CADTH

ENVIRONMENTAL SCAN

Public Dental Programs and Reimbursement for Dental Restorative Procedures: An Environmental Scan

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Context

Dental caries is a significant oral health problem worldwide.¹ While the epidemiology of dental caries over time and across populations has changed, due to such factors as economic development, sugar consumption, and community water fluoridation, it remains an important cause of human morbidity. Symptoms can include pain and tooth loss. Downstream sequelae that negatively impact activities of daily living may result (e.g., school or work absenteeism).² In Canada, data from 2007 show that 57% of children aged six years to 11 years, 59% of adolescents aged 12 years to 19 years, and 96% of adults have a history of dental caries.³

Standard treatment for dental caries aims to restore the structure of the affected tooth using filling material to replace decayed dental tissue.⁴ Amalgam fillings have been widely used for more than 150 years,⁵ and evidence suggests that amalgam has been an effective and affordable dental restorative material.⁵⁻⁷ However, the perceived health risks and potential environmental impact of dental amalgam, due to the mercury it contains, are debated. On the international front, the *Minamata Convention on Mercury*, which Canada ratified in April 2017,⁸ specifically addresses the use of amalgam in dentistry.⁹ One concern arising from the proposed phasing down (and eventually phasing out) of dental amalgam is the impact on the cost of dental care, which may represent a significant barrier for some populations in Canada.^{3,10}

Among the alternatives to the use of amalgam as a restorative material for dental caries, composite resin is the most common, having been in use for over 50 years. ¹¹ Composite resin, because it is tooth coloured, may provide an advantage over amalgam for visible restorations in anterior teeth for aesthetic reasons. ¹² Given these considerations, there is interest in understanding the relative effectiveness of amalgam and composite resin restorations.

In this context, CADTH is undertaking a Health Technology Assessment (HTA) which will address the following policy question: Should dental amalgam continue to be used in Canada? The aim of the HTA is to inform the policy question through a comparative assessment of dental amalgam and composite resin — the most commonly used alternative. The economic review component of the HTA will address the following research question: What are the comparative consequences and costs of using dental restorations made of composite resin or amalgam for permanent teeth in Canada? Specifically, a cost-consequence analysis will be undertaken to compare costs and health outcomes associated with dental amalgams and composite resin as dental restorative materials for permanent posterior teeth.

In Canada, the majority of dental care is privately financed, commonly through employment-based insurance and out-of-pocket expenses. ¹³ In 2010, the Canadian Health Measures Survey reported that 62.6% of Canadians had private insurance and only 5.5% of Canadians



had coverage through publicly funded programs, while the remaining 31.9% were uninsured. 14 All jurisdictions publicly fund dental programs for "various groups, predominantly low-income populations, with the federal system largely defined by the care it targets to First Nations and Inuit populations, but including services for the armed forces, Veterans Affairs, RCMP [Royal Canadian Mounted Police], prisoners, and Citizenship and Immigration Canada."13 The characteristics of those programs, such as the dental services covered, eligibility criteria, and reimbursement models, vary depending on the jurisdiction and the particular program. An Environmental Scan report on publicly financed dental care programs in Canada was published in 2015 under the direction of the Public Health Agency of Canada (PHAC) and covered several topic areas including identification of programs and legislation related to provincial and territorial public dental care activities, enumeration and remuneration of dental public health human resources, rates of reimbursement, and expenditures of direct and indirect service delivery activity. 15 Nonetheless, the scan did not provide a comprehensive quide to reimbursement rates for dental restorative procedures across publicly funded dental programs, which is required to support the HTA being undertaken evaluating dental amalgams and composite resin for dental restoration of posterior teeth.

This project was adapted from the aforementioned PHAC Environmental Scan report on publicly financed dental care programs in Canada. ¹⁵ In contrast to the broader scope of the PHAC report, this Environmental Scan focuses on gathering information on the costs and utilization of dental restorative procedures offered under the public dental care programs, with the aim of informing the economic component of the HTA.

Objectives

The objective of this Environmental Scan is to identify and summarize information regarding public dental programs in Canada. In addition, this Environmental Scan aims to present the volume of amalgam and composite fillings reimbursed and reimbursement rates for dental restorative procedures covered by these dental programs.

The following specific objectives are addressed:

- 1. Identify and describe Canadian publicly funded dental programs.
- Obtain the annual number of services (claims) for composite resin (tooth-coloured) or amalgam fillings on permanent, posterior teeth that are funded by Canadian publicly funded dental programs.
- 3. Compare reimbursement rates for dental restorative procedures across programs.

Methods

This Environmental Scan is based on responses to the Public Dental Programs Survey (Appendix 1) and a limited literature search.



Table 1: Components and Information Gathering Approach

		Inclusion	Exclusion
Components	Population	Patients of any age with dental caries who receive a dental restorative procedure under a public dental care program	NA
	Intervention	Any form of dental restorative procedures covered under a public dental care program, including, but not limited to, dental filling restorations with amalgam or composite resin, restoration repairs, restorations with a dental crown on permanent teeth	NA
	Setting	Any setting providing dental restorative care funded under a federal, provincial, or territorial public oral care program	Municipal government programs; dental care provided by charitable organizations, universities, and private sector involvement
	Outcomes	 Identification and description of public dental care programs Volume of restorations (i.e., number of amalgam and composite resin procedures) Dental fees for restorative procedures 	NA

Literature Search

A focused Google search was conducted by an information specialist on information related to public dental programs in Canada and reimbursement rates. Identified articles were screened for selection and those that met the inclusion criteria (see Table 1) were synthesized and summarized within the report.

Research Questions

The literature review component of this Environmental Scan aimed to address the following auestions:

- 1. What are the publicly funded federal, provincial, and territorial (F/P/T) dental programs in Canada?
- 2. What groups of patients are eligible under each program?
- 3. What are the current fee schedules in publicly funded F/P/T dental programs for dental restorative procedures on permanent teeth?

Survey

A survey was conducted to address gaps in knowledge not addressed by the literature search and to increase the robustness of findings. The survey was distributed electronically using Hosted in Canada Surveys (HICS) to key jurisdictional informants and stakeholders involved in planning, decision-making, management, and service provision related to public dental care in Canada. Attempts were made to contact one respondent per jurisdiction and/or known publicly funded dental care program in order to capture information relevant to all Canadian programs. Survey respondents provided an electronic signature to consent to the reporting of the information provided. Respondents were identified through existing contacts from the PHAC as well as knowledge of respondents from the previous Environmental Scan.



Findings

The information presented on publicly funded dental programs and reimbursement for dental procedures in Canada is based on a literature search. Due to limited complete survey responses, any available survey findings are included as personal communications.

Objective 1: Identify and describe Canadian publicly funded dental programs

The literature search identified evidence regarding publicly funded dental programs across Canada. Content was also derived from, and cross-referenced with, the PHAC Environmental Scan to fill in any gaps from the literature search. The following public dental programs were identified from the limited literature search. Programs not reported in the literature or captured from our grey literature sources may not be included.

Emergency dental services are covered in all of the provinces and territories across Canada. All of the provinces also fund programs that provide services for adults and children who require income assistance; however, these programs are not funded in the territories. The provinces of Québec, Nova Scotia, Prince Edward Island, and Newfoundland and Labrador provide treatment services for children regardless of income. Details of the publicly funded dental programs can be found in Appendix 3; Tables 2 to 15.

British Columbia

The province of British Columbia runs six publicly funded dental programs, including:

- the Medical Services Plan
- Dental Supplements (including the British Columbia Employment and Assistance Program's Dental Program)*
- Healthy Kids, Early Childhood Health and Screening Programs*
- the Children in Care Medical Benefits Program*
- the British Columbia First Nations Health Authority covers two programs:
 - o the Children's Oral Health Initiative**
 - the First Nations Health Authority Health Benefits Program.*

Most notably, British Columbia has specific programs for First Nations. British Columbia is unique in that the federal Non-Insured Health Benefits (NIHB) program is managed by the British Columbia First Nations Health Authority. Programs indicated with an asterisk (*) cover dental restorations. The program indicated with two asterisks (**) covers temporary dental restoration, only (temporary fillings).

Alberta

The province of Alberta runs 10 publicly funded dental programs, including:

- the Alberta Health Care Insurance Plan
- the Assured Income for the Severely Handicapped Program*
- · Alberta Works Income Support*
- · the Alberta Child Health Benefit Plan*
- the Alberta Adult Health Benefit Plan*
- · School Oral Health Services
- the Dental Assistance for Seniors Program*



- Reduced-Fee Dental Care for Qualified Low-Income Clients*
- · Family Support for Children with Disabilities
- the Cleft Palate Dental Indemnity Program.*

The province of Alberta has additional programs geared toward adults and families with disabilities, seniors below a certain income level, and residents who have a cleft palate. Programs indicated with an asterisk (*) cover dental restorations.

Saskatchewan

The province of Saskatchewan runs four publicly funded dental programs, including:

- the Saskatchewan Medical Services Plan
- · Family Health Benefits*
- the Supplementary Health Program*
- the Enhanced Preventive Dental Services Initiative.

Saskatchewan runs notable programs that cover individuals on disability and target schoolaged children, providing many preventive dental services administered across the province at the regional level. Programs indicated with an asterisk (*) cover dental restorations.

Manitoba

The province of Manitoba runs four publicly funded dental programs, including:

- · Manitoba Health Care Coverage
- the Employment and Income Assistance Program
- · Healthy Smile Happy Child
- the SMILE plus Children's Oral Health Program.

Manitoba also covers preventive services for children in certain regional health authorities.

Ontario

The province of Ontario runs seven publicly funded dental programs, including:

- the Ontario Health Insurance Plan
- the Ontario Cleft Lip and Palate/Craniofacial Dental Program**
- Healthy Smiles Ontario*
- the Oral and Maxillofacial Reconstruction Program
- · Ontario Works Adults
- · Assistance for Children with Severe Disabilities**
- the Ontario Disability Support Program:**
 - The Special Dental Care Program.

Ontario has programs to support residents who have a cleft lip and/or palate, residents who require oral and maxillofacial reconstruction, and adults and children with disabilities. The program indicated with an asterisk (*) covers dental restorations. Programs indicated with two asterisks (**) may cover some restorative procedures.



Québec

The province of Québec runs four publicly funded dental programs, including:

- Régie de l'assurance maladie du Québec
- · Régie de l'assurance maladie du Québec for Children*
- Régie de l'assurance maladie du Québec Low-Income Program (12 and 24 months)*
- · Quebec Public Health Program.

Most notably, the province of Québec runs a universal program which covers basic services for children under 10 years of age. Programs indicated with an asterisk (*) cover dental restorations.

