

July 2026 edition



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Scottish Government PCAs

[PCA\(D\)\(2026\)03](#) advises on the updated GP21A forms following the introduction of provisional listing on 31 January 2026.

[PCA\(D\)\(2026\)02](#) advises of upcoming changes to Prior Approval for General Dentistry and discusses changes that have been made to the Regulations to enable GDC-registered dentists to list on a provisional basis pending the successful completion of mandatory training.

[PCA\(D\)\(2026\)01](#) notifies dentists and dental body corporates providing NHS dental services of Scottish Ministers intention to introduce a Declaration of Compliance of Terms of Service.

Public Services Delivery Scotland (PSD Scotland)

On 1 April 2026, NHS National Services Scotland (NSS) and NHS Education for Scotland (NES) joined to form a new organisation: **Public Services Delivery Scotland (PSD Scotland)**.

This organisation has been established to enable transformation in health, social care, and the wider public sector, and to support the delivery of high-quality public services for people across Scotland.

Public Services Delivery Scotland (PSD Scotland) will be the organisation name used in all official communications, publications and correspondence.

You will now be able to access the new website: [Public Services Delivery Scotland \(PSD Scotland\)](#)

Please note, however, that the existing NSS and NES websites remain available.

Prior Approval Reform

The new Prior Approval (PA) model for General Dental Services (GDS) remains on track for implementation on 1 November 2026. These changes do not apply to orthodontic services.

As advised in [PCA\(D\)\(2026\)2](#), the Scottish Government will replace the current financial threshold of £660 with an approval system focused on clinical criteria. These changes will apply to GDS only. The new model will introduce a tiered system for dentists based on their Scottish NHS Dentistry experience. Tiering information, advising dentists which tier they are in, will be notified via your Practice Management System (PMS).

To allow for the timely implementation of these changes, governance and project structures have been established. This includes a Project Board with representation from key stakeholders across dentistry, Scottish Government, and primary care. In line with our communications and engagement plan, we will continue to provide monthly schedule communication updates. Guidance and training materials are scheduled ahead of implementation. It is important, therefore, that dentists keep their NHS emails up to date and active.

Significant progress has been made on system development. We continue to develop and system test the necessary IT changes. Our internal acceptance testing remains scheduled to commence in July, with testing involving Practice Management System (PMS) suppliers expected from September 2026. PMS suppliers have received technical specifications, testing scenarios and detailed requirements to ensure their systems can support the new model. Further information is available on this in the section below.

Engagement with PMS suppliers has been a key focus, with individual meetings held to discuss development, testing and implementation plans. Suppliers have been asked to provide testing and implementation timelines, providing visibility of readiness. You can find these timelines [here](#). PMS suppliers will be providing fortnightly updates at the outset, increasing in frequency as we move toward the testing phase.

Alongside technical development, we are working to ensure that practitioners will be well supported through regular updates, clear guidance, and training. Information on the new clinical prior approval model has been added to the [Dental Reform section](#) of our website, and a TURAS learning package is under development and is expected to launch in September 2026. This module will meet requirements for verifiable CPD.

Overall, the programme remains in the development and preparation phase, with systems development, supplier engagement, communications and training activities progressing as planned, in advance of the November 2026 implementation date.

What should practices be doing now?

We recommend:

- ensuring everyone within your practice is aware of the upcoming changes and understands their implications
- assessing how these changes may affect your internal practice processes and workflows
- regularly checking your supplier's website for the latest updates and guidance
- reading [schedule communications](#) to stay informed of any new developments

Practice Management System (PMS) Suppliers Requirements for Clinical Prior Approval

The following is a summary of the eDental Supplier Specification documentation, and the updates made to support Clinical Prior Approval. The Supplier specification and other

supporting documentation has been sent to suppliers. This will enable them to develop their systems. The information contained in here was correct at the time of issuing.

Practice Management Systems will be required to store the following information and have it visible to the user:

- the tier allocated to each individual list number
- the clinical criteria rules
- continue to support the monetary prior approval limit (currently £660) for orthodontic treatment for each list number

Tiers

When the tier for an individual list number changes, Practitioner Services send an electronic update message to the practice, indicating the new tier and the start date. The PMS should update the tier for that list number, along with the start date. Historic tiers and their start dates should be recorded at list number level.

Individual dentists should be able to view details of their own current and historic tier levels within their PMS for all their list numbers, including the start date for each Tier Level.

