

Choice Group Dental Benefits

DOMINION DENTAL SERVICES, INC. ENROLLMENT CARD

- SELECT ONE:** **Select Plan**
 Access PPO Low Option
 Access PPO High Option

Enrollment Information				
Last Name		First Name		M.I.
Social Security Number		Sex <input type="checkbox"/> M <input type="checkbox"/> F	Birthdate (MM/DD/YY)	
Home Address			Home Phone	
City	State	ZIP	Work Phone	
Email Address			Hire Date	

List All Your Eligible Dependents Below					
Last name (if different)	First Name	M.I.	Sex (M/F)	Birthdate (MM/DD/YY)	
Spouse					
Child					
Child					
Child					
Child					
Child					
Child					

SELECT PLAN Provider Selection	Dental Office Name & Code # (As Indicated on Your Dentist Directory)
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If I am enrolling in the SELECT Plan and I am voluntarily paying 100% of the cost of this Plan, without employer contribution, I agree to remain in Plan a minimum of twelve (12) months. If I cancel before the end of the 12 month period, I may be responsible for the usual, customary and reasonable charges for services received, reduced by the sum of the subscription dues and copayments paid. I understand and agree that my signature on this enrollment form serves as my legal commitment to the Plan and its terms. Further, this signature represents my authorization for the release of information regarding services provided to me or my covered dependents by dentists and other providers of dental services. Information will be released to Dominion Dental Services, Inc., for the purpose of Quality Assurance and/or utilization review. Authorization will be limited to the term of coverage of this contract. A copy of this form will be made available to subscriber or their authorized representative upon request.

Signature: _____ Date: _____

Agent/Broker #	Group #	Group Name	Coverage Eff. Date
		Wilmington University	

Dominion Dental Services, Inc., P.O. Box 75314 Charlotte, NC 28275-5314

District of Columbia - WARNING: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant. **Maryland** - Any person who knowingly and willfully presents a false or fraudulent claim for payment of a loss or benefit or who knowingly and willfully presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison. **Pennsylvania** - Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties. **Virginia** - It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.

DCAPP09



CHOICE COVERAGE

Choose a benefit which permits the selection of any dentist (Access PPO), or one that provides better benefits through a panel of participating dentists (Select Plan¹)....More choices....More value.



SELECT PLAN 605XS (SAME AS A DHMO)¹

TAKE CARE OF YOUR TEETH WITH DOMINION

Dental disease is preventable. Dominion plans encourage the early detection of dental problems and routine maintenance. We help you take better care of your teeth and now it can cost you less to do it!

Dominion has contracted with carefully selected, established, local dentists to deliver **QUALITY** dental services to subscribers through our managed care program.

OUR NETWORK OF PARTICIPATING DENTISTS PROVIDES:

- Extensive coverage
- Quality dental care at predetermined fees
- Your choice of convenient private offices
- An emphasis on prevention and early detection of dental problems

SELECT PLAN BENEFITS INCLUDE:

- No charge for routine semiannual cleanings
- No charge for oral examinations
- No charge for bitewing x-rays
- No charge for topical fluoride for children

These procedures account for over 65% of dental services most frequently performed for adults, and almost 90% of the most frequently performed services for children.²

You will receive more extensive care (fillings, crowns, dentures, root canals, periodontal care, oral surgery, etc.) at fees up to 70% lower than usual and customary charges (see SUMMARY OF BENEFITS listed inside this brochure). You only pay the amount listed. Specialty care is also provided at the listed copayment whether performed by a participating general dentist or a participating specialist. Referrals to a specialist must be made by the member's participating general dentist.

QUALITY COMES FIRST

All Dominion participating dentists are licensed and regulated by the appropriate government agencies. They are qualified, experienced professionals. And, as part of our requirement for participation in the Dominion Program, they undergo extensive credentialing and periodic office reviews by our staff of dentists and Professional Services Representatives.

YOUR CHOICE OF PARTICIPATING DENTISTS

You may choose any general dentist from our enclosed Select Plan Provider Directory. If you need specific information on these offices, please call our Member Services Department toll-free at 888-518-5338. You may also access DominionDental.com for provider information such as office hours, handicap accessibility, etc.

