

## PROGRAM GUIDELINES

- Patient portion of bill is due at time of service.
- Cannot be used in conjunction with another dental plan or insurance.
- No refunds of premiums will be issued if participant decides not to utilize dental plan after 30 days of starting plan.
- Full premium refund will be given within 30 days of plan start date if participant opts out of plan.
- No membership card will be given. Your plan's effective date will be on file with our office.
- Membership cannot be used at any other office other than Carolina Smiles Family Dentistry and its providers.
- Plan cannot be used for referral to specialist or for hospital care.
- Plan cannot be used for costs of dental care which is covered under automobile medical insurance.
- Plan cannot be used for injuries covered under worker's compensation claims.
- Plan cannot be used for treatment for which, in the sole opinion of our providers, lies outside the realm of their capability.

Our Dental Savers Plan is designed to provide greater access to quality dental care at an affordable price. It's fee schedule for dental services is for Carolina Smiles Family Dentistry ONLY. Office Fee Schedule subject to change. This Program is a discount plan, not a dental insurance plan.



**CAROLINA SMILES**  
FAMILY DENTISTRY



**BRINGING COMPASSIONATE  
DENTISTRY TO WEST  
COLUMBIA**

3244 Sunset Blvd.  
West Columbia, SC 29169  
803-794-2273

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



DR. POUGH



DR. PATEL



DR. MIRANDA

# DENTAL SAVERS PLAN

## BENEFIT PREMIUMS

- **NO** Yearly Maximums
- **NO** Deductibles
- **NO** Claim Forms
- **NO** Pre-Authorizations Required
- **NO** Health Questions/Denials
- **NO** Pre-Existing Conditions Limits
- **NO** One Will Be Denied Coverage
- **NO** Waiting Periods (Immediately Eligible)
- **FREE** Consultations

## YEARLY MEMBERSHIP PREMIUMS

Plan	Total	Yearly Savings
Single	\$365/yr	<b>\$517.00</b>
Dual	\$700/yr	<b>\$1064.00</b>
Family of 3	\$1020/yr	<b>\$1611.00</b>
Family of 4	\$1340/yr	<b>\$2158.00</b>
Each Additional Member	\$300/yr	

### AUTO RENEWAL POLICY = 5% OFF!

Sign up for auto-renewal of your dental savings plan and receive 5% OFF your next year's membership premium!!!

- Dual Plan is for parent/child (18 or under) or husband/wife/partner.
- Family Plan includes immediate family members and children under 18.
- Children who are enrolled in college full time until age 23.

**SMILES ARE PRICELESS...FOR \$1 A DAY, WE MAKE THEM AFFORDABLE!**

### 15% OFF Major Procedures

Receive 15% OFF Crowns, Veneers Dentures, Root Canals, & More!

### 20% OFF Minor Procedures

Receive 20% OFF White Fillings, Whitening, Occlusal Guards, Sealants, Extractions, Nitrous & More!

### Best In The Carolinas

Implants Start To Finish (3D Guide, Implant, Abutment, Crown)	<b>\$3,600.00</b>
Invisalign (Retainers Included)	<b>\$4,800.00</b>
Sleep Apnea Appliance	<b>\$3,500.00</b>

Blue Cross	Dental Savers Plan
<b>\$63.92/Month</b> <b>\$767.04/year</b>	<b>\$30.41/Month</b> <b>\$365/Year</b>
Deductible: \$50	No Deductible
Yearly Maximum: \$1500	No Maximums
<b><u>Will NOT COVER:</u></b> Genetic Tooth Defects Tooth Erosion/Attrition Cosmetic Procedures Porcelain Veneers Preventative Programs Pre-existing Conditions Tooth Colored Fillings Bridges /Partials Dentures Orthodontics Implant Missing Tooth Bone Grafting TMJ Treatment	Carolina Smiles Dental Savers Plan covers ALL dental procedures with no limitations of any kind at a discounted rate of <b>15-20% OFF.</b>

## AFFORDABLE DENTAL COVERAGE FOR YOUR ENTIRE FAMILY

Treatment	OTHER OFFICES	Carolina Smiles
Comprehensive Exam & Annual Exam	\$350-500	FREE
2 Cleanings (In absence of Gum Disease)	\$250-300	FREE
Bitewing X-rays, Full Mouth X-rays	\$215-240	FREE
Emergency Exam	\$90-120	FREE
2 Fluoride Treatments	\$90-120	FREE
3D/Cone Beam CT Scan	\$250-450 (Or Not Offered)	FREE
Annual DSP Premiums	Not Offered	\$365/YEAR
3D Guided Implant Start to Finish	\$5000-6500	\$3600
Porcelain CROWN	Usually Not offered \$1168-1250	\$992
Invisalign Braces	\$6000-7500	\$4800
Occlusal Guard	\$609-750	\$487
Molar Root Canal	\$1081-1200 (Usually Referred Out)	\$919
3 Surface White Filling	\$298-377	\$238
Surgical Extraction	\$294-375	\$235