

Part C – Decision Under Appeal

The decision under appeal is the reconsideration decision of the Ministry of Social Development and Poverty Reduction (the "**Ministry**") dated January 4, 2024 (the "**Reconsideration Decision**"), in which the Ministry determined that:

- the Appellant was not eligible for coverage of dental fees that exceeded the Ministry's rates as set out in the Schedule of Fee Allowances – Dentist of the Ministry's Dental Supplements document (the "**Fee Schedule**");
- the Ministry was unable to complete a Reconsideration Decision regarding coverage of partial dentures (fee codes 52201 and 52202) as the Appellant's dentist had not requested coverage for the partial dentures; and
- the Ministry was not authorized to provide coverage for dental services pursuant to sections 59 or 76 of the Employment and Assistance Regulation, which respectively provide supplements in situations of "crisis" or a "life-threatening health need".

Part D – Relevant Legislation

- Employment and Assistance Regulation (the "**Regulation**") – sections 59, 68, 68.1 69, 70, 71 and 76
- Schedule C of the Regulation ("**Schedule C**") – sections 1, 4, 4.1, 5, and 6

Note: The full text of the legislation is available after the Decision.

Part E – Summary of Facts

The Reconsideration Decision

The evidence before the Ministry at the Reconsideration Decision consisted of:

- The Appellant is the recipient of Medical Services Only.
- Pursuant to section 34 of the *Act*, the Ministry delegated its powers and duties as set out in the legislation to Pacific Blue Cross (“**PBC**”) for determining whether any coverage for specific dental services applies to the Appellant based on information found in the Fee Schedule and, if it does, the amount of coverage available to her.
- The Appellant requested and received coverage of the following dental services:

	Tooth No.	Fee Code	Description	Dentist Fees	Amount Approved by PBC
1	N/A	11113	Scaling – three units Root planing – one unit	\$161.40	\$66.51
2	N/A	43421		\$53.80	\$22.17
3	N/A	02111	Radiographs, Single film	\$21.40	\$9.95
4	N/A	11101	Polishing	\$44.60	\$24.03
5	N/A	01204	Examination and Diagnosis, Specific Examination and specific situation	\$49.00	\$21.75
6	25	23312	Permanent Bicuspid, Bonded, Two surfaces	\$255.00	\$122.65
7	35	23313	Permanent Bicuspid, Bonded, Three surfaces	\$311.00	\$144.04
8	24	23313	Permanent Bicuspid, Bonded, Three surfaces	\$311.00	\$144.04
9	37	23322	Permanent Molar, Bonded, Two surfaces	\$301.00	\$144.04
10	38	23322	Permanent Molar, Bonded, Two surfaces	\$301.00	\$144.04
11	N/A	52201	Partial dentures, Acrylic, Maxillary	\$1608.00	\$0
12	N/A	52202	Partial dentures, Acrylic, Mandibular	\$1693.00	\$0
TOTAL:				\$5110.20	\$843.22

- On October 25, 2023, the Appellant contacted the Ministry to request a reconsideration of PBC’s coverage decision as it related to dental services.
- On October 31, 2023, the Appellant submitted the following documents to the Ministry:
 - PBC’s Predetermination Explanation of Benefits Form for line items 1 through 4 (described in the table above) which confirmed that the Appellant was eligible to receive total coverage of \$122.66 for those services;
 - an estimate from her dentist, dated December 22, 2022, for line items 1 through 4 (described in the table above) which indicated the Appellant was responsible to pay \$158.54 of the \$281.20 total cost of those services after the application of her \$122.66 coverage;
 - a Pre-Determination Claim Form filled out by her dentist, dated October 31, 2023, which indicated \$3,301.00 total fees for line items 11 and 12 (described in the table above); and
 - a copy of an email from the dentist’s office advising the Appellant that they use the 2023 BC Dental Association Fee Guide (the “**Dental Fee Guide**”) to set pricing, and not the Fee Schedule given that it has not been updated since 2017.

