

APPEAL NUMBER
2021-0110

PART C – DECISION UNDER APPEAL

The decision under appeal is the Ministry of Social Development and Poverty Reduction (ministry) reconsideration decision dated April 1, 2021, which determined that the appellant was not eligible for coverage of dental fees in excess of the rates set out in the fee allowance schedules in the Dental Supplement—Dentist, and in accordance with the Employment and Assistance for Persons with Disabilities Regulation, sections 57, 63, 63.1, 64 and 69 and Schedule C.

Specifically, the ministry determined that the appellant was not eligible for coverage of a root canal as a crisis supplement, or health supplement (dental supplement, crown and bridgework supplement, emergency dental and denture supplement or a health supplement for persons facing a direct and imminent life-threatening health need).

PART D – RELEVANT LEGISLATION

Employment and Assistance for Persons with Disabilities Act (EAPWDA) section 25

Employment and Assistance for Persons with Disabilities Regulation (EAPWDR) sections 57, 63, 63.1, 64 and 69, Schedule C, and the Dental Supplement—Dentist

PART E – SUMMARY OF FACTS

Relevant Evidence Before the Minister at Reconsideration

Ministry records show:

- The appellant has PWD designation.
- The ministry states that, regarding dental supplements, the minister’s powers, duties or functions are assigned to Pacific Blue Cross (PBC).
- On March 16, 2021 the appellant contacted the ministry advising that PBC denied coverage for some dental work and she would like to pursue a reconsideration. She explained she was on antibiotics for an infection and needs a root canal.
- The ministry reviewed the pre-authorization requests from PBC and noted PBC rejected some items as listed below.

	Fee Code	Description	Is Fee Code in Schedule of Fee Allowances – Dentist?	Dentist Fees	Amount Approved by PBC
1	39212	Opening through artificial crown	No	\$58.00	\$0.00
2	33145	Root Canal	No	\$1725.00	\$0.00
3	23602	Restoration, in conjunction with crown	Yes	\$210.00	\$0.00
4	04501	Pulp Vitality Test	Yes	\$110.00	\$50.47
5	02111	Radiographs	Yes	\$19.00	\$10.95
6	01204	Examination and Diagnosis	Yes	\$46.00	\$23.93
7	07012	Radiographs	No	\$70.00	\$0.00
8	02111	Radiographs	Yes	\$20.00	\$10.95
9	01204	Examination and Diagnosis	Yes	\$45.00	\$23.93
		Total:		\$2303.00	\$120.23

PBC provided the following explanations:

- For fee codes (partially covered), PBC reimbursed the maximum amount allowed under the plan.
- For fee codes not in the Schedule of Fee Allowances – Dentist, the ministry is unable to provide reimbursement as it is not a covered benefit under the plan.
- For Fee Code 23602 (restoration, in conjunction with crown), PBC requested the information to be manually resubmitted with clear original mounted diagnostic x-rays, photographs, study models and a clinical description that supports the necessity for treatment.

Letter from Appellant’s Dentist (February 24, 2021)

RE: Tooth 16

As of November 6, 2020, tooth 16 has an abscess from a failing root canal. Retreatment is recommended in order to save the tooth. The tooth is currently an abutment for a bridge and the bridge was clinically serviceable with normal maintenance when checked last November 2020. If the tooth has to be removed, this will greatly reduce the ability to masticate on the right side. Retreating will also reduce the risk of infection spreading and the reliance on antibiotics. It is necessary for the appellant to get the root canal retreatment in order to save the tooth.

APPEAL NUMBER
2021-0110

Pre-determination Explanation of Benefits (from Pacific Blue Cross)

Primary Carrier: Pacific Blue Cross
Insured Member: Appellant
Patient: Appellant

Date Submitted: 17 February, 2021

CODE	DESCRIPTION	TH#	CHARGE	ELIGIBLE	DEDUCT	AT	BENEFIT
02111	X-Ray Single Film	16	19.00	10.95	0.00	100	10.95

Pre-determination Explanation of Benefits (from Pacific Blue Cross)

Primary Carrier: Pacific Blue Cross
Insured Member: Appellant
Patient: Appellant

Date Submitted: 17 February, 2021

CODE	DESCRIPTION	TH#	CHARGE	ELIGIBLE	DEDUCT	AT	BENEFIT
23602	Composite Core Bonded	16	210.00	0.00	0.00	000	0.00
33145	Root Canal, 4 Canals...	16	1,725.00	0.00	0.00	000	0.00
39212	Open and Drain Thru A...	16	58.00	0.00	0.00	000	0.00

Request for Reconsideration (March 18, 2021)

The appellant submitted the letter from her dentist as her request for reconsideration.

