

medicare

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1 JOHN A CITIZEN

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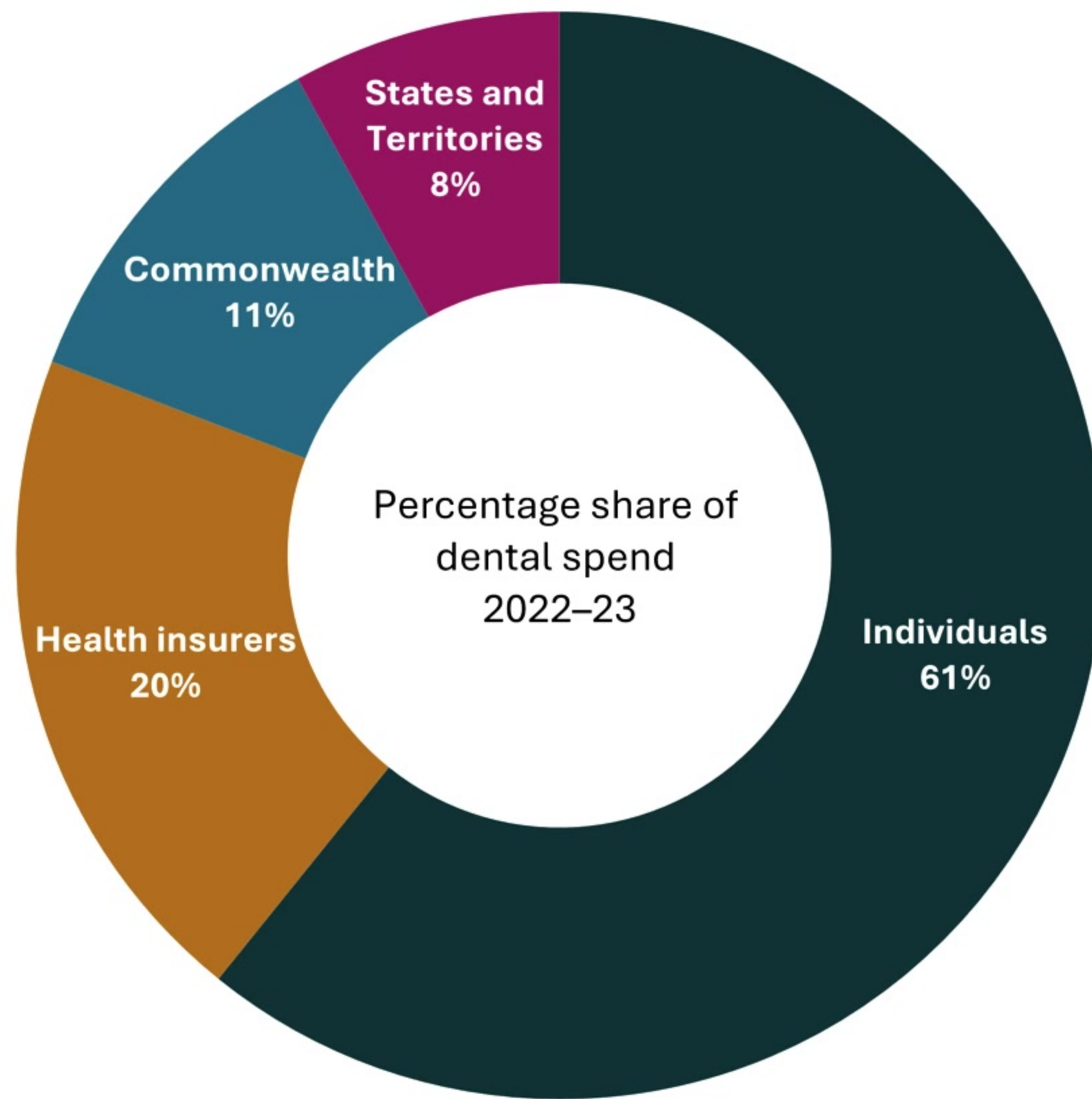
4 JESSICA A CITIZEN

Oral health care system in Australia

VALID TO 08/2020

Who pays for dental services in Australia?