New Brunswick

The province of New Brunswick runs six publicly funded dental programs, including:

- · New Brunswick Medicare
- · the Health Services Program*
- the Health Services Enhanced Dental Program*
- the Cleft Palate Program
- the Fluoride Mouthrinse Program
- · Healthy Smiles, Clear Visions.

New Brunswick covers preventive programs for elementary school children. Programs indicated with an asterisk (*) cover dental restorations.

Nova Scotia

The province of Nova Scotia runs nine publicly funded dental programs, including:

- the Nova Scotia Department of Health and Wellness Dental Surgical Program
- · Income Assistance
- the Cleft Palate-Craniofacial Program
- the Maxillofacial Prosthodontics Program
- the Mentally Challenged Program Preamble*
- the Nova Scotia Children's Oral Health Program*
- the Fluoride Mouthrinse Program
- · Children in Care*
- the Disability Support Program.

The province of Nova Scotia also funds notable programs that support populations such as residents who have a craniofacial anomaly, residents who require maxillofacial prosthodontic procedures, and residents with disabilities. Nova Scotia also covers prevention and restoration in children where private insurance pays first and the program pays for subsequent costs. Programs indicated with an asterisk (*) cover dental restorations.



Prince Edward Island

The province of Prince Edward Island runs four publicly funded dental programs, including:

- Hospital and Medical Services Insurance
- the Children's Oral Health Programs*
- Dental Public Health Services (Long-Term Care Residents)
- the Social Assistance Program.**

Other programs in Prince Edward Island include those that cover children who fall under certain oral health programs, including those with a cleft palate or those who have no private insurance, and one that covers long-term care residents. The program indicated with an asterisk (*) covers dental restorations. The program indicated with two asterisks (**) covers basic dental care, which may include some restoration.

Newfoundland and Labrador

The province of Newfoundland and Labrador runs five publicly funded dental programs, including:

- the Surgical Dental Program
- the Children's Dental Health Program*
- the Income Support Program*
- the Low Income Access Program*
- the Adult Dental Program.*

Most notably, Newfoundland and Labrador runs a universal program, which covers treatment for children regardless of income status, where private insurance pays first and the program pays for outstanding costs. Programs indicated with an asterisk (*) cover dental restorations.

Yukon

The territory of Yukon runs three publicly funded dental programs, including:

- · the Children's Pre-School Dental Program
- the Children's School-Based Dental Program*
- · Health Insurance Benefits.

A notable difference from the other provinces is that Yukon runs programs which cover restorative treatment in pre-school and school-age children. Programs indicated with an asterisk (*) cover dental restorations.

Northwest Territories

The Northwest Territories run six publicly funded programs, including:

- · Non-Insured Health Benefits*
- · Indigent Health Benefits**
- Extended Health Benefits Seniors' Program*
- · Dental Therapy Program, Métis Health Benefits*
- Extended Health Benefits for Specified Disease Conditions
- o Cleft Lip and Cleft Palate.



In addition to the general programs that other jurisdictions cover, the Northwest Territories also fund programs for seniors, children, and Indigenous Peoples. Programs indicated with an asterisk (*) cover dental restoration. The program indicated with two asterisks (**) cover some restoration in long-term recipients only.

Nunavut

The territory of Nunavut runs five publicly funded programs, including:

- In-Hospital Surgical Dental Services
- the Dental Therapy Program*
- · Contracted Dental Services*
- the Nunavut Oral Health Pilot Project
- the Extended Health Benefits Full Coverage Plan.*

Most notable, Nunavut also covers programs for children, seniors who have no insurance plans, and Indigenous Peoples. Programs indicated with an asterisk (*) cover dental restorations.

Federal Programs

There are six federal programs that run publicly funded programs outside of the public service, including:

- National Defence and the Canadian Armed Forces*
- · Veterans Affairs Canada*
- · Royal Canadian Mounted Police*
- · Correctional Services Canada**
- · Citizenship and Immigration Canada*
- Department of Indigenous Services Canada, First Nations and Inuit Health Branch, Non-Insured Health Benefits (NIHB) Program.*

Programs indicated with an asterisk (*) cover dental restoration. The program indicated with two asterisks (**) covers basic services, which may include some dental restoration.

Objective 2: To obtain the annual number of services (claims) for composite resin (tooth-coloured) or amalgam fillings on permanent, posterior teeth that are funded by Canadian publicly funded dental programs

Surveys were distributed to key informants in all provinces and territories via email invitation. Of the 18 informants surveyed, two jurisdictions provided partial responses. The annual number of procedures involving composite resin or amalgam fillings that are funded by public dental programs could not be derived due to limited responses. Neither the literature search nor the survey provided sufficient information to answer this research question.

Objective 3: To compare reimbursement rates for dental restorative procedures across programs

The literature search provided the majority of evidence regarding the reimbursement rates for dental restorative procedures across programs in Canada. The only exception was Manitoba, where the rates were obtained directly from a survey respondent. No rates were identified for New Brunswick, Yukon, or Nunavut. All provinces and territories and federal



programs use the procedures codes developed by the Canadian Dental Association. One notable inconsistency identified is that Québec and Newfoundland and Labrador use different dental fee codes for their public programs. Although the focus on this report was on publicly funded dental programs, the suggested fee guides from provincial dental associations have also been included for reference. Each provincial dental association publishes a fee guide for professional information purposes as a reference for dental practitioners. The fee guides provide suggested fees for dental services performed under normal conditions in order to facilitate the development of a structure of fees fair and reasonable to patients, and to the practitioners, and was considered to provide a proxy measure for the cost of dental services in private settings. Some of the fee guides in this scan provide reimbursement rates for specific programs (e.g., the Ontario fee guide reports fees for their Healthy Smiles Program), while other fee guides provide reimbursement rates as a general fee schedule for public programs (e.g., British Columbia fee schedule reports fees for most of their public programs). As a majority of the Canadian population are not eligible for public dental programs, excluding these reimbursement rates from this scan would not be representative of the Canadian setting.

Reimbursement rates for dental procedures across public schedules of fees and programs varied from province to province. The following reimbursement rates are not direct comparisons but rather an observation of the range of costs we found across the jurisdictions. An amalgam permanent filling of a premolar on one surface costs the least in Ontario at \$25.35 (Note: this is a children's program fee) and the most in Newfoundland and Labrador at \$117.05; an amalgam permanent filling of a premolar on five surfaces costs the least in Ontario at \$76.02 (Note: this is a children's program fee) and the most in Newfoundland and Labrador at \$234.41. An amalgam permanent filling on a molar on one surface costs the least in Ontario at \$31.68 (Note: this is a children's program fee) and the most in the Northwest Territories at \$115.70. By contrast, an amalgam permanent filling on a molar on five surfaces costs the least in Ontario at \$79.34 (Note: this a children's program fee) and costs the most in the Northwest Territories at \$268.20.

Conversely, a composite resin permanent filling on a premolar on one surface costs the least in Ontario at \$50.68 (Note: this is a children's program fee) and the most in the Northwest Territories at \$145.20; a composite resin permanent filling on a premolar on five surfaces costs the least in Ontario at \$114.04 (Note: this a children's program fee) and the most in the Northwest Territories at \$306.30. A composite resin permanent filling on a molar on one surface costs the least in Ontario at \$57.01 (Note: this is a children's program fee) and the most in the Northwest Territories at \$156.30. By contrast, a composite resin permanent filling on a molar on five surfaces costs the least in Ontario at \$123.66 (Note: this is a children's program fee) and costs the most in the Northwest Territories at \$350.30. Québec, Prince Edward Island, and Manitoba do not report fees for composite restorations in their fee schedules. This is because composite resin restorations of posterior teeth are not covered by public programs, reducing access to this type of care.

Reimbursement rates for publicly funded programs, including the fees for the Non-Insured Health Benefits, can be found in Appendix 4. The average and standard deviations of private fee codes from British Columbia, Alberta, Saskatchewan, New Brunswick, and Nova Scotia can be found in Appendix 5.



Limitations

This Environmental Scan presents an overview of publicly funded dental programs and reimbursement rates for dental restorative procedures in Canada. A systematic search was not conducted; so all relevant information may not have been identified. The annual number of procedures involving composite resin or amalgam fillings funded by public dental programs was not obtained through the literature search or the survey. Further, the information identified through the literature search could not be validated due to the lack of survey responses. Therefore, programs not reported in the literature or captured in the grey literature sources may not be included. Since most Canadians rely on private insurance, it is equally important to highlight that these public reimbursement rates are not reflective of private reimbursement fees and should not be extrapolated. In terms of access to information, all of the jurisdictions provided information regarding their publicly funded dental programs on their government websites; however, reimbursement rates were particularly difficult to obtain from specific jurisdictions (New Brunswick, Yukon, and Nunavut). In rural and remote areas, rates may differ; practitioners may qualify for premiums, or the procedures may be based on a different fee guide. For Manitoba, the fee guide listed in this report (Appendix 4), which reflects more urban areas, varies from the fee guide for their rural and remote areas (one private insurer notes that fees in Northern Manitoba are about 10% higher than those in the Manitoba guide).¹⁷ The fees listed in the report are general practitioner fees, but there are also specialist care fees and fees for individuals with disabilities that tend to be higher fees. Moreover, it is understood that dental health programming is continuously evolving. The data contained in this report was up to date as of December 1, 2017; information may have changed since the publication of this report.

Conclusion

In 2015, PHAC undertook an Environmental Scan of publicly funded dental care in Canada to describe the available programs and detail the associated legislation and financing trends across Canada. ¹⁵ The objective of the present Environmental Scan was to build on the previous work, but with an emphasis on reimbursement rates for dental restorative procedures, in order to inform the economic review for a CADTH HTA investigating whether dental amalgam should continue to be used in Canada.

In Canada, general oral health care is not included in the *Canada Health Act*, Canada's federal legislation for publicly funded health care insurance. ¹⁸ Canadians pay for dental care in four different ways: through third-party insurance (typically employment-related dental coverage), through private dental insurance, paying directly out of pocket, or through government-subsidized programs. ¹⁹ When compared with other Organization for Economic Co-operation and Development nations, Canada ranks second to last in public financing of dental care. ²⁰ The Canadian Health Measures Survey conducted in 2010 found that 62.6% of Canadians had private insurance and only 5.5% of Canadians had public insurance coverage through publicly funded programs, leaving the rest of Canadians with no dental insurance and resulting in the need to pay out of pocket for dental services. ¹⁴ Given the current state of affairs, this Environmental Scan observed considerable variability in the costs for dental services across Canada. This Environmental Scan excluded dental care provided by charitable organizations, universities, and private sector involvement.