Additional Information

Appellant

Notice of Appeal - summary (May 25, 2021)

The appellant states she did not have a say in the plan provided and couldn't have agreed to a plan that paid for basic dental and cavities but not for a dental referral for a serious dental problem like root canals. She is in lots of pain and on antibiotics while waiting for a root canal.

If the ministry knows she cannot pay for cavity repair, then why does it think she has \$1700.00 to pay for root canal work. Medical surgery and dental root canals are "required and necessary procedures" and far more expensive than simple dental procedures like a cavity repair. This is not a request for cosmetic unnecessary surgery.

The appellant further stated that common sense, logic, pain, required dental work and a plan which lacked the appellant's input and lacks sensibility all support her appeal. It is not enough for the ministry to say, "your plan doesn't cover this". The appellant is still in pain, still taking antibiotics and still waiting for her required root canal surgery.

At the hearing, the appellant added that her dentist referred her to a specialist as he was unable to do the root canal procedure. She reiterated that she needs to stop the pain and spread of infection and doesn't understand how it cannot be considered an emergency when it is seriously jeopardizing her health. She asked her dentist if he could perform an alternative treatment and he said he couldn't.

In addition, the appellant pointed out some inaccuracies in the ministry record. For example, the appellant has never had any contact with PBC and (in reference to "your plan"), the plan is not the appellant's. There is no such thing as the appellant's plan. The ministry states - regarding dental supplement - the minister's powers, duties or functions are assigned to PBC, but the appellant stated that no one who is poor knows that. The appellant added that the ministry stated it has no discretion, but this is incorrect. The decisions are made between PBC and the ministry and have nothing to do with the people. But yet, PBC is not a party to this appeal. The poor have no relationship with PBC. However, the poor are entitled to tooth coverage. It was the ministry that signed a contract with PBC, not the appellant. The dentist's letter should conclude the matter.

Ministry

At the hearing, the ministry relied on its record and added that the decisions were made by PBC in consultation with the appellant's dentist. The ministry is not included in conversations regarding these decisions and therefore has no knowledge of the reasoning behind the decisions. The ministry does become involved with the treatment at a very basic level but doesn't get involved further as ministry staff are not medical professionals. The ministry assumed all the fee codes (as shown in the chart above) relate to the root canal.

The ministry suggested the appellant revisit her dentist to see if he can work with PBC to come up with an alternative treatment covered by the ministry plan. Or alternatively, the ministry suggested the appellant seek out community organizations to help with costs, if there are no other treatment options.

The panel considered the additional information as argument.

PART F – REASONS FOR PANEL DECISION

The issue on appeal is whether the ministry's reconsideration decision, which determined that the appellant was not eligible for coverage of dental fees in excess of the rates set out in the fee allowance schedules in Dental Supplement--Dentist or for services not set out in this Schedule, and in accordance with the EAPWDR, sections 57, 63, 63.1, 64 and 69, and Schedule C, was reasonably supported by the evidence or was a reasonable application of the legislation in the circumstances of the appellant.

Specifically, did the ministry reasonably determine that the appellant was not eligible for coverage for a root canal as a crisis supplement, or health supplement (dental supplement, crown and bridgework supplement, emergency dental and denture supplement or a health supplement for persons facing a direct and imminent life-threatening health need)?

Relevant sections of the legislation can be found in the Schedule of Legislation.

Appellant Argument

The appellant argues that she did not have a say in the plan provided and couldn't have agreed to a plan that paid for basic dental and cavities but not for a dental referral for a serious dental problem like root canals. She is in lots of pain and on antibiotics while waiting for a root canal and cannot pay \$1700.00 for root canal work.

The appellant argues further that common sense, logic, pain, required dental work and a plan which lacked her input and lacks sensibility all support her appeal. She reiterated that she needs to stop the pain and spread of infection and doesn't understand how it cannot be considered an emergency as it is seriously jeopardizing her health.

