

COSTS & TRANSPARENCY

Plastic surgery costs in the USA

What your written quote should include



Illustrative stock photograph. Not a patient or treatment-result image.

A plastic surgery price becomes meaningful only when you know what it buys. A national surgeon fee, a promotional package and a personalized surgical estimate may describe three different things. This guide explains how to read the numbers, compare the scope of two offers and ask about the expenses that arrive after surgery. Use it to prepare for an informed consultation in any US city, with attention to credentials, follow-up care and the written terms behind the headline price.

EVIDENCE / OPTIONS / QUESTIONS TO TAKE TO CONSULTATION

01 / UNDERSTAND THE NUMBER

A surgeon fee is one part of your budget

01

A price seen online can feel reassuringly precise. Yet its precision tells you little unless the seller defines what it includes. ASPS explicitly distinguishes its published breast augmentation surgeon fee from the complete bill: anesthesia, operating-room services and related expenses are additional. A quotation that says “surgery included” still needs to explain whose surgery services, at which facility and for which agreed procedure. [2]

Think of your spending in three groups: treatment, recovery and possible later care. The first covers the clinical team and the setting. The second covers the practical arrangements that make following recovery instructions possible. The third asks what happens if healing, a complication or dissatisfaction requires another visit or operation. ASPS advises discussing garments, medicines, time away from work, help at home and potential revision charges rather than considering only the headline surgical price. [4]

Here is a hypothetical arithmetic example, not a market estimate: a \$6,000 surgeon fee plus \$1,200 for anesthesia, \$1,800 for the facility and \$300 for listed supplies totals \$9,300. Travel and household help remain outside it. These invented figures simply demonstrate why a fee and a total are different. Write your own confirmed numbers beside each category, and leave unknown items visibly unresolved instead of silently counting them as zero.

- Separate professional fees from facility charges.
- Record what is excluded as carefully as what is included.
- Treat an unanswered cost as unknown, not free.

THREE THINGS TO REMEMBER

Compare the same operation, facility and aftercare commitments before comparing totals.

Published surgeon-fee figures exclude other costs; they are context, not a personal quotation.

Keep the surgical estimate, financing agreement and cancellation policy as separate documents.

02 / INTERPRET THE BENCHMARK

What national ranges can - and cannot - tell you

02

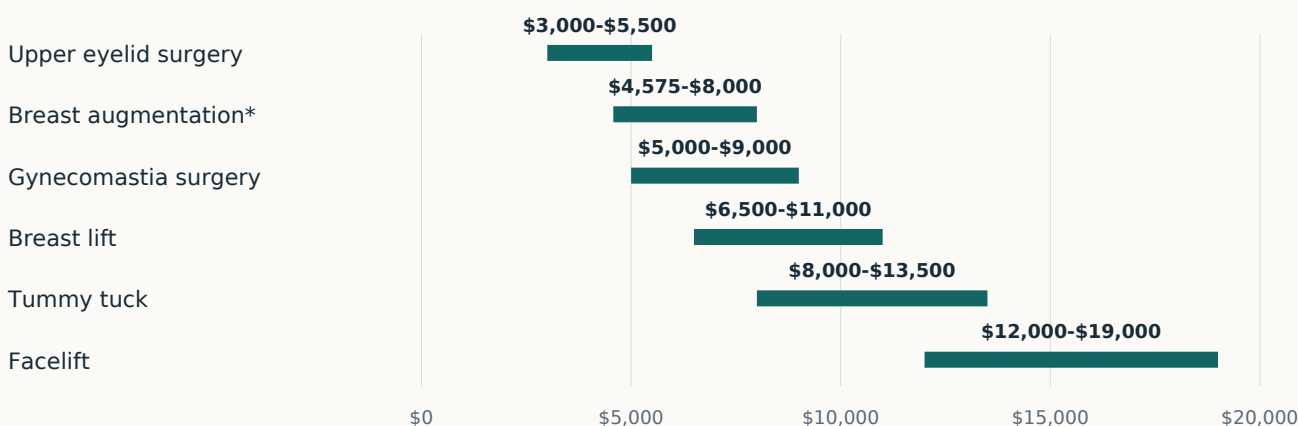
The accompanying chart uses ASPS 2024 projected surgeon/physician fee ranges for six procedures. ASPS describes these as aggregate projections based on averages submitted by surveyed members, accommodating differences in geography and practice setting. They are not minimum and maximum prices collected from every US practice. Nor are they complete treatment packages, current offers or guaranteed prices in Miami, New York or another city. [1]

A shorter bar does not identify the easier choice for you. Upper eyelid surgery, breast augmentation and a tummy tuck address different concerns and require different assessments. Even two quotations bearing the same procedure name may describe different operative plans. The useful comparison starts with the surgeon's explanation of the intended work. Ask whether a quote includes associated procedures, devices or additional treatment areas, and ask what alternative plan was considered. [10]

Local prices can also reflect overhead, demand and the surgeon's experience. ASPS cautions that a higher charge or a prominent public profile does not establish superior quality. [3] Use a benchmark to notice questions, not to calculate a discount you believe you are owed. If your estimate is above a published range, ask what accounts for the difference. If it is below, ask the same question. A clear, specific explanation is more useful than a claim that a practice is simply "premium" or "affordable."