All of the Canadian provinces and territories have their own unique set of publicly funded dental programs to supplement or fully cover the cost of dental care. These programs target key populations, including, but not limited to, children, Indigenous Peoples, seniors, adults



with disabilities, and individuals accessing employment insurance. They provide a wide array of services from preventive (e.g., fluoride treatments, dental sealants) to restorative dental care (e.g., amalgam or composite fillings, crowns). All of the provinces and territories provide services for residents who require emergency dental services. Most of the jurisdictions also fund programs that provide services for adults and children who require income assistance — with the exception of Yukon, the Northwest Territories, and Nunavut, which may be explained by the fact that those provinces receive funding from a separate federal program. Based on the findings of this Environmental Scan, Québec, Nova Scotia, Prince Edward Island, and Newfoundland and Labrador all provide restorative programs for children regardless of income. All children are covered in Québec, regardless of private insurance. Prince Edward Island covers children who have no private insurance. Nova Scotia and Newfoundland and Labrador cover subsequent charges that private insurance will not cover, as well as children who do not have private insurance, up to a maximum cost.

There was insufficient data identified to comment on the annual number of procedures involving composite resin or amalgam fillings that are funded by public dental programs.

Reimbursement rates for dental procedures across programs varied from province to province. The highest costs were reported in Northwest Territories , and may be partly explained by the potential difficulties obtaining resources. ²¹ Demand far exceeds resources and it has been noted that there is a limited and diminishing pool of oral health care providers in the Northwest Territories. ²¹

In Canada, dental benefits fall under provincial and territorial jurisdictions. There are many inconsistencies across the country, and the jurisdiction in which residents live determines what kind of publicly funded dental care is available to them. Programs also vary in terms of level of coverage and types of services covered (including preventive to treatment). One larger issue is that dental care is not included in Canada's national system of health insurance (Medicare).

This scan fulfilled the objectives of identifying and describing Canadian publicly funded dental programs and comparing reimbursement rates for dental restorative procedures, but we are unable to comment on the number of composite and amalgam restorations funded by public programs. Although the search was not systematic and there were limited survey responses, this Environmental Scan presents an overview of the current context around publicly funded dental programs and reimbursement rates across Canada. This report will be used to inform the economic review component of the CADTH HTA, addressing the following policy question: "Should dental amalgam continue to be used in Canada?". The HTA is anticipated to be published in the spring of 2018.²²



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Appendix 1: Survey — Public Dental Programs and Reimbursement for Dental Restorative Procedures

Draft Survey Questions — Public Dental Programs

1. What is your profession or role? (open-ended)

General Information

2.	What is the name of your organization?
3.	Are you currently involved in any capacity with a publicly funded dental care program? (Y/N) (If respond no survey ends)

0.	survey ends)			
		Please describe the nature of your involvement. (open-ended)		
4.	Whic	ch Canadian jurisdiction do you represent? Please select one.		
		Federal government		
		British Columbia		
		Alberta		
		Saskatchewan		
		Manitoba		
		Ontario		
		Québec		
		New Brunswick		
		Nova Scotia		
		Prince Edward Island		
		Newfoundland and Labrador		
		Nunavut		
		Northwest Territories		
		Yukon		

☐ Other (e.g., multiple)



Objective 1: To identify and describe Canadian publicly funded dental programs

The following question aims to identify publicly funded dental programs, including the size of the populations they serve.

5. What is/are the public dental program(s) you are representing? Please provide the name(s) of the program(s) and approximate size of the population served by each program?

Program Name	Population Size

Objective 2: To obtain the annual number of procedures involving composite resin (tooth-colored) or amalgam fillings that are funded by public dental programs

The following questions pertain to the number of restoration procedures performed on an annual basis.

6. How many amalgam and composite resin (tooth-colored) restorations of permanent posterior teeth were claimed under your program(s) during the last fiscal year for which data is available?

Please indicate the fiscal year: $_$	
Overall number of restorations:	

Please indicate the specific number of restorations per fee code below:

Code	Details	Number of Restorations
21211	AMALGAM (non-bonded) - PERMANENT PREMOLAR - 1 surface	
21212	AMALGAM (non-bonded) - PERMANENT PREMOLAR - 2 surfaces	
21213	AMALGAM (non-bonded) - PERMANENT PREMOLAR - 3 surfaces	
21214	AMALGAM (non-bonded) - PERMANENT PREMOLAR - 4 surfaces	
21215	AMALGAM (non-bonded) - PERMANENT PREMOLAR - 5 surfaces	
21221	AMALGAM (non-bonded) - PERMANENT MOLAR - 1 surface	
21222	AMALGAM (non-bonded) - PERMANENT MOLAR - 2 surfaces	
21223	AMALGAM (non-bonded) - PERMANENT MOLAR - 3 surfaces	
21224	AMALGAM (non-bonded) - PERMANENT MOLAR - 4 surfaces	
21225	AMALGAM (non-bonded) - PERMANENT MOLAR - 5 surfaces	
23311	COMPOSITE RESIN (bonded) - PERMANENT PREMOLAR - 1 surface	
23312	COMPOSITE RESIN (bonded) - PERMANENT PREMOLAR - 2 surfaces	
23313	COMPOSITE RESIN (bonded) - PERMANENT PREMOLAR - 3 surfaces	
23314	COMPOSITE RESIN (bonded) - PERMANENT PREMOLAR - 4 surfaces	
23315	COMPOSITE RESIN (bonded) - PERMANENT PREMOLAR - 5 surfaces	



Code	Details	Number of Restorations
23321	COMPOSITE RESIN (bonded) - PERMANENT MOLAR - 1 surface	
23322	COMPOSITE RESIN (bonded) - PERMANENT MOLAR - 2 surfaces	
23323	COMPOSITE RESIN (bonded) - PERMANENT MOLAR - 3 surfaces	
23324	COMPOSITE RESIN (bonded) - PERMANENT MOLAR - 4 surfaces	
23325	COMPOSITE RESIN (bonded) - PERMANENT MOLAR - 5 surfaces	

(The following table is for Newfoundland, only.)

Code	Details	Number of Restorations
86500	AMALGAM (non-bonded) - PERMANENT MOLAR - 1 surface	
86510	AMALGAM (non-bonded) - PERMANENT MOLAR - 2 surfaces	
86520	AMALGAM (non-bonded) - PERMANENT MOLAR - 3 surfaces	
86530	AMALGAM (non-bonded) - PERMANENT MOLAR - 4 surfaces	
86540	AMALGAM (non-bonded) - PERMANENT MOLAR - 5 surfaces	
86460	COMPOSITE RESIN (bonded) - PERMANENT PREMOLAR - 1 surface	
86470	COMPOSITE RESIN (bonded) - PERMANENT PREMOLAR - 2 surfaces	
86480	COMPOSITE RESIN (bonded) - PERMANENT PREMOLAR - 3 surfaces	
86490	COMPOSITE RESIN (bonded) - PERMANENT PREMOLAR - 4 surfaces or more	
86501	COMPOSITE RESIN (bonded) - PERMANENT MOLAR - 1 surface	
86502	COMPOSITE RESIN (bonded) - PERMANENT MOLAR - 2 surfaces	
86503	COMPOSITE RESIN (bonded) - PERMANENT MOLAR - 3 surfaces	
86504	COMPOSITE RESIN (bonded) - PERMANENT MOLAR - 4 surfaces	
86505	COMPOSITE RESIN (bonded) - PERMANENT MOLAR - 5 surfaces	

7. Of the restorations in your response to question number 6, what proportion was considered a first restoration (as opposed to subsequent restoration on a tooth that has received prior restoration)?

Restoration Material	Proportion of First Restoration (%)	
Amalgam	Unknown	
Composite resin	Unknown	

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Ш	Data

☐ Estimate



Objective 3: To compare reimbursement rates for dental restorative procedures across programs

The following questions ask about the reimbursement rates for amalgam and composite resin (tooth-colored) restorations of permanent posterior teeth

- 7. Are you able to provide a copy of your fee schedule for your dental program(s) that includes information regarding the restorations listed in question number 6? (Y/N) If yes, please upload or submit to kelseys@cadth.ca.
- 8. Of the restorations in your response to question number 5, which procedure codes were most frequently used? Please indicate the procedure fees for these most frequently used codes.

Code	Details	Procedure Fees
21211	AMALGAM (non-bonded) - PERMANENT PREMOLAR - 1 surface	
21212	AMALGAM (non-bonded) - PERMANENT PREMOLAR - 2 surfaces	
21213	AMALGAM (non-bonded) - PERMANENT PREMOLAR - 3 surfaces	
21214	AMALGAM (non-bonded) - PERMANENT PREMOLAR - 4 surfaces	
21215	AMALGAM (non-bonded) - PERMANENT PREMOLAR - 5 surfaces	
21221	AMALGAM (non-bonded) - PERMANENT MOLAR - 1 surface	
21222	AMALGAM (non-bonded) - PERMANENT MOLAR - 2 surfaces	
21223	AMALGAM (non-bonded) - PERMANENT MOLAR - 3 surfaces	
21224	AMALGAM (non-bonded) - PERMANENT MOLAR - 4 surfaces	
21225	AMALGAM (non-bonded) - PERMANENT MOLAR - 5 surfaces	
23311	COMPOSITE RESIN (bonded) - PERMANENT PREMOLAR - 1 surface	
23312	COMPOSITE RESIN (bonded) - PERMANENT PREMOLAR - 2 surfaces	
23313	COMPOSITE RESIN (bonded) - PERMANENT PREMOLAR - 3 surfaces	
23314	COMPOSITE RESIN (bonded) - PERMANENT PREMOLAR - 4 surfaces	
23315	COMPOSITE RESIN (bonded) - PERMANENT PREMOLAR - 5 surfaces	
23321	COMPOSITE RESIN (bonded) - PERMANENT MOLAR - 1 surface	
23322	COMPOSITE RESIN (bonded) - PERMANENT MOLAR - 2 surfaces	
23323	COMPOSITE RESIN (bonded) - PERMANENT MOLAR - 3 surfaces	
23324	COMPOSITE RESIN (bonded) - PERMANENT MOLAR - 4 surfaces	
23325	COMPOSITE RESIN (bonded) - PERMANENT MOLAR - 5 surfaces	



(The following table is for Newfoundland, only)

Code	Details	Frequently Used	Procedure Fees
86500	AMALGAM (non-bonded) - PERMANENT MOLAR - 1 surface		
86510	AMALGAM (non-bonded) - PERMANENT MOLAR - 2 surfaces		
86520	AMALGAM (non-bonded) - PERMANENT MOLAR - 3 surfaces		
86530	AMALGAM (non-bonded) - PERMANENT MOLAR - 4 surfaces		
86540	AMALGAM (non-bonded) - PERMANENT MOLAR - 5 surfaces		
86460	COMPOSITE RESIN (bonded) - PERMANENT PREMOLAR - 1 surface		
86470	COMPOSITE RESIN (bonded) - PERMANENT PREMOLAR - 2 surfaces		
86480	COMPOSITE RESIN (bonded) - PERMANENT PREMOLAR - 3 surfaces		
86490	COMPOSITE RESIN (bonded) – PERMANENT PREMOLAR – 4 surfaces or more		
86501	COMPOSITE RESIN (bonded) - PERMANENT MOLAR - 1 surface		
86502	COMPOSITE RESIN (bonded) - PERMANENT MOLAR - 2 surfaces		
86503	COMPOSITE RESIN (bonded) - PERMANENT MOLAR - 3 surfaces		
86504	COMPOSITE RESIN (bonded) - PERMANENT MOLAR - 4 surfaces		
86505	COMPOSITE RESIN (bonded) - PERMANENT MOLAR - 5 surfaces		

9. Which procedure codes for crowns of the posterior teeth were most frequently used? If possible, please indicate the procedure fees for these most frequently used codes.

