



# Dental Payment Schedule

Reports

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# eSchedules

## Guidance on your Creditor Remittance Patient Report

**My eSchedule reports**  
Treatment Payment and Patient reporting

**Creditor Remittance Information**

2013 Dec  
CREDITOR NAME (AAA00000)

Dentist Name		List Number	Sum Payable to Practitioner
First name	Last name	00000	£1,182.82
First name	Last name	00000	£7,043.60
First name	Last name	00000	£696.29

2013 Dec  
CREDITOR NAME (A0000000)

Schedule month.

Details of all the list numbers that are attached to that supplier number and the net payment due to each number for that schedule month.

This is your supplier number and is for our reference only.

This is the creditor.

The creditor is the person or business who we are paying.



# Practitioner Services



## Your eSchedules guidance | Account 7 - Breakdown Sums Due

The layout for this guidance is based on the portable document format (PDF) report output, and there may be cosmetic differences when viewing the online report.

This is an example of a browser view for illustration only

### My eSchedule reports

Treatment, payment and patient reporting

Your payment Account 7 - Paid under the National Health Service (Scotland) Act  
Payments we have made on 30/06/2014

List Number 00000

Name First name Last name

Sums Due	Line No	Variation Description	Value
	1	Capitation Payments	1075.53
	2	Continuing Care Payments	957.67
	3	Item of Service Payments	2189.04
	4	Total Payments Authorised by SDPB	4222.24
	5	Seniority Payments	0
	6	Continuing Professional Development Allowance	0
	7	Superannuable Allowances (Line 7)	0
	8	Superannuable Sum Due	4222.24
	9	Commitment payments (line 9)	0
	10	Long Term Sickness Payment	0
	11	Maternity Payment	0
	12	Reimbursement of Rates	0
	13	Non-Superannuable Allowances (Line 13)	0
	14	Estimated Payments	0
	15	Gross Sum Due	4222.24
	No	Variation Description	Value
	16	Superannuation Contribution - Practitioner	0

**Line 4**  
Sum of Lines 1 to 3

**Line 7**  
Total of Superannuable Allowances.

These can include:

- Clinical Audit;
- Dental Practice Adviser sessions;
- Loss of remuneration of time;
- Other sessional payments (for instance meetings);
- P-CAT Audits (Primary Care Audit Tool);
- Remote Areas Allowance;
- Surgery inspections.

**Line 8**  
Sum of Lines 4 to 7

**Line 13:**  
Total of Non-Superannuable allowances.

These can include:

- Recruitment and Retention Allowance;
- Sedation Allowance;
- Practice Improvement Grant (New Vocational Training practice);
- Practice Improvement Grant (Existing Vocational Training practice);
- General Dental Practice Allowance;
- Rent Reimbursement;
- Emergency Dental Service sessions;
- Childsmile Payment;
- Clinical Waste;
- Decontamination funding.

**Line 15**  
Sum of Lines 8 to 14

# Practitioner Services



## Your eSchedules guidance | Account 7 - Breakdown Sums Due

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Line No	Variation Description	Value
14	Estimated Payments	0
15	Gross Sum Due	4222.24
<b>Deductions from Gross</b>		
16	Superannuation Contribution - Practitioner	0
17	Superannuation Contribution - Assistant	0
18	Additional Pension	0
19	Superannuation Arrears	0
20	Additional Pension Percentage	0
21	Superann Arrears Percentage	0
22	Additional Vountary Contribution (AVC)	0
23	Sums Withheld in Terms of Regulations	0
24	Withdrawal from Contract	0
25	Compressor Insurance	0
26	Refuse Collection	0
27	NOT USED	0
28	Local Dental Committee Levy	0
29	Estimated Payments Recovered	0
30	Gross Deductions	0
31	Net Sum Due	4222.24
32	Misc Allowances/Payments (Line 32)	0
33	Sum Payable to Practitioner	4222.24

Line 17  
Used when an entry is placed on Line 42 - see superannuation calculation guidance.

Lines 23, 24, 26 and 27 are not used.

Line 30  
Sum of Lines 16 to 29

Line 31 equals  
Line 15 minus Line 29

Line 32 - Allowances  
These can include:

- Emergency Dental Service sessions (Travel & Subsistence);
- Continuing Professional Development Allowance (Travel & Subsistence);
- Dental Practice Adviser sessions (Travel & Subsistence);
- General Anaesthetic sessions (NHS Grampian only);
- Refund Superannuation Contributions.

Line 33  
Net amount payable to practitioner's account.

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# Practitioner Services



## Your eSchedules guidance | Account 7 - Breakdown Sums Due

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Line No	Variation Description	Value
34	Sum Due	4222.24
35	Charges to Patients	1841.72
36	DSS Remissions	774.07
37	Net Statutory Charges	1067.65
38	Charges to Patients Under Regulation 9	0
39	Deposited by Regulation 9 Patients	0
40	TOTAL	5289.89
41	Practice Expenses ( 56.10% OF LINE 40)	2967.63
42	Approved Remuneration of Assistants	0
43	TOTAL ALLOWANCES	2967.63
44	Commitment payments (line 44)	0
45	Adjustments for Superannuation	0
46	REMUN. FOR SUPER. PURPOSES(INCLINES 44 & 45)	0
47	Practitioner's Superann Contributions	0
48	Assistant's Superann Contributions	0
49	Net Sum Due	0
50	Misc Allowances/Payments (Line 32)	0

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Lines 35 and 36 are automatically taken from GP17 claims

Line 42 Practitioners notify us of how much annual salary should be reported for assistants

Line 46 = Line 40 minus (sum of Line 43, Line 44 and Line 45)

Line 43 = Line 41 plus Line 42

Line 47 is a report of Line 16

Line 34 is a report of Line 8

Line 37 = Line 35 minus Line 36

Line 40 (Gross total) = Line 34 plus Line 37

Line 44 is a report of Line 9

Line 48 is used when an entry is placed on Line 42

Line 49 = 14.9% of Line 46

Line 50 is used when an entry is placed on Line 42

# Practitioner Services



## Your eSchedules guidance | Account 7 Commitment Report Sums Due

The layout for this guidance is based on the portable document format (PDF) report output, and there may be cosmetic differences when viewing the online report.

This is an example of a browser view for illustration only

### My eSchedules reports

Treatment, payment and patient reporting

Your Commitment Report Sums Due report - Paid under the National Health Service (Scotland) Act Payment for the period Jul 2014

List Number 00000  
Name First name Last name

Line No	Variation Description	Value
Sums Due		
1	Capitation Payments	0
2	Continuing Care Payments	0
3	Item of Service Payments	0
4	Total Payments Authorised by SDPB	0
5	Seniority Payments	0
6	Continuing Professional Development Allowance	0
7	Superannuable Allowances (Line 7)	0
8	Superannuable Sum Due	0
9	Commitment payments (line 9)	1582.50
10	Long Term Sickness Payment	0
11	Maternity Payment	0
12	Reimbursement of Rates	0
13	Non-Superannuable Allowances (Line 13)	0
14	Estimated Payments	0
15	Gross Sum Due	1582.50

Lines 1 to 8 & 10 to 14 are not used in Commitment Payment reports.

Line 9  
Commitment Payment calculated for the designated quarter.

Line 15  
Total Commitment Payment paid for designated quarter.

Your eSchedules guidance | Account 7 Commitment Report Sums Due

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This is an example of a browser view for illustration only

	14	Estimated Payments	0
	15	Gross Sum Due	1582.50

  

	Line No	Variation Description	Value
Reductions from Gross	16	Superannuation Contribution - Practitioner	194.65
	17	Superannuation Contribution - Assistant	0
	18	Additional Pension	0
	19	Superannuation Arrears	0
	20	Additional Pension Percentage	142.43
	21	Superann Arrears Percentage	0
	22	Additional Voluntary Contribution (AVC)	0
	23	Sums Withheld in Terms of Regulations	0
	24	Withdrawal from Contract	0
	25	Compressor Insurance	0
	26	Refuse Collection	0
	27	NOT USED	0
	28	Local Dental Committee Levy	0
	29	Estimated Payments Recovered	0
	30	Gross Deductions	337.08
	31	Net Sum Due	1245.42
	32	Misc Allowances/Payments (Line 32)	0
	33	Sum Payable to Practitioner	1245.42

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Lines 16 to 21  
Adjustments to  
superannuation  
payments made from  
previous quarters.

Lines 22 to 29  
are not used.

Line 30  
Gross of Lines 16  
to 21

Line 31  
Line 15 minus  
Line 30

Line 33  
Sum of Line 31 plus  
Line 32



# Practitioner Services



## Your eSchedules guidance | Account 7 Commitment Report Sums Due

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	Line No	Variation Description	Value
Superannuation Calculation	34	Sum Due	4222.24
	35	Charges to Patients	1841.72
	36	DSS Remissions	774.07
	37	Net Statutory Charges	1067.65
	38	Charges to Patients Under Regulation 9	0
	39	Deposited by Regulation 9 Patients	0
	40	TOTAL	5289.89
	41	Practice Expenses ( 56.10% OF LINE 40)	2967.63
	42	Approved Remuneration of Assistants	0
	43	TOTAL ALLOWANCES	2967.63
	44	Commitment payments (line 44)	0
	45	Adjustments for Superannuation	0
	46	REMUN. FOR SUPER. PURPOSES(INC LINES 44 & 45)	0
	47	Practitioner's Superann Contributions	0
	48	Assistant's Superann Contributions	0
	49	Net Sum Due	0
	50	Misc Allowances/Payments (Line 32)	0

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Line 48  
Total from Line 17

Line 47  
Total from Line 16

Line 49  
NHS Board Contribution to superannuation for Principal Dentist.

