

9. Paragraph 8.4 of the application refers to findings from the 2017-18 National Study of Adult Oral Health report regarding dental visits. If possible, please provide more current data.

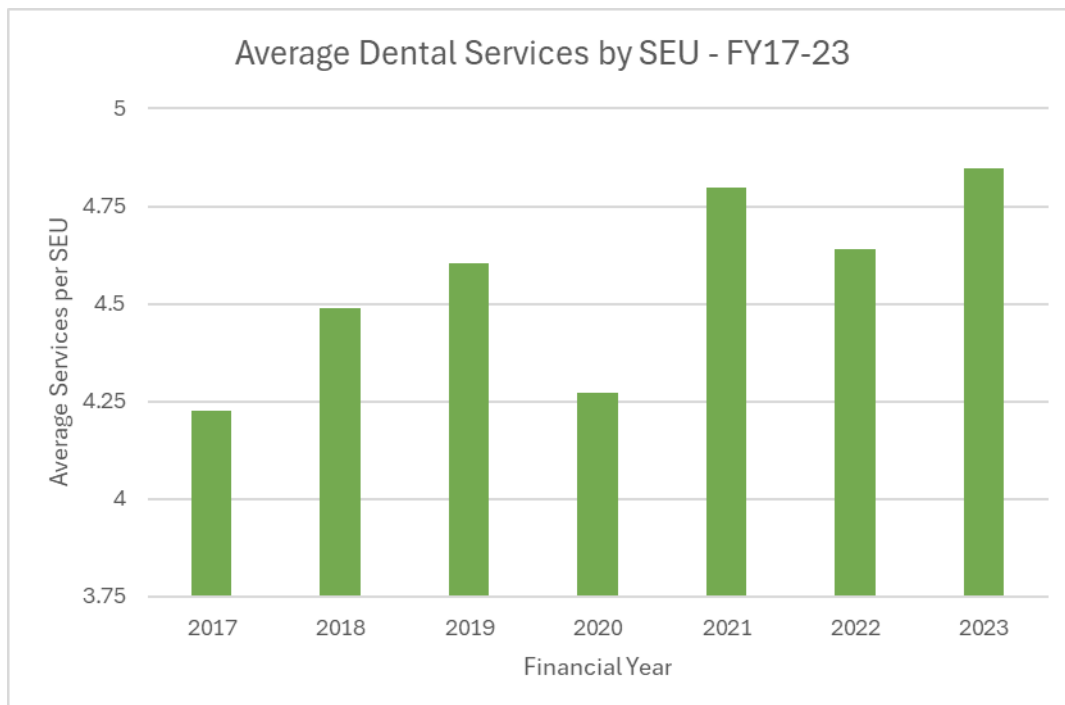
The 2017-18 National Study of Oral Health report is the third national population survey into adult oral health, following earlier iterations in 1987-88 and 2004-2006. It is regularly referenced by the Australian Government Institute of Health and Welfare and the Australian Dental Association and is the most current iteration of the study.

10. Paragraphs 8.8 and 8.9 of the application refer to findings regarding the volume of dental services performed in Tasmania, preventative dental services uptake and major dental services. Please provide further information supporting these findings, including any relevant data.

Regarding paragraph 8.8 - the Australian Institute of Health and Wellbeing report that in 2020-21, around 1 in 8 (12%) adults aged 15 years and over delayed seeing or did not see a dental professional at least once in the last 12 months due to COVID-19. This number was higher for people with a long-term health condition (14%) and for people aged between 35-54 (15% - the average St Lukes member age is 45 years).

