



AFFINITY DENTAL



Policy Document
2019

v1.0

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1. Introduction



This Policy is underwritten by National Risk Managers (Pty) Ltd , a registered Financial Service Provider (FSP Number 47132) under contract from Lion of Africa Life Assurance Company Limited, the registered Insurer, registration number 1942/015587/06.

This is a long-term insurance policy regulated by the Financial Sector Conduct Authority. This is not a Medical Scheme and the cover is not the same as that of a Medical Scheme. This Policy is not a substitute for a Medical Scheme Membership.

Subject to Demarcation Regulations, the Insurer does not refuse membership on the basis of any means of discrimination.

This Policy Document should be read in conjunction with your Policy Schedule, as not all cover referred to in wording may be applicable to the Option that you have selected.

2. Definitions



In this Policy, unless the circumstances indicates a different intention, the following words and expressions bear the meanings given to them and similar expressions bear corresponding meanings –

- 2.1 **“Adult Dependant”** means a person over the age of 18 (eighteen) other than a Spouse or Child Dependant of the Policyholder who is wholly or partly dependent on the Policyholder for financial support, including a child of the Policyholder over the age of 18 (eighteen) years who is permanently mentally or physically disabled;
- 2.2 **“Application Date”** means the date on which the application for this insurance is completed in its entirety and submitted to the Insurer;
- 2.3 **“Benefit”** means the Benefit amount as set out in the Policy Schedule, provided by the Insurer in terms of this Policy;
- 2.4 **“Benefit Start Date”** means the date on which an Insured Person becomes entitled to Benefits upon completion of Waiting Periods.

- 2.5 **“Child Dependant”** means:
- 2.5.1 The named child of a Policyholder under the age of 18 (eighteen) years, including a stepchild, a natural child or legally adopted child, including a child adopted in terms of a customary adoption under a tradition practiced by the people of South Africa provided that the child’s natural parents are both deceased, or an adoption under the tenets of any religion practiced by the people of South Africa provided that the child’s natural parents are both deceased;
- 2.5.2 A child of a Policyholder under the age of 26 (twenty-six) years who is a student at any registered university, technikon or tertiary education institution, registered in terms of any legislation in the Republic of South Africa or such other institution as may be approved by National Risk Managers, and who is unmarried;
- 2.5.3 Any other person approved by the Insurer;
- 2.6 **“Commencement Date”** means the date on which the application for this insurance becomes effective, as specified in the Policy Schedule;
- 2.7 **“Defined Event”** means the event which gives rise to the Insured Person having to seek Dental treatment and which will be payable by the Insurer as set out in this document;
- 2.8 **“Family”** means the Policyholder (being a natural person) in whose name this Policy is affected and all Insured Persons on the Policy.
- 2.9 **“Formulary”** means the complete list of procedures, prices and service providers, as approved and amended from time to time by Affinity Dental, which together constitutes the maximum limit of Benefits which the Insurer will be bound to pay in terms of this Policy;
- 2.10 **“Grace Period”** means the 15 (fifteen) day period of grace allowed for non-payment of Premium.
- 2.11 **“Insured Persons”** means the Policyholder as named on the Policy Schedule and their named Dependants who have applied and been accepted by the Insurer and whose Premium is paid and up to date;
- 2.12 **“Member”** means each individual insured under this Policy;
- 2.13 **“Network Dentist”** means a Dentist that is part of Affinity Dental’s appointed dentist network herein referred to as a Service Provider;
- 2.14 **“Option”** means a plan registered under Affinity Dental, which offers a specific structure of Benefits;
- 2.15 **“Policyholder”** means the person who applies for Insurance Cover under this Policy;
- 2.16 **“Policy Schedule”** means the membership certificate issued to the Policyholder in terms of section 48 of the Long-Term Insurance Act which should be read in conjunction with this document;
- 2.17 **“Pre-authorisation”** means the act of contacting National Risk Managers to utilise certain Benefits;
- 2.18 **“Professional Sport”** means a sporting activity in which an Insured Person engages and from which such Insured Person derives the majority of their annual income;