- On November 7, 2023, the Ministry reviewed the documents the Appellant submitted and her PBC claims history. The Ministry noted that the services identified line items 1 through 4 (described in table above) had been approved by PBC up to the maximum that could be provided for those services under the Fee Schedule. As such, the Ministry determined that the Appellant was ineligible for additional coverage for the noted services.
- On November 10, 2023, the Appellant called the Ministry and was informed that her request for a reconsideration of PBC's decision had been denied. The Appellant then requested a reconsideration of the Ministry's decision.
- On December 5, 2023, the Appellant called the Ministry to express that the Ministry should keep pace with the Dental Fee Guide as most dental offices, including hers, use it to keep pace with inflation.
- On December 7, 2023, the Appellant submitted her Request for Reconsideration and, in doing so, explained:
 - her dentist office uses the Dental Fee Guide to set fee rates;
 - the Dental Fee Guide is updated annually while the Fee Schedule has not been updated since 2017;
 - an individual with the Ministry allegedly explained that others have encountered the same issue the Appellant was experiencing, and that the Ministry was aware of the issue regarding fee rate discrepancies; and
 - the Ministry failure to update the Fee Schedule created a burden on people, particularly those with low incomes.
- In support of her Request for Reconsideration, the Appellant submitted the following documents:
 - a copy of the PBC explanation letter for line items 3 and 5 (described in the table above);
 - a copy of the estimate from her dentist's office, previously submitted on October 31, 2023; and
 - an estimate from her dentist's office, dated December 22, 2022, for line items 6 through 10 (described in the table above).
- On January 4, 2024, the Ministry issued the Reconsideration Decision which summarized its decision as follows:

"The ministry is sympathetic with the circumstances of your case. However, the ministry determines the following:

 - *You are not eligible for coverage of dental fees more than the ministry rates outlined in the Schedule of Fee Allowance – Dentist.*
 - *The ministry is unable to complete a reconsideration decision regarding*

coverage of a Partial Denture, Acrylic, Maxillary (fee code 52201) or a Partial Denture, Acrylic, Mandibular (fee code 52202) as your dentist has not requested coverage for these services as part of the treatment plan you provided and therefore no ministry or PBC decision has taken place.

- *The ministry is not authorized to provide coverage for dental services under the EA Regulation, Section 76 (Life-Threatening Health Need) or Section 59 (crisis supplement)."*

The Appeal

On January 9, 2024, the Appellant filed a Notice of Appeal (the "**Appeal Notice**"). In the Appeal Notice, the Appellant wrote, "*... The same reason that I appealed their findings the first time, I have been covered in the past but not this year, my dentist started using a different fee schedule and doesn't coincide with inflation or regular dentist fee rates...*"

Prior to the Appeal hearing, the Appellant submitted:

- invoices from her dentist's office for dental services received on November 28, 2023, and which identified an outstanding balance of \$142.74; and
- various estimates for dental services.

In addition, the Appellant submitted an email from her dentist's office, dated October 24, 2023, which explained why she was incurring charges for dental services above those provided by the Fee Schedule. For clarity, the email from the dentist's office explained, "*... As I said early today that our office uses British Columbia Dental Association fee guide of 2023. BCDA's fee guide upgrade once a year on Feb 1st. Ministry fee guide hasn't been upgraded [since] 2017. This is not about percentage it is about dollar amount. That means Ministry dental fee hasn't going up seen 2017. It is about fee upgrade...*"

Oral Submissions

At the Appeal hearing, the Appellant:

- confirmed that she was not seeking a reconsideration of the Ministry's decision as it pertained to coverage for partial dentures as identified in the Reconsideration Decision. Rather, she solely takes issue with the discrepancy between the rates identified in the Fee Schedule and the Dental Fee Guide which her dentist used when calculating the value of dental services provided to her and which resulted in an outstanding balance of \$158.54;
- submitted that the discrepancy between the rates identified in the Fee Schedule and the Dental Fee Guide are unfair and prejudice individuals who identify as lower income. Had the Appellant known about the noted discrepancy, she would have selected a dentist who provides dental services at the rates identified in the Fee Schedule. However, as neither the Ministry nor her dentist advised her of the discrepancy, she argues that she has been

treated unfairly; and

- argued that the Ministry should revise and update the Fee Schedule to reflect current pricing for dental services.