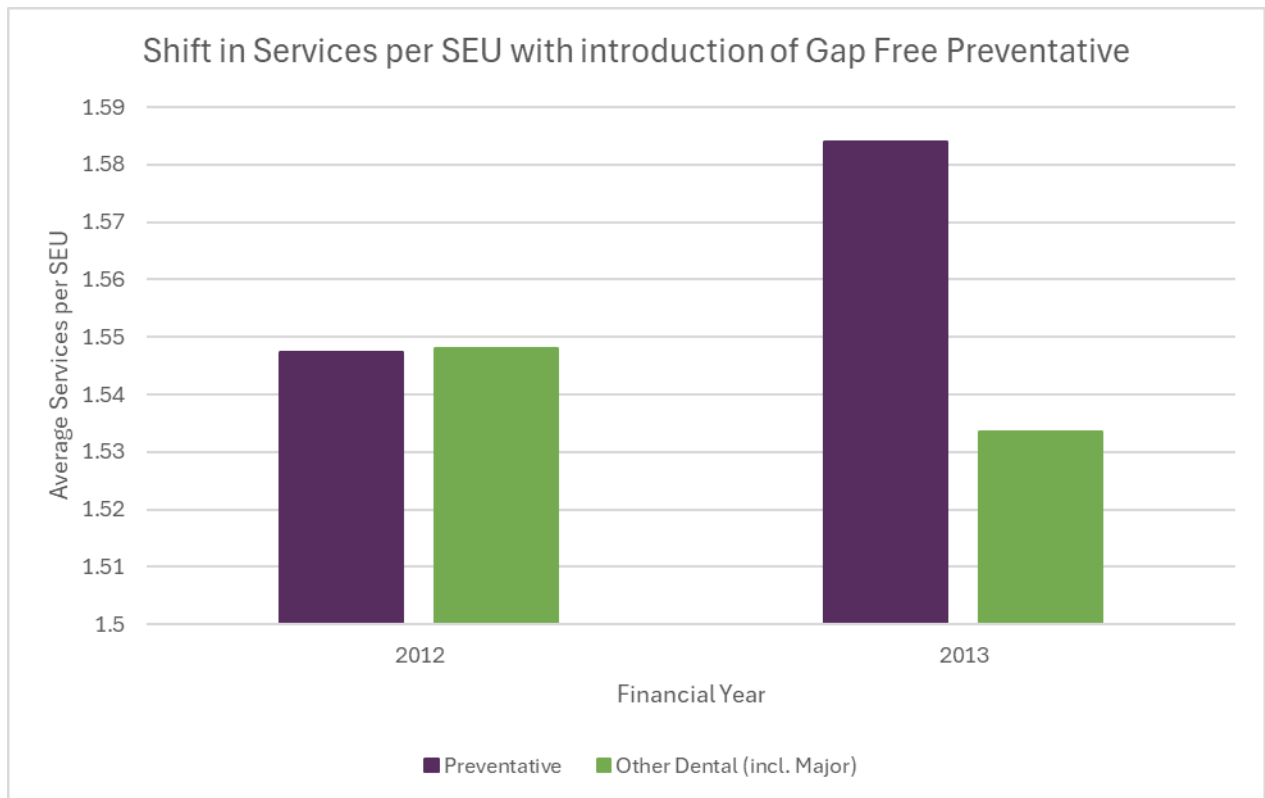
Specific to St Lukes members, Chart 1 below depicts the average number of dental services (incl. general and major) per SEU (Single Equivalent Unit, per APRA data dictionary) per financial year from 2017 to 2023. Notably the overall trend is only recovering to pre-COVID expectations from the end of FY22.

Chart 1.



Regarding paragraph 8.9 – St Lukes introduced Gap Free Preventative services in 2012, resulting in an increase in preventative services per SEU and a corresponding decrease in other dental services (incl. major) per SEU in FY13. See Chart 2 below.

Chart 2.



11. Paragraph 8.13(b) of the application states that St Lukes 'could potentially adopt a different model to achieve similar benefits resulting from the proposed conduct'. Please explain what this different model is and why the proposed conduct for which authorisation is sought is the preferred model for St Lukes.

In its application for proposed conduct, St Lukes seeks to address access to oral health care for all Tasmanians and cost barriers for the purpose of increasing the uptake of preventative oral health services. Alternatives to proposed conduct could have included;

*Introduce higher benefits for those providers participating in the Network from those who do not.*

The proposed conduct has been designed with the intent of delivering fairness in the market. St Lukes wants its members to receive high quality care in the place of their choosing. St Lukes could have introduced a network whereby providers who participate in the Network receive higher benefits than those who do not. This approach encourages participation through the loss of market share of non-participation.

Through consultation with the Australian Dental Association, we understand that such an approach is often considered to restrict provider autonomy, something we are very keen to maintain with providers.

*Opening Applicant Practices without seeking to collaborate with the existing dental community*

St Lukes could have opened Applicant practices and sought to attract its members exclusively to its practices. This approach would allow St Lukes to increase access while ensuring out-of-pocket control for members. However, we deemed this to be against our

ethos of working with and for the Tasmanian community and acting with integrity as a corporate citizen.

12. Paragraph 8.13(d)(ii) states that a public benefit which will or is likely to arise from the proposed conduct is that '*competition is encouraged between dental providers in the same area*'. Please provide further information supporting this claim.

If authorisation is granted, members are guaranteed price control on certain services through participating dental providers. St Lukes contends that in the absence of price as a differentiating factor providers will seek to deliver other value propositions to both St Lukes members, and the Tasmanian population more broadly. Such initiatives may include, but are not limited to;

- Innovative service delivery models including workforce dynamics
- Introduction of a wider variety of services
- Implementation of new technologies
- Alternative hours of operations including after hours