



Dental Extra Plus

Cigna Global
Health Benefits





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Dental Extra Plus

Annual Benefit

Maximum per *insured member, spouse* or *dependant*

Up to
£3,500 / \$5,250 / €5,250
per year of insurance

Class One - Investigative and Preventative Treatment

Routine Examinations

- Normal
- Extensive

2 visits per year
of insurance
Paid in Full

Full Case Assessment

1 per year of insurance
Paid in Full

Bitewing X-rays

4 per year of insurance
Paid in Full

Intra Oral X-rays

6 per year of insurance
Paid in Full

Orthopantomogram (O.P.G)

1 every 3 years
Paid in Full

Standard Scale & Polish

2 visits per year of insurance
Paid in Full

Fissure Sealants

Paid in Full

Topical Fluoride

Paid in Full

Occlusal Splint

Paid in Full





Dental Extra Plus

Class Two - Basic Restorative Treatment

Fillings

- amalgam – One Surface
- amalgam – Two Surfaces
- amalgam – Three Surfaces
- composite Anterior – One Surface
- composite Anterior – Two Surfaces

80% Refund

Root Canal Treatment

- upper & Lower Anterior (1 root)
- upper Premolar (2 roots)
- lower Premolar (1 root)
- molars (3 root)

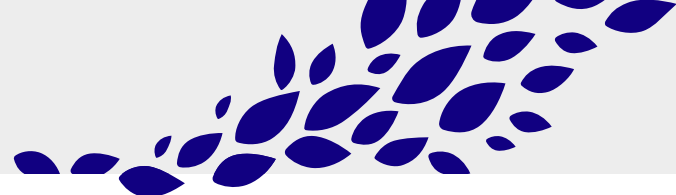
80% Refund

Extractions

- single
- multiple
- post Operative Care
- extraction (Erupted)
- impacted

80% Refund





Dental Extra Plus

Class Three - Major Restorative Treatment

Fillings - prolonged Curettage / Root Planning - splinting	50% Refund
Metal and Acrylic Dentures - addition of a clasp - denture repair	50% Refund
Crowns & Bridges - veneers - adhesive Bridges & Conventional Bridge work - standard / Gold Post & Core - bonded Precious / Non Precious Crown full Cast Porcelain Crown	50% Refund
Inlays - precious - non-precious - porcelain	50% Refund
Implants	50% Refund
Surgical Periodontal Treatment - gingivectomy - mucoperio, flap bone surgery Prolonged periodontal treatment limit of one course per year of insurance	50% Refund

Orthodontic Treatment

Orthodontic Treatment for Dependant children under the age of 18.

This benefit requires prior approval

50% Refund
Up to
£1,000 / \$1,500 / €1,500
per year of insurance



Exclusions

In addition to the exclusions specified in the exclusions section of the policy Terms and Conditions, **Cigna Healthcare** will not pay **benefit** for the following **treatment** and extras in relation to the **Cigna Healthcare** dental cover:

a. **Benefit** is not payable for **treatment** which:

- is purely **cosmetic**; or
- is not necessary for continued **oral health**

b. **Benefit** is not payable for the following procedures, services or items:

- replacing any dental appliance which is lost or stolen;
- replacing a bridge, crown or denture which is or can be made useable according to a standard acceptable to a **dentist** of ordinary competence and skill in the country where **treatment** is incurred;
- replacing a bridge, crown or denture within five (5) years of original fitting unless:
 - the replacement is needed because of the placement of an original opposing full denture or extraction of natural teeth is needed; or
 - the bridge, crown or denture, while in the mouth, has been damaged beyond repair because of an **injury** the **employee, spouse** or their **dependant** receives while covered under the **plan**
- procedures and materials which are experimental, or which do not meet accepted dental standards;
- instruction for plaque control, oral hygiene and diet;
- procedures, services and supplies which are deemed by **Cigna Healthcare** to be medical procedures, services and supplies including mouthwashes and also including services and supplies provided in a **hospital** (except where **dental treatment** is neither wholly nor partly the reason for the stay in **hospital**);
- **orthodontic treatment** for **employees, spouse** and/or **dependants** who are over the age of eighteen (18)
- **orthodontic treatment** will only be paid for **dependent** children who are under the age of eighteen (18)

In this case, the **insured member** must send the following information prepared by the **dentist** who is to carry out the proposed **treatment** to **Cigna Healthcare** before **treatment** starts, so that **Cigna Healthcare** can confirm how much **benefit** will be payable

