

Hendry Dental Benefit Plan

Our Hendry Dental Benefit Plan is designed to provide our patients without dental insurance the opportunity to have the recommended treatment done at an affordable price. **EVERYONE** deserves to have a beautiful smile! Here is how the Hendry Dental Benefit Plan works:

A yearly fee of \$349.00 for adults ages 14 and older, children 13 and younger are \$249.00 **per year**.

The following benefits will be provided to each member of the plan:

- Two dental cleanings, two exams and routine x-rays taken in hygiene at no additional charge.
- Oral hygiene instruction and standard home care products at no additional charge. (Does not include products sold in the office)
- All general dental services within our office will be provided at a **15% discount**. These services include the following:

Basic services such as fillings, sealants, extractions, periodontal hygiene care, root canals, emergency exams and any x-rays taken by the doctor or an assistant.

Major services such as crowns, bridges, dental implant restoration, cosmetic dentistry, dentures and partial dentures.

Bleaching is **NOT** a covered benefit of the plan.

Payment for services are due in full at the time of service. Non- payment negates the discount.

If you and your family have not been able to obtain dental insurance coverage, our Hendry Dental Benefit Plan is designed to help you!

Terms and conditions of the Hendry Dental Benefit Plan:

Plan Commencement- To begin treatment at these great savings, membership fees must be paid in full for the individual signing up for the plan.

1. **Terms of membership-** Membership is for a 12 month period beginning the day plan is paid in full and terminating exactly 12 months later. No early termination is refunded. Plan membership is per individual. Once plan is terminated services default to full fees unless re-enrollment is done.
2. **Preventative services-** Cleanings may be scheduled **two times per year** and does not need to be every 6 months. As stated prior preventative services include an exam, routine cleaning, periodontal exam and x-rays. A toothbrush, sample toothpaste, floss and oral hygiene instructions will be provided at no additional cost. Specialized homecare products such as electronic toothbrushes, home fluoride and prescription medications are not included.
3. **Basic and major services-** Any basic or major service provided will be given a 15% discount of our usual and customary fees. Payment is due at the time of service or will negate the discount and no additional discount will be given unless other arrangements have been discussed and approved. All basic and major services are listed on page one.
4. **Non- covered dental services-** Any service requiring a referral to a specialty practice are not a covered benefit, such as an endodontist, periodontist, oral surgeon or any other specialty practice. Only services provided within Hendry Family Dental are a covered benefit. Bleaching is not a covered benefit or eligible for a discount.
5. **Missed appointment or cancellation without 24 hours' notice-** A \$50.00 fee will be assessed for missing a scheduled appointment or not giving 24 hours' notice. In some cases this fee can be waived.

Name of individual signing up for Hendry Dental Benefit Plan:

_____ D.O.B _____

Signature of patient or responsible party:

_____ Date _____

Form of payment Cash () \$ _____ Check () # _____

Visa () MC () Discover () American Express ()

Card# _____ Exp Date _____ CCV _____