- 2.19 **“Pre-Existing Condition”** means a condition for which medical and/or dental advice, diagnosis, care or treatment was recommended or received within the 12 (twelve) month period ending on the Commencement Date;
- 2.20 **“Premium”** means the premium payable to the insurer on a monthly basis in terms of this Policy in order to secure the Benefits;
- 2.21 **“Service Provider”** means a Dentist that is part of Affinity Dental's appointed Dentist Network.
- 2.22 **“Spouse”** means the named Spouse of a Policyholder, including any life partner. Not more than 1 (one) Spouse shall be covered in respect of each Policyholder;
- 2.23 **“The/This Policy”** means this insurance agreement concluded between the Insurer and the Policyholder in respect of the Benefits underwritten by the Insurer;
- 2.24 **“Waiting Period”** means the number of months from Commencement Date before you can access your Benefits. No claims will be payable during this period.
- 2.25 **“Year”** means a calendar year;
- 2.26 Any reference to the singular includes the plural and vice versa;
- 2.27 Any reference to a gender includes other genders;
- 2.28 The clause headings in this Policy Document have been inserted for convenience only.

3. General Provisions



- 3.1 This Policy Document together with the Policy Schedule and application form constitute the entire agreement and any word or expression to which a specific meaning has been assigned shall bear specific meaning wherever it may appear. Please read clauses in their entirety to understand their full meaning.
- 3.2 The minimum entry age of the Policyholder is 18 (eighteen) years old.
- 3.3 Once any Insured Person has been insured under this Policy for a period of 12 (twelve) consecutive months, any Pre-Existing Condition shall no longer apply.

- 3.4 Insurance cover shall commence on the Commencement Date subject to receipt of the first Premium by the Insurer, unless otherwise stated.
- 3.5 The Insurer may alter the terms and conditions, Premiums, or Benefits of the Policy by providing the Policyholder with at least 31 (thirty-one) days' notice in writing.
- 3.6 It shall be the duty of the Policyholder/Insured Person to inform the Insurer of any material changes which may affect the terms and conditions of the Policy, such as a change in medical health or personal details.
- 3.7 This Policy shall be cancelled in the event of misrepresentation, misdescription or non-disclosure of any material fact by or on behalf of an Insured Person.
- 3.8 This Policy does not accumulate a cash or surrender value.
- 3.9 Only 1 (one) Policy may be issued to any one Insured Person.
- 3.10 Insured Persons shall only be covered within the borders of the Republic of South Africa.
- 3.11 This Policy shall be governed by, construed and interpreted in accordance with the law of the Republic of South Africa.

4. Premium Payments



- 4.1 All Premiums are payable monthly in advance.
- 4.2 If the Premium is not paid on the payment date selected, a 15 (fifteen) day Grace Period will be applicable. The Policy will be suspended during the Grace Period and no claims will be payable.
- 4.3 The Grace Period will commence from the second month following the Commencement Date provided that collection of the first premium was successful.
- 4.4 The Insurer reserves the right to collect any failed or rejected premium, which may include a double debit, from the nominated bank account.
- 4.5 Non-payment of Premiums for 2 (two) consecutive months will result in automatic termination of this Policy and no further Benefits will be payable.

5. Benefits



- 5.1 Benefits are subject to a 3 (three) month Waiting Period from Commencement Date unless stated otherwise.
- 5.2 Pre-Existing Conditions are subject to a 12 (twelve) month Waiting Period from Commencement Date.
- 5.3 All Policy Benefits are payable, subject to the utilisation of a Affinity Dental Service Provider and the Affinity Dental Formulary.

5.4 Silver Plan Benefits

If this Option is selected, the following benefits are payable subject to the Formulary:

5.4.1 Emergency Examination

5.4.1.1 Defined Event

Unlimited consultations available if a member is in pain or discomfort deriving from any form of dental occurrence. Once this benefit has been utilised a 30 (thirty) day cooling off period will apply.

5.4.1.2 Waiting Period

This Benefit is subject to a 1 (one) month Waiting Period from the Commencement Date.