In 2022–23, \$12.5 billion was [spent on dental services](#) in Australia. Individuals spent more than \$7.6 billion, health insurers close to \$2.5 billion, the Commonwealth nearly \$1.4 billion, and state and territory governments nearly \$1 billion.



History of public dental funding in Australia

A shared responsibility: State delivery, Commonwealth support



Not in Medicare

Unlike medical care, dental care has never been included in Medicare.



State led, Commonwealth supports

States and territories have always delivered public dental services, with funding help from the Commonwealth.



Focus on need

Programs have mainly targeted children, vulnerable people, and those with specific health conditions.

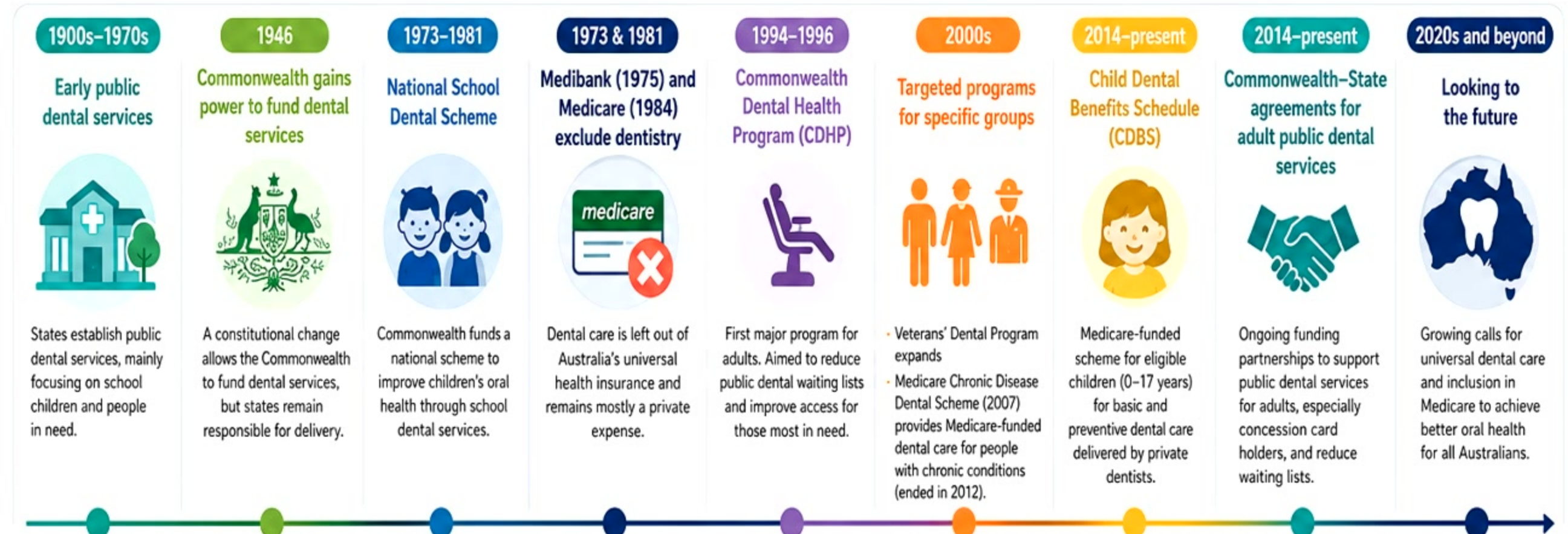


Still evolving

Australia continues to debate how to make dental care fairer, more accessible and affordable for all.



KEY MILESTONES



HOW FUNDING WORKS TODAY



THE BIG PICTURE



- ✓ Australia has never had universal public dental coverage.
- ✓ Funding has focused on children, vulnerable people and those with specific health needs.
- ✓ States deliver the services; the Commonwealth provides support.
- ✓ Better oral health improves overall health, equality and quality of life.

