

Claiming made easy



Bupa dental insurance



Your go-to claiming guide

Your dental insurance is here to help with your dental costs. You can claim money back on your everyday check-ups and treatments. You're also covered for injuries, emergencies, orthodontic treatment and oral cancer.

This guide will tell you how to claim for different types of dental treatments. However, it's important you read Section 3 of your policy guide to fully understand what is and isn't covered on your policy.

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How to make a claim on your dental cover

Get money back towards your dental treatment, up to your benefit allowance.



Two ways to claim:

1. At most Bupa dental practices

We'll settle your claim at the reception desk.

Check [Finder](#) to see which practices offer our hassle-free **Instant Claim** service.

2. At any other dental practice

1. **Pay** for your treatment.
2. **Keep** your receipt and invoice.
3. **Turn to each section** to see what you need to send with your claim.
4. **Send us** your claim in [My Bupa](#).

We process
90%
of claims
within
24 hours

Claiming for oral cancer

Always call us on **0800 237 777** before you start any oral cancer consultations, tests or treatment.



Go to bupa.co.uk/mybupa to submit claims and manage your dental cover online.

What we don't cover

We don't cover cosmetic treatment, dental aesthetics, or any restorative treatment we don't consider **clinically necessary**. **Section 3** of your policy guide explains what you're covered for by each type of dental treatment.

Need to know

Clinically necessary dental treatment is any care your dentist says you need to keep your teeth and gums healthy and pain-free. It doesn't include cosmetic treatments. Sometimes, our dentist will check your claim to see if the treatment was necessary. If they decide it wasn't, we won't pay your claim.



Remember

You don't need to speak to us before going ahead with your dental treatment.

This means it's important you understand what's covered by your policy, as we can't tell you this in advance. We check this when you claim.



What you need to make a claim

Use a Bupa dental practice offering Instant Claim and we'll do the legwork for you. Don't worry though, if you use another dentist it's still super simple to claim.

Remember, we don't pre-authorise treatment, so always use your policy guide to check what you're covered for before having any work done.

Your receipt

When claiming for preventative treatment, you only need to send your receipt from your dentist with your claim.

When claiming for any other type of treatment, ask your dentist for a receipt that includes:

- 1 your dentist's name, practice name and postcode
- 2 the name of the person treated
- 3 confirmation that treatment has taken place
- 4 proof that you've paid

Need to know

We can't process your claim with just a treatment plan. You must show your treatment has been completed and paid for.



Sometimes, your dentist may ask for a deposit before you have your dental treatment. If you pay a deposit, then you can only claim for this once you've had your dental treatment.

Receipt

1

[Dentist name]
[Practice name]
[Practice postcode]

[Invoice number]

[Date, Time]

2

[Patient name]
[Patient address]

3

Confirmation of treatment
[Treatment, Date] £XX.XX
[Treatment, Date] £XX.XX

Subtotal

VAT

Total

£XX.XX

£XX.XX

£XX.XX

4

Credit card
Auth. code
Balance due

£XX.XX

123456

£XX.XX

Notes & Terms

Turn to each section to see what else you need to send us with your claim.



Preventative treatment

What is preventative treatment?

This is regular treatment to help maintain your oral health. It keeps your teeth and gums healthy and free from pain. It includes:

- new patient examinations
- check-ups and routine examinations
- scale and polishes
- X-rays

How to claim for preventative treatment

If you haven't used Instant Claim, simply upload a copy of your receipt or invoice to My Bupa.

Sometimes, your dentist may ask for a deposit before you have your dental treatment. If you pay a deposit, then you can only claim for this once you've had your dental treatment.

Remember

If you have multiple treatments, you must ensure you claim for each one. For example, if you have a check-up, and scale and polish, ensure you claim for these one by one. This means we can cover from each benefit allowance.



Restorative treatment

What is clinically necessary restorative treatment?

This is treatment that restores or replaces damaged, decayed or missing teeth. It can include:

- fillings
- root canals
- inlays and onlays
- crowns
- bridges
- veneers
- extractions
- implants
- dentures
- mouthguards
- periodontal treatment and oral surgery

Need to know

We don't cover treatment for:

- gaps in your teeth you had before the start of your policy
- conditions you had before the start of your policy, for example, for teeth that didn't develop
- a replacement bridge, crown or denture, if it was fitted before the start of your policy

Please see your policy guide for full details of what is and isn't covered.

How to claim for restorative treatment

If you haven't used Instant Claim, simply upload a copy of your receipt to My Bupa. It must include:

- ✓ the dentist's name, practice name and postcode
- ✓ the name of the person treated
- ✓ confirmation that treatment has taken place
- ✓ proof that you've paid

Sometimes, your dentist may ask for a deposit before you have your dental treatment. If you pay a deposit, then you can only claim for this once you've had your dental treatment.