Line 50  
NHS Board Contribution to superannuation for Assistant.

Line 44  
Total from Line 15

Line 45  
Adjustments to superannuation dependant on gross.

Line 46  
Sum of Line 44 plus Line 45

Your eSchedules guidance | Additional Payments and Recoveries

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This is an example of a browser view for illustration only

### My eSchedules reports

Treatment, payment and patient reporting

Your Additional Payments and Recoveries report for the National Health Service (Scotland) Act  
 Payment for month ending 30/06/2014

**Payment schedule month**

List Number 00000  
 Name First name Last name

**Adjustments against Item of Service Payments**

Adjustment Reason	Amount Paid
Backdated IOS payment for period April to May 2014	£41.54
Point of treatment check claims at 12p per claim	£1.20
<b>Total</b>	<b>£42.74</b>

**Adjustments against Capitation and Continuing Care Payments**

Adjustment Reason	Amount Paid
Backdated CON_CARE award amount for period April to May 2014	£8.06
<b>Total</b>	<b>£8.06</b>

**Statement of Dental Remuneration (SDR) increase of fees for Item of Service (IOS) Recalculated for specified period.**

**Total Amount paid for backdated IOS and point of treatment check.**

**Point of Treatment check shows payments for claims submitted where evidence not produced for exemptions.**

## Your eSchedules guidance | Additional Payments and Recoveries

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← → 🏠 This is an example of a browser view for illustration only

### My eSchedules reports

Treatment, payment and patient reporting

Your Additional Payments and Recoveries report - Paid under the National Health Service (Scotland) Act Payment for month ending 30/06/2014

**List Number 00000**  
Name First name Last name

**Adjustments against Item of Service Payments**

Adjustment Reason	Amount Paid
Backdated IOS payment for period April to May 2014	£41.54
Point of treatment check claims at 12p per claim	£1.20
<b>Total</b>	<b>£42.74</b>

**Adjustments against Capitation and Continuing Care Payments**

Adjustment Reason	Amount Paid
Backdated CON_CARE award amount for period April to May 2014	£8.06
<b>Total</b>	<b>£8.06</b>

SDR increase of fees for Capitation and Continuing Care payments backdated for period specified.

Total for Captiation or Continuing Care backdated payments.

## Your eSchedules guidance | Allowances and Superannuation report

The layout for this guidance is based on the portable document format (PDF) report output, and there may be cosmetic differences when viewing the online report.

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### My eSchedules reports

Treatment, payment and patient reporting

Your Allowances and Superannuation report - Paid under the National Health Service (Scotland) Act  
Payment for the period Jun 2014

List Number 00000  
Name First name Last name

Line 7	Misc. Adjustments (Line 7)	£0.00
	<b>Total for Line 7</b>	<b>£0.00</b>
Line 13	Misc. Adjustments (Line 13)	£0.00
	<b>Total for Line 13</b>	<b>£0.00</b>
Line 32	Misc. Adjustments (Line 32)	£0.00
	<b>Total for Line 32</b>	<b>£0.00</b>
Line 47	Practitioner's Superannuation - Arrears	£0.00
	Practitioner's Superannuation - Current	£0.00
	<b>Total for Line 47</b>	<b>£0.00</b>
Line 48	Assistant's Superannuation - Arrears	£0.00
	Assistant's Superannuation - Current	£0.00
	<b>Total for Line 48</b>	<b>£0.00</b>

**Superannuable allowances breakdown**

This can include:

- Clinical Audit, or
- Remote Areas Allowance and so on.

Each payment is detailed separately.

# Practitioner Services



## Your eSchedules guidance | Allowances and Superannuation report

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### My eSchedules reports

Treatment, payment and patient reporting

Your Allowances and Superannuation report - Paid under the National Health Service (Scotland) Act  
Payment for the period Jun 2014

List Number 00000  
Name First name Last name

Line 7	Misc. Adjustments (Line 7)	£0.00
	<b>Total for Line 7</b>	<b>£0.00</b>
Line 13	Misc. Adjustments (Line 13)	£0.00
	<b>Total for Line 13</b>	<b>£0.00</b>
Line 32	Misc. Adjustments (Line 32)	£0.00
	<b>Total for Line 32</b>	<b>£0.00</b>
Line 47	Practitioner's Superannuation - Arrears	£0.00
	Practitioner's Superannuation - Current	£0.00
	<b>Total for Line 47</b>	<b>£0.00</b>
Line 48	Assistant's Superannuation - Arrears	£0.00
	Assistant's Superannuation - Current	£0.00
	<b>Total for Line 48</b>	<b>£0.00</b>

**Non-Superannuable allowances breakdown**  
This can include Rent and Rates Reimbursement and General Dental Practice Allowance and so on.  
Each payment is detailed separately.

## Your eSchedules guidance | Allowances and Superannuation report

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← → 🏠
This is an example of a browser view for illustration only

### My eSchedules reports

Treatment, payment and patient reporting

Your Allowances and Superannuation report - Paid under the National Health Service (Scotland) Act  
Payment for the period Jun 2014

**List Number 00000**  
**Name First name Last name**

Line 7	Misc. Adjustments (Line 7)	£0.00
	<b>Total for Line 7</b>	<b>£0.00</b>
Line 13	Misc. Adjustments (Line 13)	£0.00
	<b>Total for Line 13</b>	<b>£0.00</b>
Line 32	Misc. Adjustments (Line 32)	£0.00
	<b>Total for Line 13</b>	<b>£0.00</b>
Line 47	Practitioner's Superannuation - Arrears	£0.00
	Practitioner's Superannuation - Current	£0.00
	<b>Total for Line 47</b>	<b>£0.00</b>
Line 48	Assistant's Superannuation - Arrears	£0.00
	Assistant's Superannuation - Current	£0.00
	<b>Total for Line 48</b>	<b>£0.00</b>

Breakdown of miscellaneous allowances/payments

For example:

- Continuing Professional Development Allowance expenses
- Emergency Dental Service session payments

Each payment is detailed separately.

# Practitioner Services



## Your eSchedules guidance | Allowances and Superannuation report

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### My eSchedules reports

Treatment, payment and patient reporting

Your Allowances and Superannuation report - Paid under the National Health Service (Scotland) Act  
Payment for the period Jun 2014

List Number 00000  
Name First name Last name

Line 7	Misc. Adjustments (Line 7)	£0.00
	<b>Total for Line 7</b>	<b>£0.00</b>
Line 13	Misc. Adjustments (Line 13)	£0.00
	<b>Total for Line 13</b>	<b>£0.00</b>
Line 32	Misc. Adjustments (Line 32)	£0.00
	<b>Total for Line 13</b>	<b>£0.00</b>
Line 47	Practitioner's Superannuation - Arrears	£0.00
	Practitioner's Superannuation - Current	£0.00
	<b>Total for Line 47</b>	<b>£0.00</b>
Line 48	Assistant's Superannuation - Arrears	£0.00
	Assistant's Superannuation - Current	£0.00
	<b>Total for Line 48</b>	<b>£0.00</b>

Breakdown of superannuation for practitioner and assistant (if applicable).

Arrears show the re-calculation for superannuation due when thresholds change. This may be due to change in superannuable earnings.

Current shows superannuation paid on current report.

## Your eSchedules guidance | Capitation and Continuing Care Payments

The layout for this guidance is based on the portable document format (PDF) report output, and there may be cosmetic differences when viewing the online report.

This is an example of a browser view for illustration only

### My eSchedules reports

Treatment, payment and patient reporting

Your Capitation and Continuing Care Payments report - Paid under the National Health Service (Scotland) Act  
Patient registration counts for the period Jun 2014

List Number 00000  
Name First name Last name

#### Capitation Summary

Lower Age (Years)	Upper Age	Monthly Rate (Full)	Registration Payment	Special Needs Payment	Deprivation Category Payment	Total Registration Payment
0	2 Years 11 Months	£1.73	£64.70	£0.00	£0.00	£64.70
3	5 Years 11 Months	£2.30	£160.85	£0.00	£0.00	£160.85
6	12 Years 11 Months	£4.05	£580.50	£0.00	£0.00	£580.50
13	17 Years 11 Months	£5.22	£485.81	£0.00	£0.00	£485.81
			£1,291.86	£0.00	£0.00	£1,291.86

Age group for Capitation patients.

Amount paid per patient for specific age group.

Lower Age (Years)	Upper Age	Reduced Registration Payment	Special Needs Payment	Deprivation Category Payment	Total Registration Payment	
3	5 Years 11 Months	£0.00	£0.00	£0.00	£0.14	
6	12 Years 11 Months	£0.00	£0.00	£0.00	£4.05	
13	17 Years 11 Months	£1.04	£8.35	£0.00	£8.35	
Total Reduced:			£12.54	£0.00	£0.00	£12.54
Capitation Total			£1,291.86	£0.00	£0.00	£1,291.86

Total Registration payment for each specific group.



Your eSchedules guidance I Capitation and Continuing Care Payments

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### My eSchedules reports

Treatment, payment and patient reporting

Your Capitation and Continuing Care Payments report - Paid under the National Health Service (Scotland) Act  
Patient registration counts for the period Jun 2014

List Number 00000  
Name First name Last name

**Capitation Summary**

Total payment for patients claimed with special needs for each specific age group.