Each family member may select different participating dentists. And, if you ever need to change your dentist for any reason, just call our Member Services Department.

OUT-OF-AREA EMERGENCY CARE

You are covered up to \$100 for palliative emergency dental treatment arising from accidental injury or illness while temporarily more than 50 miles from home. Simply use any convenient dentist and submit the receipt to Dominion for reimbursement. The \$100 limit does not apply in Pennsylvania.

¹ Same as a DHMO with fixed member copayments, no annual maximum dollar limits, no waiting periods, no deductibles, no pre-authorization paperwork or pre-treatment estimates and no claim forms (except in the case of out-of-area emergencies).

² Dominion Dental Services, Inc. - based on annual review of utilization data.

ACCESS PPO LOW & HIGH OPTION

WHAT ARE THE BENEFITS?

Your coverage under the Access PPO includes all of the extensive services in the SUMMARY OF BENEFITS listed inside this brochure and more. Upon completion of your enrollment, you will be sent a Group Insurance Certificate with a full listing of benefits and services.

You may use **any** licensed dentist or one of our participating Access PPO dentists (visit us at DominionDental.com for a listing of participating Access PPO providers near you). When you or your dependent(s) incur expenses for covered dental services, payments will be made in accordance with the list of benefits and services you receive with your *Group Insurance Certificate*.

Participating Access PPO network dentists are qualified practitioners, licensed and regulated by the appropriate government agencies. By receiving your dental care from an Access PPO network dentist you benefit from our pre-negotiated fee schedules. **Using an Access PPO dentist can significantly reduce your out-of-pocket costs.**

ARE THERE ANY WAITING PERIODS?

There are no waiting periods.

WHAT ARE THE DEDUCTIBLES?

Access PPO Low Option: There are no deductibles for Class I services. An annual deductible of \$50 per person (family maximum of \$150) is required on Class II services.

Access PPO High Option: There are no deductibles for Class I in-network services. An annual deductible of \$50 per person (family maximum of \$150) is required on Class II and Class III in-network services. Deductibles apply to all out-of-network services.

WHAT IS THE ANNUAL MAXIMUM BENEFIT PAYMENT?

Benefits are subject to an annual maximum of \$1,000 per insured person.

CLAIMS FILING

You may use the dentist of your choice. Benefits will be paid directly to you or they may be assigned directly to your dentist. Claim forms should be completed by your dentist at the time services are rendered. Your dentist may use the standard American Dental Association approved dental claim form.





This brochure provides a brief description of the Access PPO benefits. Consult your *Group Insurance Certificate* for complete plan details.

Access PPO Is Underwritten,
Marketed And Administered By:
Dominion Dental Services, Inc.
115 South Union Street, Suite 300
Alexandria, Virginia 22314
Telephone 888-518-5338

Access PPO Claims Incurred
Should Be Filed With:
Dominion Dental Services, Inc.
P.O. Box 1920
Bowie, Maryland 20717-1920
Telephone 888-518-5338





Dominion Dental Services, Inc. is licensed as a Dental Plan Organization in Virginia, Maryland, and Delaware, and a Risk Assuming PPO in Pennsylvania.

Select Plan 605xs¹

 Summary of Benefits	 Your Coverage ²
Diagnostic/Preventive <ul style="list-style-type: none"> Initial oral examination of mouth & teeth Bitewing x-rays Fluoride treatments for children Semiannual teeth cleanings 	100%
Basic Restorative <ul style="list-style-type: none"> Fillings <ul style="list-style-type: none"> Amalgam (silver) Composite (white) Full & panoramic x-rays Extraction, erupted tooth 	65-80%
Major Restorative³ Prosthetics <ul style="list-style-type: none"> Crowns & fixed bridgework Dentures Relining of dentures Periodontics <ul style="list-style-type: none"> Root planing and therapy Endodontics <ul style="list-style-type: none"> Root canal therapy Oral Surgery <ul style="list-style-type: none"> Extraction of impacted teeth 	55-65%
Orthodontics <ul style="list-style-type: none"> Child Adult 	50%
 Benefit Features	 Your Coverage
Office Visit	\$10 Copayment
Deductibles	None
Maximum Annual Limit	None
Waiting Periods	None
Claims Forms	None ⁴
Receive Care From	Select Plan Dentist