THE GOAL



A fair and accessible dental system where every Australian can get the care they need to keep their mouth healthy and their body healthy.

Funding of health care in Australia – a shared responsibility

Table 1: Funding sources for health services in Australia²⁸

Commonwealth Government	• Medical services through the MBS (both referred and non-referred medical services, as well as some allied health services) • Limited dental services • Pharmaceuticals through the PBS • Community-controlled Aboriginal and Torres Strait Islander primary healthcare • Aged care services (including residential aged care and home care) through the AN-ACC residential aged care funding model, as well as capital grants and programs • Contributions to support access to private health insurance, such as the private health insurance rebate • Health and medical research through the National Health and Medical Research Council • 45 per cent of public hospital activity service delivery (under the National Health Reform Agreement 2020-2025)
State and territory governments	• 55 per cent of public hospital activity service delivery (under the National Health Reform Agreement 2020-2025) • Ambulance services • Limited dental services • Some community and public health services • Some medical research
Local governments	• Public health promotion • Community health services
Non-government organisations	• Charitable healthcare services, such as medical clinics • Health promotion initiatives and educational programs
Private health insurers	• Private health services delivered in public hospitals • Services delivered in private hospitals • Some community services • Some dental services • Medicines • Some referred medical services • Some allied health services • Some medical research
Patients	• Out-of-pocket expenses (medical, dental, diagnostic investigation and allied health services) • Private health insurance premiums, excess payments • Medicine costs • Medicare levy and Medicare levy surcharge

Commonwealth (federal) government based dental services

Child Dental Benefit Schedule (CDBS) and other Medicare schemes

Federation Funding Agreement (FFA) for adult public dental services

National Health Reform Agreement (NHRA)

Private Health Insurance (PHI) rebates

Grants to the Royal Flying Doctors Service (RFDS)

The Department of Veterans' Affairs dental program.

Research

The Northern Territory Remote Aboriginal Investment Oral Health Program (NTRAI OHP)

Aboriginal community controlled health services (ACCHS)

State government based dental services (Western Australian context)

1. Dental Health Services

- a. School Dental Service
- b. General Dental Service
- c. Special Dental Service
 - i. Aged care facility (visiting program)
 - ii. Special Needs Clinic
 - iii. Prison dental service
 - iv. Disability Service Commission clients
 - v. Visiting services to Royal Perth Hospital and Graylands Hospital.
 - vi. Specialist services at Fiona Stanley Hospital
- d. Dental Subsidy Schemes
 - i. Country Patients Dental Subsidy Scheme (CPDSS)
 - ii. Metropolitan Patients Dental Subsidy Scheme (MPDSS)
 - iii. Private Orthodontic Subsidy Scheme (POSS)

2. Aboriginal Medical Services

3. Oral Health Centre of Western Australia: Only tertiary teaching specialist dental hospital in WA.

How much
of dental
care is
covered by
Medicare??



Australian Government

Services Australia

medicare

How does Medicare work?

1. Funded by Australian tax-payers (2% of their taxable income).
2. Service offered to ANZ citizens, Permanent residents, those applied for permanent residency, temporary residents covered by a Ministerial order, permanent resident of Australian overseas territories, and reciprocal health care arrangement with other country.
3. Parallely costs for most medicines under the Pharmaceutical Benefits Schedule (PBS) are covered and cost of many prescribed medicines are subsidised by the government.

Payment offered

Full schedule fee for GPs

85% of scheduled fee for a specialist.

75% of scheduled fee for in hospital services.

In addition, a Medicare Safety Net and PBS safety net is provided to individuals with extensive health care needs.

Medicare: <https://www.healthdirect.gov.au/what-is-medicare>

Pharmaceutical Benefits Scheme, <https://www.healthdirect.gov.au/pharmaceutical-benefits-scheme-pbs>



Medicare Benefit Schedule and Dental Care

Does Medicare cover costs of general dental care? **Mostly, NO!!**

But some dental/maxillofacial services are provided by:

1. **Child Dental Benefit Schedule** for ***eligible children*** (up to AU\$ 1,158) over a relevant two calendar year period for basic dental services.

