

Senate Community Affairs Legislation Committee

BUDGET ESTIMATES - 29 MAY 2012 ANSWER TO QUESTION ON NOTICE

Human Services Portfolio

Topic: Chronic Disease Dental Scheme

Question reference number: HS 24

Senator: Di Natale

Type of question: Hansard pages 115-116

Date set by the committee for the return of answer: 27 July 2012

Number of pages: 2

Question:

- a) Senator DI NATALE: Do we have a sense of what proportion of patients has returned for continuing care after the initial course of treatment?
Mr Rimmer: We do not have that information.
Senator DI NATALE: In other words, the proportion of people who have had only one course of treatment versus those who have returned for continuing care?
Mr Rimmer: We do not have that information with us. We will see what we can provide on notice.
- b) Senator DI NATALE: I want to see if I can get a breakdown of the people who have had an initial course of care versus those who have returned for subsequent courses of care, to determine whether there is a difference in cost. My contention would be that there would be, hopefully, a reduction in costs once somebody has had that initial course of care. I just want to establish that.
Ms Cooke: We would have to take that on notice.
- c) Senator DI NATALE: Okay. The next question that flows on from that is: what is the average cost of treatment for patients who are returning at least a year after the initial course of care for subsequent treatment?
Mr Rimmer: Again, we will have to take that on notice.
- d) Senator DI NATALE: Okay. What is the proportion of people who access treatment who are healthcare cardholders?
Mr Rimmer: We would have to take that on notice.

Answer:

Note: There is no commonly accepted definition of 'a course of treatment'. The data provided in this response relates to treatment provided to a patient during the relevant two calendar year eligibility period. For example, if the patient's first dental service is on 15 November 2009, the applicable two year period will be the 2009 and 2010 calendar years. The next two year period commences in the calendar year that the patient receives their next dental service.

The 2008-2009 and 2010-2011 periods are used in the responses below as they represent the only two complete, consecutive two-year eligibility periods under Chronic Disease Dental Scheme.

- a) Of the 117,640 patients who first accessed the Chronic Disease Dental Scheme in 2008 (for their 2008-2009 eligibility period), 45,533 (39 per cent) received further treatment in the 2010-2011 eligibility period.
- b) and c) In respect of the patients who first accessed the Chronic Disease Dental Scheme in 2008 and went on to receive subsequent treatment in the 2010-2011 eligibility period, the average benefit paid over the eligibility period of 2008-2009 was \$2,932.34. The average benefit for these patients for the 2010-2011 eligibility period was \$2,216.07.
- d) The Department of Human Services does not record the concessional status of patients receiving treatment under the scheme, as patient eligibility for treatment is not linked to Health Care Card entitlement.