



COMMONWEALTH OF AUSTRALIA

PARLIAMENTARY DEBATES



**HOUSE OF REPRESENTATIVES**

**BILLS**

**Dental Benefits Legislation Amendment Bill 2014**

**Second Reading**

**SPEECH**

**Monday, 20 October 2014**

BY AUTHORITY OF THE HOUSE OF REPRESENTATIVES

---

## SPEECH

**Date** Monday, 20 October 2014  
**Page** 11410  
**Questioner**  
**Speaker** Neumann, Shayne, MP

**Source** House  
**Proof** No  
**Responder**  
**Question No.**

**Mr NEUMANN** (Blair) (20:17): I speak in support of Labor's position in relation to the bill currently before the chamber, the Dental Benefits Legislation Amendment Bill 2014. The coalition has a shameful record of consistent and continual opposition to dental health reform in this country. We heard the hyperbole and insulting cant—theological at times—from those opposite and particularly from the member for Bowman, who is in the same political party as Campbell Newman, who has given no credit, by the way, to the Labor government's reforms which have made a difference in my home state of Queensland. Successive federal coalition governments—from Menzies to Abbott—have failed to deliver fair, affordable and accessible dental care to all Australians. Conservative governments have never prioritised dental health. It does not interest them; you only get a half-baked policy from the coalition. I will go through a bit of background of what we saw before we had the CDDS, to see what the situation was. The member for Bowman talked about the history of this legislation. Indeed, in his second reading speech, the minister also talked about the history and the background to it. So I intend to deal with that.

But, before I deal with that issue, I would note that the budget ripped \$390 million from dental care by delaying the funding for the expanded national partnership agreement for adult public dental services for a year, from 2014-15 to 2015-16—with no reason. If you want to talk about caring for those in need, why did you do that? This NPA funding is desperately needed to reduce adult dental waiting lists. The member for Bowman said that we were about helping the poor but not necessarily the sick. So let's have a look at what the experts have said about this measure. Griffith University Professor of Dental Research Newell Johnson described the funding delay as a 'disaster' for dental health. Australian Dental Association President Dr Karin Alexander warned that the delay would cause waiting lists to 'double or treble'. This \$390 million, which should have helped people getting off waiting lists, will instead end up in the never-never of the Treasurer's medical research future fund. The Abbott government's budget also ripped \$229 million by axing Labor's dental flexible grants program.

So let's not get this hyperbole and cant from those opposite about their concern and compassion for people in this country with dental problems. If they were so compassionate, why did they undertake those budget measures in May this year? The dental flexible grants program provided for new dental infrastructure in outer rural and regional areas, but there was not a peep from the Nationals opposite in relation to that cut. No longer will that money be available to reduce the access barriers to dental treatment that people face, particularly in regional, rural and remote areas. In addition, the Abbott government cut \$15 million from the Charles Sturt University dental health program—funding needed to help the much-needed dentists of the future.

The Dental Benefits Legislation Amendment Bill provides a handy reminder of the coalition's dental policy failures and raises serious concerns about their future intentions. The bill deals with both a failed coalition dental scheme—the Chronic Disease Dental Scheme—and the landmark Labor dental reform, the Child Dental Benefits Scheme. The Chronic Disease Dental Scheme is one of the health disasters that we inherited back in November 2007 from the Howard government. This has a bit of a potted history, and it is worth reminding the public about it.

In 1996 the Howard government cruelly and callously cut the Keating Labor government's Commonwealth dental-health program. This program provided federal government assistance to those Australians who could least afford it, so they could have their teeth fixed at public dental clinics—another great Labor reform, echoing Medibank before and Medicare of the Hawke and Keating era. This particular program followed the Whitlam Labor government's Australian school dental scheme, which was eventually and inevitably gobbled up by the Fraser coalition government. It is important for the edification of those opposite that they be reminded about this. The Commonwealth dental-health program worked—it was a terrific success. In 1997 the Australian Institute of Health and Welfare reported that the program had reduced dental waiting lists for the most disadvantaged people. Before that program, 47.5 per cent of people with health dental cards waited for less than a month for dental treatment, and 21.1 per cent waited for more than 12 months. While that program was operating, 61.5 per cent waited less a month for dental treatment, and only 11.3 per cent waited for more than a year.

Just as the Fraser government had abandoned Labor's Australian school dental scheme, the Howard government ignored the expert advice and abolished that particular program—the Commonwealth dental-health program. And it did not just abolish it, it left no replacement for that superior program. They did not even have an alternative dental plan. They did not really care that disadvantaged Australians suffering health pain and dental pain lingered on the waiting list. Predictably, after the CDHP was abolished, the public dental waiting list blew out until 650,00 Australian people were on waiting lists for relief. People were waiting four or five years to have their teeth looked at.

