

Clear Extra benefit schedule

The table below lists the treatments and maximum benefits available for the insured persons under your employer's dental policy with Unum Dental. We will send you a Policy schedule to confirm the insured persons and your cover start and end dates.

You can visit any dentist of your choice for treatment, anywhere in the world. If you receive NHS dental treatment, the charges will be reimbursed in full on all levels of cover. Private dental treatment charges will be reimbursed up to the limits shown in the table below.

Please read the 'More about your benefits' section before receiving treatment as it contains full details of how your benefit works, treatment definitions and policy exclusions.

		Level 1	Level 2	Level 3	Level 4	Level 5	Level 6
NHS Charges	Full cover for NHS dental treatment charges	✓	✓	✓	✓	✓	✓
Preventative treatment	Routine check-ups and examinations – per year	Up to NHS limits	£65	£75	£85	£100	£120
	Scale and polish with a dentist or hygienist – per visit	Up to NHS limits	£50	£60	£70	£80	£85
	Small x-rays (bitewings, intraoral or periapical) – per x-ray	Up to NHS limits	£6	£8	£10	£12	£15
	All other dental X-rays or scans – per x-ray	Up to NHS limits	£15	£25	£30	£38	£41
Restorative treatment	Periodontal treatment – per course of treatment	Up to NHS limits	£90	£95	£100	£110	£120
	Silver or amalgam filling – per tooth	Up to NHS limits	£35	£45	£55	£65	£80
	White or composite filling – per tooth	Up to NHS limits	£40	£65	£80	£100	£125
	Application of fissure sealant or topical fluoride – any number of teeth	Up to NHS limits	£30	£35	£40	£45	£50
	Root canal treatment - per tooth	Up to NHS limits	£110	£155	£200	£300	£325
	Simple extraction – per tooth	Up to NHS limits	£28	£32	£40	£55	£72
	Surgical extraction – per tooth	Up to NHS limits	£58	£65	£70	£100	£137
	Implant – per implant, including implant restoration/crown	Up to NHS limits	£425	£600	£850	£1,000	£1,300
	Crown – per tooth	Up to NHS limits	£205	£245	£310	£395	£480
	Post for crown – per tooth	Up to NHS limits	£40	£50	£75	£75	£90
	Bridge – any number of teeth	Up to NHS limits	£425	£600	£750	£900	£1,100
	Repairs to a Crown or Bridge	Up to NHS limits	£25	£35	£45	£60	£75
	Veneer – per tooth	Up to NHS limits	£210	£235	£265	£340	£410
	Inlay/onlay – per tooth	Up to NHS limits	£125	£175	£250	£315	£350
	Denture – per denture	Up to NHS limits	£360	£450	£550	£675	£750
	Repair or relines denture	Up to NHS limits	£30	£35	£45	£60	£75
Emergency & other treatment	Emergency dental treatment - up to 4 incidents per policy year	Up to NHS limits	£250 for each emergency incident				
	Child orthodontic treatment – per policy year	N/A	£420	£475	£550	£650	£725

Emergency & other treatment	Adult orthodontic treatment – per policy year (IOTN grades 4 & 5 only)	N/A	£420	£475	£550	£650	£725
	Mouth guards and splints	Up to NHS limits	£55	£60	£65	£70	£75
	General anaesthetic or sedation – per visit	Up to NHS limits	£65	£70	£75	£85	£95
	All other clinically necessary restorative treatment – per policy year	Up to NHS limits	£65	£80	£90	£105	£120
	Overnight hospital stays - up to a maximum of £1,000 per policy year	£100 each night	£100 each night	£100 each night	£100 each night	£100 each night	£100 each night
	Accident/injury dental treatment – per policy year	Up to NHS limits	£2,500	£3,000	£3,500	£4,000	£5,000
	Mouth cancer treatment – lifetime limit	£20,000	£20,000	£20,000	£20,000	£20,000	£20,000

More about your benefits

Worldwide cover

If you receive treatment outside the United Kingdom, please provide us with a receipt in English so we can process your claim. If your receipt is in any language other than English, you will need to arrange for the receipt to be translated into English. Your claim will not be assessed without this translation. We will not reimburse any costs relating to the translation. Claim payments will be made in Pounds Sterling according to the exchange rate on the day treatment was received.

Immediate cover and pre-planned treatment

You can claim for the treatments listed in the benefit table above from the day your cover under your employer's dental policy starts as detailed in your employer's policy schedule.

If treatment has been identified or recommended by your dentist before your cover under this policy commences, we will provide cover up to the amounts listed in the benefit table above as long as the treatment does not take place before your cover with us starts.

However, implants or bridges which are fitted to a pre-existing gap in the mouth are excluded unless you were previously insured for dental treatment under another insurer's policy immediately before joining this policy. Mouth cancer which existed prior to coverage under the policy is excluded.

How NHS dental treatment charges work

The NHS will provide any clinically necessary treatment needed to keep your mouth, teeth and gums healthy and free of pain. Different charges are applied to your treatment, depending on where you live in the UK. Please follow the links to see what these charges are in [England](#), [Wales](#), [Isle of Man](#), [Scotland](#) and [Northern Ireland](#). NHS dentists are also able to charge privately for certain treatments and we would therefore recommend speaking with your dentist to understand how your treatment will be provided before receiving treatment.

Courses of treatment

A course of treatment means the clinically necessary dental treatment needed to restore your oral health which is identified or planned by your dentist following an examination.