The Ministry referred to and relied upon the Appeal Record which largely consisted of the Reconsideration Decision. In response to questions from the Appellant and the Panel, the Ministry clarified that the Regulation do not permit it to use the any fee schedule, including the Dental Fee Guide, other than the Fee Schedule when determining rates for dental services.

Admissibility of New Evidence

The Ministry had no objection to the Appellant's oral submissions or additional evidence. The Panel determined that the Appellant's submissions and evidence were admissible as additional evidence pursuant to section 22(4) of the *Employment and Assistance Act* as it was reasonably required for a full and fair disclosure of all matters related to the decision under Appeal. More specifically, the additional evidence contributed to the Panel's understanding of the circumstances surrounding the Appeal.

Part F – Reasons for Panel Decision

The issue under appeal is the reasonableness of the Reconsideration Decision in which the Ministry determined that the Appellant was not eligible for coverage of dental fees above the rates set out in the Fee Schedule.

Appellant's Position

The Appellant argues that she should be eligible for additional funding for basic dental services above the rates set out in the Fee Schedule given that the Fee Schedule is outdated. Otherwise, the Appellant does not take issue with the Ministry's position regarding a potential denture supplement.

Ministry's Position

The Ministry maintains that the Appellant is ineligible for the funding of dental services more than the amounts listed in the Fee Schedule. Otherwise, the Ministry does not dispute that the Appellant is eligible to seek coverage for basic dental services, emergency dental services and crown/bridgework.

Panel Decision

Section 68 of the Regulation permits the Ministry to provide a dental supplement as set out in section 4 of Schedule C.

Section 68.1 of the Regulation permits the Ministry to provide a crown and bridgework supplement as set out in section 4.1 of Schedule C.

Section 69(1) of the Regulation permits the Ministry to provide a denture supplement as set out in section 5 of Schedule C. A person is ineligible for a denture supplement under subsection (1) unless the person:

- (a) is not eligible for a supplement under section 68 of the Regulation; and
- (b) has had tooth extractions that were performed in the last 6 months because of pain and
- (c) resulted in the person requiring a full upper denture, a full lower denture or both.

Section 59 of the Regulation permits the Ministry to provide a crisis supplement to or for a family unit.

Section 70 of the Regulation permits the Ministry to provide an emergency dental supplement as set out in section 6 of Schedule C.

Section 76 of the Regulation sets out that the Ministry may provide a health supplement for (i) general health supplements and (ii) medical equipment and devices listed in Schedule C if it is provided to a person who is otherwise not eligible for it under the Regulation, and if the Ministry

is satisfied that:

- (a) the person faces a direct and imminent life-threatening need and there are no resources available to the person with which to meet that need;
- (b) the health supplement is necessary to meet that need;
- (c) the person's family unit has an annual adjusted net income of \$42,000 or less; and
- (d) the requirements specified in Schedule C are met.

With respect to the first two (2) above noted factors, the requesting person should be able to provide the Ministry with information that (i) identifies what the direct and imminent threat to their life is, and (ii) how the requested supplement will prevent that direct and imminent threat to their life.

(a) Sections 68, 68.1, and 69

The Appellant does not dispute the Ministry's findings with respect to sections 68, 68.1, and 69 of the Regulation other than to say that the Fee Schedule is outdated and provides for a funding discrepancy when compared to the Dental Fee Guide. As a result, persons who rely on Ministry funding for dental, crown/bridge, and denture supplements will likely be disadvantaged given that they will have to pay the difference between the Fee Schedule and Dental Fee Guide which is used by many dentists. Instead, the Appellant advocates for the Fee Schedule's revision to reflect the modern costs of dental services.

