### **Terms & Conditions**

The discounts associated with the Extending Grace Dental Plan are available only through Grace Dental P.A.

Monthly membership fees are to be paid for a minimum twelve (12) month period and are non-refundable. Unless waived by the dentist, membership will automatically renew on the anniversary date and continue thereafter until cancelled, in writing.

Qualified dependents are defined as a husband, wife, and any non-married children living in the household under 26 years old as a full-time student. Any additional dependents after three (3) each will have an additional surcharge of \$18 per month per dependent.

Fees and plan discounts are subject to change without notice.

Missed or broken appointments without 24-hour notice will be charged \$35.

All member co-payments are due at time of service.

Membership in the Dental Plan may be terminated for abuse or failure to pay membership fees or billed work.

Extending Grace Dental Plan is administered solely by the dental office and may be discontinued at the end of any month, with or without notice.

Patient must follow recommended maintenance exams and prescribed professional maintenance by dental staff.

Extending Grace Dental Plan benefits are limited to \$1500 per each covered family member per year.

Prophylaxis is limited to twice every calendar year.

Fluoride treatments are limited to twice every calendar year per member to age 19.

Dental plan benefits are not applicable until three (3) months after the initial date of acceptance except for Type I services.

A denture, bridge, or other appliance installed under the Extending Grace Dental Plan can be replaced only once during the period of three (3) years after the original installation. A denture, bridge, or other appliance can be replaced only if it is unsatisfactory and cannot be made satisfactory by a reline or repair.

### Terms & Conditions (continued)

Denture relines are limited to once per calendar year.

All covered replacements are subject to the copayment percentages as listed in the Schedule of Services and the private fee schedule of Grace Dental P.A.

Crowns are covered only if the tooth cannot hold a filling.

Any dental procedure in progress or performed before or after a member's eligibility period is excluded.

Replacement of a satisfactory filling is excluded.

Replacement for lost or stolen dentures, partials, or appliances is excluded.

Any dental procedure not listed as a covered service, including but not limited to, anesthesia, prescription medications, endodontics, trauma to the mouth, emergency dental services, etc. is excluded.

Treatment required due to hospital and medical charges or self-inflicted wounds of any kind are excluded.

Treatment to correct congenital, developmental, or medically induced dental disorders is excluded (i.e. TM.)).

Any dental expense incurred if the dentist is unable to perform a procedure due to the member's general health or physical condition is excluded.

Bleaching of teeth for cosmetic purposes is excluded.

Coordination of Extending Grace Dental Plan benefits with other dental or insurance plans is excluded.

For additional information please see Terms & Conditions, Limitations and Exclusions information on the Extended Grace Dental Plan Application.

913 685 9111 Smile with Grace

# Affordable Dental Coverage for You and Your Family!

Available Exclusively from



# **Grace Dental**

913 685 9111

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www.gracedental.com



#### **Benefit Features** Coverage Consultations - 2 per year 100% Coverage 100% Coverage Oral Exams – 2 per year Cleanings – 2 per year 100% Coverage X-Rays - Panoramic 100% Coverage X-Rays - Bite Wing 100% Coverage Sealants 40% Coverage Fillings 35% Coverage Extractions - Simple 35% Coverage Periodontal Services 35% Coverage Crown & Bridge Services 30% Coverage **Dentures & Partials** 15% Coverage Invisible Braces\* 10% Coverage\*

On comprehensive cases.

Specialist Services discounts are available; ask us for specifics.

Athletic mouthguards and Night Guards available. Inquire about it at the front desk.

Single	\$39/month or \$449/year
Couple	\$64/month or \$739/year
Family	\$98/month or \$1099/year

# **How Does it Work?**

The Extending Grace Dental Plan works similar to many dental plans on the market. You pay a monthly membership fee for benefit coverage on your dental expenses. The plan is designed to cover preventive services such as cleanings and oral exams. This provides coverage that can be budgeted at an affordable monthly expense while receiving excellent benefits for your higher cost dental service.

Grace Dental administers the Extending Grace Dental Plan and works with you, the patient, directly to make all dental service decisions. There is no need to contact a 3rd party company for information. All questions regarding plan coverage, verifying benefits, changing coverage types, or any other questions should be directed to us here at Grace Dental.

Grace Dental may refer a patient to a specialist that participates in the Extending Grace Dental Plan. Members must verify the specialist's participation in the Network prior to accepting treatment. Grace Dental will have a listing of participating specialists.

For more information, go to:

www.gracedental.com

or call:

913 685 9111

## Our Plan

If asked, most people would agree that decisions about dentistry are best made between the patient and their dentist, without a third-party company's involvement.

The Extending Grace Dental Plan is different! It has been designed to provide you and your family with affordable preventive dental coverage, your dentist owns and administers.

Not only does it provide outstanding coverage on preventive dentistry, the plan offers excellent coverage on major dental procedures like crowns, bridges, and dentures.

Since this plan is not administered by a third party insurance company, all the decisions regarding your dental treatment may be decided by you and your Grace Dental dentist without the need for claim forms, approvals, deductibles, or waiting periods.