Code	Description	Frequently Used	Procedure Fees	
27113	Crown - composite (indirect)			
27121	Crown - composite (direct)			
27201	Crown – porcelain, ceramic, or polymer glass			
27211	Crown – porcelain			
27215	Crown – porcelain – implant-supported			
27301	Crown – metal			
27413	Crown – metal permanent posterior			
Other (Plea	Other (Please indicate code, description, and procedure fees below.)			



(The following table is for Newfoundland, only)

Code	Description	Frequently Used	Procedure Fees
87310	Crown – porcelain		
87311	Crown – porcelain – implant-supported		
86560	Crown – metal permanent posterior		
Other (Plea	ase indicate code, description, and procedure fees below)		



Appendix 2: Information on Survey Respondents

Province/Territory	Organization Represented by Survey Respondents
Manitoba	Manitoba Health
New Brunswick	Government of New Brunswick



Appendix 3: Canadian Publicly Funded Dental Programs

Table 2: Summary of Publicly Funded Dental Programs in British Columbia

Program	Eligibility	Dental Services Covered
Medical Services Plan ²³	All residents of BC who need dental or oral surgery that is medically required to be performed in a hospital	 Medically required services provided by a physician enrolled with Medical Services Plan Diagnostic services, including X-rays, provided at approved diagnostic facilities, when ordered by a registered physician, midwife, podiatrist, dental surgeon, or oral surgeon Dental and oral surgery, when medically required to be performed in hospital (excluding restorative services, i.e., fillings, caps, crowns, root canals, etc.)^a Orthodontic services related to severe congenital facial abnormalities
Dental Supplements (including BC Employment and Assistance Program's Dental Program) ²⁴	 Adults who are eligible for general health supplements based on individuals who receive income or disability assistance Adults with disabilities and persons with persistent multiple barriers Coverage includes adults, their spouse, and children under 19-years-old 	 Adults: Up to \$1,000 over 2 calendar years, beginning on January 1 of every odd-numbered year for basic services Basic dental services such as restorations, extractions, and preventative services Partial dentures, replacement dentures, or reline/re-base of dentures Crowns and bridges under certain circumstances Children (under 19-years-old): Up to \$2,000 over 2 calendar years, beginning on January 1 of every odd-numbered year An additional \$1,000 per year to cover the cost of dental treatment in hospital under general anesthetic
Healthy Kids ²⁵	Children under 19-years-old in families approved for premium assistance by the Medical Services Plan through the Ministry of Health, based on an individual's or family's net income, family size, disability, and any reported Universal Child Care Benefit and Registered Disability Savings Plan income	Children receive up to \$2,000 over 2 calendar years for basic services ^b Exams X-rays Fillings Cleanings Extractions
Early Childhood Health and Screening Programs ²⁶	All children 0- to 5-years-old	This program, delivered by public health staff, includes: Fluoride varnish application Dental screenings Education Family support



Program	Eligibility	Dental Services Covered
Children in Care Medical Benefits Program ²⁷	 Children and youth in care of the Ministry of Children & Family Development Children and youth in the care of Delegated Aboriginal Agencies 	Basic and major restorative dental coverage to a maximum of \$700 per year Services that are funded: Diagnostic Preventative Restorative Endodontic Periodontics Prosthodontic Anesthesia Oral surgical services Orthodontic services
First Nations Health Authority – Children's Oral Health Initiative ²⁷	First Nations children 0- to 7-years-old, their parents/caregivers, and pregnant women (all must reside on-reserve)	 Annual screenings Fluoride varnish Dental sealants Temporary fillings Oral health education
First Nations Health Authority Health Benefits Program ²⁸	 Must be a registered "Indian"²⁹ according to the Indian Act or the infant of an eligible parent Must be a resident of British Columbia Must not be funded or insured under any other benefit system or benefit plans provided by federal legislation or a First Nations organization 	 Diagnostic services Preventive Services Restorative services Endodontic services Periodontal services Prosthodontic services Oral surgery services Orthodontic services Adjunctive services

BC = British Columbia.

^a For the Medical Services Plan the removal of healthy wisdom teeth is not a benefit. Surgical removal of an impacted third molar (wisdom tooth) is a Medical Services Plan insured service only when hospitalization is medically required, due to the extreme complexity of the extraction and where there is associated pathology.

^b Emergency treatment is available if the child has reached the \$2,000 limit; it is available only for the immediate relief of pain. Orthodontics are not included.



Table 3: Summary of Publicly Funded Dental Programs in Alberta

Program	Eligibility	Dental Services Covered
Alberta Health Care Insurance Plan, including the OMDS Program ^{15,30,31}	All residents of Alberta	 Medically necessary oral surgical and dental procedures in a hospital or an accredited non-hospital surgical facility (deemed medically necessary by a physician) Some specific dental, oral, and maxillofacial surgical services are fully covered The OMDS may provide funding for some high-cost dental services required with an oral surgical procedure under the AHCIP
Assured Income for the Severely Handicapped Program ³²	 Adults who have a disability that limits their ability to earn a living (income level is based on pre-specified criteria) Adults at least 18-years-old who are not eligible to receive an Old Age Security pension Coverage also includes cohabiting partners and dependent children 	Services are that fully covered: Complete, recall, and emergency examinations Teeth cleaning X-rays Restorations (fillings) Extractions Dentures
Alberta Works Income Support ³³	 Albertans (individuals and families) in four general situations may qualify for support: Cannot work due to chronic health issues or other barriers to employment Looking for work, working but not earning enough, or temporarily unable to work Need training so they can get a job Faced with an unexpected, on-time emergency that is not fault of their own Includes children up to age 18, and up to age 20 if they live at home and are attending high school 	 Basic services like extractions and fillings are fully covered Additional services like teeth cleaning and annual examinations are fully covered for children
Alberta Child Health Benefit ³⁴	 This program is designed for children in families with limited incomes (if the family makes \$26,023 or less per year, one child can be signed up; for each additional child, add \$4,973) Children up to age 18 who live at home Children up to age 20 if they live at home and are attending high school up to grade 12 	Services that are fully covered: X-rays Dental exams Teeth cleaning Fillings and extractions



Program	Eligibility	Dental Services Covered
Alberta Adult Health Benefit Plan ³³	 Individuals who are pregnant and have limited income (if a single individual's income is under \$16,580, they can qualify; maximum qualifying income increases with children and spouse) Individuals who have high ongoing prescription drug needs and limited income Individuals who leave Income Support and have income from employment, self-employment, or the Canada Pension Plan Disability program Individuals who leave Assured Income for the Severely Handicapped (AISH) and have income from employment, self-employment, or the Canada Pension Plan Disability program 	Basic services like extractions and fillings are fully covered Some additional services like teeth cleaning and annual examinations are also covered
School Oral Health Services ³⁵	Children in Kindergarten, Grade 1, and Grade 2	 Fluoride varnish provided to: Kindergarten Grade 1 Grade 2 Dental sealants provided to: Grade 1 Grade 2
Dental Assistance for Seniors Program ³⁶	Residents 65 years of age or older who have an income level within the limits allowed by the program Single senior: income must be \$31,675 or under Senior couple: income must be \$63,350 or under	 A maximum of \$5,000 of coverage for eligible procedures every 5 years based on income Services include: Diagnostic services – examinations and X-rays Preventative services – polishing and scaling Restorative services – fillings, trauma/pain control/pins Extractions – simple and complicated Root canals (Endodontics) Procedures relating to gum disease (Periodontics) – root planing Dentures (Prosthodontics) – full and partial basic dentures
Reduced-Fee Dental Care for Qualified Low-Income Clients ³⁷	 For adults and children in Alberta who: Live on a poverty-line income (varies depending on how many individuals are in the family, e.g., 1 person family income cut-off is \$24,949) Have no access to a group dental insurance plan 	Available service fees are approximately 20% of the Alberta Usual and Customary Fee Guide for Dental Services and include: Check-ups Extractions Fillings Front Tooth Root Canals Panorex (panoramic radiograph) Scaling X-rays



Program	Eligibility	Dental Services Covered
Family Support for Children with Disabilities ^{38,39}	Children under 18 who have a disability	 Assistance with some of the disability-related costs for dental care The need for the treatment must be directly related to the child's disability The treatment must be recommended by the dental review committee Disability-related costs that exceed what is covered by the guardian's dental insurance plan or if the guardian does not have a dental insurance or benefit plan, the costs exceeding \$250.00 per 12-month period
Cleft Palate Dental Indemnity Program ⁴⁰	 Alberta residents: Under the age of 25 and covered under the Alberta Health Care Insurance Plan Congenital cleft affecting the hard palate Registered at a Cleft Palate Clinic in Alberta 	 Diagnostic services that are fully covered include: One initial complete examination per specialty One recall examination per 12-month period A maximum of 2 recall examinations performed by an oral and maxillofacial surgeon relating to a procedure not covered under the Alberta Health Care Insurance Plan Preventive services that are fully covered include: One unit of scaling, polishing, and fluoride treatment per 12-month period One unit of dental related nutritional counselling/oral hygiene instruction per 12-month period for pediatric patients with high caries Pit and fissure sealants once per tooth for the first permanent molars and the two teeth on either side of the cleft Restorative services that are fully covered include: Basic restorative services for two teeth on either side of the cleft Endodontic services that are fully covered include: Maintenance of permanent dentition on the two teeth on either side of the cleft Periodontic services that are fully covered include: Maintenance and stability of teeth and soft tissues directly associated with the cleft site or the abutment teeth involved in the prosthetic restoration of missing teeth associated with the cleft Prosthodontic services that are fully covered include: Removable and fixed prostheses to replace missing teeth in the cleft area Replacement of a removable or fixed prosthesis after 5 years from the initial placement if deemed necessary Dental implants are covered on a one-time basis only A maximum of one denture reline per 3



Program	Eligibility	Dental Services Covered
Cleft Palate Dental Indemnity Program ⁴⁰	 Alberta residents: Under the age of 25 and covered under the Alberta Health Care Insurance Plan Congenital cleft affecting the hard palate Registered at a Cleft Palate Clinic in Alberta 	 Oral and maxillofacial surgery services that are fully covered include: Dental extraction coverage may include those teeth associated with the cleft that are supernumerary, malformed, or non-functional and/or extractions of premolars where extraction is required A pre-surgical work-up when required General anesthesia services that are fully covered include: Pre-authorized general and neuroleptanesthesia Orthodontic services that are fully covered include: All active treatment, insertion of retainers, orthodontic records, observation appointments, radiographs, and retention observation appointments

AHCIP = Alberta Health Care Insurance Plan; OMDS = Oral and Maxillofacial Devices and Services.

