

## Membership Program Fee Comparison

In an effort to make quality dentistry more accessible to our patients, we are pleased to introduce The New Day Dentistry Membership Program. The Fee Schedules below compare some of the most common procedures we perform in our office. It is not intended as a quote.

<u>Code</u>	<u>Description</u>	<u>Standard Fee</u>	NDD Membership Program Fee	<u>Savings</u>
D0120	Periodic Exam (Twice Per Year)	\$63	Two Exams Included Per Year (\$44)	\$126
D0140	Limited or Emergency Exam	\$87	Two Exams Included Per Year (\$57)	\$174
D0210	Full Mouth X-rays (Recommended Every 3 years)	\$152	\$107.00	\$45
D0220	Single Film X-ray (1 Image)	\$33	Included as Needed (\$22)	\$33 Per Film
D0274	Bitewing (Annual) X-rays (4 Images)	\$75	One Set Included Per Year (\$49)	\$75
D1110	Adult Prophylaxis (Standard Cleaning)	\$107	Two Hygiene Visits Included Per Year (\$81)	\$214
D1120	Child Prophylaxis (Standard Cleaning)	\$79	Two Hygiene Visits Included Per Year (\$60)	\$158
D1206	Topical Fluoride Varnish	\$49	\$29 for adults; Included 1x Per Year Kids Under 12	\$49 / \$20
D2331	Two-Surface Anterior Composite Filling	\$252	\$189.00	\$63
D2393	Three-Surface Posterior Composite Filling	\$309	\$246.00	\$63
D2740	Crown - Natural Tooth (Porcelain)	\$1,345	\$1,120.00	\$225
D2950	Core Build Up	\$293	\$205.00	\$88
D3330	Root Canal Therapy - Molar Tooth	\$1,192	\$998.00	\$194
D4341	Periodontal Deep Cleaning 4+ Teeth PER Quadrar	nt \$282	\$232.00	\$60
D4910	Periodontal Maintenance, Per Visit	\$163	Two Hygiene Visits Included Per Year (\$115)	\$326
D5110/D5120	Complete Denture -Upper OR Lower (Per Arch)	\$1,803	\$1,507.00	\$296
D5213/D5214	Partial Denture - Upper OR Lower (Per Arch)	\$1,893	\$1,597.00	\$296
D6010	Placement of Surgical Implant	\$2,266	\$1,847.00	\$419
D6057	Custom Abutment (Implant Attachment)	\$927	\$765.00	\$162
D6058	Abutment Supported Porcelain Crown (Implant)	\$1,677	\$1,340.00	\$337
D6740	Porcelain Abutment (Single Unit of a Bridge)	\$1,345	\$1,120.00	\$225
D7210	Surgical Extraction (Erupted Tooth)	\$317	\$244.00	\$73

\* Please Note: procedure codes may vary based on materials used, difficulty of treatment, surfaces involved, location and tooth. This is an example and may not reflect your specific treatment needs. A customized treatment plan will be prepared for you upon completion of your evaluation.