

## Table of Benefits – Vhi Dental Plan Plus

Applicable to new registrations or renewals on/or after 22<sup>nd</sup> November, 2013.

This Table of Benefits must be read in conjunction with the Vhi Dental Rules – Terms and Conditions. Maximum payable per procedure and rules.

	<b>Benefit Provision</b>	<b>Benefit Limit</b>
	<b>Section 1 – Annual maximum</b>	
	<p>This is the maximum amount of money we will pay in respect of all benefits available below (Sections 2 – 5 inclusive) to each insured person in each period of insurance, unless otherwise stated. Maximum benefits may not be carried over to future years cover.</p> <ul style="list-style-type: none"> <li>• Year 1 &amp; 2 continuous insurance on the Dental Plan Plus</li> <li>• Year 3 &amp; 4 continuous insurance on the Dental Plan Plus*</li> <li>• Year 5+ continuous insurance on the Dental Plan Plus**</li> </ul> <p>*A loyalty benefit will apply at the commencement of your third continuous year of cover on the Dental Plan Plus when the annual maximum will be increased by €200.</p> <p>** A loyalty benefit will apply at the commencement of your fifth continuous year of cover on the Dental Plan Plus when the annual maximum will be increased by €300.</p>	<p>€1,000</p> <p>€1,200</p> <p>€1,500</p>
	<b>Section 2 – Investigative and preventative treatments</b>	
	<p><b>Examinations</b></p> <ul style="list-style-type: none"> <li>• Routine examinations - up to two per policy year</li> <li>• Extensive examinations – up to one per policy year (copy of associated treatment plan required)</li> </ul> <p><b>Scaling and polish</b></p> <ul style="list-style-type: none"> <li>• Up to two per policy year</li> </ul> <p><b>Radiographs (x-rays)</b></p> <ul style="list-style-type: none"> <li>• Bitewings coverage <ul style="list-style-type: none"> <li>– 1 series per 12 month period of insurance for insured persons up to the age of 18 years</li> <li>– 1 series per 24 month period of insurance for insured persons over the age of 18 years</li> </ul> </li> </ul> <p><b>Full mouth (complete series) or panoramic</b></p> <ul style="list-style-type: none"> <li>• 1 per 60 month period</li> </ul> <p><b>Periapical(s)</b></p> <ul style="list-style-type: none"> <li>• 4 single x-rays per 12 month period</li> </ul> <p><b>Occlusal</b></p> <ul style="list-style-type: none"> <li>• 2 series per 24 month period</li> </ul>	<p>100%</p> <p>100%</p> <p>100%</p> <p>100%</p> <p>100%</p> <p>100%</p> <p>100%</p> <p>100%</p>
	<b>Section 3 – Basic treatments – 3 months waiting period applies</b>	
	<p><b>Restoration (fillings)</b></p> <ul style="list-style-type: none"> <li>• Once per tooth per 24 month period</li> </ul> <p><b>Pre-fabricated or stainless steel crowns</b></p> <ul style="list-style-type: none"> <li>• Once per tooth per 60 month period of eligible dependent children up to the age of 19 years</li> </ul> <p><b>Sealants</b></p> <ul style="list-style-type: none"> <li>• Once per tooth per lifetime for permanent first and second molars of eligible dependent children up to the age of 16 years</li> </ul>	<p>70%</p> <p>70%</p> <p>70%</p>

