2
PROPOSAL FOR A PILOT DENTAL TREATMENT PROGRAM FOR SENIORS

The Health and Emergency Medical Services Committee recommends the adoption of the recommendations contained in the following report, May 17, 2007, from the Commissioner of Community Services, Housing and Health Services:

1. RECOMMENDATIONS

It is recommended that:

1. Regional Council endorse the proposal for a three-year pilot dental treatment program for seniors in York Region, subject to100% funding by the province, at an annual cost of $539,010.

2. Staff be authorized to submit the proposal to the Ministries of Health Promotion and Health and Long-Term Care (MOHLTC).

3. The Regional Clerk forward a copy of this report to the Ministers of Health Promotion, Health and Long-Term Care, and Community and Social Services.

2. PURPOSE

This report provides information on the background and proposal for a three-year pilot dental treatment program for low income seniors in York Region that could be expanded later to all health units in Ontario. The pilot program, which would apply to seniors in York Region who are 65 years of age or over and who cannot afford access to care, would undergo a formal evaluation by the Community Dental Health Services Research Unit (CDHSRU) of the University of Toronto's Faculty of Dentistry to determine if the program should be expanded to all health units across Ontario. The report recommends that Regional Council advocate for this pilot to be a 100% provincially-funded program, including the cost of administration.

3. BACKGROUND

At the January 11, 2007 meeting of the Health and Emergency Medical Services Committee, Public Health Branch staff were asked to explore a pilot dental program for seniors. The Dental and Nutrition Services Division of the Public Health Branch, in consultation with the Community Services and Housing Department, have formulated a proposed model for a pilot dental treatment program for low-income seniors.

3.1 History of Current Preventive Program

The Preventive Dental Program for Seniors began in the mid-nineties, when the Healthy Elderly Program was part of the Mandatory Health Programs and Services Guidelines (MHPSG). At that point, the dental program was only offered in long-term care facilities.

Preventive dental services for seniors in long-term care facilities were removed from the revised 1997 MHPSG. However, York Region continued to offer the program.

3.1.1 Expansion of Program

In September 2003, the Health Services Department delivered a presentation on the dental program in York Region long-term care facilities to the Health and Emergency Medical Services Committee. Subsequent to the presentation, the committee made a request that staff look into how the program could be expanded to include seniors living in the community, at little or no cost to the Region.

Based on a business analysis and costing, the only viable option was extension of the long-term care dental program to seniors who require support to remain in the community. In 2006, the program was expanded to include all retirement homes, alternative community living program sites and York Region Health Services seniors' day programs

3.1.2 Current York Region Preventive Dental Program for Seniors

The program offered to York Region seniors includes dental screening, denture cleaning and identification, and in-services for caregivers on geriatric oral health, but not treatment. In 2006 it was offered to 28 long-term care facilities, 27 retirement homes, 6 Alternative Community Living sites, and 2 York Region LTC day programs.

3.2 Municipally Funded Programs

A few municipalities in Ontario offer basic or emergency dental care for low income seniors. These programs are 100% municipally funded.

- The City of Toronto offers dental treatment for low-income seniors through community-based clinics.
- Halton Region has a program called Dental Care Counts. Seniors are eligible if they are over 65 years of age and have both dental and financial needs. Treatment is provided by private practice dentists, either in their office or in a long-term care facility.
- The City of Ottawa provides dental treatment and the Community Denture Program for low income seniors. Seniors must first qualify for the program through the social services department based on financial criteria. If approved, they are referred to the city's dental clinics. The level of service for treatment is emergency care only (fillings and extractions) and the denture program is limited.

3.3 Revision of Mandatory Health Programs and Services Guidelines (MHPSG)

As part of a strategy to rebuild public health capacity across Ontario, the provincial government is currently revising the MHPSG, which were last revised in 1997. Although representatives from public health units advocated for inclusion of a dental program for seniors in the new standards, dental services for seniors will not be part of core programs.

The revised mandatory programs and services, to be known as the Ontario Public Health Standards, were released in draft form on February 19, 2007 for health unit and other stakeholder consultation. The new standards focus on core programs to be provided by health units across the province. They will possibly also allow for additional programs to be adapted to community need, although it is unclear how these programs will fit into the province's financial and performance management frameworks.

4. ANALYSIS AND OPTIONS

4.1 Need for Treatment

Representatives from Dental Services agree that demand and need among seniors is for treatment of dental conditions, and that screening and education initiatives only highlight the need for treatment. Seniors exhibit a high level of clinical needs and those with low income have the least access to care. Providing essential and emergency care to these seniors through a treatment program would assist in keeping them free of oral pain and infection. It may also result in other improved health outcomes and improvements in quality of life. Therefore, this pilot program should focus on treatment rather than prevention.

4.2 Proposed York Region Pilot

Staff are proposing a York Region pilot would provide eligible residents of York Region with essential dental care contingent on 100% funding from the MOHLTC. To qualify for the program, individuals must:

- Be a minimum of 65 years of age.
- Live in York Region.
- Not have dental insurance.
- Declare that paying for dental treatment would create a financial hardship.

