



SA DENTAL

Private Provider Dental Schemes

CROWN & BRIDGE DENTAL SCHEME

Schedule of Items and Fees

As at 1 April 2026

Applies in conjunction with the SA Dental handbook
'Dental Schemes – Information for private practitioners'

Overview of the Crown & Bridge Dental Scheme

The Crown & Bridge Dental Scheme provides financial coverage for dental treatment provided by registered dentists in private practice for eligible patients. In addition to indirect restorative treatments available at the Adelaide Dental Hospital and some Community SA Dental clinics, this scheme provides a mechanism for SA Dental to provide patients with access to indirect restorative treatments in a timely manner depending on budget availability.

Business Rules and Guidelines

PATIENT ELIGIBILITY

This scheme is available only for patients who have been referred by the SA Dental for indirect restorative treatment, after having their general treatment completed through SA Dental.

In general, to be eligible to receive treatment under this scheme, a patient must be either an adult holder or an adult dependent of a holder of a current Pensioner Concession Card or Health Care Card (where adult is defined as aged 18 years or older). Patients who do not produce evidence of the above card entitlement at the start of the course of treatment are not eligible for treatment under this scheme. It is therefore a requirement for the private practice to verify the patient's eligibility before commencing treatment under the scheme.

Patients will be able to access the scheme only if they have been issued with a specific approval form by SA Dental. Treatment should not be commenced until the patient presents the approval form to the private practice. If a dentist provides treatment where prior written approval has not been given by SA Dental, SA Dental is under no obligation to provide financial coverage for that treatment.

SCOPE OF TREATMENT

Patients will generally receive financial authorisation for a prescribed course of treatment or treatment plan. This will be clearly printed on the patient's approval form (e.g. crown 14). In the event that the private dentist wishes to clarify or discuss the prescribed treatment plan, he/she should call the Specialist Restorative Unit Adelaide Dental Hospital on 8222 8331.

A schedule of items and associated fees for the range of treatment services that can be provided under the scheme applies. In general, the SA Dental schemes offer a range of dental services that caters for many, but not all, dental treatment needs – in accordance with public health principles.

SA Dental uses the definitions for item numbers as they appear in the *Australian Dental Association 'An Australian Schedule of Dental Services and Glossary' 13th Edition (2022)* to describe the item numbers used in the scheme. This SA Dental schedule outlines the additional guidelines and business rules that apply in this scheme.

If a patient requires dental care that cannot be provided under the scheme the patient, can elect to obtain that care as a private patient or be referred back to the local SA Dental clinic to clarify what is available through public dental services.

If a patient experiences an emergency dental episode not associated with the prescribed course of indirect restorative treatment, he/she should be advised to contact their local Community SA Dental clinic for assessment and management of their emergency.

If a patient experiences an emergency dental episode associated with the prescribed course of indirect restorative treatment, the private dentist should contact the Specialist Restorative Unit Adelaide Dental Hospital on 8222 8331 to discuss what options may be available for the patient.

TREATMENT FEES

This schedule details the items and associated fees for the range of treatment services that can be provided under this scheme. In general, fees are based on the contemporaneous *Australian Government Department of Veterans Affairs* fee schedule for dental services. Whilst the *Department of Veterans Affairs* fees are published on 1 July each year, SA Dental schemes fees are usually updated on 1 April the following year.

There is no cap on the fees payable under this scheme, as the fees claimable will be dictated by the course of treatment prescribed by SA Dental. This will be clearly printed on the patient's approval form (e.g. crown 14).

PATIENT FEES – FINANCIAL INFORMED CONSENT

Patients are required to pay fees towards their course of crown and bridge treatment. There is no cap on the patient fee as this is directly linked to the course of treatment prescribed by SA Dental.

It is the responsibility of individual private dentists to obtain financial informed consent as part of the patient consent process, i.e. ensure that the patient is advised of their fee prior to treatment commencing and agrees to pay the fee for the treatment provided.

