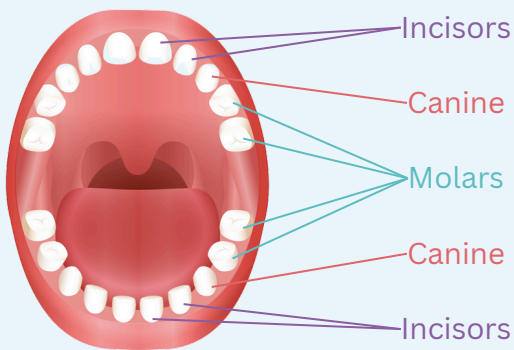


Dental Treatment in the Operating Room (0-6 yrs)



When your child has dental treatment in the operating room, the dentist will take x-rays, examine their teeth, and fix all cavities while they are asleep.

The dentist will not leave decayed teeth untreated.

MCP covers the costs of specific treatment for each type of baby tooth (Incisors, Canines, and Molars). Alternative treatment options are available, but these non-covered services must be billed to private insurance or to the family.

Incisors (eight front teeth - four upper, four lower)

- MCP covers the cost of extractions. MCP does not cover the cost of fillings or crowns.
- If these teeth are not severely decayed, they can be restored with white crowns. These crowns cost \$400 per tooth. Some of these teeth may also require nerve treatments (pulpotomies). Nerve treatment costs ~\$150 per tooth. The cost to restore the front teeth will depend on the extent of decay and may be as much as \$550 per tooth.

Canines

- MCP covers the cost of nerve treatments, white fillings, and extractions.
- If these teeth are not severely decayed, they will be restored with white fillings.
- More severely decayed canines will require either extraction or white crowns (and possibly nerve treatments). MCP covers the cost of nerve treatments. The white crowns cost \$400 per tooth.

Molars (back teeth)

- MCP covers the cost of nerve treatments, stainless steel crowns (silver-colored "caps"), and extractions.
- If these teeth are not severely decayed or infected, they will be restored with crowns (and possibly nerve treatments).
- Families can elect to restore some or all of the molars with white crowns. White crowns are not covered by MCP, and they cost \$450 per tooth.

Any tooth that is infected or too severely decayed to restore will require extraction.

If you have private insurance and you are interested in services not covered by MCP, our office can submit a pre-determination to your primary insurance. It is your responsibility to understand your plan's coverage and annual maximum.

The total out-of-pocket cost for treatment not covered by MCP is due on the day of surgery. We do not offer payment plans.

Frequently Asked Questions



Will my child need a spacer if you extract their front teeth (primary incisors)?

- No, spacers are unnecessary to maintain space following the early loss of the front baby teeth.

Will my child need a spacer if you extract their back teeth?

- Early loss of primary molars and canines can result in space loss, and spacers can reduce the likelihood of space loss and future crowding. Although they can provide a benefit, they require good oral hygiene and your child's cooperation for routine follow-up at their family dentist, which can be challenging for some younger children. Additionally, spacers are not covered by MCP. If you are interested in space maintenance, we can schedule an appointment following your child's surgery to fabricate and deliver the appliance(s). The cost of a spacer is ~\$435.

Will extracting my child's baby teeth cause issues with their speech or eating?

- There may be a brief adjustment period, but your child will quickly adjust their speech and feeding following extraction(s). There is no evidence to suggest long-term speech issues following the early loss of primary teeth.

Can you fix only one or a few of my child's teeth during surgery?

- When a child has dental treatment in the operating room, we treat all decayed and infected teeth. Our goal is to restore the function of your child's teeth and reduce the chances of future decay, pain, or infection. We will not selectively treat only some of the infected or decayed teeth.

Can you fix the back teeth with fillings instead of crowns?

- The goal of the dentists at Janeway Dental Clinic is to minimize your child's need for additional treatment for their baby teeth following surgery. The evidence from long-term studies shows that stainless steel crowns for baby molars have a 98% survival probability after seven years, whereas white fillings have less than 50%. For this reason, the best option for a child receiving dental treatment in the operating room is to have all decayed molars restored with crowns. (The white-colored crowns are relatively new, and because less long-term data is available, we cannot yet recommend them as confidently.)

What is the difference between the silver-colored crowns and the white-colored crowns?

- The primary difference is cosmetic. The silver crowns (stainless steel) and the white-colored crowns (zirconia) are both composed of metals. They both do an excellent job at restoring the form and function of the baby molars, and they both have a high probability of lasting until the baby teeth fall out. The most common failure for both types of crowns is for the crowns to come off.

When is payment due for services not covered by MCP?

- A deposit is due two days prior to surgery. After x-rays and an exam in the operating room, the dentist will finalize and complete the treatment plan. Any outstanding payment is due at that time.

When do I need to decide on the treatment options?

- Due to differences in the time required to perform the various treatments, you will be asked to decide about the treatment options three days before your child's surgery.