^a Percentage of coverage is unclear.



Table 4: Summary of Publicly Funded Dental Programs in Saskatchewan

Program	Eligibility	Dental Services Covered
Saskatchewan Medical Services Plan – Partially Covered Services ^{15,41}	All residents of Saskatchewan	Specific oral surgery procedures required to treat specific conditions caused by accidents, infection, congenital problems, or other factors performed in a hospital or private practice; this includes infants and children with cleft palate Extracting teeth when medically required before undertaking certain surgical procedures Dental implants in exceptional situations where no other method of treatment is appropriate (i.e., circumstances related to tumours and congenital defects)
Family Health Benefits ⁴²	Low-income working families who meet the standards of an income test or are receiving the Saskatchewan Employment Supplement or the Saskatchewan Rental Housing Supplement	 Children are fully covered for most dental services Parents or legal guardians may apply for additional coverage under the Special Support program
Supplementary Health Benefits ⁴³	 This program provides assistance to: Government wards Inmates of provincial correctional institutions Residents of special care facilities who are eligible for the Senior's Income Plan Those in specific income support programs (eligibility for this coverage is determined by the Ministry of Social Services) including: Saskatchewan Assured Income for Disability Saskatchewan Assistance Program Transitional Employment Allowance Provincial Training Allowance 	Dental Services Emergency Benefits (coverage is limited to relieving pain and controlling infection) If residents are 18-years-old or older and are able to work, they and their spouse are eligible only for emergency dental benefits for 6 months. After 6 months, residents become eligible for full benefits. Basic dental services are fully covered including: Preventive Restorative Exodontic Prosthetic
Enhanced Preventive Dental Services Initiative ⁴⁴	This preventive program ^a is implemented at the regional level in schools in the regions with the highest need – these areas include Athabasca, Keewatin Yatthé, Mamawetan Churchill River, Prince Albert/Parkland, Prairie North, Regina Qu'Appelle, and Saskatoon	 Full coverage for this program includes: Oral health assessments Referral and follow-up Fluoride varnish Dental sealants

^aFocus on disease prevention and health promotion targeting early childhood tooth decay in at-risk population.



Table 5: Summary of Publicly Funded Dental Programs in Manitoba

Program	Eligibility	Dental Services Covered
Manitoba Health Care Coverage ^{15,45}	All residents of Manitoba	 Certain dental procedures provided by specialists or generalists in hospitals or private practices Provides orthodontic benefits in cases of cleft lip and palate when provided by an orthodontist (persons registered by 18 years old)
EIA Program ⁴⁶	Individuals and families receiving EIA (if an individual or their family's monthly basic needs and housing costs are more than their total financial resources)	Exams ^a Cleaning and extractions ^a
Healthy Smile Happy Child – Early Childhood Tooth Decay ⁴⁷	At-risk children populationsb in all regional health authorities in Manitoba	Preventive services Educational resources
S.M.I.L.E. Plus Children's Oral Health Program ⁴⁸	All children enrolled in several elementary schools in the Winnipeg Health Region	 Oral health needs assessments Oral health promotion Dental pit and fissure sealant treatment Topical fluoride treatment School-based clinical treatment

EIA = Employment and Income Assistance.

^a Percentage of coverage is unclear.

^b Specific criteria unclear.

[°] Details unclear.



Table 6: Summary of Publicly Funded Dental Programs in Ontario

Program	Eligibility	Dental Services Covered
Ontario Health Insurance Plan ^{15,49}	All residents of Ontario for surgical dental services as prescribed under the <i>Health Insurance Act</i>	 Fracture repair Tumour removal Reconstructive surgeries Medically necessary tooth removal (prior approval by OHIP is required) Performed by specialists or generalists in hospitals
The Ontario Cleft Lip and Palate/Craniofacial Dental Program ⁵⁰	Residents of Ontario who have a diagnosed cleft lip and/or palate, a craniofacial anomaly, or other severe dental dysfunction. Individuals must be registered in the program before their 18th birthday.	To 75% of the pre-approved dental specialist treatment costs not covered by private dental insurance, which may include: Dental infant orthopedics Orthodontic treatment Some restorative dentistry Dental prosthetics Dental implants and oral surgery not funded by OHIP
Healthy Smiles Ontario ⁵¹	Children and youth 17-years-old and under from low-income households whose family net income is \$22,760 or lower with 1 child and increases by \$1,722 for each additional child	The program fully covers the costs of treatment including: Check-ups Cleaning Fillings X-rays Scaling Urgent or emergency dental care
Oral and Maxillofacial Reconstruction Program ⁵²	 Applicants must be 18 years of age and older Applicants must also be eligible for an ADP Maxillofacial Intraoral Prosthesis 	Covers 100% of the treatment costs for a defined list of services including the surgical placement of dental implants and the modifications to the ADP-funded prosthesis that are required to attach it to the implants
Ontario Works Adults – Extended Health Benefits ⁵³	 Residents of Ontario who require money immediately to pay for food and shelter and are willing to take part in activities that will help them find a job Residents who have high health costs and no longer qualify for financial help from Ontario Works; Extended Health Benefits may be available to help cover the costs 	Basic dental care ^a
Assistance for Children with Severe Disabilities ⁵⁴	Children who are < 18 years of age and have a severe disability	Depending on the income and size of the family, the program may provide between \$25 and \$470 a month to help with costs such as dental care
Ontario Disability Support Program ⁵⁵	ODSP recipients and their spouses ^b	Basic dental services ^a



Program	Eligibility	Dental Services Covered
Ontario Disability Support Program – Dental Special Care Plan ⁵⁶	 ODSP recipients and their spouses In addition to basic dental services, recipients and eligible spouses may receive services under the Dental Special Care Plan 	Additional dental services for those whose disability, prescribed medications, or prescribed medical treatment affects their oral health (e.g., radiation of head/neck, diuretics, diabetes) ^c

ADP = Assistive Devices Program; ODSP = Ontario Disability Support Program; OHIP = Ontario Health Insurance Plan.

Table 7: Summary of Publicly Funded Dental Programs in Québec

Program	Eligibility	Dental Services Covered
Régie de l'assurance maladie du Québec ⁵⁷	All residents of Québec	 Certain oral surgery services delivered in hospital that are medically necessary due to trauma or disease including: Certain bone grafts Drainage of an abscess Removal of a cyst or tumour Reduction of a fracture Also includes, related examinations, local or general anesthesia, X-rays
Régie de l'assurance maladie du Québec for Children ⁵⁷	All children under the age of 10 regardless if child has other coverage	Complete coverage includes: One examination per year Emergency examinations X-rays Local or general anesthesia Amalgam fillings for the posterior teeth Composite fillings for the anterior teeth Prefabricated crowns Sedative dressings Endodontics Tooth and root extractions The oral surgery services covered for everyone Costs related to cleaning, scaling, fluoride application, and pit and fissure sealing are not covered

^a Percentage of coverage is unclear; details regarding what care is covered are unclear.

^b Children 17 years and under are automatically enrolled in Healthy Smiles Ontario.

 $^{^{\}circ}$ Percentage of coverage is unclear.



Program	Eligibility	Dental Services Covered
Régie de l'assurance maladie du Québec Low Income Program – 12 and 24 months ⁵⁷	Recipients of last-resort financial assistancea and their dependants for at least 12 or 24 months determined by the Ministère du Travail, de l'Emploi et de la Solidarité sociale • To be eligible for last-resort financial assistance, residents must prove that their resources are equal or less than the amounts prescribed by regulation	Recipients of last-resort financial assistance for at least 12 consecutive months include: One examination per year Emergency examinations X-rays Local or general anesthesia Amalgam fillings for the posterior teeth Composite fillings for the anterior teeth Prefabricated crowns Endodontics Tooth and root extractions Oral surgery services covered for everyone Cleaning of teeth and teaching hygiene procedures from age 12 Application of fluoride, age 12 to 15 inclusive Scaling from age 16 Recipients of last-resort financial assistance for at least 24 consecutive months include all services indicated above and special written authorization is needed for the following services: One lower dental prosthesis and one upper acrylic dental prosthesis every 8 years One re-coating every 5 years Half the cost of replacing lost or damaged dental prostheses Replacement of prostheses following surgery Repair of prostheses Addition of structure In emergencies only, for recipients of last-resort financial assistance for less than 12 consecutive months, services include: Tooth and root extractions Opening of the pulp chamber Drainage of an abscess Hemorrhage control Repair of a soft tissue laceration Reduction of an alveolar fracture Immobilization of a tooth loosened by trauma Re-implantation of a complete exfoliated tooth
Québec Public Health Program – Dental Health ⁵⁸	All children aged 5 to 15 regardless if child has other coverage	 Applying a dental sealant to the surfaces of permanent molars with sulcus and fissures Provides individualized preventive follow-up in schools so that kindergarten to grade 3 children who meet the criteria for a high risk of dental caries receive two topical applications of fluoride per year

^a Details of inclusion criteria unclear.



Table 8: Summary of Publicly Funded Dental Programs in New Brunswick

Program	Eligibility	Dental Services Covered
New Brunswick Medicare ⁵⁹	All residents of New Brunswick	Pays for medically required surgical dental procedures in an approved hospital
Health Services Dental Program ⁶⁰	 Clients from the Department of Social Development and their dependants 19 years of age and older Individuals who have special health needs (e.g., qualifying disabilities) and qualify for assisted health care 	Basic Services Included: Exams, X-rays Dentures and repairs Specific types of fillings Coverage: Clients are eligible for a maximum of \$1,000 per year, excluding emergency and prosthetic services Clients will be charged a 30% participation fee for dentures and denture repair
Health Services Enhanced Dental Program ⁶¹	Eligible clients are: Between the ages of 20 and 63 Participating in Career Development Options programminga In need of additional treatment to support employment or educational goals Clients are eligible for this program for one year with the option to renew annually for a maximum of three years	Services included: Complete oral examination Cleaning Scaling/root planing Root canal on anterior teeth Coverage: Clients are eligible for a maximum of \$1000 per year, excluding emergency and prosthetic services
Cleft Palate Program ¹⁵	Children 0 to 19 years of age who have a cleft of the hard palate; eligibility is income based	Orthodontic care ^b
Fluoride Mouthrinse Program ⁶²	Elementary school children across the province may participate in the program free of charge in schools that have opted to provide this service	Fluoride solution once a week
Healthy Smiles, Clear Visions ⁶³	 Children of low-income families with no insurance plans Dependent children aged 18 years or younger Not have dental and vision coverage through another government program or private insurance A family net income level not exceeding a certain amount; income varies from \$22,020 to \$41,196 depending on family size 	 This program provides full coverage for the following dental benefits: Regular exams X-rays and extractions Some preventative treatments such as sealants and fluorides

^a Services offered to all clients receiving social assistance who have potential for employment.

