



Date: 17th September 2024

Issue No: 1

Newsletter

Welcome to the first issue of the PRUDENT Newsletter!

We are excited to welcome you to the inaugural issue of the PRUDENT Project newsletter. In this and future editions, you will find the latest updates and insights. We encourage you to share this newsletter with others who might be interested. Stay connected with us and click here to subscribe to the PRUDENT Project Newsletter 📩



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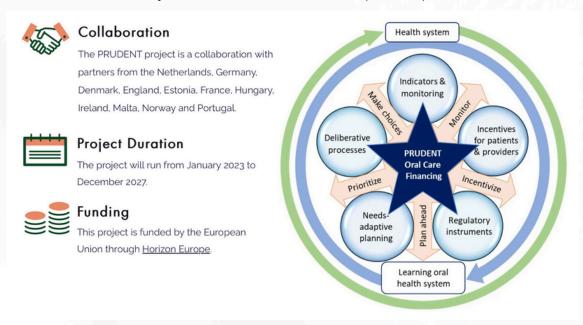
What is the PRUDENT Project?

Even though oral diseases and conditions affect half of the EU population and are the third most expensive diseases to treat in the EU, most countries cover oral health only partially. As a consequence, many EU citizens either experience financial hardship or do not have access to essential oral health care, resulting in detrimental impacts on individuals' health. While the lack of public coverage and financing of oral health contradicts the Universal Health Coverage Goal of the most recent WHO Oral Health Resolution, this also has been creating private market dynamics that increase the gap between those who can afford oral healthcare and those who cannot. Ultimately, this drives up overall costs without necessarily added-value for individuals' health, and leads to wasting human and physical resources, which are already stretched in most health systems. Oral health policies are usually non-transparent and not always evidence-based. Gaps in policy and applied research keep triggering inertia and inaction instead of addressing the persistent, albeit largely preventable, economic and epidemiological burden of oral diseases.

The PRUDENT (Prioritization, incentives and Resource use for sUstainable DENTistry) project, financed under the Horizon Europe programme, aims to fill this gap by developing and implementing an innovative and context-adaptative framework for optimized financing of oral care in Europe. PRUDENT brings together top investigators from prestigious universities and institutions, to research and create evidence for better policies, collaborate with public authorities, policymakers, civil society, patient organizations, health insurers, and health professionals. Using a mixed-methods research approach, PRUDENT will: co-develop oral health system performance indicators and implement them in EU-wide monitoring framework, conduct real-world and lab experiments to identify improved oral care financing mechanisms, and leverage regulatory learning, needs-adaptive resource planning and deliberative priority setting to enhance the improvement of oral care financing.



The knowledge gained will be merged into the PRUDENT Financing Companion with policy briefs and decision aid tools for concretely actionable and context-adaptive improvement of oral care financing.



Kick-off and Annual Meetings

We kicked-off the project in April 2023

The PRUDENT project's kick-off meeting in April 2023 in Nijmegen, Netherlands, gathered all the PRUDENT partners, as well as a representative from the European Health and Digital Executive Agency (HaDEA), the EU Agency in charge of monitoring the project. This meeting was the first key milestone for partners to get to know each other, as well as plan and discuss how to run collectively this EU-funded project for the next five years.

And shared for the first time the project's progress in June 2024

A year later, in 2024, the PRUDENT annual general meeting was held in Tallinn, bringing together once again all the PRUDENT partners to discuss the progress and future directions. It was also an opportunity for the partners to meet with members of the Scientific Advisory Board. The historic and vibrant city of Tallinn provided a fitting backdrop for these important discussions, highlighting the project's commitment to blending tradition with innovation in urban sustainability efforts.



Kick-off Meeting in Nijmegen, April 2023



Second Annual General Meeting in Tallinn, June 2024



What do people consider 'essential oral health care' for a public benefits basket?

