



Remobilisation of NHS Dental Services

Revised Statement of Dental Remuneration Determination I – Amendment 148



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1. Introduction

1.1 Document Purpose

This document provides guidance on the items of treatment and codes that are available to NHS general dental practitioners and Urgent Dental Care Centres, within Amendment No. 148 to the Statement of Dental Remuneration (SDR148) which applies from 1 November 2020.

It also provides information on other matters, including the continued suspension of patient and patient representative signatures and an update on your supplier making their new software available.

1.2 Where we are now

Following an announcement by the Minister for Public Health, Sport and Wellbeing on 12 October 2020, the Chief Dental Officer advised in his [CDO](#) letter that from 1 November 2020 dental contractors will be able to provide a full range of treatments to all NHS patients within dental practices. Item of service fees will also be re-introduced, along with the NHS patient charge.

[PCA\(D\)\(2020\)13](#), issued on 26 October 2020, introduces [Amendment No 148 of the Statement of Dental Remuneration](#) will be effective from Sunday 1 November 2020.

Practitioners are encouraged to read the Memorandum to [PCA\(D\)\(2020\)13](#) thoroughly, as it contains important information relating to phase 4 of the NHS Dental Remobilisation Plan.

For all claims with an acceptance date on or after 1 November 2020, the guidance within this document must be followed in accordance with [PCA\(D\)\(2020\)13](#) and [SDR148](#).

1.3 Summary of changes in SDR148

- Reintroduction of Item of service payments, along with patient charges, for items that were previously available in SDR143
- A 2.8% pay award to Item of Service
- As NHS dental contractors will also continue to receive top-up emergency payments, subject to certain conditions, we have applied the full value of the award to capitation and continuing care payments on the following items:



- Item 41(a)(i), (iii), and (vi) – Capitation Payments
- Item 45(a) and (b) – Continuing Care Payments
- As orthodontists do not receive capitation and continuing care payments instead the pay award will be applied through line 7 of their monthly schedules. This will be based on a 2.8 per cent increase on average earnings over the assessment period
- Item 49(e), colour photographs and report in connection with referrals, is included in Section XII – Occasional Treatment
- All fee narratives and provisos are reinstated as per SDR143
- The prior approval limit will increase to £430
- Discretionary fees are being re-introduced. The fee guide is available to view at: <https://nhsns.org/services/practitioner/dental/payment-claims-and-fees/>
- Item 80 codes are being retained. These will retain £0 in value
- The three-month time limit for submission of claims for completed treatments is reinstated from 1 November 2020. Any claims submitted on or after that date will be subject to this time limit, irrespective of the acceptance date on the claim



2. NHS general dental practices and PDS (GDS)

2.1 Triage of patients

When patients contact the practice and triage is carried out, this activity must be recorded and added to each claim. The triage codes have been carried over into SDR 148 to reflect that the current social distancing restrictions remain in place, along with guidance relating to triaging patients. Patient visits to dental practices therefore still require to be arranged to accommodate these factors. The codes available under item 80 will assist practitioners in recording this activity, and the code(s) appropriate to the triage carried out must be added to each claim.

Where one dentist carries out the triage and a different dentist carries out the treatment, you should submit both the triage codes and treatment codes on the same submission.

There may be scenarios that require multiple item 80 codes to be added to a submission. For example, if there has been a discussion with a patient over the telephone on 2 occasions during a single course of treatment, the telephone triage coded 8001 01 would be recorded twice as two separate instances. This may appear in your Practice Management System (PMS) similar to the following:

Item Code	Quantity	Fee	Patient Charge
8001	01	£0.00	£0.00
8001	01	£0.00	£0.00

Practitioner Services do not validate on the triage codes, other than to confirm the code is a valid code and the values associated are £0; they are solely used to record activity.

The 'Triage Activity' codes that can be used by NHS General Dental practices are listed and explained in [Appendix A](#) and also SDR148 section XV – Triage Activity.

There are limited exceptions where it is not possible to submit a claim with Item 80 codes, these are:

- In respect of orthodontic cases only where an item 80 code will be the only item on a submission, e.g. **8001 01 'Initial telephone call triaging'**, these should not be submitted on a claim and instead recorded on the patient record
- Where the course of treatment commenced prior to the 22 June 2020, as 8000 codes are only effective from SDR 144 onwards



2.2 What treatments can be carried out by NHS general dental practitioners in a practice setting

[Appendix B](#) details the sections within SDR148 that can be carried out by NHS general dental practitioners in a practice setting. Please refer to SDR148 for the full list of available items and treatment codes for both registered patients within practice, and those not registered. You should complete claims as you did under SDR143.

2.3 Recording treatment and submissions for SDR148

All items within SDR148 have an item of service fee and patient charge. All treatment carried out should be recorded in your practice system and claims submitted electronically to Practitioner Services, as you would have done prior to lockdown. The only difference will be the inclusion of the 'Triage Activity' codes which were introduced from SDR144 onwards, and the inclusion of item 49(e), which provides for a claim for clinical colour photographs in connection with referrals, for occasional patients.

