

Adult dental care benefit

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more accessible?*

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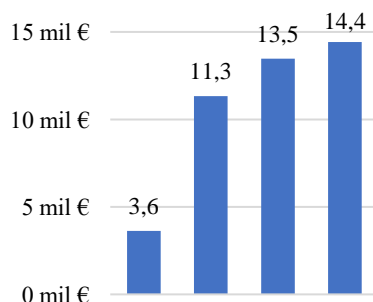
Summary of audit results

The dental care benefit for adults can be used by insured persons at least 19 years of age for 40 euros per year, out-of-pocket payment is 50% (on preferential terms up to 85 euros per year, out-of-pocket payment 15%).

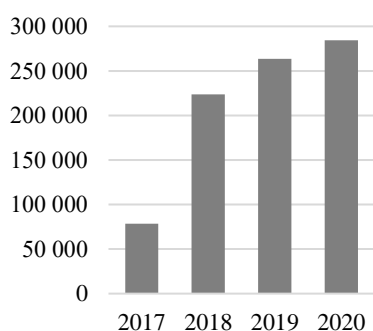
The benefit can be used in a medical institution that has contract with the Estonian Health Insurance Fund.

Source: [dental care benefit](#), Estonian Health Insurance Fund

Estonian Health Insurance Fund expenses for adult dental care benefits in 2017–2020



Number of users of the benefit in 2017–2020



Sources: Estonian Health Insurance Fund [2017](#), [2018](#), [2019](#) and [2020](#) annual reports

The adult dental benefit (benefit) has made dental care somewhat more accessible, but equal treatment has increased inequalities in dental care. After the benefit was made available in 2017, the number of people who visited the dentist for the first time and who visited the dentist more often increased. However, the benefit is used more by people with higher incomes who would be able to pay for dental care themselves. Many low-income earners have never been to a dentist in the last five years. The terms of the benefit do not consider the ability of adults to pay for treatment, so the benefit has not reached those who would need it most due to their lower income.

Main findings of the audit

The benefit has brought people to their first visit and more frequent visits to the dentist, but the benefit is used more by those who presumably do not need it according to their income. Two-fifths of adults, mostly low-income earners, have never been to a dentist in the last five years. Thus, the benefit has not reached enough people who need state support the most.

The terms of the benefit do not consider the ability of adults to pay for treatment. In addition, the total out-of-pocket payment for patients' dental costs may in fact be significantly higher than the cost-sharing described in the terms of the benefit.

The benefit covers essential dental care. At the same time, reimbursable services focus more on treating existing health problems, i.e., dealing with the consequences (e.g., filling), and do not pay enough attention to prevention. Greater emphasis on prevention in the list of reimbursable services would help to prevent or detect diseases at an early stage.

The activities of the Estonian Health Insurance Fund (EHIF) have favoured signing a contract with the EHIF by dental care institutions. Two thirds of the clinics have signed the contract. At the same time, benefit is not uniformly available throughout Estonia.

The EHIF has not fully complied with the guidelines for changing the maximum prices for healthcare services. The EHIF has not collected information on how much of the resources needed to provide some services are actually used. Also, the information collected from the reference institutions is not sufficiently representative for pricing. Therefore, the price list of reimbursable services may not be up to date or

relevant. In addition, the EHIF's pricing process is not transparent for the Estonian Dental Association.

Key recommendations

Recommendations of the National Audit Office to the Minister of Health and Labour in co-operation with the Chairman of the Management Board of the Health Insurance Fund

To plan the following fundamental changes in the list of reimbursable services, the conditions of benefit and the pricing of dental services:

- to pay special attention to the prevention of oral problems among adults and add preventive services to the reimbursable services;
- to change the system of dental care benefits for adults so that in future the benefits reach primarily lower income earners; in doing so, amend the terms of the benefit to consider the ability of people on lower incomes to pay for dental care; and
- to look for other ways to collect data and calculate the dental care pricing.

Responses of the auditees: The Minister of Health and Labour and the Chairman of the Management Board of the Estonian Health Insurance Fund considered the recommendations made in the audit important and mostly agreed with them.

The Minister of Health and Labour agreed that, given the oral health situation of adults, more attention needs to be paid to them, including extending the focus of compensation to prevention activities. According to the Minister, in cooperation with the Health Insurance Fund, they plan to develop a system for measuring the personal out-of-pocket expenditure burden in the coming years, which would help to better identify persons with a high need for treatment and high level of out-of-pocket expenditure. This is to allow them to receive increased benefits or to set a maximum annual out-of-pocket payments. The Minister added that they recommend that the EHIF carry out an audit of compliance with the pricing methodology and make appropriate proposals to improve the EHIF's internal work processes and, if necessary, specify the methodology in order to avoid shortcomings and errors in the future.

The Chairman of the Management Board of the Estonian Health Insurance Fund noted that the base price for a visit to the dentist also includes preventive activities but agreed that the respective provision needs to be clarified in terms of legal clarity. He also agreed with the recommendation to increase dental benefits for more vulnerable groups. According to the Chairman of the Management Board, they have started consultations with the Tax and Customs Board to find out whether income data can be considered when planning health care services that have too high out-of-pocket expenditure.

The Chairman of the Management Board of the EHIF admitted that during the audit they understood that the pricing guidelines needed to be clarified in order to reflect more clearly and precisely the pricing stages, activities, and their purpose, and in which cases it is justified to exclude certain activities. He also considers it necessary to specify the documentation requirements.

According to the Chairman of the Management Board, they have put on the agenda the specification of the general pricing methodology in order to find a better balance between the resource intensity of the data provision and the accuracy of the result.