



The Trustees of Cheshire Federation Joint Branch Board Dental Cover

THIS POLICY (AND THE SCHEDULE WHICH FORMS AN INTEGRAL PART OF THE POLICY) IS A LEGAL CONTRACT. IT NEEDS TO BE EXAMINED THOROUGHLY TO ENSURE IT MEETS THE INSURED'S REQUIREMENTS. IF IT DOES NOT MEET THE INSURED'S REQUIREMENTS THE INSURANCE ADVISER NEEDS TO BE CONTACTED WITHOUT UNDUE DELAY.

THE INFORMATION WHICH THE INSURED HAS PROVIDED TO THE COMPANY HAS BEEN TAKEN INTO ACCOUNT IN THE ASSESSMENT AND ACCEPTANCE OF THIS INSURANCE. ANY SUBSEQUENT CHANGES TO THIS INFORMATION NEED TO BE NOTIFIED TO THE COMPANY AS SOON AS POSSIBLE. FAILURE TO DO SO MAY INVALIDATE THE POLICY OR RESULT IN CERTAIN COVERS NOT OPERATING FULLY.

Royal & Sun Alliance Insurance plc (herein called the Company) and the Insured agree that the Policy the Schedule (including any Schedule issued in substitution) and any Endorsements shall be considered one document and any word or expression to which a specific meaning has been attached shall bear such meaning wherever it appears.

Any reference to the singular will include the plural or vice versa.

Any reference to any statute or statutory instrument will include any modifications or re-enactment thereto.

Any heading in this Policy is for ease of reference only and does not affect its interpretation.

The Company will provide the insurance described in this Policy subject to the terms and conditions for the Period of Insurance shown in the Schedule and any subsequent period for which the Insured shall pay and the Company shall agree to accept the premium

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General Definitions

Beneficiary

Any person or category of person as detailed in the Schedule

Contact Sport

Any sport in which contact with players either deliberate or incidental is allowed and where it is common practice to wear mouth protection

Country of Residence

The country in which the Beneficiary is resident

Dental Implant

A titanium root-shaped fixture designed to integrate with the bone to replace the root of a tooth and support the replacement teeth

Dental Injury

An injury to the teeth or supporting structures (including damage to dentures whilst being worn) which is caused suddenly and unexpectedly by means of a direct external impact

Dental Specialist

A specialist dental practitioner accredited by the General Dental Council (GDC) in Britain practising in one of the recognised dental specialist areas contained within 'The Specialist List' held by the GDC at www.gdc-uk.org

Dentist

In Britain - a dental surgeon who is currently registered with the General Dental Council (GDC) together with any other regulatory authority

Outside of Britain – a dental surgeon who is currently registered with the appropriate national regulatory authority

Dentist Call-Out

The necessity for a Dentist in Britain to re-open the practice between the hours of 6.00pm and 8.00am on weekdays or weekends and Bank Holidays or if outside of Britain then outside the practice's normal working hours

Emergency Dental Treatment

Initial dental treatment provided at the initial emergency appointment urgently required for the relief of severe pain arrest or haemorrhage the control of acute infection or condition which causes a severe threat to the Beneficiary's general health Any subsequent treatment required after the initial emergency appointment is specifically excluded

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

Mouth Protection

A sports mouth guard

Permanent Treatment

Definitive treatment that is clinically necessary to secure and maintain oral health

Restorative Dental Treatment

Clinically necessary dental treatment required to maintain the oral health of a patient in the opinion of the Insured's Dentist This may include treatment such as fillings crowns bridges and dentures

Specialist Dental Treatment

Dental treatment carried out by a Dental Specialist within their specialist area

General Conditions

Financial or Trade Sanctions

The Company shall not provide coverage or be liable to provide any indemnity or payment or other benefit under this Policy if and to the extent that doing so would breach any prohibition or restriction imposed by law or regulation

If any such prohibition or restriction takes effect during the Policy period the Insured or the Company may cancel that part of this Policy which is prohibited or restricted with immediate effect by giving written notice to the other at their last known registered address

Law and Jurisdiction

Under the laws of the United Kingdom (England Scotland Wales and Northern Ireland) both parties may choose the law which applies to this contract to the extent permitted by those laws Unless the parties agree otherwise in writing the Company has agreed with the Insured that the law which applies to this contract is the law which applies to the part of the United Kingdom in which the Insured is based or if based in the Channel Islands or the Isle of Man the law of whichever of those two places in which the Insured is based

The parties have agreed that any legal proceedings between them in connection with this contract will only take place in the courts of the part of the United Kingdom in which the Insured is based or if the Insured is based in either the Channel Islands or the Isle of Man the courts of whichever of those two places in which the Insured is based