2.4 Open courses of treatment started under SDR144, SDR145 or SDR147

If you started a course of treatment under SDR144, SDR145 or SDR147 (and it is still open), where there are items that were not available in those SDRs, that are now available in SDR148, you will need to close that original course of treatment and open a new course of treatment if you wish to provide items from SDR148 for your patient.

In the scenario where a treatment plan was closed (as advised) during the Covid SDR period, some treatment plans may have already been at the maximum patient charge level or nearing the limit. If the patient is now coming back to the practice to continue treatment under SDR148, it will be regarded as a new course of treatment because the acceptance date on the new claim will be on or after 1 November 2020. The combined patient charge total of both these claims may take the patient over the maximum patient statutory charges limit, so to avoid the patient being penalised, please add the following observations to your claim so that our operational team can ensure no further patient charge beyond the maximum is deducted:

“Previous claim closed due to COVID. The previous claim and this claim will take patient charge over max – please amend”

Where the course of treatment contains only items that are available in SDR144, SDR145 or SDR147, continue treatment under that SDR until completion.



2.5 Patient's signature

In order to avoid any unnecessary contact, patients are not required to sign for their treatment. This includes both the paper and electronic versions of the GP17(PR) and GP17(PR)(O) forms. You should complete the patient's signature on their behalf, marking 'Covid 19' in the signature box.

2.6 Patient exemption/remission status

You are expected to record the patient's exemption/remission status as usual.

2.7 Patient registration

There is no change to how the patient registration details should be entered, you should still select the patient's registration details in the usual way.

New patients are able to be registered at a practice as normal.

Patients who are not registered anywhere can attend a NHS general dental practice and be treated under SDR148 as an occasional patient, assuming the practice is able to see them. If the patient and dentist both agree, the patient can register as a patient with that practice.

2.8 Patient registrations due to move onto the reduced rate from 1 November 2020

Changes will be applied to the existing patient Due to Reduce dates held in the system following the announcement in PCA(D)(2020)13 which states:

"We are aware that after a period of three years without seeing a patient, the capitation and continuing care payments revert to a 20% reduced rate. Because of the on-going COVID restrictions all registrations which are due to reduce on or after the 1st November 2020 but before the 31st October 2021 will have the 'due to reduce date' extended by 12 months."

Your Capitation and Continuing Care Patient Information eSchedule report lists all patient registrations that are due to move onto the reduced rate. From the 1 November 2020, the time period for any patient registrations to move onto the reduced rate has been extended by 12 months which means you may notice a change in this report.



For example, you may have previously been notified that a patient listed in the report for September paid October 2020 was due to move onto the reduced rate on 1 December 2020. With the extension in place, and if the patient does not attend for treatment within that 12-month period the registration will move onto the reduced rate on 1 December 2021, therefore you would receive your first notification of the patient as Due to Reduce in the eSchedule report for August paid September 2021.

2.9 Updates to your practice management system (PMS)

PMS suppliers are aware and are working on the changes.

Visit the **Covid-19 section** of our web site to see when your supplier has indicated they will make the update available to you. You will only be able to submit claims for treatment carried out under SDR148 when your supplier has either updated your system or made the update available to you so that you may update your system.

If you receive system updates from a download or from a disc, you will need to do this as soon as your supplier informs you the update is ready. Please follow your PMS supplier's instructions if they have advised of any. We have detailed any action on the web site that we have been made aware of.

2.10 Web form users

The web form has been updated with the new SDR148, so all codes within SDR148 are available for use.



3. Urgent Dental Care Centres (UDCC)

3.1 UDCC guidance

While it is not possible to provide a fully comprehensive and exclusive list of specific reasons for referral to UDCC, the following are examples of where the service may still be utilised: Circumstances where a dental practice may be unable to deliver dental care and require the patients be referred to a UDCC:

- Where a national/local or individual practice has been closed due to COVID 19 considerations
- Where a dental practice cannot deliver services due to failure of face fitting issues
- Where limitations of ventilation limit the practice ability to deliver AGPs
- Where the patient has symptoms of Coronavirus or is part of a household where someone has symptoms

UDCC should only use Section XII - Occasional Treatment and Section XV - Triage Activity from SDR148 when submitting claims with a date of acceptance on or after 1 November 2020.

3.2 Triage of patients

When patients contact the UDCC and triage is carried out, this activity must be recorded and added to each claim.

The triage codes, under item 80 in SDR148, should be used to record 'Triage Activity' and the code appropriate to the result of the patient's triage must be added to each claim

If one dentist carries out the triage and a different dentist carries out the treatment, you can submit the triage codes on the same submission as the treatment codes.

