



8 April 2019

Dear CHAS Dental Partners,

UPDATES TO THE COMMUNITY HEALTH ASSIST SCHEME (CHAS) DENTAL GUIDELINES

MOH has reviewed and amended the CHAS Dental Guidelines to ensure that care provided by CHAS dental clinics remains appropriate and relevant for patients. The Government also earlier announced that Merdeka Generation (MG) cardholders can enjoy special subsidies at CHAS dental clinics. These changes are highlighted in yellow in **Annex A¹**, and will take effect **from 1 November 2019**. Please comply with these updated guidelines as your CHAS claims will be audited based on them.

2. In summary, the changes are as follows:

- A. Special subsidy rates for MG cardholders. MG cardholders can enjoy up to \$16 - \$261.50 in dental subsidies per procedure, depending on the procedure.
- B. Amended guidelines on claims for consultation. Consultation should be charged and claimed only for initial consults, or in follow-up visits where there are new clinical indications that suggest the need for a new treatment plan and a full oral examination and update of patient's dental chart is required.
- C. Clinical justification required for the appropriate use of topical fluoride. Clinics must assess patient's need and risk before claiming for topical fluoride procedure. Low-to-moderate risk patients should only require 1 topical fluoride procedure in a calendar year. Only high-risk patients, such as those who present with cavities in the past 12 months, would be expected to require 2 topical fluoride procedures in a calendar year.
- D. Shared limit for "Removable Denture, Partial, Simple" and "Removable Denture, Partial, Complex". Patients will only be able to claim up to 1 upper and 1 lower set of partial dentures within 3 calendar years.
- E. Subsidy for fillings no longer differentiated by material (i.e. amalgam / tooth-coloured). The subsidy rates for fillings have been updated, and subsidy for fillings will only be differentiated by complexity (i.e. simple / complex).

¹ This Circular is issued pursuant to Clause 5.5 of Part III of the CHAS Agreement. Table 6 in Part V of the CHAS Agreement (containing the CHAS Guidelines) is amended accordingly.

- F. Removal of the “Incision and Drainage” procedure from the list of CHAS subsidised procedures. Standalone incision and drainages are typically required only for more complex conditions and would be managed by a specialist or at tertiary dental care (e.g. A&E, hospital dental clinics etc.). When an abscess is related to a tooth and can be resolved by a root canal, extraction or deep scaling procedure, a separate incision and drainage procedure would usually not be required.

Further Information

3. A list of Frequently Asked Questions (FAQ) can be found in **Annex B**. More information can also be found on the CHAS portal (www.chas.sg) and MOH website (www.moh.gov.sg).
4. If you have any further queries, you may contact the CHAS Clinic helpline (6632 1199) / email (dental@CHAS.sg).
5. Thank you.

Yours sincerely,



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Updated CHAS Subsidies and Claim Guidelines for CHAS Dental Clinics (with effect from 1 November 2019)

S/N	Procedure	Updated Definitions/Limits	Subsidy Rates			
			Orange	Blue	MG	PG
1	Consultation	<p>1) Up to 2 consultations per calendar year, with a 6-month interval between the 2 consultation claims in the year</p> <p>2) Only for (i) initial consults for new patients; or (ii) follow-up visits where there are new clinical indications that suggest the need for a new treatment plan <u>and</u> a full oral examination and update of patient's dental chart is required.</p> <p>3) A full oral examination should be conducted at each consultation, and all dental records must be updated, including base charting, and kept for audit. Dental charting must include the presence /absence of teeth, restorations and their conditions, documentation of soft tissue condition (e.g., presence of soft tissue lesions such as ulcers, white patches, dry mouth, etc.), condition of the dental ridges, condition of existing dentures (if</p>	-	\$20.50	\$25.50	\$30.50

		any), as well as relevant medical history. 4) Cannot be claimed for reviews during or after a dental treatment procedure.				
2	Extraction, Anterior	1) Up to 4 extractions per calendar year (shared across all types of extraction i.e. 4 extractions in total for anterior and/or posterior extractions).	-	\$28.50	\$33.50	\$38.50
3	Extraction, Posterior	2) Only claimable if extraction is done on natural teeth.	-	\$68.50	\$73.50	\$78.50
4	[Merged] Filling, Simple	1) Up to 6 fillings per calendar year (shared across all types of fillings). 2) Cannot be claimed for fissure sealants/ flowable composites, for the purpose of gap closure, and any repeat filling on the same tooth (within 3 months of an earlier filling treatment). 3) Simple filling refers to Class I, V or VI based on Black's classification. Complex filling refers to Class II, III or IV based on Black's classification. 4) All cervical restoration (CL V) will be coded as a simple filling regardless of	-	\$30.00 <i>(Updated from previous:</i> <i>Filling, Amalgam, Simple: \$20.50</i> <i>Filling, Tooth-coloured, Simple: \$35.00)</i>	\$35.00	\$40.00 <i>(Updated from previous:</i> <i>Filling, Amalgam, Simple: \$30.50</i> <i>Filling, Tooth-coloured, Simple: \$45.00)</i>

