AON Radiant Extra Benefit Schedule

The table below lists the treatments and maximum benefits available for the Policy Period. These benefits apply to each person named on the Confirmation of Cover.

		Aon Radiant Extra 2	Aon Radiant Extra 3	Aon Radiant Extra 4	Aon Radiant Extra 5
NHS Charges The limits shown in this section apply to **any person** named on the Confirmation of Cover.	Full cover for NHS dental treatment charges	✓	✓	✓	✓
Preventative treatment The limits shown in this section apply to **members and partners** named on the Confirmation of Cover.	Routine check-ups and examinations – per visit	£40	£50	£70	£80
	Scale and polish with a dentist or hygienist – per visit	£55	£60	£90	£100
	X-rays – per policy period	£40	£50	£80	£90
Preventative treatment (insured children) The limits shown in this section apply to **any children** named on the Confirmation of Cover (up to the age of 25).	Full cover for routine check-ups and examinations	✓	✓	✓	✓
	Full cover for a scale and polish with a dentist or hygienist	✓	✓	✓	✓
	Full cover for X-rays	✓	✓	✓	✓
Restorative treatment The limits shown in this section apply to **any person** named on the Confirmation of Cover.	Fillings & root canal treatment – per policy period	£165	£275	£330	£385
	Extractions – per policy period	£125	£175	£225	£250
	Major treatment: Implants, crowns, bridges, dentures, veneers and all other clinically necessary dental treatment – per policy period	80% of treatment cost up to £300	80% of treatment cost up to £500	80% of treatment cost up to £800	80% of treatment cost up to £2,200
Emergency and other treatment The limits shown in this section apply to **any person** named on the Confirmation of Cover.	Emergency dental treatment – up to 4 incidents per policy period	£250 for each emergency incident	£250 for each emergency incident	£250 for each emergency incident	£250 for each emergency incident
	Child orthodontic treatment – per policy period	£325	£400	£500	£600
	Adult orthodontic treatment – per policy period (IOTN grades 4 & 5 only)	£325	£400	£500	£600
	Mouth guards and splints – per policy period	£50	£55	£60	£65
	Overnight hospital stays - up to a maximum of £1,000 per policy period	£100 each night	£100 each night	£100 each night	£100 each night
	Accident/injury dental treatment – per policy period	£7,500	£7,500	£7,500	£7,500
	Full cover for mouth cancer treatment – defined below	✓	✓	✓	✓

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More information about the benefits

Choose any dentist, anywhere worldwide

Employees can choose to visit any dentist of their choice for treatment, anywhere in the world.

Courses of treatment

A course of treatment means the clinically necessary procedures identified or planned by a dentist after an initial examination to restore oral health.

NHS dental treatment

What is covered	What is not covered
• Costs for dental treatment carried out under the NHS will be reimbursed in full.	• **General exclusions - please see the end of this schedule for further details.**

How NHS dental treatment charges work

The NHS will provide any clinically necessary treatment needed to keep the patient's mouth, teeth and gums healthy and free of pain.

Different NHS charges apply depending on the region of the UK. Please see this guide for more information designed to help members understand the different fees and how to make a claim.

Please note that NHS dentists are also able to charge privately for certain treatments and we would therefore recommend speaking with a dentist to understand how treatment will be provided before receiving treatment.

If NHS dental treatment is received, 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 above.

Preventative treatment

Preventive dental care helps maintain oral health and if necessary, identify any necessary treatments needed to restore it.

Please note that claims made for preventative treatment (as listed under 'What is covered' below) for a child named on the Member's Confirmation of Cover will be paid in full on any level of cover

What is covered	What is not covered
• 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. • Dental x-rays including small x-rays, bitewings, intraoral, periapical, medium, large or panoramic x-rays, or CT scans.	• Consultations for cosmetic treatment. • **General exclusions - please see the end of this schedule for further details.**

Restorative treatment

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

What is covered	What is not covered

• Fillings and root canal treatment:
  ◦ White (composite) fillings
  ◦ Silver (amalgam) fillings
  ◦ Glass ionomers
  ◦ Fissure sealants and topical fluoride application
  ◦ Root canal treatment
• Extractions
• Major treatments:
  ◦ Implants
  ◦ Crowns
  ◦ Bridges and dentures
  ◦ Inlays/onlays
  ◦ Veneers
• All other clinically necessary dental treatment to repair or restore your oral health – including but not limited to
  ◦ Periodontal treatment for Periodontitis,
  ◦ Posts, pins and dressings,
  ◦ Temporary fittings,
  ◦ Repairs to a Crown or Bridge and repair/reline dentures and
  ◦ General anaesthetic or sedation.
  ◦ Consumables, such as toothbrushes, toothpaste or interdental brushes, which are purchased at the time of treatment from the dental practice and which are listed on the itemised receipt. This excludes Radiant Extra 1 as there is no NHS equivalent for consumables.
	• 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
• Treatment carried out during a single emergency dental appointment to alleviate pain or discomfort, including call-out fees and prescription charges.	• 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.**

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Orthodontic treatment

What is covered	What is not covered
• 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 and including the age of 25, at any grade on the Index of Orthodontic Treatment Need (IOTN) scale.	• 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 26 or over. • **General exclusions - please see the end of this schedule for further details.**

Other treatment

What is covered	What is not covered
• Mouth guards and splints to protect teeth from injury or grinding - including sports guards. • Overnight hospital stays where the member or eligible dependant are admitted as an in-patient and the overnight stay is primarily related to dental treatment.	• **General exclusions - please see the end of this schedule for further details.**

Accident/injury dental treatment

What is covered	What is not covered
• Treatment to restore oral health to its pre-accident condition following a sudden and unexpected identifiable incident which causes injury, including injuries caused when eating or drinking.	• **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, with accepted claims paid according to the Policy Period in effect at the time of the accident/injury. All related treatments will be deducted from the benefit limit applicable on the date of the accident/injury. Treatment must begin within 6 months of the accident/injury and be completed within 24 months. Coverage for the accident/injury will end when the member's policy coverage ends, as per the policy's terms and conditions.

Mouth cancer treatment

What is covered	What is not covered
• Mouth cancer treatment - for all appropriate treatment including reconstructive facial plastic surgery, oral therapies and restorative dental treatments.	• Treatment for mouth cancer where mouth cancer as defined below 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. Mouth cancer cover will end when cover ends for the member, as per the terms and conditions of the policy.

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General exclusions

We will not cover:

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

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