

Dr Elias Dagher

10 April 2012

Dear Sir/Madam

Re: Submission to the Senate regarding Medicare Scheme/Bill 2012[No. 2]

I started practicing dentistry in Australia in 2007, just two months before the Medicare Scheme had started. The principle at that time decided to join the scheme as a way of helping medically compromised patients who had been waiting for quite long period of time to receive adequate dental treatment at public services.

He decided that to bulk bill without inflicting expenses that the patients could not afford. As to the way of managing the scheme, I was given Medicare list of prices, was told to treat them as the private patients who at the time were given a verbal treatment plan which we alternatively wrote on their cards. In fact didn't know we have to send letters to referring GPs or giving written treatment plans to patients.

Later on, I started working in an additional practice which I left after a while to another one. The regulations as to Medicare Scheme were the same as in the 1st Practice.

During the course of 2009, the Principal at the first practice was audited by Medicare towards high income figures. He came out clear with no further implications. He therefore received a letter that he was compliant. Why the issue of management compliance was not raised at that time??

Late 2009, two years after the starting of the scheme, we knew that Medicare is running audits towards compliance to rules and regulations which was not mentioned in any way before, nor been referred to our attention

Early 2010 I started my own practice in a remote country town. I tried to be compliant as much as possible. Meanwhile another issue emerged which is that we are not allowed to provide any dental treatment to patients during their first visit except for two procedures that Medicare consider as only emergency treatable.

In June 2011, I received a request for a Self-Audit covering all 4 surgeries I worked in. Having no access to most of the record, and being a voluntary participation with little incentive to participate I chose not to. Thus I am being audited and I am waiting the results.

Here I would like to state few points:

- Dentists have been treating patients on the Scheme for two consecutive years prior to Medicare Audit. They have started work with no directives or guidance whatsoever.

- Dentists have been paid for their services regardless of their compliance. Hence services including treatment on first visit were covered for. No one has drawn their attention that they were not supposed to give treatment during the first visit and to just limit it to the initial exam, and establishing of a written treatment plan that the patient must sign.
- I worked in 3 different surgeries with 3 different Principals and many Assistant Dentists. All were not aware of the rules and regulations.
- Sending summary of the treatment plan to the referring GP is not relevant to the course of the treatment to be done. GPs were usually surprised when receiving the treatment plan and they didn't know why and what to do with it.
- Being a Bulk Bill service, patients were grateful and appreciative. They knew there were limitations to the fund which they acknowledge it and accept it. The big majority was happy and satisfied by the final result regardless of the presence or not of a written treatment plan.
- Limiting the first visit to a check up and couple of emergency procedures I find it to be interfering in the medical decisions of the Medical Practitioner. He should be the only judge as to the kind of service to provide in accordance of course with ethics and knowledge. Who can pretend that an extraction is not a life saving emergency in some cases? What should a Dentist do when he is asked by a specialist to have a full clearance ASAP in the case of a patient going for a Major Surgery? Isn't a Filling an emergency for a medically compromised patient travelling more than hundred Kms to get to the Dental Practice?
- We are working with elderly medically compromised patients. Most of them need to be assisted with their transport therefore is it ethical just to see them for the establishment of Treatment Plan and ask them to come back later on?
- I understand that Medicare should supervise and audit Dentists' work on the professional level thus check if the proper item was claimed for the proper job, if the job was completed etc. Ask Dentists to refund unaccomplished jobs, prosecute cases of misconduct or intentionally breaches.
- On the administrative level, Medicare should be more tolerant, should educate Dentists and their staff, and establish a proper chart with the cooperation of the ADA. As it for today we still don't know the proper regulation because it is always changing.
- Finally I find unfair for Medicare to ask someone to refund the total amount paid specially for someone like me who only earned around 30% of the total amount since I was working as Assistant Dentist just and only just for the sake of uncompleted paper work which didn't affect the outcome for the patient and to which I shouldn't be hold full responsibility because I was not in charge on the managerial level and no back up or information were supplied by Medicare.

While the scheme remains very beneficiary for lots of non privilege persons, however it is threatening my future as if Medicare continues with their audit, considers me non compliant and asks me to refund sums they have paid which will lead to my bankruptcy. Similar applies to many Dentists.

I find myself reluctant to work with Medicare should they come with another scheme in case they don't have different attitudes towards Dentists.

Sincerely

Dr Elias Dagher