Eligible children (0-17 years old), eligible for Medicare and receive a relevant Australian Government payment.



Guide to the Child Dental Benefits Schedule (CDBS)

2. ***Oral and Maxillofacial services***: relevant benefit and extended Medicare safety net for each applicable scheduled service.
3. ***Cleft Lip and Cleft Palate Services***: to those under 28 years, enrolled in Medicare, diagnosed with an eligible cleft and craniofacial condition to cover general dental, paediatric, orthodontic, prosthodontic and oral surgical work.

Child Dental Benefit Schedule



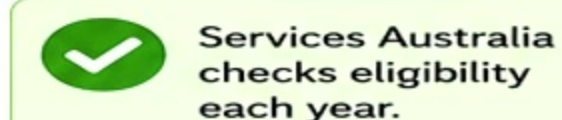
Child Dental Benefits Schedule (CDBS)



Helping eligible Australian children access dental care

1. WHO CAN GET IT?

Your child may be eligible if they:



2. WHAT IS COVERED?

Basic dental care

- Dental check-ups
- Dental x-rays
- Teeth cleaning
- Fissure sealants
- Fillings
- Root canal treatment
- Partial dentures (when clinically required)

The scheme provides up to **\$1,158** over two consecutive calendar years.

3. WHAT IS NOT COVERED?

- Braces and orthodontics
- Cosmetic dental treatment (e.g., teeth whitening)
- Dental treatment provided in hospital operating theatres
- Other services outside the CDBS schedule

i Ask your dentist if you are unsure about a treatment.

4. HOW DOES IT WORK?



Up to \$1,158 over 2 years for eligible children

Cleft and Craniofacial scheme

Cleft & Craniofacial Conditions Medicare Services

Medicare-funded dental and surgical treatment for eligible patients with cleft and craniofacial conditions.

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Australian Government
Services Australia



No age restrictions

Since November 2023, eligible patients of any age can access treatment according to clinical need.

WHO IS ELIGIBLE?



- ✓ People with an eligible cleft lip and/or palate
- ✓ People with eligible craniofacial conditions
- ✓ Must be enrolled in Medicare
- ✓ No age limit (since Nov 2023)

Diagnosis must be made by an eligible health professional.

WHAT SERVICES ARE COVERED?



DENTAL CARE

- Dental examinations
- Preventive care
- Fillings and restorations
- Tooth extractions



SPECIALIST DENTAL CARE

- Orthodontic treatment
- Paediatric dentistry
- Prosthodontic treatment (including some prostheses)



SURGICAL CARE

- Oral and maxillofacial surgery
- Surgical dental procedures
- Simple and surgical tooth extractions



Treatment is tailored to individual needs and may involve a team of dental and medical specialists.

WHO CAN PROVIDE TREATMENT?



Dentists



Paediatric Dentists



Orthodontists



Prosthodontists



Oral & Maxillofacial Surgeons

Not all providers are registered or familiar with Category 7 claiming – ask before treatment begins.

HOW DOES IT WORK?

1



DIAGNOSIS

Eligible cleft or craniofacial condition identified by an eligible health professional.



2



REFERRAL

Referral to an eligible dental specialist or provider (if required).



3



TREATMENT

Care provided using Medicare Category 7 MBS item numbers.



4



MEDICARE BENEFIT

Medicare contributes to the cost of eligible treatment.

IMPORTANT THINGS TO KNOW



No age restriction for eligible patients.



Some services require a referral.



Patients may still have out-of-pocket costs if provider fees exceed the Medicare rebate.



Providers must use the relevant Category 7 MBS item numbers.



Not all services or items may be covered in every situation. Ask your provider for details.



CONDITIONS COVERED

In addition to cleft lip and palate, a range of eligible craniofacial anomalies and certain rare developmental conditions are included under Medicare Category 7.

Ask your health professional for more information.



