



Health
Sydney
Local Health District

Sydney Local Health District Endodontic Access Scheme (SEAS)

**Head of Specialist Services, Sydney Dental Hospital and Oral Health Services
May 2022**

Background and Purpose

Healthy teeth are an essential part of a person's social, emotional and physiological wellbeing. Missing teeth can impact an individual's ability to participate in social interaction and can reduce employment opportunities.

Sydney Local Health District (SLHD) recognises the importance of managing the terminal effects of dental disease and trauma which may lead to a requirement for endodontic treatment of a tooth. Endodontic care is often challenging for patients of the public health service to access in a timely manner. The sooner that teeth with endodontic infections are treated, the more likely the treatment is to have long-term successful outcomes. The Sydney Local Health District Endodontic Access Scheme (SEAS) will allow eligible patients to seek endodontic care with an appropriate participating practitioner within the private sector.

A key element of SEAS is that the scheme will enable selected patients to access endodontic care closer to where they live. Tertiary oral healthcare in the NSW public sector is concentrated in metropolitan areas, with many patients having to travel far to attend appointments. This scheme will enable SLHD to refer suitable patients from regional and remote locations to care external to Sydney Dental Hospital's usual capabilities. This objective supports the findings of Report no. 57 - Portfolio Committee No. 2 - Health outcomes and access to health and hospital services in rural, regional and remote New South Wales, which recommends that more specialist oral health services should be provided rurally and remotely, with more collaboration between the public and private sectors.

Provider Participation

All dental practitioners who hold current registration with the Dental Board of Australia as general dentists or as specialist dentists in endodontics, may apply to participate in the SEAS. Participating dentists should ensure that they have a high level of competency in providing endodontic care.

Participating dentists are required to commit to providing care to public patients in line with NSW Health's CORE values (Appendix 1) and the Dental Board of Australia Code of Conduct.

Participating dentists provide patients with a discharge summary and provide a copy of this to the original referring dentist/service. This is in compliance with the NSW Health [Oral Health Specialist Referral Protocols](#)¹.

Fee Schedule

- SEAS adopts a fee schedule for generalist and specialist endodontic care that draws from the fee schedules of the Department of Veterans' Affairs [Fee Schedule for Dental Services for Dentists and Specialists](#) (January 2021) and the [Oral Health Fee For Service Scheme](#) (OHFFSS). Only dental specialists in endodontics holding current registration with the Dental Board of Australia may claim the specialist fee tier within the SEAS schedule. The SEAS schedule can be found in Appendix 2.
- The recording of dental care items for the Scheme is to be in accordance with the Australian Schedule of Dental Services and Glossary.
- No co-payment may be charged to patients through SEAS.
- The SEAS schedule provides for some endodontic treatment codes which do not require further approval prior to commencing care. All other codes require pre-approval prior to the provision of treatment. These codes are listed in Appendix 3.
- The item codes included in the SEAS fee schedule reflect the present need for endodontic treatment of the SLHD service. In exceptional circumstances, the Head of Specialist Services may authorise a provider to claim other ADA codes not listed in the SEAS fee schedule, calculated based on the rates of the OHFFSS fee schedule and the DVA fee schedule.
- Approval for treatment must be given by SLHD in writing.

Notes on Process

- No fee may be charged or claimed for failure to attend or short notice cancellations (less than 24 hours).
- Patients who do not attend an appointment, or who provide less than 24 hours notice of cancellation for an appointment may be returned to Sydney Local Health District and not offered further treatment under SEAS. Providers may choose to offer another appointment in these circumstances should they wish.
- Good practice for participating SEAS providers would be to assess patient needs and treatment complexity before arranging a follow-up appointment(s) to provide treatment.
- Where a patient is assessed by a SEAS provider as being unsuitable for the endodontic treatment detailed on their referral, the patient should be discharged, being provided with a discharge summary of why the tooth is not restorable. A copy of this note must be provided to Sydney Local Health District when the voucher is claimed. In such instances, providers are entitled to claim item codes 014 and 022 (x1) only.
- Patients seeking care through the SEAS schedule will be assessed for complexity by Sydney Dental Hospital and characterised with due reference to the complexity of the referral.
- SEAS providers who assess patients to require more complex treatment falling outside of their scope of practice or competency should refer to an alternative provider participating within SEAS. Practitioners referring patients to another provider may claim the item codes 014 and 022 (x1) where appropriate. No further item codes may be claimed in the instance where a patient is referred to another provider for care.
- Patients referred to Sydney Dental Hospital and Oral Health Services for endodontic care are required to have been appropriately temporised.
- Rubber dam must be used for all treatment provided through SEAS. If rubber dam cannot be used, justification for endodontic treatment should be re-examined.
- SEAS vouchers expire 3 months after issue. Providers should confirm vouchers are still valid before treatment is provided. All treatment should be provided before the expiry of a voucher. If this is not possible, an extension may be granted at the provider's request, but this must be granted by SLHD in writing.

