VantageOne

member fee schedule

This member fee schedule is exclusive to dental services provided by VantageOne Dental Savings Plan participating locations. Member savings is defined as the amount members pay for dental services rendered less their participating location's normal retail fees typically charged to self-pay patients. Frequency limitations for free services may apply (Premium and Premium Plus). Any dental services not listed on this fee schedule will be discounted 20-50% from the participating location's retail fees.

Questions? Please contact your participating dental office directly or call (877) 545-4188 to speak with a dedicated member support specialist.

PROCEDURE DESCRIPTION	CLASSIC SAVINGS	PREMIUM SAVINGS	PREMIUM PLUS
D0120 - Periodic Oral Exam	50%	No Charge (2x)	No Charge (2x)
D0140 - Limited Exam	50%	50%	No Charge (2x)
D0150 - Comprehensive Exam	50%	50%	No Charge (2x)
D0210 - Full Mouth X-Rays	50%	No Charge (2x)	No Charge (2x)
D0220 - Intraoral X-Rays	50%	No Charge (2x)	No Charge (2x)
D0230 - Intraoral X-Rays (each additional)	50%	No Charge (2x)	No Charge (2x)
D0270 - Bitewings - 1 Image	50%	No Charge (2x)	No Charge (2x)
D0272 - Bitewings - 2 Images	50%	No Charge (2x)	No Charge (2x)
D0274 - Bitewings - 4 Images	50%	No Charge (2x)	No Charge (2x)
D0330 - Panoramic X-Rays	50%	No Charge (2x)	No Charge (2x)
D0431 - Oral Cancer Screening	20%	20%	No Charge (1x)
D1110 - Basic Cleaning - Adult	50%	No Charge (1x)	No Charge (2x)
D1120 - Basic Cleaning - Child	50%	No Charge (1x)	No Charge (2x)
D1206 - Fluoride - With Varnish	50%	50%	50%
D2330 - Filling - 1 Surface - Anterior	20%	20%	20%
D2331 - Filling - 2 Surfaces - Anterior	20%	20%	20%
D2332 - Filling - 3 Surfaces - Anterior	20%	20%	20%
D2335 - Filling - 4 Surfaces - Anterior	20%	20%	20%
D2391 - Filling - 1 Surface - Posterior	20%	20%	20%
D2392 - Filling - 2 Surfaces - Posterior	20%	20%	20%
D2393 - Filling - 3 Surfaces - Posterior	20%	20%	20%
D2394 - Filling - 4 Surfaces - Posterior	20%	20%	20%
D2740 - Crown - Porcelain/Ceramic	20%	20%	20%
D3320 - Root Canal - Bicuspid	20%	20%	20%
D3330 - Root Canal - Molar	20%	20%	20%
D4341 - Perio Scaling & Root Planing - 4+ Teeth (per quad)	20%	20%	20%
D4910 - Periodontal Maintenance	20%	20%	20%
D7140 - Simple Extraction	20%	20%	20%
D7210 - Surgical Extraction	20%	20%	20%
D8020 - Limited Orthodontics - Adult/Child	20%	20%	20%
D8080 - Comprehensive Orthodontics - Adult/Child	20%	20%	20%
D9972 - Whitening - Full Mouth	20%	20%	20%

VantageOne Dental Savings Plan is NOT INSURANCE, but rather a licensed dental savings plan offered through your local dental office. Members in good standing with their annual membership fee are eligible to receive transparent, member-only discounts from the normal retail fees that participating offices typically charge self-pay patients for dental services rendered. Plan details and member savings are exclusive to participating offices and may vary by location. The plan is not a qualified health plan under the Affordable Health Act. The plan does not meet the minimum creditable coverage requirements under MGLC.111M and 956 CMR 5.00. Discount Medical Plan Organization "DMPO" and plan administrator: Membersy LLC, 811 Barton Springs. Suite 750, Austin, TX 78704. VODSP-FEES-GEN