Clinical criteria rules

Clinical Criteria rules will be provided as a complete 'Rule Set' for all Tier Levels and will have a unique Rule Set ID and start date. See [Appendix A](#) for an example of the Rule Set.

When PaCC send an electronic update message with a new 'Rule Set', PMS systems must update the Rule Set in the PMS. The historic 'Rule Sets' and their start dates should be recorded at practice level.

PMS systems must be able to display the active clinical criteria rules, based on the tier attributed to the list number on the acceptance date of the case.

Providing updates of tier moves or new Rule Sets

Where a list number moves from one tier to another or a new Rule Set is required due to changes to any of the clinical criteria rules, practices will receive an update response message containing the new details. The PMS will retrieve these messages once per day and update the details held within the system for that practice and individual list numbers, depending on what is included in the message.

Prior Approval Validation

The PMS must validate treatment plans against the clinical criteria 'Rule Set' valid on the acceptance date of the case, as well as the tier the list number is in on at the acceptance date, to assess whether a Prior Approval must be submitted. The PMS should inform the dentist that PA is required, where appropriate.

Where a previously approved Prior Approval treatment plan is amended, the PMS must notify the dentist they need to submit for re-approval. This applies to ANY change in the treatment plan, including diagnostics, non-prior approval items and even if the change means all items in the treatment plan are now below the prior approval trigger points for those items.

The notification must include the following text:

Whenever the treatment differs (any variation) from what was initially approved, unless it meets one of the exceptions listed below, it is essential to seek re-approval. If re-approval is not obtained, the claim will be rejected for payment.

Exceptions include the following:

- If the variation is due to the patient failing to return to complete treatment, you must tick the 'PFTR' box before submitting for payment.
- If it is part of a Continuation Case, where not all approved treatment has been completed and will be completed by a practitioner with a different list number, you must supply observations and follow the Continuation Case procedure published on our website.

Reconciliation Validation

Where a dentist is trying to submit a payment claim that has previously been approved, but the treatment plan on the payment claim is different from what was approved, the PMS should highlight to the dentist that there are differences between what was approved to what is being submitted for payment.

The PMS should advise the dentist to review the claim and indicate that re-approval should have been obtained. If the dentist chooses to ignore the warning, they risk having the claim rejected if submitted.

Future proofing

The tier levels are initially Tier 1 and Tier 2. The overall structure allows for the addition of further tiers in future and associated Clinical Criteria 'Rule Sets', if required. Each PMS must be capable of handling this.

Appendix A

Item Code	Fee Code	Item Description	Tier 1		Tier 2	
			Individual treatments (equal to or greater than)	Combination treatments	Individual treatments (equal to or greater than)	Combination treatments
1-(d)	A004	INTRAORAL RADIOGRAPH	15		15	
3-(e)(1)	C005	POSTERIOR COMPOSITE SUPPLEMENT	8		4	
3-(e)(2)	C015	SUPPLEMENT FOR 2 FILLINGS ON ONE TOOTH	3		2	
3-(f)	C006	ENDODONTIC TREATMENT (INCISOR/CANINE/LOWER PREMOLAR)	4	Total number of 4 or more treatments in treatment plan – PA trigger	3	Total number of 3 or more treatments in treatment plan – PA trigger
3-(g)	C007	ENDODONTIC TREATMENT (UPPER PREMOLAR)	3		3	
3-(h)	C008	ENDODONTIC TREATMENT (MOLAR)	3		3	
3-(j)	C010	RE-ROOT CANAL TREATMENT SUPPLEMENT	2		2	
3-(k)	C011	INTERNAL BLEACHING	2		2	
4-(b)	D002	CROWN PLACEMENT	4	Total number of 6 or more (including units) in treatment	3	Total number of 4 or more (including
4-(c)	D005	POST and/or CORE RETENTION for CROWNS and BRIDGES	4		3	

