

Statement of Dental Remuneration

September 2025

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MCGDent FDTFEd
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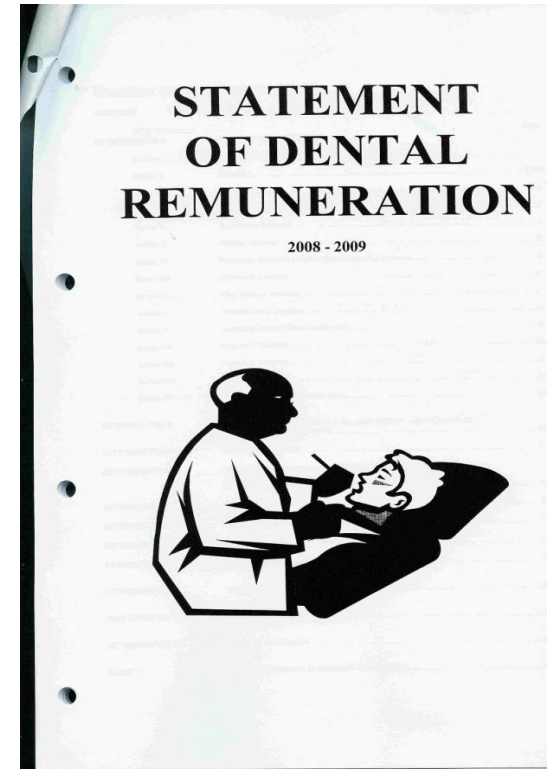
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**"You're not allowed to use
the sprinkler system to keep
your audience awake."**

Statement of Dental Remuneration (SDR)

Means by which the Business Services Organisation (BSO)
calculates how much to pay dentists who work in the General Dental Services (GDS)



Please Read the Rules!



Ideal Payment System

Tell me one thing you would like in an ideal payment system



Statement of Dental Remuneration (SDR)

I. Scale of Fees

II. Salaried Dentist / Emergency Service

III. Seniority Payments

IV. DFT Allowances

V. Maternity / Paternity / Adoption payments

VI. Long Term Sickness

VII. CPD Allowances

VIII. Non-domestic Rates

IX. Clinical Audit Allowances

X. Practice Allowance

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HS45 (Not Computerised)

Health Service Dental Payment Claim **HS45**
Please complete in BLACK ink.

Part 1: Patient's name, address and contact number
Patient's HS No. **745:1**
A G Farquharson Esq
543 Antrim Road
BELFAST
BT15 3BU

Part 2: PATIENT INFORMATION - complete in CAPITALS
SURNAME
FIRST
FORENAME
Date of Birth (YYMM)
City or Town
County
POSTCODE
Previous Surname
If changed since last visit
Date of Birth (YYMM)

Part 3: TYPE OF CLAIM
1. Initial
2. No response
3. New case of another dentist
4. Re-examination only
5. Re-examination at interval
6. New clinical

Part 4: REGISTRATION / Treatment history
Competitive or test visit
Examination - previous or new
Day Month Year

Part 5: SPECIALISED AND REMEDIATION
1. Patient under 18
2. Full restoration - H2 cert.
3. Partial restoration - H2 cert.
4. Extensive restorations
5. Missing number
6. Ages 18 to full-time education
7. Income Support
8. Working Families' Tax Credit
9. Disabled Person's Tax Credit
0. Income-based Jobseeker's Allowance

Part 6: SPECIAL CHILD FEE & ARRANGEMENTS
Under 12 where appropriate
Dental number
Other name
Referral
2 3 4

Part 7A: Exempt
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0201 1
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Registered HS Patients

- Registered for 24 months
1. Continuing Care if aged 18+ years
 2. Capitation if aged <18 years (includes e.g. exam, radiographs, S/P)



GDPs Must Provide

- “the care and treatment (which the patient is willing to undergo) necessary to **secure** and **maintain** oral health”.
- **Oral Health** is defined as “...such a **standard** of health of the teeth, their supporting structures and other tissues of the mouth, and of dental efficiency, as in the case of any patient is reasonable having regard to the need to safeguard his general health.”

Registered HS patients entitled to:

- Access to HS treatment and 3months' written notice of withdrawal of this service
- Emergency cover
- Written treatment plans / cost estimates
- Free replacement of certain restorations which fail within 1 year
- Care and treatment summary report when changing dentists