WHY IT MATTERS

- ✓ Improves access to specialised oral healthcare
- ✓ Reduces financial barriers to treatment
- ✓ Supports people with complex congenital conditions
- ✓ Integrates dental and medical care across the lifespan



For more information

Visit servicesaustralia.gov.au/cleft-and-craniofacial-conditions

or call Services Australia on 132 011

This information is of a general nature. It does not take into account your individual circumstances. Please visit the Services Australia website for more information.

Current as at May 2024

Dental Workforce - Dentists

- The number of full-time dentists in Australia was 61.1 per 100,000 population.
- The number of full-time equivalent oral health therapists was 9 per 100,000 population
- 84% of dentists work in private sector and 4.6% public clinics. Victoria has the lowest dentists in public dental service while NT had the highest.
- Five in 10 dentists work part-time (50%).
- Largest group of specialists in Australia are Orthodontists (34%) of all dental specialists with nearly 68% of them were male.

Data as of 2023

Public dental services – source of funding – A summary

Public dental service	Source of funding
Child Dental Benefit Scheme	Australian Government (Federal)
School Dental Service	State Funded
Cleft lip and cleft palate services	Australian Government (Federal)
Oral and Maxillofacial Services	Australian Government (Federal)
Private Health Insurance Incentive Scheme	Australian Government (Federal)
Aboriginal Oral Health	Australian Government (Federal) → Community controlled Aboriginal primary dental care via National Aboriginal Community Controlled Health Organisations. State funded → Aboriginal Medical Services
Refugee dental care	Australian Government (Federal)
Prisoner dental care	State Funded
Aged care dental services	State (very little) – Sadly very little funding
Disability dental service	National Disability Insurance Scheme does not cover dental but does in exceptional circumstances.
Dental Teaching Hospitals	Mix of State and Federal Funding
Armed forces	Australian Government (Federal) via Royal Australian Army Dental Corps

BUDGET 2026-27 DENTAL CARE AT A GLANCE

What it means for you and your family



1. CHILDREN Child Dental Benefits Schedule (CDBS)

- Continues for eligible children aged 0-17 years
- Up to **\$1,158** available over 2 years (indexed from 2026)
- Covers check-ups, cleans, X-rays, fillings and extractions
- Does not cover orthodontics or cosmetic dentistry



2. ADULTS Public Dental Services - BIG UPDATE

- \$431 MILLION** federal investment
- PERMANENT** Commonwealth funding established
- Supports dental care for:
 - Concession card holders
 - Low-income adults
 - Eligible public dental patients
- Services are delivered through state and territory public dental systems



3. WHAT DID NOT CHANGE?

- No universal dental care under Medicare
- No major expansion of dental benefits for adults outside public dental schemes
- No Senior Dental Benefits Schedule announced in the Budget

SHARED RESPONSIBILITY

COMMONWEALTH GOVERNMENT



- Funds the Child Dental Benefits Schedule (CDBS)
- Provides ongoing funding for adult public dental services



STATES & TERRITORIES

- Operate public dental clinics
- Manage eligibility and waiting lists
- Deliver treatment services



KEY MESSAGE

Budget 2026-27 strengthens existing dental programs rather than introducing universal dental care.



