Dear Colleague

GENERAL DENTAL SERVICES

ORTHODONTIC TREATMENT – INTRODUCTION OF INDEX OF ORTHODONTIC TREATMENT NEED

Summary

1. This letter advises NHS Boards and Practitioner Services of the introduction of IOTN (Index of Orthodontic Treatment Need) as a means of assessing orthodontic treatment and if it is appropriate to provide it under general dental services (GDS) arrangements. It also advises of an amendment to the Statement of Dental Remuneration, Amendment No 121, as a result of the introduction of IOTN.

Background

2. One of the actions contained in the Action Plan for Improving Oral Health and Modernising NHS Dental Services in Scotland was that community based orthodontic treatment should be concentrated on those who are assessed under IOTN as having clinical needs. IOTN will be introduced with effect from 1 October 2011 as a means of assessing whether orthodontic treatment is required and therefore can be provided under general dental services arrangements.

Action

3. NHS Boards and Practitioner Services are asked to note the information contained in the Memorandum to this letter regarding the introduction of IOTN.

4. NHS Boards are asked to urgently copy and issue the Memorandum to this letter to all dentists and dental bodies corporate on their dental lists. NHS Boards are asked to ensure that Annex B is produced in colour.

Yours sincerely

MARGIE TAYLOR
Chief Dental Officer

7 September 2011

Addresses

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ORTHODONTIC TREATMENT – INTRODUCTION OF INDEX OF ORTHODONTIC TREATMENT NEED

1. This Memorandum advises dentists and dental bodies corporate of the introduction of IOTN (Index of Orthodontic Treatment Need) as a means of assessing whether orthodontic treatment is required and therefore can be provided under general dental services (GDS) arrangements. It also advises of an amendment to the Statement of Dental Remuneration, Amendment No 121, as a result of the introduction of IOTN.

Index of Treatment Need

2. One of the actions contained in the Action Plan for Improving Oral Health and Modernising NHS Dental Services in Scotland was that community based orthodontic treatment should be concentrated on those assessed under IOTN as having clinical needs. IOTN will be introduced with effect from 1 October 2011 as a means of assessing whether orthodontic treatment is required and therefore can be provided under general dental services arrangements.

3. It is recognised that dentists not carrying out orthodontic treatment regularly may not be familiar with IOTN. Dentists should continue to refer patients where they think there is a definite treatment need to orthodontists who will assess the patient’s IOTN Grade and undertake treatment if appropriate under GDS.

4. With effect from 1 October 2011 patients assessed as having an IOTN of:

- Grade 1 will not be considered for orthodontic treatment under GDS because of the lack of health benefit from it;
- Grade 2 will normally not be considered for orthodontic treatment under GDS because of the lack of health benefit from it (see further information at paragraph 8);
- Dental Component 3/Aesthetic Component 1 (Grade 3/1) to Dental Component 3/Aesthetic Component 5 (Grade 3/5) (inclusive) will normally not be considered for orthodontic treatment under GDS because of the lack of health benefit from it (see further information at paragraph 8);
- Dental Component 3/Aesthetic Component 6 (Grade 3/6) to Dental Component 3/Aesthetic Component 10 (Grade 3/10) will be considered for orthodontic treatment under GDS (see further information at paragraph 5);
• Grade 4 and 5 will be considered for orthodontic treatment under GDS (see further information at paragraph 5).

A brief explanation of IOTN is attached at Annex A.

5. Orthodontic treatment with an IOTN Grade of 3/6 to 3/10, 4 and 5 where the cost of the orthodontic course of treatment exceeds or is likely to exceed the prior approval limit set out in Part II of Schedule 4 to the NHS (General Dental Services) (Scotland) Regulations 2010 (currently £350, excluding fees for diagnosis, study models, retention and extraction of teeth for orthodontic purposes) requires the prior approval of the Scottish Dental Practice Board (SDPB).

6. As a means of lessening the administrative load on dentists seeking prior approval of orthodontic treatment it has been agreed that those cases assessed as having an IOTN Grade of 5 will not require to have study models, radiographs or clinical photographs submitted with the GP17(O) seeking prior approval, although the SDPB will retain the right to request these. This lessening of the administrative load can be withdrawn by the SDPB where there is non-compliance with the NHS (General Dental Services) (Scotland) Regulations 2010 and this guidance.

7. As there will be no routine requirement to submit study models in cases assessed as having an IOTN Grade of 5 there will be no need for duplicate study models to be made. Claims for duplicate study models will therefore only be paid where the SDPB has requested these or where the lessening of the administrative load has been withdrawn by the SDPB.

8. Cases assessed with an IOTN Grade of 2 and 3/1 to 3/5 (inclusive) where there are exceptional circumstances, for instance the patient has a Class II Div2 malocclusion with a traumatic overbite, will be considered for orthodontic treatment under GDS on a case by case basis on submission of a GP17(O), study models, clinical colour photographs (showing a clear intra-oral view) and appropriate radiographs to the SDPB.

