

Person A requires the following treatment over the course of the year:

-Limited exam, 3 BW, 2 units scale, 1 unit prophylaxis, a simple extraction, a 2 surface premolar composite filling, and a 2 surface molar composite filling

**Situation A-If Person A pays out of pocket or has private insurance and the dental office bills the 2020 CDSS Fee Guide the following is the financial situation:**

Billings	803.00
Overhead (60% of Fee Guide)	481.80
Revenue	<b>321.20</b>

**Situation B-If Person B is covered by Family Health Benefits/Social Insurance**

Billings	553.6
Overhead (60% of Fee Guide)	481.8
Revenue	<b>71.8</b>

This is a **78%** Reduction in revenue compared to Situation A

**Situation C-If Person B is covered by FHB/SS and the dentist places amalgam restorations to try to reduce overhead or due to the clinical situation**

Billings	553.6
Overhead	441.00
Revenue	112.6

This is a **65%** Reduction in revenue compared to Situation A

\*\*Note that the dentist loses money on the polish and makes a combined \$12.70 for the two fillings if they are done in composite. If the dentist books one hour to do the two fillings he is generating \$12.70 an hour.

Minister Merriman

As I am sure you are aware, the Ministry of Health's agreement with the College of Dental Surgeons of Saskatchewan with respect to the Family Health Benefits and Social Services Fee Schedule is several years out of date. This has arisen from a variety of factors but cannot continue this way.

As currently constructed, there are many services in the fee schedule that provide remuneration that is below the cost of providing the service. As medical professionals as well as small business owners this is not a viable way to run a business.

These programs that were created by the Ministry of Health were designed to provide a system by which the most vulnerable in society could seek out essential dental services without worry about the financial implications or being turned away by the service provider due to their economic status. By allowing the Fee Schedule for these programs to fall so far behind the CDSS Fee Guide, the Ministry of Health has created systemic barriers for these vulnerable patients. The Ministry can not expect the dental providers of Saskatchewan to shoulder the load of providing dental services, often at fees below the costs associated with providing the service. The Government of Saskatchewan would never expect a food retailer to sell products to marginalized clients at a fee that is less than the store's cost and the physicians in this province are not remunerated less for a patient who is on Social Services than they are for a patient who is a member of the Legislative Assembly.

The CDSS recognizes that the Government of Saskatchewan and the Ministry of Health are in a tough financial position and in recognition of that we are not asking for an increase in the amount of funds contributed towards dental treatment. What we are asking for is an opportunity to work with you to better evaluate what procedures should be included in the Family Health Benefits and Social Services fee schedule based on which procedures help the government get the most value for their investment into the dental health of the individuals supported by these programs. By helping to make the program more efficient we can also ensure that the CDSS members are compensated at a more appropriate value for the services they provide. This is an opportunity that has been presented by the CDSS to the Ministry in the past but has not resulted in any meaningful dialogue.

If the Ministry of Health is unable to work with the CDSS on better evaluating the programs that it offers then the members of the CDSS will be unable to provide services at the current Fee Schedule and will have to remove themselves from the current agreement.