In addition, the appellant argued that there are some inaccuracies in the ministry record. For example, the appellant has never had any contact with PBC and (in reference to "your plan"), the plan is not the appellant's. There is no such thing as the appellant's plan. The ministry states - regarding dental supplement - the minister's powers, duties or functions are assigned to PBC, but the appellant argues that no one who is poor knows that. The appellant added that the ministry stated it has no discretion, but the appellant argued this is incorrect. The decisions are made between PBC and the ministry and have nothing to do with the people. And, yet PBC is not a party to this appeal making it difficult to understand the reasoning behind the decisions. It was the ministry that signed a contract with PBC, not the appellant. Still, the poor are entitled to tooth coverage and the dentist's letter should conclude the matter.

Ministry Argument

The ministry first argues that under the EAPWDA and applicable regulations, the minister may authorize any person or category of persons to take on any or all of the minister's powers, duties or functions. In the case of dental supplements, the minister's powers, duties or functions are assigned to PBC.

Basic Eligibility

The ministry argues that although the appellant is a recipient of disability assistance, and may be eligible for coverage of basic dental services, emergency dental services, and crown/bridgework (EAPWDR, sections 63, 63.1, and 64, and Schedule C), it may only provide coverage for these services as outlined in the ministry Schedule of Fee Allowances - Dentist, and only up to the maximum rates listed in that Schedule.

Fees in Excess of Ministry Rates (fee codes 04501, 02111 x 2, 01204 x 2)

The ministry argues it is not authorized to provide coverage of dental treatments in excess of the rates set out in the fee allowance schedules in Dental Supplement--Dentist.

Treatment as a basic dental service or an emergency dental service (fee codes 39212, 33145 and 07012)

The ministry states although it may provide coverage for basic dental services as set out in EAPWDR, section 63 it argues it can only provide coverage for basic dental services and emergency dental services as outlined in the ministry Schedule of Fee Allowances – Dentist. And, the specific services the appellant requested (fee codes 39212, 33145 and 07012) are not set out in this Schedule.

Coverage of Fee Code 23602 - restoration, in conjunction with crown

The ministry argues the appellant is not eligible for coverage of fee code 23602 as a crown and bridge supplement. Although fee code 23602 is included in Part F of Dental Supplements – Dentist, the information submitted does not establish that the dental condition cannot be corrected by restorative services as listed in this Schedule (i.e., that the appellant is unable to use a removeable prosthetic (e.g. denture) as outlined in the EAPWDR (Schedule C, 4.1(2)(b) i, ii, iii, and iv).

Coverage as a Life-Threatening Health Need

The ministry argues the appellant is not eligible for coverage of dental services as a life-threatening health need as dental and denture supplements are not set out under this legislation - section 69 (EAPWDR). Section 69 only applies to medical transportation, medical equipment devices, and some types of medical supplies.

Coverage of Dental Services as a Crisis Supplement

The ministry argues that Section 57(3) of the EAPWDR states that it may not provide a crisis supplement to obtain a supplement described in Schedule C or for any other health care goods or services, and as the dental services requested are a health care service and described in Schedule C, the appellant is not eligible to receive a crisis supplement to cover the dental services requested.

Analysis

Section 25 (EAPWDA) - delegation of minister's powers and duties

Section 25 states the minister may delegate any or all of the its powers, duties or functions under this act. Therefore, the panel finds the ministry reasonably determined section 25 of the EAPWDA allows the ministry to delegate its powers for dental supplements to PBC.

Section 57 (EAPWDR) - crisis supplement

Section 57(3) states, a “crisis supplement may not be provided for the purpose of obtaining...a supplement described in Schedule C, or...any other health care goods or services”.

The appellant argues she is in pain, taking antibiotics and still waiting for the required root canal surgery that her dentist says is necessary. The appellant provided evidence in the form of a letter from her dentist dated February 24, 2021, which confirmed she has an abscessed tooth from a failing root canal and retreatment is recommended in order to save the tooth.

The ministry argues that as the dental services requested are a health care service and described in Schedule C, the appellant is not eligible to receive a crisis supplement to cover the dental services requested.

