

Now Welcoming New Patients

Our Dental Savings Plan is designed to provide greater access to quality dental care at an affordable price. We provide discounts on our fee schedule which means you save on routine cleanings, needed care, and elective treatments!



Ask Our Team How to Sign Up!



Benefits of a Dental Savings Plan



- * No yearly maximums
- * No deductibles
- * No claim forms
- * No activation fee
- * No pre-authorizations
- * No pre-existing condition limitations
- * No one will be denied coverage
- * No waiting periods
- * Free consultation



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Dr. April R. Davis



Dental Savings Plan



Program Guidelines, Exclusions, and Limitations

The Gracious Smiles Dental Savings plan is only valid at Gracious Smiles Aesthetic General Dentistry.

The Gracious Smiles Dental Savings plan is a discount plan that is only available to patients with no dental insurance; Cannot be combined or used:

With insurance plans, third-party financing plans such as Care Credit, or any other discounts.

For treatment which, in the sole discretion of our doctor, lies outside the scope of her capability

For referral to specialists

For hospitalization or hospital charges of any kind

For costs of dental care that are covered by automobile or medical insurance

For services of injuries covered under worker's compensation

**Needed x-rays are determined by your dentist at time of exam.

***Once every 3-5 years as determined by your dentist at the time of exam.

Your first year includes the comprehensive baseline exam and a periodic exam 6 months later. Each subsequent year allows for two periodic exams, contingent on regular attendance. We will also take a complete set of x-rays that first time to get the most accurate picture of your current oral health. We will take check up x-rays, as determined necessary by your dentist.

Savings Plan fees must be paid in full at the time of enrollment. Plan will run on a benefit year determined by the date of enrollment.

Savings Plan fees are non-transferrable, non-refundable, even if the plan or any services listed in the plan are unused by the participant in the given benefit year.

Individual and Family Plans

Starting at less than \$35/month per member paid annually

FAMILY PLAN (FOR IMMEDIATE FAMILY MEMBERS- PARENTS AND CHILDREN UP TO AGE 24)



INDIVIDUAL PLAN: ANNUAL COST \$399.00

FAMILY PLAN: STARTS AT \$645.00

Annual cost:

\$645 for 2 family members

\$795 for 3 family members

\$935 for 4 family members

\$110 each additional family after 5 or more

- Preventive Prophylaxis (Professional Cleaning)
- (2/yr in the absence of periodontal disease/ infection)
- Doctor exams (1-2/yr): first year-one comprehensive exam and one periodic exam, after first year: two periodic exams/yr
- Needed x-rays**
- One emergency Exam per year (if needed)
- 2 Fluoride treatments
- 15% off all other treatments listed(some exclusions apply)

15% off our established fees applies to the following services:

- Fillings
- Crowns
- Root canals
- Extractions
- Periodontal Therapy (SRP: D4341, D4342, D4910)
- Night Guards

Child: D1120, D0120, D0145, D1206, D0140, D0220, D0330***
 Adult: D1110, D0120, D0274, D0140, D0220, D0210***, D0330***