

DENTALone

membership card

ONE CONVENIENT CARD

DESIGNED TO GIVE YOU TWO FREE CLEANINGS
AND EXAMS A YEAR PLUS A SAVINGS OF 20 - 100% OFF
YOUR DENTAL SERVICES.... ON EVERY VISIT!



*No pre-existing conditions,
no waiting periods,
comparative fee chart,
no maximums, & qualifies
for HSA or FSA dollars!*

Dear **DENTALone** member,
You now have the advantages of **DENTALone's**
discounted fee plan. It's been designed as an
alternative to typical dental insurance. All*
dental procedures are covered for you and your
dependents with one card, allowing you to
provide great dental benefits for yourself *and*
your immediate family. All services are provided
at any one of the Ladd Dental Group offices
shown below. A typical **DENTALone** card
member with a family of four saves on average
\$600 on routine cleanings with exams!

*Welcome to a new world of dental
savings for you and your family!*

PARTICIPATING DENTALone LOCATIONS:

Kokomo Greentown
Bunker Hill Westfield
Peru Wabash McCordsville Logansport OSC

For more information visit: www.ladddental.com

DENTALone Fee Schedule

\$250.00 for the first person

\$225.00 for each additional family member

*All fees not listed are discounted at 20% excluding Implants, Whitening, IV sedation, Orthodontic Services and certain Dentures.

Fees subject to change at the discretion of Ladd Dental Group, Inc. Benefits only redeemable at any participating Ladd Dental Group Office.

| Ada Code | Procedure Description | Normal Fee | DentalOne Discount | Your Savings | DentalOne Discounted Fee |
|----------|-----------------------------------|-----------------------|--------------------|--------------|--------------------------|
| 120 | Periodic Examination | \$55.00 | 100% | \$55.00 | 0.00 |
| 140 | Emergency Exam (1 per year) | \$80.00 | 100% | \$80.00 | 0.00 |
| 150 | Initial Examination | \$95.00 | 100% | \$95.00 | 0.00 |
| 210 | Full Mouth X-Ray | \$141.00 | 100% | \$141.00 | 0.00 |
| 272 | Bitewings-Two Films | \$49.00 | 100% | \$49.00 | 0.00 |
| 274 | Bitewings-Four Films | \$69.00 | 100% | \$69.00 | 0.00 |
| 330 | Panoramic | \$119.00 | 100% | \$119.00 | 0.00 |
| 1110 | Prophylaxis-Adult | \$111.00 | 100% | \$111.00 | 0.00 |
| 1120 | Prophylaxis-Child | \$87.00 | 100% | \$87.00 | 0.00 |
| 1206 | Fluoride | 39.00 | 20% | \$7.80 | 31.20 |
| 1351 | Sealant | 59.00 | 20% | \$11.80 | 47.20 |
| 2330 | Composite 1 Surf. Ant. | \$205.00 | 20% | \$41.00 | \$164.00 |
| 2331 | Composite 2 Surf. Ant. | \$250.00 | 20% | \$50.00 | \$200.00 |
| 2332 | Composite 3 Surf. Ant. | \$324.00 | 20% | \$64.80 | \$259.20 |
| 2335 | Composite 4 Surf. Ant. | \$368.00 | 20% | \$73.60 | \$294.40 |
| 2391 | Composite 1 Surf. Post. | \$205.00 | 20% | \$41.00 | \$164.00 |
| 2392 | Composite 2 Surf. Post. | \$250.00 | 20% | \$50.00 | \$200.00 |
| 2393 | Composite 3 Surf. Post. | \$324.00 | 20% | \$64.80 | \$259.20 |
| 2394 | Composite 4 Surf. Post. | \$368.00 | 20% | \$73.60 | \$294.40 |
| 2752 | Porcelain Veneer Crown | \$1,313.00 | Flat Fee Discount | \$150.00 | \$1,163.00 |
| 2790 | Full Gold Crown | \$1,313.00 *Plus Spot | Flat Fee Discount | \$150.00 | \$1,163.00 *Plus Spot |
| 2950 | Build-up | \$284.00 | 20% | \$56.80 | \$227.20 |
| 2954 | Cast Post & Core | \$360.00 | 20% | \$72.00 | \$288.00 |
| 3310 | Root Canal Anterior | \$803.00 | 20% | \$160.60 | \$642.40 |
| 3320 | Root Canal Bicuspid | \$903.00 | 20% | \$180.60 | \$722.40 |
| 3330 | Root Canal Molar | \$1,101.00 | 20% | \$220.20 | \$880.80 |
| 4341 | Perio Scale and Root Planing/Quad | \$273.00 | 20% | \$54.60 | \$218.40 |
| 4910 | Perio Maintenance | \$145.00 | 20% | \$29.00 | \$116.00 |
| 5110 | Characterized Upper Denture | \$1,894.00 | 20% | \$378.80 | \$1,515.20 |
| 5120 | Characterized Lower Denture | \$1,903.00 | 20% | \$380.60 | \$1,522.40 |
| 5213 | Upper Partial | \$1946.00 | 20% | \$389.20 | \$1,556.80 |
| 5214 | Lower Partial | \$1,952.00 | 20% | \$390.40 | \$1,561.60 |
| 7140 | Extraction | \$193.00 | 20% | \$38.60 | \$154.40 |
| 7210 | Surgical Extraction | \$299.00 | 20% | \$59.80 | \$239.20 |
| 7220 | Extraction Soft Tissue | \$334.00 | 20% | \$66.80 | \$267.20 |
| 7230 | Extraction Partially Bony | \$422.00 | 20% | \$84.40 | \$337.60 |
| 7240 | Extraction Complete Bony | \$504.00 | 20% | \$100.80 | \$403.20 |
| 7250 | Surgical Removal of Root Tip | \$332.00 | 20% | \$66.40 | \$265.60 |

Benefits may not be combined with any other offers or discounts.

This card may be used with dental insurance only after the insurance has met the annual maximum.

DENTALone is NOT an insurance plan, but a discount fee for service dental program. It is an alternative to dental insurance with many of the benefits and few of the restrictions. **DENTALone** has a higher level of benefits in certain areas than traditional insurance with no yearly maximum, no deductibles, and no waiting periods.

**CHOOSE NOW TO PUT 20–100% OF YOUR DENTAL BILL
BACK INTO YOUR POCKET.**