Complexity of Care

All patients referred through SEAS will be assessed for the complexity of the endodontic care that they require.

All cases will be assessed as requiring:

- A. Moderately complex treatment; or,
- B. Complex treatment.

These categories are based on the Sydney Dental Hospital and Oral Health Services Endodontic Referral Guidelines² relating to assessing the complexity of endodontic care^{3,4}.

When practitioners accept a case referred through SEAS, they are responsible for assessing the complexity of the case in relation to their competency and experience.

A. Moderately Complex Treatment

Treatment considered to be of moderate complexity, manageable by dentists with further qualifications and experience in managing endodontic treatment at a sub-specialist level:

- I. Root canal curvature $>30^\circ$ but $<45^\circ$
- II. Locating and negotiating canals NOT considered negotiable in the coronal 1/3 but patent thereafter, based on radiographic and clinical evidence
- III. Canal(s) and chamber visible but reduced in size, possible pulp stones

- IV. Difficulties with local analgesia that cannot be resolved by routine measures
- V. Locating and negotiating where the referring GDP has attempted but experienced problems with location, instrumentation or obturation of the root canals
- VI. Teeth > 25mm in length
- VII. Incomplete root development
- VIII. Limitation of mouth opening (between 25mm and 35mm inter-incisal opening).
- IX. Removal of fractured posts, less than 8mm in length.
- X. Well condensed root fillings short of ideal working length with evidence of likely patency beyond existing root filling where previous treatment did not involve complicating factors
- XI. Simple pre-treatment modification required for rubber dam isolation
- XII. Minimal apical resorption
- XIII. Complicated crown fracture of mature teeth or subluxation

B. Complex Treatment

Treatment considered to be of a difficult complexity, manageable by dentists with advanced qualifications and experience in undertaking endodontic treatment at a specialist (or equivalent) level:

- I. Root canals curvature >45°
- II. Recurved (S-shaped) root canals
- III. Canals are NOT considered negotiable through their entire length based on radiographic and clinical evidence
- IV. Developmental tooth anomalies present, e.g. bifid apex, complex branching of root canal(s), dens in dente, gemination, and C-shaped canals).
- V. Assessment and planning the long-term management of severely traumatised teeth where severity extends beyond enamel & dentine; usually involving multiple teeth
- VI. The management of teeth with iatrogenic damage or pathological resorption
- VII. Severe limitation of mouth opening (inter-incisal opening less than 25mm)
- VIII. Complicated retreatments are required (e.g. well-fitting posts longer than 8mm; posts thought to be associated with a perforation; carrier-based obturations; silver points; fractured instruments; well condensed root fillings to length; overfilled roots with apical lesions).
- IX. Major iatrogenic errors e.g. large ledges, blocked canals, perforations where these can be rectified
- X. Periradicular surgery
- XI. Extensive pre-treatment modification required for rubber dam isolation
- XII. Indistinct canal path
- XIII. Canal(s) not visible
- XIV. Extensive apical resorption / Internal resorption / External resorption Complicated crown fracture of immature teeth Horizontal root fracture Alveolar fracture Intrusive, extrusive or lateral luxation or avulsion
- XV. Cracked teeth with periodontal complications
- XVI. Combined endodontic/periodontic lesion root amputation prior to endodontic treatment

Seeking Approval to Provide Treatment

- Some items on the SEAS schedule require pre-approval before providers may deliver care to patients attending through the scheme.
- Providers seeking pre-approval must send the following items to the nominated email address for the scheme:
 - Full treatment plan for the endodontic treatment proposed
 - A full list of all item numbers that the provider plans to claim (both those that do not require further approval and those where approval is being sought), and a justification from the provider as to why these are required.
 - Any relevant radiographs and photographs
- SLHD may request further information from providers prior to a decision relating to approval being given.