Lower Age (Years)	Upper Age	Monthly Rate (Full)	Registration Payment	Special Needs Payment	Deprivation Category Payment	Total Registration Payment
0	2 Years 11 Months	£1.73	£64.70	£0.00	£0.00	£64.70
3	5 Years 11 Months	£2.30	£160.85	£0.00	£0.00	£160.85
6	12 Years 11 Months	£4.05	£580.50	£0.00	£0.00	£580.50
13	17 Years 11 Months	£5.22	£485.81	£0.00	£0.00	£485.81
		<b>Total Full:</b>	<b>£1,291.86</b>	<b>£0.00</b>	<b>£0.00</b>	<b>£1,291.86</b>

Deprivation payments for each specific age group for current report.

Lower Age (Years)	Upper Age	Monthly Rate (Reduced)	Registration Payment	Special Needs Payment	Deprivation Category Payment	Total Registration Payment
3	5 Years 11 Months	£0.46	£0.14	£0.00	£0.00	£0.14
6	12 Years 11 Months	£0.81	£4.05	£0.00	£0.00	£4.05
13	17 Years 11 Months	£1.04	£8.35	£0.00	£0.00	£8.35
		<b>Total Reduced:</b>	<b>£12.54</b>	<b>£0.00</b>	<b>£0.00</b>	<b>£12.54</b>
		<b>Capitation Total</b>	<b>£1,291.86</b>	<b>£0.00</b>	<b>£0.00</b>	<b>£1,291.86</b>

## Your eSchedules guidance | Capitation and Continuing Care Payments

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Your Capitation and Continuing Care Payments report - Paid under the National Health Service (Scotland) Act  
Patient registration counts for the period Jun 2014

List Number 00000  
Name First name Last name

**Capitation Summary**

Lower Age (Years)	Upper Age	Monthly Rate (Full)	Registration Payment	Special Needs Payment	Deprivation Category Payment	Total Registration Payment
0	2 Years 11 Months	£1.73	£64.70	£0.00	£0.00	£64.70
3	5 Years 11 Months	£2.30	£160.85	£0.00	£0.00	£160.85
6	12 Years 11 Months	£4.05	£580.50	£0.00	£0.00	£580.50
13	17 Years 11 Months	£5.22	£485.81	£0.00	£0.00	£485.81
Total Full:			£1,291.86	£0.00	£0.00	£1,291.86

Total Capitation payments made for current report including full rate, reduced rate and Special Needs patients.

Lower Age (Years)	Upper Age	Monthly Rate (Reduced)	Registration Payment	Special Needs Payment	Deprivation Category Payment	Total Registration Payment
3	5 Years 11 Months	£0.46	£0.14	£0.00	£0.00	£0.14
6	12 Years 11 Months	£0.81	£4.05	£0.00	£0.00	£4.05
13	17 Years 11 Months	£1.04	£8.35	£0.00	£0.00	£8.35
Total Reduced:			£12.54	£0.00	£0.00	£12.54
Capitation Total			£1,291.86	£0.00	£0.00	£1,291.86

Adjustments to Capitation payments for current report including any additional payments due.

Capitation Adjustments:	£0.00
Additional Payment At 0%:	£0.00

# Practitioner Services



## Your eSchedules guidance | Capitation and Continuing Care Payments

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Lower Age (Years)	Upper Age	Monthly Rate (Full)	Registration Payment	Special Needs Payment	Deprivation Category Payment	Total Registration Payment
0	2 Years 11 Months	£1.73	£64.70	£0.00	£0.00	£64.70
3	5 Years 11 Months	£2.30	£160.85	£0.00	£0.00	£160.85
6	12 Years 11 Months	£4.05	£580.50	£0.00	£0.00	£580.50
13	17 Years 11 Months	£5.22	£485.81	£0.00	£0.00	£485.81
		<b>Total Full:</b>	<b>£1,291.86</b>	<b>£0.00</b>	<b>£0.00</b>	<b>£1,291.86</b>

  

Lower Age (Years)	Upper Age	Monthly Rate (Reduced)	Registration Payment	Special Needs Payment	Deprivation Category Payment	Total Registration Payment
3	5 Years 11 Months	£0.46	£0.14	£0.00	£0.00	£0.14
6	12 Years 11 Months	£0.81	£4.05	£0.00	£0.00	£4.05
13	17 Years 11 Months	£1.04	£8.35	£0.00	£0.00	£8.35
		<b>Total Reduced:</b>	<b>£12.54</b>	<b>£0.00</b>	<b>£0.00</b>	<b>£12.54</b>

  

<b>Capitation Total</b>	<b>£1,291.86</b>	<b>£0.00</b>	<b>£0.00</b>	<b>£1,291.86</b>
-------------------------	------------------	--------------	--------------	------------------

  

Capitation Adjustments:	£0.00
Additional Payment At 0%:	£0.00
Deprivation Enhancement Payment For Capitation of 97 Registrations At Full Rate of 0.21	£20.37
Deprivation Enhancement Payment For Capitation Registrations At Reduced Rate	£0.00
<b>Total Sum Authorised For Capitation:</b>	<b>£1,312.23</b>

**Total Capitation Authorised for current report.**

Deprivation Enhancement Payment for current report period for full and reduced rate patients. This is automatically calculated by us.

Your eSchedules guidance | Capitation and Continuing Care Payments

The layout for this guidance is based on the portable document format (PDF) report output, and there may be cosmetic differences when viewing the online report.

This is an example of a browser view for illustration only

### My eSchedules reports

Treatment, payment and patient reporting

Your Capitation and Continuing Care Payments report - Paid under the National Health Service (Scotland) Act  
Patient registration counts for the period Jun 2014

List Number 00000  
Name First name Last name

**Continuing Care Summary**

**Age group for Continuing Care patients.**

Lower Age (Years)	Upper Age	Monthly Rate (Full)	Registration Payment	Special Needs Payment	Deprivation Category Payment	Total Registration Payment
18	64 Years 11 Months	£1.00	£998.63	£0.00	£0.00	£998.63
65		£1.28	£324.35	£0.00	£0.00	£324.35
Total Full:			£1,322.98	£0.00	£0.00	£1,322.98

**Total Registration payment for each specific group.**

Lower Age (Years)	Upper Age	Monthly Rate (Reduced)	Registration Payment	Special Needs Payment	Deprivation Category Payment	Total Registration Payment
18	64 Years 11 Months		£0.00	£0.00	£0.00	£25.57
65		£0.26	£11.45	£0.00	£0.00	£11.45
Total Reduced:			£37.02	£0.00	£0.00	£37.02

**Amount paid per patient for specific age group.**

<b>Continuing Care Total</b>			£1,360.00	£0.00	£0.00	£1,360.00
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Your eSchedules guidance | Capitation and Continuing Care Payments

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### My eSchedules reports

Treatment, payment and patient reporting

Your Capitation and Continuing Care Payments report - Paid under the National Health Service (Scotland) Act  
Patient registration counts for the period Jun 2014

List Number 00000  
Name First name Last name

**Continuing Care Summary**

Lower Age (Years)	Upper Age	Monthly Rate (Full)	Registration Payment	Special Needs Payment	Deprivation Category Payment	Total Registration Payment
18	64 Years 11 Months	£1.00	£998.63	£0.00	£0.00	£998.63
65		£1.28	£324.35	£0.00	£0.00	£324.35
		<b>Total Full:</b>	<b>£1,322.98</b>	<b>£0.00</b>	<b>£0.00</b>	<b>£1,322.98</b>

Total payment for patients claimed with special needs for each specific age group.

Lower Age (Years)	Upper Age	Monthly Rate (Reduced)	Registration Payment	Special Needs Payment	Deprivation Category Payment	Total
18	64 Years 11 Months	£0.20	£25.57	£0.00		
65		£0.26	£11.45	£0.00	£0.00	£11.45
		<b>Total Reduced:</b>	<b>£37.02</b>	<b>£0.00</b>	<b>£0.00</b>	<b>£37.02</b>

Deprivation payments for each specific age group for current report.

<b>Continuing Care Total</b>	<b>£1,360.00</b>	<b>£0.00</b>	<b>£0.00</b>	<b>£1,360.00</b>
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## Your eSchedules guidance I Capitation and Continuing Care Payments

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Your Capitation and Continuing Care Payments report - Paid under the National Health Service (Scotland) Act  
Patient registration counts for the period Jun 2014

List Number 00000  
Name First name Last name

**Continuing Care Summary**

Lower Age (Years)	Upper Age	Monthly Rate (Full)	Registration Payment	Special Needs Payment	Deprivation Category Payment	Total Registration Payment
18	64 Years 11 Months	£1.00	£998.63	£0.00	£0.00	£998.63
65		£1.28	£324.35	£0.00	£0.00	£324.35
		<b>Total Full:</b>	<b>£1,322.98</b>	<b>£0.00</b>	<b>£0.00</b>	<b>£1,322.98</b>

  

Lower Age (Years)	Upper Age	Monthly Rate (Reduced)	Registration Payment	Special Needs Payment	Deprivation Category Payment	Total Registration Payment
18	64 Years 11 Months	£0.20	£25.57	£0.00	£0.00	£25.57
65		£0.26	£11.45	£0.00	£0.00	£11.45
		<b>Total Reduced:</b>	<b>£37.02</b>	<b>£0.00</b>	<b>£0.00</b>	<b>£37.02</b>

  

<b>Continuing Care Total</b>	<b>£1,360.00</b>	<b>£0.00</b>	<b>£0.00</b>	<b>£1,360.00</b>
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Continuing Care Adjustments:	£0.00
Additional Payment At 0.3%:	£4.08
Deprivation Enhancement Payment For Continuing Care of 146 Registrations At Full Rate of 0.21	£30.66
Deprivation Enhancement Payment For Continuing Care of 4 Registrations At Reduced Rate of 0.04:	£0.16
<b>Total Sum Authorised For Capitation:</b>	<b>£1,394.90</b>

