Submission to Senate Committee Inquiry

6th April 2012

To whom it may concern,

Re: The Health Insurance (Dental Services) Bill 2012 [No.2]

I have been participating in the Chronis Disease Dental Scheme (the CDDS) since 2008 whilst working in private dental practice in Brunswick. I was introduced to the scheme by the senior dentist and owner of the practice who had been participating in the scheme since its inception. The senior dentist along with the 6 or so other dentists who worked in the practice were all keen participants in the scheme and encouraged me to also participate. Many of the patients of the practice benefited from such a scheme, being of relatively poor socio-economic status, and elderly, hence presenting with a high incidence of chronic disease. The patients were not asked to pay any fee out of pocket, except in the rare instance that the fees were exceeded. This meant that patients using the scheme (and in effect the Government who was paying for it) were actually receiving services at a much lower cost than our regular fees. I can certainly speak for myself and am sure that my colleagues would agree that our participation in the CDDS was primarily for the benefit of our patients and the financial gain was secondary. We could all see first hand the benefit it was making to the oral health of our patients.

Previous to working at this particular practice, I was on maternity leave and prior to this was working in public practice for Darebin Community Health. As such, I had no previous knowledge of the CDDS besides what I had read in material received from the Australian Dental Association. I never recall receiving correspondence from Medicare directly, particularly

in regards to the now apparently strict legal requirement of providing patients with a treatment plan and a quote of the costs involved and providing the referring GP with a letter outlining the proposed treatment plan. When I began participating in the CDDS in the Brushwick practice, the other practitioners were not fulfilling these requirements and we were all very shocked to discover when were audited in April/May 2010 that these were legal requirements and we were liable for very serious fines for not fulfilling these requirements. I certainly was never made aware of the seriousness of such a breach by Medicare until the audit was taking place. Coming from a public practice, were I treated only public patients and never had to supply written treatment plans or quote to either the patients or their GP, it never occurred to me that the CDDS would have different requirements. Of course, as soon as I was made aware of the legal requirements, my practices changed and I did provide all patients participating in the scheme with a written treatment plan and quote and a treatment summary was sent to the referring GP. I can say the same for the other dentists I was working with in Brunswick.

However, it was apparently too late for us, and without providing us with any warnings, the outcome of the audit of our practice was a recommendation for a fine of over \$700 000 to the senior dentist of our practice. She has since been issued with this fine. This appears completely ludicrous to me, as just like myself, her first and only awareness to the serious legal implications for not complying with administrative requirements of the CDDS came after the audit with recommended the fine. There was no warning, no way she or the rest of us were given a chance to change our practices. The other significant point is that as far as I am aware, all the patients who participated in the scheme at our practice were all very pleased with the service they received. So how can it make sense that our senior dentist be asked to pay back all the monies for services that were all provided in a timely manner, to patients that are happy with what they received? Surely a warning or a small fine would suffice, and this highly respected, small business woman would not be placed in a position of bankruptcy and her twenty or so employees and associates would not be placed in the position of looking for new employment.

I strongly recommend that The Health Insurance (Dental Services) Bill 2012 [No.2] be passed.

Regards,

Dr Sonia Sumer (BDSc Hons)