Benefit will be payable only if **Cigna Healthcare** has confirmed cover before **treatment** starts:

- a full description of the proposed **treatment**;
- X-rays and study models;
- an estimate of the cost of the **treatment**
- bite registration, precision or semi-precision attachments;
- procedures, appliances or restorations (except full dentures) whose main purpose is to: change vertical dimensions; or
- diagnose or treat conditions or dysfunction of the temporomandibular joint; or
- stabilise periodontally involved teeth; or
- restore occlusion.
- major **treatment** on **deciduous** or baby teeth for **dependant** children



Definitions

The words and phrases set out in bold have the below specified meaning. Where those words and phrases are used with those meanings, they will appear in bold italics format in the ***insured member*** documentation.

Unless otherwise provided, the singular includes the plural and the masculine includes the feminine, and vice versa

Benefit - Any medical, optical or dental benefit shown in the list of benefits

Cigna Healthcare or The Insurer or We/Our - Means the insurance company underwriting the risks covered by the policy.

Co-Insurance - A set amount or percentage of the costs of treatment required to be paid by the insured member for treatment which is covered under the plan.

Cosmetic - Services, procedures or items that are supplied only for aesthetic purposes, including those for dental treatment, which are not needed in order to maintain an acceptable standard of oral health.

Dental Injury - A physical injury to the teeth, gums, alveolar bone or soft tissue of the mouth

Dental Surgery Refers to any dental surgical procedure with anaesthesia, including dental extraction and bone or gum grafts.

Dentist A dentist, dental surgeon or dental practitioner who is registered or licensed as such under the laws of the country, state or other regulated area in which the **treatment** is provided.

Dependant - The insured member's unmarried children, whose names have been provided to Cigna Healthcare prior to the commencement of any treatment, but only if those persons are aged twenty-six (26) or under, either in full-time education or residing at the same residence as the insured member at the commencement of any treatment.

- Eligible dependants include step-children, legally adopted children and children under a primary care when the insured member provides appropriate evidence of the fact that the child is now their dependant.
- The insured member must apply to us within 30 days of the effective date of the adoption or fostering for the child to be covered.

Employee - Any member of staff of the client who is eligible to be covered under the plan.

Hospital - Any institution which is registered or licensed as a medical or surgical hospital in the country in which it is located. The following are not classed as hospitals: wellness and fitness centres, spas, nursing homes, retirement homes and convalescent homes.

Injury - A physical damage done to a person or a part of their body.

Insured Member Or You/Your - Refers generically to the employee, spouse and/or dependant covered under the plan. The insured member receives the benefits provided by Cigna Healthcare in respect of claims made and covered under the plan.

Medically Necessary - Has the same meaning as medical necessity.

Medical Necessity - Medically necessary covered services and supplies are those determined by the medical team to be:

- required to diagnose or treat an illness, injury, disease or its symptoms;
- orthodox, and accepted as standard practice as supported by evidence based medicine guidelines worldwide;
- clinically appropriate in terms of type, frequency,
- extent, site and duration;
- not primarily for the convenience of the patient, physician or other health care provider; and
- rendered in the least intensive setting that is appropriate for the delivery of the services and supplies.

Where applicable, the medical team may compare the cost-effectiveness of alternative services, settings or supplies when determining the least intensive setting.

Oral Health - The practice of keeping the oral cavity clean and free of disease and other problems.

Orthodontic - Dental specialty dedicated to the correction of improper positioning of the jaws and teeth in order to optimise the closure of the mouth (occlusion), to ensure proper functioning and alignment.

Orthodox - A procedure or treatment that is medically accepted in the country where treatment is incurred at the time of the commencement of the procedure or treatment, in that it accords with that upheld by a respectable, responsible and substantial body of medical opinion, experienced in the particular field of medicine.

Prior Approval - The requirement to obtain prior authorisation from Cigna Healthcare, when indicated in the plan, to access certain benefits. Once approved, Cigna Healthcare will issue a guarantee of payment to the treating hospital.

Spouse - The employee's legal husband or wife, or unmarried or civil partner Cigna Healthcare has accepted and who can benefit from cover under the plan.

Treatment - Medical treatment: refers to any surgery or medical treatment performed by a medical practitioner, considered to be medically necessary, in order to diagnose, cure or alleviate an illness or injury.



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Claims can be submitted via CignaEnvoy.com, which also provides your link to easy access to quality healthcare around the world. Mailing address for claims is Cigna Global Health Benefits, I Knowe Road Greenock, Scotland PA15 4RJ.

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