



Aevitae Dental Packages



This overview of reimbursements is intended to easily see what types of reimbursements are included in a particular policy. The overview gives a general description of the care to which you are entitled. No rights can be derived from this overview. The policy conditions may contain further terms and conditions relating to coverage. Also, a limitation of the reimbursement may apply, such as when you go to a non-contracted care provider.

For a complete overview, we recommend that you consult your policy conditions. These will always take precedence.

Do you have any questions? Please call us on 088 35 35 763 (from the Netherlands) or 0031 8 35 35 763 (from outside of the Netherlands). We are happy to help you.

Aevitae Dental Packages

• 100% including technician's fees up to the maximum amount in any calendar year stated on your health care policy*

* We do not reimburse the costs of:

- a. dental check-up reports and dental statements;
- b. missed appointments;
- c. non-restorative caries (cavity) treatment in baby teeth (M05);
- d. fluoride treatment (M40);
- e. external bleaching of teeth and molars (E97);
- f. a mandibular advancement splint (MAS: a brace used to prevent snoring), and the related diagnostic and follow-up care (G71, G72 and G73);
- g. orthodontic care (consult the policy conditions of your supplementary insurance for a possible reimbursement);
- h. subscriptions;
- i. general anaesthetic;
- i. a complicated extraction by a dental surgeon (this is reimbursed under the basic insurance);
- k. partially completed work;
- l. autografts (J39);
- m. a therapeutic injection of botox (G44);
- n. dental treatments without medical indication which alter the appearance, color, shape, position of the normal features of the tissues in and around the mouth.