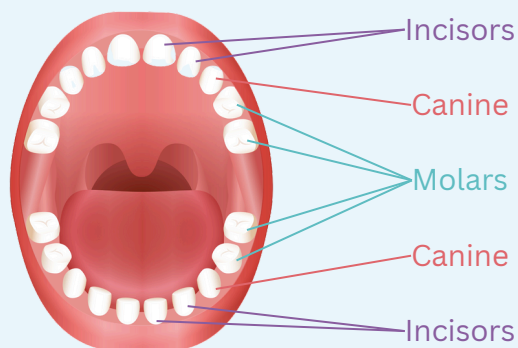


Dental Treatment in the Operating Room (7-12 yrs)



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)

- For baby teeth, MCP covers the cost of extractions. Most children lose these teeth by age 9.
- For adult teeth, MCP covers the cost of white fillings and extractions. Small to medium size cavities will be restored with white fillings. If the tooth has a large cavity or history of significant trauma root canal therapy may be required to keep the tooth. MCP may cover the cost of root canal therapy for a traumatized tooth, but MCP does not cover this cost for teeth with large cavities. If not covered by MCP, the cost of root canal therapy is ~\$910 per tooth.

Canines

- MCP covers the cost of white fillings and extractions for both baby and adult teeth.
- Most children lose their lower baby canines between the ages of 9 and 11 and their upper baby canines between the ages of 11 and 12.
- For both baby and adult canines, if the teeth are not severely decayed, we will restore them with white fillings.
- More severely decayed baby 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.
- An adult canine with a large cavity or history of significant trauma may require root canal therapy to keep the tooth. In some cases, MCP will cover the cost of root canal therapy for a traumatized tooth, but MCP does not cover this cost for teeth with large cavities. The cost of root canal therapy is ~\$910 per tooth.

Molars (back teeth)

- For baby 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 stainless steel crowns (and possibly nerve treatments). Families can elect to restore some or all of the molars with white crowns. White crowns cost \$450 per tooth.
- For adult teeth, MCP covers the cost of silver and white fillings and extractions. Small to medium size cavities will be restored with white fillings. If the tooth has a large cavity, the options are to restore the tooth with a stainless steel crown (and possible nerve treatment) or extract the tooth. MCP does not cover the cost of stainless steel crowns or nerve treatments for adult molars. The cost a crown and nerve treatment is ~\$___ per tooth.

Dental Treatment in the Operating Room (9-12 yrs)



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.

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.

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 baby molars 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, we believe the best option for a child receiving dental treatment in the operating room is to have all decayed molars restored with stainless steel 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.

Can you fix the adult molars with white fillings instead of silver fillings?

- In a few cases, we will elect to place white fillings, but we restore the majority of adult molars with amalgam fillings. More severely decayed molars may require stainless steel crowns.

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.