

SUBMISSION TO;

SENATE COMMUNITY AFFAIRS COMMITTEE INQUIRY INTO THE COST OF LIVING PRESSURES ON OLDER AUSTRALIANS

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- 1. Introduction
- 2. Health Services Union
- 3. Access and Affordability of Dental Care
- 4. Recommendation

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1. Introduction

The Health Services Union (HSU) appreciates the opportunity to provide a submission to the Community Affairs Committee Inquiry into the Cost of Living Pressures on Older Australians.

Though the HSU recognises the broad range of cost of living pressures on older Australians, particularly in regards to health and aged care, this submission will focus primarily on dental care.

The submission discusses the crisis in access and affordability of dental care for older Australians. The submission makes a recommendation that dental care be covered by Medicare for people aged 65 years and over.

The union would welcome the opportunity to address the Committee at a Senate Inquiry Hearing regarding the issues outlined in this submission.

2. Health Services Union

The HSU is a registered trade union with over 75,000 members nationally. The HSU represents members working in a wide range of occupations in health and aged care, including dental health. Many members of the union working in dental health are regularly confronted by the access and affordability crisis for older Australians.

3. Access and Affordability of Dental Care

A large proportion of older Australians are eligible for public dental care; 43.8% of people aged between 55-74 years and 67.7% of people aged over 75 as compared with 26.1% of the whole population.¹ However, accessibility of public dental care can be a significant problem. There is an estimated 650,000 people on waiting lists throughout Australia and though it varies greatly, waiting times have been reported to be as long as seven years in some areas. Therefore though many older Australians are eligible for public dental care, accessing it can be difficult.

The crisis in accessibility of public dental care can lead to older people not receiving treatment, or paying out of pocket for private treatment which is a significant cost burden. A recent survey found that older Australians eligible for public dental care are much less likely to visit a dental health professional than others.² The majority of older Australians who are eligible for public dental care who visit a dental professional are attending a private dental practice and paying out of pocket.³ This is likely to be a very significant expense to those on low incomes, including pensioners.

Paying out of pocket dental expenses can be a considerable cost burden for all older Australians, particularly given that it has increasingly become more expensive. Between 1992-3 and 2002-3 the cost of dental fee inflations was 50.5%, whilst for general goods

¹ Slade, G Spencer, A. & Roberts-Thomson, K. (Eds) (2007) *Australia's dental generations: the National Survey of Adult Oral Health 2004-2006* AIHW Cat. No. DEN 165 Canberra Australian Institute of Health and Welfare (Dental Statistics and Research Series No. 34), p52.

² 52.1% of respondents to a survey aged 75 and over that were eligible for public dental care visited a dental professional at least once a year as compared with 75.2% who were not eligible; Slade, G Spencer, A. & Roberts-Thomson, K, p156. ³ 69.2% of survey respondents aged 55-74 and 66.1% who were eligible for public dental care visited a private dental practice at their last visit. 70.0% of those aged 55-74 and 65.1% of those aged 75 and over who were eligible for public dental care paid for dental care at their last visit; Slade, G Spencer, A. & Roberts-Thomson, K., p156 & p149.

and services it was 20%.⁴ Even those with private health insurance often end up significantly out of pocket as the average rebate for dental services is 49% of the cost.⁵

Auspoll research commissioned by the HSU and conducted in eight Coalition marginal seats, found that half the adults surveyed said they had put off dental treatment that they needed because of the cost. The anecdotal experience of an HSU member working in the private sector provides examples of this. The member informed the union that it is not infrequent for clients, including older people, to spread their treatment over a number of months because of concerns about the cost. It was also reported that clients may opt to have treatment that may not be the best available outcome but is cheaper, for example having a tooth removed rather than receiving root canal therapy from a specialist. Some clients may put off having a filling for a year or more due to cost and then have to have the tooth extracted because it has been undermined with decay in that time.

Dental health is an important part of general health and can have a significant impact on a person's daily life, health and wellbeing. If public dental care is not accessible due to long waiting lists and the cost of private dental care is prohibitive it can have implications for the dental health of older people, particularly those of lower financial means. A study that analysed data from NSW Older People's Health Survey 1999 found that those that were not financially comfortable experienced more tooth ache, or mouth or denture problems in the last 12 months than those who were.⁶

Unlike other areas of health, dental care is largely funded by individuals. In 2002-2003 dental services were funded by; 68% - individuals, 15%- insurance, 17% - Federal/State/Local government, <1% - Other. This is in contrast to other health services which were funded by 68% - Federal/State/Local government, 20% - individual, 7% - insurance, 5% - Other.⁷ Older Australians are baring a significant amount of the increasingly greater cost of dental care which is exacerbated by the accessibility crisis in public dental care.

4. Recommendation

The abolition of the Commonwealth Dental Health Program by the Howard government in 1996 put significant pressure on the resources of State Governments. Whilst it is important that State Governments work to address issues in public dental health, Federal Government commitment to the dental health of older Australians is essential.

In order to alleviate the cost of living pressure of dental care and to enable greater accessibility for older Australians it is the position of the Health Services Union that Medicare should be expanded to dental services for those over 65 years old.

The HSU also supports the expansion of Medicare to cover dental services for those under 18 and those of all ages on a pension or with a health care card.

⁴ AIHW DSRU cited in Slade, G Spencer, A. & Roberts-Thomson, K., p60.

⁵ PHIAC cited in Slade, G., Spencer, A. & Roberts-Thomson, K. (Eds), p60.

⁶ Ringland, C., Taylor, L., Bell, J. & Lim, K. (2004) "Demographic and socio-economic factors associated with dental health

among older people in NSW" Australian and New Zealand Journal of Public Health Vol. 28, No. 1, pp53-61.

⁷ AIHW Dental Statistics and Research Unit (2004) Research Report No. 17: Economic aspects of dentistry in Australia.