



Dencover Boost Dental Insurance

Policy Terms and Conditions

Dencover

Dencover 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. Unum Limited is incorporated in England under company number 00983768. Our registered office is at Milton Court, Dorking, Surrey RH4 3LZ. Please note that we monitor telephone conversations and e-mail communications from time to time for the purposes of training and in the interests of continually improving the quality of the service we provide.

Welcome to Dencover Boost

This document contains the Dencover Boost dental policy terms and conditions ('policy') to help you understand the cover that we offer and any exclusions that apply, so please read it carefully.

Unum does not give advice about the suitability of their insurance products. However, this insurance meets the needs and demands of an individual who wishes to arrange dental insurance to cover themselves for insured dental treatments. Please read the Dencover Boost policy terms and conditions and Benefit Schedule carefully to confirm that the product meets your individual circumstances. You should always seek independent advice from a financial adviser where you are unsure of the suitability of a particular product.

We reserve the right to change these policy terms and conditions, the cover provided and/or the premium charged at any time upon 30 days' notice. Please ensure that you notify us immediately of any changes that need to be made to your policy. Certain changes may affect your policy premium, but we will inform you of any change to the cost of your policy and you have the right to accept or decline the changes before they take effect. Please also make sure that we have up to date contact information for you as we may need to contact you from time to time. You can update your information using the [member portal](#), by contacting us on 0800 180 4505 or by emailing us at info@dencover.com.

About Unum

Dencover 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. Unum Limited is on the Financial Conduct Authority Financial Services Register, Firm reference number: 110408. Unum Limited is incorporated in England under company number 00983768. Our registered office is at Milton Court, Dorking, Surrey RH4 3LZ. You can confirm our Financial Conduct Authority, Firm reference number online at <https://register.fca.org.uk> or call the FCA on 0800 111 6768 (freephone).

References throughout these terms and conditions to 'we' and 'us' mean the insurer, Unum Limited, trading as Dencover. Any references to 'you' mean the insured person who purchases the policy, the policyholder.

Your cover

We will cover you and any additional adults and children named on your Policy Schedule for dental treatment while covered under this policy up to the amounts set out in your benefit table contained within the Benefit Schedule. Benefits are available for 12 consecutive months from the Policy Start Date until the Policy Renewal Date, both of which are set out on your Policy Schedule. We call this your Policy Year.

Your policy shall automatically renew on the Policy Renewal Date and will continue until your policy is cancelled by you or us, as permitted by these policy terms and conditions. See 'Cancelling your cover' for details of how you can cancel your policy with us. We will provide you with all your policy renewal details approximately 30 days prior to your Policy Renewal Date. You may opt out of your automatic renewal following receipt of your policy renewal details before your Policy Renewal Date. Please see the section entitled 'Renewal' for further details.

By you, we mean the insured person who purchases the policy. To purchase the policy you must be aged 18 years or older and permanently living in the UK. Please be advised that we cannot accept a PO Box or a 'care of' address as evidence of a permanent address.

Additional adults can be added to the policy, although they must be your spouse, your partner, a sibling of yours, a child above 18 years old or a parent of yours and they must live in the same property as you. Up to three (3) additional adults are allowed on the policy, all will be on the same Dencover Boost plan as you and you must pay a premium for each individual insured.

Eligible children can also be added onto the policy, although they must be a biological or legally-adopted child of you or your spouse, civil partner or partner, aged between six (6) months and 18 years at the start of the Policy Year and must live with you. Up to four (4) children can be covered and you must pay a premium for each insured child. We may ask to see an original birth certificate for each child.

If you choose to cancel your policy or remove an insured person from the policy we will apply a 12-month exclusion period during which you or the removed person will not be able to start a new Dencover dental insurance policy. The 12-month exclusion period will run from the date the cancellation takes effect. There may be some circumstances in which we will waive this exclusion period, such as removal of an additional adult following divorce or an insured child leaving home. You should contact us if you believe that the exclusion period should not apply.

We are required to comply with all UK legislation designed to address the threat of financial crime. We cannot provide services to persons who are on sanction lists provided by HM Treasury and therefore we reserve the right to refuse to provide cover at any time if you are subject to any sanctions.