In most countries, public health systems offer only partial coverage for oral health (OH), resulting in financial hardships or unmet needs for individuals in need. While efforts to enhance OH coverage and improve integration into public health systems are gaining momentum, the lack of consensus on defining 'essential' OH remains a challenge. Moreover, the process of prioritizing OH services and populations for public coverage is often not transparent or systematic. To better understand how to define 'essential' in OH and how to prioritize public coverage, PRUDENT partners conducted five focus group discussions (FGDs) with oral health (system) experts from the PRUDENT consortium, as well as 31 FGDs with the general population in France, Germany, Hungary, and the United Kingdom. Preliminary results from this qualitative analysis showed that there is a duality in the definition of essential OH as it relates to the ability to preform



essential functions while also extending beyond that and including the psychosocial dimension. Participants also considered that Oral Health should be better integrated into general health system. When asked what types of services and/or populations they would prioritize, participants agreed that no population group should be deprioritized and that prevention and emergency care, especially for children and adolescents are essential. Finally, while there were high debates about the importance of cosmetic care in OH, all participants agreed that aesthetic considerations have an impact on individuals' psychosocial state. The first results from the FGDs with experts and the German population were presented in a report to the European Commission on September 2023, which was recently published on the PRUDENT website. Findings were also presented during two abstract sessions at the 2024 European Health Management Association (EHMA) conference last June (see Page 7) and two scientific publications are underway. Find the preprint here.

What is the current situation of Oral Health Coverage and Financing in Europe?



Before we fix the lack of public insurance and financing of oral health, we need to understand what is currently covered and paid for in different countries. With this basic information, PRUDENT can inform policy-makers on how to develop better coverage and financing policies to promote access to oral health (OH), and its integration into healthcare systems. With a qualitative approach, we compared the actual coverage of oral health (populations, services, and costs), as well as the flow of funds across the health systems of nine European countries. We created a data

collection template, which is being used by all PRUDENT partners to collect the data, along with key national OH system experts. We are still analyzing the data, but preliminary findings can tell that children, and sometimes older adults, generally are better covered for OH care than adults. Most countries cover basic OH care such as check-ups and fillings, but services such as implants and dentures are often not or only partially covered. Some countries have extra coverage for certain groups such as the chronically ill or low-income people.



In many countries, OH care is not financed from dedicated sources of funds, and the budget for this area of care comes from the general healthcare budget, just like other medical services. Coverage should be accompanied by sufficient funds to translate in-theory legislation into in-practice availability. It will be important to shape funds collection as progressively as possible and to protect low-income and vulnerable populations from financial hardships. The current status of this study can be found in a recently published working paper, available on our website.

What motivates dentists? What are citizens preferences for oral care? Exploring the perspectives of dentists and citizens.

In Autumn 2024, the PRUDENT team will roll out two questionnaires, one addressed to dentists, and the other to European citizens to understand patters of service provision and demand. The first questionnaire will survey privately and publicly funded dentists in Denmark and England. It aims at better understanding the factors that drive dentists' treatment patterns, as well as how motivational factors and market features impact dentist's behaviour. Case vignettes will assess the dentist's



for the frequency of patients' visits as a function of the patient's oral health status, insurance status, and social status. The second questionnaire will survey the general population in Denmark, France, England, Ireland, the Netherlands, and Norway. The primary objective is to learn citizens' valuation of oral health status, their price sensitivity when they demand oral health care, and their preferences of insurance coverage for oral care. Another objective is to disclose the extent to which co-payments constitute a barrier to access and for whom, in order to measure the degree of inequity in access to dental care across European countries. Finally, the survey also seeks to understand the perceived need for insurance coverage, including issues related to risk aversion and willingness to pay premiums to ensure financial protection from catastrophic out-of-pocket payments. Findings will include a comparison across countries, and across socio-economic groups. Stay tuned for the results!