It is also the responsibility of individual private practices to institute appropriate business practices for the collection of the patient fees, as SA Dental is not liable for the patient fees in the event that the patient fails to pay their fee. Private practices may request pre-payment of patient fees prior to having indirect restorations made.

CLAIM FORM PROCEDURES

Particular information is required by SA Dental when treatment is provided under a scheme – information about the patient, the treatment services provided, and which business SA Dental is to pay for providing the treatment. It is important to submit all necessary information to SA Dental, as failure to do so is likely to result in delays in payment. Consequently, SA Dental requires all claims for payment for treatment provided under the scheme to be submitted on the official SA Dental scheme claim form, as this is specifically designed to ensure that all the necessary information can be easily included.

SA Dental will process the claim form and arrange for payment of the treatment fee generated – less the patient fee – upon completion of the course of treatment and submission of the completed claim form to SA Dental Schemes Unit.

The Dental Schemes Unit Dental Schemes Officers check all schemes claim forms to ensure that they have been completed with all necessary information. The claim forms are checked in accordance with the guidelines and business rules in this schedule and in any other published SA Dental schemes documentation, which is provided to private providers. Where a claim form is not completed as required, or where some aspect of the claim is unclear, the Dental Schemes Officers will contact the private practice to seek clarification. As the schemes claim form constitutes a tax invoice, incomplete or incorrect forms will be returned to the private practice for correction. Treatment services that are claimed outside of the guidelines and business rules of the scheme will not be considered for payment by SA Dental.

Items and Fees

DIAGNOSTIC SERVICES		Patient	SADS	Total
		\$	\$	\$
014	Consultation Maximum one (1) per claim	13.00	63.50	76.50
018	Written report Maximum one (1) per claim Report must be included with the claim form – private dentist retains a copy	0.00	56.75	56.75
Intraoral periapical radiograph – per exposure <ul style="list-style-type: none"> MUST indicate tooth and reasons for radiograph (e.g. <i>PA 45 – review periodontal and apical health prior to commencing crown</i>). Maximum two (2) periapical radiographs in total per claim 				
022	First periapical radiograph per day	7.50	37.15	44.65
022_SUB	Subsequent periapical radiograph taken on the same day as 022	6.00	30.75	36.75
061	Pulp testing – per visit	0.00	0.00	0.00
071	Diagnostic model – per model Maximum two (2) per claim [i.e. one (1) per arch] To be used for examination and treatment planning purposes only for multiple indirect units (e.g. multiple crowns, bridgework) but not for a single indirect unit – private dentist retains Not to be claimed for a working model for indirect restoration manufacture	12.00	60.85	72.85
072	Photographic records – intraoral Maximum one (1) per claim A copy of <u>both</u> pre-treatment and post-treatment photographs must be included with the claim form – private dentist retains the original photographs	6.50	32.70	39.20
073	Photographic records – extraoral Maximum one (1) per claim A copy of <u>both</u> pre-treatment and post-treatment photographs must be included with the claim form – private dentist retains the original photographs	6.50	32.70	39.20

PRE-RESTORATIVE ASSOCIATED SERVICES		Patient	SADS	Total
		\$	\$	\$
113	<p>Re-contouring pre-existing restoration(s)</p> <p>Description must be included (e.g. 15 – recontoured existing MO restoration prior to commencing 14 crown)</p> <p>To be claimed when the dentist re-contours a pre-existing restoration on a tooth adjacent to or opposing the tooth/teeth that is receiving the prescribed indirect restoration/s (e.g. crown 14) where such re-contouring is required in order to provide an optimal outcome for the indirect restoration/s. For example, a mesial restoration on tooth 15 may require re-contouring to ensure appropriate contour and contact point with a crown on tooth 14, whereas an occlusal restoration on tooth 44 may require re-contouring to ensure optimal occlusion with a crown on tooth 14.</p> <p>Not to be claimed for re-contouring of other restorations/s which are not directly related to the provision of the prescribed indirect restoration/s.</p>	4.00	20.60	24.60
117	<p>Bleaching, internal – per tooth</p> <p>To be claimed only for an anterior tooth which is to receive the prescribed indirect restoration as printed on the front of the approval form (e.g. crown 21) prior to provision of the indirect restoration</p>	39.00	192.10	231.10
231	<p>Gingivectomy – per tooth</p> <p>To be claimed only for a tooth which is to receive the prescribed indirect restoration as printed on the front of the approval form (e.g. crown 21) prior to provision of the indirect restoration</p>	43.00	212.05	255.05

