



**REPORT TO:** Co-Chairs and Members of  
Public Health and Social Services Committee

**SUBJECT:** Service Delivery Model Improvements for Dental Services  
Provided to Children and Adults in Receipt of Ontario Works

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## **RECOMMENDATION**

That this Committee recommend to Regional Council that this report be received for information.

## **EXECUTIVE SUMMARY**

- The *Ontario Works Act* (OWA) allows for the provision of financial assistance, mandatory and discretionary benefits.
- Mandatory benefits are provided to individuals and families who are eligible for Ontario Works assistance. Under the OWA, dependent children and children in temporary care receive mandatory basic dental coverage.
- Dental care for adults is a discretionary benefit approved on a case-by-case basis within the context of dental services which are necessary to relieve pain or for medical or therapeutic reasons; and/or dental care which supports the person's employability or participation requirements.
- In 1998, Council approved PHD 2-98/SSSCD 36-98 authorizing Public Health to manage the provision of mandatory dental services to Ontario Works (OW) dependent children. In 1999, Public Health began offering the dental clinics to people who are homeless through the Health Bus. In 2003, Public Health also began to manage the provision of discretionary dental services to OW adults.
- Beginning in January 2010, Community Services will change the current service delivery model in order to improve the provision of dental services to Health Bus visitors, OW children and adults experiencing dental pain.

## **FINANCIAL IMPLICATIONS**

There will be no net increase to the Regional levy as a result of the service delivery changes. The 2009 approved budget provides dental services for children, adults and Health Bus visitors as well as administration supports provided by Public Health's Dental Program. A comparison of the 2009 approved budget against the new service delivery model budget is as follows:

Current Delivery Model			New Direct Access Delivery Model		
	Administration	Dental Services	Administration	Dental Services	% change from current budget
OW Children Mandatory	\$ 202,440	\$ 540,000		\$ 683,408	21% increase
Adults Discretionary	\$ 101,220	\$ 198,856		\$ 234,708	15% increase
Health Bus	\$ 0	\$ 33,500		\$ 33,500	0%
Total Administration	\$ 303,660		\$ 124,400		59% decrease
Total Treatment Dollars		\$ 772,356		\$ 949,616	

## PURPOSE

This report has been prepared to provide information to Committee and Council regarding improving delivery of dental services for Health Bus visitors and children and adults in receipt of OW in Niagara.

## BACKGROUND

Under the OWA, financial assistance includes mandatory and discretionary benefits for eligible recipients. Mandatory benefits are provided to all eligible OW recipients and/or members of their family. These benefits include prescription drug coverage, vision and dental care for children. This dental coverage is outlined in the Ministry of Community and Social Services (MCSS) Schedule of Dental Services and Fees for Mandatory Dental Coverage. Costs are shared 80/20% with MCSS.

Dental services were expanded to Health Bus visitors in 1999. Niagara Region pays 100% of the treatment costs for Health Bus visitors who are not in receipt of OW.

Discretionary benefits are provided on a case-by-case basis to individuals in receipt of assistance and the amount provided for discretionary benefits is determined locally by SAEO. Dental benefits for adults are defined as discretionary under the OWA. Dental services for adults are limited to services which are necessary to relieve pain, for medical or therapeutic reasons and/or dental care which supports the person's employability or participation requirements. Costs are also shared 80/20% with MCSS.

Historically, OW case managers approved discretionary dental benefits for adults experiencing dental pain. This way of providing dental services resulted in expenditures which exceeded the approved budget. Consequently, in an effort to control costs, screening clinics were established and individuals in need of treatment were screened by Public Health dental staff for eligibility prior to receiving treatment from a dentist. The current service delivery model for OW children has been managed through Public Health since 1998. Management of services provided to adults started in 2003.

