

20 April 2009

Secretary
Senate Community Affairs Committee
PO Box 6100
Parliament House
ACT 2600



Dear Sir,

I understand that the Committee is inquiring into legislation regarding Medicare's audit powers of investigation.

I would appreciate if my concerns, which I am sure would be shared by many Australians, were taken into consideration. They are as follows:

that Medicare's investigations involve examination without approval, of patient records. I am sure that an aware community would strongly disapprove, especially since the reason for investigation is financial and not for the improvement of medical services. We would all disapprove both of medicare's present access to records and having it increased, and of their doctor providing them. This is a serious privacy matter and government does not have the right;

that given the shortage of doctors, government should be showing restraint rather than extending bureaucratic controls. The considerable time spent by doctors answering Medicare's inquiries is time lost for patients. The already high level of red tape applying almost uniquely to doctors is causing many to quit or reduce their hours and avoid bulk billing.

that doctors in preparing medical records may now be required to submit those records for scrutiny for their own sake, to the detriment of patients. Medicare bureaucracy has gone too far in pressing for legislation to empower their overseeing doctors at work.

that the resources given to auditing doctors are not first directed at medicare's own operations. Medicare is an expensive policy and that is a fact of life. But its administration can be more frugal in terms of manpower (especially for audit) and the high cost of centres that do no more than hand money over the counter in refunds.

I strongly object to this legislation and to the the already excessive red tape imposed on doctors. Legislation especially in these times, should seek to lighten the doctors' burden and demonstrate good faith in the integrity of the people in the medical profession. It should be aimed at reducing not increasing audit powers of the bureaucracy, relying more on doctor's honesty and the inherent supervision by patients, and at giving encouragement to doctors to persevere rather than fold up their medical practices.

Sincerely yours,

Robert Copley