DIRECT RESTORATIONS				
These items are to be claimed when the dentist provides a definitive direct restoration on a tooth adjacent to or opposing the tooth/teeth that is receiving the prescribed indirect restoration/s (e.g. crown 14) where such restoration is required in order to provide an optimal outcome for the indirect restoration/s. For example, tooth 15 may require a restoration to ensure appropriate contour and contact points with a crown on tooth 14, whereas tooth 44 may require a restoration to ensure optimal occlusion with a crown on tooth 14.				
These items are not to be claimed for other restorations/s which are not directly related to the provision of the prescribed indirect restoration/s.		Patient	SADS	Total
		\$	\$	\$
511	Metallic restoration - one surface - direct	21.00	104.55	125.55
512	Metallic restoration - two surfaces - direct	26.00	127.90	153.90
513	Metallic restoration - three surfaces - direct	31.00	152.75	183.75
514	Metallic restoration - four surfaces - direct	35.00	174.45	209.45
515	Metallic restoration - five surfaces - direct	40.00	199.05	239.05
521	Adhesive restoration - one surface - anterior tooth - direct	23.50	115.60	139.10
522	Adhesive restoration - two surfaces - anterior tooth - direct	28.50	140.35	168.85
523	Adhesive restoration - three surfaces - anterior tooth - direct	33.50	166.45	199.95
524	Adhesive restoration - four surfaces - anterior tooth - direct	39.00	192.10	231.10
525	Adhesive restoration - five surfaces - anterior tooth - direct	45.50	226.05	271.55
531	Adhesive restoration - one surface - posterior tooth - direct	25.00	123.60	148.60
532	Adhesive restoration - two surfaces - posterior tooth - direct	31.50	155.05	186.55
533	Adhesive restoration - three surfaces - posterior tooth - direct	37.50	186.75	224.25
534	Adhesive restoration - four surfaces - posterior tooth - direct	42.50	210.05	252.55
535	Adhesive restoration - five surfaces - posterior tooth - direct	49.00	242.65	291.65

Additional Notes re Using Restorative Item Numbers

511, 512, 521, 522, 531

Class III restorations are recorded as two-surface restorations. Where the adjacent tooth is absent and there is no proximal contact, they are recorded as a one-surface restoration.

Class V restorations less than 3mm horizontal dimension should be described as a one-surface restoration.

Multiple restorations placed in the same tooth at the same appointment

Where two or more individual restorations are placed in the same tooth on the same visit using the same class of restorative material (i.e. Composite and GIC are both considered of the same class, Adhesive Restoratives) the fee applicable will be equivalent to that of a single restoration comprising total number of surfaces restored. For example when the following restorations are placed in the same posterior tooth at the one visit, the charted treatment is:

- 532 mesio-occlusal (MO) adhesive restoration
- 532 disto-occlusal (DO) adhesive restoration
- 531 buccal (B) adhesive restoration

The fee claimed for restorations on that tooth is a single adhesive restoration of the combined surfaces restored (MO i.e. the fee is the same as that for item 534).

Where different restorative materials are used (e.g. metallic and adhesive) when restoring a single tooth on the same day, the adhesive item code to be claimed.

