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Kristoff Family Dentistry



***Announcing an in-house
dental plan for patients
without Dental Insurance from
Kristoff Family Dentistry***

Benefits to the in-house plan include

- Two Cleanings Per Year
- Discounted Dental Fees
- No Annual Maximum
- No Deductible
- No Pre-Authorization
- No Wondering What Insurance Will Pay Toward Your Treatment
- No Waiting Periods
- Cosmetic Dentistry Included
- Additional Perio Plan Available

Terms and Limitations of the Plan

- This is a dental discount plan and is NOT dental insurance. It cannot be combined with any other dental insurance.
- It is good only for Kristoff & Associates Family Dentistry. Therefore, if you are referred to a Specialist, they will NOT offer this discount.
- Not valid for treatment where an accident or disability or Workman's Compensation are involved requiring outside medical treatment or care.
- This plan is NON-Transferable. Family members cannot be substitutes in for another family member.
- One year constitutes 12 months of benefits
- It is NON-Refundable. No refunds given if patient chooses not to use their dental plan.
- Rates are subject to change annually.
- 20% Discount Treatment on services only.
- Payments for services are due at time of service. If you choose to extend your payment for treatment by paying through CareCredit®, the discount is reduced by 10% due to merchant fees.
- This offer cannot be combined with any other offers.
- For Invisalign or Clear Correct Orthodontics, participant must remain a plan participant the entire duration of treatment.

In-House Dental Plan

For our Patients without insurance, we are excited to offer the following in-house plans

Examination	Preventative	Other Procedures
New Patient Comprehensive Exam..... 100%	Adult Cleaning (two/year)..... 100%	20% Off Services On The Following:
Periodic Exam (two/year) 100%	Child Cleaning (two/year) 100%	Fillings
Limited Exam (emergency-one/year)..... 100%	Fluoride (two/year) 100%	Crowns, Bridges, Root Canals, Extractions
Radiographs..... 100%	Sealants 50%	Dentures & Partials
Full Mouth X-Rays (one/3yrs) 100%	Space Maintainers 50%	Implants
Bitewings (one/year) 100%		Nitrous Oxide
Periapical (First film + 2 add'l/year)..... 100%		Cosmetic Dentistry
Pano (one/3 years) 100%		Invisalign\$500. ⁰⁰ Off

YEARLY MEMBERSHIP DUES:

First Family Member \$450. ⁰⁰	Each Additional Family Member.....\$300. ⁰⁰
Second Family Member..... \$350. ⁰⁰	*Additional Optional Perio Plan (Per Member)\$300. ⁰⁰

Note: All Family members must live in the same household.

There's no ID Card, no Group or Member number to bring. All of your membership information will be kept in your electronic record. Your effective date is the day you sign up and your renewal date is the same date every year.

*Contact us for details