5.4.2 Infection Control

5.4.2.1 Defined Event

No annual limit, but limited to 2 (two) codes per consultation. This Benefit includes sterilisation of equipment.

5.4.2.2 Waiting Period

This Benefit is subject to a 1 (one) month Waiting Period from the Commencement Date.

5.4.3 Full Mouth Examination or Scale and Polish

5.4.3.1 Defined Event

Once per 6 (six) month interval. Full Mouth Examination includes inspection of the teeth and surrounding tissues of the oral cavity. Scale and Polish involves the removal of all tartar build up on the teeth.

5.4.3.2 Waiting Period

This Benefit is subject to a 3 (three) month Waiting Period from the Commencement Date.

5.4.4 Intraoral Radiographs

5.4.4.1 Defined Event

2 (two) films per Member, per year.

5.4.1.2 **Waiting Period**

This Benefit is subject to a 3 (three) month Waiting Period from the Commencement Date.

5.4.5 **Extractions**

5.4.5.1 **Defined Event**

3 (three) extractions per member per year.

5.4.5.1 **Waiting Period**

This Benefit is subject to a 3 (three) month Waiting Period from the Commencement Date.

5.4.6 **Fillings**

5.4.6.1 **Defined Event**

3 (three) restorations per Member per year. 1 (one) restorations code per tooth number in a 12 (twelve) month period. Amalgam fillings only.

5.4.6.2 **Waiting Period**

This Benefit is subject to a 3 (three) month Waiting Period from the Commencement Date.

5.4.7 **Specialist Dentistry**

5.4.7.1 **Defined event**

Additional R640 per policy per year. Covering any events not mentioned above. Pre-authorisation is required.

5.4.7.2 **Waiting Period**

This Benefit is subject to a 3 (three) month Waiting Period from the Commencement Date.

Pre-Existing Conditions are subject to 12 (twelve) month Waiting Period from Commencement Date.

5.5 **Gold Plan Benefits**

If this Option is selected, the following benefits are payable subject to the Formulary:

5.5.1 **Emergency Examination**

5.5.1.1 **Defined Event**

Unlimited consultations available if a member is in pain or discomfort deriving from any form of dental occurrence. Once this benefit has been utilised a 30 (thirty) day cooling of period will apply.

- 5.5.1.2 **Waiting Period**
This Benefit is subject to a 1 (one) month Waiting Period from the Commencement Date.
- 5.5.2 **Infection Control**
 - 5.5.2.1 **Defined Event**
No annual limit, but limited to 2 (two) codes per consultation.
This Benefit includes sterilisation of equipment.
 - 5.5.2.2 **Waiting Period**
This Benefit is subject to a 1 (one) month Waiting Period from the Commencement Date
- 5.5.3 **Full Mouth Examination or Scale and Polish**
 - 5.5.3.1 **Defined Event**
Once per 6 (six) month interval. Full Mouth Examination includes inspection of the teeth and surrounding tissues of the oral cavity. Scale and Polish involves the removal of all tartar build up on the teeth.
 - 5.5.3.2 **Waiting Period**
This Benefit is subject to a 3 (three) month Waiting Period from the Commencement Date.
- 5.5.4 **Intraoral Radiographs**
 - 5.5.4.1 **Defined Event**
3 (three) films per Member, per year
 - 5.5.4.2 **Waiting Period**
This Benefit is subject to a 3 (three) month Waiting Period from the Commencement Date.
- 5.5.5 **Extractions**
 - 5.5.5.1 **Defined Event**
5 (five) extractions per member per year.
 - 5.5.5.2 **Waiting Period**
This Benefit is subject to a 3 (three) month Waiting Period from the Commencement Date.
- 5.5.6 **Fillings**
 - 5.5.6.1 **Defined Event**
4 (four) restorations per Member per year. 1 (one) restorations code per tooth number in a 12 (twelve) month period. Resin posterior fillings are covered up to the value of Amalgam fillings.

5.5.6.2 **Waiting Period**

This Benefit is subject to a 3 (three) month Waiting Period from the Commencement Date.

