

Insurance Product Information Document

Company: Unum Dental (a trading name of Unum Limited)

Product: Dental insurance policy

Unum Dental is a trading name of Unum Limited which is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Registered Office: Milton Court, Dorking, Surrey RH4 3LZ. Registered in England 983768.

This is a summary of the important information you should know about the dental cover we provide. Full details, such as the information you should know before and after you enter into a contract with us, can be found in the policy document on our website:

<https://www.unum.co.uk/dental/continuation>.

What is this type of insurance?

This policy provides cover against the cost of insured dental treatment up to the maximum amounts listed in the benefit schedule. The amount of reimbursement you receive depends on the level of cover you choose.



What is insured?

You may claim for:

- ✓ Routine check-ups and x-rays
- ✓ Scale & polish/hygienists
- ✓ Fillings, extractions, dentures, crowns, root canal and bridges
- ✓ Dental implants (not available on all levels of cover)
- ✓ 100% NHS dental charges
- ✓ Sports injuries
- ✓ Overnight hospital stays
- ✓ Accident/injury treatment
- ✓ Child orthodontics (insured children only)
- ✓ Mouth cancer

Cover levels and annual policy limits apply. Please check the benefit schedule carefully before applying.



What is not insured?

We will not play any claim for:

- ✗ Cosmetic treatment
- ✗ Treatment relating to pre-existing mouth cancer conditions
- ✗ Prescription fees
- ✗ Treatment carried out before your cover starts and after your cover ends
- ✗ Orthodontics for insured adults
- ✗ Benefits for overnight hospital stays in the Republic of Ireland (ROI)



Are there any restrictions on cover?

- ⚠ We apply a maximum benefit for each insured treatment up to the overall annual limits of each policy
- ⚠ Insured children share the benefits between any number added to the policy
- ⚠ Treatment must be completed and paid for in full before your claim can be processed



Where am I covered?

- ✓ This policy covers you for insured treatments worldwide



What are my obligations?

- You must apply within the first 30 days of the end of your cover with the employer who provided your dental insurance benefit
- Be 18 years or older and permanently living in the UK
- You must pay the agreed premium each month in return for the cover we provide
- Take reasonable care to answer all the questions honestly and to the best of your knowledge
- Notify us immediately of any changes to your information that may affect your policy and or premium and ensure we have up-to-date contact information for you at all times
- Include proof of payment with each claim you make
- You should submit claims within 90 days of the completion of your last treatment in any course. We reserve the right to decline claims submitted after 90 days



When and how do I pay?

Premiums must be paid monthly by direct debit.



When does the cover start and end?

Once your application to continue cover with us as an individual has been received and processed, your cover will start from the day immediately following your corporate leave date (as advised by your employer).

The policy will renew at each 12-month anniversary of the policy start date until your cover ends.



How do I cancel the contract?

In the 14 days after you receive your policy schedule (the cooling-off period), you may cancel the policy by contacting us. We will refund any premium you have paid, provided no claim has been made.

You can cancel your cover after the 14-day cooling off period by giving us 30 days notice in writing. If you have made a claim during the insurance period and want to cancel, you must pay us the remainder of a full year's premium (from the date the policy is cancelled to the end of the period of cover shown on the policy schedule). You should contact us to arrange the payment of the premiums due.