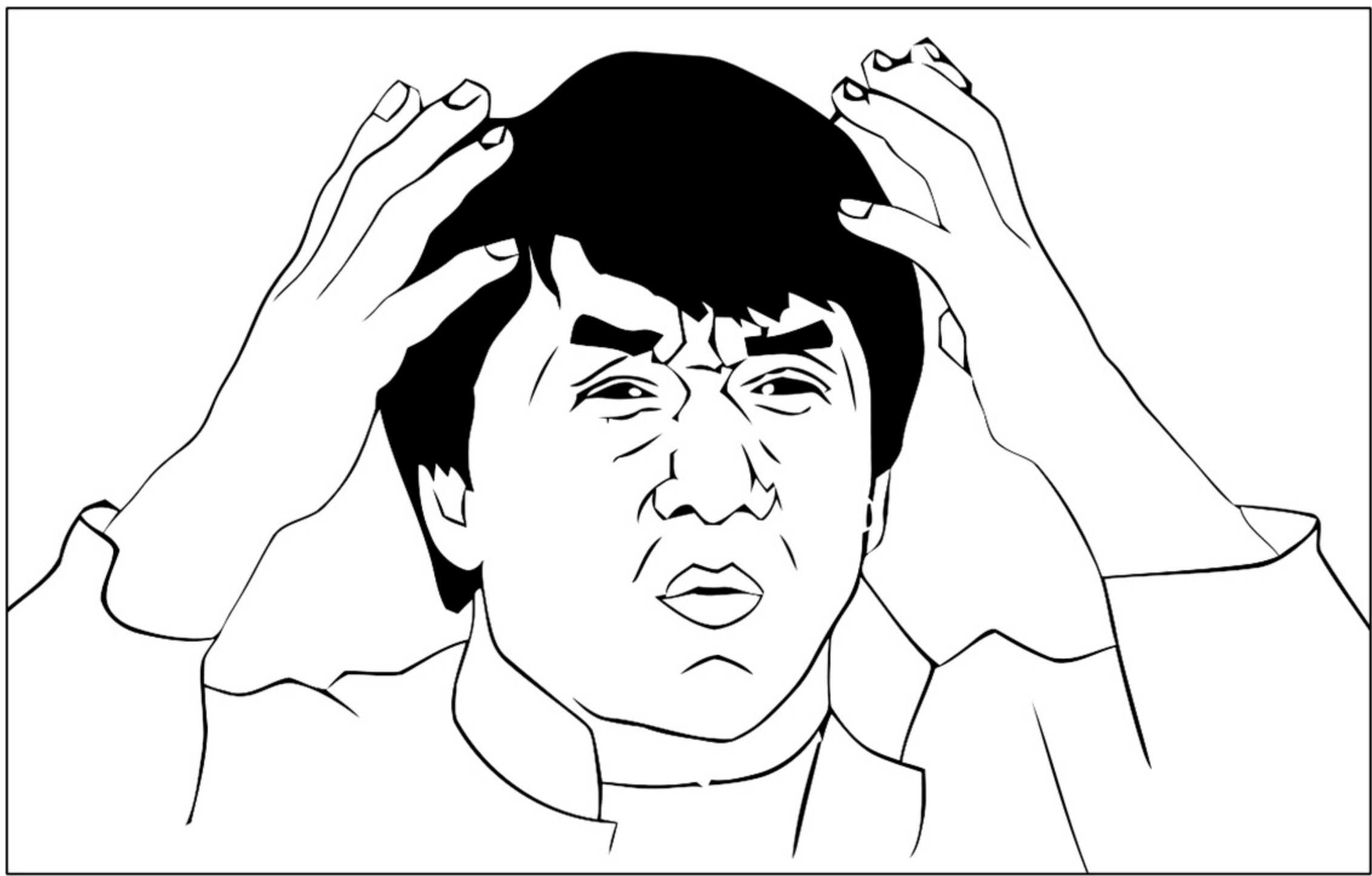
- Ongoing support for children through CDBS
- Permanent funding certainty for public adult dental services
- States remain responsible for delivering most public dental care

Is the oral health system working??

“When we were diagnosed with diabetes, we weren’t even told that our teeth were an issue by the doctor”

“Honestly it is too expensive. I have got three holes in my teeth, cavities, and I cannot afford to go to the dentist. Because my money is going on things that I think are more important like my house, power, everything else, food”

“If we look at access to health care – a lot of them won’t go to the doctor until something is seriously wrong. So, if they are not going to do that in general day to day health, you’ve got Buckley’s of getting anyone going to see the dentist. ‘Oh, I need to go and see a dentist for an appointment just for my regular check-up’ – it’s not going to happen”





OVERALL REVISION



1. Factors that influence development of health systems.
2. Components of a health care system.
3. Health care delivery models – global context.
4. Structure of Health System in Australia
5. Medicare and dental care.
6. Funding sources of public dental schemes

Thank you!!