**Adjustments to Continuing Care payments for current report including any additional payments due.**

**Total Continuing Care payments made for current report including full rate, reduced rate and Special Needs patients.**

## Your eSchedules guidance | Capitation and Continuing Care Payments

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Your Capitation and Continuing Care Payments report - Paid under the National Health Service (Scotland) Act  
Patient registration counts for the period Jun 2014

List Number 00000  
Name First name Last name

**Continuing Care Summary**

Lower Age (Years)	Upper Age	Monthly Rate (Full)	Registration Payment	Special Needs Payment	Deprivation Category Payment	Total Registration Payment
18	64 Years 11 Months	£1.00	£998.63	£0.00	£0.00	£998.63
65		£1.28	£324.35	£0.00	£0.00	£324.35
		<b>Total Full:</b>	<b>£1,322.98</b>	<b>£0.00</b>	<b>£0.00</b>	<b>£1,322.98</b>

  

Lower Age (Years)	Upper Age	Monthly Rate (Reduced)	Registration Payment	Special Needs Payment	Deprivation Category Payment	Total Registration Payment
18	64 Years 11 Months	£0.20	£25.57	£0.00	£0.00	£25.57
65		£0.26	£11.45	£0.00	£0.00	£11.45
		<b>Total Reduced:</b>	<b>£37.02</b>	<b>£0.00</b>	<b>£0.00</b>	<b>£37.02</b>

  

Continuing Care Total	£1,360.00	£0.00	£0.00	£1,360.00
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Continuing Care Adjustments:	£0.00
Additional Payment At 0.3%:	£4.08
Deprivation Enhancement Payment For Continuing Care of 146 Registrations At Full Rate of 0.21	£30.66
Deprivation Enhancement Payment For Continuing Care Of 4 Registrations At Reduced Rate of 0.04:	£0.16
<b>Total Sum Authorised For Capitation:</b>	<b>£1,394.90</b>

**Total Continuing Care Authorised for current report.**

Deprivation Enhancement Payment for current report period for full and reduced rate patients. This is automatically calculated by us.

Your eSchedules guidance | Capitation and Continuing Care Patient Information

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### My eSchedules reports

Treatment, payment and patient reporting

Your Capitation and Continuing Care Patient Information - Paid under the National Health Service (Scotland) Act  
 Patients transferred For The Period Jun 2014

List Number 00000

Name First name Last name

Patient	Patient Sex	Patient D.O.B.	CHI Number	Reg Type	Registration Initial Date	Registration Status Description	Effective Date	
Last name	First name	M	02/01/2001	0000000000	CAP	10/04/2012	Withdrawn - Identified as duplicate	01/10/2014
Last name	First name	F	13/02/1980	0000000000	CON_CARE	04/06/2012	Withdrawn - Moved outside UK	13/10/2014
Last name	First name	M	05/03/2001	0000000000	CAP	07/10/2010	Automatic Transfer	01/10/2014
Last name	First name	F	07/04/1980	0000000000	CON_CARE	04/10/2010	Transferred within the practice	01/10/2014
Last name	First name	M	09/05/2001	0000000000	CAP	04/10/2010	Transferred outwith the practice	29/06/2014
Last name	First name	M	21/06/2001	0000000000	CAP	01/04/2012	Withdrawn - Identified as duplicate	01/08/2014
Last name	First name	F	22/07/1980	0000000000	CON_CARE	19/08/2012	Withdrawn - Moved outside UK	14/04/2014
Last name	First name	M	09/08/2001	0000000000	CAP	14/11/2010	Automatic Transfer	01/07/2014
Last name	First name	F	01/09/1980	0000000000	CON_CARE	21/10/2010	Transferred within the practice	01/04/2014
Last name	First name	M	03/10/2001	0000000000	CAP	01/11/2010	Transferred outwith the practice	30/06/2014

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Your eSchedules guidance I Capitation and Continuing Care Patient Information

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### My eSchedules reports

Treatment, payment and patient reporting

Your Capitation and Continuing Care Patient Information report – Paid under the National Health Service – Patients transferred For The Period Jun 2014

List Number 00000  
Name First name Last name

Patient	Patient Sex	Patient D.O.B.	CHI Number	Reg Type	Registration Initial Date	Registration Status Description	Effective Date	
Last name	First name	M	02/01/2001	0000000000	CAP	10/04/2012	Withdrawn - Identified as duplicate	01/10/2014
Last name	First name	F	13/02/1980	0000000000	CON_CARE	04/06/2012	Withdrawn - Moved outside UK	13/10/2014
Last name	First name	M	05/03/2001	0000000000	CAP	07/10/2010	Automatic Transfer	01/10/2014
Last name	First name	F	07/04/1980	0000000000	CON_CARE	04/10/2010	Transferred within the practice	01/10/2014
Last name	First name	M	09/05/2001	0000000000	CAP	04/10/2010	Transferred outwith the practice	29/06/2014
Last name	First name	M	21/06/2001	0000000000	CAP	01/04/2012	Withdrawn - Identified as duplicate	01/08/2014
Last name	First name	F	22/07/1980	0000000000	CON_CARE	19/08/2012	Withdrawn - Moved outside UK	14/04/2014
Last name	First name	M	09/08/2001	0000000000	CAP	14/11/2010	Automatic Transfer	01/07/2014
Last name	First name	F	01/09/1980	0000000000	CON_CARE	21/10/2010	Transferred within the practice	01/04/2014
Last name	First name	M	03/10/2001	0000000000	CAP	01/11/2010	Transferred outwith the practice	30/06/2014

Registration Status of patient, which includes:

- Automatic Transfer (change from Capitation to Continuing Care Registration)
- Transferred within practice
- Transferred out with practice
- Withdrawn
- Due to Qualify for Reduced Payments
- In Receipt of Reduced Rates Payments

Registration Type showing whether this is a Capitation or Continuing Care patient, and the start date of registration.

Community Health Index (CHI) number. Please note some patients may not have a CHI number allocated at this time.

Page 1/2

Effective date of registration.

## Your eSchedules guidance | Capitation and Continuing Care Patient Information

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### My eSchedules reports

Treatment, payment and patient reporting

Your Capitation and Continuing Care Patient Information report - Paid under the National Health Service (Scotland) Act  
Patients transferred For The Period Jun 2014

**List Number 00000**  
**Name First name Last name**

Patient		Patient Sex	Patient D.O.B.	CHI Number	Reg Type	Registration Initial Date	Registration Status Description	Effective Date
Last name	First name	M	02/01/2001	0000000000	CAP	10/04/2012	Withdrawn - Identified as duplicate	01/10/2014
Last name	First name	F	13/02/1980	0000000000	CON_CARE	04/06/2012	Withdrawn - Moved outside UK	13/10/2014

**Linked Patients (Patient Details on Claim Differ from patient Master Details as shown in the current schedule)**

Patient		Patient Sex	Patient D.O.B.	CHI Number	Claim Type	Claim Surname	Claim Forename	Claim Sex	Claim D.O.B.	Claim CHI
BLOGGS	JO	M	02/01/2001	0000000000	CON / NP	BLOGGS	JOE	M	02/01/2001	0000000000
BLOGS	JOANNE	F	13/02/1980	0000000000	CON / RO	BLOGGS	JOANNE	F	13/02/1980	0000000000

Master details we hold for patient's surname and forename.

Master details we hold for patient's sex and date of birth.

CHI number. Please note some patients may not have a CHI number allocated at this time.

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Your eSchedules guidance | Capitation and Continuing Care Patient Information

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### My eSchedules reports

Treatment, payment and patient reporting

Your Capitation and Continuing Care Patient Information report - Paid under the National Health Service (Scotland) Act  
Patients transferred For The Period Jun 2014

List Number 00000  
Name First name Last name

Patient		Patient Sex	Patient D.O.B.	CHI Number	Reg Type	Registration Initial Date	Registration Status
Last name	First name	M	02/01/2001	0000000000	CAP		Identified as duplicate 01/10/2014
Last name	First name	F	13/02/1980	0000000000	CON_C		Registered outside UK 13/10/2014

Linked Patients (Patient Details on Claim Differ from patient Masterfile) (Schedule)

Patient		Patient Sex	Patient D.O.B.	CHI Number	Claim Type	Claim Surname	Claim Forename	Claim Sex	Claim D.O.B.	Claim CHI
BLOGGS	JO	M	02/01/2001	0000000000	CON / NP	BLOGGS	JOE	M	02/01/2001	0000000000
BLOGS	JOANNE	F	13/02/1980	0000000000	CON / RO	BLOGGS	JOANNE	F	13/02/1980	0000000000

Registration Type, showing whether this is a Capitation (CAP) or Continuing Care (CON) patient:  
 NP New Patient  
 RO Registration Roll-on  
 PR Previous Roll-On (Registration within the practice)  
 OCC Occasional

CHI number. Please note patients may not have a CHI number allocated at this time.

Linked details from most recent claim submitted for patient's surname and forename.

Linked details from most recent claim submitted for patient's sex and date of birth.

## Your eSchedules guidance I Item of Service (IOS) Detail Summary report

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### My eSchedules reports

Treatment, payment and patient reporting

Your Item of Service (IOS) Detail Summary report - Paid under the National Health Service (Scotland) Act  
Payments we have made on 30/06/2014

**List Number 00000**  
**Name First name Last name**

Item of Service by List Number			Total Sum Authorised	Total Patient Charge	Total DSS Remission	Total Award Amount	Total Referrals Claimed	Total Referrals Authorised	Deprivation item of service amount
	List Number	Name							
<a href="#">Click for Detailed Report</a>	XXXXX	Joe Bloggs	£5,317.81	£2,617.84	£590.12	£46.98		£0.00	£66.16

Details of List Number and practitioner for current report.

