

## The PK Guide to Group Dental Schemes for Employees

A Group Dental Schemes enable employees to claim money back against the costs of both routine and non-routine dental treatment, up to fixed annual limits.

### What are the benefits?

The main benefits of Group Dental Schemes are reimbursement for treatments such as:

- Routine examinations
- Hygienist treatment
- X-rays
- Fillings and root canal work
- Emergency dental treatment
- Overnight stay in hospital following dental treatment
- Mouth cancer treatment

Dental Schemes will generally offer various levels of cover – with both premiums and maximum payouts increasing in size from one level to the next.

### How do I join?

This will vary dependent upon your employer but will normally be voluntary.

### Will I need to complete any forms?

With many schemes members can be added online but some will still require forms to authorise payroll deduction, change cover and add family members.

### How are benefits paid?

As long as treatment is with a suitably qualified and registered practitioner, no pre-authorisation is required. Once you have paid for your treatment, submit your claim online, upload any relevant receipts and the provider will re-imburse you up to the limits for the level of cover that you have selected.

### What costs will I incur?

Employers may pay premiums for employees and/or for family members that they wish to insure. Some schemes may require employees to fund part or all of their cost and that for their families.

### Are my employer-paid premiums taxed?

Yes, employees are liable to Income Tax on the premium that the employer pays.

### When does cover cease?

Cover in Dental Schemes stops when you leave the sponsoring employer's employment or reach the scheme 'cessation age'. Cessation ages will vary from one insurer to another. You may also opt out at any time.

### Are there any exclusions?

Typical exclusions are:

- Any treatment that has been recommended or discussed with a dentist prior to the cover commencing
- Any treatment assessed by the dentist as not clinically necessary, including non-clinically necessary orthodontics
- Mouth cancer diagnosed before or within 90 days of cover commencing

### More information

To find out more about the specific cover your employer offers and find out what extra benefits might be available please contact PK Employee Benefits.

If your employer gives you access to our PK Engage App, you can find out more about your own entitlement there.



+44 (0)20 8125 4300



eb@pkgroup.co.uk



Unit 965,  
Cornforth Drive  
Sittingbourne  
Kent  
ME9 8PX

This document deals in generalisations, is intended for information purposes only and is not intended to provide advice. Levels and bases of taxation will vary dependent upon individual circumstances and are subject to change. PK Group recommend that employers and individuals take specific guidance before taking any action.

PK Employee Benefits is a trading name of PK Financial Planning LLP which is authorised and regulated by the Financial Conduct Authority.