

DENTAL PLAN

The Company will pay Reasonable and Customary Charges for the following dental treatment performed by a Dentist or Oral Hygienist for the annual premium per member of **US\$400** between the age of **0** to **65** years old.

Routine Dental Treatment

up to US\$700 per year

- Examinations
- Tooth cleaning
- Normal composite fillings
- Inlay (excluding gold inlays)
- Onlay (excluding gold onlays)
- Extractions
- Sealant

Major Restorative Dental Work

up to US\$1,500 per year

- Removal of impacted, buried or unerupted teeth
- Removal of roots
- Root canal treatment
- Removal of solid odontomes
- Apicectomy
- New or repair of bridge work (excluding gold bridge work)
- New or repair of crowns (excluding all gold crowns)
- New or repair of upper and lower dentures

DEFINITIONS

“Dentist” shall mean a properly qualified practitioner other than a relative of any Insured Person by blood or marriage, who is licensed by the competent authorities of the country in which treatment is provided to render dental treatment, and who in rendering such treatment is practicing within the scope of his or her licensing and training.

“Oral Hygienist” shall mean a properly qualified employee of a Dentist who is licensed, if required, by the competent medical authorities of the country in which treatment is provided to render services such as cleaning and anaesthesia, and who is rendering such treatment at the direction of, and under the direct supervision of, a licensed Dentist.

TERMS & CONDITIONS

Routine Dental Treatment

Costs incurred within 3 months from the Commencement Date of this option or Your Date of Entry, whichever is the later, are excluded except Examinations and Tooth cleaning.

Major Restorative Dental Work

Costs incurred within 6 months from the Commencement Date of this option or Your Date of Entry, whichever is the later, are excluded.

For groups where five or more employees are insured, all dental waiting periods shall be waived.