Renewal

Your policy shall automatically renew on the Policy Renewal Date and will continue until your policy is cancelled by you or us, as permitted by the policy terms and conditions. We will provide you with all your policy renewal details approximately 30 days prior to your Policy Renewal Date. You may opt out of your automatic renewal following receipt of your policy renewal details before your Policy Renewal Date in any of the following ways:

By e-mail: info@dencover.com

By letter: Dencover, Milton Court, Dorking, Surrey, RH4 3LZ

By phone: 0345 712 5241

We reserve the right to review and change your premiums and will provide you with all details prior to your Policy Renewal Date giving you 30 days' notice in advance of any change in writing.

We may choose not to renew the policy by giving you 30 days' notice in advance in writing of your Policy Renewal Date.

If an insured child turns 18 during your Policy Year, at the Policy Renewal Date they will be quoted at the relevant adult premium rate. You will be notified of the new premium cost in the renewal communication we send to you. You have the right to reject this change at any time before the Policy Renewal Date. If you do reject the change, this will mean that the person will be removed from your policy, effective as of the Policy Renewal Date. Where you do not inform us that you wish to have the person removed, they will remain on your policy as an insured person, and you will be charged a premium for them.

Any insured child that turns 18 during your Policy Year shall only be added to the policy on the Policy Renewal Date provided that there are no more than three (3) additional insured adults on the policy at any one time. If there are already three (3) additional insured adults on the policy, the insured child will be removed from the policy effective as of the Policy Renewal Date.

When does cover end?

Cover for you or an insured person under the policy will end automatically if any of the following happens:

- You cancel your cover in accordance with these policy terms and conditions.
- We are unable to take the required premium payments by Direct Debit due to failed collection attempts. We shall attempt to make two consecutive collections and shall notify you if these collection attempts have failed and the policy has been cancelled. If you are struggling to make your premium payments, please contact us and we can discuss payment options with you.
- You cancel your Direct Debit instruction, resulting in a failure to comply with these policy terms and conditions.
- Where we suspect that you or any insured person on your policy has not provided all information in an honest manner to the best of their knowledge. We may also refuse all claims and we will not return any of the premium payments that you have already made, unless we are required to by law.
- We cancel the policy for one of the following reasons, failure to comply with these policy terms and conditions, non-payment of premiums, fraudulent activity, death, ineligibility, compliance with law and regulation (including sanctions) in accordance with these policy terms and conditions.
- An additional insured person no longer meets the criteria as defined in these policy terms and conditions.
- If you or an insured person dies. If you die, we may allow any additional insured adult(s) covered under the policy to remain on cover subject to these policy terms and conditions. They will need to contact us to arrange this.

Premiums

Premiums include insurance premium tax (IPT) where applicable. If the IPT rate changes, we will write to you at least 30 days in advance to notify you of any changes to your premium cost and when such changes will take effect. Your right to terminate the policy under these policy terms and conditions will not be affected.

Premiums must be paid by Direct Debit. If you do not pay the premiums or these policy terms and conditions are not met, we will not pay any claims you make and the policy will be cancelled.

We will collect your policy premium monthly. We will collect your first premium approximately 13 working days after you purchase the policy, we call this the "set up time". Your next premium will be collected on your nominated Direct Debit payment date.

Depending on the start date of your policy, you could have more than one premium payment collection in your first month.

Thereafter, your regular premium payments will be collected each month on or just after your nominated Direct Debit payment date, unless otherwise notified.

How to make a claim

You can visit any dentist that you like for treatment, including those that are located outside of the United Kingdom, subject to the policy terms and conditions. We would encourage you to check if you can claim for your treatment and how much you are entitled to claim before you have any treatment.

To check, please [login](#) to the member portal and access your benefit table in your Policy Schedule and the information contained in 'Cover details'. Alternatively, you may contact us, by e-mail at info@dencover.com or by phone 0345 712 5241 and we will happily explain your benefit table found in your Policy Schedule.

Please ensure that you ask for an itemised receipt from the dentist when you receive your treatment. The receipt must contain a full description of your treatment and any costs associated with the treatment as separate line items.

