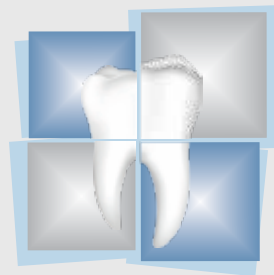




VDG Dental Benefit Plan



General, Implant, Laser & Cosmetic Dentistry

New Patients Welcome
310.676.2922

8540 S. Sepulveda Blvd., Suite 108
 Los Angeles, CA 90045

www.VatanDentalGroup.com

*Because your smile
 says so much!*

DENTAL BENEFIT ENROLLMENT

(PLEASE PRINT)

Last Name			First Name			Middle Initial			Social Security #																	
Street Address						City			State			Zip Code			Home Phone			Cell Phone								
Effective Date						Employer/Organization			Birth Date			Sex <input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/>			E-mail											
Last Name (if different), First Name						Middle Initial			Sex			Age			Last Name (if different), First Name			Middle Initial			Sex			Age		

List below all your eligible dependents that you wish covered:

Last Name (if different), First Name	Middle Initial	Sex	Age	Last Name (if different), First Name	Middle Initial	Sex	Age

Cost of Dental Benefits Plan *

Subscriber	1 x \$199 per year	\$199
Each additional family member	_____ x \$99 per year	_____
*Benefit Year		Total _____

Signature _____

Date _____

Benefits at a glance...

High quality dental care at affordable prices.

Simple to use - when you need care

- No claim forms
- No waiting period

Save money - on all dental services

- General dentistry
- Cosmetic dentistry
- Implant dentistry
- Periodontics (gum treatment)
- Oral surgery (extractions)
- Endodontics (root canal)
- Orthodontics (Invisalign/Clear Correct)
- Dentures

Advantages

- Low cost
- No deductible
- No annual maximum
- Pre-existing conditions covered
- Totally voluntary

What if I have other insurance?

Benefits CANNOT be used with any other insurance. This plan is limited to patients that have no access to conventional insurance plans.

It's easy to enroll!

1. Complete the attached enrollment card or call our office.
2. Make sure all eligible dependents desiring enrollment are listed with birth dates.

Limitations

- **Prophylaxis** (cleaning) at the discounted rate is limited to once every six months, and includes a complimentary doctor exam at that time.
- **Bitewing x-rays** are limited to one series of four films every calendar year.
- **Full mouth x-rays** are limited to once every 36 months.
- **Periodontal treatment** (scaling and root planning) are limited to one treatment per quadrant every calendar year.
- **Benefits** are unique to Vatan Dental Group and do not apply outside the office.
- **The plan** is valid for 1 year from start of membership.
- **Benefits** are on service only. Not on any products purchased.
- **Child** is 14 years and younger.

Cost of Benefits Plan

Subscriber	\$199 per year
Each additional immediate family member	\$99 per year

You may begin using your Dental Plan as soon as your application and payment are submitted to our office.



Diagnostic and Preventative	Usual Fee	Plan Fee	You Save	Periodontics (treatment of gums)	Usual Fee	Plan Fee	You Save
Periodic Exam	\$90	Free	\$90	Periodontal disease treatment (per quadrant) Includes laser	\$290	\$255	\$35
Limited oral exam (problem focused)	\$125	Free	\$125	Periodontal disease maintenance + doctor exam	\$185	\$135	\$50
Recall X-rays	\$95	Free	\$95	Periodontal laser surgery (pocket reduction per tooth)	\$1250	\$1050	\$200
Full mouth X-rays**	\$175	Free	\$175	Implant Dentistry			
Flouride	\$25	Free	\$25	Implant placement	\$1500	\$1350	\$150
Adult Prophylaxis	\$120	\$90	\$30	Implant abutment (custom)	\$650	\$475	\$175
Child Prophylaxis	\$90	\$75	\$15	Implant cosmetic crown	\$1500	\$1350	\$150
Sealants	\$98	\$65	\$33	Endodontics (root canal therapy)			
Full night guard	\$685	\$485	\$200	Root canal - anterior	\$870	\$720	\$150
**Once every three years				Root canal - bicuspid	\$930	\$820	\$110
Restorative Dentistry				Root canal - molar	\$1050	\$935	\$115
Resin White filling - one surface	\$250	\$195	\$55	Pulpotomy	\$255	\$195	\$60
Resin White filling - two surfaces	\$335	\$240	\$95	Cosmetic Procedures			
Resin White filling - three surfaces	\$350	\$255	\$95	Veneer	\$1385	\$1195	\$190
Resin White filling - four surfaces	\$375	\$275	\$100	Laser Whitening	\$399	\$299	\$100
Crown Build Up	\$250	\$150	\$100	Home Bleaching Trays	\$195	\$165	\$30
Cosmetic Partial Crown (Inlay)	\$1385	\$975	\$410	Invisalign/ClearCorrect Unlimited	\$4990		5% Discount
Cosmetic Full Crown/Onlay/Bridges (Per Unit)	\$1385	\$1175	\$210	Invisalign/ClearCorrect Express	\$3390		10% Discount
*Per Unit				*All other non-laser and non-sleep apnea procedures are discounted by 10%.			