

How to choose a dentist

What treatment should cost, what Medicare does and does not cover, and how to spot a practice selling work you do not need

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Dentistry is the one part of routine healthcare that Medicare mostly leaves to you, so the price depends almost entirely on the practice you walk into. Two dentists can quote for the same teeth and land thousands of dollars apart, and the difference is rarely skill - it is how much treatment is recommended and how it is priced.

What it should cost

A private check-up with a clean typically runs about \$150 to \$280. A composite filling is usually \$150 to \$350 depending on size and which tooth. Root canal therapy on a molar can run from \$900 to \$2,000, and more if it goes to an endodontist, who is the root-canal specialist. A crown is commonly \$1,200 to \$2,200, a simple extraction \$150 to \$400, and a single implant with its crown \$3,000 to \$6,000.

Medicare does not cover general dentistry for most adults. Eligible children can get basic care through the Child Dental Benefits Schedule, worth around \$1,100 per child over two calendar years - check your child's eligibility with Services Australia. Private health insurance extras covers a share of the rest, and HICAPS terminals at the front desk let you claim the gap on the spot.

What the law requires

Everyone who calls themselves a dentist, dental hygienist, dental therapist, dental prosthetist or oral health therapist in Australia must be registered with the Dental Board of Australia, which sits under AHPRA. Registration means they met the qualification and English standards, hold insurance, and are bound by a code of conduct. You can check any practitioner free on the AHPRA public register.

Using a protected title without registration is an offence, so the register is the fastest way to separate a qualified dentist from someone offering dental work on the side. A practitioner who bristles when you say you will look them up is telling you something.

Red flags

A treatment plan presented as one lump sum with no itemisation.

Pressure to start major work on the first visit, especially crowns or implants before a simple filling has been tried.

Frequent recommendations to replace existing fillings that are not causing problems.

No written plan or quote when you ask for one.

Reluctance to give a registration number or be checked on the AHPRA register.

Cosmetic add-ons like whitening or veneers pushed before basic oral health is addressed.

What good looks like

They give a written treatment plan with costs, split into urgent, soon and optional.

They say plainly when a cheaper option is reasonable and what its trade-off is.

They claim through HICAPS and tell you the gap before you agree.

They ask about your health fund and your budget rather than assuming.

Preventive advice comes before expensive restorative work.

What to ask

- "What is the treatment plan in writing, with each item costed?"
- "Which of these is urgent, and which can safely wait six months?"
- "Are you registered with the Dental Board of Australia, and what is your registration number?"
- "Do you have HICAPS so I can claim my health fund on the spot?"
- "What is my health fund likely to pay, and what will I be out of pocket?"
- "If this tooth settles, do I still need the same treatment, or will a smaller option do?"
- "What happens if I get a second opinion?"

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