Detailed breakdown report for Item of Service.

Click the hyperlink to view report.

Page 1/1

Your eSchedules guidance | Item of Service (IOS) Detail Summary report

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### My eSchedules reports

Treatment, payment and patient reporting

Your Item of Service (IOS) Detail Summary report - Paid under the National Health Service (Scotland) Act  
 Payments we have made on 30/06/2014

List Number 00000  
 Name First name Last name

Item of Service by List Number			Total Sum Authorised	Total Patient Charge	Total DSS Remission	Total Award Amount	Total Referrals Claimed	Total Referrals Authorised	Deprivation item of service amount
<a href="#">Click for Detailed Report</a>	XXXXX	Joe Bloggs	£5,317.81	£2,617.84	£590.12	£46.98		£0.00	£66.16

Annotations:

- Total patient charges paid for period selected.
- Total award for uplift in fees for claims in current period selected.
- Total Item of Service paid for period selected.
- Total Department for Work and Pensions remission (exemptions) paid for period selected.

Page 1/1

Your eSchedules guidance | Item of Service (IOS) Detail Summary report

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### My eSchedules reports

Treatment, payment and patient reporting

Your Item of Service (IOS) Detail Summary report - Paid under the National Health Service (Scotland) Act  
Payments we have made on 30/06/2014

List Number 00000  
Name First name Last name

Item of Service by List Number

	List Number	Name	Total Sum Authorised	Total Patient Charge	Total DSS Remission	Total Award Amount	Total Referrals Claimed	Total Referrals Authorised	Deprivation item of service amount
<a href="#">Click for Detailed Report</a>	XXXXX	Joe Bloggs	£5,317.81	£2,617.84	£590.12	£46.98		£0.00	£66.16

The total number of referrals you have claimed, and the total number of referrals we have authorised for the period selected.

Total amount of Deprivation Item of Service paid for the period selected.

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Your eSchedules guidance | Item of Service (IOS) Detailed Breakdown

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### My eSchedules reports

Treatment, payment and patient reporting

Your Item of Service (IOS) Detailed Breakdown report - Paid under the National Health Service (Scotland) Act  
Payment for the period Jul 2014

**List Number 00000**  
**Name First name Last name**

Patient Name: Joe Bloggs		Sex M	Date of Birth 01/01/1980				
Case ID	Patient ID	CHI	Postcode	SIMD	Claim Type	Acceptance Date	
000000000000	000000	0000000000	0000 000		Continuing Care	19/06/2014	
Sum Authorised	Patient Charge	DSS Remission	% Award	Award Amount	Referrals Claimed	Referrals Authorised	Dep IOS Amount
£36.37	£0.00	£0.00	0	£0.00		£0.00	£0.00

  

Patient Name Joanne Bloggs		Sex F	Date of Birth 01/02/1980				
Case ID	Patient ID	CHI	Postcode	SIMD	Claim Type	Acceptance Date	
000000000000	000000	0000000000	0000 000		Continuing Care	19/06/2014	
Sum Authorised	Patient Charge	DSS Remission	% Award	Award Amount	Referrals Claimed	Referrals Authorised	Dep IOS Amount
£21.70	£10.60	£0.00	0	£0.00		£0.00	£0.00

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Patient details.

Your eSchedules guidance | Item of Service (IOS) Detailed Breakdown

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### My eSchedules reports

Treatment, payment and patient reporting

Your Item of Service (IOS) Detailed Breakdown report - Paid under the National Health Service (Scotland) Act  
Payment for the period Jul 2014

List Number 00000  
Name First name Last name

Patient Name **Joe Bloggs**

Scottish Index of Multiple Deprivation (SIMD) area for the patient.

Acceptance date for the claim.

Case ID	Patient ID	CHI	Postcode	SIMD	Claim Type	Acceptance Date
000000000000	000000	0000000000	0000 000		PDS NON-GDS	19/06/2014
Sum Authorised	Patient Charge	DSS Remission	% Award	Award Amount	Referrals Claimed	IOS Amount
£36.37	£0.00	£0.00	0	£0.00		£0.00

The claim type shows if the claim is PDS NON-GDS, or whether the patient is under a Capitation or Continuing Care agreement.

Patient Name **Joanne Bloggs**      Sex **F**      Date of Birth **01/02/1980**

Case ID	Patient ID	CHI	Postcode	SIMD	Claim Type	Acceptance Date	
000000000000	000000	0000000000	0000 000		PDS NON-GDS	19/06/2014	
Sum Authorised	Patient Charge	DSS Remission	% Award	Award Amount	Referrals Claimed	Referrals Authorised	Dep IOS Amount
£21.70	£10.60	£0.00	0	£0.00		£0.00	£0.00



Your eSchedules guidance | Item of Service (IOS) Detailed Breakdown

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### My eSchedules reports

Treatment, payment and patient reporting

Your Item of Service (IOS) Detailed Breakdown report - Paid under the National Health Service (Scotland) Act  
Payment for the period Jul 2014

List Number 00000  
Name First name Last name

Patient Name Joe Bloggs Date of Birth 01/01/1980

Case ID	Postcode	SIMD	Claim Type	Acceptance Date
00000000	0000 000		Continuing Care	19/06/2014

Sum Authorised	Patient Charge	DSS Remission	% Award	Award Amount	Referrals Claimed	Referrals Authorised	Dep IOS Amount
£36.37	£0.00	£0.00	0	£0.00		£0.00	£0.00

Sum authorised for selected claim.

Patient charge and/or Department for Work and Pensions Remission for selected claim.

% Award (if applicable) for uplift of fees for selected claim.

Patient Name Joe Bloggs Date of Birth 01/02/1980

Case ID	Patient ID	Postcode	SIMD	Claim Type	Acceptance Date
000000000000	000000	0000000000	0000 000	Continuing Care	19/06/2014

Sum Authorised	Patient Charge	DSS Remission	% Award	Award Amount	Referrals Claimed	Referrals Authorised	Dep IOS Amount
£21.70	£10.60	£0.00	0	£0.00		£0.00	£0.00

Your eSchedules guidance | Item of Service (IOS) Detailed Breakdown

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### My eSchedules reports

Treatment, payment and patient reporting

Your Item of Service (IOS) Detailed Breakdown report - Paid under the National Health Service (Scotland) Act  
Payment for the period Jul 2014

List Number 00000  
Name First name Last name

**Patient Name Joe Bloggs**      Sex M      Date of Birth 01/02/1980

Case ID	Patient ID	CHI	Postcode	Referrals claimed on selected claim.	Claim Type		
000000000000	000000	00000000000	0000 000		Continuing Care		
Sum Authorised	Patient Charge	DSS Remission	% Award	Award Amount	Referrals Claimed	Referrals Authorised	Dep IOS Amount
£36.37	£0.00	£0.00	0	£0.00		£0.00	£0.00

**Patient Name Joanne Bloggs**      Sex F      Date of Birth 01/02/1980

Case ID	Patient ID	CHI	Postcode	SIMD	Claim Type	Acceptance Date	
000000000000	000000	00000000000	0000 000		Continuing Care	19/06/2014	
Sum Authorised	Patient Charge	DSS Remission	% Award	Award Amount	Referrals Claimed	Referrals Authorised	Dep IOS Amount
£21.70	£10.60	£0.00	0	£0.00		£0.00	£0.00

Deprivation Item of Service for claim selected. This is automatically calculated from the patient's postcode provided on the claim.

Total amount claimed for selected claim.

Total sum authorised for selected claim.

Your eSchedules guidance | Item of Service (IOS) Detailed Breakdown

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### My eSchedules reports

Treatment, payment and patient reporting

Your Item of Service (IOS) Detailed Breakdown report - Paid under the National Health Service (Scotland) Act  
Payment for the period Jul 2014

List Number 00000  
Name First name Last name

**Patient Name Joe Bloggs**      **Sex M**      **Date of Birth 01/01/1980**

Case ID	Patient ID	CHI	Postcode	SIMD	Claim Type	Acceptance Date
000000000000	000000	0000000000	0000 000		Continuing Care	19/06/2014

Sum Authorised	Patient Charge	DSS Remission	% Award	Award Amount	Referrals Claimed	Referrals Authorised	Dep IOS Amount
£36.37	£0.00	£0.00	0	£0.00		£0.00	£0.00

**Patient Name Joanne Bloggs**      **Sex F**      **Date of Birth 01/02/1980**

Case ID	Patient ID	CHI	Postcode	SIMD	Claim Type	Acceptance Date
000000000000	000000	0000000000	0000 000		Continuing Care	19/06/2014

Sum Authorised	Patient Charge	DSS Remission	% Award	Award Amount	Referrals Claimed	Referrals Authorised	Dep IOS Amount
£21.70	£10.60	£0.00	0	£0.00		£0.00	£0.00

Patient details.

Your eSchedules guidance I Item of Service (IOS) Detailed Breakdown

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### My eSchedules reports

Treatment, payment and patient reporting

Your Item of Service (IOS) Detailed Breakdown report - Paid under the National Health Service (Scotland) Act  
Payment for the period Jul 2014

List Number 00000  
Name First name Last name

Patient Name Joe Bloggs Date of Birth 01/01/1980

Case ID	Postcode	SIMD	Claim Type	Acceptance Date
000000000000	0000 000		Continuing Care	19/06/2014

Sum Authorised	Patient Charge	DSS Remission	% Award	Award Amount	Referrals Claimed	Referrals Authorised	Dep IOS Amount
£36.37	£0.00	£0.00	0	£0.00		£0.00	£0.00

Sum authorised for selected claim.