Policy Cancellation

This Policy may be cancelled by either the Insured or the Company by giving 90 days written notice to the Company or the Insured at their last known registered address

If the whole or any part of the Policy is cancelled the Company shall return a proportionate amount of the premium for the unexpired period subject to minimum premium requirements and provided no claims have been paid or are outstanding

General Claims Settlement Conditions

Assignment

The Company will not be bound to accept or be affected by any trust charge lien assignment or other dealing with or relating to this Policy

Claim Notification

The Beneficiary must provide written notification of a claim to the Company no later than 60 days from the date they first received dental treatment

Evidence Required

The Beneficiary must produce for the Company at the Beneficiary's own expense all the detailed particulars and evidence relating to the cause detailing the dates and costs of each individual treatment
Evidence must comprise of a fully itemised receipt or an official document issued by the treating practice in English

Where a receipt or an official document is unobtainable the treating dental surgery must sign the completed claim form
Where necessary the Beneficiary may be required to provide relevant x-rays and or dental records in support of a claim

No Benefit will be payable if the Company have not received proof of all facts relevant to the Beneficiary's claim This shall include but not be limited to

- 1) Proof of the Beneficiary's eligibility for cover on the date of treatment
- 2) Proof of the dental treatment including type of treatment received and date of treatment
- 3) Proof of the dental treatment including type of treatment received and the date of treatment This may be by way of medical report at the Beneficiary's own expense
- 4) Where applicable, details of the circumstances of the injury incurred

If the Company considers it necessary each Beneficiary must also agree to a dental examination (which the Company will pay for) as often as the Company may reasonably require

The Company at its own expense may refer to a Dentist or other medical specialist chosen by the Company to advise about medical facts relating to a claim

Foreign Currency

Claims involving foreign currency will be converted into the appropriate currency at the selling rate of exchange published on www.oanda.com on the day nearest to the date of the loss or as otherwise paid via documented credit or debit card transaction or as agreed in advance in writing with the Company

Interest

Interest will not be added to any amount paid

Other Interests

The Beneficiary's receipt shall discharge the Company's liability to pay any amount in respect of a claim
The Beneficiary or the Beneficiary's personal representatives shall have no right to claim from or sue the Company

Reasonable Care

The Beneficiary must take all reasonable steps to avoid or minimise any injury damage or expense

General Exclusions applicable to the Dental Cover Sections 1 to 5

The Company will not pay any claim for

- 1) treatment not deemed to be clinically necessary
- 2) any dental treatment which was prescribed planned diagnosed as necessary or was ongoing at the date the Beneficiary's cover commenced with the Company
- 3) damage caused by tooth brushing or other oral hygiene procedures
- 4) loss of or damage to dentures other than whilst in the mouth
- 5) reimbursement of travelling expenses incidental expenses or telephone costs
- 6) treatment care or repair of teeth gums mouth or tongue in connection with 'mouth jewellery'
- 7) toothbrushes mouthwash or dental floss or any other dental consumables
- 8) wisdom teeth extractions or any other dental procedures carried out by a hospital
- 9) routine examinations
- 10) restorative treatment other than treatment necessitated as a result of Dental Injury
- 11) hygiene treatment other than treatment necessitated as a result of Dental Injury
- 12) dental x-rays other than x-rays necessitated as a result of Dental Injury

Dental Cover – Section 1 - Dental Injury

The Cover

If during the Operative Time the Beneficiary sustains Dental Injury the Company will pay for Dentist Specialist or Dentist expenses necessarily incurred within 2 years of the date the need for treatment first arose the Company will pay

- 1) up to £2,500 per course of treatment per Dental Injury for up to a maximum of four incidents in any one Period of Insurance
- 2) for dental prescription charges in connection with the Dental Injury for up to a maximum of four incidents in any one Period of Insurance
- 3) for Dental Implants that are clinically required we will pay up to £1,000 towards the cost of the equivalent bridgework treatment

Extension to Section 1

Ongoing Treatment

Cover under this Section shall extend to include ongoing treatment for which the Beneficiary was in receipt of prior to the Beneficiary's cover commencing with the Company provided that this cover immediately supersedes a similar annual insurance (whether provided by the Company or not) subject to a maximum treatment period of 90 days

Exclusions to Section 1

The Company will not pay for Dentist Specialist or Dentist expenses

- 1) in connection with Dental Injuries where treatment commences more than 26 weeks after the date of the original incident and or notification of an intention to claim
- 2) incurred more than 2 years after the date of the Dental Injury
- 3) where the Dental Injury occurs in the consumption of food including foreign bodies contained within food
- 4) where Dental Injury occurs whilst training for or participating in Contact Sports unless appropriate Mouth Protection is being worn at the time of the injury
- 5) as a result of self inflicted Dental Injury
- 6) as a result of Dental Injury caused by endoscopic procedures