¹ Same as a DHMO with fixed member copayments, no annual maximum dollar limits, no waiting periods, no deductibles, no pre-authorization paperwork or pre-treatment estimates and no claim forms (except in the case of out-of-area emergencies).
² Approximate percentage of coverage based on the Captiva Context Fee Schedule's 80th percentile. A specific fee schedule applies and will be mailed with your Membership Card.
³ Specialty care is also provided at the listed copayment whether performed by a participating general dentist or a participating specialist. See Plan Exclusion #16 below.
⁴ Out-of-area emergency care reimbursement requires a receipt or other proof of loss.

Access PPO 100/80/50/50

 Summary of Benefits	 Your Coverage	
	<u>Access PPO Low</u> In-network/Out-of-network	<u>Access PPO</u> In-network/Out-of-network
Class I: Diagnostic/Preventive <ul style="list-style-type: none"> Initial oral examination of mouth & teeth Bitewing x-rays Fluoride treatments for children Semiannual teeth cleanings 	100%/100%	100%/100%
Class II: Basic Restorative <ul style="list-style-type: none"> Fillings <ul style="list-style-type: none"> Amalgam (silver) Composite (white) Full & panoramic x-rays Extraction, erupted tooth 	80%/80%	80%/50%
Periodontics <ul style="list-style-type: none"> Root planing and therapy Endodontics <ul style="list-style-type: none"> Root canal therapy 		
Class III: Major Restorative Oral Surgery <ul style="list-style-type: none"> Extraction of impacted teeth 	0%/0%	50%/50%
Prosthetics <ul style="list-style-type: none"> Crowns & fixed bridgework Dentures Relining of dentures once every two (2) years 		
Class IV: Orthodontics	0%/0%	0%/0%
 Benefit Features	 Your Coverage	
Office Visit	\$0	\$0
Deductibles ¹	\$50 (\$150) ²	\$50 (\$150) ³
Maximum Annual Limit ¹	\$1,000	\$1,000
Waiting Periods	None	None
Claims Forms	Yes	Yes
Receive Care From	Any Dentist or Access PPO Dentist	

¹ Deductibles and annual maximums are per insured person.
² Deductibles apply to Class II in-network and out-of-network services.
³ Deductibles apply to Class II and Class III in-network services and all out-of-network services.

HOW DO I RECEIVE CARE?

After your effective date, simply call the dental office you selected, make an appointment, and present your Membership Card upon arrival. You will receive treatment at the dental office listed on your Membership Card, except when an emergency arises or when otherwise directed by your Plan Dentist.

WHAT IF I CHANGE JOBS?

If you leave your place of employment, you have the option of keeping your coverage using an alternate method of payment.

WHO IS ELIGIBLE?

You and your dependents are eligible. Dependents include your spouse, unmarried children under age 20, and unmarried children who are full-time students (up to age 23).

