



Greenberg Dental Discount Program

Sign up today and use your benefits today!

Individual and Family Plans

Individual Rate \$89/year

Family Rate \$139/year

Discounts on General and Specialty Fee Services are included. Specialty Services not available in all locations.

Over 70 Locations To Serve You In Florida

For a FULL list visit our website: www.GreenbergDental.com



No Dental Insurance? No Problem!

Free Initial Exam and X-rays When You Sign Up Today!



- **Orthodontics Included**
For adults and children
- **No Limit On Visits Or Services**
Visit the dentist as many times as you need
- **No Deductible**
You know your price before you go
- **No Claim Forms**
No insurance forms
- **No Waiting Period**
Sign up today and use your benefits today

All the dental specialists your family needs, all in one place

Greenberg Dental & Orthodontics is pleased to offer you a simple dental discount program. If you don't have dental insurance, or your insurance doesn't cover a service you need, our discount program is for you. Membership in the Dental Discount Program offered by Greenberg Dental & Orthodontics is accepted at all Greenberg Dental & Orthodontics offices and provides discounts for a full range of general and specialty services.

As a member of the Dental Discount Program offered by Greenberg Dental & Orthodontics, you'll save between 20%–80% off our traditional fees. We make it easy and affordable for you to take care of your dental health by providing you with significant discounts on dental exams and major dental work.

Dental Discount Program offered by Greenberg Dental & Orthodontics is NOT INSURANCE and is valid only at Greenberg Dental & Orthodontics (Greenberg) offices. Members pay Greenberg at the time of service. This discount dental program may be duplicative of your dental insurance. Dental Discount Program offered by Greenberg Dental & Orthodontics cannot be combined with any other dental or medical insurance program and does not coordinate benefits with any other dental or medical insurance program. Membership benefits are limited to the discounted fees as itemized in the Schedule of Fees provided to you. Specialty services may not be available in all areas.

General Dentistry Fee Schedule

CDT Code	Description	Member Co-Pay	Prevailing Fee*	% Savings	CDT Code	Description	Member Co-Pay	Prevailing Fee*	% Savings
Appointments - Diagnostic					Endodontics - Root Canals				
D0120	Periodic oral exam	\$30	\$60	50%	D3310	Root Canal - Front Tooth (Anterior)	\$500	\$834	40%
D0140	Limited oral exam	\$30	\$101	70%	D3320	Root Canal - Middle Tooth (Bicuspid)	\$600	\$1,022	41%
D0150	Comprehensive oral exam	\$40	\$106	62%	D3330	Root Canal - Back Tooth (Molar)	\$700	\$1,267	45%
Radiographs - X-rays					Prosthodontics - Dentures & Partials				
D0220	Intraoral - periapical	\$12	\$34	65%	D5110	Upper denture	\$900	\$1,826	51%
D0272	Bitewing - two films	\$26	\$55	53%	D5120	Lower denture	\$900	\$1,826	51%
D0274	Bitewing - four films	\$26	\$78	67%	D5211	Upper partial - resin (plastic) base	\$650	\$1,541	58%
D0330	Panoramic film (includes bitewings)	\$60	\$134	55%	D5212	Lower partial - resin (plastic) base	\$650	\$1,791	64%
Preventive					D5213	Upper partial - cast metal base w/resin saddles	\$950	\$2,018	53%
D1110	Prophylaxis (cleaning)	\$54	\$109	50%	D5214	Lower partial - cast metal base w/resin saddles	\$950	\$2,018	53%
D1120	Prophylaxis - child	\$30	\$76	61%	Prosthodontics - Fixed - Bridge Pontics				
D1208	Topical application of fluoride - child	\$14	\$42	67%	D6241	Pontic - porcelain fused to base metal	\$590	\$1,202	51%
D1351	Sealant - per tooth	\$25	\$64	61%	D6245	Pontic - porcelain/ceramic	\$690	\$1,343	49%
Restorative Fillings					D6751	Crown - porcelain fused to base metal	\$590	\$1,186	50%
D2330	White - anterior one surface	\$70	\$183	62%	D6740	Retainer - porcelain/ceramic	\$690	\$1,371	50%
D2331	White - anterior two surfaces	\$86	\$233	63%	Oral Surgery - Extractions				
D2332	White - anterior three surfaces	\$100	\$285	65%	D7140	Extraction, erupted tooth or exposed root	\$100	\$205	51%
D2391	White - one surface posterior	\$105	\$214	51%	D7210	Surgical extraction - erupted tooth	\$140	\$303	54%
D2392	White - two surfaces posterior	\$125	\$280	55%	D7510	Incision and drainage of abscess - intraoral	\$110	\$405	73%
D2393	White - three surfaces posterior	\$160	\$348	54%	Periodontics - Gum Treatment				
Crown - Single Restorations					D4341	Periodontal scaling & root planing - per quadrant	\$130	\$286	55%
D2740	Crown - porcelain/ceramic substrate (metal-free)	\$690	\$1,397	51%	D4355	Full mouth debridement	\$70	\$196	64%
D2751	Crown - porcelain fused to base metal	\$590	\$1,283	54%	Adjunctive - General Services				
D2950	Core buildup	\$120	\$319	62%	D9972	Bleaching - per arch	\$198	\$413	52%
D2954	Prefabricated post and core in addition to crown	\$170	\$403	58%					

Rates are subject to periodic change without prior notification. This fee schedule only applies to procedures performed by General Dentists. Non-listed procedures are provided to all members at 25% off the dentists' prevailing fee. *Greenberg Dental traditional fee 2021.