Following Treatment

After endodontic treatment is completed, successful claiming of endodontic treatment items requires:

- Providers must place an adequate coronal restoration. Teeth that are not suitable to receive a final composite restoration should not receive endodontic treatment.
- All patients must be provided with an itemised discharge notice detailing:
 - The tooth (or teeth) that has received endodontic care
 - The treatment provided including:
 - Number of canals cleaned and obturated
 - Canal filling material used
 - Material used for final restoration
 - Any post-operative advice given to the patient
 - Any further requirements for restorative care relating to the tooth (or teeth) that has received endodontic care.
 - Advice given to the patient on seeking future dental care (if any)
- A copy of this discharge notice must be sent to the referring practitioner as detailed in the referral patients will attend with. This is a requirement of participation in the SEAS initiative.

Sydney Local Health District Caveat

Sydney Local Health District retains discretion with regards to accepting a business or practitioner for approval to the Scheme. A business or practitioner may be denied approval for a number of reasons, including and not limited to:

- Not providing the required documentation
- Concerns about service standards, or the practitioner's registration with the Dental Board of Australia
- Infection control standards are inadequate and/or
- No demand for the Scheme in the geographical region where the practitioner or business are located.

Complaints and Disputes

Complaint/dispute handling processes are to follow NSW Ministry of Health policies and guidelines.

Complaints can be managed:

- At the point of service
- Through a staged process, or
- Through referral to an external body/agency or to the Head of Specialist Services of the Sydney Dental Hospital and Oral Health Services

- If a dispute cannot be satisfactorily resolved or the business and/or practitioner does not comply with the terms and conditions of SEAS, Sydney Local Health District retains discretion to remove a business or practitioner from the Scheme.

Complaint/Dispute Issues

Complaint/dispute issues may include but are not limited to:

- Receipt of a complaint from a patient, family member or person external to Sydney Local Health District
- Complaints or concerns raised by other clinicians
- Coronial Inquiries or Health Care Complaints Commission (HCCC) investigations
- Investigation of an incident
- Concerns about questionable claims or the quality of care, or
- Compliance with the Dental Board of Australia Code of Conduct.

Compliance

Participants in the program agree to provide SLHD with access to dental records for all patients accessing care on the scheme. This includes all clinical records which SLHD deems relevant, provided to SLHD in a digital format (where appropriate). Auditing may include:

- Financial accountability (errors of accounting and claiming) and
- Clinical auditing (ensuring the quality of clinical care is within a reasonable standard and that accurate and complete medical records are kept for each patient and each visit).

Mandatory Participation Requirements

Businesses

- Company/Trading name
- Australian Business Number (ABN)
- Relevant bank details
- Certification of Public liability insurance to the value of \$20 million
- Relevant Workers Compensation Insurance policy
- Radiation Management Licence
- Completed Health Share vendor form

Practitioners

- Australian Health Practitioner Regulation Agency (AHPRA) registration number and conditions of registration
- Certification of Professional indemnity insurance of \$20 million
- Working with Children Check number

Terms and Conditions

Proof of Documentation

All mandatory documentation must be certified by an appropriately authorised person.

Maintaining Participation

To maintain approval to participate in the Scheme:

Businesses must update their profiles on changes to: their contact and banking details; practitioner(s), service delivery type(s) and LHD(s); and the annual renewals of:

- Public Liability Insurance certificate
- Workers Compensation Insurance policies, and
- Radiation Management Licence.

Practitioners must immediately update their profiles with any changes of their AHPRA registration status including AHPRA registration number and any conditions on registration; contact details; banking details (if applicable); and also the renewal of:

- Professional indemnity insurance annually, and
- Working with Children Check (WWCC) every five (5) years.

