

To Whom it May Concern.

RE: THE HEALTH INSURANCE (DENTAL SERVICES)BILL 2012 (NO.2)

We are currently treating patients that are on the Medicare EPC program. We often treat these needy patients at the Medicare rate - a significant discount to our normal fees.

When we first received the instructions from Medicare a few years ago, we found them very confusing as to what was required by us with regards to the paperwork and time frame (ie: letter to referring doctor and patient). Different Medicare staff told us different things.

It was only after discussion with other colleagues that it became clearer that we had to send a copy of the treatment plan to the referring doctor and patient before treatment was to commence.

Our main objective has been always to provide the highest quality of dental care for our patients. Often these patients attended with an obvious need for emergency 'treatment at the time of presentation. Therefore the time consuming task of writing treatment plans and sending them at the first visit was sometimes delayed.

A day of a dentist is a very busy one and the patient's treatment and care are top priority, so ultimately the paperwork comes second. However we have always tried to submit the paperwork as quickly as possible, with a copy sent to the referring doctor and patient. We have also since gone back through all our records ourselves to ensure that we have complied with the Medicare requirements of sending a letter to the referring doctor and providing a costed treatment plan to the patient.

Where appropriate treatment has been provided and all parties concerned are happy with the outcome, it is manifestly excessive to penalise practitioners who are acting in good faith, based upon late paperwork. This is particularly unfair when requirements were very unclear when the scheme was first introduced and Medicare staff gave conflicting information.

Quality dental treatment for needy patients should be the main objective of the scheme and punitive attacks on Dental practitioners for administrative oversights is

extremely unfair and will result in practitioners refusing to treat these needy EPC patients in the future.

Kind Regards

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