^b Percentage of coverage is unclear.



Table 9: Summary of Publicly Funded Dental Programs in Nova Scotia

Program	Eligibility	Dental Services Covered				
Nova Scotia Department of Health and Wellness Dental Surgical Program ⁶⁴	All residents of Nova Scotia who require medically necessary dental care	Fees for dental surgical procedures delivered in a hospital include immediate preoperative, operative, and post-operative care provided within 30 days following the surgery				
Income Assistance ⁶⁵	Residents may be eligible for income assistance if they are 19 years or older, live in Nova Scotia, and are in financial need Monthly income is less than the income assistance program allows for basic expenses	The program helps cover the cost for emergency dental care under certain circumstances: Pain Bleeding in the mouth that will not stop Swollen gums Damaged dentures Dental problem that could prevent them from getting a job				
Cleft Palate/ Craniofacial Program ⁶⁴	 Residents who have a craniofacial anomaly that directly influences the growth and development of the dentoalveolar and craniofacial structure Residents are covered from birth to the end of the month in which they turn 23 years of age 	Various oral surgical and dental procedures ^a				
Maxillofacial Prosthondontics Program ⁶⁴	 Residents must be deemed eligible for the program by the qualified specialists Medically required dental services for residents whose maxillofacial prosthodontic needs are the result of congenital facial disorders, cancer, surgery, trauma, or neurological deficits 	Various oral surgical and dental procedures				
Mentally Challenged Program ⁶⁴	Residents who are deemed to be intellectually disabled to a degree where chair management is untenable and whose dental needs may necessitate delivery in a hospital setting under a general anesthetic or acceptable alternative	 Insured services are those described in the Fee Schedule for the Children's Oral Health Program If major restorative and/or dental surgical program services are required, pre-authorization must be obtained prior to beginning treatment 				
Nova Scotia Children's Oral Health Program ⁶⁶	All children 14 years of age and younger Private insurance pays first and program will cover subsequent costs up to regulated maximum	 One routine dental exam, once a year Two routine X-rays, once a year One preventative service (for example, brushing and flossing), once a year Fillings and necessary extractions are also covered by the program Sealants are also covered for molars that meet certain guidelines Fluoride treatments may also be covered, depending if the child qualifies 				



Program	Eligibility	Dental Services Covered
Fluoride Mouthrinse Program ⁶⁷	All children aged 4 to 12 years in selected elementary schools	Fluoride rinse once a week
Children in Care ¹⁵	Children who are in the care and custody of The Minister of Community Services	Diagnostic, preventive, and treatment services ^a
Disability Support Program ⁶⁸	Individuals with intellectual/physical disabilities and/or long-term mental illness	Dental services required by the participant may be approved as a special need
		 Individuals must access any private dental plans or other dental program services provided by the Department of Health and Wellness before applying to request coverage from DSP

DSP = Disability Support Program.

^a Percentage of coverage is unclear.



Table 10: Summary of Publicly Funded Dental Programs in Prince Edward Island

Program	Eligibility	Dental Services Covered				
Hospital and Medical Services Insurance ⁶⁹	All residents of Prince Edward Island who require medically necessary dental care with prior approval of the Department of Health and Wellness	Coverage for certain procedures delivered in a hospital				
Children's Oral Health Programs ⁷⁰	These programs are included in the Children's Oral Health Programs: Dental Preventative Services Program Dental Treatment Services Program Orthodontic Preventative Program Pediatric Specialist Services Program Cleft Lip/Palate Orthodontic Program Children aged 3 to 17 who do not have a private insurance plan Children who are born with a cleft palate	 Preventative dental services (screening, fluoride, cleaning, and sealants) are covered once a year Basic dental diagnosis and treatment (annual checkup, X-ray, fillings, extraction, root canals, and dentures limited to anterior teeth) Orthodontic treatment (preventative and interceptive); treatment is covered, but laboratory fees for appliances will be charged to parents or guardians Pediatric dental specialist and in-hospital dental treatments are covered for children who qualify Cleft palate orthodontic treatment funding is available; depending on family income and number of children in the family, funding will cover 50% to 100% of the cost of orthodontic treatment 				
Dental Public Health Services Long-Term Care Residents ⁷⁰	Residents in long-term care facilities	 Long-term dental treatment, provided to residents in long-term care facilities, includes coverage for: Annual screening for signs of oral disease Preventative treatment such as cleaning and scaling 				
Social Assistance Program ^{71,72}	Residents are chosen on a case-by- case basis to meet program eligibility requirements who require social assistance	Basic dental services including diagnostic, emergency, and prosthetic services				



Table 11: Summary of Publicly Funded Dental Programs in Newfoundland and Labrador

Program	Eligibility	Dental Services Covered				
Surgical Dental Program ⁷³	All residents of Newfoundland and Labrador who require medically necessary dental care	Coverage for certain procedures delivered in a hospital				
Children's Dental Health Program ⁷³	 Children 12 years and younger Includes dental services for all children For families with private insurance, the provincial government is the payer of last resort, covering the differences in cost 	 Coverage for this program includes:a Exams at 6-month intervals Cleanings at 12-month intervals Fluoride applications for children aged 6 to 12 at 12-month intervals Some X-rays Routine fillings and extractions Sealants 				
Income Support Program ⁷³	Children 13 to 17 years in families receiving income support	 Basic services only, limited to a 2-year cycle Examinations at 2-year intervals Routine fillings and extractions Cleanings, fluorides, and sealants are not eligible under this program 				
Low Income (Access) Program ⁷³	Children 13 to 17 years in families whose are enrolled in the Access Plan of the NLPDP	 Basic services only, limited to a 2-year cycle Examinations at 2-year intervals Routine fillings and extractions Cleanings, fluorides, and sealants are not eligible under this program 				
Adult Dental Program ⁷³ Residents enrolled under the Foundation Plan (income support), Access Plan (low-income people with the drug card with a family income of \$42,000 or less) and the 65 Plus Plan (those who have the drug card) of the NLPDP		Basic services are limited to a 3-year cycle fully cover: X-rays Routine fillings Extractions Emergency exams to deal with pain, infection, and trauma Dentures are limited to "standard dentures" on an 8-year cycle				

NLPDP = Newfoundland and Labrador Prescription Drug Program.

^a Percentage of coverage is unclear.



Table 12: Summary of Publicly Funded Dental Programs in Yukon

Program	Eligibility	Dental Services Covered
Health Insurance Benefits ⁷⁴	All residents of Yukon	Certain dental surgical procedures that have to be performed in an approved hospital
Children's Pre-School Dental Program ⁷⁵	All children up to 5 years of age	 On the first visit, children are given a dental health basket full of information and dental health items to help keep their mouth and body happy and healthy A pre-school dental therapist is available for consultations
Children's School- Based Dental Program ⁷⁶	 Home-school children and students from kindergarten to Grade eight are eligible for services with a resident dentist Home-school children and students from kindergarten to Grade 12 are eligible for services without a resident dentist 	Dental services are supplied at no cost to the parent or guardian and include: Dental examination Diagnostic X-ray films Oral hygiene instruction Cleaning and/or scaling of teeth Fluoride application Sealants Initial dental examination is performed by a dentist, who will re-examine every 2 years, while a dental therapist will exam every other year If a child requires treatment, consent must be given by a parent and guardian. Treatment may include: Fillings (silver amalgam or composite resins) Stainless steel crowns (baby teeth) Pulpotomies (baby teeth) Extractions if required Emergency dental services Parent/Guardian meetings



Table 13: Summary of Publicly Funded Dental Programs in Northwest Territories

Program	Eligibility	Dental Services Covered				
Non-Insured Health Benefits ¹⁵	Registered First Nations and Recognized Inuita	Services that are covered include: Emergency Diagnostic Restorative Endodontic Periodontal Prosthodontics Oral surgery Orthodontic services				
Indigent Health Benefits ¹⁵	Individuals receiving income assistance payments from the Department of Education, Culture, and Employment and are not covered under the NIHB program ^a	Short-term clients are eligible for emergency benefits only Long-term clients are eligible for NIHB coverage				
Extended Health Benefits Seniors' Program ⁷⁷	 Non-Aboriginal or non-Indigenous Métis 60 years of age or older A permanent resident of NWT Registered with the NWT Health Care Plan 	100% coverage of the cost of eligible dental services, as defined by the First Nations and Inuit Health Branch (NIHB) schedule of dental benefits and subject to plan limitations and exclusions Services that are covered include:				
Dental Therapy Program ¹⁵	Children Emergencies in adults ^a	Services that are covered include: Emergency Diagnostic Restorative Periodontal Oral surgery services Community health interventions				
Métis Health Benefits ⁷⁸	 Registered Indigenous Métis A permanent resident of the NWT Registered with the NWT Health Care Plan 	Eligible dental services, as defined by Health Canada's NIHB include: Diagnostic services (exams and X-rays) Preventive services Restorative services Endodontic services Periodontal services Prosthodontic services Oral surgery services Orthodontic Adjunctive services				



Program	Eligibility	Dental Services Covered
Extended Health Benefits for Specified Disease Conditions (including Cleft Lip & Cleft Palate) ⁷⁹	 Non-Aboriginal or Métis^b A permanent resident of the NWT Registered with the NWT Health Care Plan Under the care of a physician or nurse practitioner for specific disease conditions 	

NIHB = Non-Insured Health Benefits; NWT = Northwest Territories.