To make a claim:

1. Please visit mypolicy.boost.unum.co.uk and [login](#) using your Dencover Boost username and password (registration is required to gain access).
2. Select '**Make a claim**' from the member portal menu, enter all of the required treatment details and upload a scan or photo of your receipt.
3. Once the online form is fully completed please ensure that you click '**Confirm and submit claim**' to send your claim to us.

Please ensure that you complete the online form fully and that you upload your itemised receipt, your dentist's details and proof of payment. We cannot process any claim without proof of payment. If you receive treatment outside of the UK, you will need to provide a translated version of your receipt and any other documents in English. Any costs incurred to obtain translations will not be reimbursed by us.

Please note:

- We will notify you by email if your claim has been approved and payment will be made via a BACS transfer directly into your nominated UK bank account. It may take up to 5 (five) working days for payment to show in your account after we have confirmed payment of your claim.
- Treatment, including courses of treatment, that are planned or recommended by a dentist must be completed and paid for in full before any claim will be processed. Course of treatment means a treatment plan recommended by a dentist following an examination.
- You must submit claims within 12 months of the Treatment Completion Date. We have the right not to pay any claims that are submitted after this date. Treatment Completion Date means the date that treatment was received, or the final treatment was received in any course of treatment.
- Unless otherwise stated, the policy terms and conditions in force at the time that you receive treatment will apply, regardless of when the claim treatment is identified or when the benefit is paid.
- We may ask you to send additional information such as x-rays or your dental history to support any claim. Any additional documents must be in English or translated into English, at your own cost, where you have received treatment outside of the UK.

- We are not responsible for any costs that you incur to provide the information required to support any claim and any charges for obtaining this information must be paid by you.
- We may need to discuss a claim, which includes the medical information we hold about you, with your dentist or an independent consultant. You will be asked to consent to this when you submit your claim to us. If you do not consent to this, we may not be able to process your claim.
- If you need to make a claim for mouth cancer, evidence of the diagnosis such as a letter or a medical report from your treating specialist will be required to support your claim.
- If we overpay you for a claim, we reserve the right to recover the sum overpaid from you. We may ask you to repay us directly, or we may deduct the overpaid amount from another claim you make.
- If you have a policy with another insurer and plan to claim for the same treatment, you must tell us. We may contact them to obtain further information. If you receive reimbursement from them, we may not pay a portion of the claim that you submit to us. This will not affect any of the annual limits set out in your benefit table in the Benefit Schedule.

Making changes to your policy

If you wish to make one of the approved changes listed below during your Policy Year, please contact us using one of the below methods. We reserve the right to refuse any changes (except for cancellations made in accordance with these policy terms and conditions) until the Policy Renewal Date.

We would encourage you to e-mail us to make changes in the first instance at: info@dencover.com. Alternatively, you may contact us by phone 0345 712 5241 or via the member portal using the 'Contact Us' button located in the 'Help' section and we will happily assist you to make approved changes.

Adding insured persons

You can add additional insured persons at any time during your Policy Year and the change will take effect at the start of your next full month of cover. This will be based on your Policy Start Date. The benefit limits of the additional insured person(s) will be adjusted pro-rata as follows:

- If they are added to the policy in month 1- 6 of your Policy Year – full annual benefits apply.
- If they are added to the policy in month 7-12 of your Policy Year – annual benefits are halved.

This will be reflected in the revised Policy Schedule that we will send to you to confirm the changes that you have made to the policy.

Changing your plan

You may change your plan only once during your Policy Year. This change will take effect at the start of your next full month of cover. This will be based on your Policy Start Date and any changes will not affect your Qualifying Period.

Cancelling your cover

You have 14 days from your Policy Start Date (otherwise known as the 'cooling-off period') to cancel the policy by contacting us. We will refund any premiums you have paid providing no claims have been made on the policy.