Currently, adults in receipt of OW are referred by the OW case manager to Public Health's dental clinic in the municipality in which they reside. The screening clinics for adults are mostly located within the Public Health offices, except for St. Catharines where the screening clinic is located in the SAEO office and in Port Colborne where individuals are screened on the Health Bus. Individuals are seen on a first come first served basis as follows:

Current Service Model – OW Adults

- OW adult contacts SAEO staff.
- SAEO staff informs adult about the Public Health Dental Clinic.
- OW adult goes to Public Health Dental Clinic.
- Public Health staff check Service Delivery Model Technology (SDMT) to see if OW adult is currently in receipt of OW.
- The Hygienist at the clinic examines the individual's mouth and completes an assessment for eligibility for emergency relief of pain.
- If determined to be eligible for benefits, individuals are then issued a Purchase Order to take to their dentist of choice for emergency relief of pain.
- OW adult takes the Purchase Order to the dentist of his/her choice.
- The dentist forwards the bill for completed service to Public Health.
- Public Health forwards payment to the dentist.
- Public Health records payment information.

Public Health Dental staff is also involved in negotiating with dentists who disagree with the recommended treatment or amount available to pay for services outlined in the Purchase Order.

The results of this service delivery model are as follows<sup>1</sup>:

<b>Ontario Works Adults – Discretionary Dental Benefits</b>							
	<b># screened</b>	<b># provided with a PO</b>	<b>% provided with PO</b>	<b># Treated</b>	<b>% with PO &amp; treated</b>	<b>Expenditures</b>	<b>Cost per treatment.</b>
<b>Year</b>							
2006	1804	1635	91%	1728	106%	\$251,348	\$145.46
2007	2021	1923	95%	2092	109%	\$316,319	\$151.20
2008	2154	2000	93%	1334	67%	\$320,968	\$240.61
2009	432	384	89%	301	78%	\$87,917	\$292.09

<sup>1</sup> Service data for OW adults, children and Health Bus visitors are provided by Public Health Dental Staff. Expenditures are the total year end administration and service costs recorded in the General Ledger. Information for 2009 is the year to date data available to March 2009.

Current Service Model – OW Children

- The Public Health Hygienist screens all children in Niagara schools.
- If a child is need of treatment, a form is sent home with the child and the parent is asked to respond to Public Health.
- Public Health directs the parent to go to the dentist of his/her choice.
- The dentist performs the work according to the MCSS fee schedule or contacts Public Health to negotiate service that is outside of the fee schedule.
- The dentist forwards the bill for completed service to Public Health.
- Public Health forwards payment to the dentist.
- Public Health records payment information.

The results of this service delivery model are as follows:

<b>Ontario Works Children – Mandatory Dental Benefits</b>							
	<b># screened</b>	<b># provided with a PO</b>	<b>% provided with PO</b>	<b># Treated</b>	<b>% with PO &amp; treated</b>	<b>Expenditures</b>	<b>Cost per treatment.</b>
<b>Year</b>							
2006	17	1268	7459%	2266	179%	\$613,238	\$270.63
2007	19	1087	5721%	2021	186%	\$613,645	\$303.36
2008	19	1367	7195%	2109	154%	\$681,959	\$323.36
2009 (March)	2	248	12400%	350	141%	\$135,990	\$388.54

Current Service Model – Health Bus Visitors

- Adult visits Health Bus.
- Adult completes Form 1A (used to gather information regarding OW eligibility).
- Public Health Dental Hygienist on the bus examines the individual's mouth and completes an assessment for eligibility for emergency relief of pain.
- If determined to be eligible for benefits, individuals are then issued a Purchase Order to take to their dentist of choice for emergency relief of pain.
- Health Bus adult takes the Purchase Order to the dentist of his/her choice.
- The dentist forwards the bill for completed service to Public Health.
- Public Health forwards list of Health Bus visitors to Community Services who reviews the list and determines if the visitor is currently in receipt of OW and returns the list to Public Health.
- Public Health forwards payment to the dentist.
- Public Health records payment information.

Public Health Dental staff is also involved in negotiating with dentists who disagree with the recommended treatment or amount available to pay for services outlined in the Purchase Order.