2024 projected US surgeon-fee ranges

USD; surgeon/physician fee only



Source: ASPS, 2024 Average Surgeon/Physician Fees, p. 28. Projected ranges derived from averages submitted by surveyed ASPS members. [1]

Not total procedure prices or current quotations. Excludes anesthesia, operating-room and other related expenses. *Implant placement includes primary and/or revision procedures. Ranges are aggregate projections, not observed national minima and maxima.

03 / REQUEST THE DOCUMENT

Build a quote that you can actually audit 03

A useful estimate identifies the patient, proposed procedures, surgeon, planned facility, date prepared and period for which the offer remains valid. Ask the office to mark every line as included, additional or not applicable. If an amount can change with operating time or a change in the clinical plan, ask how the change would be calculated and communicated. The 2026 ASPS budgeting guidance specifically encourages questions about unexpectedly longer cases and later revisions. [4]

For people in the United States who are uninsured or not using insurance, CMS says providers usually must supply a good faith estimate when care is scheduled at least three business days ahead, or when an estimate is requested. Its current guidance says these estimates generally cover one provider or facility at a time, so request them from each organization involved. A practice’s marketing quote should not be assumed to cover all separate bills. [5]

Put the documents side by side before paying a deposit. Check that an anesthesia estimate and a facility estimate refer to the same proposed operation. Ask who will reconcile discrepancies and provide the final written answer. Keep dated copies and subsequent changes. This simple paperwork exercise makes a later conversation more concrete: both you and the practice can refer to the same description, rather than different recollections of what an appealing package name appeared to promise.

Six lines to clarify in a surgical quote

Component	Ask the practice	Record in writing
Operation	Which procedures and treatment areas?	Named scope and responsible surgeon
Anesthesia	Who provides it; what can change the fee?	Provider, estimate and time assumptions
Facility	Where is surgery and recovery?	Address, charges and oversight
Supplies	Which devices, garments and medicines?	Included items and separate purchases
Follow-up	Which visits and for how long?	Schedule and extra-visit policy
Later care	What if complications or revision arise?	Responsibilities, exclusions and possible new fees

04 / VERIFY THE CARE

The provider and the setting belong in the comparison

04

When a quote looks attractive, investigate the people and setting with the same attention you give its total. For a plastic surgeon who claims American Board of Plastic Surgery certification, verify the name through the ABPS database. Check the state medical board separately for licensure and available disciplinary information. ABPS explains that certification is a voluntary credential involving training and written and oral examinations; its verification service also directs patients to state licensing information. [6]

Ask for the actual address where surgery will take place, not only the consultation address. ASPS describes accredited facilities as meeting standards for equipment, operating-room safety, personnel and surgeon credentials. It also advises checking the accreditation or licensing of a separate overnight recovery facility. Ask which organization oversees the proposed setting, how anesthesia will be provided and what the emergency transfer plan involves. These questions make the facility portion of a quote understandable as a care service, rather than a mysterious surcharge. [7]

Price comparison should leave room for conversation about your health and expectations. A quote delivered before an adequate assessment may change when the clinical plan becomes clear. Ask when you will meet the operating surgeon, how your concerns will be documented and who answers after-hours questions. Verification supports an informed choice; neither a credential nor an expensive facility can promise an uncomplicated operation or a particular cosmetic result.

- Verify the operating surgeon, not just the practice name.
- Confirm the address and oversight of the surgical facility.
- Know the arrangements for urgent and overnight care.

SAFETY AND DECISION CHECKPOINTS

A headline price with no written explanation of inclusions or exclusions.

Pressure to pay before meeting the operating surgeon or understanding the plan.

Unclear surgeon credentials, surgical location or emergency-care arrangements.

Claims of a guaranteed result, risk-free surgery or unconditional financing without contract details.

