

Brea Family Dental Center's team of professionals focuses on building personal relationships with patients while providing attentive dental care.

Dr. Calvin Chen, a U.S.C. dentist with over twenty years of experience and his team of caring, exceptional and experienced specialists and cosmetic dentists are ready to take care of you and your dental needs.

BREA FAMILY DENTAL CENTER

KALVIN CHEN D.D.S.

BREA FAMILY
DENTAL CENTER

903. S. Brea Blvd.
Brea, CA 92821

(714) 529-3184

info@brefamilydental.com



Visit our website to view what many of our patients are saying about us!

WWW.BREAFAMILYDENTAL.COM



PREMIER DENTAL ADVANTAGE

Premier Dental Advantage offers you a flexible discount plan that is easy to implement and effortless to manage. Now you can receive the highest quality dental services at the best prices without the endless paperwork or red tape or bureaucracy often synonymous with insurance. Brea Family Dental center is the exclusive dental plan provider for members of Premier Dental Advantage.



No Preauthorized Requirements
No Yearly Maximums
No Pre-existing Condition Limitations
Immediate eligibility (no waiting periods)
No Deductible

"Dr. Chen and all Staff, just wanted to tell you how much I think of you. You are all so caring and kind; beyond anything I have seen in any other office. Thank you so much for it!"
- M. Locke -

PREMIER DENTAL — ADVANTAGE —

A Dental Assistance Saving Plan



GIVING YOU GREATER ACCESS
TO QUALITY DENTAL CARE

What is a Dental Assistance Savings Plan?

Premier Dental Advantage is designed to provide affordability and greater access to quality dental care. Your benefits are available only at Brea Family Dental Center located at 903 South Brea Boulevard, Brea, California 92821.

Benefit Premiums (Total Annual Cost)

Single	\$199.00
Dual*	\$379.00
Family**	\$689.00

* The Dual Plan is for Parent/Child or Husband/ Wife only.

** The Family Plan includes children who are enrolled full-time in college until age 23, or children who are not enrolled full-time in college until age 18.

Premier Dental Advantage Coverage Table

Treatment	Coverage Adjustments
Comprehensive Exam (New Patient, Initial Visit)	100%
Periodic Exam (2 per Year)	100%
Limited Oral Exam. Problem Focused (1 per Year)	100%
Intraoral- Complete Series or Panorex X-rays(as needed 1 in 3 years)	100%
Intraoral- Periapical Film X-rays	100%
Bitewing X-rays (1 set per year)	100%
Child Prophylaxis Routine Cleaning (2 per Year)	After \$15.00 Co-Pay
Adult Prophylaxis Routine Cleaning (2 per Year)	After \$15.00 Co-Pay
Full Mouth Debridement	25%
Periodontal Therapy/ Deep Cleaning Per Quadrant	25%
Periodontal Maintenance after Therapy	25%
Fluoride(1 per Year, No Age Limit)	After \$15.00 Co-Pay
Sealants	50%
Bleaching	25%
Fillings (Tooth Colored)	25%
Crowns & Veneers	25%
Dentures, Partials, and Fixed Bridges	25%
Oral Surgery Extractions (In House Oral Surgeon)	15%
Root Canals	25%

Premier Dental Advantage

Program Exclusions and Limitations

This program is a discount plan, NOT a dental insurance plan; therefore cannot be used:

- In conjunction with another dental plan or discount of any kind.
- For services or injuries covered under worker's compensation.
- For treatment which, in sole opinion of the treating dentist or doctor, lies outside the realm of their capability.
- For referrals to specialists.
- For hospitalization or hospital charges of any kind.
- For costs of dental care which may be covered under an automobile or medical insurance.
- This plan is only honored at Brea Family Dental Center. This discount plan is not in any way an insurance plan that can be usable at another office.

Program Guidelines

- There will be a \$50 reinstatement fee if your plan lapses beyond re-enrollment date.
- Plan runs year to date from initial purchase date.
- This program cannot be used in conjunction with another dental plan, nor discount.
- No refunds of premiums will be issued for any reason. It is the participants responsibility to utilize the plan during the coverage date and no extensions shall be given.

Easy steps to take advantage of this unique plan:

Stop by our office during regular business hours or call the office at (714) 529-3184

Print form from web page www.brefamilydental.com, or complete the attached form, along with your payment or credit card information and mail to:

BREA FAMILY DENTAL CENTER
Attn: Premier Advantage Coordinator
903 South Brea Boulevard
Brea, CA 92821

Premier Dental Advantage

APPLICATION

Print Clearly in black ink, and answer all questions or indicate "not applicable"
Referred by: _____

YOUR PROFILE

Name: _____
Address(not a P.O. Box): _____
City: _____ State: _____ Zip: _____
Home Phone Number: _____
Email Address: _____
Driver's License / ID# _____
SSN: _____ Date of Birth: ____/____/____
Work#: () _____ Cell#: () _____

YOUR SPOUSE'S PROFILE

Name: _____
Address(not a P.O. Box): _____
City: _____ State: _____ Zip: _____
Home Phone Number: _____
Email Address: _____
Driver's License / ID# _____
SSN: _____ Date of Birth: ____/____/____
Work#: () _____ Cell#: () _____

YOUR CHILDREN

1. Name: _____ Age: _____ SSN: _____
2. Name: _____ Age: _____ SSN: _____
3. Name: _____ Age: _____ SSN: _____
4. Name: _____ Age: _____ SSN: _____

X

Member Signature and Date

Please mail this completed application or bring into our office with appropriate payment (check or credit card) to:

Attention: Premier Dental Advantage Single: \$199
Brea Family Dental Center Dual: \$379
903 S. Brea Blvd., Brea, CA 92821 Family: \$689

Make checks payable to Brea Family Dental Center _____
Credit card #: _____
Authorized Signature: _____
Expiration Date: _____

Visa / Mastercard / AMEX / Discover

Thank you for taking advantage of our savings program. We are looking forward to providing you affordability and greater access to quality dental care. We gladly accept enrollment over the phone or you may mail this completed application with appropriate payment (check or credit card information).