Patient Care

- All practitioners are required to:
- Review and be satisfied with the patient's medical history
- Document the informed consent from the patient before carrying out any treatment that is covered by the voucher
- Complete all the required details of treatment provided on the voucher form
- Ensure that the patient signs the voucher at completion of treatment verifying that they have received the treatment claimed, and
- Provide post-treatment instructions and any reasonable after care management.
- All practitioners understand they:
 - must fully discuss any treatment that is not covered by the voucher with the patient for which they will be charged (as part of a private agreement)

Businesses and Practitioners Joint Roles and Responsibilities

All businesses and practitioners are required to:

- Be compliant with current infection control standards
- Cooperate with Sydney Local Health District in resolving complaints from patients and disputes about claims
- Check that vouchers have not exceeded the expiry date and, if expired, contact Sydney Local Health District prior to commencement of the treatment
- Check the patient's identity, current Medicare Card, and Centrelink concession status if the patient is an adult before treatment is started.

Processing of Vouchers

To ensure payment the following must occur:

- The patient must provide an original SEAS voucher that has been approved by Sydney Local Health District
- The dental care outlined on the voucher must have been completed by the expiry date on the voucher, unless otherwise agreed with Sydney Local Health District
- All details of the voucher must be completed
- The voucher must be forwarded by email to Sydney Local Health District within 30 days after completion of treatment.
- Payment will be proceeded within 45 days.

Non-payment of a voucher may result if the voucher is received after 30 days from the date treatment is completed.

Contact

Practitioners seeking: to register as providers; advice regarding the scheme; or, pre-approval in relation to providing treatment within SEAS, should contact SLHD-SDHEndoVoucher@health.nsw.gov.au

References

1. NSW Health. Oral Health Specialist Referral Protocols. PD2011_071. 2011.
2. Sydney Local Health District. Sydney Dental Hospital and Oral Health Services Endodontic Referral Guidelines. SLHD_OHPG2021_002. 2021.
3. NHS England and NHS Improvement. Commissioning Standard for Restorative Dentistry. England; 2019.
4. American Association of Endodontists. AAE Endodontic Case Difficulty Assessment Form and Guidelines. 2019.

Appendix 1

NSW Health CORE Values

The NSW Health CORE values build upon the public sector core values of integrity, trust, service and accountability.

The NSW Health CORE values are:

- Collaboration
- Openness
- Respect
- Empowerment.

We strive to reflect these CORE values in our workplaces and in our conduct by demonstrating the following characteristics:

Collaboration

- We are an organisation that believes in its people and is people centred.
- Our leaders are role models for our core values and they are accountable.
- We willingly work in teams to provide excellent levels of care.
- Our teams are strong and successful because we all contribute and always seek ways to improve.
- We encourage and recognise outstanding performance.

Openness

- We want our community to have confidence in their local health services.
- We foster greater confidence and cooperation through open communication.
- Our performance is open to public scrutiny through patient and employee surveys.
- We welcome and use feedback as a tool to do better.
- We encourage those around us to speak up and voice their ideas as well as their concerns by making it clear that speaking up is worthwhile and valued.
- We communicate clearly and with integrity.

Respect

- We never lose sight of our patients' fundamental right to be treated with dignity, compassion and respect.
- We listen to patients, the community and each other.
- We welcome new ideas and ways of doing things to improve patient care.
- We treat our colleagues and patients with dignity and respect, and care about those around us.

- Each of us is responsible for workplace culture and performance.
- We have zero tolerance for bullying and no-one, no matter how senior, is exempt.

Empowerment

- We encourage and support local decision making and innovation.
- We accept that with local decision making comes responsibility and accountability.
- We make best use of resources and experience to meet patient and community expectations.
- While we seek direction from our leaders, we believe that everyone is empowered to make a difference in our workplace.
- As individuals, we can improve our workplace culture and performance by addressing issues that hold us back.
- We strive for individual excellence on behalf of our patients and our teams, and to deliver the best possible care and services.