05 / READ THE PAYMENT TERMS

A small monthly payment is not the total price 05

Financing can make a price look smaller without changing the amount charged for surgery. Before comparing payment options, obtain the cash price and the complete credit terms. Identify the lender, annual percentage rate, fees, payment schedule and total repayment. The Consumer Financial Protection Bureau explains that medical credit cards and payment plans can carry risks, including deferred interest. With some offers, failing to clear the balance within the promotional period can trigger interest on the original purchase from its date. Read the actual contract rather than interpreting “no interest if paid in full” as an unconditional promise. [8]

Also request the practice’s written rules for deposits, cancellation, rescheduling and medical postponement. Ask what happens if the surgeon decides the operation should not proceed, and how any refund reaches a third-party lender. These are questions for the specific contract, not assumptions that all US practices follow one policy. A deadline attached to a promotional price should not substitute for understanding the clinical plan or obtaining answers. Explain the agreement in your own words.

If insurance might be relevant, ask your insurer for its own coverage determination. ASPS notes that cosmetic breast augmentation usually is not covered and that associated complications may also be excluded. [2] Do not treat an office’s expectation as a benefit guarantee. This article does not choose a loan or spending limit for you; its purpose is to make the obligations visible before a commitment.

- Compare total repayment as well as monthly installments.
- Read deferred-interest conditions in the lender’s contract.
- Get deposit and medical-postponement rules in writing.

ASK AT YOUR CONSULTATION

- 01 What exact operation does this estimate cover, and which proposed additions are optional?
- 02 Will the surgeon, anesthesia provider and facility issue separate estimates and bills?
- 03 Which costs change if the operation takes longer than anticipated?
- 04 What follow-up visits are included, and how do I obtain help outside office hours?

06 / MAKE THE DECISION

Leave the consultation with answers, not pressure

06

A productive consultation connects your goal to an appropriate plan, its limitations and the practical demands of recovery. ASPS suggests preparing questions and using the meeting to understand what the surgeon can realistically offer. [9] Bring a short account of what bothers you, relevant medical information and the questions in this guide. If two surgeons suggest different procedures, explore why before trying to negotiate their prices into agreement. Different recommendations may reflect different treatment priorities; another conversation may clarify the comparison.

Before scheduling, you should be able to describe the proposed operation, expected support at home, follow-up arrangements and financial commitments without relying on an advertisement. ASPS recommends asking about candidacy, complications and options if the result is unsatisfactory. [10] Your decision may be to proceed, seek another opinion, postpone or decline surgery. A well-run consultation can support any of these outcomes. An unanswered practical question deserves a written reply; an unanswered medical question deserves discussion with the responsible clinician.

After treatment, compare each bill against its corresponding estimate. CMS says a bill from one provider or facility that is at least \$400 above that provider's estimate may qualify for the federal patient-provider dispute process. The process generally must start within 120 days of receiving the initial bill, and eligibility requirements apply. [5] Keep the relevant paperwork together. The enduring value of a good quotation is that it makes the promised scope of care and the anticipated charges understandable before and after your decision.

- Resolve clinical differences before comparing two totals.
- Keep the decision separate from promotional pressure.
- Match each later bill to the relevant written estimate.

BEFORE YOU MAKE A DECISION

01 What would I owe for treatment of a complication or a later revision?

02 What are the cancellation, rescheduling and medically necessary postponement terms?

03 If credit is offered, what are the APR, fees, promotional conditions and total repayment?

04 Which questions must we resolve before I can make an informed decision?

REFERENCE DESK

Sources & editorial notes

07

Sources checked September 27, 2026. Bracketed numbers in the article refer to the references below. Open the linked source titles for the original guidance.

[1] American Society of Plastic Surgeons 2024 data; released 2025
[2024 Plastic Surgery Statistics Report: Average Surgeon/Physician Fees, p. 28 \(historical report\)](#)

[2] American Society of Plastic Surgeons Accessed September 27, 2026
[Breast Augmentation Cost](#)

[3] American Society of Plastic Surgeons 2023
[Understanding plastic surgery costs in the United States](#)

[4] American Society of Plastic Surgeons 2026
[The real cost of plastic surgery: How to budget for procedures and maintain your results](#)

[5] Centers for Medicare & Medicaid Services Updated August 25, 2026
[Know your medical bill rights when not using insurance](#)

[6] American Board of Plastic Surgery Accessed September 27, 2026
[Is your Surgeon Certified?](#)

[7] American Society of Plastic Surgeons Accessed September 27, 2026
[Patient Safety: Accredited Facilities](#)

[8] Consumer Financial Protection Bureau Accessed September 27, 2026
[What should I know about medical credit cards and payment plans for medical bills?](#)

[9] American Society of Plastic Surgeons 2025
[What do I need to know? Tips and tricks for aing your plastic surgery consult](#)

[10] American Society of Plastic Surgeons Accessed September 27, 2026
[Questions to Ask Your Plastic Surgeon](#)

Historical fee data: the ASPS 2024 table was verified in the indexed official report; its archived PDF link was unavailable during direct retrieval. The figures are historical benchmarks, not current quotations.

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