Patient charge and/or Department for Work and Pensions Remission for selected claim.

% Award (if applicable) for uplift of fees for selected claim.

Patient Name Joe Bloggs Date of Birth 01/02/1980

Case ID	Patient ID	Postcode	SIMD	Claim Type	Acceptance Date
000000000000	000000	000000000	0000 000	Continuing Care	19/06/2014

Sum Authorised	Patient Charge	DSS Remission	% Award	Award Amount	Referrals Claimed	Referrals Authorised	Dep IOS Amount
£21.70	£10.60	£0.00	0	£0.00		£0.00	£0.00

Your eSchedules guidance I Item of Service (IOS) Detailed Breakdown

The layout for this guidance is based on the portable document format (PDF) report output, and there may be cosmetic differences when viewing the online report.

This is an example of a browser view for illustration only

### My eSchedules reports

Treatment, payment and patient reporting

Your Item of Service (IOS) Detailed Breakdown report - Paid under the National Health Service (Scotland) Act  
Payment for the period Jul 2014

List Number 00000  
Name First name Last name

**Patient Name Joe Bloggs**      Sex M      Date of Birth 01/02/1980

Case ID	Patient ID	CHI	Postcode	Referrals claimed on selected claim.	Claim Type	Continuing Care	Dep IOS Amount
000000000000	000000	0000000000	0000 000				
Sum Authorised	Patient Charge	DSS Remission	% Award	Award Amount	Referrals Claimed	Referrals Authorised	Dep IOS Amount
£36.37	£0.00	£0.00	0	£0.00		£0.00	£0.00

**Patient Name Joanne Bloggs**      Sex F      Date of Birth 01/02/1980

Case ID	Patient ID	CHI	Postcode	SIMD	Claim Type	Acceptance Date	Dep IOS Amount
000000000000	000000	0000000000	0000 000		Continuing Care	19/06/2014	
Sum Authorised	Patient Charge	DSS Remission	% Award	Award Amount	Referrals Claimed	Referrals Authorised	Dep IOS Amount
£21.70	£10.60	£0.00	0	£0.00		£0.00	£0.00

Deprivation Item of Service for claim selected. This is automatically calculated from the patient's postcode provided on the claim.

Referrals claimed on selected claim.

Total amount claimed for selected claim.

Total sum authorised for selected claim.

Your eSchedules guidance | Adjustment to Claims

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### My eSchedules reports

Treatment, payment and patient reporting

Your Adjustment to Claims report - Paid under the National Health Service (Scotland) Act  
Adjustments for the period Jun 2014

List Number 00000  
Name First name Last name

Case ID	Seq Number	Patient ID	CHI Number	Surname	Forename	Sex	Patient D.O.B	Acceptance Date	Total claimed	Total authorised	Patient Contribution	Patient Charges Authorised
xxxxxxxxxxxx	0	000000	0000000000	Bloggs	Joanne	F	01/01/1970	04/02/2013	£24.90	£20.85	£10.20	£10.20
												Dentist Fee Value
												£12.75
												£8.10

Case ID and patient details.

**Sequence number**  
 '0' shows the first payment of a claim. Where the sequence number is higher than zero, this shows that an adjustment has been completed and shows extra money that has been paid for this adjustment. Please note that the patient contribution/amount claimed and patient contribution authorised/amount authorised will always show as different on adjusted claims.

Practitioners are required to check items not authorised for payment against information provided for previous claims paid or to check provisos in the Statement of Dental Remuneration for items not authorised for payment.  
 Any amendments to claims are required to be sent on a dental 283 paid claim adjustment form only.

Your eSchedules guidance | Adjustment to Claims

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This is an example of a browser view for illustration only

### My eSchedules reports

Treatment, payment and patient reporting

Your Adjustment to Claims report - Paid under the National Health Service (Scotland) Act  
Adjustments for the period Jun 2014

List Number 00000  
Name First name Last name

Case ID	Seq Number	Patient ID	CHI Number	Surname	Forename	Sex	Patient D.O.B	Acceptance Date	Total claimed	Total authorised	Patient Contribution	Patient Charges Authorised
xxxxxxxxxxxx	0	000000	0000000000	Bloggs	Joanne	F	01/01/1970	04/02/2013	£24.90	£20.85	£10.20	£10.20
	Item code	Fee code	Adjustment Text									Dentist Fee Value
	10(A)	100101	Authorised for payment									
	1(A)	010101	Authorised for payment									
	1(B)	011101	Time barred against 1(A) for claim 000000000000 dated 15/11/2011. Replaced by 010101. Same dentist rule.									
	Amount claimed and amount											

Practitioners are required to check items not authorised for payment against information provided for previous claims paid or to check provisos in the Statement of Dental Remuneration for items not authorised for payment.

Any amendments to claims are required to be sent on a dental 283 paid claim adjustment form only.

**Annotations:**

- Date of acceptance for claim.
- Patient Contribution from claim submitted for payment.
- The total amount entered on your claim.
- The total amount we authorised.
- Patient charges authorised for current claim, this value may be different to Patient Contribution depending on items that have not been authorised for payment.

Your eSchedules guidance | Adjustment to Claims

The layout for this guidance is based on the portable document format (PDF) report output, and there may be cosmetic differences when viewing the online report.

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### My eSchedules reports

Treatment, payment and patient reporting

Your Adjustment to Claims report - Paid under the National Health Service (Scotland) Act  
Adjustments for the period Jun 2014

List Number 00000  
Name First name Last name

Items of Service that have not been authorised for payment.

For any Item of Service that has not been authorised for payment a reason is provided giving details of why items have been deleted or replaced.

In example provided details are shown of claim ID and date of claim that 1B has failed against and advises this has been replaced with 1A exam code due to time bar and same dentist rule.

Case ID	Seq Number	Patient ID	CHI Number	Item Code	Fee Code	Adjustment Text	Amount	Patient Charges Authorised
xxxxxxxxxxx	0	000000	0000000000				£10.20	£10.20
				10(A)	100101	Authorised for payment		£12.75
				1(A)	010101	Authorised for payment		£8.10
				1(B)	011101	Time barred against 1(A) for claim 000000000000 dated 15/11/2011. Replaced by 010101. Same dentist rule.		

Items of Service Item Code and Fee Code

Practitioners are required to check items not authorised for payment against information provided for previous claims paid or to check provisos in the Statement of Dental Remuneration for items not authorised for payment.

Any amendments to claims are required to be sent on a dental 283 paid claim adjustment form only.



Your eSchedules guidance | Adjustment to Claims

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### My eSchedules reports

Treatment, payment and patient reporting

Your Adjustment to Claims report - Paid under the National Health Service (Scotland) Act  
Adjustments for the period Jun 2014

List Number 00000  
Name First name Last name

Case ID	Seq Number	Patient ID	CHI Number	Surname	Forename	Sex	Patient D.O.B	Acceptance Date	Total claimed	Total authorised	Patient Contribution	Patient Charges Authorised
xxxxxxxxxxxx	0	000000	0000000000	Bloggs	Joanne	F	01/01/1970	04/02/2013	£24.90	£20.85	£10.20	£10.20
	Item code	Fee code	Adjustment Text									Dentist Fee Value
	10(A)	100101	Authorised for payment									£12.75
	1(A)	010101	Authorised for payment									£8.10
	1(B)	011101	Time barred against 1(A) for claim 000000000000 dated 15/11/2011. Replaced by 010101. Same dentist rule.									
	Amount claimed and amount											

Practitioners are required to check items not authorised for payment against information provided for previous claims paid or to check provisos in the Statement of Dental Remuneration for items not authorised for payment.

Any amendments to claims are required to be sent on a dental 283 paid claim adjustment form only.

Item of Service and value of Item of Service that has been authorised for payment.

Your eSchedules guidance | Registration Summary

The layout for this guidance is based on the portable document format (PDF) report output, and there may be cosmetic differences when viewing the online report.

This is an example of a browser view for illustration only

### My eSchedules reports

Treatment, payment and patient reporting

Your Registration Summary report for [Practice Name] Health

Patient registration counts for the [Period]

List Number 00000

List No	Name	Full Rate Capitation	Full Rate Continuing Care	Reduced Rate Capitation	Reduced Rate Continuing Care	Total Registered Patients	Total Capitation	Total Continuing Care
XXXXX	MR JOE BLOGGS	307	1,395	14	168	1,527	321	1,563

Annotations:

- Total Capitation patients receiving full rate payment.
- Total Capitation patients receiving reduced rate payment.
- List Number for report generated.
- Total Continuing Care patients receiving full rate payment.
- Total Continuing Care patients receiving reduced rate payment.

Page 1/1

Your eSchedules guidance I Registration Summary

The layout for this guidance is based on the portable document format (PDF) report output, and there may be cosmetic differences when viewing the online report.

← → 🏠
This is an example of a browser view for illustration only

### My eSchedules reports

Treatment, payment and patient reporting

Your Registration Summary report - Paid under the National Health Service (Scotland) Act  
Patient registration counts for the period 2014 Jun

**List Number 00000**

**Name First name Last name**

List No	Name	Full Rate Capitation	Full Rate Continuing Care	Reduced Rate Capitation	Reduced Rate Continuing Care	Total Registered Patients	Total Capitation	Total Continuing Care
XXXXX	MR JOE BLOGGS	307	1,395	14	168	1,527	321	1,563

Total of combined Capitation and Continuing Care patients registered on specified list number for period selected.

Total Number of Capitation and Continuing Care patients, for full and reduced rates combined.

