

## NHSBSA Dental Services

### In the spotlight

#### Article 3: Mouthguard Q&A – Appropriate claiming August 2019

The term 'mouth guard' is broad and could be used in several scenarios. This article aims to answer questions about appropriate claiming related to appliances that might be called 'mouth guards'. Clinical notes and laboratory dockets would be expected to detail a more specific term for the appliance being provided.

#### **Can I provide a sports guard on the NHS?**

No. A sports guard cannot be provided on the NHS. If a practice wishes to provide a patient with a sports guard this would need to be provided as private treatment.

#### **Can my GDS contract provide a patient with a retainer, space maintainer or digit deterrent device?**

Orthodontic appliances including retainers (eg Essix retainers), space maintainers or digit deterrent devices must only be provided by a practice who are contracted to carry out orthodontic treatment. They require orthodontic diagnosis and treatment planning. If your practice is only contracted to perform UDAs, you are unable to provide orthodontic appliances or carry out orthodontic work. Please direct the patient to an NHS orthodontic practice for this treatment.

#### **What band of treatment is a bite raising appliance (BRA)/ Nightguard/ Poly Occlusal Cover/ occlusal appliance?**

This type of appliance could be appropriate to either band 2 or band 3 treatment, depending on where the appliance is made. It would be band 2 if it is a chair-side made bite raising appliance and band 3 if it is made in the laboratory (supported by evidence of a laboratory docket/prescription).

As with any Band 2 or Band 3 claim, an examination and an assessment of the patient's oral health, and completion of the planned treatment (that the patient is willing to undergo) is a requirement.

If clinical records were subsequently reviewed following submission of a claim, then there would be an expectation that the record would include a description of the presenting symptoms, diagnosis, clinical justification for the type of appliance, fitting and adjustment of the appliance, and a review after treatment. Study models and a review appointment are not technically required for submission of a Band 3 claim relating to providing a patient with a laboratory constructed occlusal appliance, however good practice would suggest an expectation that:

- a) Study models were available as a reference point for assessment of possible future tooth surface loss (where applicable)
- b) At least one follow-up appointment was arranged in that same course of treatment to assess the fit of the appliance / patient symptoms, tolerance & compliance etc.

The number and rate of claims submitted for these types of appliances are monitored. If unusual patterns of treatment activity are identified, clinical records may be reviewed as part of monitoring. Specialist opinion suggests that these types of appliances are seldom justified for children or for patients with physiological wear.

**What band of treatment is the construction of special trays for the application of medicaments like fluoride?**

The schedules in the Dental Charges Regulations only describe definitive elements of dental care. Fluoride trays are not an item of care, they are a tool used to deliver care. As such they are not treatment and no UDAs are appropriate with regard to the provision or use of these trays, the UDA is actually credited for the application of the fluoride itself (Band 1 if no additional treatment appropriate to Band 2/3 provided).

**Can I provide a mouthguard on the NHS to act as a bleaching tray?**

No. Patient care involving external bleaching cannot be provided as part of an NHS Course of Treatment.

**Is an anti-snoring device (including mandibular advancement splint) available on the NHS?**

Anti-Snoring devices are not normally available on the NHS unless the patient has been diagnosed with sleep apnoea from a current secondary care NHS consultant and they have been given a treatment plan that states that an Anti-Snoring device is needed as part of their plan.

The banding of the device would depend on the way it was made. If it is made in a laboratory it would be band 3. If it is not made in a laboratory, it would be band 2. As with any Band 2 or Band 3 claim, an examination and an assessment of the patient's oral health, and completion of the planned treatment (that the patient is willing to undergo) is a requirement.

**One of my patients experienced permanent incisor avulsion and I had to make a mouthguard to act as a trauma splint. What Band of treatment is a mouthguard as a trauma splint?**

This type of appliance could be appropriate to either band 2 or band 3 treatment, depending on where the appliance is made. It would be band 2 if it is a chair-side made splint and band 3 if it is made in the laboratory (supported by evidence of a laboratory docket/prescription). As with any Band 2 or Band 3 claim, an examination and an assessment of the patient's oral health, and completion of the planned treatment (that the patient is willing to undergo) is a requirement.