

# NO INSURANCE?

No problem don't miss out on your chance to SAVE with our IN-HOUSE DENTAL PLAN INSURANCE!

Ask us how!  
\$400 Yearly Plan

## COVERAGE INCLUDES:

### EXAMINATION:

NEW PT COMPREHENSIVE EXAM.....100%  
PERIODIC EXAM (2 per yr.).....100%  
EMERGENCY EXAM (1per yr.)..... \$ 69

### RADIOGRAPHS:

FULL MOUTH/PANO (1 in 5 yr.).....100%  
BITEWINGS (1 set per yr.).....100%  
PERIAPICAL (1 per yr.).....100%

### PREVENTIVE:

ADULT CLEANING (2 per yr.).....100%  
CHILD CLEANING (2 per yr.).....100%  
PERIO MAINTENANCE (2 per yr.)\*\*.....100%  
FLUORIDE (2 per yr., under 14yrs old).....100%  
\*\*ADDITIONAL PERIO PLAN

### EVERYTHING ELSE: 30% DISCOUNT (EXCEPT SPECIALTY PROCEDURES)

FILLINGS - \$255-\$398  
CROWNS/BRIDGES - \$1452  
ROOT CANALS- \$1255  
EXTRACTIONS- \$425-\$700  
SCALING & ROOT PLANING- \$325  
DENTURES & PARTIALS  
SEDATION- \$400  
COSMETIC DENTISTRY  
INVISALIGN..... \$500 OFF  
(MUST REMAIN A MEMBER DURING ENTIRE DURATION OF TREATMENT)

## YEARLY MEMBERSHIP DUES:

YEARLY FEE.....\$400  
ADD'L OPTIONAL PERIO PLAN.....\$210  
(PER MEMBER)

### BENEFITS OF MEMBERSHIP:

PREAUTHORIZATION NOT NEEDED  
NO ANNUAL MAXIMUM  
NO DEDUCTIBLE  
NO WAITING PERIODS  
NO ID CARDS  
Either regular cleaning or perio maintenance

### TERMS & LIMITATION OF THE PLAN:

CO-PAYMENTS MUST BE PAID AT THE TIME OF SERVICE. ANY SERVICES NOT PAID AT THE TIME OF SERVICE WILL BE BILLED AT USUAL AND CUSTOMERY FEES. PLAN IS VAILD FOR ONE YEAR FROM THE DATE OF SIGN-UP. FAMILY MEMBERS MAY NOT BE SUBSTITUTED FOR ANOTHER FAMILY MEMBER. THIS IS NOT A DENTAL DISCOUNT PLAN OR DENTAL INSURANCE. IT CANNOT BE COMBINED WITH ANY OTHER DENTAL INSURANCE.MEMBERSHIP DUES ARE NOT REFUNDABLE. PLAN FEES ARE VALID ONLY WHEN PAID AT THE TIME OF ENROLLMENT. IMPLANTS AND/OR IMPLANT RESTORATIONS ARE NOT COVERED BY THIS PLAN. RATES ARE SUBJECT TO CHANGE.

9:00am – 6:00pm (Monday – Friday)

8:00am –3:00pm (1<sup>st</sup> SAT of month ONLY)

Redwood Shores Dental

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