Over the years, the original target population for the dental screening clinics on the Health Bus has shifted from people who are homeless<sup>2</sup> to individuals in low income households with no dental benefits. The results of this service delivery model are as follows:

<sup>2</sup> PHD-33-99 Public Health Department's Health Bus Coordination of Services

<b>Health Bus Visitors – Discretionary Dental Benefits</b>							
	<b># screened</b>	<b># provided with a PO</b>	<b>% provided with PO</b>	<b># Treated</b>	<b>% with PO &amp; treated</b>	<b>Expenditures</b>	<b>Cost per treatment.</b>
<b>Year</b>							
2006	959	531	55%	185	35%	\$14,562	\$78.71
2007	821	707	86%	170	24%	\$13,226	\$77.80
2008	977	830	85%	655	79%	<b>\$63,716</b>	\$97.27
2009	176	154	88%	116	75%	\$11,654	\$100.47

## REPORT

In Niagara, Public Health and Community Services have worked together to provide dental services to Health Bus visitors and to adults and children in receipt of OW. The service delivery model implemented was effective at controlling costs and access to the limited funds by screening all OW adults and some children before treatment was provided by dentists. As detailed in PHD 66-00/COM 71-00, when originally implemented in 1998, the current model also included the provision of preventive dental services from Public Health to OW children. This aspect changed and service is now only provided by dentists directly to OW children.

A review of the service data reveals that not all OW adults and children are accessing dental services. For example, in 2008, 21% of all OW adults and .03% of children were screened for dental services through the Public Health dental clinics. Approximately 67% the adults screened by Public Health staff received treatment from dentists.

It is now recognized that controlling costs and access to limited funds might be better balanced with a streamlined approach to providing dental services to ensure that individuals receive immediate treatment for dental pain. The proposed service delivery model is streamlined in that OW adults and children would go directly to the dentist to receive urgent and emergency care instead of visiting a Public Health Dental Hygienist before receiving treatment from dentists. The gate-keeping function which currently occurs at the beginning of the client's service path would shift to an administrative function appearing seamless from the client's perspective.

The service model is as follows:

- OW adult or child in need of dental services contacts SAEO staff
- SAEO staff informs OW adult to go to the dentist of his/her choice and to bring to the dentist verification that adult or child is currently in receipt of OW. This verification will be either the current month's cheque stub or drug card
- Dentist completes dental work according to SAEO Dental Plan Schedule of Benefits and Fees for OW Adults or according to MCSS dental fee schedule for children
- Dentist forwards claim to Niagara Region
- Niagara Region reviews claim to ensure that the fee is in line with the schedule and that the adult or child is in receipt of OW
- Niagara Region forwards payment to dentist

- Niagara Region records payment and service data including the type of dental services provided
- Health Bus visitors will be issued a Purchase Order to go directly to the dentist and claims will be subject to the same review as OW children and adults.

With the new Direct Access model, SAEO proposes to shift 59% of the current budget allocated for administration costs into dental treatment. Currently, SAEO spends \$303,660 in administration funding to support 4.2 FTE in Public Health. The new service delivery model would require only \$124,400 in administration funding to support one full time clerk and to purchase professional consultation for 14 hours a week from a dentist. The clerk would be responsible to audit and review claims and would refer anomalies to the contracted dentist. The contracted dentist will negotiate fees and services with local dentists who recommend treatment outside of the SAEO fee schedule.

Public Health and SAEO will jointly issue a Request for Proposals from dentists interested in providing professional services for the OW and Children in Need of Treatment (CINOT) programs.

Implementing a direct access approach for dental services in Niagara will ensure that OW children and adults experiencing dental pain will have fewer steps to go through to receive services. SAEO has begun discussions with the Niagara Peninsula Dental Association (NPDA) to involve them in the development of this model and to inform their membership of the change in process and requirements. Clear communication about the transition and the new service delivery model will be critical to its ongoing success. The SAEO Dental Plan Schedule of Benefits and Fees for OW Adults will be distributed annually, or as items change, to dentists and to the NPDA. Staff will also attend NPDA membership meetings to provide information about this change.

Submitted by:

Submitted by:

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