

Ss/mcib

The government representatives have already asked and expect us to agree to a 3.5% drop in fees. Now we need to discuss frame of reference with them. The mcib contract is out of date 7 years. The ss contract is out of date 2 years.

If they are willing to bring fees in those two contracts up to what the last year contract would have been, we could consider the pay cut. If not, they likely won't have any room to negotiate. So we would be stuck with a cut compared to last contract.

If this happens, I expect to ask for some concessions in regards to mcib, and in this order;

1. coverage of radiation mouthguards for cancer patients,
2. 200z (consult code for specialists usually in regards to cleft lip and palate),
3. NAM (naseoalveolar moulding)

We have less room for negotiation with saskhealth in regards to ss coverage.

We don't have any demands for them other than appropriate remuneration. This is likely not going to happen. The last contract was roughly 87% of 2015. If we are taking a cut vs. that pay schedule, we will be dropping below 80% of current guide.

Carrier audits are increasing in frequency and in intrusiveness. We are attempting to aid members deal with these situations. The CDA is developing a proposal independent of CHLIA. It will outline the minimum standards or requirements associated with an audit. We do not expect CHLIA to agree with this proposal, but if it is a national policy, we should be able to enforce it in aid of our members.

We will attend the consortium meetings in June with our fellow provinces. I am sure there will be some heavy subjects affecting our members but also the members from other provinces. Internationally trained dentists continue to enter Canada. Government sponsored programs continue to decay. Dentists continue to fight increasing overhead and increased competition for patients.

The provincial government blindsided us with addition of pst on dental premiums. We are unsure of the net effect that will have, but the assumption is negative.

We need to increase our government relations- so that we at least get a warning about dental issues undergoing change at the government level.

Sincerely

Mike Prestie