

Feidhmeannacht na Seirbhíse Sláinte, Seirbhís Aisíocaíochta Cúraim Phríomhúil Bealach amach 5 an M50, An Bóthar Thuaidh, Fionnghlas Baile Átha Cliath 11, D11 XKF3

Guthán: (01) 864 7100 Facs: (01) 834 3589

Health Service Executive, Primary Care Reimbursement Service Exit 5, M50, North Road, Finglas, Dublin 11, D11 XKF3 Tel: (01) 864 7100 Fax: (01) 834 3589

15th May 2018

Circular 015/18

Dear Dentist,

The DTSS provides access to certain dental treatments to eligible persons aged 16 and over, living in the community. Reimbursement for services provided by DTSS contractors is administered by the Primary Care Reimbursement Service (PCRS).

The first phase of online services enabling DTSS contractors to submit claims using a dedicated online facility is progressing well. Over 27% of DTSS dentists are actively using the facility and availing of earlier payments.

The second phase delivers the ability for dentists to apply for prior approval online enabling patients to receive treatment in a more timely fashion. Similar to the first phase of the project, the PCRS has engaged with a number of your colleagues and Principal Dental Surgeons to pilot this phase of the project. Participants found that using the system requires little effort with

- 80% of participants found the online approval system easy or very easy to use
- 80% of participants would recommend the online approval system to their peers

The HSE wishes to commence deployment of the second phase of the project to those dentists who are currently using the online facility. This deployment will occur on a phased basis commencing with CHO Areas 3, 6 and 9 on 16th May 2018 cumulating with full deployment available to all participating dentists on 25th June 2018.

With the introduction of Online Approvals the DTSS dentist will be linked to the PDS in the area where their practice is located. Going forward all approval requests regardless of where the patient originates from should be sent to the PDS where you are located.

The schedule of deployment is detailed as follows:

Stage	CHO No.	LHO Description	Principal Dental Surgeon	Deployment Date						
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First	3	North Tipperary/East Limerick	Maurice Delaney	16 th May 2018						
	3	Clare	Maurice Delaney	16 th May 2018						
	3	Limerick	Maurice Delaney	16 th May 2018						
	6	Wicklow	Anne Marie Brady	16 th May 2018						
	6	Dun Laoghaire	Vida Reynolds	16 th May 2018						
	6	Dublin South East	Grainne Dumbleton	16 th May 2018						
	9	Dublin North	Christine Myers	16 th May 2018						
	9	Dublin North Central	Rosarii Mc Cafferty	16 th May 2018						
	9	Dublin North West	Rosarii Mc Cafferty	16 th May 2018						
Second	4	Cork	Mike Thornton	28 th May 2018						
	4	Kerry	Niamh Galvin	28 th May 2018						

Stage	CHO No.	LHO Description	Principal Dental Surgeon	Deployment Date
Third	1	Cavan/Monaghan	Fergal Connolly	18 th June 2018
	1	Donegal	Nader Farvardin	18 th June 2018
	2	Sligo/Leitrim	Andrew Bolas	18 th June 2018
	2	Galway	Joe O Connor	18 th June 2018
	2	Mayo	Anne Mc Keon	18 th June 2018
Fourth	8	Longford/Westmeath	Michael Mulcahy	25 th June 2018
	8	Laois/Offaly	Michael Mulcahy	25 th June 2018
	8	Louth/Meath	Evelyn Connolly/Catherine	25 th June 2018
			Donnelly	
	5	Carlow/Kilkenny/South	Marie Tuohy	25 th June 2018
		Tipperary		
	5	Waterford	Padraig Creedon	25 th June 2018
	5	Wexford	Padraig Creedon	25 th June 2018
	7	Kildare/West Wicklow	Siobhan Doherty	25 th June 2018
	7	Dublin West	Caitriona Roe/Ruth Cusack	25 th June 2018
	7	Dublin South City	Caitriona Roe/Ruth Cusack	25 th June 2018
	7	Dublin South West	Philip Mulholland	25 th June 2018

To support dentists an updated user manual is available on your Dental Application suite which details the process for submitting a request for approval. Alternatively our support team is available to assist you on 01-8915756.

