

Dental Insurance

Insurance Product Information Document



DeCare Dental Insurance Ireland DAC trading as DeCare, DeCare Dental & DeCare Vision is regulated by the Central Bank of Ireland.

PRODUCT: Healthy Smiles Level 1 Plan

Applicable to all new renewals/registrations on/after 01 January 2026.

This document does not contain the full terms and conditions of cover which can be found in the Schedule of Benefits and Rules – Terms and Conditions book. It is important that you read these documents carefully.

What is this type of insurance?

This is a dental insurance contract which provides the customer with cover towards the cost of dental treatment that they may need during the period of insurance.



What is insured?

✓ Overall Maximum Benefit

The maximum benefit we will pay in respect of all benefits per person, per year is:
- €500

✓ Investigative & Preventive Treatments – 100% cover

- 2 exams per calendar year
- 2 scale and polish per calendar year
- X-rays:
 - Bitewing x-rays – 1 series per 12 month period up to the age of 17
 - Bitewing x-rays – 1 series per 24 month period over the age of 18
 - Full mouth or Panoramic x-ray - Once per 60 months
 - Periapical x-ray – 4 single x-rays per 12 months

✓ Emergency Treatment – 100% cover

- Emergency treatment - once per 12 month period for the immediate, temporary relief of pain or infection



What is not insured?

✗ Investigative & Preventive Treatments

- Consultations
- Oral hygiene instruction and fluoride treatment

✗ General Exclusions

- Dental services performed for cosmetic purposes
- Sedation, general anaesthesia and nitrous oxide
- Incomplete, interim or temporary services
- Restorative cast post and core build-up, including pins and posts
- Any cost which is in excess of usual, reasonable and customary charges.



Are there any restrictions on cover?

The maximum benefit we will pay in respect of all benefits per person, per policy year is €500.



Where am I covered?

You are covered to attend recognised dental practices in the Republic of Ireland, and for emergency treatment abroad.



What are my obligations?

You are required to:

- Make any premium payments within the required or agreed time
- Submit any claims within 12 months of the date of treatment
- Provide any information or documentation which we may request from you



When and how do I pay?

You must pay your premium when it becomes due for the duration of your policy. The policyholder is responsible for ensuring all payments are made. If you pay by debit or credit card you are required to pay in line with your payment schedule. All premiums owed must be paid within the policy term.



When does the cover start and end?

Your policy is a 12-month contract and will last for one year. The policy start and end dates are shown on your policy document.



How do I cancel the contract?

You have the right to cancel your policy without penalty and without giving any reason within 14 days of the date of you taking out cover or 14 days from the date you receive your policy documents, whichever is the later.

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Get in touch

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