

April 2012

Senate Finance & Public Administration Committee PO Box 6100 Parliament House CANBERRA ACT 2600 AUSTRALIA

## **Dear Committee Members**

I am the subject of an ongoing Medicare audit, for services I provided under the Medicare dental for chronic diseases scheme.

I am in the category that the majority of participating practitioners find themselves, namely not complying with the administrative requirements, and therefore subject to the heavy penalty of the prospect of returning 2 years of fees to Medicare, for work which I completed in good faith, with the consent of the patient.

The omission in no way adversely affected patient care.

I was not informed of these administrative requirements at the commencement of the scheme. On the contrary I was told that the fee scale was modelled on the fee scale used by the Department of Veteran's Affairs, of which I have been a provider for many years. This scheme has no hidden administrative requirements, and the department of veteran's affairs thanks us kindly for providing services to ex-servicemen, at fees which are far below our regular fees.

Patients we have seen under the Medicare scheme have included the severely handicapped, with chronic physical or mental disabilities. These patients have been denied public funding for their dentistry up till now. They have been mostly grateful for the treatment provided by myself under the Medicare for dental scheme. Some of these patients have been unable to chew their food adequately for many years.

The administrative requirements were never explained to me, which should have been done if Medicare attaches such importance to them. The scheme began in 2007, and it's only in recent times that the administrative requirements were spelled out by Medicare and the consequences.

I would be very reluctant to participate in any new future government funded dental scheme, which may be proposed, following my experience with Medicare on this occasion.

The impact of this will fall on the most vulnerable group in the population, the poor, and the handicapped and chronically ill.

Surely the outcome of these audits other than cases where it is established that the dental treatment was not provided, should be education.

Yours sincerely,