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4-(d)	D006	INLAY/ONLAY PLACEMENT	4	plan – PA trigger	3	units) in treatment plan – PA trigger
4-(e)	D009	REPLACEMENT VENEER	3		2	
4-(f)	D012	CONVENTIONAL BRIDGE (per unit)	3		2	
4-(g)	D015	RESIN RETAINED BRIDGE (per unit)	4		2	
5-(b)	E002	SURGICAL EXTRACTION	3		2	
5-(c)	E003	ADVANCED SURGICAL EXTRACTION	3		1	
5-(d)	E004	ADVANCED SURGICAL PROCEDURES	2		1	
7-(g)	G013	ACID ETCHED SPLINT (per union)	3		1	
7-(h)	G014	LABORATORY MADE SOFT SPLINT / FLUORIDE TRAY / TRAUMA RETAINER / EXTERNAL BLEACHING TRAY (per appliance)	2		2	
7-(i)	G015	LABORATORY MADE HARD SPLINT (per appliance)	2		2	
39	3995	MISCELLANEOUS BALANCING FEE	1		1	
90(b)	9002	REAPPROVAL FOR CHANGE TO GENERAL TREATMENT PLAN NOT RESULTING IN A CHANGE TO THE TOTAL OF FEES ON THE ORIGINALLY APPROVED CLAIM	1		1	

Prescribe It Right First Time: Support Efficient Dispensing and Timely Payment

Action required by Dental practitioners

Please check every prescription you issue on a GP14. You must:

- **Write all prescribed items clearly (do not use ink stamps)**
Do not use **black or red ink** stamps in the prescribed items area for medicines or appliances. Stamped items often cannot be read by the scanning system, requiring rework.
In particular, avoid using stamps for sodium fluoride toothpaste (1.15% and 0.619%).
- **Prescribe generically wherever possible**
Avoid brand names unless clinically necessary. For example, prescribe fluoride preparations generically rather than using brand names such as Colgate Duraphat unless required.
- **Follow the Dental Formulary**
Only prescribe items listed in the approved Dental Formulary to help avoid payment rejection by community pharmacies and the need for a reprint.
- **Make sure all prescription details are clear and readable**
Use **dark ink** and check that all text is legible and free from smudging.

Why this is important

We are seeing a high number of prescriptions where stamped prescribed items or poor print quality cannot be read during scanning.

This can:

- Result in items being missed during processing by Public Services Delivery Scotland (PSD Scotland)
- Delay or prevent payment to community pharmacies
- Create rework for dental practices and pharmacy teams

Clear, handwritten prescriptions help ensure that items are read correctly and processed first time. The examples below show how red ink or poorer-quality stamps do not scan clearly, delaying processing.

The image displays three examples of GP14 (National Health Service) prescription forms, each illustrating a problem with readability during scanning:

- Form 1 (Left):** Shows a prescription for "Sodium Fluoride Toothpaste 1.15% DFP". The text "Send: 2 tubes." is handwritten. The form includes fields for Name, Address, Age (12 yrs), Sex (M), and Date (09/08/24). The Dental Practitioner's Name is [REDACTED] and the number is 6311636836360. The form is dated 11/23.
- Form 2 (Middle):** Shows a prescription for "Sodium Fluoride Toothpaste 1.15% DFP". The text "Send: 2 tubes." is handwritten. The form includes fields for Name, Address, Age (12 yrs), Sex (M), and Date (09/08/24). The Dental Practitioner's Name is [REDACTED] and the number is 6311636836360. The form is dated 11/23.
- Form 3 (Right):** Shows a prescription for "Sodium Fluoride Toothpaste 1.15% DFP". The text "Send: 2 tubes." is handwritten. The form includes fields for Name, Address, Age (12 yrs), Sex (M), and Date (03/04/2026). The Dental Practitioner's Name is [REDACTED] and the number is 6311636836360. The form is dated 11/23.

Each form has a footer with the text "Please read notes overleaf and complete relevant parts BEFORE going to a pharmacy." and the form number 70646338903 and 00490049.

Further information

If you have questions about prescription requirements or processing, please contact the PSD Scotland Scanning Centre on 01506 705125 or email: nss.p-cfs-scanningservices@nhs.scot

Benefits Passport Changes April 2026

Notification was sent to the profession in February advising that Income Support and income-based Job Seekers Allowance would be withdrawn from 1 April.

The above benefits will remain valid exemptions for courses of treatment with an acceptance date (start date) before 1 April 2026; however, these benefits are not valid for claims with an acceptance date on or after 1 April 2026.

Claim submissions on or after 1 April that include these exemptions will generate the following eDental errors codes: E000733, E000734, and E000735. Claims should be resubmitted with the correct remission.

Patients in receipt of these benefits should receive notification from the Department of Work and Pensions (DWP). Patients that qualify for Universal Credit following the removal date should use this as their reason for remission going forward. Patients that do not qualify for a benefit from 1 April 2026 will no longer be eligible for an exemption from charges for courses of treatment started from that date.