PLAN EXCLUSIONS & LIMITATIONS

Plan Exclusions

1. Services for injuries or conditions which are covered under worker's compensation and employer's liability laws. Services which are provided without cost to Subscribers by any federal, state, municipal, county or other subdivision's program (with the exception of Medicaid).
2. Services which, in the opinion of the attending dentist, are not necessary for the patient's dental health.
3. Cosmetic, elective or aesthetic dentistry.
4. Oral surgery requiring the setting of fractures or dislocations.
5. Services with respect to malignancies, cysts or neoplasms, hereditary, congenital, anodontic, mandibular prognathism or development malformations where, in the sole discretion of the Participating Dentist, such services should not be performed in a dental office.
6. Dispensing of drugs.
7. Hospitalization for any dental procedure.
8. Treatment required for conditions resulting from major disaster, epidemic or war, including declared or undeclared war or acts of war.
9. Replacement due to loss or theft of prosthetic appliance.
10. General anesthesia and sedation.
11. Services that cannot be performed because of the general health of the patient (does not apply to Virginia).
12. Implantation and related restorative procedures.
13. Unlisted procedures.
14. Services obtained outside of the dental office in which enrolled and that are not pre-authorized by such office or Dominion Dental Services, Inc. (with the exception of out-of-area emergency dental services).
15. Services related to the treatment of TMD (Temporal Mandibular Disorder).
16. Services performed by a Plan Specialist without a referral from a Participating General Dentist (with the exception of Orthodontics).
17. Elective surgery including, but not limited to, extraction of non-pathologic, asymptomatic impacted teeth.
18. The Invisalign system and similar specialized braces are not a covered benefit. Patient copayments will apply to the routine orthodontic appliance portion of services only. Additional costs incurred will become the patient's responsibility.

Plan Limitations

1. Replacement of a bridge, crown or denture within five (5) years after the date it was originally installed.
2. Replacement of filling within two (2) years after original date of placement.
3. Teeth cleaning (prophylaxis) at intervals of less than six (6) months.
4. Crown and bridge fees apply to treatment involving five or fewer units when presented in a single treatment plan. Additional crown or bridge units, beginning with the sixth unit, are available at the provider's Usual, Customary, and Reasonable (UCR) fee, minus 25%.
5. Full mouth x-rays or panoramic film – one set every three years.
6. Retreatment of root canal within two (2) years of the original treatment.
7. Limit 4381 to one benefit per tooth for three teeth per quadrant or a total of 12 teeth for all four quadrants per twelve (12) months. Must have pocket depths of five (5) millimeters or greater.

* All fees exclude the cost of noble and precious metals. An additional fee will be charged if these materials are used.

HOW DO I ENROLL IN THE SELECT PLAN?

- Choose a dentist from the Select Plan Provider Directory enclosed.
- Fill out the enclosed enrollment card. List all dependents you want covered. Be sure to check the **Select Plan** selection box.
- Return the completed application to your Benefits Administrator.
- A Membership Card and Certificate of Coverage will be mailed to you on or before your first day of eligibility.
- If you have any questions regarding your date of eligibility, please contact your Benefits Department.



Maryland - Any person who knowingly and willfully presents a false or fraudulent claim for payment of a loss or benefit or

who knowingly and willfully presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

Access PPO EXCLUSIONS

EXPENSES NOT COVERED UNDER THE ACCESS PPO: No benefits will be paid for expenses incurred:

1. Treatment required for conditions resulting while on active duty as a member of the armed forces of any nation or from war or acts of war; whether declared or undeclared.
2. Services which are covered under Medicare, worker's compensation, employer's liability laws, or the Pennsylvania Motor Vehicle Financial Responsibility Law.
3. Services and treatment provided without charge or for which there would be no charge in the absence of insurance.
4. Services not listed as covered.
5. Hospitalization for any dental procedure.
6. Services and treatment for which Member is eligible for coverage under his or her hospital, medical/surgical or major medical plan.
7. Reconstructive, plastic, cosmetic, elective or aesthetic dentistry.
8. Elective surgery including, but not limited to, extraction of non-pathologic, asymptomatic impacted teeth.
9. Replacement of dentures, bridges, inlays, onlays or crowns that can be repaired or restored to normal function.
10. Replacement of lost, stolen or damaged prosthetic or orthodontic appliances; athletic mouthguards; precision or semi-precision attachments; denture duplication; sealants; periodontal splinting of teeth.
11. Services for increasing vertical dimension, restoring occlusion, replacing tooth structure lost by attrition, and correcting developmental malformations and/or congenital conditions.
12. Oral hygiene instructions; plaque control; completion of a claim form; acid etch; broken appointments; prescription or take-home fluoride; or diagnostic photographs.
13. Dispensing of drugs.
14. Diagnosis or treatment of temporomandibular joint (TMJ) syndromes, problems and/or occlusal disharmony.
15. Procedures that in the opinion of Dominion Dental Services are experimental or investigative in nature because they do not meet professionally recognized standards of dental practice and/or have not been shown to be consistently effective for the diagnosis or treatment of the Member's condition.
16. Treatment of cleft palate, anodontia, malignancies or neoplasms.
17. Any service or supply rendered to replace a tooth lost prior to the effective date of coverage. This exclusion expires after 36 months of Member's continuous coverage under the plan.
18. Maryland policyholders only: Any bill, or demand for payment, for a dental service that the appropriate regulatory board determines was provided as a result of a prohibited referral. "Prohibited referral" means a referral prohibited by Section I-302 of the Maryland Health Occupations Article.

