

7/24/2006

Dr. Sandra Bennett  
Senior Dental Consultant  
Chronic Disease Prevention & Health Promotion Branch  
Ministry of Health Promotion  
393 University Avenue, Suite 2100  
Toronto, ON M5G 1E6

Dear Dr. Bennett,

**Re. CINOT Schedule of Dental Services and Fees**

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On behalf of member Medical Officers of Health, Boards of Health and Affiliate organizations of the Association of Local Public Health Agencies (alPHa), I am writing today to provide input to the CINOT Stakeholder Consultation, as invited by your letter dated May 16, 2006.

alPHa has been a strong supporter of the CINOT program since its inception, recognizing the role it plays in helping vulnerable children access dental care, and welcomes the opportunity to participate in this stakeholder consultation process. For your information, I am also attaching alPHa's active resolutions on the subject of dental health in addition to the specific suggestions itemized below.

Given alPHa's stated position on the importance of the determinants of health, services which reduce the depth of child poverty (such as CINOT) play a vital role in society. It is important therefore that CINOT continue to be a credible, sustainable program that is well regarded by care providers, clients and funders alike.

We would like to suggest the following as items for consideration during this process:

*1. Regular Fee Review and Increase*

Ensure fees to service providers remain reasonably attractive by reviewing them on a regularly scheduled basis and building in a 'cost of living' fee increase. This would prevent what has happened in the past where CINOT fees have remained static while the "usual and customary" professional fees have risen yearly. alPHa hesitates to recommend a specific percentage fee increase because this can be a complex decision influenced by many economic and policy factors. However, the principle of a fee review and revision appears to be sound.

*2. Comparability of plan design between CINOT and Ontario Works Dental Schedule of Benefits*

To reduce the potential for confusion about "covered services" in the minds of clients and providers and to make sure clients are not disadvantaged when they move from Ontario Works back into low-paying jobs in the workforce, it seems prudent to harmonize these program schedules.

*3. 100% Ministry Funding*

The prevalence of dental disease is not evenly distributed throughout the Province -- rural areas, Northern

Ontario and communities with large refugee or Aboriginal populations often experience a disproportionate demand for the CINOT program (beyond what can be borne by local resources). For this reason, alPHa reiterates its position that the CINOT program be 100% funded by the province (please see the attached Resolution, A00-3)

4. *Accessibility of Care*

alPHa continues to believe in strongly that dental care needs to be accessible for those who need it most. Some of the recent changes to the CINOT program schedule of benefits appear to have had an unintended impact on reducing the accessibility of dental care. For example, limiting General Anaesthetic coverage to children under 5 years old appears to be creating problems. Older children requiring GA do not appear to be transferred to hospital waiting lists, but are opting out of dental treatment altogether while their parents struggle to come up with the necessary money for the GA costs. We suggest that the impact of this change needs to be formally assessed. Some discretionary provision of GA services needs to be built into the plan (please see the attached Resolution, A00-10).

5. *Northern Travel Grants*

Currently, families being treated under CINOT are not eligible for the Northern Travel Grant program because the entire cost of treatment (but only the GA) is not paid by OHIP. We suggest the eligibility criteria for the Northern Travel Grant program be amended to include medical/dental services paid for by any Ministry of Health program.

We look forward to further discussions as we move toward our goal of universal access to appropriate oral health care for all Ontarians.

Yours truly,



Dr. Liana Nolan,  
President

**Copy:** Dr. Sheela Basrur, Chief Medical Officer of Health  
Dr. Joyce Sinton, alPHa Affiliate Director, Representing Ontario Association of Public Health Dentistry  
Dr. Bonnie Jeffrey, President, Ontario Association of Public Health Dentistry  
Dr. David Klooz, Ontario Association of Public Health Dentistry

**Encl.**

## 2005 alPHa Resolution A05-5

TITLE: **Access to Dental Care**  
SPONSOR: Ontario Association of Public Health Dentistry

**WHEREAS** dental care is not an included service under the publicly funded medical care system and must be financed by individual Canadians; and

**WHEREAS** low income (lower socio economic) individuals tend to suffer higher rates of dental disease and decay;

**WHEREAS** the current system of publicly funded dental programs varies from community to community, but is very limited for low income families and adults who do not typically have access to private dental benefits packages;

**NOW THEREFORE BE IT RESOLVED THAT** the Association of Local Public Health Agencies (alPHa) supports the action of the Federation of Canadian Municipalities and calls on the Government of Canada, in consultation with Provincial, Territorial and Local Governments, to develop a comprehensive National Oral Health Strategy that would have, as its goal, providing universal access of both preventive and treatment services to all Canadians.

## 2000 alPHa RESOLUTION NO. A00-3

TITLE: **100% Ministry Funding for CINOT**  
SPONSOR: Board of Health of the Perth District Health Unit

**WHEREAS** the Children in Need of Treatment (CINOT) is a dental treatment program that was, prior to downloading, funded 100% by the Ministry of Health; and

**WHEREAS** eligibility for CINOT is established by the Ministry of Health and Long-Term Care. thereby; and

**WHEREAS** local boards of health do not have control over their expenditures for this program, and such expenditures are fluctuating widely in some health units thus preventing proper budgeting;

**NOW THEREFORE BE IT RESOLVED** that the Association of Local Public Health Agencies (alPHa) request that the Ministry of Health and Long-Term Care resume 100% funding of the Children in Need of Treatment (CINOT) dental treatment program.

## 2000 alPHa RESOLUTION NO. A00-10

TITLE: **General Anaesthesia as a Covered Benefit under the Publicly Funded Dental Programs of Ontario Works and the Children In Need Of Treatment (CINOT) Program**  
SPONSOR: Ontario Association of Public Health Dentistry

**WHEREAS** general anaesthesia is essential for the provision of dental treatment for certain children; and

**WHEREAS** the policies of the Ministry of Community and Social Services and the Ministry of Health and Long-Term Care, as described in the memorandum of January 10, 2000 to all Ontario dentists, creates a barrier to such treatment; and

**WHEREAS** there are insufficient hospital operating-room facilities to allow sufficient and timely access to such facilities by dentists;

**NOW THEREFORE BE IT RESOLVED** that the Association of Local Public Health Agencies (alPHa) petition the Ministry of Community and Social Services and the Ministry of Health and Long-Term Care to review their policies on the provision of general anaesthesia as a covered benefit under the dental program of Ontario Works and the Children In Need of Treatment (CINOT) Program and for the Ministry of Health and Long-Term Care to take such measures as necessary to increase hospital operating-room facilities to allow timely access to such facilities by dentists.