While the Panel is empathetic towards the Appellant's situation, the Panel finds that the Ministry reasonably applied the applicable legislation when it determined that it was only permitted to provide funding to the Appellant for dental services up to the maximum rates listed in that Fee Schedule. As a result, the Ministry reasonably determined that the Appellant was able to receive funding for the following services and fee codes:

	Tooth No.	Fee Code	Description	Dentist Fees	Amount Approved by PBC
1	N/A	11113	Scaling – three units	\$161.40	\$66.51
			Root planing – one unit		
2	N/A	43421		\$53.80	\$22.17
3	N/A	02111	Radiographs, Single film	\$21.40	\$9.95
4	N/A	11101	Polishing	\$44.60	\$24.03
5	N/A	01204	Examination and Diagnosis, Specific Examination and specific situation	\$49.00	\$21.75
6	25	23312	Permanent Bicuspid, Bonded, Two surfaces	\$255.00	\$122.65
7	35	23313	Permanent Bicuspid, Bonded, Three surfaces	\$311.00	\$144.04
8	24	23313	Permanent Bicuspid, Bonded, Three surfaces	\$311.00	\$144.04
9	37	23322	Permanent Molars, Bonded, Two surfaces	\$301.00	\$144.04
10	38	23322	Permanent Molars, Bonded, Two surfaces	\$301.00	\$144.04

(b) Section 59

The Panel notes that section 59(3) of the Regulation clarifies that 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. Generally speaking, the crisis supplements referred to in section 59 of the *Regulation* pertain to food, shelter (including utilities), and clothing.

As section 59 does not provide for the type of dental services provided to the Appellant, the Panel finds that the Ministry's decision to deny the Appellant's crisis supplement request was a reasonable application of section 59 of the Regulation.

(c) Section 70

Although the Ministry refers to section 70 of the Regulation in its Reconsideration Decision, it does not provide any analysis or reasoning for this section.

The Panel notes that section 1 of Schedule C defines an emergency dental service as a dental service necessary for the immediate relief of pain that, if provided by a dentist (i) is set out in the Schedule of Fee Allowances — Emergency Dental — Dentist/Denturist, that is effective September 1, 2017 (updated on February 18, 2020) 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.

On review of the available evidence, the Panel finds that the Appellant did not receive emergency dental services for the immediate relief of pain. Again, the Appellant does not argue that she received dental services for the immediate relief of pain.

As a result of the foregoing, the Panel finds that the Appellant did not qualify for an emergency dental supplement pursuant to section 70 of the Regulation.

(d) Section 76

The Panel finds that sections 2(1)(a) and (f) and 3 of Schedule C do not provide for the type of dental and/or denture supplements incurred or proposed to be incurred by the Appellant. As a result, the Panel finds that the Appellant is not eligible for the coverage of dental fees pursuant to section 76 of the Regulation.

Regardless, even if the relevant sections of Schedule C provided for dental and denture supplements, the Panel finds that Appellant's evidence does not establish that she required dental services due to a direct and imminent life-threatening need. Again, the Appellant does not argue that she suffered from a direct and imminent life-threatening circumstance giving rise to her need for dental services.

As a result of the foregoing, the Panel finds that the Ministry's decision to deny the Appellant a health supplement was a reasonable application of section 76 of the Regulation.

Conclusion

The Panel finds that the Ministry's decision to deny the Appellant's request for dental treatment funding that exceeds the rates set out in the Fee Schedule to be a reasonable application of sections 59, 68, 68.1, 69, 70 and 76 of the Regulation.

The Appellant is not successful on appeal.

