

The Dental Treatment Cost Cheat Sheet

What dentists in the US really charge for 14 common procedures, with and without insurance, and the questions that stop you overpaying.

Dental offices rarely post prices. This sheet compiles published national fee-survey averages (the same data insurers use) so you know a fair range before you sit in the chair. Your quote may differ by city, tooth and plan. Use these numbers to ask informed questions, not as a guarantee.

Procedure	Typical range, no insurance	Typical out-of-pocket with a PPO*
Exam + X-rays (new patient)	\$80 – \$250	\$0 – \$30
Routine cleaning (adult)	\$90 – \$200	\$0 – \$20
Deep cleaning (scaling & root planing), per quadrant	\$200 – \$350	\$80 – \$180
Simple filling (1 surface, composite)	\$150 – \$300	\$30 – \$90
Simple tooth extraction	\$140 – \$380	\$60 – \$150
Surgical / wisdom tooth extraction (per tooth)	\$280 – \$700	\$120 – \$300
Four impacted wisdom teeth (with sedation)	\$1,800 – \$4,000	\$700 – \$1,800
Root canal (molar)	\$900 – \$1,600	\$400 – \$800
Crown (porcelain / ceramic)	\$1,100 – \$2,000	\$500 – \$1,000
Dental bridge (3 units)	\$2,500 – \$5,500	\$1,200 – \$2,800
Partial denture	\$700 – \$2,300	\$350 – \$1,100
Full dentures (upper + lower)	\$1,500 – \$4,000	\$750 – \$2,000
Dental implant (single, all-in)	\$3,500 – \$6,500	\$2,500 – \$5,000
Night guard (custom, dentist-made)	\$300 – \$800	\$150 – \$500

*Assumes an in-network PPO after the deductible, with the plan's usual 100% / 80% / 50% split for preventive / basic / major work. Most plans cap payouts at \$1,000 – \$2,000 per year, so a crown plus a root canal can use the whole year's benefit. Sources: CareCredit and Humana published 2026 fee data, ADA Survey of Dental Fees. Ranges rounded.

How to read a treatment plan before you say yes

A treatment plan is a sales document as much as a medical one. These five questions separate what you need now from what can wait.

1. "Which of these is urgent, and which can wait 6–12 months?"

Infection, a cracked tooth, or a cavity close to the nerve are time-sensitive. Replacing old fillings that are not failing, cosmetic work and most whitening are not. Phasing work across two insurance years can double what your plan pays.

2. "What is the ADA procedure code for each line?"

Every dental procedure has a **D-code** (for example D2740 is a porcelain crown). With the code you can compare quotes between offices and check exactly what your insurer pays for it. Offices must give you these codes if you ask.

3. "What happens if I do nothing for now?"

An honest answer sounds like "the cavity will grow and probably need a root canal within a year." A vague answer ("you really should take care of it") is a sign to get a second opinion.

4. "Is there a cheaper option that would also work?"

- **Crown vs. large filling:** a well-placed large filling can last years for a fraction of the price when enough tooth remains.
- **Implant vs. bridge vs. partial denture:** three answers to one missing tooth, at three very different prices.
- **Deep cleaning on all four quadrants** is sometimes recommended when only one or two actually need it. Ask to see the pocket-depth chart.
- **Custom night guard vs. a quality boil-and-bite:** for mild grinding, the \$30 option is a reasonable first step.

5. "Can I have the written estimate and take a few days?"

Any office that pressures you to decide today, or offers a "today only" discount, is selling. A written estimate also lets you request a pre-treatment estimate from your insurer, which tells you the exact amount they will pay.

Red flags worth a second opinion

- A "full mouth" plan over \$5,000 on your first visit, with no X-rays shown to you.
- Six or more fillings recommended when you have had no pain and a clean record for years.
- Deep cleaning recommended without measuring gum pockets.
- Financing paperwork brought out before the treatment is explained.

The 9 ways people really pay less

Ranked by how much they typically save. None of them requires haggling.

1. **Dental school clinics.** Supervised students do the work at 30–60% below private fees. Appointments are longer. Find one at the ADA's list of accredited schools; most big cities have one.
2. **Dental savings plans (not insurance).** An annual membership (usually \$100–\$200 a year) that gives 10–60% off a published fee schedule at participating dentists, with no waiting period, no annual cap and no claim forms. Often cheaper than insurance for people who need a crown, implant or dentures this year.
3. **In-house membership plans.** Many offices now sell their own plan: a flat yearly fee covers cleanings and exams and gives a discount on everything else. Ask at the front desk; they are rarely advertised.
4. **Phase treatment across two plan years.** If your insurance caps at \$1,500 and your plan costs \$3,000, do the urgent half in December and the rest in January.
5. **Ask for the cash price.** Offices pay 5–10% to process insurance and financing. Many will knock that off for payment in full on the day. Say: *"If I pay in full today, is there a cash price?"*
6. **Community health centers (FQHCs).** Federally funded clinics charge on a sliding scale based on income. Search "FQHC dental near me" or use the HRSA locator.
7. **Get the D-codes and compare two quotes.** Prices for the same crown code vary 40% or more between offices in the same town.
8. **Use an HSA or FSA.** Paying with pre-tax dollars is an automatic 20–30% discount for most households.
9. **Negotiate the plan, not just the price.** "Which three items matter most this year?" often shrinks a \$6,000 plan to \$2,000 of what you actually need.

Insurance or savings plan? The quick test

Add up what you expect to need this year using the table on page 1. If it is mostly cleanings and a filling, employer insurance usually wins. If it includes a crown, root canal, implant or dentures, a savings plan with no annual cap often leaves you paying less, because insurance stops paying after its \$1,000–\$2,000 limit. Our free calculator at gofixteeth.com/dental-insurance-vs-savings-plan-calculator/ runs the numbers for your situation.

Word-for-word scripts and your pre-visit checklist

At the front desk, before treatment

"Could you print the treatment plan with the ADA codes and send a pre-treatment estimate to my insurance? I'd like to review it at home."

"Do you offer an in-house membership plan or a cash discount for paying in full?"

When the quote is higher than the range on page 1

"The national average for this code is around \$____. Can you help me understand what makes this case more complex?"

When you are asked to decide today

"I understand. I don't make health decisions the same day. I'll call back by Friday."

Before your next appointment

- ☐ I know which items are urgent and which can wait.
- ☐ I have the D-code for every line of the plan.
- ☐ I have a second quote, or a pre-treatment estimate from my insurer.
- ☐ I asked about a cheaper option that would also work.
- ☐ I checked one savings route from page 3 (dental school, savings plan, FQHC, membership plan).
- ☐ I know my insurance annual maximum and how much is left this year.
- ☐ I asked for the cash price.

What's next

Over the next few days we will send you a short email series: how to tell a fair quote from an inflated one, exactly how savings plans work (and when they don't), the cheapest ways to replace a missing tooth, and the free tools on GoFixTeeth.com that estimate costs in your state. Reply to any email; a real person reads every message.

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