The panel acknowledges that the appellant is in pain, on antibiotics and needs a root canal, but as the appellant is requesting a supplement which is included in schedule C, the panel finds the ministry reasonably determined that the appellant was not eligible for coverage of a root canal under section 57 of the EAPWDR – crisis supplement.

Sections 63, 63.1 and 64 (EAPWDR) – dental, crown and bridgework, and emergency dental supplements

Sections 63, 63.1 and 64 all state that the minister may provide dental, crown and bridgework and emergency dental supplements (in schedule C) for a recipient of disability assistance. Schedule C defines "basic dental service" as a dental service that, if provided by a dentist, is set out in the Schedule of Fee Allowances — Dentist and defines "emergency dental" as a dental service necessary for the immediate relief of pain (effective September 1, 2017).

Ministry records show the appellant has PWD designation. Although the ministry stated that the appellant, as a recipient of disability assistance, may be eligible for coverage of basic dental services, emergency dental services, and crown/bridgework, it argues it can only provide coverage for basic dental services and emergency dental services as outlined in the ministry Schedule of Fee Allowances - Dentist, Emergency Dental- Dentist and only up to the maximum rates listed in that Schedule.

- For fee codes that were partially covered, PBC reimbursed the maximum amount allowed under the plan.
- For fee codes, not in the fee allowance schedules in Dental Supplement--Dentist the ministry is unable to provide reimbursement for this expense as it is not a covered benefit under the plan. The specific services the appellant requested (fee codes 39212, 33145 and 07012), are not listed in this Schedule.
- For Fee Code 23602, the ministry asked for information to be re-submitted as the information submitted does not establish that the dental condition cannot be corrected by restorative services as listed in the Schedule of Fee Allowances – Dentist (i.e., that the appellant is unable to use a removeable prosthetic (e.g. denture) for one of the reasons listed under Schedule C, section 4.1(2)(b)).

The appellant argues that she did not have a say in the plan provided and couldn't have agreed to a plan that paid for basic dental and cavities but not for a dental referral for a serious dental problem like root canals. She needs to stop the pain and spread of infection and doesn't understand how it cannot be considered an emergency as it is seriously jeopardizing her health.

The panel notes that codes 39212, 33145 and 07012 are not found in the fee allowance schedules in the Dental Supplement--Dentist

Therefore, the panel finds as "basic dental service" is defined in Schedule C as "a dental service...if provided by a dentist,...is set out in the Schedule of Fee Allowances – Dentist", and as codes 39212, 33145 and 07012 are not found in this Schedule, the ministry reasonably determined it was unable to provide coverage for a root canal under sections 63, 63.1, 64 and schedule C of the EAPWDR for basic dental service.

The panel also finds as "emergency dental service" is defined as a dental service necessary for the immediate relief of pain...if provided by a dentist, is set out in the Schedule of Fee Allowances — Emergency Dental — Dentist, and as codes 39212, 33145 and 07012 are not found in this Schedule, the ministry reasonably determined it was unable to provide coverage for a root canal under sections 63, 63.1, 64 and schedule C of the EAPWDR for emergency dental service.

Schedule C, section 4.1(2) states a health supplement may be paid for crown and bridgework under section 63.1 but only if the dental condition cannot be corrected through basic dental services because the dental condition prevents the restorative services in the Schedule of Fee Allowance - Dentist and the dental condition prevents the use of a removable prosthetic, the person has a physical impairment making it impossible to place a removable prosthetic, has an allergic reaction to the materials used, or has a mental condition that makes it impossible to assume responsibility for a removable prosthetic.

The panel notes that although code 23602 is listed in the Schedule of Fee Allowances – Crown and Bridgework, the panel finds there is insufficient evidence to determine whether or not sufficient information was submitted to PBC to allow coverage for the procedure under section 63.1, section 4.1(2) of the EAPWDR.

The panel also notes, although fee code 33145 Root Canal, 4 Canals... (as described in the Pre-determination Explanation of Benefits from PBC) is not found in the Schedule of Fee Allowance – Dentist, fee code 33141 “Four or more canals” is found in this Schedule. The panel notes that although a root canal is not offered as an emergency dental treatment, it is offered as a restorative service under Schedule of Fee Allowance—Dentist (Part B). However, there is insufficient information for the panel to determine whether this may have been an oversight in the recording of fee codes, or whether fee code 33141 would apply in the appellant’s situation.

