

To The Senate Finance and Public Administration Committees,

I first treated patients under the CDDS in early 2008. I work within an older establishment area of Sydney in which the majority of patients are elderly and are more likely to be suffering some form of Chronic Illness, in which case makes them eligible to receive treatment under the CDDS. I feared that if I didn't accept treating patients under the CDDS I would lose a high proportion of my existing clients.

The initial patients I treated were without any information from Medicare. I stumbled my way through the administrative procedure following vague advice from the Medicare Help Line.

I have had twenty-five years of experience in treating Veteran Affairs patients and have never had a problem. I treated patients under the Dental Scheme of the Hawke – Keating era and again all went smoothly. The procedures were simple and straightforward and easily introduced into existing administrative procedures. I was led to believe that the CDDS was similar to the above scheme from Medicare Advice.

I can say that it was not until I had a meeting with the ADA Advisory Service that I was fully aware of how Medicare was treating the administrative compliance of dentists.

At present I am under an audit being notified in October 2011. Medicare has not yet advised me that benefits have been incorrectly claimed.

Medicare had had one hundred per cent understanding of my claiming procedure. If I was non-compliant I believe that Medicare was aware of it well before I was. I will be very disappointed that if this is the case no help or educational material was provided for such a long period of time. I respect that the only adequate educational advice about the CDDS administrative requirements were provided by my Professional Association (ADA NSW Branch Advising Team). Even today, there are many outstanding questions in which the Association was not able to explain as they are still under discussion with Medicare and awaiting verification. These unclarified points have prevented me from providing specific dental procedures, which I believe will adversely affect the patients in the long term.

I have been successfully treating patients for twenty-five years before the CDDS. Obviously there have been some complaints against me presented to the Dental Board but following the presentation of my defence all complaints have been dismissed as baseless.

During my undergraduate training as well as postgraduate continued professional education I have successfully completed extensive dental/medical consequences of dental treatment in medically compromised patients ensuring utmost patient safety. Medicare states that Section 10 is essential to ensure proper patient safety and outcome. I believe that one hundred per cent punishment for administrative non-compliance is an insult to our professional capability. This is our area of speciality and we should be given some credit for it.

Following many conversations with the referring GP's, they comment on the detail of my reports but state they are not really trained to understand it and ask to "just fix the problem" so they can function properly.

During the Audit patients are asked to fill out a questionnaire concerning the treatment they have received by me under the CDDS. This in combination with government Media reports about exaggerated levels of roting the system by the profession I believe, have caused damage to my reputation.

It takes a lot of 'hard' work and time to develop trust and confidence with your patients. I have assured a lot of these concerned patients that in reality most dentists who are being audited to repay all fees is based solely on a paperwork and administrative oversight. Most dentists have completed work in good faith, trying to complement initiatives and have been penalized ridiculous amounts. When receiving this correct explanation those patients have become very angry towards this ridiculous and unjust government policy. My concern is the damaging effect caused between me and my patients who have been treated under the CDDS and believe the government propaganda. I am certain that some degree of long-term financial damage to my practice has been caused by my participation in the CDDS.

The potential risks of having to refund hard earned funds have had a very severe financial, emotional and psychological impact on my family and myself.

Following a recent medical review, my doctor was concerned about specific deterioration of my health, which he can only put down to excess stress. I believe that this is directly related to the audit process and its implications.

I have been able to achieve an extremely high percentage of patient satisfaction with the treatment I have provided under the CDDS, all of which I believe has been of an extremely high standard. In a lot of situations I provided additional treatment above and beyond the Medicare Limit at no extra cost to the patient. If a procedure did not achieve optimal result I would repeat it at the best of my ability.

None of my patients were at all adversely affected where I may not have complied with all the rules of the Scheme such as Section 10 of the determination. Any adverse affects I believe will result die to treatment I was not able to carry out because of limitation and lack of proper clarity of the Scheme. If I knew that participation in the CDDS would result in this situation I am presently in, I would never have considered it. I will continue to treat Veteran Affairs patients and fulfil my obligation to existing CDDS patients but I will not participate in any such future Medicare funded scheme unless approved by my association. I will charge my patients what I think is a fair and just fee for my professional service and let them deal with Medicare directly.

Regards,
Dr Michael Piras