

## SAVINGS COMPARISON

1 <sup>st</sup> Visit	Estimated Cost*	With Preventive Membership
Cleaning	\$97	All included for \$299
X-Rays	\$313	
Exam	\$99	
2 <sup>nd</sup> Visit		
Cleaning	\$97	
Periodic Exam	\$56	
<b>TOTAL:</b>	<b>\$662</b>	<b>\$299</b>

Total Savings: \$363

Procedure	Estimated Cost*	With Membership	Savings
Filling	\$388	\$291	\$97
Crown	\$1639	\$1230	\$409
Root Canal	\$1153	\$865	\$288
Veneer	\$1282	\$962	\$320
Emergency Visit	\$145	\$0	\$145

\* Please note: Prices vary based on individual dental needs.

### Cross Timbers Dental

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FrontDesk@CrossTimbersDental.Com



## Membership Discount Plan

**NO INSURANCE,  
NO WORRIES**



### Who Is It for?

**Our in-house membership plan is an alternative option for our patients who don't have dental insurance.**

#### *Important Things to Know:*

- *Membership is not dental insurance and can only be utilized at Cross Timbers Dental.*
- *Memberships are non-transferable and cannot be used in combination with dental insurance.*

# Membership Plans

## WHAT'S INCLUDED

Two cleanings per year

All Digital X-rays

All Exams

All Other Dental Care\*

\*Select services excluded, see office for details

URGENT CARE	PREVENTIVE CARE
<b>\$199</b> year/person	<b>\$299</b> year/person
<b>\$73 Each</b>	<b>\$0</b>
<b>\$0</b>	<b>\$0</b>
<b>\$0</b>	<b>\$0</b>
<b>25% Discount</b>	<b>25% Discount</b>

## ENROLLMENT INFORMATION

- No deductible
- No yearly maximum
- No pre-existing condition exclusions
- Membership fee due in full at time of enrollment.
- Membership is effective immediately once payment is received.
- Payment due when services are rendered.
- No refunds for benefits not used.
- Invisalign, retail products and IV sedation are not included with the membership plan.