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Mr Ian Holland
Committee Secretary
Senate Standing Committee on Community Affairs

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Dear Mr Holland

RE: INQUIRY INTO THE DENTAL BENEFITS AMENDMENT BILL 2012

Thank you for the opportunity to comment on the Commonwealth Government's Dental Benefits Amendment Bill 2012.

The South Australian Department for Health and Ageing (SA Health) welcomes the announcement of the Commonwealth Government's dental care package. The package provides for a significant national investment in the dental health of Australians. SA Health looks forward to working with the Commonwealth Government to explore the opportunities that will follow for people in South Australia.

SA Health welcomes the first step in the Commonwealth Government's dental care package, the establishment of the Child Dental Benefits Schedule. Numerous studies, including *Healthy Mouths Healthy Lives: Australia's National Oral Health Plan 2004-2013*, have found that good child oral health outcomes are a cost-effective longer-term strategy to deliver improved population-wide oral health into the future.

SA Health supports:

- the proposed extension of the age range from the current situation, which provides eligibility to children aged 12 to 17 years, to children aged 2 to 17 years; and
- the extension of dental care that is covered under the Child Dental Benefits Schedule to incorporate basic dental prevention and treatment services with a cap proposed to be \$1,000 for a consecutive two calendar year period.

I note that the Dental Benefits Amendment Bill 2012 Explanatory Memorandum indicates that other aspects of the Child Dental Benefits Schedule will be established under the Dental Benefits Rules. As the revised Dental Benefits Rules are developed SA Health believes the following issues require further exploration and discussion:

1. **Removal of any workforce related barriers that prevent or impede both public and private dental providers optimising use of the dental workforce.**

For example *Healthy Mouths Healthy Lives: Australia's National Oral Health Plan 2004-2013* calls for the removal of regulatory and legislative barriers to enable the greater use of dental auxiliaries, including dental therapists, dental hygienists and oral health therapists, in the provision of dental care in Australia.

The current *Dental Benefits Rules 2009* only allow dental therapists, dental hygienists and oral health therapists to provide services under the existing Teen Dental Plan on behalf of dentists and dental specialists. One way of ensuring the dental workforce can be most efficient will be to award Medicare Provider Numbers to dental therapists, dental hygienists and oral health therapists.

2. **The formation of a schedule of preventive and treatment items.**
SA Health believes the schedule of dental services outlined in the *Report of the National Advisory Council on Dental Health Feb 2012 (Appendix K)* will be a useful reference in determining the dental items to be included in the Child Dental Benefits Schedule.
3. **Additional information regarding variations in the application of Child Dental Benefits Schedule and Fees in the public and private sectors.**
For example will private dentist Medicare rebate fees be the same as those applied in the public sector? Will private providers be able to charge a gap payment? Will public providers be able to charge a gap payment?

Should you require further information about the content of this submission, please contact Dr Martin Dooland, Executive Director, Statewide Services on telephone (08) 8222 9064 or email: martin.dooland@health.sa.gov.au.

Yours sincerely

DAVID SWAN
Chief Executive

11/10/11 ✓