient sustains a Dental Injury/Trauma and receives treatment from their own contracted dentist, Benefits may be paid for the cost of treatment up to the amounts specified in **TABLE B** (below) subject to the maximum amounts shown in the section of this document entitled 'Limits of Amounts Payable'.

**TABLE B: Benefits**

Item of treatments	Limit Per	Limit Payable
1 Examination and report to include all necessary smoothing and polishing of teeth and treatment of sensitivity	Incident	Up to £48.00
2 Radiographic examination	Incident	Up to £36.00
3 Tooth extraction up to 2 teeth	Tooth	Up to £74.00
4 Root canal treatment (includes filling of access cavity)	Incisor/ Canine	Up to £250.00
5 Root canal treatment (includes filling of access cavity)	Premolar	Up to £280.00
6 Root canal treatment (includes filling of access cavity)	Molar	Up to £350.00
7 Temporary Direct Restoration	Tooth	Up to £39.00
	Additional teeth	Up to £29.00
8 Definitive Direct Restoration	Per Tooth	Up to £126.00
	Up to a max	£378.00
9 Construction & fitting of temporary bridge following tooth loss	Unit	Up to £48.00
10 Temporary denture after tooth loss	Denture	Up to £196.00
11 Re-cement crown, inlay or veneer	Tooth	Up to £41.00
12 Re-cement Bridge	Bridge	Up to £51.00
13 Porcelain jacket crown	Unit	Up to £399.00
14 Zirconia crown/bridge unit	Unit	Up to £548.00
15 Metal bonded porcelain crown	Unit	Up to £440.00
16 Full metal crown	Unit	Up to £394.00
17 Cast post/core construction	Tooth	Up to £125.00
18 Post and core constructed in mouth	Tooth	Up to £58.00
19 Bonded metal/porcelain bridge work	Retainer	Up to £440.00
	Pontic	Up to £343.00
20 Laboratory constructed adhesive bridge	Retainer	Up to £272.00
	Pontic	Up to £286.00
21 Laboratory constructed adhesive facing or veneer	Unit	Up to £347.00
22 Permanent denture acrylic	Denture	Up to £457.00
23 Permanent denture metal	Denture	Up to £700.00
24 Any other treatment not otherwise specified	Incident	Up to £247.00
25 Evening/Weekend/Bank Holiday call-out fees where the Dentist returns to the practice to re-open it to provide emergency treatment when the surgery would not normally be open		Up to £160.00
26 From 6pm on 24th December until 12:01am on 27th December and again, from 6pm on 31st December until 12:01am on 3rd January any call-out fees where the dentist returns to the practice to re-open it to provide emergency treatment when the surgery would not normally be open		Up to £226.00

## SECTION 2: General Conditions

The Patient must take all reasonable steps to avoid or minimise any potential Dental Injury/Trauma. Benefits may be payable on a Discretionary basis up to the limits set out in **TABLE B** within this document on submission of a Request. Any Benefits that the DEAS Administrators determine appropriate to be paid, will be paid at the Benefit level in-force on the date the Dental Injury/Trauma occurred.

Where treatment is estimated to cost in excess of £600, prior approval must be obtained from the DEAS Administrators before treatment commences.

To assist in the assessment of a Dental Injury/Trauma, the Patient's own contracted member dentist should submit evidence such as radiographs, clinical photos or study models, appropriately named and dated.

In respect of any treatment involving the replacement of any crown, bridge, facing, veneer or denture, then any Benefits shall be paid according to the cost of a replacement of similar type and quality.

If implants are clinically required, we may pay a Benefit not exceeding the cost of the equivalent necessary bridge work as stated in **TABLE B**.

The Request for Assistance form should be submitted within 90 days of completion of the treatment.

## SECTION 2: Exclusions

**We will not pay any Benefit in respect of the following:**

- Injury caused by foodstuffs (including foreign bodies therein) in the course of consumption.
- Normal wear and tear.
- Injury not caused by direct extra-oral impact.
- Damage which is not apparent within seven days of the date of impact resulting in Dental Injury/Trauma.
- Damage to dentures occurring other than whilst being worn.
- Any costs incurred more than 24 months after the date of the Injury/Trauma to which the treatment relates.
- In the context of implants, any required CT Scans and bone augmentation.
- Teeth and supporting structures that were not in a satisfactory condition prior to the dental Injury/Trauma
- The DEAS administrators may, at their discretion, decline to pay a benefit for repeated restoration of the same tooth/teeth.

## SECTION 3: Hospital Benefit

If you are admitted to hospital as an In-Patient following any Emergency Temporary Treatment or Dental Injury/Trauma, then we may (on a Discretionary basis) pay hospital benefit of £75 for each complete 24 hours you remain as an In-Patient, subject to the maximum amounts shown in the section in this document entitled 'Limits of Amounts Payable'. **For the avoidance of doubt, no amount may be requested for periods of less than 24 hours.**

In order for a Request for hospital benefit to be considered by the DEAS Administrators, you must provide a discharge form confirming the period of hospitalisation and, if requested, any further information required to confirm the validity of the Request.

## SECTION 3: Exclusions

**We will not pay any Benefit under this section** if a payment is made under Section 4 Oral Cancer.

## SECTION 4: Oral Cancer

If you are diagnosed with Oral Cancer we may (on a Discretionary basis) pay a Benefit of £2,500 to you, subject to the maximum amount shown in the section in this document entitled 'Limits of Amounts Payable'.

**The Benefit is only payable once a Specialist has formally diagnosed you as suffering from Oral Cancer.**

- Any Benefit under this section will only be paid once and after that all cover under this Section 4 will cease.
- Any Benefit under this section will only be paid following a formal diagnosis of Oral Cancer by a Specialist.
- Any Benefit under this section will only be paid if you have attended annually, or at any required recalls to the dentist, in the two years immediately preceding the date of diagnosis.
- Any Benefit under this section will only be paid if you send in a Request as soon as possible and in any event no later than 90 days of the date of diagnosis.

## SECTION 4: Exclusions

**We will not pay any Benefit in respect of the following:**

- Oral Cancer that is diagnosed before, or within six months of you registering with the Dental Plan.
- Oral Cancer which is related in any way to HIV infection or AIDS.
- Any fees (including fees for consultation of tests for invasive/non-invasive tumours).
- Oral Cancer that results from smoking or chewing tobacco products (including betel nut juice) or from prolonged alcohol abuse.
- Any failure by the Patient to follow medical advice.