HS45DC

- Patient Treatment Plan
- Patient Estimate Form

HS45 DC

HEALTH SERVICE DENTAL CARE
PATIENT TREATMENT PLAN AND ESTIMATE FORM

Treatment Required	Approximate Total Patient Contribution
EXAM (already carried out) <input type="checkbox"/>	
X- RAYS <input type="checkbox"/>	
STUDY MODELS <input type="checkbox"/>	UP TO £20 <input type="checkbox"/>
FILLINGS (number of) FRONT TEETH <input type="checkbox"/>	£20 - £50 <input type="checkbox"/>
BACK TEETH <input type="checkbox"/>	£50 - £100 <input type="checkbox"/>
ROOT CANAL TREATMENT <input type="checkbox"/>	£100 - £700 <input type="checkbox"/>
EXTRACTIONS <input type="checkbox"/>	£200 - £400 <input type="checkbox"/>
CROWNS <input type="checkbox"/>	or <input type="text"/>
BRIDGES <input type="checkbox"/>	
DENTURES <input type="checkbox"/>	
GUM TREATMENT <input type="checkbox"/>	
OTHER TREATMENT <input type="text"/>	
NO TREATMENT REQUIRED <input type="checkbox"/>	

Patient's Name (PRINT)

Signature Date

Dentist/Receptionist Name (PRINT)

Signature Date

THIS FORM IS AN OUTLINE OF YOUR TREATMENT NEEDS AND AN ESTIMATE OF THE COST OF THAT TREATMENT UNDER THE HEALTH SERVICE. IF YOU ARE ALSO HAVING PRIVATE TREATMENT ASK YOUR DENTIST FOR A SEPARATE ESTIMATE OF THE COST OF THAT TREATMENT.

Notes:
Paying for Health Service Dental Treatment: Information on health service charges is contained in Leaflet HC12. Information on who is entitled to help with the cost of health service treatment is contained in Leaflet HC11. Both are available from many Post Offices and Pharmacies. *If you are claiming entitlement to free or reduced cost dental treatment you will be asked to show proof of entitlement.*

Emergency Arrangements: Whenever possible, contact your dentist about emergencies during normal surgery hours. If you need to be seen the same day, please get in touch as early in the day as possible. If an emergency arises when your dentist is closed, telephone the surgery for advice. If treatment is necessary he will do his best to arrange it within 24 hours.

Cancelling Appointments: If you have to cancel an appointment please give the surgery as much notice as possible. The dentist can make a charge if you do not give reasonable notice.

Other Types of HS Treatments

Occasional Treatment

- Not Registered
- Reduced list of treatments
- pp36-49

Incomplete Treatment

- Patient not returned > 2 months
- pp 50-53

Must offer HS option to registered HS patients if available

Patient can then opt for private option if they wish



Private Only Treatment

- Posterior Composites involving Occlusal Surface (there are exceptions to this)
- >60% gold crowns
- Metal ceramic crowns on Molars
- Other “cosmetic” crowns
- Sports Mouthguards
- Bleaching
- Implants
- Can’t “mix” on the same tooth



Free Treatment


- <18
- 18 + full time education
- Pregnant
- Baby < 12 months
- Income Support
- Pension Credit Guarantee
- Income-based Jobseeker's Allowance
- Income-related Employment and Support Allowance
- Tax Credit HS Exemption Certificate



HC1 Form

- HC2 Certificate – Full Remission
- HC3 Certificate – Partial Remission

HC1 **Claim for help with health and travel costs**



DO USE THIS FORM

- to claim help with paying health/travel costs for:
 - HS prescriptions • HS dental treatment • HS wigs and fabric supports
 - Sight tests, glasses and contact lenses • Travel to hospital for HS treatment
 You might be able to get them free, or get help with paying for them.
- You should use this form to claim help with the cost of Prison Visits and expenses prior to your visit.
- to claim help for: • you • your partner • your children
- at any time before you need treatment

You *don't* have to wait until you need help with paying health costs

Important Note – For people aged 60 or over your claim will be dealt with by the Pension Service, they can be contacted on 0808 100 6165.

DON'T USE THIS FORM

- you cannot get help if you or your partner have more than:
 - £16,000 in property, savings or any other money (don't count the place where you live)
 - £21,000 in property, savings or any other money if you live permanently in a care home.
 Note - if you have a partner, their property, savings or any other money is counted with yours
- you are already entitled to full help with health costs if you or your partner are getting:
 - Income Support
 - Pension Credit Guarantee Credit
 - Income-based Jobseeker's Allowance; or
 - You are named on or entitled to a Tax Credit HS Exemption Certificate

But, if you paid any health or travel costs *before* you were getting any of these benefits or became entitled to your Tax Credit HS Exemption Certificate, read the back cover of this form to see what to do to claim your money back.

Important Note – If you are living in a care home you may need a different form. Please contact your local Social Security or Jobs & Benefits office if you are under 60, or if you are aged 60 or over the Pension Service on 0808 100 6165.

