

Your dentist, your choice

The importance of continuity of care

The benefits of being treated by your own long-term dentist are considerable.

Known as continuity of care, your dentist's familiarity with your treatment history means they are best placed to make treatment choices based on that knowledge, ensuring that you receive the highest level of dental care on an ongoing basis.

But this critically important healthcare relationship is being threatened by a number of private health insurers.

With a marked increase in the number of dentists being signed to exclusive contracts or or employed by the insurers' own clinics, many people are finding themselves being offered higher premiums if they switch from their own dentist to the fund's own contracted dentists. While it might seem like an attractive financial prospect, your dental health could potentially suffer in the longer term because of the loss of care by your long term dentist.

From a health perspective only, which is the only yardstick you should use when considering such approaches from your insurer, you are far better sticking with your own dentist who can offer the continuity of care you need.

Don't be persuaded to switch by the fact that some insurers refer to contracted dentists as "preferred providers". This doesn't mean that they are any more or less skilled than your dentist; every dentist in this country must meet stringent requirements in order to be registered and practise their profession. The key thing to keep in mind is that your dentist knows you and your oral health care needs well, and is best placed to make decisions about your oral health.

If you remain unpersuaded by your insurer's offers at this point, they may try to play the fees card.

This is where they try to blame your growing out-of-pocket dental expenses on the fees charged by your dentist. The reality though is that dentist fees have stayed reasonably stable with only an average 1.6% increase year-on-year over the last five years. In contrast, many insurers have not increased rebates in line with premiums, widening the gap considerably.

So if you remain firm and stick with your own dentist will you be indirectly disadvantaged by your insurer?

Quite possibly. By delivering higher rebates to those customers who choose to forgo their own dentist for the fund's own, the insurers effectively create a two-tiered system in which policyholders who stick with their regular dentist pay the same premiums but don't receive the same benefits as those who use the fund's contracted dentists.

If you feel you are unfairly pressured to switch away from your dentist, you should first send a letter of complaint to your insurer, making it clear that you don't believe it's fair that you receive lower benefits because you want to stay with your existing dentist. Secondly find a fund with no contracted dentists and switch your policy.

Go to **time2switch.com.au** to compare your extras policy with others on the market or to lodge a complaint with the **Private Health Insurance Ombudsman**