You can find the full letter from the Chief Dental Officer [here](#)

Rent Reimbursement – GP234 Reminder

The deadline for the rent reimbursement for all four quarters of the financial year 2026/2027 has now passed.

If you have missed this deadline, you can still submit the form for part payment of 2026/2027 practice rental costs as follows:

- 31 August 2026 for quarters 3 and 4
- 30 November 2026 for quarter 4 only

Please ensure you use the most up to date GP234 form, which you can find on our website: [Apply for rates and rental reimbursement | National Services Scotland](#)

The practitioner's accountant must complete part 3 of the form. The GP234 form must be stamped. If your accountant does not have a stamp, then a confirmation on headed paper is acceptable. A business card would not be acceptable. Please submit your application by email to: nss.psd-dental-payments@nhs.scot

Claims

Patient Registration

Please follow the process highlighted below to maintain accurate patient registration.

A GP17-O should be submitted as follows:

Initial Claim Type	Type of Claim
Ortho Referral	5

A GP17-1 should be submitted as follows:

Initial Claim Type	Type of Claim
Patient registered within practice	2
Patient registered outwith practice	3

Continuation Cases

Please ensure that the Continuation case process is followed when a dentist list number resigns, and treatment continues on another list number at the practice. This critical process ensures both claim parts can have the same start date and SDR being applied, it also applies to any prior approval gained on part 1 to cover the part 2.

We are seeing an increase of claims being closed and submitted by the resigning dentist whilst they are mid treatment and not using this continuation case process. When you are aware that a list number with open treatments is planning to resign, please familiarise yourself with the process using our [general guidance](#), and please also seek the advice of your practice management system supplier.

Please note that in cases where the list number continuing a course of treatment is held by the same dentist as the list number the treatment was started under, such as when a dentist opts for retire-and-return or when a vocational trainee continues a course of treatment as an associate, **the continuation process must still be followed.**

Errors referring to tooth annotation, surface and/or material

As advised in previous schedule communications and on [our website](#), the changes introduced in August 2024 require you to provide one or more of the following for some treatment items:

- tooth annotation
- surface(s)
- material

If you receive eDental errors relating to this, please ensure you are providing the correct information. You can search [our guidance](#) which provides additional information to help you resolve the error.

The following two example errors are taken from our eDental error guide:

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	Error Description	Additional Guidance
E002022	An item has been claimed where material and annotation are required. The material and annotation supplied is not a valid combination.	Either annotation code has not been specified or the material and annotation supplied is not a valid combination for the item claimed.

The treatment items that require this further information when being claimed are detailed in the table below. Please note that this is only a generic guide and may not reflect exactly how your PMS system presents information.

Item 3 – Fillings	Annotation code	Surfaces	Material code
3-(a) - 1 single surface (Item code: C001) 3-(a) - 2 single surface same tooth (Item code: C012) 3-(b) - 2 surfaces (Item code: C002) 3-(b) - 2 x 2 surfaces same tooth (Item code: C013) 3-(c) - 3 surfaces or more (Item code: C003)	F - filling	M - mesial O - occlusal D - distal B - buccal P - palatal L - lingual I - incisal	A - Amalgam G - Glass R - Resin Composite
Item 4 – Extra Coronal Restorations	Annotation code	Surfaces	Material code
4-(a) - Stainless steel crown and provisional crown/bridge (Item code: D001)	TC - temporary crown TR - temporary retainer TP - temporary pontic SC - stainless steel crown	N/A	N/A
Item 4 – Extra Coronal Restorations	Annotation code	Surfaces	Material code
4-(b) - Crown Placement (Item code: D002) 4-(b) - Crown Placement Incomplete Fee – 70% (Item Code: D003) 4-(b) - Crown Placement Balancing Fee – 30% (Item code: D004)	C - crown	N/A	M - metal B - bonded (metal ceramic) C - ceramic/porcelain
4-(c) - Post and/or core retention for crowns or bridges (Item code: D005) 4-(c) - Post and/or Core Retention Incomplete Fee – 70% (Item code: D019) 4-(c) - Post and/or Core Retention Balancing Fee – 30% (Item code: D020)	PP - pre-fabricated post/core CP - cast post/core FP - fibre post/core OP - other post/core (which may include a combination)	N/A	S - stainless steel L - cast metal alloy F - carbon fibre Z - Any combination of stainless steel, cast metal alloy, carbon fibre or any other filling material
4-(d) - Inlay/onlay placement (Item code: D006) 4-(d) - Inlay/Onlay Incomplete Fee – 70% (Item code: D007) 4-(d) - Inlay/Onlay Balancing Fee – 70% (Item code: D008)	IN - inlay/onlay	M - mesial O - occlusal D - distal B - buccal P - palatal L - lingual I - incisal	M - metal R - resin (composite) C - ceramic/porcelain