When we review your claim, sometimes we may need more information. If so, we'll send you an email to explain what we need and why.

We may ask for:

- X-rays of your teeth, before and after treatment
- the number of the tooth that was treated (known as 'tooth notation')
- your dentist's full clinical notes. These are the notes they take when treating you.
- any other supporting evidence. For example, photos of your teeth before and after your treatment, or a letter from your dentist confirming why you needed your treatment

If claiming for an implant, bridge, or denture, we'll need your dentist to tell us when your tooth was extracted, or lost.

Emergency treatment

What is emergency treatment?

You'd claim for an emergency if you were in severe pain, couldn't eat, or your condition needed immediate treatment.

Need to know

We don't cover treatment which was pre-planned and not a genuine emergency.

Please see your policy guide for full details of what is and isn't covered.

How to claim for emergency treatment

If you haven't used Instant Claim, simply upload a copy of your receipt to My Bupa. It must include:

- ✓ the dentist's name, practice name and postcode
- ✓ the name of the person treated
- ✓ confirmation that treatment has taken place
- ✓ proof that you've paid
- ✓ information to show it was a dental emergency appointment

Ask your dentist for this information. Sending this with your claim, will help speed up how quickly we can finalise your claim.

Remember

You can claim for your first emergency treatment using your emergency benefit. After this, claim for any follow-up appointments separately, using your restorative benefit.

Treatment for an injury

What is a dental injury?

A dental injury is caused by an external blow to the face or mouth.

Need to know

Your policy doesn't cover treatment needed:

- for an injury you had before your policy started
- due to damage caused when eating food

Please see your policy guide for full details of what is and isn't covered.

How to claim for a dental injury

If you haven't used Instant Claim, simply upload a copy of your receipt to My Bupa. It must include:

- ✓ the dentist's name, practice name and postcode
- ✓ the name of the person treated
- ✓ confirmation that treatment has taken place
- ✓ proof that you've paid

We'll also ask for:

- a detailed account of what happened, including whether you were playing a contact sport. If playing contact sport, you'll need to send us a letter or email from your dentist, explaining you were wearing the mouthguard which was fitted by them.
- X-rays of your teeth, before and after treatment
- photographs of your teeth, before and after treatment
- notes from your dentist that explain the treatment they carried out on your teeth

Ask your dentist for this information. Sending this with your claim, will help speed up how quickly we can finalise your claim.



Orthodontic treatment

What is orthodontic treatment?

This is treatment that straightens your teeth, fixes bite issues, or improves your jaw alignment. It often involves braces or other devices.

You're covered for clinically necessary orthodontic treatment. This is determined by your Index of Orthodontic Treatment (IOTN) level. Your dentist or orthodontist can give you this information.

Your policy covers:

- IOTN level four or above for adults aged 19 years and older
- IOTN level three or above for those aged 18 years and younger

Your policy also covers space maintainers for children aged up to 18 years old.

How to claim for orthodontic treatment

If you haven't used Instant Claim, simply upload a copy of your receipt to My Bupa. It must include:

- ✓ the dentist's name, practice name and postcode
- ✓ the name of the person treated
- ✓ confirmation that treatment has taken place
- ✓ proof that you've paid

We'll also ask for

Your treatment plan showing:

- the total cost
- how long your treatment will take
- your IOTN level – this will be a number from one to five



Treatment abroad

It's good to know that you're covered worldwide. You can submit a claim for preventative, restorative, emergency and injury treatment you have abroad.

If you're claiming for restorative treatment abroad

We'll always ask you for:

- X-rays of your teeth, before and after treatment
- the number of the tooth that was treated (known as 'tooth notation')
- your dentist's full clinical notes. These are the notes they take when treating you
- any other supporting evidence. For example, photos of your teeth before and after your treatment, or a letter from your dentist confirming why you needed your treatment
- if claiming for an implant, bridge, or denture, we'll need your dentist to tell us when your tooth was extracted, or lost

Need to know

We don't cover:

- cosmetic treatment
- dental aesthetics
- or any restorative treatment our dentist doesn't accept is clinically necessary

Remember, we don't cover treatment for:

- gaps in your teeth you had before the start of your policy
- conditions you had before the start of your policy, for example, for teeth that didn't develop
- a replacement bridge, crown or denture, if it was fitted before the start of your policy

Please see your policy guide for full details of what is and isn't covered.

Ask your dentist for this information. Sending this with your claim, will help speed up how quickly we can finalise your claim.

Remember

Make sure your invoice, receipt, and any information you send us is clear and easy to understand. If we're unable to understand this information, we may ask that you send a translated copy from your dentist.

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