

Submission dated 28th June 2024 from Bayfield Dental and Bayfield Dental City

1. Patients' treatment needs are paramount, to be determined by the patient and dental provider outside the influence of a health fund. Conflict of interest problems will now arise if St Luke's Medical and Hospital Benefits Association (St Lukes) proceeds to being both a health fund and a dental provider.

The data obtained whilst compiling Metric Reports will give the health fund an insight into how a dentist practices, item number usage and fees charged are valuable indicators of how a dental practice is operating and how successful it is. Just as important is the data on how many patients the practice has and how often do they attend, which would be part of the Metric's Report.

Health funds through their own dental clinics and through participating provider partners have the potential to influence treatment for patients. Dentists who sign an agreement with St Luke's, who are they beholden to, St Luke's or the patient?

2. St Luke's has an unfair powerful marketing capacity. Recently, The Examiner, a Tasmanian newspaper published two opinion pieces 'Better Access to Dental Care will Give Tasmanians Something to Smile About', Luke Cameron Chief Health Officer St Luke's 10th April 2024 and 'Time to Turn a New Page in Tasmania's Health History' Paul Lupo CEO St Luke's 4 May 2024. This is unfair competition for the local dentists when the Chief Health Officer and CEO of St Luke's, is promoting their dental plans. Combine this with access to the mailing list of all its members for direct marketing and influence, sponsorship of major sporting events both community and statewide provides St Lukes with a much powerful marketing machine, no local Tasmanian dentist can compete with.

Some dental accounts, for various reasons can only be processed at local St Luke's branches. Historically there can be the unsolicited comment by a St Lukes' employee, "your dentist charges above the fee schedule consider going to one of our dentists" or "your dentist is using the incorrect item number for the dental service"; these comments are often inaccurate or mischievous and worrying to the patient. Therefore, one might deem it a strategy on the health funds' part as their method to start the conversation to get their members to look at another provider for their treatment.

3. Metric Reports are an interesting concept. Why are they so important to a health fund? St Luke's states that Metric Reports are designed to help participating dental partner providers make business decisions and encourage them to prioritize St Luke's members and to incentivize other dental providers to join the network. As a very experienced Dentist, I treat all my patients equally, no one should be prioritized except for treatment needs such as trauma or facial swelling. As a long-term owner of a dental practice (40+ years) business decisions are not made on Metric Reports formulated by a health fund rather by balance sheets and profit and loss statements in accordance with the accountant.

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To incentivize other dental providers to join the network, Metric Reports in fact act to de-incentivize other dentists from joining the network, 'big brother, the health fund is watching you so be on notice'.

A significant component of the Metric's Report is your 'Peers' referred to as other Tasmanian dentists, by St Luke's. Who are your 'Peers'? Is it aged related, experience related, training related, competence related, hand eye coordination related, personally I have no peers, we are all unique individuals with all our own strengths and weaknesses. The concept of 'Peers' in the provision of patient focused dental services is flawed.

Historically health funds use Metric Reports as a coercive tool to cause a recipient to act in a certain way, more precisely to influence the treatment the dentist is providing for their patient.

4. By being both a health fund and a dental provider St Luke's will have access to non-participating providers confidential data relating to service delivery and billings (fees) giving them a significant advantage over 'the local independent dentist'.
5. Price, is a key factor in competition. St Luke's will set the maximum chargeable fee for dental services for Participating Dental Partner Providers solely based on item numbers, however often it is cheaper for the patient especially for longer appointments to be billed according to an hourly rate. This will not be possible within the St Luke's proposed pricing agreement with dental practitioners consequently the patient will ultimately be disadvantaged. The hourly rate billing model is sanctioned by the ADA.
6. St Luke's stated goal is to 'establish' a Tasmania-wide network and that it intends to enter into agreements with as many dentists as possible. If St Luke's succeeds they will be the major 'player' in the dental 'industry' in Tasmania with much market power against which the independent dentist will find it difficult to compete with.

The corporatization of dentistry as proposed by St Lukes will do little in addressing the cost barriers to oral health care in Tasmania.