Table 14: Summary of Publicly Funded Dental Programs in Nunavut

Program	Eligibility	Dental Services Covered
In-Hospital Surgical Dental Services ¹⁵	All residents of Nunavut who require dental services at a hospital	Various surgical dental procedures
Dental Therapy Program ¹⁵	Children Emergencies in adults ^a	Services include: Emergency Diagnostic Restorative Endodontic Periodontal Prosthodontic Oral surgery Orthodontic services
Contracted Dental Services ¹⁵	Registered First Nations and Inuit	Services include: Emergency Diagnostic Restorative Endodontic Periodontal Prosthodontic Oral surgery Orthodontic services
Nunavut Oral Health Pilot Project ⁸⁰	Children up to 7-years-old	Services that are covered include: Examinations Preventive treatments, including sealant, fluoride treatment, and temporary fillings Each child will receive a free dental kit that includes a toothbrush and toothpaste
Extended Health Benefits Full Coverage Plan ⁸¹	 A non-beneficiary senior 65 years or older with no other insurance plan Must be enrolled with the Nunavut Health Care Plan 	 Up to \$1,000 worth of dental services per year if not covered by another insurance plan The cost not covered by another insurance plan for one pair of dentures every 5 years The full cost of prescribed dentures, if they are not covered by another insurance plan

 $^{^{\}rm a}$ Information taken from the PHAC Environmental Scan 2015. $^{\rm 15}$

^a Information taken from the PHAC Environmental Scan.15

^b First Nations and Inuit are covered by the NIHB.



Table 15: Summary of Publicly Funded Federal Dental Programs

Program	Eligibility	Dental Services Covered						
National Defence and the Canadian Armed Forces ⁸²	Members of the reserve force and their dependants who work for the Canadian Armed Forces	 Full-spectrum dental care is completely covered including: Extensive dental procedures (e.g., root canal treatment, placement of a bridge, crown, or dentures) Orthodontic services 						
Veterans Affairs Canada Dental Services ⁸³	Veterans may qualify to receive financial support for treatment benefits, if they are in receipt of: • A disability benefit • The Veterans Independence Program • Financial assistance through the Long Term Care program • The War Veterans Allowance	 Provides coverage for: Basic dental care Annual basic treatments up to \$1,500 annually Exams, polish, and fluoride treatments every 9 months Scaling (8 units per year) Fillings and extractions Standard dentures once every 7 years Some pre-authorized comprehensive dental services Basic treatment exceeding \$1,500 annually Crowns Bridgework (X-rays required) Specialist treatment (referral required) Early replacement of dentures as determined by your dentist or denturist VAC dental program covers up to 100% of the rates in the provincial dental/denturist association fee guide 						
Royal Canadian Mounted Police ⁸⁴	Full-time and part-time employees who are employed for more than 6 months Eligible spouse or common-law partner and eligible dependent children of employee members	Basic services (90% coverage) include: • Examination and diagnosis • Recall oral examination limited to once every 9 months • Complete examination limited to once every 36 months • Routine preventive services (dental cleaning, polishing, and fluoride application limited to once every nine months) • Minor restorative procedures • Endodontics (root canal) • Periodontics (treatment of gum disease) • Minor prosthodontic services (repairs, adjustments, rebasing, and relining of removable dentures once every 36 months) • Oral surgery • Adjunctive services (anesthesia in connection with oral surgery and emergency services) Major services (50%) include: • Major restorative services (crowns once every 60 months, inlays) • Complete or partial dentures, fixed bridges (dentures once every 60 months) Orthodontics (50%) include: • Orthodontics services						



Program	Eligibility	Dental Services Covered
Correctional Services Canada ⁸⁵	All inmates of federal prisons	Essential health care, which includes dental care ^a
Citizenship and Immigration Canada ⁸⁶	The Interim Federal Health Program provides limited, temporary coverage of health care benefits to people who are not eligible for provincial or territorial health insurance: • Protected persons, including resettled refugees • Refugee claimants • Certain other groups The program will not cover any expenses already covered by insurance	The Interim Federal Health Program provides limited, temporary coverage of health care benefits including: Oral exams X-rays Caries, trauma, pain control Writing or dispensing an emergency prescription Amalgam/composite restoration (requires preauthorization) Extractions Denture relines Complete and partial dentures Denture repairs General anesthesia
Department of Indigenous Services Canada, First Nations and Inuit Health Branch, NIHB Program ⁸⁷	 An eligible client must be a resident of Canada and one of the following: A registered Indian according to the Indian Act An Inuk recognized by one of the Inuit Land Claim organizations An infant less than 18 months, whose parent is an eligible recipient 	The following services are covered: Diagnostic (exams and X-rays) Preventive Restorative Endodontic Periodontal Removable prosthodontic Oral surgery Orthodontic Adjunctive

NIHB = Non-Insured Health Benefits; VAC = Veterans Affairs Canada.

 $[\]ensuremath{^{\mathrm{a}}}$ Details regarding what is included in this program are unclear.



Appendix 4: Reimbursement Rates for Publicly Funded Dental Restorative Procedures

Table 16: Reimbursement Rates for Dental Restorative Procedures Across the Provinces and Territories (Up to Date as at December 2017)

Code	Surface(s)	BC ^{e,88}	AB ^{g,36}	SK ⁸⁹	MBª	ON ^{f,90}	QC ^{d,91}	NBb	NS ⁶⁴	PEI ⁷²	NL ^{c,92}	YT	NT ⁹³	NU
AMALG	AM (non-bond	led) PERMA	NENT PREM	IOLAR ^h										
21211	1 surface	\$70.15	\$90.00	\$97.90	\$79.11	\$25.35	\$40.25	NA	\$53.06	\$54.55	\$117.05	NA	\$104.10	NA
21212	2 surfaces	\$89.13	\$125.00	\$131.70	\$113.40	\$55.51	\$82.50	NA	\$79.61	\$107.16	\$156.68	NA	\$135.60	NA
21213	3 surfaces	\$105.38	\$158.93	\$151.30	\$137.40	\$63.35	\$98.75	NA	\$100.19	\$122.75	\$180.95	NA	\$163.90	NA
21214	4 surfaces	\$125.85	\$190.53	\$170.90	\$168.30	\$76.02	\$128.75	NA	\$129.66	\$135.41	\$234.41	NA	\$182.60	NA
21215	5 surfaces	\$147.45	\$211.00	\$190.50	\$199.98	\$76.02	\$162.75	NA	\$159.19	\$144.18	\$234.41	NA	\$219.10	NA
AMALG	AMALGAM (non-bonded) PERMANENT MOLAR													
21221	1 surface	\$76.23	\$93.54	\$109.50	\$94.68	\$31.68	\$53.25	NA	\$60.94	\$68.19	\$97.07	NA	\$115.70	NA
21222	2 surfaces	\$106.12	\$129.00	\$148.60	\$132.39	\$63.35	\$93.00	NA	\$86.56	\$103.26	\$133.34	NA	\$159.40	NA
21223	3 surfaces	\$122.15	\$160.65	\$170.00	\$159.48	\$79.34	\$122.25	NA	\$113.43	\$128.59	\$177.90	NA	\$178.80	NA
21224	4 surfaces	\$157.19	\$197.50	\$192.20	\$198.36	\$79.34	\$148.97	NA	\$156.19	\$135.41	\$210.87	NA	\$223.30	NA
21225	5 surfaces	\$180.68	\$228.00	\$214.50	\$237.15	\$79.34	\$191.50	NA	\$207.84	\$207.50	\$247.54	NA	\$268.20	NA
СОМРО	SITE RESIN (b	onded) PER	MANENT P	REMOLAR ^h										
23311	1 surface	\$96.27	\$129.00	\$97.90	NA	\$50.68	\$72.75	NA	\$79.15	NA	\$117.05	NA	\$145.20	NA
23312	2 surfaces	\$133.67	\$180.00	\$131.70	NA	\$87.17	\$119.00	NA	\$98.00	NA	\$156.68	NA	\$203.70	NA
23313	3 surfaces	\$160.32	\$212.20	\$151.30	NA	\$95.02	NA	NA	\$131.92	NA	\$180.95	NA	\$229.80	NA
23314	4 surfaces	\$196.89	\$247.26	\$170.90	NA	\$114.04	NA	NA	\$162.08	NA	\$234.41	NA	\$275.20	NA
23315	5 surfaces	\$221.63	\$280.16	\$190.50	NA	\$114.04	NA	NA	\$185.32	NA	\$234.41	NA	\$306.30	NA
СОМРО	SITE RESIN (b	onded) PER	MANENT M	OLAR										
23321	1 surface	\$103.87	\$135.24	\$109.50	NA	\$57.01	NA	NA	\$82.92	NA	\$134.89	NA	\$156.30	NA
23322	2 surfaces	\$158.84	\$190.00	\$148.60	NA	\$95.02	NA	NA	\$99.26	NA	\$190.37	NA	\$221.30	NA
23323	3 surfaces	\$191.66	\$226.00	\$170.00	NA	\$102.88	NA	NA	\$135.69	NA	\$237.36	NA	\$275.40	NA
23324	4 surfaces	\$230.00	\$260.00	\$192.20	NA	\$123.66	NA	NA	\$164.59	NA	\$287.30	NA	\$298.30	NA
23325	5 surfaces	\$270.36	\$299.00	\$214.50	NA	\$123.66	NR	NA	\$207.84	NA	\$331.13	NA	\$350.30	NA



Code	Surface(s)	BC ^{e,88}	AB ^{g,36}	SK ⁸⁹	MBª	ON ^{f,90}	QC ^{d,91}	NB⁵	NS ⁶⁴	PEI ⁷²	NL ^{c,92}	YT	NT ⁹³	NU
CROWN	IS													
27113	Crown composite (indirect) (excl L and/or E)	\$135.61	NA	NA	NA	\$95.02	NA	NA	NA	NA	NA	NA	\$155.30	NA
27121	Crown composite (direct) (excl L and/or E)	NA	NA	NA	NA	\$126.70	NA	NA	\$115.36	NA	NA	NA	\$199.30	NA
27201	Crown porcelain, ceramic, or polymer glass (excl L and/or E)	NA	NA	NA	NA	NA	NA	NA	\$486.48	NA	\$790.28	NA	\$792.20	NA
27211	Crown porcelain fused to metal (excl L and/or E)	NA	NA	NA	NA	\$443.43	NA	NA	\$486.48	NA	NA	NA	\$792.20	NA
27215	Crown porcelain implant- supported (excl L and/or E)	NA	NA	NA	NA	\$354.74	NA	NA	NA	NA	\$786.53	NA	\$792.20	NA
27301	Crown metal (excl L and/or E)	NA	NA	NA	NA	\$364.88	NA	NA	NA	NA	NA	NA	\$792.20	NA

AB = Alberta; BC = British Columbia; E = Examination Fees; excl = excluding; L = Laboratory Fees; MB = Manitoba; NA = not available; NB = New Brunswick; NL = Newfoundland and Labrador; NS = Nova Scotia; NT = Northwest Territories; NU = Nunavut; ON = Ontario; PEI = Prince Edward Island; QC = Québec; SK = Saskatchewan; YT = Yukon.

Note: some of the fee codes listed in this table are quoted from one specific public program (e.g., Ontario), while other codes are general fee schedules for multiple public programs (e.g., British Columbia).

^a Dr. Hai-Santiago, Government of Manitoba, Winnipeg, MB: personal communication, 2017 Nov 23.