1. Amalgam MO 512 and GIC buccal 531 to claim 533
2. Resin MO 532 and GIC buccal 531 to claim for 533

INDIRECT RESTORATIONS				
These items are to be claimed for provision of the prescribed indirect restorative services (e.g. crown 14) only as printed on the front of the approval form.		Patient	SADS	Total
		\$	\$	\$
541	Metallic restoration - one surface - indirect	110.00	545.45	655.45
542	Metallic restoration - two surfaces - indirect	141.00	696.60	837.60
543	Metallic restoration - three surfaces - indirect	183.50	909.10	1092.60
544	Metallic restoration - four surfaces - indirect	205.00	1015.05	1220.05
545	Metallic restoration - five surfaces - indirect	229.50	1136.15	1365.65
551	Tooth-coloured restoration - one surface - indirect	138.00	681.50	819.50
552	Tooth-coloured restoration - two surfaces - indirect	159.00	787.80	946.80
553	Tooth-coloured restoration - three surfaces - indirect	196.00	969.30	1165.30
554	Tooth-coloured restoration - four surfaces - indirect	235.50	1166.65	1402.15
555	Tooth-coloured restoration - five surfaces - indirect	252.50	1250.65	1503.15
556	Tooth-coloured restoration - veneer - indirect	168.50	833.50	1002.00
611	Full crown - acrylic resin - indirect	187.00	925.35	1112.35
613	Full crown - non-metallic - indirect	272.00	1345.70	1617.70
615	Full crown - veneered - indirect	302.60	1219.25	1521.85
618	Full crown - metallic - indirect	239.50	1186.50	1426.00
643	Bridge pontic - indirect - per pontic	209.00	1033.50	1242.50
649	Retainer for bonded fixture - indirect - per tooth	79.50	394.00	473.50

OTHER RESTORATIVE SERVICES		Patient	SADS	Total
		\$	\$	\$
575	Pin retention - per pin Maximum two (2) claimable per anterior or premolar direct restoration Maximum four (4) claimable per molar direct restoration May be claimed in conjunction with all direct restorations	5.50	28.40	33.90
577	Cusp capping - per cusp Maximum two (2) per premolar direct restoration Maximum four (4) per molar direct restoration May be claimed only in conjunction with premolar and molar direct restorations	6.00	30.60	36.60
595	Removal of indirect restoration Maximum one (1) per tooth To be claimed only for a tooth which is to receive the prescribed indirect restoration as printed on the front of the approval form (e.g. crown 21) prior to provision of the indirect restoration	19.50	97.20	116.70
597	Post - direct Maximum one (1) claimable per anterior tooth Maximum two (2) claimable per premolar or molar tooth May be claimed in conjunction with all direct restorations	30.50	149.95	180.45
625	Core for crown including post - indirect May be claimed only in conjunction with items 611,613,615,618 To be claimed only for a tooth which is to receive the prescribed indirect restoration as printed on the front of the approval form (e.g. crown 21) prior to provision of the indirect restoration	64.50	320.60	385.10
627	Preliminary restoration for crown - direct May be claimed only in conjunction with items 611,613,615,618 To be claimed only for a tooth which is to receive the prescribed indirect restoration as printed on the front of the approval form (e.g. crown 21) prior to provision of the indirect restoration	27.00	132.15	159.15
655	Removal of crown Maximum one (1) per tooth To be claimed only for a tooth which is to receive the prescribed indirect restoration as printed on the front of the approval form (e.g. crown 21) prior to provision of the indirect restoration	12.50	61.70	74.20

POST-RESTORATIVE ASSOCIATED SERVICES		Patient	SADS	Total
		\$	\$	\$
965	Occlusal splint Maximum one (1) per claim Provision of this service includes any review/maintenance for the splint for the first six (6) months following its provision Written prior financial authorisation is required to claim this service following provision of the indirect restorative service(s) - contact the Specialist Restorative Unit at the Adelaide Dental Hospital on 8222 8331 for case-specific details	108.00	533.55	641.55