

Program Guidelines

- Participant fee must be paid on or before the first appointment. All participant fees are non-refundable.
- Participation is valid for one (1) year. Participants must pay an annual renewal fee on or before their anniversary date to receive ongoing benefits.
- Restrictions apply with CareCredit, Sunbit or other financing options.
- We reserve the right to amend the plan at any time.

We recognize that not everyone has dental insurance, and too often our patients get "priced out" of regular preventative dental care. We'd rather see you twice a year for cleanings then several times for emergencies. We want to help you have the healthiest mouth possible! This is why we have created our Family Dental Health Program. As an alternative to dental insurance, our office's program is designed to make great dental care more affordable and accessible for every family. For an annual fee, members of the program receive their bi-annual preventative care-cleanings, exams and x-rays at no additional cost, and enjoy discounted prices on all our procedures like fillings, root canals and crowns.

Annual Membership Plan

Over \$700 value for \$250



Designed to provide affordable, quality dental care to those whithout dental insurance.

Your benefits are available at our office or one of our sister offices.

Your Annual Membership Fee of \$250 Includes:

- 2 dental cleanings
- 2 doctor exams
- Flouride Varnish
- 1 set of x-rays
- Panoramic x-ray (1x3yrs)
- 3D Oral Scan
- Discounted rates on other services

Benefits

- 15–20% OFF all other dental work when paid in full at time of service.
- Affordable annual participant fee.
- No deductible or yearly maximums.
- Immediate eligibility (no waiting periods).
- No pre-authorizations

PREVENTATIVE	PLAN FEE	AVERAGE FEE IN AREA	Average SAVINGS (%)
Services Included in Annual Membership Plan Fee	\$250	\$707	65%
2 Dental Cleanings (Prophy)	\$0	\$218	*
2 Periodic Doctor Exams	\$0	\$122	*
2 Fluoride Varnish	\$0	\$92	*
Bite Wing X-rays	\$0	\$76	*
Periapical X-ray (PA) (As needed)	\$0	\$35	*
Panoramic X-ray (once every 3 years)	\$0	\$133	*
3D Oral Scan	\$0	\$67	*
RESTORATIVE/TREATMENT	PLAN FEE	AVERAGE FEE IN AREA	Average SAVINGS (%)
Limited/Problem Focused Exam	\$72	\$90	20%
Perio Maintenance	\$128	\$160	20%
Full Mouth Periodontal Therapy (Scaling/Root Planing)	\$956	\$1,196	20%
Nitrous Oxide	\$77	\$96	20%
Sealant	\$52	\$65	20%
Filling - One Surface (posterior)	\$171	\$214	20%
Filling - Two Surface (posterior)	\$218	\$272	20%
Filling - Three Surface (posterior)	\$269	\$337	20%
Filling - Four or More Surfaces (posterior)	\$316	\$396	20%
Root Canal - Molar	\$968	\$1,210	20%
Extraction - Simple	\$182	\$228	20%
Extraction - Surgical	\$270	\$338	20%
Space Maintainers	\$240-\$386	\$300-\$483	20%
Occlusal guard (lab made)	\$551	\$648	20%
Porcelain Crown	\$1,114	\$1,311	15%
Starting Implant	\$1,199-\$1,838	\$1,410-\$2,163	15%
Bridges (3 units)	\$3,341	\$3,930	15%