Legislation

Employment and Assistance Regulation, BC Reg 263/2002

Crisis supplement

59 (1) The minister may provide a crisis supplement to or for a family unit that is eligible for income 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, or
 - (ii) removal of a child under the [Child, Family and Community Service Act](#).

(2) A crisis supplement may be provided only for the calendar month in which the application or request for the supplement is made.

(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.

(4) A crisis supplement provided for food, shelter or clothing is subject to the following limitations:

- (a) if for food, the maximum amount that may be provided in a calendar month is \$50 for each person in the family unit,
- (b) if for shelter, the maximum amount that may be provided in a calendar month is the smaller of
 - (i) the family unit's actual shelter cost, and
 - (ii) the sum of

(A) the maximum set out in section 2 of Schedule A, the maximum set out in section 4 of Schedule A and any supplements provided under [section 56.2 \[pre-natal shelter supplement\]](#) or Division 8 [*Housing Stability Supplement*] of Part 5 of this regulation, or

(B) the maximum set out in Table 1 of Schedule D, the maximum set out in Table 2 of Schedule D and any supplements provided under [section 56.2](#) or Division 8 of Part 5 of this regulation,

as applicable, for a family unit that matches the family unit, and
 (c) if for clothing, the maximum amount that may be provided in the 12 calendar month period preceding the date of application for the crisis supplement is \$110 for each person in the family unit.

(5) and (6) Repealed. [B.C. Reg. 248/2018, App. 1, [s. 2.](#)]

(7) Despite subsection (4) (b), a crisis supplement may be provided to or for a family unit for the following:

- (a) fuel for heating;
- (b) fuel for cooking meals;
- (c) water;
- (d) hydro.

Dental supplements

68 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 income assistance, if
 - (i) the family unit includes a person with persistent multiple barriers to employment, or
 - (ii) the health supplement is provided to or for a person in the family unit who is under 19 years of age,
- (b) a family unit in receipt of hardship assistance, if the health supplement is provided to or for a person in the family unit who is under 19 years of age, or
- (c) a family unit, if the health supplement is provided to or for a person in the family unit who
 - (i) is a continued person, and
 - (ii) meets any of the following criteria:
 - (A) the person is under 19 years of age;
 - (B) the person was, on the person's continuation date, a person with persistent multiple barriers to employment or part of a family unit that then included a person with persistent multiple barriers to employment.

[en. B.C. Reg. 145/2015, Sch. 1, s. 9; am. B.C. Reg. 161/2017, App. 1, [s. 2.](#)]

Crown and bridgework supplement

68.1 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 income assistance, if the supplement is provided to or for a person in the family unit who has persistent multiple barriers to employment, or

(b) a family unit, if the supplement is provided to or for a person in the family unit who

(i) is a continued person, and

(ii) was, on the person's continuation date, a person with persistent multiple barriers to employment.

[en. B.C. Reg. 145/2015, Sch. 1, s. 9.]

Denture supplement

69 (1) Subject to subsection (2), the minister may provide any health supplement set out in [section 5](#) [*denture supplements*] of Schedule C to or for

(a) a family unit in receipt of income assistance or hardship assistance, or

(b) a family unit, if the health supplement is provided to or for a person in the family unit who is a continued person.

(2) A person is not eligible for a health supplement under subsection (1) unless

(a) the person is not eligible for a supplement under [section 68](#) [*dental supplements*], and

(b) the person has had tooth extractions that were performed in the last 6 months because of pain and resulted in the person requiring a full upper denture, a full lower denture or both.

[en. B.C. Reg. 145/2015, Sch. 1, s. 9; am. B.C. Reg. 270/2019, App. 1, [s. 16](#).]

Emergency dental and denture supplements

70 The minister may provide any health supplement set out in [section 6](#) [*emergency dental supplements*] of Schedule C to or for

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

(b) a family unit in receipt of hardship assistance, or

(c) a family unit, if the health supplement is provided to or for a person in the family unit who is a continued person.