Page 1/1

## Your eSchedules guidance I Registration Detail

The layout for this guidance is based on the portable document format (PDF) report output, and there may be cosmetic differences when viewing the online report.

← → 🏠
This is an example of a browser view for illustration only

### My eSchedules reports

Treatment, payment and patient reporting

Your Registration Detail report - Paid under the National Health Service (Scotland) Act  
Patient registration counts for the period 2014 Jun

**List Number 00000**  
**Name First name Last name**

Patient ID	Surname	Forename	CHI	Date of Birth	Sex	Postcode	Registration Type	Initial Registration Date	Period Start Date	Due to Reduce Date
0000	Bloggs	Joe	0000000000	01/01/1978	M	EHO OZZ	Care	28/11/2012	28/11/2012	28/11/2015
0000	Bloggs	Joseph	0000000000	02/02/2000	M	EHO OZZ	Cap	22/10/2012	28/11/2012	28/11/2015
0000	Bloggs	Joanne	0000000000	02/02/2000	F	EHO OZZ	Cap	22/10/2012	22/10/2012	22/08/2015
0000	Bloggs	Josephine	0000000000	03/03/1979	M	EHO OZZ	Care	22/10/2012	13/02/2013	13/02/2015
00000	Nother	Anthony	0000000000	04/04/1962	F	EHO OAA	Care	22/10/2012	22/10/2012	22/10/2015
00000	Anon	Margaret	0000000000	05/05/1970	F	EHO OAA	Care	22/10/2012	22/10/2012	09/02/2015
00000	Anon	John	0000000000	06/06/1962	M	EHO OAA	Care	22/10/2012	07/11/2012	07/11/2015

The patient ID is the number we allocate for each patient.

Registration Type shows whether patient is a Capitation or Continuing Care patient.

Period start date shows date of last claim sent and processed.

Your eSchedules guidance I Registration Detail

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### My eSchedules reports

Treatment, payment and patient reporting

Your Registration Detail report - Paid under the National Health Service (Scotland) Act  
Patient registration counts for the period 2014 Jun

List Number 00000  
Name First name Last name

Community Health Index (CHI) number for patient. Please note that not all patients have had CHI numbers allocated. This will be updated electronically on a monthly basis through the Electronic Data Interchange (EDI) system.

Patient ID	Surname	Forename	CHI	Date of Birth	Sex	Postcode	Registration Type	Initial Registration Date	Period Start Date	Due to Reduce Date
0000	Bloggs	Joe	0000000000	01/01/1978	M	EHO OZZ	Care	28/11/2012	28/11/2012	28/11/2015
0000	Bloggs	Joseph	0000000000	02/02/2000	M	EHO OZZ	Cap	22/10/2012	28/11/2012	28/11/2015
0000	Bloggs	Joanne	0000000000	02/02/2000	F	EHO OZZ	Cap	22/10/2012	22/10/2012	22/08/2015
0000	Bloggs	Josephine	0000000000	03/03/1979	M	EHO OZZ	Care	22/10/2012	13/02/2013	13/02/2015
00000	Nother	Anthony	0000000000	04/04/1962	F	EHO OAA	Care	22/10/2012	22/10/2012	22/10/2015
00000	Anon	Margaret	0000000000	05/05/1970	F	EHO OAA	Care	22/10/2012	22/10/2012	09/02/2015
00000	Anon	John	0000000000	06/06/1962	M	EHO OAA	Care	22/10/2012	07/11/2012	07/11/2015

Patient detail information including postcode. Please note that full patient addresses are not reported on registration lists, only postcode information is captured.

Initial registration shows when the patient was first registered to this dentist.

Shows when the patient is due to qualify for reduced payments. For instance if the patient has not been seen in the last 3 years.

## Your eSchedules guidance I Superannuation Report

The layout for this guidance is based on the portable document format (PDF) report output, and there may be cosmetic differences when viewing the online report.

This is an example of a browser view for illustration only

### My eSchedules reports

Treatment, payment and patient reporting

Your Superannuation report - Paid under the NHS Superannuation Scheme (Scotland) Act  
 Payment made for Financial Year 2014/2015

Name First name Last name  
 List Number 00000

Payment schedule month.

List number and name of dentist.

Month	Rates Applied (%)		Line 42	Line 46	Line 47	Line 48	Line 48	Line 48	Line 49	Line 50	Line 18	Line 22
	Practitioner	Assistant	Approved Remuneration of Assistants	Remuneration Used For Calculation	Practitioner's Superannuation Arrears	Practitioner's Superannuation Current	Assistant's Superannuation Arrears	Assistant's Superannuation Current	NHS Board Contribution Principal	NHS Board Contribution Assistant	Additional Pension	Additional Voluntary Contribution
Mar-14	8	0	0.00	3922.04	0.00	364.75	0.00	0.00	529.48	0.00	0.00	0.00
Apr-14	8	0	0.00	3368.28	0.00	313.25	0.00	0.00	454.72	0.00	0.00	0.00
Jun-14	9.3	0	0.00	2476.51	0.00	230.32	0.00	0.00	334.33	0.00	0.00	0.00

Payment month.

Your eSchedules guidance I Superannuation Report

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### My eSchedules reports

Treatment, payment and patient reporting

Your Superannuation report - Paid under the National Health Service (Scotland) Act  
Payment made for Financial Year 2014/2015

Name First name Last name  
List Number 00000

Month	Rates Applied (%)		Line 42	Line 46	Line 47	Line 48	Line 48	Line 48	Line 49	Line 50	Line 18	Line 22
	Practitioner	Assistant	Approved Remuneration of Assistants	Remuneration Used For Calculation	Practitioner's Superannuation Arrears	Practitioner's Superannuation Current	Assistant's Superannuation Arrears	Assistant's Superannuation Current	NHS Board Contribution Principal	NHS Board Contribution Assistant	Additional Pension	Additional Voluntary Contribution
Mar-14	8	0	0.00	3922.04	0.00	364.75	0.00	0.00	529.48	0.00	0.00	0.00
Apr-14	8	0	0.00	3368.28	0.00	313.25	0.00	0.00	454.72	0.00	0.00	0.00
Jun-14	9.3	0	0.00	2476.51	0.00	230.32	0.00	0.00	334.33	0.00	0.00	0.00

Superannuation percentage for practitioner and assistant (if applicable) for month shown. **Please note** this percentage will change depending on superannuable earnings for respective month.

Details of remuneration amount used for calculation.  
Line 46 = Line 40 minus (sum of Line 43, Line 44 and Line 45).

Information on how much annual salary has been reported to us for assistants.

Your eSchedules guidance | Superannuation Report

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### My eSchedules reports

Treatment, payment and patient reporting

Your Superannuation report - Paid under the National Health Service (Scotland) Act 1978  
 Payment made for Financial Year 2014/2015

Name First name Last name  
 List Number 00000

Arrears payment paid by assistant - arrears are calculated on a monthly basis based on any change in percentage rates applied.

Current payment paid by assistant - current payments are calculated on a monthly basis based on any change in percentage rates applied.

Month	Rates Applied (%)		Line 42	Line 46	Line 47	Line 48	Line 48	Line 48	Line 49	Line 50	Line 18	Line 22
	Practitioner	Assistant	Approved Remuneration of Assistants	Remuneration Used For Calculation	Practitioner's Superannuation Arrears	Practitioner's Superannuation Current	Assistant's Superannuation Arrears	Assistant's Superannuation Current	NHS Board Contribution Principal	NHS Board Contribution Assistant	Additional Pension	Additional Voluntary Contribution
Mar-14	8	0	0.00	3922.04	0.00	364.75	0.00	0.00	529.48	0.00	0.00	0.00
Apr-14	8	0	0.00	3368.28	0.00	313.25	0.00	0.00	454.72	0.00	0.00	0.00
Jun-14	9.3	0	0.00	2476.51	0.00	230.32	0.00	0.00	334.33	0.00	0.00	0.00

Arrears payment paid by practitioner - arrears are calculated on a monthly basis based on any change in percentage rates applied.

Current payment paid by practitioner - current payments are calculated on a monthly basis based on any change in percentage rates applied.



## Your eSchedules guidance | Superannuation Report

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### My eSchedules reports

Treatment, payment and patient reporting

Your Superannuation report - Paid under the National Health Service (Scotland) Act  
Payment made for Financial Year 2014/2015

Name First name Last name  
List Number 00000

Additional pension paid through a third party, for example Standard Life.

Amount of any additional pension contributions as advised by Scottish Public Pensions Agency.

Month	Rates Applied (%)		Line 42	Line 46	Line 47	Line 48	Line 48	Line 48	Line 49	Line 50	Line 18	Line 22
	Practitioner	Assistant	Approved Remuneration of Assistants	Remuneration Used For Calculation	Practitioner's Superannuation	Practitioner's Superannuation	Assistant's Superannuation	Assistant's Superannuation	NHS Board Contribution	NHS Board Contribution	Additional Pension	Additional Voluntary Contribution
Mar-14	8	0	0.00	3922.04	0.00	364.75	0.00	0.00	529.48	0.00	0.00	0.00
Apr-14	8	0	0.00	3368.28	0.00	313.25	0.00	0.00	454.72	0.00	0.00	0.00
Jun-14	9.3	0	0.00	2476.51	0.00	230.32	0.00	0.00	334.33	0.00	0.00	0.00

Contribution made by NHS Board towards Superannuation for principal and assistants.



