



**ANZAOMS**  
AUSTRALIAN AND NEW ZEALAND ASSOCIATION OF  
**ORAL & MAXILLOFACIAL SURGEONS**

4 February 2022

## Consultation Response: Senate Inquiry Health Legislation Amendment (Medicare Compliance and Other Measures) Bill 2021

[Health Legislation Amendment \(Medicare Compliance and Other Measures\) Bill 2021 \[Provisions\] – Parliament of Australia \(aph.gov.au\)](#)

To: Committee Secretary, Senate Standing Committees on Community Affairs, Department of Senate  
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### General

Thank you for the opportunity to provide feedback to the Senate Inquiry Health Legislation Amendment (Medicare Compliance and Other Measures) Bill 2021.

ANZAOMS is the peak body representing specialist Oral and Maxillofacial Surgeons (OMS) in Australia and New Zealand. The association is consulted on policy matters around oral and maxillofacial surgery by state and federal governments, Medicare, private health insurance providers, consumer bodies and specialist medical and surgical colleges.

Oral and Maxillofacial Surgery is a unique specialty at the intersection of the medical and dental professions.

- The specialty is both a medical (surgical) specialty and a dental specialty.
- Practitioners must complete both a medical and dental degree.
- Practitioners are jointly regulated by both the Medical Board of Australia (“MBA”) and the Dental Board of Australia (“DBA”).
- Both the Australian Medical Council (“AMC”) and the Australian Dental Council (“ADC”) jointly assessed the qualifications to recognise the specialty.

ANZAOMS Members contribute to the training, examination and the governance of OMS surgical training through the Board of Studies of the Royal Australasian College of Dental Surgeons (RACDS). Oral & Maxillofacial Surgery is also recognised as one of the listed principal surgical specialities. Specialists are required to hold both Medical and Dental qualifications.



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The Dental Board of Australia recognises the specialty of Oral and Maxillofacial Surgery as: *“The part of surgery that deals with the diagnosis and surgical and adjunctive treatment of diseases, injuries and defects of human jaws and associated structures.”*

Representing over 290 health practitioners ANZAOMS is well placed to comment on a range of issues associated with mandatory and voluntary notifications. ANZAOMS supports a compliance system which is transparent and accountable.

## Summary

Amends the: *Health Insurance Act 1973* to: broaden the remit of the Professional Services Review (PSR) to make agreements with any person under review who acknowledges inappropriate practice (including bodies corporate); and introduce new sanctions for persons who fail to respond to a notice to produce documents to the Director of the PSR or to a PSR Committee, or fail to appear at hearings; *Health Insurance Act 1973*, *National Health Act 1953* and *Dental Benefits Act 2008* to provide for: the recovery of interest payable on certain debts; the application of administrative penalties to Shared Debt Recovery Scheme debts; the use of financial information gathering powers in debt recovery, Administrative Appeal Tribunal reviews where one or more garnishee notices are issued in relation to certain debts; and clarification of the Commonwealth's ability to recover debts from a person or the estate of a person.

## ANZAOMS Response

ANZAOMS has reviewed the proposed changes and is generally supportive. ANZAOMS sees that the changes will effectively reinforce the existing powers of the PSR, which we perceive to be a positive step forward. We would note that;

- The changes support the PRS role in regulating the use of Medicare rebates by providers.
- ANZAOMS supports to appropriate application of item numbers by clinicians and approves these changes as a way to assist with the enforcement process for those who have been proven to be acting outside the acceptable usage guidelines.
- ANZAOMS supports robust due process in the review and disciplinary process.