

# Smile



\*Vhi DeCare Dental pays up to **€2,500** of charges annually for less than **€11** a month for an adult and just **€5** a month for a child!<sup>†</sup>

## Recoup up to €2,500 every year!

Visiting the dentist regularly is an absolute must if you want to keep your smile and oral health in top form. But doing so can be costly.

**Vhi DeCare Dental will now cover 70% of your dental charges (up to €2,500 per year) for less than €11 a month<sup>†</sup> – and you'll enjoy an even lower premium if you benefit from PRSI.**

Not only are you covered for regular charges such as cleanings, fillings, root canals etc., but you're also protected against unforeseen dental expenses and emergencies that can really add up.

As a Vhi Healthcare member, you qualify for a 10% discount on the regular cost of Vhi DeCare Dental.

## What Vhi DeCare Dental covers

Vhi DeCare Dental pays for the following:

- 100% of your recommended yearly exams and cleanings\*
- 70% of costs for fillings, space maintainers and sealants
- 70% of costs for crowns, root canals and many other dental services
- One emergency dental care session worldwide per year

\*Vhi DeCare Dental PRSI Plan will cover your second exam (if required) as your first exam will be covered by PRSI.

You should note that a three month waiting period applies, with the exception of yearly exams/cleanings and emergency treatment.

## Covered by PRSI? You can still benefit

Vhi DeCare Dental picks up where PRSI leaves off – if you qualify for dental benefit under PRSI and use a PRSI dentist, your plan includes 100% coverage for one exam/cleaning while PRSI covers the other\*. It also offers 70% coverage for other dental treatments after PRSI payments, where applicable.

\*Vhi DeCare Dental PRSI Plan will cover your second exam (if required) as your first exam will be covered by PRSI.

## And there's more

Vhi DeCare Dental also provides an Oral Health Excellence Kit including a plan overview, oral health guidebook and access to online resources, all when you purchase your Vhi DeCare Dental Plan.

<sup>†</sup>Terms and conditions apply.

## Your savings quickly add up

The following example is based on an adult who is a Vhi Healthcare member. The cost is even lower for participants eligible for PRSI dental treatment benefit and also for children.

Your Annual Premium Cost	Without Vhi DeCare Dental, You Would Pay	With Vhi DeCare Dental, You Pay Only	You Save!
€129.20	Two exams and cleanings – €174	€0	€174
	Two fillings – €200	€60	€140
	One crown – €917	€275.10	€641.90

*Example is based on average dentist charges for examinations and cleanings, three surface composite fillings and porcelain bonded to precious metal crowns. Vhi DeCare Dental pays 100% of your dentist's eligible preventive/diagnostic charges and 70% of other eligible charges including major dental work, plus lifetime orthodontic coverage up to €1,000 for participants aged 8 to 18 (an 18 month waiting period applies). Call us for details.*

## Two easy ways to join

### By phone:

**CallSave 1850 200 492**

(8.00am to 8.00pm, Mon - Fri, 9.00am to 2.00pm, Saturday)

### By post:

Complete and mail the application on the other side of this sheet to:

Customer Services Manager

Vhi DeCare Dental

IDA Business Park

Purcellsinch

Dublin Road

Freepost

Kilkenny

*This brochure is issued as a guide only and does not form part of a contract. A copy of the rules of membership will be issued on registration or may be had in advance, on request. The Voluntary Health Insurance Board (trading as Vhi Healthcare) is a Multi-Agency Intermediary regulated by the Financial Regulator.*



## Annual Rates

	Vhi DeCare Dental	Vhi DeCare Dental (inc. PRSI discount)
Per Adult	€143.55	€123.45
Per Adult (inc. 10% Vhi member discount)	€129.20	€109.10
Per Child**	€58.00	€58.00
Per Child** (inc. 10% Vhi member discount)	€52.20	€52.20

\*\*4th and subsequent children are free.

Prices shown are net of tax relief at 20% on the element of the premium referable to non-routine dental treatments only.

