

DRS KO, BRESSLER & KASHEFI
IN OFFICE DENTAL PLAN INFORMATION

In an effort to help our patients that do not have dental insurance we have created an in office dental plan. This plan offers a number of options, all of which translate into significant savings toward the cost of your dental care. The preventative portion of the plan includes 2 cleanings per calendar year, a doctor exam, bitewing x-rays, and fluoride treatments. **In addition, enrollment within the plan automatically qualifies you to a 10% fee reduction on any restorative, surgical, or prosthetic treatment needed during the year!** And, unlike insurance plans which place a yearly limit on covered treatment, usually in the \$1000-\$2000 range, we have not put a cap on coverage or placed exclusions on non-covered procedures.

For those individuals that schedule 4 periodontal cleanings per year, we have also created a program to help you with your dental needs. As you can see, the cost savings are significant:

PLAN (A) - 2 CLEANINGS/2024	PLAN (B) - 4 PERIO CLEANINGS/2024
✓ 2 regular cleanings per year	✓ 4 perio cleanings per year
✓ 1 doctor exam per year	✓ 1 doctor exam per year
✓ any necessary cleaning x-rays including a full mouth series every 5 years	✓ any necessary cleaning x-rays including a full mouth series every 5 years
✓ 2 fluoride varnish treatments	✓ 4 fluoride varnish treatments
With the plan \$495 ***(+plus 10% discount on any additional procedure)	With the plan \$875 ***(+plus 10% discount on any additional procedure)
Without the plan \$623	Without the plan \$1083

CHILDRENS PLAN (up to age 13)	
✓ 2 regular cleanings per year	
✓ 1 doctor exam per year	
✓ any necessary x-rays	
✓ 2 fluoride varnish treatment	
With the plan \$ 410 ***(+plus 10% discount on any additional procedure)	
Without the plan \$514	

This plan is available only to those individuals that do not have insurance. It will run from January to December and will not renew automatically. Participation is voluntary. Specific details of the plan contract are attached.

This in office dental plan is being offered by Goodman, Ko & Associates, LLP to help our patients that do not have dental insurance with the cost of their dental care.

The terms of this arrangement are as follows

1. "The Plan" coverage period is January 1 to December 31, 2024.
2. Coverage does not renew automatically and is non refundable.
3. Open enrollment for the upcoming year is September 1 to December 31. Payment for the upcoming year must be made by December 31.
4. There is no carry over of benefits from year to year if a cleaning or preventive service is not scheduled or missed. Cleaning appointments should be scheduled in advance. If an appointment cannot be made due to unavailability of a desired time slot, cancellation on the part of the patient, or illness of patient, there is no compensation for unused services.
5. We typically bill upon completion of a dental procedure. Coverage within the plan must be in place during all treatment. Should a procedure start in one calendar year and end in the next, coverage must be in place at the end to qualify for the 10% discount.
6. There are no additional fee reductions above the 10% discount.
7. Enrollment payment must be in the form of check or cash. A convenience fee of 5% will be applied if you use a credit card for the yearly enrollment fee.
8. Full payment by **cash or check** must be made at the time of service to qualify for the **10%** discount. Alternatively, should you wish to pay by credit card, a **5%** discount will be applied. There is not a billing option. Should you wish to be billed at the end of the month, there will be no discount.
9. Our traditional 5% senior citizen discount does not apply if individual is enrolled in the in house plan
10. Patient financing services such as Care Credit do not qualify for the 10% discount.

PLAN (A) \$495 ()

PLAN (B) \$875 ()

CHILDRENS PLAN \$410 ()

Patient name: _____ Date: _____

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