

# SA Dental Schemes Portal Quick Guide

## Scope: Private Practices Participating in SA Dental Schemes

### 1. Log In



- Go to **SA Dental Schemes Portal**:
- <http://sadentalschemes.sahealth.sa.gov.au/>
- Select **Continue with Digital ID** (**Please note**: Basic identity strength required)
- Select **myID** and log in using the **mobile app** and the **code** on the screen
- Select **Practice/Vendor**

### 2. Verify Authorisation When Booking Patient Appointment

*Pilot: Contact Schemes Unit to request Authorisation Number before appointment*



- Dashboard **Verify authorisation**
- Verify **Authorisation code** (SMS/Letter)  
→ Enter Code → Next Step
- Verify **patient details**, **Treatment start date** and **Concession card expiry date**  
*Ensure correct concession card type is selected e.g. HCC or PCC*
- Select **Verify patient**

### 3. Start Claim - Verify Authorisation & Patient Details

*(First Appointment Only)*



- Select **Claims** (*default page*) → **Start new claim**
- Verify **Authorisation code** (SMS/Letter)  
*Pilot: Authorisation Code provided by the Schemes Unit*  
→ Enter Code → Next Step
- Enter **patient details**
- **Sight** and enter **valid Concession card** details

### 4. Add Item Codes to Treatment



- Select **+Add item** and record:
  - **Date** of service (*first row only if multiple items*)
  - **Item code** (*type or drop-down list*)
  - **FDI/Services** (*if required*)
- For multiple services on the same date:  
**+Add item** to add additional rows
- ● **Blue** warnings = guidance only
- ● **Red** errors must be fixed before proceeding
- Save frequently



### 5. Notes

- Add **Notes** if required (*visible by practice & Schemes Unit*)
- Supporting documents (e.g. x-rays, *clinical notes*) → email Schemes Unit when requested.



### 6. Save & Continue (Multiple Appointments)

- Save at end of appointment, after changes or starting new task
- For subsequent appointments:
  - Search patient identifiers
  - Select **Edit/Modify**
  - **+Add item** and update the **Date** of services for each item row
- **Save**
- Status: remains **Unsubmitted** until final submission



### 7. Review & Submit Claim (Final Appointment Only)

- Confirm all claim details match the patient record
- Ensure **treatment is complete**
- Resolve any **red** errors
- Select **Provider Declaration** and enter provider details
- **Save** → **Submit claim**
- Status update to **Submitted for Patient Confirmation**



### 8. Patient Confirms Treatment Received via SMS

- Patient sent **SMS link** to confirm treatment received
- Once **confirmed** → claim sent to Schemes Unit for processing
- If **unconfirmed** → claim is **automatically forwarded** to Schemes Unit after 5 days (*Schemes Unit may request clinical notes*)



### 9. Schemes Unit Review & Process Claim

- Claims processed in **order of date received**
- Claim are assessed against the **Dental Schemes Schedule**
- Claim status updates to **Approved** or **Rejected**
- Practice receives **email notification** confirming patient details, claim status, and claimed amount