

CFMEU NSW DIVISIONAL BRANCH, CONSTRUCTION AND GENERAL DIVISION DENTAL GUIDELINES

PERIOD OF COVER 1 July 2024 to 30 June 2025

The Dental Discretionary Fund provides Dental Cover for financial members of the CFMEU NSW Divisional Branch, Construction and General Division. Cover will also extend to the member's immediate family.

Member: An eligible financial member is a person who is a financial member of the CFMEU NSW Divisional Branch, Construction and General Division. An eligible financial member is a person who has paid full current dues or is on direct debit or payroll deductions, or is registered as medically unfit or unemployed and paying reduced union fees. The benefit does not apply to retired members or members who are not paying union fees.

Immediate Family: Includes only the spouse (including de facto) and any immediate dependents of the Eligible Financial Member.

Immediate Dependant: Includes the Eligible Financial Member's unmarried dependant children who are under 19 years of age and living with the Eligible Financial Member, or who are under 25 years of age and are full time students at an accredited institution of higher learning and are primarily dependent upon the Eligible Financial Member for maintenance and support. This includes step-children and legally adopted children.

Please note cover ceases immediately when a member is no longer a Financial Member of the CFMEU NSW Divisional Branch, Construction and General Division. To be covered, a person must be an Eligible Financial Member at the time of making a claim.

Please Note:

- A Defacto must have been living with the member for a period of no less than three (3) consecutive months prior to the accident occurring. Proof must be supplied in the form of home bills showing both the Member's name and Defacto's name.
- Where you have children from:
 - (a) Previous marriage of the member: Proof of dependency would be required via Medicare card and/or paying child support (a letter from social security would be required as proof).
 - (b) Previous marriage of the defacto: The children must be living under the same address together with the member and defacto. Students must provide a copy of their student ID card to verify that they are a full-time student.
- Examination: We may at any stage arrange for a dentist, appointed by us, to examine and verify the damage and cost of treatment proposed. The applicant must attend the appointment to ensure their application is considered.
Note: If you do not attend or refuse to attend your claim will not be assessed.
- Failed Treatment. This is not covered. Treatment proposed to correct failed treatment will be at the member's own expense.
- Temporary caps or fillings on teeth where further work is required to complete the procedure and has not been completed but in the interim further damage is caused, **THE CLAIM WILL ONLY BE CONSIDERED TO RESTORE THE TOOTH/TEETH TO THE PRE-ACCIDENT STATUS.**
- A plate will be deemed as a denture. As a result, this will be assessed under the heading of Dentures/Bridges.

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THE LATEST TIME A CLAIM CAN BE MADE

Any claim received will only be considered for payment if the claim is submitted to our office within **eight (8) months** after the expiry of the period of cover, as detailed above.

THE LATEST TIME A CLAIM CAN BE REVIEWED

A file can only be reviewed if the dispute is submitted to our office within **eight (8) months** after the expiry of the period of cover, as detailed above.

PAYMENT LIMITATIONS

Discretionary Compensation Applications will be subject to the following limitations:

	<i>With Dependants</i>	<i>Without Dependants</i>
Any one accident up to	\$2,250	\$2,000

There is a limit to the number of Discretionary Payment applications a member can make in the period of cover (as per dates mentioned above) and they are as follows:

- Four accidents for a member with family members (with dependants)
- Two accidents for a single member (without dependants)

DENTURES/BRIDGES (INCLUDING PLATES)

Dentures and bridges will be covered up to 10 years. Anything above 10 years will incur a depreciation.

For repair or replacement to Dentures/Bridges, the following depreciation table will apply:

<i>Age of Denture/Bridge</i>	<i>% of costs covered</i>
Between 1 & 10 years	100%*
11 years	80%*
12 years	60%*
13 years	40%*
14 years	20%*
15 years	10%*
16 years plus	0%*

Maximum payable for dentures is:

- With Dependants \$2,250 per accident
- Without Dependants \$2,000 per accident

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WHAT WE WILL CONSIDER:

1. Damage which has occurred as a result of an accident and occurred in your leisure time.
2. Damage to sound and healthy teeth only.
3. Damage to dentures, bridges and plates that are less than 15 years old. Proof of purchase of the original denture and bridge must be provided in the form of a receipt or name of dentist who supplied the denture, bridge or plate.
4. Accidents that occur in your leisure time. Work accidents must be lodged through the respective statutory workers' compensation scheme prior to submitting to our office for consideration. Transport accidents must be lodged with the respective statutory transport accident scheme prior to submitting to our office for consideration. Also, where a member has Private Health Insurance, including dental, a claim must be lodged with the private health insurer before lodging a claim under this scheme. Only the gap will be covered.
5. Any accidents occurring overseas must be lodged against your travel insurance policy, before lodging a claim under this scheme. We will only consider dental costs, which are not claimable by your travel insurance, up to the maximum benefit.

WHAT WE WILL NOT PAY FOR:

6. Any damage related to childbirth or pregnancy or their complications.
7. War whether declared or not, invasion or civil war, rebellion or insurrection.
8. Intentional self injury or suicide or any attempt at suicide.
9. Flying or other aerial activity unless as a passenger in a properly licensed aircraft.
10. Any damage occurring as a result of an illegal act.
11. Training for or playing in competitive club sport or activity organised by any sporting organisation, authority or club.
12. Any damage resulting from disease or sickness.
13. Any damage that is not caused by an accident.
14. Damage to filling/s only (there must be actual damage to the tooth).
15. The use of intoxicating liquor or drugs, unless they have been prescribed by a registered medical practitioner and used as per medical instructions.
16. Any damage which has been contributed to by decay.
17. Milk teeth or first teeth.
18. Extractions to wisdom teeth.
19. Any dental work which is upgrading the tooth from the condition it was in prior to the accident.
20. Any work or motor accident for which statutory insurance or compensation scheme provides compensation.
21. Dentures/Bridges/Plates that are 16 years old and over.
22. Lost Dentures, Bridges or Plates.
23. Any claim received will only be considered for payment if the claim is submitted to our office within eight (8) months of the expiry of the period of cover, as detailed above.
24. Any damage or loss which occurs whilst in prison.
25. Any dental work that is covered under your travel insurance policy.
26. Failed Treatment. Treatment proposed to correct failed treatment will be at the member's own expense.

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DISPUTES

If a member is not happy with the offer being provided under the Discretionary Fund or the manner in which their application was handled, they are able to lodge a dispute in writing with our office.

The dispute will then be reviewed by the Responsible Manager to reassess the application.

Administrators of the Discretionary Scheme are:

Windsor Management Insurance Brokers

Level 1, 151 Rathdowne Street
Carlton VIC 3053

Phone: (03) 9663 2411

Email: enquiries@wmib.com.au

Windsor Management Insurance Brokers Pty Ltd ACN 083 775 795

ABN 93 707 887 544 AFS No. 230747