		size of extensions to the adjacent surfaces (e.g. mesial, distal, occlusal, buccal, palatal).				
5	[Merged] Filling, Complex		-	\$50.00 <i>(Updated from previous: Filling, Amalgam Complex: \$43.00 Filling, Tooth-coloured, Complex: \$68.50)</i>	\$55.00	\$60.00 <i>(Updated from previous: Filling, Amalgam Complex: \$53.00 Filling, Tooth-coloured, Complex: \$78.50)</i>
6	Removable Denture, Complete (Upper or Lower)	1) Up to 1 upper and 1 lower denture per <u>3 calendar years</u> . 2) Claims can only be submitted upon successful issue of denture to patient. Claims cannot be made in advance before successful issue of denture.	\$170.50	\$256.50	\$261.50	\$266.50
7	Removable	1) Up to 1 upper and 1 lower denture per	\$65.50	\$98.00	\$103.00	\$108.00

	Denture, Partial, Simple (Upper or Lower)	<p>3 calendar years (shared across all types of partial removable dentures)</p> <p>2) Removable Denture, Partial, Simple: For replacement of less than 6 teeth.</p>				
8	Removable Denture, Partial, Complex (Upper or Lower)	<p>3) Removable Denture, Partial, Complex: For replacement of 6 or more teeth</p> <p>4) Claims can only be submitted upon successful issue of denture to patient. Claims cannot be made in advance before successful issue of denture.</p>	\$140.00	\$210.00	\$215.00	\$220.00
9	Denture Reline/Repair	<p>1) Up to 1 upper and 1 lower denture reline/repair per calendar year.</p> <p>2) Cannot be claimed for upper denture reline/repair if upper removable denture (complete or partial) has been claimed within 3 months. Same applies for lower. This 3-month limit applies to all dentures (regardless of new or old denture).</p> <p>3) Denture Reline is defined as an intraoral procedure with the addition of any material to the tissue surface of the denture to improve the fit/ contact between the denture and oral</p>	\$50.00	\$75.00	\$80.00	\$85.00

		<p>structures.</p> <p>4) Denture Repair is defined as an addition of denture teeth/ retentive elements (e.g. rests/ clasps), addition of missing acrylic segments of denture, and restoration of 2 or more damaged/separate denture components (e.g. a “cracked” denture).</p> <p>5) Required to document reasons why a patient requires denture reline/repair, and how the denture repair/reline was carried out.</p>				
10	Permanent Crown	<p>1) Up to 4 permanent crowns per calendar year.</p> <p>2) Only for crowns and bridge abutments on natural teeth. Claims can be made for onlays, 3/4 crowns, 7/8 crowns, etc, that provide coronal coverage and cuspal protection.</p> <p>3) Only for crowns fabricated from metal (excluding stainless steel), ceramics, zirconia, and metal-ceramic combinations.</p> <p>4) Only claimable if permanent crown is</p>	\$84.50	\$127.50	\$132.50	\$137.50

		<p>done on permanent dentition.</p> <p>5) Cannot be claimed for implant-supported crowns, mini-implant supported crowns, inlays, resin retained bridges (acid etched bridges) and pontics for bridges.</p> <p>6) Claims can only be submitted upon completion of crown procedure. Claims cannot be made in advance.</p>				
11	Re-cementation	<p>1) Up to 2 re-cementations per calendar year.</p> <p>2) Only for dislodged permanent crowns and bridges, inlays and onlays with coverage on natural teeth as abutments (excludes implant crowns). Cannot be claimed for dislodged implant retained crowns.</p>	-	\$35.00	\$40.00	\$45.00
12	Root Canal Treatment (Anterior)	<p>1) Up to 2 RCTs per calendar year (shared across all types of RCT).</p> <p>2) Pulpectomy procedure, X-Ray and any intermediate restoration (if necessary) must be included as part of whole RCT procedure, and not claimed separately.</p>	\$109.50	\$164.00	\$169.00	\$174.00
13	Root Canal Treatment (Pre-molar)		\$140.00	\$210.00	\$215.00	\$220.00

