



23.11.23

## Government on notice to pay for dental care for our most vulnerable populations

### Radio grabs attached

**DENTISTS TODAY issued the Federal government a plea** – set up dental schemes for our most vulnerable populations including seniors - or take responsibility for the oral health decline of millions of Australians.

“We made our case loud and clear at the Senate inquiry into dental access currently underway - prioritise setting up affordable dental schemes for seniors, Aboriginal and Torres Strait Islanders, the disabled and those on low wages,” said the new Australian Dental Association (ADA) President Dr Scott Davis, who stepped into the peak body top role yesterday.

“Then the Federal Government would be going a long way to addressing one of the biggest health crises we’re facing right now. The Health Minister Mark Butler has inferred he’d work with us on achieving this once the Senate Inquiry releases its findings early next year – so the ADA looks forward to working with him and the Department of Health putting those words into actions.”

Dr Davis, a Port Macquarie prosthodontist, added: “The remedy to fix this problem is so simple and provides a safety net for the disadvantaged.

“Don’t try and shoehorn dentistry into Medicare - that would cost at least \$7.6 bn a year. Instead utilise the existing Dental Benefits Act legislation and the Child Dental Benefits Schedule framework to set up a similar scheme for the nation’s 200,000 seniors in aged care. That would cost just \$100 m a year which is a drop in the ocean in comparison.

“Known as the Seniors Dental Benefit Schedule, the ADA has been pushing hard for this for years. Then set up similar schemes for Aboriginal and Torres Strait Islander populations, for the disabled and those on low incomes.

“It’s not hard and it’s a whole lot cheaper and more financially sustainable than putting dental into Medicare when all that will do is provide the most very basic care for most Australians and won’t pay for much beyond the occasional checkup and clean.”

With dentists’ fees under scrutiny recently, it’s helpful to understand that dentists require highly complex medical and dental equipment, skilled operators and staff, medicines and materials to deliver safe and quality dental care, with each room in a practice costing \$100,000 to set up and then high ongoing operating and regulatory costs.

“That’s why 70% of the costs of running a dental practice come from overheads. And despite cost of living pressures and the upswing in the price of the goods and services needed to keep a practice going, clinicians haven’t passed on these higher costs to the consumer.

“Our bi-annual fee survey of our 17,500 members shows that from 2020 to 2022 dental fees only went up by 3.7% which is less than half the cost of inflation.”

When it comes to affording dental, dentists’ advice to consumers to keep their dental costs down:

\* see the dentist regularly and you’ll be more likely to get a modest fee compared to leaving it years when things have deteriorated and you could face a more costly remedial procedure,



\* act preventatively – brush twice a day with a fluoride toothpaste and floss daily, and this will go a long way to protecting your mouth health,

\* ensure you're not having more than the 24g of added sugar a day in your diet, the maximum recommended limit,

\* if you have children under 17 you may be eligible for the CDBS which provides \$1,056 of treatments every two years - your dentist can help you work out if you're eligible,

\* if you're looking at needing more treatments than just a basic checkup, such as a crown or implant, it helps to get a second opinion, and

\* instead of costly private health insurance (PHI) with extras' cover for dental, consider setting up a savings account and putting away a modest amount every week - that way your savings don't disappear if you don't use them, which is what happens if you haven't used up all your PHI entitlements by the end of the year.

## **NOTES TO EDITORS**

\* The ADA put its case for an overhaul of dental access in Australia at the Select Committee into the Provision of and Access to Dental Services in Australia in late October. The final report of the Senate Select C'tee is due next February. The C'tee has been responsive to the ADA position on dental access and funding, and the peak dental body remains optimistic that the C'tee will include our recommendations to the Federal Government.

\* The current public system while proving excellent care, is drastically underfunded and oversubscribed so people wait two or more years for appointments. Also with the short-term arrangements under Future Funding Agreements (FFA), dentists don't have job security of more than two years at a time, so the system disincentivises dentists from working in the public sector.

\* Funding for the public dental system currently only covers 30% of those eligible, leaving the vast majority languishing without care.

\* 85% of dentistry in Australia is done by dentists in the private sector, some for public patients with a healthcare card under the FFA voucher system – but the majority is for private patients. Some of these private patients have private health insurance and some don't. Using the CDBS model solves the issue of access by allowing those that qualify under the Dental Benefits Act to access private infrastructure.

### **Oral health statistics:**

(i) Child decay stats: 1 in 3 kids has experienced decay and 1 in 4 has untreated tooth decay, while 10 kids in every 1,000 are hospitalized annually for dental conditions.

(ii) Adult decay stats: 1 in 3 adults has untreated tooth decay and 1 in 3 have untreated periodontitis which if left untreated is a precursor to a range of serious health issues from heart disease to Alzheimer's, stroke, kidney disease and low birthweight and premature babies.

(iii) Dental decay: is Australia's most preventable health problem which results in dental spending of \$4.5 bn in 2019-2020 alone.

**To interview Dr Davis (pictured), call Federal ADA Media Advisor Jenny Barlass 0484 869 086.**

**Radio grabs attached for use.**