

## Dr. Styrts & Associates Annual Pediatric Dental Care Savings Plan

Dental insurance is expensive and complicated. Have dentistry done on YOUR terms. No deductibles, No annual maximums, No treatment limitations, No waiting periods, and No pre-authorizations.

What's covered each year?	
NEW PT COMPREHENSIVE EXAM or	
PERIODIC EXAM (TWO/YEAR)	<b>100%</b>
LIMITED EXAM (EMERGENCY-ONE/YEAR)	<b>100%</b>
BITEWINGS (ONCE/YEAR)	<b>100%</b>
PERIAPICAL (FIRST FILM + 2 ADD'L/YEAR)	<b>100%</b>
PANO (ONCE/3 YEARS)	<b>100%</b>
TEETH CLEANING (TWO/YEAR) **	<b>100%</b>
FLUORIDE (TWO/YEAR)	<b>100%</b>
SEALANTS (NO TOOTH LIMITATIONS)	<b>50%</b>
FILLINGS/CROWNS/EXTRACTIONS/DIAGNOSED TREATMENT	<b>20%</b>

\*\*PATIENTS WHO ARE IN **ACTIVE** ORTHODONTIC TREATMENT WITH DR. PAUL J. STYRT WILL RECEIVE (**THREE** CLEANINGS/YEAR). PATIENT MUST BE IN BRACES/ACTIVE INVISALIGN. (*EXCLUDES PATIENTS IN RETAINERS/RETENTION*).

<b>ANNUAL MEMBERSHIP DUES</b>
FIRST FAMILY MEMBER \$349
SECOND FAMILY MEMBER \$299
EACH ADD'L FAMILY MEMBER \$249

THERE'S NO ID CARD, NO GROUP OR MEMBER NUMBER TO BRING! ALL OF YOUR MEMBERSHIP INFORMATION WILL BE KEPT IN YOUR ELECTRONIC RECORD. YOUR EFFECTIVE DATE IS THE DAY YOU SIGN UP AND YOUR RENEWAL DATE IS THE SAME DATE EVERY YEAR.

PLAN PARTICIPANTS:	
1.	
2.	
3.	
4.	
5.	
6.	

**Terms of the Plan**

- Annual Enrollment Fee for each family member is non-refundable. No refunds given if patient chooses not to use their dental plan.
- Enrollment Date begins on the date the Enrollment fee is paid and shall expire after 365 days.
- All payments are due AT TIME OF SERVICE to receive the discount. Any services received that are not paid for at the time of service, will be billed at the usual, higher rate.
- If you choose to extend your payment for treatment by paying through Care Credit, the restorative treatment discount is reduced to 10% due to merchant fees.
- The exams, bitewing x-rays, cleanings must occur within the year of enrollment and cannot be carried over to the next year.
- It is the patient's/parent's responsibility to make and keep appointments for his/her family members.
- A \$50 per hour fee will incur for each broken appointment without 48 hours advance notice.
- Our program is not transferrable to another party or uncovered family member.
- Participation cannot be combined with any other offer or dental plan.
- Annual Enrollment Fees and Procedures are subject to changes during the year.
- This program is good only at Dr. Styrts & Associates. Therefore, if you are referred to a specialist, they will NOT offer this discount. Should there be dental treatment needed following any type of injury where a lawsuit and therefore outside medical, car, disability, or workmen's compensation type insurances are involved, this savings plan cannot be used.

PLAN EFFECTIVE DATE: \_\_\_\_\_

PLAN END DATE: \_\_\_\_\_

I, \_\_\_\_\_ AGREE TO THE TERMS OF THE PLAN.

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_