

Start Saving Today!

Arthur J. Post, DDS Dental Excellence In-Office Savings Plan

Why we offer this plan: People who don't have dental insurance put off their care & small cavities get bigger leading to much more extensive & expensive treatment like root canals & crowns that could have been avoided with timely preventive care.

Better than employer-sponsored plans: Employer-sponsored dental programs result in payroll deductions, but don't cover all of the services. Dropping employer-sponsored plans can result in saving money & receiving better coverage at the same time.

Save money now & get better care: Because you pay for an entire year, we know you will be more motivated to keep your six-month cleaning & checkups. This will help us keep your mouth healthier & looking great which will save you time & money.

What Is Covered

Service	Regular Fees
Examinations (twice per year)	\$58 x 2 = \$116
Cleanings (twice per year)	\$85 x 2 = \$170
Fluoride Treatment (twice per year).	\$48 x 2 = \$96
X-Rays	\$60
Emergency Examinations (as needed)	\$95
Total Savings.	\$442 (does not include emergency exams)



Enroll Now!

Enroll Today!

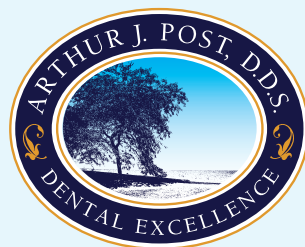
Low-Cost Dental Coverage Less Than \$1/day

Join Arthur J. Post, DDS Dental Excellence's
In-House Premier Dental Coverage

- All Health Conditions Accepted!
- You Cannot Be Denied Coverage!
- No Deductibles!
- No Health Questions!
- You Cannot Be Singled Out for Rate Increases or Cancellations!

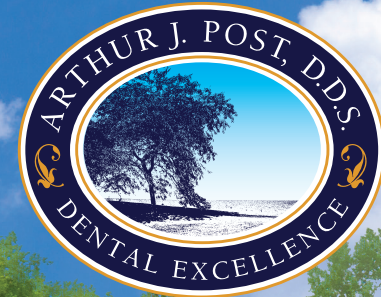
Healthy Gums Improve Your Overall Health

Research has linked gum disease to health problems like diabetes, heart disease, dementia & respiratory infection. Regular dental cleanings can help you stay healthy & increase your lifespan. Call today for your dental cleaning.



22601 Harper Avenue, Suite 1002, St. Clair Shores, MI 48080
586-776-7785 • DrAPost.com
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Affordable Dental Coverage Less Than \$1/day



**Further
Heightened
Sterilization
Standards!**

We're Making
Excellence in
Dentistry
Affordable for You!

Affordable Dental Coverage for the Whole Family!

Now you can join our low-cost dental coverage for a nominal membership fee. Our coverage entitles you to preventive dental care at no cost! Corrective services are available for small co-payments that are far less than the usual, customary fees. Our professional staff is qualified to care for all of your dental needs!

To enroll, simply fill out the enclosed enrollment form & return it with your check, money order or credit card information. Please make your check or money order payable to Arthur J. Post, DDS Dental Excellence.

Low-Cost Dental Coverage

- Individual Premium ~ \$16.59/mo.*
- Individual & Spouse Premium ~ \$26.83/mo.*
- Additional Family Member Premium ~ \$8.25/mo.*

* Monthly payment plan is available to patients providing direct deposit or credit card access.

Please Inquire About Services Not Listed Here!

Preventive Dentistry

Dental Services	Co-Payment
Examination	No Charge
X-Rays (every 12 months)	No Charge
Adult Cleaning (every 6 months)	No Charge
Children's Cleaning (every 6 months)	No Charge
Fluoride Treatment for Children (every 6 months)	No Charge

Fillings

Dental Services	Co-Payment
1 Surface (composite/tooth-colored)	\$184
2 Surfaces (composite/tooth-colored)	\$224
3 Surfaces (composite/tooth-colored)	\$272
4 Surfaces (composite/tooth-colored)	\$328

Periodontics

Dental Services	Co-Payment
Soft Tissue Management (per quadrant)	\$260
Periodontal Maintenance	\$140

Crowns & Bridges

Dental Services	Co-Payment
Porcelain Crown (PFG) (per unit)	\$1,109
All-Ceramic Crowns (per unit)	\$989

Other Treatments

Dental Services	Co-Payment
Cosmetic Consultation	No Charge
Emergency Exam	No Charge
Sealants (per tooth)	\$24
Nightguard	\$450

Complete This Form to Begin Coverage Today!

First Name _____
 Last Name _____
 Middle Initial _____ Female / Male
 Home Address _____

City _____ State _____ Zip _____
 Phone _____
 Email _____

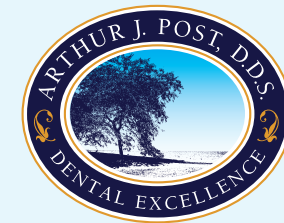
Date of Birth ____/____/____
 Spouse First Name _____
 Last Name _____
 Middle Initial _____ Female / Male

Date of Birth ____/____/____
 Enrollment Period _____ to _____
 Signature (member & spouse)

_____ Date _____
 _____ Date _____

American Express / Discover / Mastercard / Visa
 Card Number _____
 Expiration Date _____

Make your check or money order payable to Arthur J. Post, DDS Dental Excellence.



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Patients agree that Arthur J. Post, DDS Dental Excellence fees stated must be paid at the time services are rendered. Any service not paid for at the time of service will be billed at usual & customary fees. Coverage fees are valid only when paid at the time of enrollment. All family members must reside in the same household. This is not an insurance product. Membership renews annually on the day & month of initial enrollment. Membership renews automatically unless member formally requests otherwise in advance.