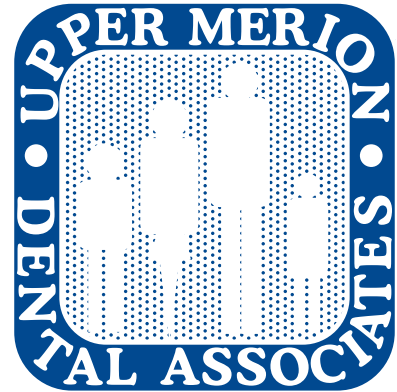


# Upper Merion Dental Membership Plan

## **Sample Fee Schedule** *Effective 1/1/09*

- 2 Surface Amalgam Restoration - \$98
- 2 Surface Tooth Colored Restoration Anterior Tooth - \$150
- 2 Surface Tooth Colored Restoration Posterior Tooth - \$175
- Porcelain Crowns/Caps - \$895
- Vital Pulpotomy/Stainless Steel Crown - Primary Tooth - \$360
- Root Canal Treatment Molar - \$875
- Full Mouth Bleaching - \$300

Payment is due at time of service. Payment plans and care credit available for large treatments plans.



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[www.uppermeriondental.com](http://www.uppermeriondental.com)

*Gentle and Professional Dentistry  
for the Entire Family*

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## Plan A

*For patients without dental insurance*

### Primary Member

\$149/year \$155-\$207/value

### Secondary Member

\$139/year \$155-\$207/value

### Additional Family Members

\$129/year \$158-\$198/value

## Plan A Provisions:

Each member is entitled to one exam, cleaning, fluoride treatment (if age appropriate) and necessary radiographs once per year. All other treatment during the one year term of membership will be delivered at the following discounts from our regular fee schedule (see sample fees below:)

1. All treatment done in our pediatric dental department - **15% discount**
2. All routine treatment done by our general dentists: white or silver fillings, extractions, bleaching - **10% discount**
3. Major work done by general dentists: buildups, crowns, veneers, implants, implant restoration, crown lengthening, gingival procedures - **15% discount**
4. All endodontic procedures - **15% discount**
5. Orthodontic/invisalign treatment - **10% discount**
6. All treatment performed by Upper Merion Periodontal Associates - **15% discount**
7. All treatment performed by our hygienists excluding oral cancer screening and arestin therapy- **15% discount**

## Plan B

*For patients with private dental insurance who will be over insurance maximum*

### Primary Member

\$100/Year

### Whole Family

\$175

## Plan B Provisions:

All patient members receive 5% discount on all insurance co-pays up to insurance plan yearly maximum.

Once patient member has reached their yearly maximum all additional treatment will be discounted as in Plan A numbers 1-7.

## Plan B Exclusions:

- Patients with Capitation Insurance plans are not eligible.
- Nitrous Oxide Anesthesia is not eligible for 5% discount prior to reaching insurance maximum.
- If a patient is entitled to reduced fees under their insurance plan after they have reached their max, there are no additional discounts.