

The Details

For the price of the annual membership fee, each member will receive at no charge:

- 2 dental cleanings per year (D1110)
- 4 check up X Rays, once per year, (D0274)
- 2 dental exams (D0120)
- Fluoride treatments for children 12 and under twice per year (D1203)

AND A 15% discount on all other services and procedures performed by the general dentist or the hygienist **excluding implants and restoration of implants**. The discount does not apply to any of the specialist’s treatment such as: orthodontics, IV sedation, Oral Surgery, Periodontal Surgery.

The Dentistry’s *Total Care Dental Plan* is **not dental insurance**. It is a cost savings dental plan that emphasizes prevention of dental disease. Members receive discounts on just about all the dental services we offer. Unlike traditional insurance, there are:

- No annual deductible
- No yearly maximums
- No pre authorization of treatment
- No denial of payments
- No exclusions for pre-existing conditions
- **Implants and the restoration of implants are not eligible for the 15% discount**

MEMBERSHIP FEES (per year)

Individuals	\$209.00
Each additional adult (over 14)	\$189.00
Each additional child	\$139.00

Our 2017 fees for 2 adult checkups/yr are: \$276.00
Our 2017 fees for 2 child checkups/yr are: \$256.00

This is a no lose proposition! Even if all that is necessary are regular check ups... **You Still Save Money!!**

The savings on dental services could save you an additional \$15.00 off of the full price of a one surface filling, all the way up to \$526 dollars in discounts for a 3 unit fixed bridge!

ENROLL NOW

Call or visit The Dentistry Office near you to have one of our friendly staff members enroll you in this fabulous cost savings plan, or visit thedentistry.com, click on the “dental plan” tab on the home page, and download the membership application.

Start Saving Today!!

Irwin 724-864-2888	West Mifflin 412-466-9466
Green Tree 412-937-9070	Monroeville 412-646-1000

Pleasant Hills
412-655-9600

And As Always...

We Cater to Cowards

Enrollment Form

Name _____

Contact info

Address _____

Home phone _____

Cell phone _____

Date ____/____/____

Email _____

Additional Members names and ages
(living in the same household)

Name _____

DOB _____ Age _____

Name _____

DOB _____ Age _____

Name _____

DOB _____ Age _____

Name _____

DOB _____ Age _____

Name _____

DOB _____ Age _____

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DENTISTRY

“Always a gentle touch”

ANNUAL MEMBERSHIP FEE

First Adult

@ \$209.00 \$ _____

Additional adult(s)

@ \$189.00 each \$ _____

Each additional child (14 and under)

@ \$139.00 each \$ _____

Total annual fee \$ _____

I authorize The Dentistry to charge my Credit/Debit Card in the amount of \$_____, on Date____/____/____. My credit card number is _____ exp_____.

Signature _____

MEMBERSHIP AGREEMENT

1. The Dentistry's "Total Care Dental Plan" (TCDP), cannot be used with any other discounts or dental insurance.
2. The membership fee is due in full upon the signing of the agreement.
3. Once the membership fee is paid, the member(s) are immediately eligible for discounts or no charge procedures.
4. **Automatic renewal of membership** - Your membership will be automatically renewed up to 30 days prior to the expiration date on the contract. Unless you notify TCDP of your intention to cancel, the credit/debit card used to pay the initial fee, will be charged the renewal fee on the anniversary date of membership. If a check was used to set up the plan, then a bill will be sent to the member for the renewal.

5. Any procedure provided at the discounted fee must be paid in full at the time of service. **In the instance of a multiple visit procedure, half of the fee will be due when scheduling the appointment, the balance will be due the day of the appointment.**

6. **Failure to provide 48 hours notice for cancellation of a check up visit will result in a \$35.00 missed appointment fee.** If the member wants to reschedule a Monday appointment, notice must be given on Thursday the week before to avoid the cancellation fee. **Failure to provide 72 hours notice for the cancellation of an appointment with the Dentist will result in the forfeiture of any appointment reservation fee (deposit).** A missed appointment/insufficient notice of cancellation will not be rescheduled until the missed appointment fee or the new reservation fee is paid.

7. **Cancellation/Refund Policy of TCDP** the membership fee may be partially or fully refundable depending on the amount of services provided to the member prior to cancellation. If no services were provided, a 100% refund will be provided. If one check up visit was provided, a 50% refund will be provided. **Any discounted dental services provided prior to cancellation will revert to the full fee and become due and payable.**

8. Failure to pay any balance due within 30 days of receiving a billing statement will void the discount rate applied to services provided and will result in the full usual charge being now due. Should collection procedures be required, the member will be charged all collection costs associated with those collection procedures including but not limited to: fees charged by any attorney, collection agency, billing fees, and magistrate charges.

9. The TCDP is only applicable to the Green Tree, West Mifflin, Monroeville, Irwin and Pleasant Hills offices of The Dentistry.

10. Any returned checks (nsf), will be charged a \$25.00 fee.

I have read and understand all the terms of this membership agreement.

Signed _____

Date____/____/____

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Total Care Dental Plan

*A comprehensive dental plan
for Families and Individuals*



THE DENTISTRY
7546 ROUTE 30
IRWIN, PA 15642
724-864-2888

THE DENTISTRY
300 FLEET STREET
SUITE 200
GREEN TREE, PA 15220
412-937-9070

THE DENTISTRY
4945 HOMEVILLE ROAD
WEST MIFFLIN, PA 15122
412-466-9466

THE DENTISTRY
4077 WILLIAM PENN HWY
MONROEVILLE, PA 15146
412-646-1000

PLEASANT HILLS
841 CLAIRTON BLVD.
PLEASANT HILLS, PA 15236
412-655-9600

thedentistry.com

Dr. John E. Tiano & Associates