How to optimize provider payment? A practice-based experiment

PRUDENT is carrying out a practice-based experiment to test a new provider payment model. The provider payment model is designed to incentivize prevention and better access to care for those most in need. More specifically, the new provider payment model entails a capitation payment (fixed upfront tariff to cover costs of treating a patient) and a bonus payment for treatment of patients from households with lower socioeconomic status. This practice-based trial takes place in the Netherlands. The study design was optimized as open randomized controlled practice-based study to compare the new provider payment model (group 1) with the current standard of care (group 2, fee-for-service) (see Figure below). Retrospective baseline data collection allows identifying and adjusting for potential differences between the two study groups.





What is the impact of the French reform "100% santé" on Universal (Oral) Health Coverage in France?

The University Clermont Auvergne (UCA) is working along with the Clermont-Fd Hospital (CHU), on a case study for Universal (Oral) Health Coverage. The aim of this study is to evaluate the impacts of the "100% santé" measures on the number of dental treatments provided between 2015 and 2023. The study is based on the analysis of dental claims data of public health funds gathered within the National Health Data System (SNDS). In France, healthcare coverage is ensured through public health funds, for the entire population. More than 85% of dentists work independently and there are no dental hygienists or therapists. The dental care payment system is based on a fee per item list, but for some dental treatments, dentists are allowed to set freely their fees which generates high patients' out-of-pocket payments (OOPs), except for patients who have adequate supplementary health insurance. In response, the "100% santé" reform was implemented in 2019 to offer all patients prosthetic solutions with no OOPs (RACO) or with limited OOPs (RAC modéré). The improvement in the level of coverage has been ensured with the implementation of price ceilings for dentists, as well as better coverage from private voluntary health insurance. The "100% santé" also included a rise in the fixed fees namely for prophylaxis or restorative treatments. Moreover, coverage for periodontal treatments was implemented for diabetic patients.

Context is everything: stakeholder views on various financing reforms

To enhance our understanding of the impacts and implementation of oral care financing reforms, PRUDENT is carrying out a realist review to unpack the configurative elements of financing reforms in various European countries. The relationships between the contexts, mechanisms, and outcomes of various payment reforms are being unpacked with input from citizens/patients, providers, and policymakers.

Identifying actionable regulatory tools to improve oral care financing

Existing oral care financing arrangements and the implementation of oral care financing reforms are governed by EU-wide & country-specific regulatory frameworks. To this end, PRUDENT partners are mapping currently existing regulatory frameworks for oral health financing and their potential for enabling oral care financing innovations in European countries. Specific attention is being given to the extent to which regulatory frameworks take account of equity aspects and vulnerable population groups.

What about dental tourism? What are its dimensions and impacts on oral healthcare markets in European countries?

PRUDENT is also examining dental tourism in Hungary and its effects on oral health care markets in other countries. Initially, the study examined the costs of dental care and oral surgery prices in different European countries (target and competitive), analyzing them in the context of dental tourism and presenting prices in euros. However, the focus has been shifted now to a more universal economic approach, utilizing the prices of Big Macs in each country as a comparative metric. This unique approach provides a fresh perspective on the affordability and attractiveness of dental services for individuals considering dental tourism in Hungary. PRUDENT is actively engaging with key stakeholders, notably through in-depth interviews with dental clinics involved in dental tourism. Further developments aim at gathering detailed information on patient numbers, the types of treatments offered, and the impact of this industry on the local economy.



How can we improve workforcemodels for Oral Health care? Evaluating the current skill mix and levels of digital technology adoption among oral care providers in four European countries

In April 2024, PRUDENT partners began collecting data through a cross-sectional online survey distributed to oral care providers to assess the current skill mix and levels of digital technology adoption among oral care providers. The main objective is to enhance the updated needs-based oral health workforce model with time and cost parameters by investigating the workload distribution among different members of dental teams and assessing the influence of current and future adoption of digital technologies. This study will explore the possibility of changing the skill mix within the dental workforce team, beyond just dentists to alleviate pressures. The study will also explore the potential of new models of care introduced by new technologies such as electronic patient record, decision support software, as well as their impact on care provision and provider productivity.