^b Source was available, but the author of this report considered it out of date (1984).

^c Newfoundland and Labrador uses different public fee codes.

^d Québec has unique fee codes: amalgam (non-bonded) permanent premolar are identified as 21231-5, amalgam (non-bonded) permanent molar are identified as 21241-5, composite resin (bonded) permanent premolar are identified as 23221-5; an additional unique crown code: 27413 = \$145.00.

^e Average of the adult and child fee.

^f Ontario fees come from the Healthy Smiles Ontario program fee schedule.

⁹ Alberta fees come from the Dental Assistance for Seniors program fee schedule.

^h Premolars are also referred to as bicuspids and anterior by the Canadian Dental Association.



Table 17: Reimbursement Rates for Dental Restorative Procedures for Non-Insured Health Benefits (Rates for General Practitioner Dentist; Current up to December 2017)

Code	Surface(s)	NIHB- BC ⁹⁴	NIHB- AB ⁹⁴	NIHB- SK ⁹⁴	NIHB- MB ⁹⁴	NIHB- ON ⁹⁴	NIHB- QC ^{a94}	NIHB- NB ⁹⁴	NIHB- NS ⁹⁴	NIHB- PEI ⁹⁴	NIHB- NL ⁹⁴	NIHB- YT ⁹⁴	NIHB- NT ⁹⁴	NIHB- NU ⁹⁴
AMALGAM (non-bonded) PERMANENT PREMOLAR ^b														
21211	1 surface	\$91.94	\$81.12	\$92.50	\$71.35	\$91.61	\$48.17	\$65.63	\$85.86	\$61.66	\$74.93	\$101.97	\$84.27	\$84.27
21212	2 surfaces	\$115.59	\$119.25	\$125.08	\$102.18	\$122.45	\$99.46	\$102.89	\$109.93	\$119.35	\$115.60	\$129.90	\$123.93	\$123.93
21213	3 surfaces	\$136.95	\$153.30	\$143.58	\$124.30	\$137.42	\$119.35	\$129.22	\$137.14	\$138.30	\$136.13	\$154.16	\$159.34	\$159.34
21214	4 surfaces	\$164.58	\$187.37	\$162.09	\$151.78	\$199.91	\$155.99	\$149.72	\$160.19	\$153.27	\$162.49	\$177.20	\$194.79	\$194.79
21215	5 surfaces	\$193.68	\$204.42	\$187.86	\$180.32	\$199.91	\$196.83	\$168.46	\$196.83	\$162.96	\$189.50	\$222.11	\$212.49	\$212.49
AMALGAM (non-bonded) PERMANENT MOLAR														
21221	1 surface	\$95.16	\$81.12	\$103.95	\$85.36	\$91.61	\$64.92	\$84.30	\$96.02	\$98.65	\$90.43	\$114.09	\$84.27	\$84.27
21222	2 surfaces	\$136.33	\$119.25	\$140.06	\$119.44	\$152.39	\$113.08	\$127.29	\$120.68	\$124.21	\$124.23	\$154.16	\$123.93	\$123.93
21223	3 surfaces	\$157.27	\$153.30	\$161.20	\$143.85	\$168.24	\$147.61	\$151.68	\$154.95	\$158.55	\$165.73	\$177.20	\$159.34	\$159.34
21224	4 surfaces	\$203.95	\$187.37	\$181.46	\$178.91	\$251.82	\$181.13	\$174.73	\$196.83	\$192.04	\$195.78	\$207.57	\$194.79	\$194.79
21225	5 surfaces	\$234.52	\$204.42	\$211.60	\$213.87	\$258.28	\$231.38	\$190.35	\$237.66	\$218.45	\$230.62	\$268.24	\$212.49	\$212.49
СОМРО	SITE RESIN (b	onded) PER	MANENT PI	REMOLAR ^b										
23311	1 surface	\$130.87	\$118.74	\$124.21	\$112.49	\$117.22	\$88.97	\$106.86	\$129.82	\$110.97	\$122.36	\$144.43	\$123.93	\$123.93
23312	2 surfaces	\$182.80	\$169.65	\$168.24	\$160.67	\$177.89	\$144.48	\$154.16	\$159.14	\$169.61	\$173.39	\$185.69	\$177.07	\$177.07
23313	3 surfaces	\$218.71	\$203.58	\$200.74	\$191.51	\$194.05	\$165.43	\$183.92	\$209.34	\$185.31	\$208.86	\$218.47	\$212.49	\$212.49
23314	4 surfaces	\$269.28	\$237.50	\$242.26	\$225.68	\$273.69	\$223.00	\$229.65	\$246.64	\$228.24	\$247.99	\$247.60	\$247.91	\$247.91
23315	5 surfaces	\$303.83	\$271.42	\$266.98	\$258.81	\$273.69	\$254.42	\$253.08	\$303.61	\$249.18	\$280.83	\$309.51	\$283.33	\$283.33
СОМРО	COMPOSITE RESIN (bonded) PERMANENT MOLAR													
23321	1 surface	\$140.29	\$118.74	\$134.77	\$120.86	\$131.85	\$102.18	\$110.99	\$137.14	\$124.59	\$125.65	\$154.16	\$123.93	\$123.93
23322	2 surfaces	\$214.74	\$169.65	\$193.81	\$175.21	\$194.05	\$152.86	\$167.90	\$162.29	\$185.31	\$177.36	\$218.47	\$177.07	\$177.07
23323	3 surfaces	\$259.65	\$203.58	\$234.34	\$209.92	\$210.22	\$187.41	\$203.05	\$218.67	\$201.01	\$221.13	\$251.24	\$212.49	\$212.49
23324	4 surfaces	\$312.10	\$237.50	\$266.98	\$248.59	\$290.17	\$240.80	\$252.81	\$257.00	\$248.14	\$267.64	\$277.95	\$247.91	\$247.91
23325	5 surfaces	\$370.53	\$271.42	\$294.67	\$286.64	\$290.28	\$294.20	\$276.07	\$337.84	\$279.56	\$308.49	\$367.77	\$283.33	\$283.33



Code	Surface(s)	NIHB- BC ⁹⁴	NIHB- AB ⁹⁴	NIHB- SK ⁹⁴	NIHB- MB ⁹⁴	NIHB- ON ⁹⁴	NIHB- QC ^{a94}	NIHB- NB ⁹⁴	NIHB- NS ⁹⁴	NIHB- PEI ⁹⁴	NIHB- NL ⁹⁴	NIHB- YT ⁹⁴	NIHB- NT ⁹⁴	NIHB- NU ⁹⁴
CROWN	CROWNS													
27113	Crown composite (indirect) (excl L and/or E)	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
27121	Crown composite (direct) (excl L and/or E)	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
27201	Crown porcelain, ceramic or polymer glass (excl L and/ or E)	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
27211	Crown porcelain (excl L and/ or E)	\$649.64	\$749.49	\$658.54	\$626.00	\$662.15	\$710.90	\$653.74	\$586.31	\$569.55	\$732.75	\$801.06	\$771.52	\$771.52
27215	Crown porcelain implant supported (excl L and/ or E)	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
27301	Crown metal (excl L and/ or E)	\$600.01	\$749.49	\$658.54	\$626.00	\$603.40	\$710.90	\$596.99	\$586.31	\$569.55	\$661.10	\$742.79	\$771.52	\$771.52

AB = Alberta; BC = British Columbia; E = Examination Fees; excl = excluding; L = Laboratory Fees; MB = Manitoba; NA = not available; NB = New Brunswick; NIHB = Non-Insured Health Benefits; NL = Newfoundland and Labrador; NS = Nova Scotia; NT = Northwest Territories; NU = Nunavut; ON = Ontario; PEI = Prince Edward Island; QC = Québec; SK = Saskatchewan; YT = Yukon.

^a Québec has unique fee codes: bonded amalgam permanent anterior and bicuspids are identified as 21231-5, bonded amalgam permanent molars are identified as 21241-5, composite permanent anterior and bicuspids are identified as 23211-5, and composite permanent molars are identified as 23221-5.

^b Premolars are also known referred to as bicuspids and anterior by the Canadian Dental Association.



Appendix 5: Reimbursement Rates for Private Dental Restorative Procedures

Table 18: Reimbursement Rates for Private Dental Restorative Procedures

Code	Surface(s)	Average of the Included Provinces ^{a,b,95-98}	Standard Deviation					
AMALGAM	(non-bonded) PERMANENT PREMOLAR°							
21211	1 surface	\$109.12	\$14.51					
21212	2 surfaces	\$148.74	\$11.52					
21213	3 surfaces	\$180.24	\$11.66					
21214	4 surfaces	\$208.16	\$17.13					
21215	5 surfaces	\$240.68	\$24.68					
AMALGAM (non-bonded) PERMANENT MOLAR								
21221	1 surface	\$121.36	\$10.77					
21222	2 surfaces	\$163.74	\$13.10					
21223	3 surfaces	\$196.00	\$9.32					
21224	4 surfaces	\$234.12	\$15.57					
21225	5 surfaces	\$270.88	\$25.02					
COMPOSITE RESIN (bonded) PERMANENT PREMOLAR ^b								
23311	1 surface	\$140.17	\$7.13					
23312	2 surfaces	\$192.05	\$10.68					
23313	3 surfaces	\$229.00	\$10.36					
23314	4 surfaces	\$274.77	\$16.55					
23315	5 surfaces	\$317.26	\$14.49					
COMPOSIT	COMPOSITE RESIN (bonded) PERMANENT MOLAR							
23321	1 surface	\$148.69	\$9.74					
23322	2 surfaces	\$210.53	\$18.19					
23323	3 surfaces	\$251.71	\$20.90					
23324	4 surfaces	\$300.37	\$27.26					
23325	5 surfaces	\$352.00	\$29.56					



Code	Surface(s)	Average of the Included Provinces ^{a,b,95-98}	Standard Deviation
CROWNS			
27113	Crown - composite (indirect) (excl L and/or E)	\$215.94	\$56.34
27121	Crown - composite (direct) (excl L and/or E)	\$180.93	\$15.67
27201	Crown - porcelain, ceramic, or polymer glass (excl L and/or E)	\$804.32	\$111.11
27211	Crown - porcelain (excl L and/or E)	\$767.45	\$85.77
27215	Crown - porcelain - implant-supported (excl L and/or E)	\$1,042.42	\$288.04
27301	Crown - metal (excl L and/or E)	\$767.65	\$105.41

E = Examination Fees; excl = excluding; L = Laboratory Fees; NA = not available.

^a Included provinces: British Columbia, Alberta, Saskatchewan, New Brunswick, Nova Scotia.

^b New Brunswick Dental Society, Fredericton, NB: personal communication, 2017 Oct 03.

[°] Premolars are also referred to as bicuspids and anterior by the Canadian Dental Association.