



# WILLIAMS FAMILY DENTAL

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## Coverage Table

### Diagnostic and X-Rays

<i>Treatment</i>	<i>Discount</i>
Comprehensive Exam (new patient, initial visit)	100%
Periodic Exam (2 per year)	100%
Limited Oral Exam, Problem Focused (1 per year)	100%
Intra-oral - Complete Series or Panorex ( 1 every 3 years)	100%
Intra-oral - Periapical First Film	
Intra-oral - Periapical Each Additional Film	100%
Intra-oral - Occlusal Film	100%
Bitewings (1 per year)	100%

### Preventative Care

<i>Treatment</i>	<i>Discount</i>
Child Prophylaxis (cleaning) (2 per year/after \$10 co-pay)	100%
Adult Prophylaxis (cleaning) (2 per year/after \$10 co-pay)	100%
Topical Flouride (2 per year/after \$10 co-pay)	100%
Sealants	50%
Space Maintainers	50%
Bleach for Life (ask for details)	100%

### All Other Procedures

<i>Treatment</i>	<i>Discount</i>
Bleaching	20%
Fillings	20%
Crowns	20%
Periodontics	20%
Dentures and Partial	20%
Implants	20%
Oral Surgery	20%
Root Canals	20%
Orthodontics* Adult 16+	
(Full Brackets & molar bands, upper and lower arches) or Invisalign. \$600 Off	

\*For orthodontics: Member must remain a plan member for the duration of treatment to retain discount plan benefits.