

Guidance on continuation of treatment procedure.

Practitioner Services Division (PSD) **Continuation of treatment procedure, GP17.**

In situations where a course of treatment is started under one list number and completed under another the following procedure should be adopted.

Original List Number

The treatment carried out on the original list number is detailed at part 3 of first GP17 (1) and the relevant list number stamped on part 2.

Part 2 Date of registration/acceptance of treatment.
Must show the date the course of treatment was started.

Part 2 Date of completion of treatment.
Must be one day prior to the date the new dentist takes over.

Note: The date of completion must be prior to the resign date of the original list number.

Part 4a Patient's Declaration.
Place a cross at "I wish to be registered/continue to be registered with this dentist", in order that the appropriate treatment may be claimed.

Part 4b/4c Patient's Status.
Relevant part of claim must be signed by the patient.

Part 6 Dentist's Observations
Write "CONTINUATION CASE PART 1" in this box.

Part 7 Dentist's Declaration.
Must be signed by the dentist who has carried out the treatment.

Part 8 Patient's Declaration on Completion.
Must be endorsed "CONTINUATION CASE PART 1".

Second List Number

The remaining treatment that is to be completed under the second list number should be detailed at part 3 of the second GP17 (1) and the relevant list number stamped at part 2.

Part 2 Date of Registration/Acceptance of Treatment.
Must show the date the second dentist started treating the patient.

Note: as this is a new list number, the date of registration/acceptance of treatment must be on or after the start date issued to this list number.

- Part 2 Date of Completion of Treatment.
Must show the date when all treatment was completed.
- Part 3 Must enter the fees according to the fee scale applicable on the date of acceptance of the first claim form.
- Part 4a Patient's Declaration.
Place a cross at "I wish to be registered/continue to be registered with this dentist".
- Part 4b/4c Patients Status
The relevant signature box (4b or 4c) must be endorsed "CONTINUATION CASE PART 2".
- Part 6 Dentist's Observations
Write "CONTINUATION CASE PART 2" in this box.
- Part 7 Dentist Declaration on Completion.
Must be signed by dentist completing treatment.
- Part 8 Patient's Declaration on Completion.
Must be signed by patient when treatment has been completed.
Please ensure that the same treatment fee code items are not claimed on both forms.

Patients Charge

The statutory charge should be calculated for the treatment claimed on each form. It is the second dentist's responsibility to ensure that the patient is not being charged more than the maximum patient charge for the whole course of treatment. The maximum charge should be calculated using the date of acceptance entered on the first claim form.

BOTH FORMS MUST BE STAPLED TOGETHER, CLEARLY MARKED CONTINUATION CASE AND SUBMITTED FOR THE ATTENTION OF THE CUSTOMER ADMINISTRATION DEPARTMENT UNDER SEPARATE COVER.

Practitioner Services Division (PSD)

Continuation of treatment procedure, Electronic Dental Interchange (EDI).

To be used by all practices transmitting claims electronically, when a course of treatment is started under one list number and completed under another.

Original List Number

When the first part of the treatment has been completed on the original list number enter all work that has been done. Make sure a completion date is entered in this claim as the treatment on the original list number is complete. Make sure "Continuation Case Part 1" is entered in the observations and submit this for payment via the EDI.

If transmitting via EDI it is not necessary to wait for the whole course of treatment to be completed before payment is made to the original list number.

Second List Number

When the second part of the treatment has been completed on the second list number enter all work completed on this list number. Make sure "Continuation Case Part 2 continued from List Number"(enter original list number here) is entered in the observations and submit for payment via EDI as normal.

Stating which list number completed the first part of the course of treatment will allow PSD to match the claims correctly and will reduce the amount of potential rejections that would be caused if the list number was not stated.

Patient Information

Only one GP17PR is required for the entire course of treatment showing all patient details with patient's signatures provided at the start and completion of treatment.

If the course of treatment is above the Prior Approval (PA) limit and has been approved the approval will stand for the entire course of treatment (providing the treatment plan does not alter). This means the dentist will not have to seek re-approval for treatment done on the second list number (providing the treatment plan has not changed) but will be required to state the approval date of the course of treatment in observations in the EDI transmission.

Please be aware that practitioner services do not require a copy of any GP17 forms to be sent for EDI records for any claim that has been transmitted and paid via the EDI system which has had approval.