Are you currently a Vhi Healthcare member? Yes  No

If YES, please supply your membership no.:

## Personal Details

Mr./ Mrs./ Miss/ Ms.: [Please circle as appropriate]

First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Gender: M  F

Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Occupation: \_\_\_\_\_

**PPS No.:** (Must be completed for application to be processed):  
 \_\_\_\_\_  
Only used for allowing tax relief at source to your subscriptions by arrangement with Revenue

Daytime Telephone No.: \_\_\_\_\_ Evening Telephone No.: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Group Name: \_\_\_\_\_ Group Number: \_\_\_\_\_

Number needed for salary deduction (Staff/ Personnel/ Payroll/ Teacher/Other): \_\_\_\_\_

**Level of Cover Required**  
 Vhi DeCare Dental Plan  Vhi DeCare Plan PRSI\*\*   
\*\*Note: You must qualify for dental PRSI expenses and must use a PRSI Dentist.

## Additional Persons to be Insured

First Name/Surname	Date of Birth	Relationship	Vhi Policy No.

## Method of Payment

Through your Bank, Building Society or Credit Card   
(We accept all MasterCard or Visa credit cards. To pay by direct debit please complete the mandate opposite)

## For Office Use Only

S.P.I.N. \_\_\_\_\_  
 Membership No.: \_\_\_\_\_  
 Date: \_\_\_\_\_ Comp. By: \_\_\_\_\_

## Dental Direct Debit Mandate Applicant Details

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Daytime Telephone No.: \_\_\_\_\_ Evening Telephone No.: \_\_\_\_\_  
 Method of Payment  
 Monthly   
 Name on Bank, Building Society or Credit Card Account: \_\_\_\_\_

## Bank/Building Society Account Details

To the Manager of \_\_\_\_\_ Bank/Building Society  
 Branch (Full Postal Address): \_\_\_\_\_  
 \_\_\_\_\_

Branch Code:        
 Bank/Building Society Account No.:

## Credit Card Account Details

Credit Card No.:            
 Security Pin No.:    Note: Your security pin no. is last three digits located at the back of your credit card.  
 Expiry Date:

I/We authorise you until further notice in writing to charge to my/our account with you unspecified amounts which may be debited thereto at the instance of Voluntary Health Insurance Board.

**X Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Banks/Building Societies may decline to accept instructions to charge direct debits to certain types of accounts other than current accounts.

## For Office Use Only

Comp. By: \_\_\_\_\_ Comp. Dt.: \_\_\_\_\_  
 Membership No.: \_\_\_\_\_  
**Originator Code: 300001**

Vhi Healthcare and DeCare Dental Insurance Ireland Ltd. may wish to send you information on other products and services which we believe may be of interest to you. If you do not wish to receive this information please tick the appropriate box(es) below:

- I do not wish to receive details of other Vhi Healthcare products and services
- I do not wish to receive details of other Vhi DeCare Dental products
- I do not wish to receive details of other non-Vhi Healthcare products and services

## To be signed by the Applicant

I agree to be bound by the Rules as set out by Vhi Healthcare and DeCare Dental Insurance Ireland Ltd. I agree to have the subscription deducted from my salary/pension where such arrangements apply. I consent to the transfer of my personal data to DeCare Dental Insurance Ireland Ltd.'s American parent company as necessary for the performance of my contract in accordance with Section 11(1) of the Data Protection Acts, 1988 and 2003.

**X Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## Data Protection Notice

Information obtained by Vhi Healthcare and DeCare Dental Insurance Ireland Ltd. becomes part of the data we hold for the purpose of administering healthcare-related services. In accordance with the Data Protection Acts, 1988 and 2003 details of our use of personal data appear in the public register held by the Data Protection Commissioner. In order to administer this product it will be necessary to send your data outside of the EU. Such data will continue to be safeguarded consistent with the standards in the Data Protection Acts, 1988 and 2003. Vhi Healthcare and DeCare Dental Insurance Ireland Ltd. may disclose information on a strictly confidential basis for the purpose of research, statistics or suspected fraud as follows:

- Anonymised dental information to those involved with your treatment or care.
- Anonymised non-dental information to others for the purpose of efficient administration (for example: audit, systems development and administration).
- Other insurance companies and/or the relevant authorities (for example An Garda Síochána).

If you have any queries about your data, please write to the Data Manager, Vhi DeCare Dental, IDA Business Park, Purbhillsinch, Dublin Road, Freeport, Kilkenny.

The Voluntary Health Insurance Board (trading as Vhi Healthcare) is a Multi-Agency Intermediary regulated by the Financial Regulator.