5.5.7 **Root Canal**

5.5.7.1 **Defined Event**

1 (one) tooth per Member per year. Emergency Root Canal is covered under this Benefit and has no Waiting Period.

5.5.7.2 **Waiting Period**

This Benefit is subject to a 3 (three) month Waiting Period from the Commencement Date.

5.5.8 **Impaction**

5.5.8.1 **Defined Event**

The removal of 2 (two) teeth per member per year, as a result of impaction. This Benefit is only applicable to wisdom teeth.

5.5.8.2 **Waiting Period**

This Benefit is subject to a 3 (three) month Waiting Period from the Commencement Date.

5.5.9 **Crowns**

5.5.9.1 **Defined Event**

1 (one) tooth per Member per year, up to a maximum of R2000. 1 (one) crown per tooth number per 5 (five) year period. Per-authorisation is required.

5.5.9.2 **Waiting Period**

This Benefit is subject to a 3 (three) month Waiting Period from the Commencement Date.

5.5.10 **Specialist Dentistry**

5.5.10.1 **Defined Event**

Additional R1 250 per policy per year. Covering any events not mentioned above. Pre-authorisation is required.

5.5.10.2 **Waiting Period**

This Benefit is subject to a 3 (three) month Waiting Period from the Commencement Date.
Pre-Existing Conditions are subject to a 12 (twelve) month Waiting Period from Commencement Date.

5.6

Platinum Plan Benefits

If this Option is selected, the following benefits are payable subject to the Formulary:

- 5.6.1 **Emergency Examination**
 - 5.6.1.1 **Defined Event**

Unlimited consultations available if a member is in pain or discomfort deriving from any form of dental occurrence. Once this benefit has been utilised a 30 (thirty) day cooling of period will apply.
 - 5.6.1.2 **Waiting Period**

This Benefit is subject to a 1 (one) month Waiting Period from the Commencement Date.
- 5.6.2 **Infection Control**
 - 5.6.2.1 **Defined Event**

No annual limit, but limited to 2 (two) codes per consultation. This Benefit includes sterilisation of equipment.
 - 5.6.2.2 **Waiting Period**

This Benefit is subject to a 1 (one) month Waiting Period from the Commencement Date.
- 5.6.3 **Full Mouth Examination or Scale and Polish**
 - 5.6.3.1 **Defined Event**

Once per 6 (six) month interval. Full Mouth Examination includes inspection of the teeth and surrounding tissues of the oral cavity. Scale and Polish involves the removal of all tartar build up on the teeth.
 - 5.6.3.2 **Waiting Period**

This Benefit is subject to a 3 (three) month Waiting Period from the Commencement Date.
- 5.6.4 **Intraoral Radiographs**
 - 5.6.4.1 **Defined Event**

4 (four) films per Member, per year
 - 5.6.4.2 **Waiting Period**

This Benefit is subject to a 3 (three) month Waiting Period from the Commencement Date.
- 5.6.5 **Extractions**
 - 5.6.5.1 **Defined Event**

7 (seven) extractions per member per year.
 - 5.6.5.2 **Waiting Period**

This Benefit is subject to a 3 (three) month Waiting Period from the Commencement Date.

5.6.6

Fillings

5.6.6.1 Defined Event

5 (five) restorations per Member per year. 1 (one) restorations code per tooth number in a 12 (twelve) month period. Resin posterior fillings are covered up to the value of Amalgam fillings. Pre-authorisation is required for more than 3 (three) fillings.

5.6.6.2 Waiting Period

This Benefit is subject to a 3 (three) month Waiting Period from the Commencement Date.

5.6.7

Root Canal

5.6.7.1 Defined Event

2 (two) tooth per Member per year. Emergency Root Canal is covered under this Benefit and has no Waiting Period.

5.6.7.2 Waiting Period

This Benefit is subject to a 3 (three) month Waiting Period from the Commencement Date.

5.6.8

Impaction

5.6.8.1 Defined event

The removal of 3 (three) teeth per member per year, as a result of impaction. This Benefit is only applicable to wisdom teeth.