After the cooling-off period, you can cancel the policy at any time by giving us 30 days' notice in any of the following ways:

By email: info@dencover.com

By letter: Dencover, Milton Court, Dorking, Surrey, RH4 3LZ

By phone: 0345 712 5241

We will not refund any premiums you have already paid and will also apply a 12 month exclusion period. This means that you, and any insured persons on the policy cannot take out a new Dencover dental insurance policy for 12 months from the date that the cancellation takes effect. There may be some circumstances in which we will waive this exclusion period. You should contact us if you believe that the exclusion period should not apply. We will not approve any claims for treatment that are carried out after the policy cancellation date.

Removing insured persons

You can remove an insured person by giving us 30 days' notice in writing. We will not refund any premiums you have already paid and will also apply a 12 month exclusion period. This means that the individual cannot take out a new Dencover dental insurance policy for 12 months from the date that the cancellation takes effect. There may be some circumstances in which we will waive this exclusion period. You should contact us if you believe that the exclusion period should not apply.

Changes we may make to your policy

We reserve the right to change these policy terms and conditions, the cover provided and/or the premium charged at any time. We will give you 30 days' written notice prior to making these changes which shall be sent to your last known e-mail address. Please ensure that you keep your e-mail address up to date on the member portal. Changes will take effect following expiration of the 30 day notice period. If you are unhappy with the changes we propose or we have made, you may cancel the policy by giving us 30 days' notice in writing.

Complaints

In the first instance, please direct any complaints to our Complaints Representative:

By e-mail: complaints@unum.co.uk

By letter: Dencover, Milton Court, Dorking, Surrey, RH4 3LZ

By phone: 0345 600 6763

If it is not possible to fully resolve your complaint straight away, we will acknowledge your complaint within five (5) working days of receipt. One of our complaint handlers will investigate your complaint and keep you regularly informed of our progress. We will inform you of the results of our investigation as soon as possible.

In order to deal with your complaint as quickly as possible we may contact you and third parties for additional information. By submitting a complaint, you are giving us consent to contact relevant third parties to assist in our investigation.

The Financial Ombudsman Service

We will do our best to resolve your complaint. However, if you remain dissatisfied or if our investigations have not been completed within eight (8) weeks you may be eligible to refer your complaint to the Financial Ombudsman Service ('FOS').

You can contact the FOS at:

The Financial Ombudsman Service, Exchange Tower, London E14 9SR

Telephone number: 0800 023 4567

E-mail: complaint.info@financial-ombudsman.org.uk

Website: www.financial-ombudsman.org.uk

The Financial Services Compensation Scheme

We participate in the Financial Services Compensation Scheme ('FSCS'). If we are unable to meet our liabilities, you may be entitled to compensation from the FSCS. Please note that the FSCS does not cover the Channel Islands or the Isle of Man.

You can contact the FSCS at:

Financial Services Compensation Scheme Limited, 10th Floor Beaufort House, 15 St Botolph Street, London EC3A 7QU

Telephone number: 0800 678 1100

E-mail: enquiries@fscs.org.uk

Website: www.fscs.org.uk

Other important information

Law and jurisdiction

These policy terms and conditions are subject to English law and by taking out the policy, you accept that any dispute will be subject to the exclusive jurisdiction of the English Courts.

For the purposes of the policy, the UK means England, Northern Ireland, Scotland, Wales, the Channel Islands and the Isle of Man.

Data protection

We are data controllers for insurance purposes, as defined in the Data Protection Act 2018. All personal information ("Protected Data") that you give to us is dealt with in the strictest confidence according to the data protection laws of the UK. If we send your Protected Data for processing to third parties located outside the UK, we shall ensure that the same duty of confidentiality applies.

Information about you and any other insured persons is held and used to provide the insurance services set out under these policy terms and conditions, to administer your policy, to comply with the law, and develop customer relationships and services. In certain circumstances, medical service providers, including dentists (or others) will be asked to supply us with further information.

When you provide information about other insured persons, we take this as confirmation that you have their consent. As you are acting on behalf of any other insured persons covered under the policy, we will send all correspondence, including communications about claims, to you unless you advise us otherwise.

In certain circumstances we are required by law to disclose information to law enforcement agencies about suspicions of fraudulent claims and other crime.

For additional detail on how we use Protected Data, please go to www.unum.co.uk/dental/data-policy.