The panel acknowledges the appellant’s argument that she considers her need for a root canal an emergency situation. However, the panel is bound by the legislation.

Section 69 (EAPWDR) – health supplement for persons facing direct and imminent life-threatening health need

Section 69 states the “minister may provide to a family unit any health supplement set out in sections 2 (1)(a) and (f) [*general health supplements*] and 3 [*medical equipment and devices*] of Schedule C, if the health supplement is provided to or for a person in the family unit who is otherwise not eligible for the health supplement under this regulation, and if the minister is satisfied that...the person faces a direct and imminent life threatening need and here are no resources available to the person's family unit with which to meet that need...”

The ministry argues the appellant is not eligible for coverage of dental services as a life-threatening health need as dental and denture supplements are not set out under this legislation.

The panel notes that section 2(1)(a) pertains to medical or surgical supplies, section (f) pertains to transportation and section 3 pertains to medical equipment and devices. Dental services are not included in any of these sections. Therefore, the panel finds the ministry reasonably determined that the appellant was not eligible for coverage under section 69 of the EAPWDR.

The panel acknowledges the appellant’s position that the decisions are made between PBC and the ministry and doesn’t include input from the recipients of the plan. The panel also acknowledges the appellant’s position that PBC is not present at the appeal hearing and therefore it can be difficult to understand the reasoning behind the decisions. However, the role of the panel is to determine if the ministry reasonably applied its legislation.

The panel encourages the appellant to revisit her dentist to see if he can work with PBC to come up with an alternative treatment covered by the ministry plan. Or, alternatively, seek out community organizations to help with costs, if there are no other treatment options.

Conclusion

In conclusion, the panel finds the ministry's decision, which determined that the appellant was not eligible for coverage of dental fees in excess of the rates set out in in the fee allowance schedules in Dental Supplement - Dentist, or for services not set out in those schedules, in accordance with the EAPWDR, sections 57, 63, 63.1, 64 and 69, Schedule C, was reasonably supported by the evidence.

Specifically, the panel finds the ministry reasonably determined that the appellant was not eligible for coverage of fees for a root canal.

The appellant is not successful on appeal.

Schedule of Legislation

Employment and Assistance for Persons with Disabilities Act

Delegation of minister's powers and duties

25 (1) Subject to the regulations, the minister may delegate to any person or category of persons any or all of the minister's powers, duties or functions under this Act

...

(2) A delegation of the powers, duties or functions of the minister must be in writing and may include any limits or conditions the minister considers advisable.

Employment and Assistance for Persons with Disabilities Regulation

Crisis supplement

57 (1) The minister may provide a crisis supplement to or for a family unit that is eligible for disability assistance or hardship assistance if

(a) the family unit or a person in the family unit requires the supplement to meet an unexpected expense or obtain an item unexpectedly needed and is unable to meet the expense or obtain the item because there are no resources available to the family unit, and

(b) the minister considers that failure to meet the expense or obtain the item will result in

(i) imminent danger to the physical health of any person in the family unit

...

(3) A crisis supplement may not be provided for the purpose of obtaining

(a) a supplement described in Schedule C, or

(b) any other health care goods or services.

...

Dental supplements

63 The minister may provide any health supplement set out in section 4 [*dental supplements*] of Schedule C to or for

(a) a family unit in receipt of disability assistance,

...

Crown and bridgework supplement

63.1 The minister may provide a crown and bridgework supplement under section 4.1 of Schedule C to or for

(a) a family unit in receipt of disability assistance, if the supplement is provided to or for a person in the family unit who is a person with disabilities,

...

Emergency dental and denture supplement

64 The minister may provide any health supplement set out in section 5 [*emergency dental supplements*] of Schedule C to or for

(a) a family unit in receipt of disability assistance,

...

Health supplement for persons facing direct and imminent life threatening health need

69 (1) The minister may provide to a family unit any health supplement set out in sections 2 (1) (a) and (f) [*general health supplements*] and 3 [*medical equipment and devices*] of Schedule C, if the health supplement is provided to or for a person in the family unit who is otherwise not eligible for the health supplement under this regulation, and if the minister is satisfied that

(a) the person faces a direct and imminent life threatening need and there are no resources available to the person's family unit with which to meet that need,

(b) the health supplement is necessary to meet that need,

...

