

Cosmetic & Family Dentistry



Craig Valentine, DMD
Rachael Phillips Yopp, DDS
Yash Vadlamudi, DDS

Dental Care Savings Plan

Your Savings Plan Includes:

1 Exam per year

New Patient/Comprehensive Exam or
Periodic exam or
Limited Oral Exam

X-Rays (Included as listed)

Panorex (one every 3 years of membership) or
Full Mouth X-Ray series or
Bitewings (one set per year) or
Periapicals (as needed and determined by doctor)

Cleanings and Preventive Care (Included)

Adult Cleaning (one per year) or
Perio Maintenance (one per year) or
Child Cleaning (one per year) and
Fluoride (one child treatment per year)

Other In-Office Services are at 15% Discount

Fillings
Extractions
Crowns / Bridges
Dentures / Partials
Root Canals
Teeth Whitening
Cosmetic Dentistry
Implants
Night Guards
Periodontal Therapy
Invisalign Orthodontics

Dental Care Savings Plan Benefits:

NO deductible

NO waiting periods

NO pre-authorizations required

NO yearly maximums

NO waiting for insurance claims to process or reimbursements

Dental Care Savings Plan Annual Fee:

First family member: \$169.00

Second family member: \$169.00

Third and additional family members: \$99.00 each

(All family members must reside in the same household. Family members may not be substituted for one another. Children may be included up to age 18 or to age 26 if full time student enrolled in school.)

Craig W. Valentine, DMD, PA Dental Care Savings Plan Limitations and Exclusions

- This program cannot be combined with any other special offer or discount.
- Any dental procedures for which treatment has commenced are not eligible for a discount.
- A cleaning is defined as the removal of coronal plaque, calculus buildup and stains on the tooth above the gum line. Deeper cleanings fall under a periodontal category (perio pocket greater than 3 mm) and if a deep cleaning is prescribed, it will be performed at a 15% discount.
- Program benefits may not be transferred.
- Program benefits may only be used at Craig W. Valentine, DMD, PA. If you are referred to a specialist for any treatment, you will not receive the discounted rate at the specialist.
- Yearly benefits are not carried over to the next year.
- Annual program dues are not refundable. No refunds are given if a patient chooses not to use all or any portion of the program. No refunds are given for cancellations.
- The program cannot be used in conjunction with a dental insurance policy.
- Any dental services provided without cost to the member or from an alternative source (i.e., Worker's Compensation) are excluded.
- All payments are due in full at time of service to receive the 15% discount. Any treatment not paid for at the time of service will be billed at our standard (non-discounted) rate.
- The program renews each year and the current applicable annual dues must be paid on the renewal date for benefits to renew. Rates are subject to change annually.
- The 15% discount is taken from our standard fee. Our standard fee schedule is available for your review upon request.
- A fee of \$50 per hour for broken appointments will be charged without at least 24 hours' notice.

Dental Care Savings Plan Membership Application

First Name

Last Name

Date of Birth

Address

City

State

Zip Code

Email

Cell Phone

Dependents to be included:

Name and Relationship

DOB

Name and Relationship

DOB

Name and Relationship

DOB

Name and Relationship

DOB

I wish to become a member of Craig W. Valentine, DMD, PA's Dental Care Savings Plan and when submitting this membership application I agree to the following:

1. Dental Savings Benefits are available in the office of Craig W. Valentine, DMD, PA only.
2. I agree to a \$50 per hour broken appointment fee if I fail to give 24 hour cancellation request.
3. I have been given a copy of services included in the Dental Savings Plan Program, costs of services included in the plan, procedures excluded from the plan, and the requirements and other specific details of the plan.

Signature of Applicant

Date

Total Enclosed _____