HOW DO I ENROLL IN THE ACCESS PPO?

- Fill out the enclosed enrollment card. List all dependents you want covered. Be sure to select the Access PPO selection box. You do not need to choose a provider.
- Return the completed application to your Benefits Administrator.
- A Membership Card and Certificate of Coverage will be mailed to you on or before your first day of eligibility.
- If you have any questions regarding your date of eligibility, please contact your Benefits Department.

District of Columbia - WARNING: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant.

Pennsylvania - Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal to and civil penalties.

Virginia - It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.



CHOICE

Monthly Rate Sheet

Select Plan 605x (Same as a DHMO)¹	
Subscriber Only	\$17.31
Subscriber & Spouse	\$32.08
Subscriber & Child/ren	\$36.81
Subscriber & Family	\$45.63
Access PPO Low Option 100/80/0	
Subscriber Only	\$23.67
Subscriber & Spouse	\$46.45
Subscriber & Child/ren	\$50.07
Subscriber & Family	\$71.19
Access PPO High Option 100/80/50	
Subscriber Only	\$33.08
Subscriber & Spouse	\$64.92
Subscriber & Child/ren	\$69.98
Subscriber & Family	\$99.50

¹ Same as a DHMO with fixed member copayments, no annual maximum dollar limits, no waiting periods, no deductibles, no pre-authorization paperwork or pre-treatment estimates and no claim forms (except in the case of out-of-area-emergencies).

We are continually expanding our network of dentists. For the most up-to-date listing of all participating general dentists and specialists visit us on the web at DominionDental.com. A printed list can also be requested by calling our Member Services Department toll-free at 888-518-5338.

PENNSYLVANIA

BERKS COUNTY
Reading

#2360 (610) 208-0400
Aspen Dental Associates of NY., P.C.
2733 Papermill Road
Reading, PA 19610

Wyomissing

#973 (610) 373-3720
Lindsay Dental Health Services
1901 Ridgewood Rd.
Wyomissing, PA 19610

BUCKS COUNTY
Bensalem

#2349 (215) 638-4696
A-1 Family Dental Care, P.C.
1950 Street Road
Suite 200
Bensalem, PA 19020

#2781 (215) 639-7341
Mohamed Sakkal, D.M.D.
1541 Brookwood Drive
Bensalem, PA 19020

#1203 (215) 639-5822
Mukund K. Patel, D.D.S., P.C.
2776 Knights Rd.
Bensalem, PA 19020

Chalfont

#2352 (215) 997-9980
A+ Family Dental Care, P.C.
1500 Horizon Drive
Suite 104
Chalfont, PA 18914

Fairless Hills

#387 (215) 946-3655
Fairless Hills Dental Group
532 S. Oxford Valley Rd.
Fairless Hills, PA 19030

Feasterville Trevose

#2839‡ (215) 357-4321
Feasterville Family Dentistry
4 Arbor Lane
Feasterville Trevose, PA 19053

Feasterville Trevose

#1908 (215) 942-0909
Sofia Goldin, D.M.D.
227 Bustleton Pike
Feasterville Trevose, PA 19053

Langhorne

#2350 (215) 757-4400
A-1 Family Dental Care, P.C.
402 Middletown Boulevard,
Suite 200
Langhorne, PA 19047

Morrisville

#380 (215) 295-1348
Solomon Lehrhaupt, D.D.S.
229 Plaza Blvd.
Morrisville, PA 19067