Schedule C

Health Supplements

Definitions

1 In this Schedule:

...

"basic dental service" means a dental service that

(a) if provided by a dentist,

(i) is set out in the Schedule of Fee Allowances — Dentist that is effective September 1, 2017 and is published on the website of the ministry of the minister, and

(ii) is provided at the rate set out in that Schedule for the service and the category of person receiving the service,

...

"dentist" means a dentist registered with the College of Dental Surgeons of British Columbia continued under the *Health Professions Act*;

"denture services" means services and items that

(a) if provided by a dentist

(i) are set out under fee numbers 51101 to 51302 in the Schedule of Fee Allowances — Dentist that is effective September 1, 2017 and is published on the website of the ministry of the minister, and

(ii) are provided at the rate set out in that Schedule for the service or item and the category of person receiving the service or item

...

"emergency dental service" means a dental service necessary for the immediate relief of pain that,

(a) if provided by a dentist,

(i) is set out in the Schedule of Fee Allowances — Emergency Dental — Dentist, that is effective September 1, 2017 and is published on the website of the ministry of the minister, and

(ii) is provided at the rate set out in that Schedule for the service and the category of the person receiving the service

...

General health supplements

2 (1) The following are the health supplements that may be paid for by the minister if provided to a family unit that is eligible under section 62 [*general health supplements*] of this regulation:

(a) medical or surgical supplies that are, at the minister's discretion, either disposable or reusable, if the minister is satisfied that all of the following requirements are met:

...

(f) the least expensive appropriate mode of transportation to or from

(i) an office, in the local area, of a medical practitioner or nurse practitioner,

(ii) the office of the nearest available specialist in a field of medicine or surgery if the person has been referred to a specialist in that field by a local medical practitioner or nurse practitioner,

(iii) the nearest suitable general hospital or rehabilitation hospital, as those facilities are defined in section 1.1 of the Hospital Insurance Act Regulations, or

(iv)the nearest suitable hospital as defined in paragraph (e) of the definition of "hospital" in section 1 of the *Hospital Insurance Act*,

provided that

(v)the transportation is to enable the person to receive a benefit under the *Medicare Protection Act* or a general hospital service under the *Hospital Insurance Act*, and

(vi)there are no resources available to the person's family unit to cover the cost.

...

3. Medical equipment and devices

3.1 Medical equipment and devices – canes, crutches and walkers

3.2 Medical equipment and devices - wheelchairs

3.3 Medical equipment and devices – wheelchair seating systems

3.4 Medical equipment and devices – scooters

3.5 Medical equipment and devices - bathing and toileting aids

3.6 Medical equipment and devices – hospital bed

3.7 Medical equipment and devices – pressure relief mattresses

3.8 Medical equipment and devices – floor or ceiling life devices

3.9 Medical equipment and devices – breathing devices

3.10 Medical equipment and devices – orthoses

3.11 Medical equipment and devices – hearing instruments

3.12 Medical equipment and devices – non-conventional glucose meters

Dental supplements

4 (1)In this section, "period" means

(a)in respect of a person under 19 years of age, a 2 year period beginning on January 1, 2017, and on each subsequent January 1 in an odd numbered year, and

(b)in respect of a person not referred to in paragraph (a), a 2 year period beginning on January 1, 2003 and on each subsequent January 1 in an odd numbered year.

(1.1)The health supplements that may be paid under section 63 [*dental supplements*] of this regulation are basic dental services to a maximum of

(a)\$2 000 each period, if provided to a person under 19 years of age, and

(b)\$1 000 each period, if provided to a person not referred to in paragraph (a).

(c)Repealed. [B.C. Reg. 163/2005, s. (b).]

(2)Dentures may be provided as a basic dental service only to a person

(a)who has never worn dentures, or

(b)whose dentures are more than 5 years old.

(3) The limits under subsection (1.1) may be exceeded by an amount necessary to provide dentures, taking into account the amount remaining to the person under those limits at the time the dentures are to be provided, if

(a) a person requires a full upper denture, a full lower denture or both because of extractions made in the previous 6 months to relieve pain,

(b) a person requires a partial denture to replace at least 3 contiguous missing teeth on the same arch, at least one of which was extracted in the previous 6 months to relieve pain, or

(c) a person who has been a recipient of disability assistance or income assistance for at least 2 years or a dependant of that person requires replacement dentures.