A 2005 Health Policy Institute research paper found there had been a polarisation of oral health in Australia. It recorded that people disadvantaged by their socio-economic status, Aboriginal and Torres Strait Islander peoples, older people, migrants and people living in rural and remote areas were disadvantaged. In other words, they were exactly those Australians who had previously benefited from Labor's Commonwealth dental-health program. In that same year of 2005, *The Sydney Morning Herald* investigated the impact of the ongoing dental crisis on people in New South Wales. It reported what everyone knew—that oral health had declined since the federal government withdrew its funding for public dental programs after the 1996 election. Nine years after the cut, the impact was clear in New South Wales, where: 'There are only about 250 public dentists to cater for more than 2.5 million health-card holders, children and the elderly, while there are more than 3,000 private dentists available to treat the rest of the state's population.'

People in New South Wales—the largest state in the country—were waiting eight years to see a dentist. And what was the response of the then-health minister, Tony Abbott, the now-Prime Minister? He said: 'The federal government has no plans to take control of public dentistry. I would not encourage you to think it is likely to happen.' His message was: 'If you want your teeth fixed, take it up with the states'—there was no need for the Commonwealth to be involved in it. There was not an ounce of compassion or commitment in relation to the oral health of disadvantaged Australians. At the time, I was the chair of the health reference committee in Esk in the Brisbane Valley as a representative of the West Moreton Health Community Council. Esk is a little town that is now in my electorate—it was in the electorate of Dickson before. During the Howard government and until redistribution in 2009, it had been in the member for Dickson's electorate. There was not a peep from that prominent frontbencher during that time, while the Esk waiting lists for oral health were blown out. It was the issue that was raised again and again by consumers, by patients and by residents in the Brisbane Valley at the time.

Eventually, however, the pressure got too much, and this is where the gold-plated chronic-disease dental scheme came in—because the Howard government did it when the political pressure was on in 2007. It was a dismal disaster from the start. Right from the start it was a poorly-targeted mess that failed to address public dental waiting lists, provided nothing in terms of dental infrastructure and was silent on the workforce distribution. Shamefully, it did not even address the issues in relation to children's dental health, but it provided \$4,250 over two calendar years for private dental services for those with a chronic medical condition and complex care needs. You might say, 'That sounds all right,' but the trouble was that a Department of Human Services audit found that more than 20 per cent of those benefiting were neither pensioners nor concession card holders. It was poorly planned. What we saw was that over 20 per cent of dental treatment was provided for high-cost restorative work without means testing. The scheme was a dental slush fund, and it was corrupted. This was budgeted for at a total sum of \$90 million per year, but it quickly became a cost to the taxpayer of \$80 million a month—not \$90 million a year, but \$80 million a month.

By June 2008 the former Labor finance minister, Lindsay Tanner, and his department had assessed it as costing \$248 million, and it was estimated to rise into the billions in the next few years. What a shambles! This is from the Liberal Party that prides itself and poses and preens as the party of responsible economic management. This is a program that was going to cost the taxpayers \$90 million a year and cost \$80 million a month and was blowing out into the billions. That is the mess we faced, and what we also discovered when we came in was that a high rate of non-compliance for reporting requirements for dentists had been detected. That involved failures, and that is what has been dealt with in part by this legislation before the House.

The Department of Human Services identified \$21.6 million in incorrectly paid benefits for debt recovery from dentists. When I was newly elected in 2007, one of the issues that was raised with me was the debt problems with this scheme, and I was pleased to speak on this scheme. Those in the government think—this is what the minister said in his second reading speech—that we are doing this for political reasons and solely because the architect of the scheme was Tony Abbott, the now Prime Minister, then the minister for health. It is because it was not means-tested, it was unfair, it was wasteful, it was a slush fund and we saw noncompliance by dentists. It

did not address the real issues. That is why we brought to an end, over the opposition of the now government, the CDDS and brought in the Medicare Teen Dental Plan. As part of our \$4.1 billion dental reform package, that was replaced and we ended up with a landmark reform like Medicare, like the National Disability Insurance Scheme. There was eligibility for children between two and 17 years to access subsidised basic dental care worth up to \$1,000 over two years—eligibility based on means-testing the family. We did the heavy lifting in relation to this. Thanks to that scheme, over three million Australian children will benefit from regular visits to the dentist.

In addition to that, we put a massive amount of funding towards cleaning up the waiting lists. In that effort we provided funding to the states to clean up the long lists. Let me give an illustration in my electorate. In February 2014, the West Moreton Hospital and Health Service reported that this had reduced their list of those waiting for more than two years from 3,500 people to zero. There are amendments in relation to this legislation which we will support—and other speakers have gone through the legislation—but it is important that the people know the facts. The facts are that we have seen, in my home state of Queensland—it was mentioned by the member for Bowman—the LNP state government trying to take the credit for the national partnership arrangements, including the more than \$500 million that we put towards reducing the public waiting lists. What the current government in Queensland have done is issue vouchers to patients who have been on public waiting lists for more than two years or those who require urgent care. There is a time bomb coming in Queensland because of their attitude to fluoridation, as the shadow assistant health minister mentioned before. But there is a day of reckoning coming with the cuts that the government are making. They have demonstrated that they have got no commitment to oral health in this country.