

How to Read a Dental Treatment Estimate in Ontario

By JoD Money & Benefits · 7 min read

A dental estimate can look like a receipt from another planet: rows of five-digit codes, unfamiliar words, and a total that may or may not match what you expected. It is really just an itemized plan, written in a shorthand that dental offices and insurers share. Once you know how the pieces fit together, an estimate becomes a useful tool for asking good questions and avoiding surprises.

Here is how to work through one, line by line, using the way dental billing is structured in Ontario.

What an estimate actually is

An estimate, sometimes called a pre-treatment estimate or a treatment plan, lists the procedures your dentist is recommending along with the fee for each. It is not a bill for work already done. It is a forecast, meant to tell you what is proposed and roughly what it will cost before you decide to go ahead.

Because it is a forecast, the numbers can shift. A tooth that looks like it needs a simple filling might, once the dentist can see more, call for a different approach. A good estimate anticipates this by noting where a plan could change, and a good office will talk you through any revision before proceeding.

Those five-digit numbers: procedure codes

Each line usually begins with a procedure code. In Ontario these follow a standardized list maintained for the profession, so the same type of service is described the same way from office to office. The code tells the office and your insurer precisely which service is planned, which matters when a claim is submitted.

You do not need to memorize codes. What helps is knowing that each line represents one specific service, and that the plain-language description beside the code is there for you. If a description is vague, ask what it covers. "Composite restoration, two surfaces" means more than "filling," and the detail explains why two seemingly similar quotes can differ.

Where the fees come from

Every year, the Ontario Dental Association publishes a suggested fee guide for the province. It lists a recommended fee for each procedure code. The word *suggested* matters: the guide is a reference, not a mandatory price list, and individual offices set their own fees. Many insurers also build their coverage around a fee guide, which is why your plan may reimburse based on a guide amount rather than the exact figure on your estimate.

This is the single most useful thing to understand about dental pricing in Ontario. The fee guide gives everyone a common starting point, but what you are charged, and what an insurer pays, can each differ from it. That gap is normal and worth asking about rather than worrying over.

Reading a line from left to right

Most estimates lay out each service in a row. A typical line includes the procedure code, a description, sometimes the tooth number or surfaces involved, and the fee. Where insurance is on file, you may also see an estimated portion the plan is expected to cover and an estimated portion left to you. Read it as a sentence: this service, on this tooth, costs this much, of which your plan may cover this part.

If tooth numbers appear, they refer to a standard numbering system dentists use to identify each tooth. You can simply ask the office to point to which tooth a line refers to on a chart or a model. There is no reason to decode it yourself.

Common sections you will see

- **Diagnostic and preventive** — examinations, X-rays, cleanings, and similar services that establish or maintain your baseline.
- **Restorative** — fillings, crowns, and repairs to existing teeth.
- **Other treatment** — anything more involved, which may be staged across visits.

Procedures are often grouped and may be sequenced across appointments. If your plan is phased, the estimate should make clear what happens first and what can wait, so you can budget and schedule accordingly.

Insurance can be its own puzzle, and an estimate is the right moment to raise it. Before treatment begins, it is reasonable to [ask the dental office](#) to submit the plan to your insurer for a pre-determination, so you have a clearer idea of your share in writing. Many offices do this routinely, and it turns an estimate into something closer to a confirmed figure.

Questions that make an estimate clearer

- Which of these procedures are needed now, and which could reasonably wait?
- Is there more than one way to treat this, and how do the options compare in cost and longevity?
- What happens to the estimate if the dentist finds something different once treatment starts?
- Can the plan be submitted to my insurer in advance so I know my portion?
- How long is this estimate valid, given fees can change year to year?

None of these questions are awkward to ask. They are the questions offices expect, and asking them tends to lead to a plan you understand and feel comfortable with.

Why your portion may not match the fee

If you have coverage, the amount your plan pays can depend on several things at once: whether your plan reimburses based on a fee guide, any annual maximum, deductibles, the percentage your plan covers for that category of service, and whether the procedure is eligible at all. The estimate's "patient portion" is itself an estimate until the claim is processed. Treat it as a careful projection, not a locked-in number.

Frequently asked questions

How do I read a dental estimate?

Go line by line. Each row is one service, shown with a procedure code, a description, often the tooth involved, and a fee. If insurance is on file, you may also see an estimated covered portion and an estimated patient portion. Read any line you do not understand aloud to the office and ask them to explain it; that is exactly what the estimate is for.

What are dental codes?

They are standardized numbers that identify specific dental services, used consistently across offices in Ontario so that treatment plans and insurance claims describe the same service the same way. The plain-language description next to each code is the part meant for you, and staff can explain any code you ask about.

Is an estimate the final price?

Not necessarily. An estimate is a forecast based on what the dentist can see and plan at the time. It can change if the clinical picture turns out to be different, and insurance portions are confirmed

only once a claim is processed. A reputable office will discuss any change with you before carrying it out.

Sources & further reading

- [Ontario Dental Association — Your Oral Health](#) — background on the suggested fee guide and dental care in Ontario.
- [Canadian Dental Association — Your Oral Health](#) — general patient guidance on treatment and visits.
- [Government of Canada — Canadian Dental Care Plan](#) — information on public dental coverage and what it involves.

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