# General Dentist NHS Commitment report



## My eSchedule Reports

Treatment, payment and patient reporting

NHS Commitment Practice Calculation Report for 2016 Quarter 4 - Paid under the National Health Service (Scotland) Act

MR JOE BLOGGS

DENTAL PRACTICE

5 CROWN STREET

EDINBURGH

EH1 1AB

6 Location 5040 7 Run Date 17/03/2017  
4 Practice Start Date 18/04/2011 8 Calculation End Date 28/02/2017  
5 Target Registrations 1006 9 Number of Counted Dentists 4.0

Dentist	1 New Dentist Deemed Committed	2 WTE	List Number	6	Exempt		Number of Patients		10 Total	11 Gross Income
					Adult	Child	Remitted	Fee Paying		
MS JOANNE BLOGGS	N		12345		3	38	33	26	100	4914.73
					3	38	33	26	100	4914.73
MRS JANE BLOGGS	N		67890		0	0	0	0	0	10014.07
					0	0	0	0	0	10014.07
MR JOE BLOGGS	N		54321		73	558	489	758	1878	124352.56
					73	558	489	758	1878	124352.56





## My eSchedule Reports

Treatment, payment and patient reporting

NHS Commitment Practice Calculation Report for 2016 Quarter 4 - Paid under the National Health Service (Scotland) Act

Dentist	New Dentist Deemed Committed	WTE	List Number	Exempt		Number of Patients		Total	Gross Income
				Adult	Child	Remitted	Fee Paying		
MR JIM BLOGGS	N		09876	22	151	129	136	438	19429.48
				22	151	129	136	500*	50000*
<b>12 Practice Total Actual</b>				<b>98</b>	<b>747</b>	<b>651</b>	<b>920</b>	<b>2416</b>	<b>158710.64</b>
<b>13 Practice Total Uplifted</b>							<b>920</b>	<b>2478</b>	<b>189281.36</b>
<b>14 Practice Average</b>							<b>230</b>	<b>620</b>	<b>47320.34</b>
<b>15</b> Secondary Committed: The practice is not NHS Committed for this quarter, but meets the Secondary Commitment criteria.									

\* These dentists have had their figures increased to meet the minimum criteria as defined in the SDR.

- 1 Informs you if a dentist in your practice has had their figures increased to 'deem' them as Committed for the quarter.
- 2 Whole Time Equivalent.
- 3 Your location code is a unique identifier for your practice.
- 4 The practice start date is required for new practices in designated areas who are deemed committed.
- 5 Your target registrations are the baseline target that your practice is expected to meet.





- 6 This area details a breakdown of the number of exempt, remitted and fee paying capitation and continuing care patients you have registered at your practice.
- 7 The date the calculation is run.
- 8 This is the last day in the quarter being reported.
- 9 This is the total number of counted dentists in your practice. We include both full time and part-time dentists.
- 10 Total number of patients registered under each list number.
- 11 Practitioner's gross income.
- 12 Practice Total Actual - Actual number of patients registered at your practice.
- 13 Practice Total Uplifted - This line will report if a list number in your practice has had their numbers artificially increased to consider them as committed.
- 14 Practice Average - Average number of fee paying patients registered at your practice and the average gross income. This is the data used in determining if your practice meets the criteria for gaining NHS Commitment status as set out by the Scottish Government.
- 15 Your NHS Committed status for this quarter.





# Orthodontic NHS commitment report



## My eSchedule Reports

Treatment, payment and patient reporting

NHS Commitment Practice Calculation Report for 2016 Quarter 4 - Paid under the National Health Service (Scotland) Act

MR JOE BLOGGS  
DENTAL PRACTICE  
5 CROWN STREET  
EDINBURGH  
EH1 1AB

3 Location 5251  
6 Run Date 17/03/2017  
4 Practice Start Date 04/11/2013  
7 Calculation End Date 28/02/2017  
8 Number of Counted Dentists 1.1

Dentist	1 New Dentist Deemed Committed	2 WTE	5 List Number	Number of		9 Gross Income
				Exam 1 (e) Claims	Referral Claims	
MS JOANNE BLOGGS	N	0.4	12345	52	225	52885.72
				52	225	52885.72
MRS JANE BLOGGS	N	0.7	67890	138	1841	165291.44
				138	1841	165291.44
<b>10 Practice Total Actual</b>				<b>190</b>	<b>1866</b>	<b>218177.16</b>
<b>11 Practice Total Uplifted</b>				<b>190</b>	<b>1866</b>	<b>218177.16</b>
<b>12 Practice Average</b>				<b>173</b>	<b>1896</b>	<b>198342.87</b>





## My eSchedule Reports

Treatment, payment and patient reporting

NHS Commitment Practice Calculation Report for 2016 Quarter 4 - Paid under the National Health Service (Scotland) Act

Dentist	New Dentist Deemed Committed	WTE	List Number	Number of		
				Exam 1 (c) Claims	Referral Claims	Gross Income

13 Committed: The practice is NHS Committed for this quarter.

\* These dentists have had their figures increased to meet the minimum criteria as defined in the SDR.

- 1 Informs you if a dentist in your practice has had their figures increased to 'deem' them as Committed for the quarter.
- 2 Whole Time Equivalent.
- 3 Your location code is a unique identifier for your practice.
- 4 The practice start date is required for new practices in designated areas who are deemed committed.
- 5 This area details a breakdown of the number of exam 1(c) and referral claims.
- 6 The date the calculation is run.
- 7 This is the last day in the quarter being reported.
- 8 This is the total number of counted dentists in your practice. We include both full time and part-time dentists.
- 9 Practitioner's gross income.
- 10 Practice Total Actual - Actual number of exam 1(c) and referral claims at your practice.
- 11 Practice Total Uplifted - This line will report if a list number in your practice has had their numbers artificially increased to consider them as committed.
- 12 Practice Average - Average number exam 1(c) and referral claims at your practice and the average gross income. This is the data used in determining if your practice meets the criteria for gaining NHS Commitment status as set out by the Scottish Government.
- 13 Your NHS Committed status for this quarter.





# Other specialist practice NHS commitment report



## My eSchedule Reports

Treatment, payment and patient reporting

NHS Commitment Practice Calculation Report for 2016 Quarter 4 - Paid under the National Health Service (Scotland) Act

MR JOE BLOGGS

DENTAL PRACTICE

5 CROWN STREET

EDINBURGH

EH1 1AB

3 Location 4867 6 Run Date 17/03/2017  
4 Practice Start Date 7 Calculation End Date 28/02/2017  
8 Number of Counted Dentists 13.0

Dentist	1 New Dentist Deemed Committed	2 WTE	List Number	5	Number of		9 Gross Income
					Exam 1(a), (b), (c) Claims	Referrals	
MS JOANNE BLOGGS	N	12345			0	0	98926.82
					0	0	98926.82
MRS JANE BLOGGS	N	67890			0	0	34964.13
					0	0	34964.13
MR JOE BLOGGS	N	54321			0	0	47674.10
					0	0	47674.1





## My eSchedule Reports

Treatment, payment and patient reporting

NHS Commitment Practice Calculation Report for 2016 Quarter 4 - Paid under the National Health Service (Scotland) Act

Dentist	New Dentist Deemed Committed	WTE	List Number	Number of		
				Exam 1(a), (b), (c) Claims	Referrals	Gross Income
MS JOANNE BLOGGS	N		12345	0	0	24441.44
				0	0	24441.44
MRS JANE BLOGGS	N		67890	0	0	117162.50
				0	0	117162.5
MR JOE BLOGGS	N		54321	0	0	6746.99
				0	0	6746.99
MRS JANICE BLOGGS	N		11121	0	0	99629.59
				0	0	99629.59
MRS JEAN BLOGGS	N		13141	0	0	58006.26
				0	0	58006.26
MR JAMES BLOGGS	N		15161	0	0	159538.02
				0	0	159538.02







## My eSchedule Reports

Treatment, payment and patient reporting

NHS Commitment Practice Calculation Report for 2016 Quarter 4 - Paid under the National Health Service (Scotland) Act

Dentist	New Dentist Deemed Committed	WTE	List Number	Number of		
				Exam 1(a), (b), (c) Claims	Referrals	Gross Income
MS JEMMA BLOGGS	N		17181	0	0	90250.19
				0	0	90250.19
MR JOHN BLOGGS	N		19202	0	0	131110.13
				0	0	131110.13
MR JIM BLOGGS	N		21222	0	0	76076.87
				0	0	76076.87
<b>10 Practice Total Actual</b>				0	0	944527.04
<b>11 Practice Total Uplifted</b>				0	0	944527.04
<b>12 Practice Average</b>				0	0	72655.93
<b>13</b> Committed. The practice is NHS Committed for this quarter.						

\* These dentists have had their figures increased to meet the minimum criteria as defined in the SDR.





## My eSchedule Reports

Treatment, payment and patient reporting

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- 1 Informs you if a dentist in your practice has had their figures increased to 'deem' them as Committed for the quarter.
- 2 Whole Time Equivalent.
- 3 Your location code is a unique identifier for your practice.
- 4 The practice start date is required for new practices in designated areas who are deemed committed.
- 5 This area details a breakdown of the number of exams 1(a), (b) and (c) and referral claims.
- 6 The date the calculation is run.
- 7 This is the last day in the quarter being reported.
- 8 This is the total number of counted dentists in your practice. We include both full time and part-time dentists.
- 9 Practitioner's gross income.
- 10 Practice Total Actual - Actual number of exam exams 1(a), (b) and (c) and referral claims at your practice.
- 11 Practice Total Uplifted - This line will report if a list number in your practice has had their numbers artificially increased to consider them as committed.
- 12 Practice Average - Average number exam exams 1(a), (b) and (c) and referral claims at your practice and the average gross income. This is the data used in determining if your practice meets the criteria for gaining NHS Commitment status as set out by the Scottish Government.
- 13 Your NHS Committed status for this quarter.