The Company will not pay for

- 7) Dental Implants

Dental Cover – Section 2- Emergency Dental Treatment

The Cover

If during the Operative Time the Beneficiary requires Emergency Dental Treatment the Company will pay for an initial emergency appointment with a Dentist Specialist or Dentist

- 1) up to £200 of treatment per incident up to a maximum of four incidents in any one Period of Insurance for dental expenses incurred in Britain or
- 2) up to £400 of treatment per incident up to a maximum of two incidents in any one Period of Insurance for dental expenses incurred outside of Britain

or a combination of both subject to the benefit limits shown below up to an overall maximum of £800 in any one Period of Insurance

- 3) for dental prescription charges in connection with the Emergency Dental Treatment provided for under 1) and 2) above

Exclusions to Section 2

The Company will not pay

- 1) for any subsequent routine treatment required after the initial emergency appointment
- 2) for any costs of Permanent Treatment
- 3) for treatment exceeding £800 per Policy year under this Benefit

Dental Cover - Section 3 - Dentist Call-Out Fees

The Cover

If during the Operative Time the Beneficiary incurs Dentist Call-Out fees in the event of a Dental Injury or initial Emergency Dental Treatment

The Company will pay

Up to £100 per incident up to a maximum of two incidents in any one Period of Insurance

Dental Cover - Section 4 – Hospitalisation

The Cover

If during the Operative Time a Dental Injury results in the Beneficiary being admitted to a licensed medical or surgical hospital as an in-patient for dental treatment under the care of a consultant specialising in dental or maxillofacial surgery in relation to a head or neck condition

The Company will pay

£50 per night up to a maximum of £1,000 in any one Period of Insurance

Dental Cover - Section 5 - Mouth Cancer Cover

The Cover

If during the Operative Time the Beneficiary is diagnosed with Mouth Cancer which requires medical treatment within 78 weeks of diagnosis the Company will pay up to £12,000 towards the cost of one course treatment for Mouth Cancer provided by a consultant who is recognised as a specialist in cancer by the NHS or the States of Guernsey and Jersey or the Beneficiary's Country Of Residence or treatment provided by another medical practitioner under referral from a consultant

Exclusions to Section 5

The Company will not pay

- 1) for treatment of Mouth Cancer which was diagnosed prior to or within 90 days of when cover commenced with the Company
- 2) for treatment of Mouth Cancer where the Beneficiary has undergone tests or consultation prior to or within 90 days of when cover commenced with the Company even where diagnosis was not made until after the 90 day period
- 3) for any cost of treatment received after 78 weeks following the date of diagnosis of Mouth Cancer
- 4) for not more than one course of treatment in connection with a specific occurrence of Mouth Cancer
No further benefits are payable in the event of a re-occurrence of the same cancer either at the same site or at a different location
- 5) for fees for consultations or tests incurred as a result of non invasive tumors or tests not resulting in a diagnosis of Mouth Cancer
- 6) Mouth Cancer related directly or indirectly to HIV infection or AIDS
- 7) Mouth Cancer resulting from the chewing of tobacco products or betel nut or from prolonged alcohol abuse

Guidance when making a claim

Claims Handling Process

Conditions that apply to the policy and in the event of a claim are set out in this policy wording. It is important that you comply with all policy conditions and you should familiarise yourself with any requirements contained in the policy.

Directions for claim notification are included in under General Claims Settlement Conditions.

Please be aware that events that may give rise to a claim under the insurance must be notified as soon as reasonably possible. Further guidance is contained in the policy wording.

Claims Conditions require you to provide us with any reasonable assistance and evidence that we require concerning the cause and value of any claim. Ideally, as part of the initial notification, you will provide:

- The Beneficiary's name address home and mobile telephone numbers
- Personal details necessary to confirm their identity
- The date of the incident
- The cause of the illness or injury
- Nature and extent of the illness or injury along with prognosis if known

This information will enable us to make an initial evaluation on policy liability and claim value. We may, however, request additional information depending upon the circumstances which may include additional medical information or medical examination.

Complaints Procedure

We are committed to going the extra mile for our customers

We aim to resolve your concerns by close of play the next business day

Experience tells us that most difficulties can be sorted out within this time

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 we take all complaints seriously and following the steps below will help us understand your concerns and give you a fair response

Step 1

If your complaint relates to your Policy or a claim then please contact Philip Williams & Co.