5.6.8.2 Waiting Period

This Benefit is subject to a 3 (three) month Waiting Period from the Commencement Date.

5.6.9

Crowns

5.6.9.1 Defined Event

2 (two) tooth per Member per year, up to a maximum of R2000. 1 (one) crown per tooth number per 5 (five) year period. Per-authorisation is required.

5.6.9.2 Waiting Period

This Benefit is subject to a 3 (three) month Waiting Period from the Commencement Date.

5.6.10

Specialist Dentistry

5.6.10.1 Defined Event

Additional R1 900 per policy per year. Covering any events not mentioned above. Pre-authorisation is required.

5.6.10.2 Waiting Period

This Benefit is subject to a 1 (one) month Waiting Period from the Commencement Date.

Platinum Plus Plan

Only available on the Platinum plan for the Principal Member and Spouse.

5.7.1 Emergency Examination**5.7.1.1 Defined Event**

Unlimited consultations available if a member is in pain or discomfort deriving from any form of dental occurrence. Once this benefit has been utilised a 30 (thirty) day cooling of period will apply.

5.7.1.2 Waiting Period

This Benefit is subject to a 1 (one) month Waiting Period from the Commencement Date.

5.7.2 Infection Control**5.7.2.1 Defined Event**

No annual limit, but limited to 2 (two) codes per consultation. This Benefit includes sterilisation of equipment.

5.7.2.1 Waiting Period

This Benefit is subject to a 1 (one) month Waiting Period from the Commencement Date.

5.7.3 Full Mouth Examination or Scale and Polish**5.7.3.1 Defined Event**

Once per 6 (six) month interval. Full Mouth Examination includes inspection of the teeth and surrounding tissues of the oral cavity. Scale and Polish involves the removal of all tartar build up on the teeth.

5.7.3.2 Waiting Period

This Benefit is subject to a 3 (three) month Waiting Period from the Commencement Date.

5.7.4 Intraoral Radiographs**5.7.4.1 Defined Event**

4 (four) films per Member, per year

5.7.4.2 Waiting Period

This Benefit is subject to a 3 (three) month Waiting Period from the Commencement Date.

- 5.7.5 **Extractions**
- 5.7.5.1 **Defined Event**
7 (seven) extractions per member per year.
- 5.7.5.2 **Waiting Period**
This Benefit is subject to a 3 (three) month Waiting Period from the Commencement Date.
- 5.7.6 **Fillings**
- 5.7.6.1 **Defined Event**
5 (five) restorations per Member per year. 1 (one) restorations code per tooth number in a 12 (twelve) month period. Resin posterior fillings are covered up to the value of Amalgam fillings. Pre-authorisation is required for more than 3 (three) filings.
- 5.7.6.2 **Waiting Period**
This Benefit is subject to a 3 (three) month Waiting Period from the Commencement Date.
- 5.7.7 **Root Canal**
- 5.7.7.1 **Defined Event**
2 (two) tooth per Member per year. Emergency Root Canal is covered under this Benefit and has no Waiting Period.
- 5.7.7.2 **Waiting Period**
This Benefit is subject to a 3 (three) month Waiting Period from the Commencement Date.
- 5.7.8 **Impaction**
- 5.7.8.1 **Defined event**
The removal of 3 (three) teeth per member per year, as a result of impaction. This Benefit is only applicable to wisdom teeth.
- 5.7.8.8 **Waiting Period**
This Benefit is subject to a 3 (three) month Waiting Period from the Commencement Date.
- 5.7.9 **Crowns**
- 5.7.9.1 **Defined Event**
2 (two) tooth per Member per year, up to a maximum of R2500. 1 (one) crown per tooth number per 5 (five) year period. Per-authorisation is required.
- 5.7.9.2 **Waiting Period**
This Benefit is subject to a 3 (three) month Waiting Period from the Commencement Date.

5.7.10 **Specialist Dentistry**

5.7.10.1 **Defined Event**

Additional R2500 per policy per year. Covering any events not mentioned above. Pre-authorisation is required.