It is possible that an item 80 code will be the only item on a submission, as you may not be able to carry out the treatment necessary within your practice or the patient attends but does not go through with treatment.



There may be scenarios that require multiple item 80 codes to be added to a submission. For example, if there has been a discussion with a patient over the telephone on 2 occasions during a single course of treatment, the telephone triage coded 8001 01 would be recorded twice as two separate instances. This may appear in your Practice Management System (PMS) similar to the following:

Item Code	Quantity	Fee	Patient Charge
8001	01	£0.00	£0.00
8001	01	£0.00	£0.00

Practitioner Services do not validate on the triage codes, other than to confirm the code is a valid code and the values associated are £0; they are solely used to record activity.

The 'Triage Activity' codes that can be used by UDCC are listed and explained in [Appendix A](#) and also SDR148 section XV – Triage Activity.

4. Appendices

4.1 Appendix A – Triage Codes

Item No.	Item description	Explanation	For use by NHS GDS or UDCC	Code	Suffix
80[A]	Initial telephone call triaging	Patient makes contact by telephone and discussion takes place with patient to determine the issues they are experiencing	Both	8001	01
80[B]	Advice and closing the case	Providing only advice to the patient, treatment is deemed not necessary and the case is closed	Both	8011	01
80[C]	Advice and a prescription - antibiotics and or analgesics Closing the Case	Providing advice to the patient, where face to face treatment is deemed not necessary but a prescription for antibiotics and or analgesics is provided and the case is closed	Both	8021	01
80[D]	Appointment for treatment arranged (further Covid triaging to determine status) Red Covid Pathway	Appointment arranged with an Urgent Dental Care Centre for a patient who has symptoms of Coronavirus or is part of a household where someone has symptoms	Both	8031	01
80[E]	Appointment for treatment arranged (further Covid triaging to determine status) Green Covid Pathway	Appointment arranged for a patient who has no symptoms of Coronavirus, is not quarantined and is in a household where no-one has symptoms	Both	8041	01
80[F]	Appointment visit (treatment) aerosol generating procedure	Appointment visit is required at an Urgent Dental Care Centre due to the need for an aerosol generating procedure, but patient has decided not to accept the appointment	Both	8051	01
80[G]	Non aerosol procedure	Providing a non-aerosol generating procedure	Both	8061	01
80[H]	Unable to deliver case - Phobia/Co-operation/Consent issue	Patient has attended for treatment and staff have donned PPE to carry out treatment, but due to issues with the patient's phobia/ cooperation/consent no treatment was provided	Both	8071	01
80[I]	Aerosol generating procedure	Have treated patient using an aerosol generating procedure	Both	8081	01
80[J]	Interpreter Required	The patient requires an interpreter	Both	8082	01
80[K]	Multiple Contact with UDCC Required	Patient has contacted the UDCC a number of times after treatment has been carried out	Urgent Dental Care Centres only	8083	01
80[L]	Any Referral not included in 80[D] or [E]	Any referral to a non-Urgent Dental Care Centre setting, i.e. secondary care, specialist, etc.	Both	8084	01
80[M]	Where the Visors being used for the patient require to be disposed of due to splatter contamination	Each visor should be used for a full session, but if it is contaminated by splatter it should be disposed of and a new visor used	Both	8085	01

4.2 Appendix B – Treatment Carried Out

SDR Section	GDS		PDS GDS		PDS non GDS
	Registered	Not registered	Registered	Not registered	
Section II - Diagnosis	✓	✗	✓	✗	✓
Section III - Preventive Care	✓	✗	✓	✗	✓
Section IV - Periodontal Treatment	✓	✗	✓	✗	✓
Section V - Conservative Treatment	✓	✗	✓	✗	✓
Section VI - Surgical Treatment	✓	✗	✓	✗	✓
Section VII - Prostheses, Obturators & other (non Orthodontic) Appliances	✓	✗	✓	✗	✓
Section VIII - Orthodontic Treatment	✓	✗	✓	✗	✓
Section IX - Other Forms of Treatment	✓	✗	✓	✗	✓
Section X - Treatment under Capitation	✓	✗	✓	✗	✗*
Section XI - Continuing Care and Patient Management	✓	✗	✓	✗	✗
Section XII - Occasional Treatment	✗	✓	✗	✓	✓
Section XIII - Incomplete Treatment	✓	✓	✓	✓	✓
Section XIV – Additional Payments	✓	✓	✓	✓	✓
Section XV - Triage Activity	✓	✓	✓	✓	✓

*with exception of items: 44(A), 44(B), 44(C), 44(D), 44(E), 44(G) which are claimable items of treatment.

Please note, SDR sections included in the table above are those that contain Items and codes. Refer to SDR148 for the full list of information.

Discretionary fees are being re-introduced. The fee guide is available to view at:

<https://nhsns.org/services/practitioner/dental/payment-claims-and-fees/>