

## Member Fee Schedule

This fee schedule is **exclusive** to services provided by Appalachian Dental Associates, Asheville dental office participating in **Bright Smile Club** ("Plan"). "Member Pays" is defined as the dollar amount that Plan members in good standing pay for dental services rendered by a participating dental provider. Unless otherwise specified in this fee schedule, plan discounts do not apply to services performed by a dental specialist (i.e., periodontics, endodontics, orthodontics, and oral surgery) or dental hygiene products (e.g., chlorhexidine, toothbrushes, etc.). Member savings and plan incentives are exclusive to participating dental offices. Exact member savings and availability of certain procedures may vary by location.

Procedure Description	Member Pays
<b>Preventive &amp; Diagnostic</b>	
Any Two (2) Exams per year	No Charge
X-Rays (bitewings & PAs)	No Charge
Adult Cleanings (D1110)	\$93
Child Cleanings (D1120)	\$68
Fluoride (D1208)	\$40
Sealant - Per Tooth (D1351)	\$54
<b>Basic Restorative</b>	
Composite Filling - One Surface, Anterior (D2330)	\$173
Composite Filling - Three Surface, Anterior (D2332)	\$254
Composite Filling - Four + Surface, Anterior (D2335)	\$323
Composite Filling - One Surface, Posterior (D2391)	\$185
Composite Filling - Two Surface, Posterior (D2392)	\$236
Composite Filling - Three Surface, Posterior (D2393)	\$288
Crown - Porcelain/Ceramic (D2740)	\$1,139
Crown - Recementation (D2920)	\$125
Core Buildup (D2950)	\$275
<b>Periodontics</b>	
Perio Scaling/Root Planing per quad (D4341)	\$260
Periodontal Maintenance (D4910)	\$139
<b>Specialty</b>	

Root Canal - Molar (D3330)	\$1,058
Simple Extraction (D7140)	\$200
Surgical Extraction (D7210)	\$289
<b>25% OFF OTHER SELECT SERVICES, SEE YOUR DENTAL OFFICE FOR COMPLETE LIST OF SAVINGS</b>	

**Dental membership plan(s) described herein are NOT INSURANCE.** Plan members pay periodic membership fees in exchange for access to discounts on certain identified dental services rendered by participating providers in accordance with the plan fee schedule. Plan members are obligated to pay dental providers directly for services rendered. Plan details, retail fees and member savings may vary by plan, provider and/or dental office location, please see specific plan terms and conditions for details. Dental membership plans are not qualified health plans under the Affordable Care Act, and do not meet the minimum creditable coverage requirements under M.G.L.c. 111M and 956 CMR 5.00. Dental membership plan administered by Membersy LLC, a discount medical plan operator; with the exception of dental membership plans offered to consumers in the State of California, which are administered by The CDI Group, Inc., a licensed discount specialized health care plan. Mailing Address: P.O. Box 163990, Austin, TX 78716-3990. Membersy and The CDI Group do not make payments to dental providers for services rendered to plan members. Dental membership plan(s) described herein are not affiliated with or endorsed by any state insurance department. To obtain additional information about dental membership plans, please call (877) 545-4188 or email questions to [hello@membersy.com](mailto:hello@membersy.com).