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4-(e) - Replacement veneer (Item code: D009) 4-(e) - Replacement Veneer Incomplete Fee – 70% (Item code: D010) 4-(e) - Replacement Veneer Balancing Fee – 30% (Item code: D011)	V - veneer	N/A	R - resin (composite) C - ceramic/porcelain
4-(f) - Conventional bridge (per unit) (Item code: D012) 4-(f) - Conventional Bridge Incomplete Fee – 70% (Item code: D013) 4-(f) - Conventional Bridge Balancing Fee – 30% (Item code: D014)	BR - bridge retainer BP - bridge pontic	N/A	N/A
4-(g) - Resin retained bridge (per unit) (Item code: D015) 4-(g) - Resin Retained Bridge Incomplete Fee – 70% (Item code: D016) 4-(g) - Resin Retained Bridge Balancing Fee – 30% (Item code: D017)	BR - bridge retainer BP - bridge pontic	N/A	N/A

Error Code	Error Description	Additional Guidance
E002027	The number of charting records provided for the item claimed does not match the number of charting records required.	A separate charting record, containing annotation code, surface(s) and material must be provided for each individual filling claimed. The error will identify the teeth and fee code(s) affected. Note: The maximum number of single surface fillings that can be claimed per tooth is three, even if more were carried out, and the number of charting records must match the number of single fillings claimed.

Each filling claimed must have a corresponding charting record containing annotation code, material, and the correct number of surface(s). For example: A claim for item 3-(a), where C001 (one single surface filling) and C012 (2 single surface fillings on one tooth) are claimed on tooth 14. We would expect there to be three separate charting records for tooth 14, with each charting record containing annotation code F, the material used for that filling, and one surface.

Please be aware that Customer Services cannot view claims and prior approvals that have failed for any eDental errors. It is therefore important that you try to resolve these errors with the help of our eDental errors guidance. You will need to change something within the claim before resubmitting. If you are unable to resolve the issue and change anything on your claim, you should contact your practice management software (PMS) supplier before attempting to resubmit.

Complete Calendar Months Clarification

When periods of time are specified in the SDR, they are given in 'complete calendar months'. Complete calendar months run from the first day of the month to the last day of the month. Regardless of when an item is claimed, the remaining days of that month should be

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discounted. For example, if an item was claimed on the 13th of March and the narrative in the SDR states that you can only claim it again after 2 complete calendar months has passed, you would discount the rest of March. The complete months of April and May would be counted as the 2 complete calendar months, and you would therefore only be able to claim that item again on or after the 1st of June.

These rules should be followed for both final payment claims and prior approvals. You must check the patient's eligibility for an item of treatment **before** submitting a claim for prior approval or final payment.

Time-bars

All the time-bars in the SDR run from the acceptance date of the original course of treatment to the acceptance date of the next course of treatment.

Please see below examples of common items of service with the time-bar calculation made:

Item of service	Acceptance date of last claim	Time-bar	Acceptance date of next claim
1-(a) Extensive Clinical Examination	13/03/2026	11 complete calendar months	01/03/2027
2-(a) Enhanced preventive advice and treatment	13/03/2026	2 complete calendar months	01/06/2026
3-(a) Filling (single surface)	13/03/2026	11 complete calendar months	01/03/2027
7-(a) Acrylic Denture (partial)	13/03/2026	11 complete calendar months	01/03/2027

Scottish Dental Reference Service (SDRS)

The standard and quality of NHS dental treatment in Scotland is monitored by the SDRS. The SDRS is a small, independent team of experienced NHS dentists who make sure NHS dental treatment is carried out to a satisfactory standard.

Every dentist in NHS general practice and Public Dental Service can expect a number of patients to be monitored by the SDRS every year. As part of this quality monitoring process, the SDRS will:

- check that dentists are carrying out appropriate treatment
- examine patients' mouths either before or after treatment

Dental Reference Officer (DRO) Appointments

Cases are randomly selected by the SDRS to be examined by the DRO. Clinics are set up across all health board areas throughout the year, and we write to patients about a month in advance of a clinic date asking them to attend. We ask the patient to contact us to confirm their attendance and select an appointment time that is suitable.