Treatment definitions

NHS dental treatment

What is covered	What is not covered
<ul style="list-style-type: none"> Costs for dental treatment carried out under the NHS will be reimbursed in full. If you have selected the Clear Extra 1 plan and receive private dental treatment, we will reimburse you the NHS equivalent charge for the whole course of treatment received. 	<ul style="list-style-type: none"> General exclusions - please see the end of this schedule for further details.

Preventative treatment

Preventative dental treatment helps to maintain oral health and identify clinically necessary treatment which may be needed to restore your oral health.

What is covered	What is not covered
<ul style="list-style-type: none"> Routine check-ups, examinations (including virtual examinations), new patient examinations & specialist dental assessments including orthodontic or implant assessments. Scale and polish with a dentist or a hygienist. Small x-rays which show a section of the mouth or a specific tooth such as bitewings, intraoral or periapical. All other dental X-rays such medium, large, panoramic x-rays or CT scans. 	<ul style="list-style-type: none"> Consultations or x-rays relating to cosmetic treatment. General exclusions - please see the end of this schedule for further details.

Restorative treatment

If your dentist identifies clinically necessary treatment during your examination, they will recommend a course of treatment to repair or replace damaged teeth and restore your oral health.

What is covered	What is not covered
<ul style="list-style-type: none"> • Clinically necessary dental treatment to repair or restore your oral health as listed in the benefit table. • Where a listed restorative treatment requires multiple visits to complete, we will reimburse the amount shown in the table for the whole course of treatment received and not for each individual visit, as follows: <ul style="list-style-type: none"> ◦ Periodontal treatment – treatment for Periodontitis received which may require multiple visits. ◦ Root canal treatment – treatment for infection in the centre of a tooth which may require multiple visits. ◦ Implants – the preparation, supply and fit of a dental implant, including the cost of the implant screw/abutment and restoration/crown. ◦ Crowns and Veneers - the preparation, supply and fit of a crown or veneer. ◦ Bridges and Dentures – the preparation, supply and fit of each Denture or Bridge across any number of teeth. 	<ul style="list-style-type: none"> • Implants or Bridges which are fitted to a gap in the mouth which existed prior to joining the plan unless you were previously covered for dental treatment under another insurance policy immediately before joining this policy. You will need to provide confirmation of coverage under the previous insurer's dental policy with your claim. • General Exclusions - please see the end of this schedule for further details.

Emergency treatment

What is covered	What is not covered
<ul style="list-style-type: none"> • Treatment carried out during a single emergency dental appointment to alleviate pain or discomfort, including call-out fees and prescription charges. 	<ul style="list-style-type: none"> • Permanent restorative treatment provided in subsequent appointments. This will be reimbursed according to the benefits as listed in the table. • General exclusions - please see the end of this schedule for further details.

Orthodontic treatment

What is covered	What is not covered
<ul style="list-style-type: none"> • Adult orthodontics treatment charges where graded 4 or 5 on the Index of Orthodontic Treatment Need (IOTN) scale. • Child orthodontic treatment charges for insured children up to their 25th birthday 	<ul style="list-style-type: none"> • Adult orthodontics treatment charges where graded 1-3 on the IOTN scale. • Child orthodontics treatment charges for children insured on the policy who are aged over 25. • General exclusions - please see the end of this schedule for further details.

Other treatment

What is covered	What is not covered
<ul style="list-style-type: none"> Mouth guards and splints to protect your teeth from injury or grinding - including sports guards. General anaesthetic or sedation as part of treatment including Intravenous (IV) sedation or inhalation sedation. Overnight hospital stays where you are admitted as an in-patient and the overnight stay is primarily related to dental treatment. All other clinically necessary treatment which is not listed in the benefit table but is required for your oral health. 	<ul style="list-style-type: none"> General exclusions - please see the end of this schedule for further details.

Accident/injury dental treatment

What is covered	What is not covered
<ul style="list-style-type: none"> Treatment to restore your oral health to its pre-accident condition following a sudden and unexpected identifiable incident which causes injury, including injuries caused when eating or drinking. 	<ul style="list-style-type: none"> General exclusions - please see the end of this schedule for further details.

Please note: Accident/injury cover will be considered a single course of treatment and accepted claims paid in line with the policy year in force at the time of the accident/injury. All treatment connected with accident/injury will be taken from the benefit limit in force on the date of the accident/injury. Treatment must commence within 6 months of the accident/injury date and then completed within 24 months. Cover for the accident/injury will end if you leave employment with your employer, you cancel coverage under this policy or your employer cancels this policy.

Mouth cancer treatment

What is covered	What is not covered
<ul style="list-style-type: none"> Mouth cancer treatment - for all appropriate treatment including reconstructive facial plastic surgery, oral therapies and restorative dental treatments. 	<ul style="list-style-type: none"> Mouth cancer which was identified prior to joining the plan. General exclusions - please see the end of this schedule for further details.

Please note: We consider mouth cancer to be a malignant tumour, tissue or cells, primarily in the oral cavity, lips, tongue or pharynx, characterised by the uncontrolled growth and spread of malignant cells and the invasion of tissue. This benefit can only be paid once in the policy lifetime of an insured member under this policy, or any other policy provided by us. Mouth cancer cover will end if you leave employment with your employer, you cancel coverage under this policy or your employer cancels this policy.

General exclusions

We will not cover:

- Cosmetic treatment – dental treatment which is purely to improve appearance and is not required to restore your oral health.
- Treatment carried out before your cover under this policy starts or after your cover ends.
- Missed appointment fees and dental sundries and consumables such as toothbrushes and dental hygiene products.