(4) Subsection (2) (b) does not apply with respect to a person described in subsection (3)

(a) who has previously had a partial denture.

(5) The dental supplements that may be provided to a person described in subsection (3)

(b), or to a person described in subsection (3) (c) who requires a partial denture, are limited to services under

(a) fee numbers 52101 to 52402 in the Schedule of Fee Allowances — Dentist referred to in paragraph (a) of the definition "basic dental service" in section 1 of this Schedule, or

(b) fee numbers 41610, 41612, 41620 and 41622 in the Schedule of Fee Allowances — Denturist referred to in paragraph (b) of the definition "basic dental service" in section 1 of this Schedule.

(6) The dental supplements that may be provided to a person described in subsection (3)

(c) who requires the replacement of a full upper, a full lower denture or both are limited to services under

(a) fee numbers 51101 and 51102 in the Schedule of Fee Allowances — Dentist referred to in paragraph (a) of the definition "basic dental service" in section 1 of this Schedule, or

(b) fee numbers 31310, 31320 or 31330 in the Schedule of Fee Allowances — Denturist referred to in paragraph (b) of the definition "basic dental service" in section 1 of this Schedule.

(7) A relining or a rebase of dentures may be provided as a basic dental service only to a person who has not had a relining or rebase of dentures for at least 2 years.

Crown and bridgework supplement

4.1 (1) In this section, "crown and bridgework" means a dental service

(a) that is provided by a dentist,

(b) that is set out in the Schedule of Fee Allowances — Crown and Bridgework, that is effective April 1, 2010 and is published on the website of the ministry of the minister,

- (c) that is provided at the rate set out for the service in that Schedule, and
- (d) for which a person has received the pre-authorization of the minister.
- (2) A health supplement may be paid under section 63.1 of this regulation for crown and bridgework but only if the minister is of the opinion that the person has a dental condition that cannot be corrected through the provision of basic dental services because
- (a) the dental condition precludes the provision of the restorative services set out under the Restorative Services section of the Schedule of Fee Allowances — Dentist, and
- (b) one of the following circumstances exists:
- (i) the dental condition precludes the use of a removable prosthetic;
- (ii) the person has a physical impairment that makes it impossible for the person to place a removable prosthetic;
- (iii) the person has an allergic reaction or other intolerance to the composition or materials used in a removable prosthetic;
- (iv) the person has a mental condition that makes it impossible for the person to assume responsibility for a removable prosthetic.
- (3) The minister must also be satisfied that a health supplement for crown and bridgework will be adequate to correct the dental condition.
- (4) A health supplement for crown and bridgework may not be provided in respect of the same tooth more than once in any period of 60 calendar months.

...

Emergency dental supplements

5 The health supplements that may be paid for under section 64 [*emergency dental and denture supplements*] of this regulation are emergency dental services.

Ministry of Social Development and Poverty Reduction - Dental Supplement – Dentist
(effective September 1, 2017)

[Dentist Fee Schedule \(gov.bc.ca\)](https://www2.gov.bc.ca)

<https://www2.gov.bc.ca/assets/gov/family-and-social-supports/income-assistance/on-assistance/schedule-dentist.pdf>

APPEAL NUMBER
2021-0110

PART G – ORDER

THE PANEL DECISION IS: (Check one) UNANIMOUS BY MAJORITY

THE PANEL CONFIRMS THE MINISTRY DECISION RESCINDS THE MINISTRY DECISION

If the ministry decision is rescinded, is the panel decision referred back to the Minister
for a decision as to amount? Yes No

LEGISLATIVE AUTHORITY FOR THE DECISION:

Employment and Assistance Act

Section 24(1)(a) or Section 24(1)(b)

and

Section 24(2)(a) or Section 24(2)(b)

PART H – SIGNATURES

PRINT NAME

Connie Simonsen

SIGNATURE OF CHAIR

DATE (YEAR/MONTH/DAY)

2021/06/18

PRINT NAME

Margarita Papenbrock

SIGNATURE OF MEMBER

DATE (YEAR/MONTH/DAY)

2021/06/18

PRINT NAME

Tina Ahnert

SIGNATURE OF MEMBER

DATE (YEAR/MONTH/DAY)

2021/06/18