It is only after patients book an appointment at a clinic that we contact the practitioner with the D4 notification letter and Post Treatment D4 Declaration form. We endeavour to give the practitioner at least seven days' notice of this, however, some patients wait until the last minute and only contact us a few days before the clinic date. In these circumstances, allowances are

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made for the short notice given to the practitioner and the DRO will take this into account when assigning the code to the report.

DRO reports

The SDRS will send a report to the dentist after the appointment. Patients can also request a copy of this report.

The dentist must respond to the report **unless** they receive a code 1 with no administrative codes. Previously, dentists have been asked to respond on the D150 letter that accompanies all reports that require a response. We have now introduced an editable PDF version of the D150R feedback form, which will be sent with the report and must be completed electronically and submitted to us by email within **fourteen days of receiving the report**. We will no longer send a reminder when we have not received a response to a D150 letter.

Failure to respond using the D150R feedback form may result in the recovery of fees where there is deemed to be a breach of the Regulations or there is noncompliance with the narrative and provisos of the [Statement of Dental Remuneration](#). If a dentist is unable to return the D150R feedback form within fourteen days of receiving the report, they should let us know at their earliest convenience and this will be taken into consideration should any follow-up action be required.

Please note: dentists do not need to respond on the D150R form if they have received a code 1 with no administrative codes.

Post Treatment D4 forms and D150R Feedback forms

The Post Treatment D4 Declaration and D150R Feedback forms **must** be completed electronically by typing your comments and supporting information into the boxes provided on the forms. These forms should not be handwritten. Completed forms should be sent by return email only to nss.sdrs@nhs.scot and should not be sent by post.

Please make sure you attach all radiographs relevant to the case when submitting the Post Treatment D4 Declaration to us.

Please remember we are unable to accept any emails containing patient identifiable data from non-NHS email accounts.

You can find out more information on how dental quality is monitored, as well as information on DRO examination codes [here](#).

Understanding eSchedule Reports

Our [website](#) has helpful information on the monthly payment schedule reports. The [eSchedules payment reports guidance](#) provides you with details on what is included in your reports and, in some cases, instructions on what to do if you have any queries.

This [user guide](#) will be help if you are new to using eSchedules or need some support with navigating through and exporting your reports.

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You can request online access to your payment schedule and practice reports [here](#) if you are not yet set up to view your eSchedules.

Patient details

Updating patient details – GP287

In cases where a patient's details have changed since their last appointment, such as a change of surname, please inform practitioner services through a [GP287 form](#). If the patient has informed you of a change of gender, please follow the appropriate steps as outlined on [this page](#).

This should also be used if you notice that the records showing on your schedules for a patient are wrong (e.g. incorrect spelling of their name or incorrect CHI).

Please submit a 287 form to our Customer Administration team (nss.psd-customer-admin@nhs.scot) to have these details corrected. You can find this form [here](#).

Patient registrations

Lifetime registration took effect from 1 April 2010. However, on 1 April 2009, the Scottish Government extended registration from 36 months to 48 months, ensuring that no patient registrations between the period 1 April 2009 and 31 March 2010 lapsed.

This means that patient registrations from 1 April 2006 will not have lapsed, as the registration period extended from 3 years to 4 years, and subsequently entered lifetime registration.

Therefore, any patient registered with your practice on or after 1 April 2006 will remain registered at your practice, unless:

- They have registered elsewhere
- They have left the country
- You have de-registered them using a GP200
- They have passed away

For further information on lifetime registrations, please read the following PCAs:

- [PCA2009\(D\)02.pdf \(scot.nhs.uk\)](#)
- [PCA\(D\)\(2010\)1 – introduction of non-time limited registration](#)

Patient Information Reports

A monthly report called 'Patient Information' is available through your dental payment schedule reports. This report details any registration changes and discrepancies.

Please remember that you can only run this report for the current month and that you cannot run them historically for previous months.

