



CONTACT INFORMATION

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D 5		
Premiere and Advantage Dentists		
	In-Network	Out-Of-Network
Class I Preventative	100%	80% MAC
Class II Basic	80%	60% MAC
Class III Major	50%	50% MAC
Class IV Orthodontics	Up to 25%	None
Annual Maximum	\$1,200.00	
Specialists	Same as General Dentist	
Endodontics Periodontics	Class III	
Deductible	\$100.00 Lifetime PP	
Waiting Periods	Waived- First chance to sign 12 months Late Entrant	
Employee	\$27.70	
2 Party	\$63.70	
Family	\$110.20	

D 2		
Advantage Dentists		
	In-Network	
Class I Preventative	100% after \$25 copay	
Class II Basic	Approx. 75%	
Class III Major	Approx. 40%	
Class IV Orthodontics	Up to 25% Discount	
Annual Maximum	Unlimited	
Specialists	20% Discount	
Endodontics Periodontics	Based Upon Fee schedule	
Deductible	None	
Waiting Periods	None	None
Employee	\$19.80	
2 Party	\$45.80	
Family	\$71.40	

D 3		
Premiere Dentists		
	In-Network	
Class I Preventative	100%	
Class II Basic	Based Upon Fee schedule	
Class III Major	Based Upon Fee schedule	
Class IV Orthodontics	15% - 25% Discount	
Annual Maximum	Unlimited	
Specialists	Same as General Dentist	
Endodontics Periodontics	Based Upon Fee schedule	
Deductible	None	
Waiting Periods	None	None
Employee	\$14.50	
2 Party	\$29.10	
Family	\$48.10	

D 4		
Value Dentists		
	In-Network	
Class I Preventative	Based Upon Fee schedule	
Class II Basic	Based Upon Fee schedule	
Class III Major	Based Upon Fee schedule	
Class IV Orthodontics	15% - 25% Discount	
Annual Maximum	Unlimited	
Specialists	20% Discount	
Endodontics Periodontics	Based Upon Fee schedule	
Deductible	None	
Waiting Periods	None	None
Employee	\$3.00	
2 Party	\$6.00	
Family	\$6.00	

2010 COPAY FEE EXAMPLES		
In-Network		
2331	Porcelain filling 2 surface anterior	Class II
2394	Porcelain filling 4 surface posterior	Class II
7240	Complete boney impaction	Class III
4210	Gingivectomy (periodontics)	Class III
3330	Molar Root Canal	Class III
2750	Porcelain Crown	Class III
9430	Office Visit	Class I

2010 COPAY FEE EXAMPLES		
(Specialists are 20% Discount only)		
2331	Porcelain filling 2 surface anterior	\$40
2394	Porcelain filling 4 surface posterior	\$67
7240	Complete boney impaction	\$120
4210	Gingivectomy (periodontics)	20 %
3330	Molar Root Canal	\$305
2750	Porcelain Crown	\$315
9430	Office Visit	\$25

2010 COPAY FEE EXAMPLES		
2331	Porcelain filling 2 surface anterior	\$80
2394	Porcelain filling 4 surface posterior	\$125
7240	Complete boney impaction	\$180
4210	Gingivectomy (periodontics)	\$238
3330	Molar Root Canal	\$500
2750	Porcelain Crown	\$590
9430	Office Visit	\$ 0

2010 COPAY FEE EXAMPLES		
2331	Porcelain filling 2 surface anterior	\$65
2394	Porcelain filling 4 surface posterior	\$95
7240	Complete boney impaction	20 %
4210	Gingivectomy (periodontics)	20 %
3330	Molar Root Canal	\$350
2750	Porcelain Crown	\$420
9430	Office Visit	\$20