5.7.10.2 **Waiting Period**

This Benefit is subject to a 1 (one) month Waiting Period from the Commencement Date.

5.7.11 **Partial Plastic Dentures**

5.7.11.1 **Defined Event**

1 (one) set of partial plastic dentures per Member every 48 (forty-eight) months.

5.7.11.2 **Waiting Period**

This Benefit is subject to a 3 (three) month Waiting Period from the Commencement Date.

Pre-Existing Conditions are subject to a 12 (twelve) month Waiting Period from Commencement Date.

6. Claims



- 6.1 Insured Persons must obtain pre-authorisation for certain Benefits as contained in this document. Moreover, the Insured Person must determine the maximum Benefit payable for each and every Defined Event as the level of Benefit is determined by the actual procedure followed by the Service Provider. To do this, the Insured must contact us via telephone on 0861 55 55 22 or email info@affinitydental.co.za.
- 6.2 Dental Claims can be emailed to claims@dentalrisk.com
- 6.3 All claims under this Policy are covered when your Premium is paid. If your Dentist charges a rate above the Benefit payable under this Policy, then such difference is payable by the Member.
- 6.4 It is the sole responsibility of the Insured Person to seek medical assistance immediately when the Insured Person becomes aware of a Dental condition that requires treatment. The Insurer will not be liable to provide cover due to negligence in the treatment of Dental requirements.

- 6.5 Written notice on the prescribed form must be given to the Insurer in Writing as soon as practicable of any occurrence which may give rise to a claim under this Insurance, but within 3 (three) months of such occurrence, failing which the claim will not be entertained.
- 6.6 Costs associated with the claim need to be submitted to the Insurer within 120 (one hundred and twenty) days of service. In the event of the costs being submitted after 120 (one hundred and twenty) days, they will be deemed stale and the Insurer will not be liable to cover the costs.
- 6.7 In the event that the Insurer repudiates the claim;
- 6.7.1 The Insured Person has 90 (ninety) days to make representations for repudiated claims;
- 6.7.2 Representations must be made in writing outlining the Insured Person's reason for the dispute;
- 6.7.3 We will provide the Insured Person with a written response within 30 (thirty) days.
- 6.7.4 Should the response be unsatisfactory to the Insured Person, they reserve the right to refer the dispute to the Ombudsman for Longterm Insurance or to serve legal process against us within 90 (ninety) days after such representations have been made.
- 6.7.5 Should the Insured Person not exercise these rights within these time frames the claim will be deemed abandoned.
- 6.8 All certificates, information and evidence required by the Insurer shall be furnished in the form prescribed and without expense to the Insurer. The Insured Person shall attend a Dental examination on behalf of, and at the expense of, the Insurer as often as shall be required in connection with any claim. Should such documentation not be received the insurer shall not be liable to consider the claim.
- 6.9 If any claim under this Insurance be in any respect fraudulent or intentionally exaggerated or if any fraudulent means or devices are used by the Insured Person or anyone acting on their behalf to obtain any Benefits under this Insurance, all Benefits herein shall be forfeited, and no Premiums shall be refunded.
- 6.10 The Policyholder hereby gives the Insurer the right to claim from the Insured Person any payment or compensation received by the Insured Person from any third party due to an event that is covered by this Policy.

7. Amendment/Upgrade/Cancellation Procedure



- 7.1 Should the Policyholder wish to change personal details, amend any Option or add Dependants onto their existing plan they must contact our offices directly on 0861 55 55 22, or email info@affinitydental.co.za along with their membership number.
- 7.2 The Policyholder may cancel his/her membership by giving written notification. The Insured Person will, however, still be covered for the

remainder of the month for which the last Premium was collected. No Premiums will be refunded in instances where Benefits were not utilised by the Insured Person.

7.3 If the Policyholder cancels the Policy, no claim will be payable for any event occurring after the effective date of termination.

