

PRESS RELEASE



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SDR DEMANDS CLOSE STUDY, WARNS MDDUS

Scots dentists must pay careful attention to the terms of the Statement of Dental Remuneration (SDR) in order to avoid inaccurate claims which could lead to fees being withheld or disciplinary action, warns the Medical and Dental Defence Union of Scotland (MDDUS).

The UK-wide medical defence organisation is reminding dentists of their responsibilities regarding the SDR which is issued annually to NHS dentists in Scotland.

MDDUS points out that although the SDR is usually accompanied by a welcome uplift in fees, it can also necessitate additional tasks such as the updating of accounting software and recalculation of invoices.

While being acutely aware of the administrative workload under which dental practitioners are already working, MDDUS advises that time should be set aside to review the narrative that accompanies each item of service which is listed in the SDR.

Doug Hamilton, dental advisor, says: "It is all too easy for busy dentists to inadvertently misinterpret what is, after all, a fairly opaque document. Unless it is periodically re-read, these misconceptions might lead to a pattern of incorrect claims.

"We strongly recommend that all our dental members who are in receipt of an SDR study its wording carefully. Inaccurate claims can lead to withholding of fees, disciplinary action by the member's Health Board or even referral to the General Dental Council."

MDDUS stresses that as part of its clinical governance duties, Practitioner Services Division monitor for this possibility, with certain items being subject to particular scrutiny.

Hamilton adds: "As an example, in cases where a patient cannot afford the complex restoration of a broken down tooth yet will not consent to its extraction, placing glass ionomer coverage and making a claim for treatment under item 1461 may seem like a logical compromise.

"But the SDR says a claim for this item should only be submitted where extraction is "*contra-indicated by exceptional medical or dental conditions*", and such claims which did not satisfy these specific conditions have fallen foul of the regulations."

Some other difficulties encountered by MDDUS members relate to the provision of fissure sealants; sealant restorations; extractions of special difficulty and item 1(b) examinations.

"The narrative in relation to such items is quite restrictive, and may be suffixed by a number of important provisos," says Hamilton.

"Members who have concerns about the correctness of certain claims, or who receive a Practitioner Services enquiry, should not hesitate to contact MDDUS whose advisors have in-depth knowledge of dental remuneration systems across the UK."

Ends

For further information contact Colin Calder on 0141 616 2677 or 07850 510881.

Note to editors

MDDUS is a medical and dental defence organisation providing access to professional indemnity and expert medico- and dento-legal advice for doctors, dentists and other healthcare professionals throughout the UK. For further information on MDDUS go to www.mddus.com.