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	<p><b>Space maintainers</b></p> <ul style="list-style-type: none"> <li>Once per tooth per lifetime on eligible dependent children up to the age of 17 years for extracted primary posterior (rear) teeth</li> </ul> <p><b>Periodontal treatment</b></p> <ul style="list-style-type: none"> <li>Periodontal scaling and root planning – once per quadrant per 36 month period</li> <li>Full mouth debridement – once per tooth per lifetime</li> <li>Periodontal maintenance – once per 24 month period</li> </ul> <p><b>Tooth extractions</b></p> <ul style="list-style-type: none"> <li>Simple tooth extraction – once per tooth per lifetime</li> </ul> <p><b>Emergency treatment</b></p> <ul style="list-style-type: none"> <li>Once per 12 month period for the immediate, temporary relief of severe pain, trauma, swelling or bleeding. This does not include treatments for rehabilitation. Please note that emergency treatment is not subject to the 3 months waiting period.</li> </ul>	<p>70%</p> <p>70%</p> <p>70%</p> <p>70%</p> <p>70%</p> <p>100%</p>
	<p><b>Section 4 – Major treatments – 12 months waiting period applies</b></p>	
	<p>Policy excess</p> <p><b>Endodontic therapy on primary teeth</b></p> <ul style="list-style-type: none"> <li>Pulpal therapy – once per tooth per lifetime</li> <li>Therapeutic pulpotomy – once per tooth per lifetime</li> </ul> <p><b>Endodontic therapy on permanent teeth</b></p> <ul style="list-style-type: none"> <li>Root canal therapy – once per tooth per lifetime</li> </ul> <p><b>Prosthetic services – dentures</b></p> <ul style="list-style-type: none"> <li>Reline and rebase – 1 per 24 month period</li> <li>Repairs, replacement of broken artificial teeth, replacement of broken clasp(s) – 1 per six month period</li> <li>Denture adjustment – 2 times per 12 month period</li> <li>Removable prosthetic services (dentures) – once per 5 year period</li> </ul> <p><b>Prosthetic services – bridge and implant supported crowns</b></p> <ul style="list-style-type: none"> <li>Fixed prosthetic services (bridge) – once per 5 year period</li> <li>Bridge adjustments – 2 times per 12 month period</li> <li>Implant supported crowns – once per 5 year period including a contribution towards the dental implant fixture to an annual maximum of €250</li> </ul> <p><b>Crowns, inlays and onlays</b></p> <ul style="list-style-type: none"> <li>Permanent crowns, inlays and onlays – once per tooth per 5 year period</li> <li>Crown repair – once per tooth per 12 month period</li> <li>A separate annual maximum of €500 per period of insurance applies to crowns, inlays and onlays</li> </ul>	<p>€100</p> <p>50%</p> <p>50%</p> <p>50%</p> <p>25%</p> <p>25%</p> <p>25%</p> <p>25%</p> <p>50%</p> <p>50%</p> <p>50%</p> <p>50%</p> <p>50%</p> <p>50%</p> <p>€500</p>
	<p><b>Section 5 – Orthodontics – 24 months waiting period applies</b></p>	
	<p>Orthodontic treatment – no age limits apply</p> <ul style="list-style-type: none"> <li>Limited treatment</li> <li>Interceptive treatment</li> <li>Comprehensive treatment</li> <li>Removable appliance therapy</li> <li>Fixed appliance therapy</li> </ul> <p>Orthodontic treatment is subject to a lifetime maximum of €500 per insured person</p> <p>Please note: only treatment required for a definite health need and not for aesthetic or cosmetic purposes will be considered.</p>	<p>€500</p>

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	<b>Section 6 – Dental implants upgrade – 3 months waiting period</b>	
	Dental implant treatment – covered only as a direct result of a dental injury following an accident. If as a result of an accident you sustain a dental injury resulting in a clinical requirement for one or more of your natural teeth to be replaced by dental implant(s), this benefit will cover the costs of the dental implant fixture to replace an existing tooth root or existing dental Implant, including temporary coverage.	€2,000 per fixture to a maximum of 5 fixtures each period of insurance

Vhi Healthcare is tied to Aria Insurance Services Limited for Vhi Dental Insurance. This policy is underwritten by Great Lakes Reinsurance (UK) plc. Great Lakes Reinsurance (UK) plc is authorised by the Prudential Regulation Authority in the United Kingdom and is regulated by the Central Bank of Ireland for conduct of business rules.

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