

Dental Insurance

Insurance Product Information Document: BRONZE benefit plan

Valid from 01.08.2020

Dental insurance distributor Northern 1 International Insurance Brokers OÜ (reg. no. 12806139, address Tartu mnt 84A-M302, 10112 Tallinn, www.northern1.eu), who is in the insurance intermediaries' list kept by the Estonian Financial Supervision and Resolution Authority (www.fi.ee).

The insurer is XL Insurance SE (registered in Ireland no. 641686) and authorised and regulated by the Central Bank of Ireland.
NB! This document does not contain full terms and conditions of the cover which can be found on website www.hambaravikindlustus.ee/en



What is insured?

1. REGULAR TREATMENT

Maximum benefit per policy year: **€1000**

X-rays up to €30 per policy year

- ✓ Intraoral X-ray
- ✓ Digital X-ray full mouth
- ✓ 3D X-ray

Minor treatments up to €280 per policy year

- ✓ Anesthesia – 2 per invoice
- ✓ Filling – 3 fillings (1 filling per tooth)
- ✓ Denture repair
- ✓ Tooth extraction

Major treatments up to €690 per policy year

- ✓ Crown, bridge and crown works – maximum of 1
- ✓ Root canal treatment – 3 teeth (1 or several root canals) per policy period

2. ACCIDENT TREATMENT

Maximum benefit per policy year: **€1000**

3. ORAL CANCER TREATMENT

Maximum benefit per lifetime: **€5000**

NB! Pre-authorization of certain treatments are requested in order to be covered by the dental insurance policy (please see Terms and Conditions HRK-4/2020 article 7.2).



What is not insured?

- ✗ treatments to replace the teeth which were already missing on or prior to your policy start date or were extracted during the appropriate waiting period for extractions or for treatment needed on or before that date;
- ✗ replacement of any existing crowns, bridges or dentures;
- ✗ general anaesthetics or intravenous conscious sedation;
- ✗ oral surgery, such as surgical extractions of impacted teeth;
- ✗ dental implant and implant crown;
- ✗ orthodontic treatment;
- ✗ any dental treatment which took place on or prior to the insured person's policy commencement date and treatment received after the policy period ceases;
- ✗ any treatment once the annual maximum quantity limits or maximum sum insured have been reached;
- ✗ cosmetic treatments and treatments not clinically necessary;
- ✗ any claims for the replacement of dentures damaged whilst not being worn;
- ✗ any treatment relating to damage or injury caused whilst participating in any physical contact sports when the appropriate tooth, mouth or head protection was not being worn
- ✗ oral cancer diagnosed, suspected, or for which tests were conducted or planned or for which a referral to a specialist had been made prior to the insured person joined the plan
- ✗ treatment involving the necessity of hospital in-patient, day-patient or out-patient care.

For full list of exclusions please see Terms and Conditions HRK-4/2020 article 8.



Are there any restrictions on cover?

- ! The benefits set out in this policy are only available to those between the ages of 21 and 70;
- ! 30 days waiting period for regular and 90 days waiting period for oral cancer treatment procedures;
- ! Certain treatments are only covered if pre-authorization of the treatment is received from claims administrator;
- ! **Deductible of 50% from sum insured per procedure is applied to certain treatments.**



Where am I covered?

- ✓ For the regular treatment the cover is only valid for the dental services in Estonia;
- ✓ In case accident treatment the cover is valid in Estonia and abroad;
- ✓ In case of oral cancer treatment cover is valid for services of any practice in Estonia.



What are my obligations?

- Read insurance contract terms and conditions thoroughly;
- To join a dental insurance contract you are obliged to submit an application and ensure accuracy of the information provided and if the data presented have been changed it is your obligation to inform the insurance broker as soon as possible in writing;
- You are obliged to pay the agreed premium for the annual cover;
- If there is any other insurance covering any of the same benefits you must disclose that information to insurance broker the moment of joining a dental insurance contract;
- Submit claims documents (claim form, dentist's invoice and proof of payment) to claims administrator.



When and how do I pay?

The premium must be paid at the time of purchasing this insurance policy in the manner required by the insurance distributor.



When does the cover start and end?

The insurance cover is in force and policy period shall be for the period running from the policy start date to the subsequent renewal date (which shall not be more than 12 months).

You have the right to cancel the policy with a 30 days notice in case the insurer has changed the terms and conditions or the premium and you don't agree with these changes or 1 month before renewal date. If the policy has not been cancelled 1 month before renewal date, it will renew for another 12 months at each renewal date for an unspecified term.

The cover shall come into force once payment of the premium has been made and it is received by the insurance distributor and the insurance distributor confirms concluding the insurance contract by sending an insurance policy to your e-mail address.



How do I cancel the contract?

You have a right to withdraw from the contract during 14 days from the policy commencement date and by informing insurance distributor about your wish to cancel the contract 1 month prior to renewal date.