

Draft survey on prevention and the phase-out and availability of alternative dental fillings

1. **Association/country of the respondent:**.....

2. **Universal dental coverage: Does the healthcare system of your country offer free or some level of coverage of dental healthcare services (through statutory public health insurance for example)?**
 - a) No (no existence of public social health insurance or state programs)
 - b) Yes, through statutory public health insurance
 - c) Yes, through government funded programs to target groups
 - d) Partially covered services
 - e) Other:

(Other) Please briefly explain:.....

3. **What type of dental services are covered or partly covered under statutory social health insurance?**
 - a) None
 - a) Basic clinical examination and annual check-ups: (100% covered / partly covered)
 - b) X-ray diagnostics (100% covered / partly covered)
 - c) Tartar cleaning and fluoride treatment (100% covered / partly covered)
 - d) Root planning (100% covered / partly covered)
 - e) Fillings (No / 100% covered / partly covered)
 - f) Endodontic treatments (100% covered / partly covered)
 - g) Fixed Prosthetics (100% covered / partly covered)
 - h) Removable Prosthetics (100% covered / partly covered)
 - i) Other :

4. **Which materials for fillings were covered under public health insurance before the introduction of the EU Regulation on dental amalgam:**
 - a) amalgam
 - b) phosphate cement or other non-glass ionomer cement
 - c) Glass-ionomer cement
 - d) Composite (please specify)
 - e) Direct inlays/onlays
 - f) Indirect inlays/onlays
 - g) Prosthetic crown

5. Which materials for fillings are currently covered under statutory public health insurance since the introduction of the EU Regulation on dental amalgam?:

- a) amalgam
- b) phosphate cement or other non-glass ionomer cement
- c) Glass-ionomer cement
- d) Composite (please specify:)
- e) Direct inlays/onlays
- f) Indirect inlays/onlays
- g) Prosthetic crown

6. Was there an observed shift in the way dental treatments are funded after the introduction of the EU regulation on amalgam ban?

- YES** -
- a) rise of out-of-pocket expenditure
 - b) decrease or suspension of co-payments,
 - c) increase of voluntary/private health insurance
 - d) introduction of new government programs for targeted groups
 - e) increase of unmet dental care needs
 - f) lowered price of composite fillings by the health insurance and/or the State

Please briefly explain: _____

NO

7. What is the insured amount provided by the national health insurance fund for :

- 1 side filling in posterior teeth (transcanine sector)
- 2 side filling in posterior teeth (transcanine sector)
- 3 side filling in posterior teeth (transcanine sector)
- No coverage

Which composite(s) is (are) standard in your country_____

8. If applicable, please indicate whether there is an increased cost following the introduction of the amalgam ban and the expansion of alternative materials on the private market for:

- One-side filling in posterior teeth (transcanine sector)) YES ☐ No ☐
- Two-side filling in posterior teeth (transcanine sector) YES ☐ No ☐
- Three-side filling in posterior teeth (transcanine sector) YES ☐ No ☐

9. Has there been any recent introduction of preventative dental programs or public services addressing the prevalence/or treatment of dental caries?

- YES- Please explain:
- NO

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10. **Would you have any further remarks on the noticeable consequences of the entry into force of the ban of amalgam on the level of accessibility to essential dental care for vulnerable groups (children, older adults, pregnant women, persons with disabilities or marginalised communities in essential dental care)?**