

Terms & Conditions

The discounts associated with the Wheat State Private Dental Plan are available only through Wheat State Dental, LLC.

Monthly membership fees are to be paid for a minimum twelve (12) month period and are non-refundable. Unless waived by the dentist, membership will automatically renew on the anniversary date and continue thereafter until cancelled, in writing.

Qualified dependents are defined as a husband, wife, and any non-married children under age 22, living in the household. Any additional dependents after four (4) each will have an additional surcharge of \$24 per month per dependent.

Fees and plan discounts are subject to change without notice.

Missed or broken appointments without 24-hour notice will be charged \$50.

All member co-payments are due at time of service.

Membership in the Dental Plan may be terminated for abuse and/or failure to pay membership fees or properly billed service.

Wheat State Private Dental Plan is administered solely by the dental office and may be discontinued at the end of any month, with or without notice.

By accepting the Dental Plan, an associate will perform a comprehensive oral exam and members agree to follow prescribed maintenance program.

Wheat State Private Dental Plan benefits are limited to \$1250 per each covered family member per year.

Dental plan benefits are not applicable until three (3) months after the initial date of acceptance except for Type I services.

Prophylaxis is limited to twice (2) every calendar year per member. A difficult prophylaxis is considered periodontal service.

Fluoride treatments are limited to twice (2) every calendar year per member.

Denture relines are limited to once per calendar year.

Terms & Conditions (continued)

A denture, bridge or other appliance installed under the Wheat State Private Dental Plan can be replaced only once during the period of five (5) years after the original installation. A denture, bridge or other appliance can be replaced only if it is unsatisfactory and which cannot be made satisfactory by a repair.

All covered replacements are subject to the co-payment percentages as listed in the Schedule of Services and the private fee schedule of Wheat State Dental, LLC.

Any dental procedure in progress or performed before or after a member's eligibility period is excluded.

Any dental expense incurred if the dentist is unable to perform a procedure due to the member's general health or physical condition is excluded.

Replacement of a satisfactory filling is excluded.

Bleaching of teeth for cosmetic purposes is excluded.

Replacement of lost or stolen dentures, partials, or bridgework is excluded.

Any dental services provided to the member by state, county, or municipal agencies or dental services provided without cost to the member are excluded.

Treatment to correct congenital, developmental, or medically induced dental disorders is excluded (i.e. TMJ).

Any dental procedure not listed as a covered service, including but not limited to, anesthesia, emergency office visits, prescription medications, etc. is excluded.

Treatment required due to hospital and medical charges or self-inflicted wounds of any kind is excluded.

Dental Plan benefits for services provided in association with benefits from another source (i.e. workman's compensation) are excluded. Coordination of Wheat State Private Dental Plan benefits with other dental or insurance plans is excluded.

913-782-0674

www.wheatstatedental.com

11150 Pflumm Rd., Suite 100 Lenexa, KS 66215

Affordable Dental Coverage For You & Your Family

Available Exclusively from



Premium Plus Private Dental Plan

No Claim Forms
No Deductibles
No Pre-Determinations
No Waiting Periods

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No

Claim Forms
Deductibles
Pre-Determinations
Waiting Periods

Benefit Features

Coverage

Oral Exams – 2 per year	100% Coverage
Cleanings – 2 per year	100% Coverage
X-Rays – Full Mouth	100% Coverage
X-Rays – Bite Wing	100% Coverage
Fluoride Varnish	100% Coverage
Periodontal Maintenance	50% Coverage
Crown & Bridge Services	50% Coverage
Endodontic Services	40% Coverage
Dentures & Partial	25% Coverage
Composite Fillings	20% Coverage
Implant Services	15% Coverage

Full Cosmetic Case - 10% Discount

*“Whitening For Life” available for \$199.
Ask us for Details.*

*Note: Specialist Services discounts are
available; ask us for specifics.*

Single	\$48/month
Couple	\$78/month
Family	\$118/month

How Does it Work?

The Premium Plus plan works similar to many insurance plans on the market. You pay a monthly membership fee for discounts on your dental expenses. The plan is designed to cover preventive services such as cleanings and oral exams. This provides coverage that can be budgeted at an affordable monthly expense while receiving excellent discounts for your higher cost dental service.

Wheat State Dental administers the Plan and works with you, the patient directly, to make all dental service decisions. There is no need to contact a 3rd party company for information. All questions regarding plan coverage, verifying benefits, changing coverage types, or any other questions should be directed to us here at Wheat State Dental.

Dr. Rosel or Dr. Bahr may refer a patient to a specialist that participates in the Wheat State Private Dental Plan. Members must verify the specialist's participation in the Network prior to accepting treatment. Your dentist will have a complete listing of participating specialists.

For more information, go to:
www.wheatstatedental.com
or call:
913-782-0674

Why the Program Works

If asked, most people would agree that decisions about dentistry are best made between the patient and their dentist, without a third-party company's involvement.

The Wheat State Premium Plus Private Dental Plan is different! It has been designed to provide you and your family with affordable preventive dental coverage, your dentist owns and administers.

Not only does the Premium Plus plan provide outstanding coverage on preventive dentistry, the plan offers excellent coverage on major dental procedures like crowns, root canals, and bridges.

Since your Premium Plus plan is not administered by a third party insurance company, all the decisions regarding your dental treatment may be decided by you and your dentist – Dr. Paul Rosel and Dr. Connor Bahr, without the need for claim forms, approvals, deductibles or waiting periods.

