

Kumfer Care Discount Program 2021

What is it?

The Kumfer Care Program is designed to allow patients without insurance an opportunity to get quality dental care at a more affordable cost. This discount program is NOT dental insurance but a package for patients that choose to invest in their long-term dental health. The Kumfer Care Program covers the cost of routine preventative dental care for an entire year. Patients enrolled in the program will receive routine cleanings, exams, x-rays and fluoride, as well as discounts on other services provided at Kumfer Family Dental. Discounts even apply to Cosmetic Dental Treatment!

With the Kumfer Care Program, there are NO Waiting Periods, NO Maximums, NO Insurance Claims, NO pre-authorizations, and NO Deductibles.

What is included?

The Kumfer Care Program includes the following services and discounts:

Service	Discount
Exams (Routine or Emergency)	100% (As Needed)
Adult or Child Cleanings	100% (2 Per Year from Date of Enrollment)
Fluoride Varnish	100% (2 Per Year from Date of Enrollment)
X-Rays	100% (As Needed)
Whitening	50% Discount
Other Dental Services	25% Discount (Excluding Invisalign)

How much does it cost to enroll?

The Kumfer Care Program is \$275 per year. The average yearly cost for Exams, 2 Cleanings, 2 Fluoride Applications, and X-Rays can cost more than \$500!

Additional family members may be added to the program for \$225 per each additional member (additional members must be the spouse, domestic partner, or dependent of the initially enrolled patient).

Enrollment in the program is valid for 1 year from the enrollment date. The annual fee is due on the day of enrollment.

Are there any limitations?

- This program is a discount plan and NOT dental insurance.
- This program cannot be combined with an insurance plan or any other discounts.
- The program is non-refundable once enrolled.
- The program is not transferable.
- The program length is limited to one year from the date enrolled. Benefits and discounts of the program can only be applied during the enrollment period.
- The program must be paid in full when the patient enrolls in the program.
- Patient's portion of bill is due on the date of service. If payment is not received, further treatment may be delayed until the balance is paid in full.
- This program only applies to work performed at Kumfer Family Dental and is not transferrable to another office. The discounts, therefore, do not apply to procedures that are deemed to be beyond Kumfer Family Dental's scope of practice and/or that are referred to a specialist (oral surgeon, periodontist, endodontist, orthodontist, or prosthodontist).
- Rates are subject to change at the conclusion of each yearly enrollment.

Contact Kumfer Family Dental to enroll in the Kumfer Care Program Today!



521 East County Line Road, Suite A

Greenwood, IN 46143

(317) 887-0700

Kumfer Care Discount Program Enrollment

Name: _____ Date of Birth: _____

Social Security Number: _____ Driver's License: _____

E-mail: _____

Cell Phone: _____ Home Phone: _____

Work Phone: _____

Address: _____

Enrollment Type:

☐ Member \$275

☐ Additional Member \$225 Name: _____

Spouse/Partner ☐ Child ☐ DOB: _____ SS# _____

☐ Additional Member \$225 Name: _____

Spouse/Partner ☐ Child ☐ DOB: _____ SS# _____

☐ Additional Member \$225 Name: _____

Spouse/Partner ☐ Child ☐ DOB: _____ SS# _____

☐ CareCredit Payment +13% administrative fee

For Office Use Only

Members Enrolled: _____ Amount Pd.: _____ Payment Date: _____

Payment Method: Cash / Check / Credit (Circle One)

Pym't Rec'd By: _____

Effective Date of Kumfer Care Program: _____

Kumfer Care Benefits and Restrictions Acknowledgement

Program Benefits

- Enrollment includes 2 dental cleanings, 2 Fluoride Applications, any needed x-rays, and unlimited routine and emergency examinations. Any additional fluoride applications or dental cleanings during enrollment can be provided at a 15% discount.
- Enrollees are also eligible for a 50% discount on whitening services and a 25% discount on additional dental services (Excluding Invisalign®) at Kumfer Family Dental.

Restrictions and Limitations

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- This program cannot be combined with an insurance plan or any other discounts.
- The program is non-refundable once enrolled.
- The program is not transferable.
- The enrollment period is limited to one year from the date enrolled. Benefits and discounts of the program can only be applied during the enrollment period.
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- Rates are subject to change at the conclusion of each yearly enrollment.

By signing below, I acknowledge that I have read and understand the program benefits and limitations and agree to the terms. Program benefits are limited to only those listed.

Signature: _____ Date: _____