# **ACTIVE TREATMENT PLAN**

## PREPARED FOR WENCHONG LAI ON 03/01/2021

#### Treatment plan overview:

The goal of this plan is to tackle the most critical oral health issues. The table below presents all the procedures that should be completed to fulfill the treatment.

### Treatment plan details:

Tooth / Surf	Code	Procedure	Fee	Estimated Insurance Coverage	Discount	Patient Portion
		Prio	rity: Visit 1			
3/OD	D2392	resin-based composite - two surfaces, posterior Pri Deduct Applied: \$50.00	\$212.00	\$-29.70	\$-84.00	\$98.30
15 / OL	D2392	resin-based composite - two surfaces, posterior	\$212.00	\$-74.70	\$-84.00	\$53.30
		Subtotal:	\$424.00	\$-104.40	\$-168.00	\$151.60

Treatment costs	
Fee	\$424.00
Estimated Insurance Coverage	\$-104.40
Discount	\$-168.00
Estimated Patient Portion	\$151.60

Your benefits						
Carrier	Ameritas					
Deductible	\$50.00					
Remaining	\$1,767.00					

#### Notes:

If you have dental insurance, please be aware that THIS IS AN ESTIMATE ONLY. Coverage may be different if your deductible has not been met, annual maximum has been met, or if your coverage table is lower than average.

Patient's signature:



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