Specialty Fee Schedule

CDT Code	Description	Member Co-Pay	Prevailing Fee*	% Savings	CDT Code	Description	Member Co-Pay	Prevailing Fee*	% Savings
Periodontist - Gum Treatment Specialist					Endodontist - Root Canal Specialist				
D0180	Periodontal exam (applied towards treatment)	\$46	\$151	70%	D0140	Limited Oral Exam (applied towards treatment)	\$30	\$101	70%
D0210	Full Mouth Series of X-rays (including BW's)	\$70	\$169	59%	D2950	Crown Buildup	\$120	\$319	62%
D4249	Clinical crown lengthening - hard tissue	\$906	\$1,295	58%	D3310	Root Canal - Front tooth (Anterior)	\$750	\$1,020	26%
D4260	Osseous Surgery 4 contiguous teeth	\$1,378	\$1,968	60%	D3320	Root Canal - Middle tooth (bicuspid)	\$850	\$1,198	29%
D4261	Osseous Surgery 1-3 contiguous teeth	\$740	\$1,056	60%	D3330	Root Canal - Back Tooth (Molar)	\$950	\$1,345	29%
D4273	Subepithelial connective tissue graft-per tooth	\$1,197	\$1,709	60%	Oral Surgeon - Extractions - Specialist				
D4341	Perio scale & root planing 4/more teeth/quad	\$214	\$306	35%	D0140	Limited Oral Exam (applied towards treatment)	\$30	\$101	70%
D4342	Perio scale & root planing 1-3 teeth/quad	\$146	\$177	23%	D7210	Surgical extraction - erupted tooth	\$216	\$334	35%
D4910	Periodontal maintenance after therapy	\$132	\$189	42%	D7220-D7240	Removal of Impacted Tooth	\$300	\$654	54%
Pedodontist - Children's Specialist					D9239	IV Moderate Sedation	\$300	\$800	63%
D0140	Limited Oral Exam (applied towards treatment)	\$30	\$101	70%	Orthodontist - Braces - Specialist (auto debit required)				
D0272	Bitewing - two films	\$26	\$55	53%	D8660	Orthodontic Exam	FREE	\$400	100%
D0330	Panoramic film	\$50	\$134	63%	D8080	Comprehensive Ortho Treatment-Child (24 months)	\$3,995	\$5,230	24%
D1120	Child Cleaning - Prophylaxis	\$36	\$76	53%	D8090	Comprehensive Ortho Treatment-Adult (24 months)	\$4,195	\$5,300	21%
D1208	Topical application of fluoride	\$18	\$42	57%	Specialty Services Pediatrics <i>Children's Specialist</i> Oral Surgery <i>Including Implants</i> Endodontics <i>Root Canals</i> Periodontics <i>Gum Disease</i> Prosthodontics <i>Dentures, Partials</i>				
D1351	Sealant per tooth	\$32	\$64	50%					
D1510	Space maintainer - fixed - unilateral	\$186	\$395	53%					
D2330	White - anterior one surface	\$105	\$183	43%					
D2331	White - anterior two surfaces	\$125	\$233	46%					
D2332	White - anterior three surfaces	\$160	\$285	44%					
D2391	White - one surface posterior	\$105	\$214	51%					
D2392	White - two surfaces posterior	\$125	\$280	55%					
D2393	White - three surfaces posterior	\$160	\$348	54%					
D2930	Stainless steel, primary	\$140	\$366	62%					
D2931	Stainless steel, permanent	\$160	\$378	58%					
D2929	Prefab Porc/Ceramic Crown-Primary tooth	\$290	\$485	40%					
D2940	Sedative filling	\$40	\$128	69%					
D3220	Therapeutic pulpotomy (excl. restoration)	\$128	\$262	51%					
D7140	Extraction, erupted primary tooth or exposed root	\$100	\$221	55%					
D9230	Nitrous Oxide Sedation	\$60	\$86	30%					

All Specialty services are NOT listed; only the most common procedures are listed. Non-listed procedures are provided to all members at 25% off the dentists' prevailing fee. Specialty services may not be available in all areas. *Greenberg Dental traditional fee 2021. Version 03.05.21