

Dr Keyhan Alavian B.Dent

To whom it may concern:

I am writing to show my concern in regards to some of the shortcomings of the Chronic Disease Dental Scheme (CDDS) introduced by Medicare Australia.

I graduated with Bachelor of Dentistry at the University of Sydney in 2005 and have been working as a Dentist in private practice in the since then. I have always treated patients under the Veterans Affairs (VA), as well as the publically funded Illawarra Area Health Services (IAHS). I became more involved with treatment under CDDS as of 2007, as more GP's requested it as a part of their care plan for their patient. Over the years, I found the CDDS to be very beneficial to my patients as many of them had not acquired any oral health care for years mainly due to financial constraints. I have treated some patients who had not been to a dentist for over 20 years, and their oral health was in a terrible condition. I believe I have made a difference in their health by providing them definitive treatment that they so desperately needed.

Unfortunately, many dentists including me are being targeted by Medicare for the lack of compliance to certain administrative protocol that was only put forward to us recently (i.e. 2010). From early 2007 when I started to treat patients under the CDDS scheme, I have always been in contact with Medicare to ensure that the Patient's CDDS documents are in order before any treatment can begin. Yet all this time, there was not a single piece of information provided by Medicare to make me aware of any administrative protocols that I was meant to follow.

Nevertheless, I can confidently say that the treatment I have provided follows strict guidelines with great deal of attention given to communication and informed consent to ensure best possible care for patients. Before treatment is carried out, patients are explained the treatment options so that they can make an informed decision. The treatment plan can be printed for them if they wish to have a hard copy. Furthermore, if there are referring practitioners involved, they will be informed of the treatment plan in written copy. This strict protocol is carried out for every patient in my care regardless of being treated under the Department of Veterans Affairs, or the CDDS, or if they are privately paying patients. This diligent approach is what allows me to provide a high level of treatment for my patients and it is the main reason that I

maintain a very positive relationship with my patients. Yet somehow I find myself under scrutiny by Medicare for not following certain administrative protocol.

Another thing that concerns me about the protocol put forward by Medicare is the limitation on the range of treatments that can be provided in the first appointment. As healthcare professionals it is detrimental to ensure best treatment for the patient at the time they are presented. Especially if they are presented with pain, appropriate treatment needs to be provided to remove the underlying cause of pain to prevent further unnecessary discomfort to the patient or even avoid a life-threatening situation. By putting limitations on treatment in the first appointment, Medicare is essentially preventing a dental practitioner to provide appropriate care for the patient.

The most important lesson that we are taught in Dental school is to treat every patient with respect and their well being in mind. That may not be possible under the limitations put forward by Medicare under the CDDS.

Regards
Keyhan Alavian