

With the formal tabling of the Federal Budget tonight, Australia has been handed a dental funding proposal wholly deficient in its ability to meet the needs of the Australian public.

While the government has made much of its \$5 billion allocation to dental services, hailing its newly-announced Child and Adult Public Dental Scheme, a replacement for the Child Dental Benefits Schedule (CDBS), as a significant increase in funding, it has been confirmed in papers provided during tonight's budget "lock-up" that dental funding has in fact decreased overall.

Not only has the amount apportioned to dental services decreased, but the number of eligible people to access these services has gone up markedly, from 3.4 million children under the CDBS to more than 10 million adults and children for its replacement. This means that eligible recipients could receive as little as \$42 per head of Commonwealth funded dental treatment.

The positive aspects of the proposed scheme include surety of funding for States and Territories for the next four years. In a system that is already stretched to capacity, however, state and territory governments will need to increase, or at least maintain, their supply of publicly-provided dental services to make sure they receive a requisite share of available funding. The funding is also activity based - money is allocated based on the number and mix of patients treated - so taxpayers and governments will be able to see the kinds of services their budget allocation is delivering. Unfortunately there is no certainty these allocations will result in any outsourcing to the private sector.

When questioned about what happens if the legislation does not pass both houses, a spokesperson from Department of Health indicated that, in that event, the CDBS would continue.

What else?

A number of tax benefits for small businesses with a turnover of up to \$10 million per annum were announced that will impact positively on many dental practices. Also the announcement of increased taxation on cigarettes is welcomed, but the ADA believes the government needs to take this kind of public health initiative a step further with the introduction of a sugar tax to help combat a range of endemic health problems.

The announcement of a newly formed "Private Health Sector Committee", which will provide technical and specialist advice on designing and implementing the governments private health insurance reforms, was less than impressive, considering the fanfare made about the recent private health insurance review and the lack of big announcements in this budget concerning the industry. Even so, recognising the importance of having a seat at the table, the ADA reinforced its experience with issues surrounding private health insurance and its potential value as a member of the committee, to the departmental representatives present.

What now?

The ADA's intention is to continue the fight to #savetheCDBS

All budgetary measures must be approved by both the House of Representatives and the Senate and while this takes place, the ADA will continue to meet with key politicians, and seek to garner more signatures for the petition to retain the existing dental benefits scheme.

In this critically-important election year, this is one issue the ADA will be working tirelessly to ensure stays at the top of the agenda.

Disclaimer: this information is of a general nature and should not be viewed as representing financial advice. Users of this information are encouraged to seek further advice if they are unclear as to the meaning of anything contained in this article. Bstar accepts no responsibility for any loss suffered as a result of any party using or relying on this article.

For more information Contact:-

Office: 86-90 Bay Street, Broadway, NSW, 2007
Mail: PO Box 537, Broadway, NSW, 2007
Phone: +61 2 9211 5977 | Fax: +61 2 9281 8424
Email: gpl@gplsolutions.com.au
Website: www.gplsolutions.com.au