#837 (215) 493-6767
Vasant K. Vora, D.D.S.
301 Oxford Valley Rd.
Suite 203A
Morrisville, PA 19067

Newtown

#379 (215) 860-8790
Smile Maker Dental
26 Eagle Rd.
Newtown, PA 18940

Quakertown

#1023 (215) 536-3210
A+ Family Dental Care, PC
24 South 14th Street
Quakertown, PA 18951

CHESTER COUNTY
Exton

#50386 (610) 280-7222
American Family Dental Care PC
479 Thomas Jones Way
Suite 600
Exton, PA 19341

#2317 (610) 363-2530
Exton Dental Associates, LTD
436 Exton Commons
Exton, PA 19341

#37700 (610) 594-2001
Lionville Dental Associates, LLC
67 Downlin Forge Rd
Exton, PA 19341

Paoli

#510* (610) 725-0620
Alan S Yeung, D.D.S.
250 W Lancaster Ave. #210
Paoli, PA 19301

Thorndale

#628 (610) 384-9099
Gentle Dental Thorndale LLC
3307 Lincoln Hwy
Thorndale, PA 19372

West Chester

#1057* (610) 696-9135
Yvonne DeLoache, D.D.S.
301 S. High Street
West Chester, PA 19382

West Grove

#2856 (610) 864-0402
Jenny Chen Family Dentistry
207 North Guernsey Rd.
West Grove, PA 19390

DELAWARE COUNTY
Aston

#1528 (610) 872-7461
Aston Family Dental Care
3200 Concord Rd.
Ste.200
Aston, PA 19014

Brookhaven

#840 (610) 876-3300
Alan Jeffrey Smith, D.M.D.
130 E. Brookhaven Rd.
Brookhaven, PA 19015

Chadds Ford

#2356 (610) 388-4466
Advanced Family Dentistry, P.C.
8 Pond's Edge Drive
Suite 2
Chadds Ford, PA 19317

#1446 (610) 459-9102
Albert Turk, D.M.D
127 Wilmington West
Chester Pike
Chadds Ford, PA 19317

#33848 (610) 459-5002
Centre for Cosmetic Dentistry
275 Wilmington Westchester Pk
Ste. 111
Chadds Ford, PA 19317

Chester

#2003 (610) 874-6231
ChesPenn Health Services
2600 West 9th Street
Chester, PA 19013

#2004 (610) 497-2900
ChesPenn Health Services
2602 West 9th Street
Chester, PA 19013

#1453 (610) 874-4316
The Saltz Dental Center
616 Avenue of the States
Chester, PA 19013

Collingdale

#38424 (610) 534-0300
Gentle Dental of Collingdale
1420 MacDade Blvd
Collingdale, PA 19023

#2127 (610) 583-4443
Hollyland Dental Center
917 MacDade Blvd
Collingdale, PA 19023

Darby

#15469 (484) 494-3300
American Dental Care LLC
875 Main Street
Darby, PA 19023

Glen Mills

#50345 (610) 358-5151
Star Care Dental
1102 Baltimore Pike
Suite 203
Glen Mills, PA 19342

Havertown

#1320 (610) 446-6688
Iraj Shafagh, D.M.D.
109 North Eagle Rd.
Havertown, PA 19083

¹Same as a DHMO with fixed member copayments, no annual maximum dollar limits, no waiting periods, no deductibles, no pre-authorization paperwork or pre-treatment estimates and no claim forms (except in the case of out-of-area emergencies)

Lansdowne

#992 (610) 623-7610
 Joel Cooper, D.M.D.
 43 Lansdown Ave.
 Lansdowne, PA 19050

Media

#2801 (610) 891-0940
 American Dental Care, PC
 1003 Baltimore Pike
 Media, PA 19063

Morton

#2354 (610) 544-3630
 Advanced Family Dentistry, P.C.
 35-B Woodland Avenue
 Morton, PA 19070

Norwood

#361 (610) 532-3700
 Shore & Snyder Dental Center
 519 Chester Pike, Box 40
 Norwood, PA 19074