7.4 The Insurer reserves the right to cancel or vary your membership or that of any of your Dependants by giving written notification, where possible, if you or any of your Dependants:

7.4.1 Provide false information or fail to disclose information upon application;

7.4.2 Provide false information upon submission of a claim;

7.4.3 Allow any other person to use your membership card;

7.4.4 Commit any other fraudulent act;

7.4.5 Fails to pay Premiums;

7.4.6 Generally act in a manner indicative of a premeditated selection against the Insurer.

8. Exclusions



8.1 The Insurer shall not be liable to pay Compensation in respect of any Insured Person:

8.1.1 if caused by a Pre-Existing Condition within the first 12 (twelve) months of cover;(If applicable)

8.1.2 if resulting from mental disorders or any other self-injury or intentional exposure to obvious risk of Injury (unless in an attempt to save a human life);

8.1.3 if caused by, or as a result of, the influence of alcohol, drugs or narcotics upon such Insured Person, unless administered by or prescribed by and taken in accordance with the instructions of a Member of the medical profession (other than himself);

8.1.4 if caused by, or arising from, exposure to, or contamination by, atomic energy and/or nuclear fission or reaction;

8.1.5 whilst travelling by air other than as a passenger and not as a member of the aeroplane crew, technical staff or for the purpose of any technical operation thereon or therein;

8.1.6 whilst participating in any riot, civil commotion or public disorder, including authorised and sanctioned union activity or active

involvement in war, acts of terrorism, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection or political risk of any kind;

- 8.1.7 whilst participating in a Professional Sport;
- 8.1.8 for any claim arising whilst the Insured Person is perpetrating an intentional unlawful act in terms of South African Law;
- 8.1.9 if caused by any gradually operating cause of which the Insured Person is aware;
- 8.1.10 for elective cosmetic surgery, and laser surgery or treatment and costs resulting therefrom;
- 8.1.11 if injuries are sustained whilst any person driving the vehicle is under the age prescribed by law, or who is not authorised or qualified to drive the vehicle;
- 8.1.12 For any treatment provided by a Dentist, other than a Service Provider as per 2.21 above.
- 8.1.13 For services rendered by a person not registered with the Dental Council and/or the South African Professions Council.
- 8.1.14 for third party claims such as Compensation Fund claims, Workmen's Compensation claims and Road Accident Fund claims;
- 8.1.15 for costs incurred as a result of failure to carry out the instructions or advice of a Dentist, including deferring treatment in order to have costs covered once Waiting Periods and endorsements are no longer applicable;

9. Dispute Resolution



- 9.1 This agreement shall be governed, interpreted and construed in accordance with the laws of the Republic of South Africa. Any legal action or proceedings arising out of or in connection with this Policy which is to be instituted in a court of law shall be brought in the High Court of South Africa and irrevocably submitted to the exclusive jurisdiction of such court.

10. Sharing of Insurance Information



- 10.1 The sharing of insurance information for underwriting and claims purposes (including credit information) between insurers is in the public interest as it enables insurers to underwrite policies and assess the risks fairly and to reduce the incidence of fraudulent claims.
- 10.2 Insured Persons hereby consent to the sharing of any insurance information provided by them, or on their behalf, in respect of any insurance policy or claims lodged. Insured Persons also consent to this information being disclosed to any other insurance company and/or verified against other legitimate sources or databases.

Notes

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Notes

Ruled area for notes with horizontal dotted lines.

Notes



Notes

A series of horizontal dotted lines for writing notes.



Physical Address

1 Dingler Street
Rynfield, Benoni
South Africa
1501

Postal Address

Postnet Suite 124
Private Bag X101
Farrarmere, Benoni
1518



Call Centre
0861 55 55 22



Email Address
info@affinitydental.co.za



Fax Number
086 607 9419

Affinity Dental, a product of National Risk Managers (Pty) Ltd (FSP 47132), the Underwriting Managing Agency; Lion of Africa Life Assurance Company Ltd (FSP 15283), the Insurer and its Services Providers reserve the right to decline any application for cover. This policy shall be voidable in the event of misrepresentation, misdescription or non-disclosure of any particular material fact to this insurance by or on behalf of an insured person. Terms and conditions as contained in the policy document apply.

