

To The Senate Finance and Public Administration Committee.

Reference- Health Insurance (dental Services) Bill 2012 [No.2]

PERSONAL BACKGROUND

I am a dentist of 21 years standing having graduated from the University of Melbourne in 1990. I was born and raised in the working class outer Melbourne suburb of Lalor. My parents having migrated to Australia in the 1950s.

I set up my own dental practice in the neighboring suburb of Thomastown in 1991 and over the years have built up the practice which currently has over 20,000 patients. I employ one other dentist and 5 nurses and assistants. My practice is a lone standing dental surgery and I have no affiliation with any medical practice. My patients are multi-cultural but predominately elderly, illiterate migrants who are financially disadvantaged and mostly can only afford basic dental care.

I have participated in a twenty patient self-assessment audit in January 2011. In every instance the patients received all the claimed dental care. When I received the self-assessment audit I assumed it was as it sounded, a self-assessment to make sure all dental treatment billed for was provided. Many health funds send similar, more abbreviated questionnaires. In good faith I provided full copies of my own personal patient records, x-rays taken, lab work sheets, signed patient Medicare DB2-DP forms, GP Referral forms.

Medicare did not reply to my 20 patient self-assessment submission for over one year. I received a phone call from Medicare on the 16th February 2012. This left me for one whole year feeling apprehensive, stressed, worried and completely uncertain as to what was going on. Medicare asserts that in a number of instances patients and referring doctors were not given plans BEFORE treatment commenced. My position is that it only occurred in two instances and I strongly refute any inference that I have not complied with the spirit and purpose of the scheme. In the circumstances I consider the proposed further audit to be most unfair and unreasonable.

INTRODUCTION OF MEDICARE CDDS

News of the introduction of the scheme was to say the least very enthusiastically welcomed by my patients. For many it was the first opportunity to be able to afford to have more than the most basic care. My practice was soon swamped with patients wanting CDDS based treatment. For me it was an opportunity to provide my patients with truly beneficial treatment which, frustratingly, they previously could not afford. Over 80% of the CDDS patients were existing long term patients and I was happy to provide ongoing dental care for them.

The scheme brought with it some administrative challenges which I had not previously faced in my practice. I had no previous dealings with Medicare or any other Federal health based organization.

Medicare did not provide me with any information or training on how to implement the scheme. The information basically comprised the provision of the Medicare Benefits Schedule Dental Services Book which we thought was relevant as a reference to item codes.

My priority was to provide quality dental care to my patients under the scheme in the context of having to deal with the new paper work required.

I am proud to say that I have worked very diligently to provide quality dental care to all my patients in somewhat trying circumstances. The scheme has created significant logistical problems as a result of uncertainty as to its future. I can recall patients being very anxious to receive treatment before the scheme was to be curtailed.

It was only in about mid 2010 that I became aware of Medicare's attitude towards the required paperwork and the need to ensure that it was completed BEFORE treatment. Up until then the priority was to provide the treatment, however in any event I have at all times been diligent in providing dental plans to patients and referring doctors.

IMPACT OF SCHEME

For my patients the paperwork was of no consequence, they were informed as to what treatment was required and were grateful that the government was funding the cost. Many, many patients were not interested in obtaining a written plan, they just wanted to get the treatment. I gave them their plans in any event. I have not received one complaint about the quality of the work done. I am sure they will be bewildered by what I am facing and I fear that it will have an impact on the Dentist/patient relationship.

The scheme has benefited my patients however Medicare's audit of the scheme has caused me and, I understand many of my dental colleagues a great deal of stress and emotional hurt. Anecdotally I believe that most dentists in the early stages of the scheme were technically non-compliant in regards to providing dental plans BEFORE commencing treatment. The scheme was an administrative nightmare from the start due to the lack of guidance from Medicare. Certainly I was never told that payment for services would only be permitted if dental plans were provided BEFORE the service was rendered.

The proposed clawing back of fees simply because a dental plan was not given beforehand is, in my mind, offensive and deeply disturbing. I have not done anything wrong. I have provided in every instance, quality dental care to my patients and yet I am potentially liable to be financially ruined for failing to provide “paperwork” which I had not even been informed was required to permit payment.

The audit process is doing untold damage to the relationship between the dental profession and Medicare. I go as far as saying it has poisoned the relationship. I can understand and indeed support a strong stance against any dentist who has rorted the scheme however Medicare has sought to impugn the integrity of all dentists whose only “crime” is not to have submitted dental plans BEFORE providing the required services. The audit process against those dentists who have committed this technical “crime” will only serve to alienate those dentists from Medicare and punish patients who will not be able to find dentists to perform necessary dental services for them through Medicare.

Regards

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