HS

Free to All

- Abnormal Haemorrhage
- Removal of plugs / sutures
- Recement Bridge
- Denture Repairs
- Domiciliary Visits
- Recalled Attendance
- Capitation / Continuing Care payments



Patient's Charge = 80% of NHS Dentist's Fee

Up to Maximum of £384

Prior Approval Limit

£420(Dentist's Fee)
= £336 Patient's Charge

Some Time Bars

- Basic Exam (0101) – 5 complete calendar months
- Simple S/P (1001) – 5 complete calendar months
- CoCr P/- - 3 months after extn(prior approval)
- Bridge – 6 months after extn



Time Bars Examples

- 1. Patient has basic Exam on 1st Jan 2025

Soonest can claim fee for another basic Exam is 1st July 2025

- 2. patient has basic Exam on 31st Jan 2025

Soonest can claim fee for another basic Exam is 1st July 2025

“Same Dentist Rule” Applies to Time Bars

Any dentist with whom there are any financial arrangements or the partner, associate, deputy or assistant of any of them.



Exercise 1

- 01/01/25
- Exam
- S/P
- Total Dentist's Fee/Pt Charge

Exercise 1

• Exam	10.44	8.35
• S/P	<u>+16.57</u>	<u>+13.26</u>
• Total	£27.01	£21.61

Exercise 2

- 15/06/25
- Exam
- 2 BWS
- MOD amalgam filling LR6
- Total Dentist's Fee/Pt Charge

Exercise 2

• Exam	0.00	0.00
• 2 BWS	7.27	5.82
• MOD	<u>+35.53</u>	<u>+28.42</u>
• Total	£42.80	£34.24

Appropriate Radiographs

- Endodontics
- Crowns
- Bridges
- Surgical Extns
- 3+ Visit Perio



Examination & Report

- 1. Basic Exam (0101) – incl monitor perio
- 2. Extensive Exam (0111) – incl BPE charted, e.g. new patients
- 3. Full Case Assessment (0121) – incl full perio charting, e.g. 3+ visit perio, bridges and treatment of special complexity



Periodontal Treatment

- Simple S/P (1001) - 5 complete calendar months
- 2 visit S/P (1011) – 11 complete calendar months
- 3+ visit S/P (1021) –11 complete calendar months, full perio charting



Preventive Fissure Sealants (0701)

- 6s – under 9
- 7s – under 13
- 8s – within 2 yrs of eruption



Preventive Resin Restorations (1441)

- Must be fissure caries
- Any tooth (with pits & fissures)
- No age restriction
- If > Six PRR's then radiographs



Permanent Fillings

- Amalgam, composite, glass ionomer
- Includes any dressings, pulp capping etc
- Max fees per tooth when combination of fillings



Article 10(2) of Regulation (EU) 2017/852 on Mercury

- From 1 July 2018, dental amalgam shall not be used for dental treatment of
 - deciduous teeth
 - children under 15 years
 - pregnant or breastfeeding women
- except when deemed strictly necessary by the dental practitioner based on the specific medical needs of the patient.

Under 15 Years

- 1405 occlusal surface
- 1406 2 or more surfaces where the occlusal surface is involved
- 1407 2 or more surfaces: MO or DO
- 1408 3 or more surfaces: MOD

Pregnant or Breastfeeding

- 1471 Treatment of any surface of a permanent tooth

Endodontic Treatment

- Fee includes any opening canals for drainage, pulp extirpation, incision of abscess, dressings, preparation and root filling
- Same fee regardless of number of visits
- Appropriate radiographs



Porcelain Veneers

- Normally patient 17+ years old
- Upper Anteriors only (321/123)
- Additional fee for 1st tooth treated
- Prior Approval required



Common NHS Crowns

- Normally patient 17+ years old
- Metal Ceramic precious or non-precious (not molars)
- Metal precious or non-precious
- NB Additional fee for first crown in each arch
- Additional fees for post and cores



Bridges

- Usually require prior approval (if >£400, or >4units or posterior missing teeth)
- Normally patient 17+ years old
- >6 months after extraction
- 0121 Exam
- Study Casts
- Appropriate radiographs (IOPAs of abutment teeth, bitewings)
- Can do metal ceramic retainers on molar abutments
- Can do >60% gold retainers on molars and premolars



Extractions

- Forceps Extractions – Additional fee for each visit
- Separate fees for surgical extractions



Dentures

- Fee includes any clasps, rests, strengtheners and reasonable adjustments
- Acrylic
- Co/Cr- (Prior Approval required)
- Additional fee for lab constructed special trays
- Repairs are free to all patients
- Additions, relining etc are not



Therapeutic Acrylic Splints

- E.g. bruxist, migraine
- Code 2941
- Study Casts
- 3 months between 1st and last visit



Capitation Patients

- <18 years
- Capitation fee normally includes exam, radiographs, S/P
- Separate fees for fillings, pulpotomies and stainless steel crowns on deciduous teeth
- Can claim fee for any item of treatment including exam & radiographs if trauma causing #
to > 2/3 of clinical crown



Code 4001

- “For treatment necessary to secure and maintain oral health, but not included elsewhere in this fee scale”
- Requires **prior approval**

RDO Checks

- Examination by Dental Officer
- Records Checks
- FDs will have 10 record cards called for examination post-treatment



Is the SDR an Ideal Payment System?

Any Questions?