Sharing Our Research

Oral health care financing and sustainable dentistry @ The BASCD Summer Scientific Meeting - June 2023, Cork, (Ireland)

Evidence-informed policy-making @The International Association of Dental Research (IADR) annual conference – March 2024, New Orleans (USA)

Prof Chris Vernazza, University of Newcastle (UK), Dr Paula Vassallo, University of Malta, and Prof Stefan Listl, University of Heidelberg (Germany) delivered a symposium on evidence-informed policy-making at the IADR meeting in New Orleans last March. The symposium brought together academics and policy-makers to discuss the main issues in dental policy at the global level. It was also an opportunity to present the latest data from the PRUDENT project. Click here—for more information about the symposium.

An important message for the European Public Health Week - May 2024, Porto (Portugal)

On the European Public Health Week in May 2024, the Laboratory Life Course Perspective on Oral Health from the Institute of Public Health of the University of Porto shared a video on its social media platforms that highlighted key messages for patients' access to oral healthcare: half of the world's population is affected by untreated oral diseases and these can lead to severe and debilitating consequences. Along with other EU initiatives, the PRUDENT project aims to pave the way to improve access in Europe.

Go check out their video on Instagram.

Essential oral health coverage and prioritization for a public benefits basket @The European Health Management Association (EHMA) conference - June 2024, Bucharest (Romania)

Béatrice Durvy and Lukas Schöner from the Technical University of Berlin (TUB) presented their preliminary results from their work on 'Conceptualizing 'essential' in oral health as a basis for defining an essential oral healthcare benefits basket in EU countries' and 'Exploring criteria and perspectives to inform systematic and evidence-based prioritization mechanisms for an oral health care benefits basket in EU countries' at the 2024 EHMA conference in Bucharest. This conference gathered policy-makers, healthcare managers, health professionals, and academics, and was a valuable opportunity for the PRUDENT team to receive feedback on their studies. You can download the abstracts and presentations from our website and from the website of EHMA.

Novel provider payment method in dentistry @The Dutch Dental Science Days - June 2024, Nijmegen (the Netherlands)

Jip Janssen from Radboud University Medical Center presented a poster on an ongoing study within the PRUDENT project, which explores a novel provider payment model. This model combines capitation (a fixed monthly tariff per patient) with socioeconomic status-adjusted payments, aimed at enhancing preventive oral healthcare for children under 18 in the Netherlands. Additional goals include improving accessibility and exploring the intervention's feasibility according to stakeholders. The Dutch Dental Science Days was a fantastic opportunity to dive into in-depth discussions with fellow dental researchers from all over the Netherlands, gaining fresh perspectives and valuable insights. To see the poster click here.

The effects of financial recessions on the demand for oral health services @The European Health Economics Association (EuHEA) conference - July 2024, Vienna (Austria) =

At EuHEA 2024 conference, Rie Fog-Nielsen from the University of Southern Denmark, presented about The Heterogeneous Effects of a Financial Crisis on the Demand for Oral Health Services'. A Difference-in-Difference approach evaluated the impact of the Great Recession on dental care utilization across different income groups in Denmark. The results indicate that the Great Recession led to a significant decline in dental service utilization among low-income individuals, highlighting their lower financial resilience. For more information about the presentation, visit our website.



Project Partners

Radboud University Medical Center (Radboudumc)
Syddansk Universitet (SDU)
Technische Universität Berlin (TUB)
University College Cork (UCC)
Université Clermont Auvergne (UCA)
Instituto de Saude Publica da Universidade do Porto (ISPUP)
Ministry for Health and Active Ageing (Government of Malta)
Universitetet i Oslo (UiO)
Stichting Lygature
Semmelweis Egyetem (SU)
Estonian Dental Association (EDA)
University of Newcastel Upon Tyne (UNEW)

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