Appendix 2

Item Numbers Claimable without Pre-approval of Treatment Plan

Notes:

- Item number 445 may be claimed a maximum of 3 times without prior approval.
- Item numbers relevant to treatment provided through SEAS not listed below may be claimed following approval from the Head of Specialist Services, Sydney Dental Hospital and Oral Health Services.
- While peri-radicular surgery is supported by SEAS where appropriate, prior approval is necessary before treatment may commence.
- Item number 039 may be claimed once per tooth that is part of a SEAS treatment plan.

Diagnostic Item Numbers

| Item number | Treatment | Fees \$ (GDP/Specialist) |
|-------------|---|-------------------------------------|
| 014 | Consultation | 38.90/67.55 |
| 022 | Small radiographic film, First exposure | 37.65/37.65 |
| 022 | Small radiographic film, Subsequent exposure | 30.95/30.95 |
| 039 | Computed tomography of the skull or parts thereof | 159.65/159.65 |
| 061 | Pulp testing | No fee payable; part of examination |

Endodontic Item Numbers

| Item number | Treatment | Fees \$ (GDP/Specialist) |
|-------------|---|--------------------------|
| 415 | Chemo-mechanical preparation - 1 canal | 217.80/422.05 |
| 416 | Chemo-mechanical preparation - additional canal | 103.75/215.70 |
| 417 | Obturation - 1 canal | 212.15/422.05 |

| | | |
|-----|---|---------------|
| 418 | Obturation - each additional canal | 99.20/215.70 |
| 419 | Extirpation pulp/debridement of root canal (s) | 140.25/176.25 |
| 445 | Exploration and/or negotiation of a calcified canal – per canal | 112.50/150.05 |
| 451 | Removal of root filling - per canal | 112.50/150.05 |
| 453 | Removal or bypassing fractured endodontic instrument | 93.85/131.35 |
| 455 | Additional appointment for irrigation and/or dressing of the root canal system – per tooth Appointment for irrigation only – cannot be paid with any other item. | 95.63/ 150.05 |

Restorative Item Numbers

| Item Number | Treatment | Fees \$ (all practitioners) |
|-------------|---|-----------------------------|
| 574 | Metal band | 41.75 |
| 521 | Adhesive restoration - one surface - anterior tooth | 117.40 |
| 522 | Adhesive restoration - two surfaces - anterior tooth | 142.55 |
| 523 | Adhesive restoration – three surfaces - anterior tooth | 168.80 |
| 524 | Adhesive restoration - four surfaces - anterior tooth | 195.10 |
| 525 | Adhesive restoration - five surfaces - anterior tooth | 229.30 |
| 531 | Adhesive restoration - one surface - posterior tooth | 125.40 |
| 532 | Adhesive restoration - two surfaces - posterior tooth | 157.45 |
| 533 | Adhesive restoration - three surfaces - posterior tooth | 189.25 |
| 534 | Adhesive restoration – four surfaces - posterior tooth | 213.25 |
| 535 | Adhesive restoration - five surfaces - posterior tooth | 246.30 |

Appendix 3

Other Endodontics Item Numbers Requiring Pre-Approval

| Item Number | Treatment | Fee \$ (GDP/Specialist) |
|-------------|--|-------------------------|
| 412 | Incomplete endodontic therapy (tooth not suitable for further treatment) | 108.04/203.15 |
| 431 | Periapical curettage – per root (Item cannot be claimed with 432 and 434) | 273.66/428.25 |
| 432 | Apicectomy – per root | 273.66/434.65 |
| 433 | Exploratory periradicular surgery Not claimable with items 431, 432, 434, 436, 437 and 438. | 115.09/169.35 |
| 434 | Apical seal - per canal Includes apicectomy and periapical curettage. | 328.31/ 563.40 |
| 436 | Sealing of perforation | 172.34/402.40 |
| 437 | Surgical treatment and repair of an external root resorption – per tooth | 239.36/394.40 |
| 438 | Hemisection | 220.19/374.40 |
| 457 | Obturation of resorption defect or perforation (nonsurgical) Limit of one per tooth | 95.63/150.05 |
| 458 | Interim therapeutic root filling – per tooth | 127.54/168.75 |