If you haven't already registered and are Interested in moving to Online?

If you are interested in registering to process your claims online please complete the attached Security Certificate Requisition Form which can be emailed to cert.info@hse.ie. To participate Practices will need to be

- a) Active DTSS contractors providing a full range of DTSS services and submitting claims for payment.
- b) DTSS contractors who have access to broadband.
- c) DTSS contractors who meet HSE requirements and have received authorisation from the PCRS to access the DTSS online facility following the completion of a security certificate requisition form (Attachment 1).
- d) DTSS contractors who have the ability to upload forms.

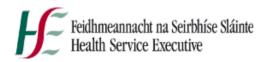
The PCRS look forward to working with DTSS contractors to continue to transform DTSS reimbursement.

Yours sincerely,

Que Marie Story

Anne Marie Hoey

Primary Care Reimbursement & Eligibility



Primary Care Reimbursement Service Security Certificate Requisition Form Primary Care Contractor (PCC) v1.5

Information and Data Protection Notice

- 1. A security certificate is required to authenticate your electronic communications with PCRS, e.g. electronic claim submissions.
- 2. Security certificates can issue on the basis of provisional contract numbers. Full contract setup is required for reimbursement.
- 3. The latest version of this form is always available on online services section at www.pcrs.ie. Please check the version number at the top right of this document. Requisitions must be made on the latest version of the form.
- 4. Please use BLOCK CAPITALS and complete all sections. *Mobile Number is mandatory*. Forms which cannot be processed will be returned to sender by post.
- 5. **Data Protection Notice:** Personal data collected by the HSE is used for the purpose of providing a health service. It is required, stored, processed and disclosed to other bodies in accordance with the laws relating to proper treatment of personal data.

Part 1: Requisition Type																													
Additional: In cases where a first or second etc. computer is to be configured to communicate with PCRS. Replacement: In cases where the PCC had a certificate for which a replacement is now required. Standard: Secure codes will be dispatched by post within 5 working days from receipt. Requisitions must be received at PCRS by the 15th of each month . Emergency: Secure codes will be issued by email directly to a PCC and only if the requisition can be verified. If an email address is not available, an emergency requisition will not be processed.																													
Please Insert "Additional" or "Replacement"																													
Please Insert "Standard" or "Emergency"																													
If emergency, state the reason. This will be reviewed and the requisition processed as an emergency only in certain cases . Late applications are not treated as emergencies.																													
Part 2: Applicant's Details																													
PCC Number:											PCC Stamp																		
Trading Name:																													
First Name:																													
Surname:																													
Phone Number:																													
Mobile Number:													PC	C Add	dress	::													
Fax Number:																													
IDC Number:																													
VAT Number:																			-						_		ı		1
E-mail Address:																										_			
Please note that the details above are mandatory and are used to verify the requisition from a security perspective. The Irish Dental Council number of the PCC is required.														ental															
Part 3: Declai	ration																												
I the primary care contractor am seeking to be provided with a security certificate which will allow my computer system to communicate with the PCRS. I ensure that all appropriate physical security arrangements are in place regarding my computer infrastructure (e.g. personnel access to and use of it). I ensure that secure arrangements are made to destroy old computer infrastructure as it is replaced. I have appropriate contractual arrangements in place from a security point of view with any third parties who assist with my computing infrastructure.													puter as it is																
Signature:															Date	d:		d		d	m		m	у	,	У)	,	у
Please scan and email the completed, signed and stamped form to cert.info@hse.ie . Alternatively, post the form to; IT Operations Drimery Care Deimbursement Service Evit E MEO North Boad Fingles Dublin 11 Fewed forms not assented.																													