

# Our Low-Cost Co-Payment Guide

## Preventive Dental Care

Service	Co-Payment	Regular Fees (as much as)
Examination . . . . .	No Charge . . . . .	\$50
X-Rays . . . . . <i>(every 12 months)</i>	No Charge . . . . .	\$80
Cleaning (Prophylaxis) . . . . . <i>(every 6 months)</i>	No Charge . . . . .	\$110
Fluoride Treatment . . . . . for Children <i>(every 6 months)</i>	No Charge . . . . .	\$50
Panoramic X-Ray . . . . .	No Charge . . . . .	\$120

## Front Tooth Fillings

Service	Co-Payment	Regular Fees (as much as)
1 Surface . . . . . <i>(composite/tooth-colored)</i>	\$128 . . . . .	\$160
2 Surfaces . . . . . <i>(composite/tooth-colored)</i>	\$168 . . . . .	\$210
3 Surfaces . . . . . <i>(composite/tooth-colored)</i>	\$180 . . . . .	\$235

## Oral Surgery

Service	Co-Payment	Regular Fees (as much as)
Extractions . . . . .	.\$136/\$280 . . . . .	.\$170/\$350

## Gum Treatment

Service	Co-Payment	Regular Fees (as much as)
Scaling & Root Planing . . . . . <i>(per quadrant)</i>	\$220 . . . . .	\$275

## Crowns

Service	Co-Payment	Regular Fees (as much as)
Porcelain Crown . . . . . <i>(per unit)</i>	\$1,200 . . . . .	\$1,450

## Root Canals

Service	Co-Payment	Regular Fees (as much as)
Front Tooth . . . . .	\$640 . . . . .	\$800
Bicuspid . . . . .	\$720 . . . . .	\$900

## Other Treatments

Service	Co-Payment	Regular Fees (as much as)
Emergency Exam . . . . . <i>(limit two per year)</i>	No Charge . . . . .	\$85
Sealants <i>(per tooth)</i> . . . . .	.\$48 . . . . .	.\$60
Occlusal Guard . . . . .	.\$320 . . . . .	.\$400
Complete Denture <i>(per arch)</i> . . . . .	\$1,280 . . . . .	\$1,600