

# **Dental Savings** Plan

\*NOT AN INSURANCE \*\*NOT TO BE COMBINED WITH INSURANCE PLANS

Our in house dental savings plans are packaged into periodic services that meets your needs. All packages provide:

- **Discounted Services**
- No Yearly Maximums
- No Deductibles
- No Pre-existing Conditions Limitations
- No Waiting Periods

## Prophy+

\$445 Annually (New Patients) \$395 Annually (Existing Patients+)

#### Includes (Value of \$702)

- Prophylaxis Cleaning (2 per year)
- Periodic Exams (2 per year)
- Emergency Exams (1 per year)
- X-rays
  - 4 Bitewings per year
  - 4 Periapical per year
  - Panaoramic or Full Mouth (every 5 years)
- 2 Flouride Treatments per year

#### **Discounts**

- \$75 for additional Prophylaxis cleaning
- 15% OFF additional services including cosmetic procedures and Invisalign

## Perio+

\$745 Annually (New Patients) \$695 Annually (Existing Patients+)

#### Includes (Value of \$1122)

- Periodontal Maintenance Cleaning (4 per year)
- Periodic Exams (2 per year)
- Emergency Exams (1 per year)
- X-rays
  - 4 Bitewings per year
  - 4 Periapical per year
  - Panaoramic or Full Mouth (every 5 years)
- 2 Flouride Treatments per year

#### **Discounts**

- \$50 OFF Each Quadrant of Scalling and **Root Planing**
- 15% OFF additional services

## **Family Options**

### Add a Spouse

Limitations

Prophy+ \$395

Perio+ \$695

#### Prophy+ \$345 Perio+ \$645

Each additional child

(max age of 18yrs)

- Family Plan Includes dependents up to age 26.
- Family Options costs apply to new patients. Existing patients receive an addiontal \$50 off.

## **Plan Guidelines**

- Plan commences upon purchase date and terminates after one year.
- Nonrefundable. No refunds or partial refunds.
- Nontransferable.
- Fees for dental procedures are due in full at time of service
- Plan discount for additional services reduced from 15% to 10% OFF when used with Care Credit or any other payment plan.

#### **Additional Plan Guidelines:**

- + Existing Patients prices are available to patietns that have been seen by a Dentist at Winter Springs Dentistiy within the previous 12 months for a Comprehensive or Periodic Exam.
  Patient plan selection is based on Dentist diagnosis.

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  New Patients: Prior to enrollment, new patients must complete a comprehensive exam with xrays at \$150 which allows the dentist to determine the applicable plan. Enrolling into plan must be completed within 30 days of the comprehensive exam. Cost of the exam will go towards elidgable plan.
  Plan coverage is based on the following ADA Codes: D1110 Prophylaxis Cleaning; D4910 Periodontal Maintenance Cleaning; D0150 Comprehensive Exam; D0120 Periodic Exams; D0150 Emergency Exams; D0274 Bitewings xrays; D0210 Full Mouth xrays; D0220 and D0230 Pariapical xrays; D0330 Panaromic xrays; D1206 Floride

For more information, call 407-327-2015