Financial need would be determined by household income, and thresholds would be determined based on the Cost of Living Index. Prior to enrolment in the program, proof of age and proof of residency would be required.

The program would offer limited treatment by a client's dentist of choice in the community. Treatment on a one-time basis may include examination, radiographs, fillings, extractions and root canal treatment. Ongoing maintenance costs such as

preventive recalls would not be covered under the program. Program costs could be controlled by setting a maximum amount allowed per client.

Initially, the pilot program would not include denture services. These services could be phased in as the program matures, and could be provided through Health Services dental clinics by the denturist using the York Region Denturist Fee Schedule.

In the case of a dental emergency on a weekend, holiday or after hours, coverage would be considered for emergency treatment only to provide relief of pain, dental conditions involving haemorrhage, swelling and trauma. Non-emergency services provided at the appointment would not be reimbursed.

York Region dentists would be instructed to use the current *Ministry of Community and Social Services Schedule of Dental Services and Fees* that is presently used for the Ontario Works Dental Program for Dependant Children. The dentist would forward all claim forms to the Dental and Nutrition Services Division of the Health Services Department. The Division would process payments and maintain the seniors' files.

4.2.1 Projected Dental Care Program Utilization

Based on *A Profile of York Region's Low Income Population*, prepared by Community Services and Housing from the 2001 census data, there are 63,480 seniors in York Region, of whom 8,475 are low income. Table 1 provides projected estimates of the possible number of low-income seniors who may access care through the program and the cost of treatment according to possible program maximums per person.

Table 1
Estimated Pilot Program Utilization and Costs*

Possible Maximum/ Person	Participation Rate		
	10% (848)	20% (1,695)	30% (2,543)
$200	$169,600	$339,000	$508,600
$300	$254,400	$508,500	$762,900
$400	$339,200	$678,000	$1,017,200

* Excludes administration costs.

The figure chosen for the pilot proposal submission is the median figure.

4.2.2 Projected Administrative Costs

Under the proposed framework, seniors wishing to enquire about their eligibility would contact the Community Services and Housing Contact Centre. Applications would be mailed to callers meeting the eligibility requirements. Upon receipt of completed applications and supporting documents, eligibility would be verified and the Dental and

Nutrition Services Division advised that the senior has been authorized to receive treatment.

Based on time/cost analysis estimates it is projected that the total administration costs to process each person's application would be $18.00. Based on the projected participation rates, total administration costs for the program would range from $15,264 (10%), $30,510 (20%), to $45,774 (30%).

The Dental and Nutrition Services Division would process the claims along with Children in Need of Dental Treatment (CINOT) and Ontario Works claims using their current infrastructure.

Program expenditures would have to be closely monitored. In the event expenditures were to exceed program funding, treatment would be postponed to the following year, with exceptions for individuals who require emergency care. Precedence for such an approach has been set in other health units operating the CINOT program.

4.2.3 Evaluation of the Pilot Program

In order to ascertain if the pilot program meets the needs of the target population of low-income seniors and to measure cost-effectiveness and improvements in health, a program evaluation is essential. The CDHSRU has indicated commitment to evaluating the program. The CDHSRU has research expertise in the evaluation of community health services. Key areas that would be considered for the evaluation include:

- Whether oral care reduces other health care costs or facilitates future savings.
- Consequences if care had not been provided.
- Changes in oral health and general health outcomes.
- Contribution of oral care to improving quality of life of seniors.

If the pilot evaluation proved positive, the Region would lobby the province to continue 100% funding for the program. If provincial funding were discontinued, the program would not proceed.

4.3 Relationship to Vision 2026

Increasing access to oral health care for our senior population supports the Vision 2026 goal of "Responding to the Needs of Our Residents."

5. FINANCIAL IMPLICATIONS

There are no financial implications for York Region as a result of this report, which recommends that Regional Council advocate for a pilot dental treatment program for low income seniors, in which all program and administrative costs would be 100% funded by the province of Ontario. Evaluation of the pilot program through the CDHSRU would not entail any additional financial costs.

Based on a 20% participation rate and a maximum limit of $300 per person, projected total program costs, including projected administrative costs, would be approximately $539,010.

6. LOCAL MUNICIPAL IMPACT

This report shows support for vulnerable seniors in local municipalities, particularly those who have difficulty accessing dental care.

7. CONCLUSION

Lack of access to dental treatment, particularly by low income and marginalized groups, is a growing concern in all communities in Ontario. Seniors exhibit a high level of clinical needs and those with low income have the least access to care. Providing essential and emergency care to these seniors through a treatment program would assist in keeping them free of oral pain and infection. It may also result in other improved health outcomes and improvements in quality of life.

For more information on this report, please contact Dr. Karim Kurji, Acting Medical Officer of Health and Director of Public Health Programs, in the Public Health Branch of the Health Services Department.

The Senior Management Group has reviewed this report.