



DENTAL SAVINGS PLAN **TERMS & CONDITIONS**

What is a Dental Savings Plan?

Our Dental Savings Plans are membership-based savings plans that provide the quality dental care that you deserve at a price you can afford. Members pay an annual fee to receive regular exams, cleanings, and x-rays along with significantly reduced rates on all other restorative and cosmetic dental procedures performed in our office. Plus, the plan includes many benefits including no annual caps, no limits, and no waiting periods. This provides for quick access to the care you need!

Our Dental Savings Plans help reduce the overall dental costs for members & ensures that you have access to dental care when you need it. The top-quality care you deserve is now available at a bigger savings than you ever imagined possible.

Our plans are designed to provide greater access to quality dental care at an affordable price.

- **NO** yearly maximums
- **NO** deductibles
- **NO** claim forms
- **NO** frequencies
- **NO** pre-authorization requirements
- **NO** pre-existing condition limitations
- **NO** one will be denied coverage
- **NO** waiting periods (immediate eligibility)

Program Exclusions & Limitations

- This is **NOT** dental insurance, rather a savings plan. This savings plan cannot be used in conjunction with dental insurance or any other discount plan. This plan is only valid at Lakeland Family Dental. Care from other providers or specialists is not included. Plan fees are subject to change.
- If you are a current patient enrolling in a Dental Savings Plan, your account **MUST** have a **ZERO** balance.
- This plan is not retroactive and will become effective on the date of enrollment
- It is the member's responsibility to utilize the services included in the agreement within their plan year limit. Any unused benefits will not be carried over or refunded. The plan is non-transferable.
- The Dental Savings Plan cannot be combined with any other payment plan option, including Care Credit and Landmark Credit. In exchange for the care provided under this plan, the covered member agrees to pay all balances in full at the time of treatment. If treatment is not paid in full at the time of service, the 15% discount is void.
- No refunds will be given after enrollment. Services are based upon a plan year. The full membership fees are due on the date of enrollment and eligibility will begin at that time and be active for one year. There are no waiting periods. Your membership can be renewed at the end of each plan year.
- If appointments are broken without 24 hours prior notice, a cancellation fee will apply.

By signing below, I acknowledge that I have reviewed, understand, and agree to the terms and conditions of the Dental Savings Plan. I authorize Lakeland Family Dental to process my payment as listed in the agreement.

Name (Printed): _____ Signature: _____ Date: _____



DENTAL SAVINGS PLAN AGREEMENT

RESPONSIBLE PARTY INFORMATION

First Name: _____ Last Name: _____ Date of Birth: ____/____/____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ E-mail Address: _____

Healthy Patient Plan \$349

*For patients with no history
or presence of periodontal
disease*

- ✓ 1 Comprehensive Exam (New Patients)
- ✓ 2 Periodic 6-Month Exams
- ✓ 1 Emergency Exam (used any time)
- ✓ 2 Cleanings
- ✓ 2 Oral Cancer Screenings
- ✓ 2 Fluoride Varnish Desensitizing Treatments
- ✓ 4 Bitewing X-rays
- ✓ Full mouth series or Panoramic X-rays (taken every 3-5 years)
- ✓ Any other necessary individual X-rays throughout the year
- ✓ 15% off Additional Cleanings, Crowns, Sealants, Cores, Veneers, Bridges, Periodontics, Dentures, Partial, Fillings, Oral Surgery, Root Canals, and Implants
- ✓ \$500 OFF Invisalign
- ✓ 10% OFF Tooth Whitening
- ✓ **\$475 Yearly Savings!**

Periodontal Care Plan \$599

*For patients with a history
or presence of periodontal
disease*

- ✓ 1 Comprehensive Exam (New Patients)
- ✓ 2 Periodic 6-Month Exams
- ✓ 1 Emergency Exam (used any time)
- ✓ 4 Periodontal Maintenance Cleanings (interval recommended by dentist &/or hygienist)
- ✓ 2 Oral Cancer Screenings
- ✓ 2 Fluoride Varnish Desensitizing Treatments
- ✓ 4 Bitewing X-rays
- ✓ Full mouth series or Panoramic X-rays (taken every 3-5 years)
- ✓ Any other necessary individual X-rays throughout the year
- ✓ 15% off Additional Cleanings, Crowns, Sealants, Cores, Veneers, Bridges, Periodontics, Dentures, Partial, Fillings, Oral Surgery, Root Canals, and Implants
- ✓ \$500 OFF Invisalign
- ✓ 10% OFF Tooth Whitening
- ✓ **\$623 Yearly Savings!**

Childcare Plan \$299

*For children age 13 or
younger at the time of plan
enrollment*

- ✓ 1 Comprehensive Exam (New Patients)
- ✓ 2 Periodic 6-Month Exams
- ✓ 1 Emergency Exam (used any time)
- ✓ 2 Cleanings
- ✓ 2 Oral Cancer Screenings
- ✓ 2 Fluoride Varnish Desensitizing Treatments
- ✓ 2 or 4 Bitewing X-rays
- ✓ Panoramic X-rays (taken every 3-5 years)
- ✓ Any other necessary individual X-rays throughout the year
- ✓ 15% off Additional Cleanings, Sealants, Fillings, Oral Surgery, Root Canals
- ✓ **\$469 Yearly Savings!**

Plan selected: ☐ Healthy Patient Plan (\$349) ☐ Periodontal Care Plan (\$599) ☐ Childcare Plan (\$299)

Payment Options: ☐ Cash ☐ Credit Card ☐ Check

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I authorize Lakeland Family Dental to process my payment as listed in this agreement.

Name (Printed): _____ Signature: _____ Date: _____

FOR OFFICE USE ONLY: EFFECTIVE DATES: ____/____/____ - ____/____/____

☐ MEMBERSHIP ACTIVATED