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Online Reports

Treatment, payment and patient reporting

The following reports are available:

Payment Schedule Reports

[Remittance Advice](#)

[Account 7 General](#)

[Account 7 Commitment](#)

[Additional Payments and Recoveries](#)

[Allowances and Superannuation](#)

[Item of Service Payments](#)

[Item of Service Detail](#)

[Item of Service Adjustments](#)

[Patient Information](#)

[Registrations Payment](#)

[Registrations Summary](#)

[Registrations Detail](#)

[Superannuation Cumulative](#)

The 'Registration Status Description' column may show the following changes:

- **Transferred within the practice** – the patient has registered with another dentist within the same practice as you, and the patient's registration with you will therefore cease
- **Transferred outwith the practice** – the patient registered with another dentist in another practice therefore the patient's registration with you will cease.
- **Automatic transfer** – this refers to patients who have recently turned 18 years old.
- **Bulk transfer – initial registration** – this patient has been bulk transferred to you and is now registered with you, and you will receive registration payments.
- **In receipt of reduced payment** – as this registered patient has not been seen for over 3 years, the registration rate will reduce to 20 per cent of the full rate.
- **Due to quality for reduced payment** – as this registered patient has not been seen for over 3 years, the registration rate will reduce to 20 per cent of the full rate on the date detailed
- **Bulk transferred** – this patient has been transferred to another dentist as part of a bulk transfer, therefore the patient's registration with you will cease
- **Withdrawn – deceased** – your registration will cease for this patient

Patient		Patient Sex	Patient D.O.B.	CHI Number	Registration Initial Date	Registration Status Description	Effective Date
BLOGGS	JOE	M	01/03/2007	0000000000	18/04/2024	Automatic Transfer	30/01/2025
DOE	JANE	F	01/01/2000	0000000001	20/01/2025	Transferred within the practice	23/01/2025
BLOGGS	JOE	M	01/01/1995	0000000002	20/01/2025	Bulk Transfer - Initial Registration	21/01/2025
DOE	JANE	F	01/01/1980	0000000003	20/01/2025	Due to qualify for reduced payment	25/01/2025
BLOGGS	JOE	M	01/01/2001	0000000004	20/01/2025	Transferred outwith the practice	26/01/2025
DOE	JANE	F	01/01/1976	0000000005	01/04/2024	In receipt of reduced payment	27/01/2025
BLOGGS	JOE	M	01/01/1930	0000000006	20/01/2025	Withdrawn - Deceased	28/01/2025

If a patient disputes the information in this report (for instance if they claim that they have not registered elsewhere) or if you think this is incorrect you should complete the dental 289 form for us to investigate:

Public Services Delivery Scotland

<https://www.nss.nhs.scot/publications/dental-administration-forms/>

The 'Linked Patients' section shows the master record that we hold and those entered on the claim if different.

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

Patient		Patient Sex	Patient D.O.B.	CHI Number	Claim Surname	Claim Forename	Claim Sex	Claim D.O.B	Claim CHI
BLOGGS	JOE	M	01/01/1990	0000000000	BLOGGS	JOHN	M	01/02/1990	

Common causes for these differences include incorrect spelling of names and various versions of patient names being submitted on claims, i.e. Benjamin being shortened to Ben.

When a patient has changed their surname since their last visit, you should submit the claim using their new surname but must also enter their previous surname in the previous surname box on your software. This allows us to amend the patient's master record when the claim comes in.

If our records are wrong, please provide the correct details using the dental 287 form.

Both the 287 and 289 forms can be found on our website [here](#).

All administrative forms should be returned to: nss.psd-customer-admin@nhs.scot

Reminders on PSD Administrative Processes

NHS email addresses

NHS emails are used for a variety of NHS communications and as a user identifier for some eDental services such as eSchedules, for example. We would, therefore, like to highlight the importance for all dentists to maintain their access. If you have an NHS email address, then please make sure that you are accessing this email address regularly to ensure you receive the relevant communications and the email address remains active.

Newly listed dentists should receive their email account from their local Health Board. Once you have received a new or updated NHS email address from your Health Board, we ask that you provide this to Practitioner Services. Please include your list number and send it by email to nss.psddental@nhs.scot.

List number updates

Registered patients on resigned list numbers

Please note that if a list number is going to be resigned, all patients registered to that list number will need to be transferred to another dentist using a **GP208** or **GP209**.

National Insurance numbers must be available for new list numbers

Please remember to include your National Insurance number on your GP21a or in your request for a new list number to the Health Board.

Public Services Delivery Scotland

Payment claims

Observations not needed for failure to return

Where a patient has failed to return, please ensure that the 'Patient Failed to Return' option has been ticked. This may also appear as 'PFTR' on your software. Observations are not required in these situations. Any observations added to these claims only result in delays in processing the claims as these need to be manually reviewed.