Their contacts details are as follows :-

Post
Schemes Department
35 Walton Road
Stockton Heath
Warrington
Cheshire WA4 6NW

Email enquiries@philipwilliams.co.uk

Phone 0845 2301650 (*)

(*) Calls are typically charged at 1p and 12p per minute depending on the time of day for landline customers ,plus a call set-up fee .Calls from mobile phones generally cost between 5p and 40p per minute

Step 2

In the unlikely event that your concerns have not been resolved within this time your complaint will be referred to RSA Customer Relations Team who will arrange for an investigation on behalf of their Chief Executive

Their contact details are as follows:-

Post
RSA Customer Relations Team
PO Box 255
Wymondham
NR18 8DP

Email; crt.halifax@uk.rsagroup.com

Our Promise to you

We will:

- Acknowledge all complaints promptly
- Investigate quickly and thoroughly
- Keep you informed of any progress
- Do everything possible to resolve your complaint
- Use the information from your complaint to proactively improve our service in the future.

Once we have reviewed your complaint we will issue our final decision in writing within 8 weeks of the date we received your complaint

If you are still not happy

If you are still unhappy after our review or you have not received a written offer of resolution within 8 weeks of the date we received your complaint you may be eligible to refer your case to the Financial Ombudsman Service. The Financial Ombudsman Service is an independent body that arbitrates on complaints.

They can be contacted at:

Post:
Financial Ombudsman Service
Exchange Tower
Harbour Exchange Square
London
E14 9SR

Telephone: 0800 0234567 (free from standard line, mobiles may be charged)
0300 123 9123 (same rate as 01 or 02 numbers, on mobile phone tariffs)

E mail complaint.info@financial-ombudsman.org.uk
Website: www.financial-ombudsman.org.uk

You have six months from the date of our final response to refer your complaints to the Financial Ombudsman Service. This does not affect your right to take legal action however the Financial Ombudsman Service will not adjudicate on any case where litigation has commenced.

Thank you for your feedback

We value your feedback and at the heart of our brand we remain dedicated to treating our customers as individuals and giving them the best possible service at all times. If we have fallen short of this promise we apologise and aim to do everything possible to put things right.

Fair Processing Notice

How we use your Information

Please read the following carefully as it contains important information relating to the details that you have given us. You should show this notice to any other party related to this insurance.

Who we are

This product is underwritten by Royal & Sun Alliance Insurance plc. You are giving your information to Royal & Sun Alliance Insurance plc, which is a member of the RSA Group of companies (the Group). In this information statement, 'we' 'us' and 'our' refers to the Group unless otherwise stated.

How your information will be used and who we share it with

Your information comprises of all the details we hold about you and your transactions and includes information obtained from third parties.

We may use and share your information with other members of the Group to help us and them:

- Assess financial and insurance risks;
- Recover debt;
- Prevent and detect crime;
- Develop our services, systems and relationships with you;
- Understand our customers' requirements;
- Develop and test products and services

We do not disclose your information to anyone outside the Group except:

- Where we have your permission; or
- Where we are required or permitted to do so by law; or
- To credit reference and fraud prevention agencies and other companies that provide a service to us, our partners or you; or
- Where we may transfer rights and obligations under this agreement.

We may transfer your information to other countries on the basis that anyone we pass it to provide an adequate level of protection. In such cases, the Group will ensure it is kept securely and used only for the purpose for which you provided it. Details of the companies and countries involved can be provided on request.

From time to time we may change the way we use your information. Where we believe you may not reasonably expect such as change we shall write to you. If you do not object, you will consent to that change.

We will not keep your information for longer than is necessary.

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 sensitive personal data about you or others except for the specific purpose for which you provide it and to carry out the services described in your Policy documents. Please ensure that you only provide us with sensitive information about other people with their agreement.

How to contact us

On payment of a small fee, you are entitled to receive a copy of the information we hold about you. If you have any questions, or you would like to find out more about this notice you can write to:

Data Protection Liaison Officer,
Customer Relations Office,
RSA,
Bowling Mill,
Dean Clough Industrial Estate,
Halifax
HX3 5WA

Schedule

Policy Number PA RTT272091

Insured The Trustees of Cheshire Police Federation Joint Branch Board

Period of Insurance

From 1st May 2017

To 30th April 2018—both dates inclusive

Renewal Date 1st May 2018

Premium

Actual number of Beneficiaries as declared by the Insured to Philip Williams & Co based on agreed rates and declared every month

IPT is included at the prevailing rate

Beneficiaries

Beneficiary A Any serving Police Officer in Cheshire Police and co-habiting partner resident in Britain for whom premiums have been paid by the Insured

Beneficiary B Any retired Police Officer and co-habiting partner resident in Britain who had previously served in Cheshire Police for whom premiums have been paid by the Insured

In respect of **Beneficiary B** retired Police Officers cover extends to those living outside of Britain.

No cover for Dental benefits will be payable for any Beneficiary aged 70 or over