14	Root Canal Treatment (Molar)	<p>3) Cannot be claimed for deciduous (milk) teeth</p> <p>4) Cannot be claimed for re-treatment of a previously root canal treated tooth.</p> <p>5) Claims can only be submitted upon completed treatment. Claims cannot be made in advance.</p> <p>6) The following documentation must be present when claiming for RCT (for audit purposes):</p> <ul style="list-style-type: none"> • Pre root canal treatment and/or working length determination radiograph(s). • Post obturation radiograph • Relevant treatment notes 	\$170.50	\$256.50	\$261.50	\$266.50
15	Incision and Drainage	<p>1) Up to 1 I&D per visit and 2 I&Ds per calendar year.</p> <p>2) For acute infections such as endodontic and periodontal abscesses, and the treatment of infected sockets. This definition does not apply to periodontal curettage or root planning.</p> <p>3) If Incision & Drainage is claimed, it must be supported with relevant radiographs and/ or photographs.</p>	-	\$20.50		\$30.50

		<p>These supporting documents should be maintained for at least 3 years for audit purposes.</p> <p>4) If curettage of infected socket is to be claimed, it should be claimed in the subsequent visit following the extraction if it is on the same site (i.e. Immediate curettage of socket in the same site after an extraction, where both these procedures are on the same visit, are not claimable.)</p>				
15	Polishing	<p>1) Up to 2 polishing per calendar year, and 1 polishing per visit.</p> <p>2) Cannot be claimed for polishing of dentures/ removable prosthesis.</p>	-	\$20.50	\$25.50	\$30.50
16	Scaling	<p>1) Up to 2 scaling per calendar year, and 1 scaling per visit.</p> <p>2) Cannot be claimed for scaling of dentures/ removable prosthesis.</p>	-	\$30.00	\$35.00	\$40.00
17	Topical Fluoride	<p>1) Up to 2 topical fluoride per calendar year, and 1 topical fluoride per visit.</p> <p>2) If topical fluoride is claimed, it must be supported with relevant base charting, and kept for audit. Dental charting</p>	-	\$20.50	\$25.50	\$30.50

		must include relevant medical history and assessment of patient's need for topical fluoride, for e.g. patient with cavity in the past 12 months				
18	X-ray	<p>1) Up to 6 X-rays per calendar year.</p> <p>2) Can be claimed for OPG, PA and bitewings. Each of these can be claimed as a single X-ray, not multiple X-rays.</p> <p>3) Cannot be claimed for cone-beam CTs and Lateral Cephalometric Radiographs.</p> <p>4) Radiographs must be kept for audit. Each radiograph should be labelled with the patient's NRIC and the date the radiograph was taken.</p>	-	\$11.00	\$16.00	\$21.00

Frequently Asked Questions (FAQs)

Q: When will the revised dental subsidy schedule take effect?

A: The revised dental subsidy schedule will take effect from 1 November 2019. For example, for CHAS dental visit dates from 1 Nov 2019 onwards, subsidies will no longer be provided for the procedure “Incision and Drainage”.

Q: Will my CHAS patients be informed? How should I advise them when they approach me for treatment for the procedures which have been revised?

A: The revised dental subsidy schedule will be made available on the CHAS website, so that patients can stay informed of the range of subsidies available to them. Should patients approach you with questions, do inform them accordingly on the subsidised procedures which have been revised. Alternatively, please redirect them to the CHAS hotline 1800-275-2427 (1800-ASK-CHAS).

Q: How will my patients’ procedure balances for partial dentures and/or fillings be affected come 1 November 2019?

A: For partial dentures, if your patient has already claimed 1 upper and 1 lower (or more) partial dentures in the past 3 CYs (including current CY), the patient will not be able to claim any more partial dentures for the current CY. Otherwise, your patient can claim up to 1 upper and 1 lower partial denture. Per the existing process, clinics may appeal to exceed the limits (e.g. if there are clinical justifications), and appeals will be assessed on a case-by-case basis.

Procedure balances for fillings will not be affected.

Q: Will the Public Assistance card (PA) cardholders receive the subsidies under the Merdeka Generation tier?

A: No, Singapore Citizens who are on Public Assistance (PA) will continue to receive full subsidies for treatment of conditions covered under CHAS. As per existing arrangement, PA cardholders are eligible for the same scope of subsidized dental treatment as Blue cardholders, albeit they will receive full subsidy for their claimable bill. To receive subsidies at participating CHAS GPs and dental clinics, Singapore Citizens on PA will need to produce their PA card and NRIC during the visit, and we encourage clinics to check with their patients at the point of registration.

Q: How will the revised dental guidelines affect my clinic operations?

A: We do not expect that there will be extensive changes to clinic operations. There might be a need to make changes on your Clinic Management System (CMS) so that the dental claims submitted for dental visits from 1 November onwards would be aligned to the revised dental guidelines. There will be briefing sessions conducted for all CHAS Dental clinics from September to October 2019. The sessions will include a refresher on the enhancements, submission of claims under MOH Healthcare Claims

Portal (MHCP) and update to CHAS administrative guidelines. Please look out for the announcement regarding the briefing schedule from AIC in August 2019.

For further assistance, please contact the dedicated CHAS Clinic helpline 6632 1199.