[en. B.C. Reg. 145/2015, Sch. 1, s. 9.]

Orthodontic supplement

71 (1) The minister may provide orthodontic supplements to or for a family unit in receipt of income assistance if the orthodontic supplements are provided to or for a person in the family unit who meets the conditions under subsection (2) and who is under 19 years of age.

(2) For a person referred to in subsection (1) to be eligible for orthodontic supplements, the person's family unit must have no resources available to cover the cost of the orthodontic supplements and the person must

- (a) have severe skeletal dysplasia with jaw misalignment by 2 or more standard deviations, and
- (b) obtain prior authorization from the minister for the orthodontic supplements.

(3) Repealed. [B.C. Reg. 313/2007, s. 1 (f).]

[am. B.C. Regs. 313/2007, s. 1 (f); 48/2010, Sch. 1, s. 1 (k); 161/2017, App. 1, [s. 3](#).]

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

76 (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,
- (c) the adjusted net income of any person in the family unit, other than a dependent child, does not exceed the amount set out in [section 11 \(3\)](#) of the [Medical and Health Care Services Regulation](#), and
- (d) the requirements specified in the following provisions of Schedule C, as applicable, are met:
 - (i) paragraph (a) or (f) of section (2) (1);
 - (ii) sections 3 to 3.12, other than paragraph (a) of section 3 (1).

(2) For the purposes of subsection (1) (c),

- (a) "**adjusted net income**" has the same meaning as in [section 7.6](#) of the [Medical and Health Care Services Regulation](#), and
- (b) a reference in [section 7.6](#) of the [Medical and Health Care Services Regulation](#) to an "eligible person" is to be read as a reference to a person in the family unit, other than a dependent child.

[en. B.C. Reg. 61/2010, s. 1; am. B.C. Regs. 197/2012, Sch. 1, s. 19; 145/2015, Sch. 1, s. 13; 180/2019, App. 4, [s. 3](#).]

Schedule C

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,
- (b) if provided by a denturist,
 - (i) is set out in the Schedule of Fee Allowances — Denturist 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, and
- (c) if provided by a dental hygienist,
 - (i) is set out in the Schedule of Fee Allowances — Dental Hygienist 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;

"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, and
- (b) if provided by a denturist,
 - (i) is set out in the Schedule of Fee Allowances — Emergency Dental — Denturist, 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;

Dental supplements

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

- (a) in respect of a person under 19 years of age, including a child in a home of a relative, 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 68](#) [*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).

(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, other than a person who is a main continued person under section 66.3 (1) of this regulation as a result of having been part of a family unit identified in section 66.3 (3) (a) or a dependent continued person under section 66.3 (2) of that 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 income assistance or disability 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 reline or a rebase of dentures may be provided as a basic dental service only to a person who has not had a reline 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 recipient has received the pre-authorization of the minister.

(2) A health supplement may be paid under section 68.1 of this regulation for crown and bridgework but only if the minister is of the opinion that the recipient 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 recipient has a physical impairment that makes it impossible for the recipient to place a removable prosthetic;

(iii) the recipient has an allergic reaction or other intolerance to the composition or materials used in a removable prosthetic;

(iv)the recipient has a mental condition that makes it impossible for the recipient 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.

Denture supplements

5 The health supplements that may be provided under [section 69](#) [*denture supplements*] of this regulation are denture services.

Emergency dental supplements

6 The health supplements that may be paid for under [section 70](#) [*emergency dental and denture supplements*] of this regulation are emergency dental services.

2024-0008

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)

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

Part H – Signatures

Print Name

Anil Aggarwal

Signature of Chair

Date (Year/Month/Day)

2024/02/16

Print Name

Perihan (Iris) Sucu

Signature of Member

Date (Year/Month/Day)

2024/03/07

Print Name

Julie Iuvancigh

Signature of Member

Date (Year/Month/Day)

2024/03/05