Upper Darby

#2795 (610) 352-7600
 American Dental Care, PC
 6780 Market Street
 Upper Darby, PA 19082

#38068 (610) 789-2440
 Care Dental LLC
 134 S State Rd
 Upper Darby, PA 19082

#498 (610) 734-0666
 Glenn A Brown, DMD
 6776 Market Street
 Upper Darby, PA 19082

#831 (610) 352-7766
 Rachel Mallya, D.M.D.
 27 Garrett Road
 Upper Darby, PA 19082

Wayne

#2740 (610) 964-0111
 Family and Cosmetic Dentistry
 335 West Lancaster Ave
 Wayne, PA 19087

**LACKAWANNA COUNTY
Scranton**

#2075 (570) 343-7997
 Howard A. Wimmer, D.D.S.
 1439 Wyoming Avenue
 Scranton, PA 18509

#390 (570) 344-5511
 Michael P. Brennan, D.M.D.
 128 N. Main Ave.
 Scranton, PA 18504

**LANCASTER COUNTY
Lancaster**

#33853 (717) 394-4155
 Aspen Dental Associates NE PA PC
 1954 Fruitville Pike
 Lancaster, PA 17601

#1341* (717) 898-9099
 Centerville Family Dental
 803 Estelle Dr.
 Lancaster, PA 17601

#1720 (717) 293-2784
 O'Donnell & Phillips LLC
 230 Harrisburg Ave.
 Suite 5
 Lancaster, PA 17603

**LEHIGH COUNTY
Allentown**

#2358 (610) 530-7785
 Aspen Dental Associates of NY., P.C.
 319 South Cedar Creek Blvd.
 Allentown, PA 18103

#635 (610) 434-8975
 Gentle Dental of Allentown
 2015 W Hamilton St.
 Suite 202
 Allentown, PA 18104

**LUZERNE COUNTY
Hazleton**

#2389 (570) 453-0555
 Aspen Dental Associates of NE PA PC
 93 Airport Road
 Hazleton, PA 18202

#1722 (570) 455-4858
 Joseph Albertine, D.D.S.
 239 Muir Ave.
 Hazleton, PA 18201

Pittston

#1807† (570) 654-2484
 Pittston Dental Center
 34 S. Main St.
 Pittston, PA 18640

#1724 (570) 655-3040
 Santo LaFoca, D.M.D.
 20 N. Main St.
 Pittston, PA 18640

Wilkes Barre

#2240 (570) 825-8090
 Aspen Dental Associates of NE PA PC
 2168 Wilkes-Barre Township
 Market Place
 Wilkes Barre, PA 18702

#2098 (570) 270-9211
 David J. Maharty, D.M.D., Inc.
 156 S. Pennsylvania Ave.
 Wilkes Barre, PA 18701

#386 (570) 283-1596
 Louis J. Mastrini, D.D.S.
 672 North River St
 Suite 209
 Wilkes Barre, PA 18705

#483 (570) 825-9645
 William Walthour, D.D.S.
 213 East Market Street
 Wilkes Barre, PA 18702

**MONTGOMERY COUNTY
Abington**

#2810 (215) 657-5255
 Abington Dental Excellence
 1550 Old York Rd.
 Abington, PA 19001

Bala Cynwyd

#2357 (610) 660-9510
 American Family Dental Care P.C.
 301 City Line
 G-5
 Bala Cynwyd, PA 19004

Colmar

#2811 (215) 997-2300
 Dilip N. Dudhat, D.M.D., PC
 2406 North Broad Street
 Colmar, PA 18915

Conshohocken

#531 (610) 828-1027
 Dennis E. Yankosky, D.D.S., PC
 2009 Butler Pike
 Conshohocken, PA 19428

Harleysville

#2353 (215) 513-7172
 A+ Family Dental Care, P.C.
 456 School Lane
 Suite 104
 Harleysville, PA 19438

Horsham

#920 (215) 443-7400
 Horsham Dental Associates
 623-A Horsham Road
 Horsham, PA 19044

Lansdale

#391* (215) 368-1412
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