

Terms and Conditions for Patient Membership Plans

What does the dental membership plan provide?

Dental membership is a monthly subscription which covers the costs of routine dental examinations, professional clean and polish, X-rays and provides a 10% discount on most treatments. You will receive regular care to keep on top of your oral health and have easy access to trusted care if emergencies arise.

The membership scheme is a pay in advance scheme. Members must pay for either six months for the Elmet Dental Care Plan, or three months for the Elmet Dental care Plan Extra before they can start to draw the appointment benefits. The 10% discount and other plan benefits will apply from the 1st day of the month the member pays their monthly subscription.

There will be a one-off administration fee of **£8.00** which will be payable with your first month's direct debit payment.

What is included in each plan?

Elmet Dental Care Plan – As a member, you receive:

- 2 Dental examinations, oral cancer screening and gum assessments (every twelve months)
- 2 Professional clean and polishes (every twelve months)
- 10% discount on all routine dental treatments
- Free small x-rays as clinically required
- All children 0-6 years of membership patients are seen free of charge for dental exams (excludes any treatment)
- Worldwide Dental Accident & Emergency Assistance Scheme

Elmet Dental Care Plan Extra – As a member, you receive:

- 2 Dental examinations, oral cancer screening and gum assessments (every twelve months)
- 4 Professional clean and polishes (every twelve months)
- 10% discount on all routine dental treatments
- Free small x-rays as clinically required
- All children 0-6 years of membership patients are seen free of charge for dental exams
- Worldwide Dental Accident & Emergency Assistance Scheme

Elmet Dental Children's Plan - up to age 17 – As a member, you receive:

- 2 x examinations per year (excludes any treatment)
- 2 x fluoride varnish treatments
- Free small x-rays as clinically required
- Worldwide Dental Accident & Emergency Assistance Scheme

- There is an initial 12 months minimum period of membership required in order to receive the plans full benefits. In the event that a member ceases their membership contribution within the first 6 months, The Practice reserves the right to reclaim the difference in financial value of any benefits received by the member. Such a calculation will be based on a comparison of benefits received when compared with the private fee scale of the practice.
- The monthly fee paid by Direct Debit may be increased annually by The Dentist providing one month's notice in writing to The Patient.

Patient Commitment – arranging and attending appointments

- It is the patient's responsibility to attend and arrange their own appointments. No refunds will be given
- This agreement is not transferable between The Patient and other patients, and only covers the services available with The Dentist and his/her nominated deputy in his/her absence.
- Provide 24 hours' notice to change or amend any appointment within working hours.
- Missed appointment- If the patient misses a booked appointment or does not provide sufficient notice, the members' benefits will have been used for that given period. They must wait until their next scheduled recall to take the next round of benefits. Patients can attend on a pay as you attend' basis if they want to see the dentist. Reasonable exceptions will apply by determination of the Practice Manager.
- The Dentist, or, in the absence of The Dentist, his or her nominated deputy will provide dental services
- In the event of a sale of the practice to a new owner then this agreement can be transferred to the new owner.
- Payments will be taken by direct debit on the 1st of every month this date cannot be changed
- Unpaid fees – in the event that payment is not made, we will contact you directly to arrange payment
- The Patient agrees to pay fees to The Dentist for additional dental treatment completed that is not included in this plan.
- The Plan does not include treatments that have already been discounted or part of any practice promotions
- Discounts are not applicable on the following treatments: orthodontic treatment, dental implants, facial aesthetics
- The Plan does not include treatment carried out by specialist dentists who are registered with the GDC as a specialist or if treatment is carried out at another dental practice/dental hospital unless it is part of an agreed insurance claim
- The Patient must notify the Dentist of any changes of address, contact numbers, email. Please do this by calling our team or by email so we can update details on the plan database which is separate to your dental records.
- I understand that it is my responsibility to read the supplementary Insurance cover provided under my dental plan to ensure any potential claim will be covered. The practice takes no responsibility should a claim be disallowed due to the clauses that are outlined in the policy document