Observations not needed for radiographs or study models used from previous COT

If you are sending a claim where the radiographs or study models from a previous course of treatment have been used, please ensure that the options 'radiographs available' and/or 'study models available' have been ticked. Observations are not required in these situations. Any observations added to these claims only result in delays in processing the claims as these need to be manually reviewed.

Clinical observations are only required if a fee is requested.

MIDAS duplicates

Please ensure that claims for examinations and radiographs are sent for payment on the day of the appointment if no further treatment is needed. If further treatment is needed, please ensure that you add treatment items onto the existing claim and send this claim for payment when the treatment is complete. Remember that you should not open a new course of treatment if the claim for examination and radiographs is still open, as this will result in a duplicate and, therefore, a rejection.

GP200 – deregistration of patients

Please remember that GP200 forms should be sent to your local Health Board, who will then submit them to our Customer Administration team. The Health Board will need to complete Part 4 of the form for our Customer Administration team to process these requests.

Please also ensure that the patient is registered with the correct dentist on stamp and detailed on part 2 of the form. GP200s submitted with the wrong registration details may result in a rejection.

Patient details and CHI

If you have been advised that there is an issue regarding one of your patient's records, please ensure that you are using the correct CHI and date of birth after the issue has been rectified by practitioner services. This will prevent further patient matching issues.

GP287 – updating patient details

In cases where a patient's details have changed since their last appointment, such as a change of surname, please inform practitioner services through a [GP287 form](#). If the patient has informed you of a change of gender, please follow the appropriate steps as outlined on [this page](#).

This should also be used if you notice that the records showing on your schedules for a patient are wrong (e.g. incorrect spelling of their name or incorrect CHI).

Please submit a 287 form to our Customer Administration team (nss.psd-customer-admin@nhs.scot) to have these details corrected. You can find this form [here](#).

Contacting Practitioner Services by Email

Please send Practitioner Services email queries to the **specific team** they are intended for. Please do not send your email to multiple mailboxes, as this can result in delays to our response.

Claim and general enquiries

Enquiries relating to claims, and any general enquiries should be directed to our Customer Services team at nss.psddental@nhs.scot. This includes enquiries relating to rejected claims, code queries, and help understanding eSchedule reports.

Superannuation, bank mandates or allowance enquiries

If your enquiry relates to superannuation, any of the allowances or grants or bank mandates, please email our dental payments team at nss.psd-dental-payments@nhs.scot

Enter the allowance form number or correspondence matter in the subject field of the email. Responses to these enquiries will also be sent by email. Do not send any mail by post to our payments team. Please ensure that **all required fields** of the form have been completed before sending your form by email.

Administrative enquiries

If your enquiry relates to 283 adjustments to paid claims, 287 patient detail amendments, EDI PIN requests, stamp requests or eSchedule account set ups, please email our Customer Administration team at nss.psd-customer-admin@nhs.scot

Prior approval enquiries

If your enquiry relates to a prior approval, or a regulation 9 claim, please email our Prior Approval team at nss.psd-prior-approval@nhs.scot

Please note that if your query is related to a technical issue regarding an approval, for example issues uploading attachments you should contact your Practice Management System (PMS) supplier in the first instance. If you require further technical support, you should contact the Customer Service team at nss.psddental@nhs.scot

Providing Patient Identifiable Information (PII) in email

Patient identifiable information (PII) should always be sent from an NHS email which has additional encryption making sure the information is safe. Please note that we cannot process any PII received from a non-NHS email, and we also cannot send any PII details to a non-NHS email.

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If we receive PII data from a non-NHS email, we will send a separate email to advise that the respondent will have to resend their enquiry using an NHS email. Any email correspondence with Practitioner Services that contains PII data, will be labelled as: OFFICIAL-SENSITIVE

Practice Closure – Palo Alto return

Practitioner Services provide all practices with a Palo Alto device that enables connection to the NHS Scottish Wide Area Network (SWAN).

If a practice is closing, the Palo Alto box **must** be returned to practitioner services. Please post any Palo Alto devices that are no longer required to our Edinburgh office:

FAO Grahame Park
NHS National Services Scotland
1 South Gyle Crescent
Edinburgh
EH12 9EB

You must include all network and power cables that were originally provided with the box. If you require any support with the return, please contact our dental help desk by phone on 0345 034 2458 or by email at: nss.psddental@nhs.scot