9. With effect from 1 October 2011, dentists will require to include their assessment of the patient’s IOTN Grade in the additional information box at part 15 of the GP17(O) before sending this to the SDPB initially for prior approval and thereafter for payment. For all cases, except those assessed as IOTN Grade 5, supporting study models, clinical colour photographs (showing a clear intra-oral view) and appropriate radiographs will also be required. Any GP17(O)s with a date of acceptance for orthodontic treatment (Section VIII of the Statement of Dental Remuneration) on or after 1 October 2011 which do not contain the IOTN Grade at Part 15 will be returned to the dentist without approval or payment, as appropriate, with the exception of those claims for payment for item 32(a)(1), (removable spring and/or screw type appliance), items 32(c) (repairs) and 32(b) (retention).

10. Dentists who have to refer a patient to a hospital for orthodontic treatment where there is no facility to refer to a specialist orthodontist in practice and where the hospital requests that the dentist provides an orthodontic assessment, including study models and x-rays, do not have to provide the IOTN score in order to claim
payment for the treatment undertaken. The dentist should, however, include the name of the hospital requesting the information in the additional information box at Part 15 of the GP17(O). This exemption is for a period of 12 months only and thereafter such dentists will require to provide an IOTN score in order to receive payment.

11. Monitoring and post-payment verification procedures will be put in place to monitor compliance with the requirement to submit an accurate IOTN Grade to ensure that there is no “drift” in grading of the Dental Component or over scoring of the Aesthetic Component. Additionally 10% of each dentist’s orthodontic claims with an IOTN Grade of 5 will be routinely randomly assessed annually by Practitioner Services Division of NHS National Services Scotland to assess the accuracy of the IOTN Grade and appropriateness of the treatment plan. Monitoring of claims with other IOTN Grades will be undertaken in line with Scottish Dental Practice Board monitoring policy. Any treatment provided by a dentist where it is subsequently found to be wrongly graded will result in the non-authorisation of payment for the treatment provided and the recovery of any interim payments which have been made. The lessening of the administrative load for those cases assessed as having an IOTN Grade of 5 will also be withdrawn by the SDPB.

Amendment No 121 to the Statement of Dental Remuneration

12. The relevant section of the Statement of Dental Remuneration (paragraph 2(1) of Section XV of Determination I) is being amended with effect from 1 October 2011 to make it a condition of payment of remuneration that the Index of Orthodontic Treatment Need guidance must be taken used when providing orthodontic treatment. This amendment is brought into effect by the attached Amendment No 121 to the Statement of Dental Remuneration.

Patient Information

13. An information handout for patients explaining IOTN is provided at Annex C. This should be copied and issued to patients where appropriate.

Education

14. NHS Education for Scotland will make courses on IOTN available to dentists.

Enquiries

15. Any queries arising from this Memorandum should be taken up with your NHS Board.

Scottish Government Health and Social Care Integration Directorate
7 September 2011
AMENDMENT NO 121

STATEMENT OF DENTAL REMUNERATION

Pursuant to Regulation 22(3) of the National Health Service (General Dental Services) (Scotland) Regulations 2010, as amended, Scottish Ministers have amended on 1 October 2011 the Statement of Dental Remuneration.

Amendment No 121

1. This amendment shall take effect from the date set out below:
   
   (i) the amendment to Determination I shall take effect from 1 October 2011.

2. This amendment shall not affect any rights or liabilities acquired or incurred under or by virtue of any provisions of the Statement of Dental Remuneration amended or replaced by this Amendment.

3. In Section XV (Conditions of Payment of Remuneration and Submission of Dental Payment Claim Forms) of Determination I (Scale of Fees):

   3.1 in paragraph 2(1) (Conditions of Payment) there shall be added “and sub-paragraph (3) where appropriate” after “in sub-paragraph (2)";

   3.2 there shall be inserted after paragraph (2):

   (3) It shall be a condition of payment of remuneration for the provision of orthodontic treatment as specified in Section VIII of this Determination that a dentist when undertaking orthodontic treatment shall have regard to all guidance on the Index of Orthodontic Treatment Need and on orthodontic treatment issued by the Scottish Executive."
INDEX OF ORTHODONTIC TREATMENT NEED (IOTN) \(^{(1)}\)

The Index of Orthodontic Treatment Need (IOTN) must be used to assess whether orthodontic treatment is required and therefore can be provided under general dental services (GDS) arrangements. A simplified summary of the IOTN assessment is provided below.

The Dental Health Component (DHC) has 5 Grades

**Grade 1:** is almost perfection

**Grade 2:** applies to minor irregularities such as:
- slightly protruding upper front teeth
- slightly irregular teeth
- minor reversals of the normal relationship of upper and lower teeth which do not interfere with normal function.

**Grade 3:** applies to greater irregularities which normally do not need treatment for health reasons
- upper front teeth that protrude less than 4 mm more than normal
- reversals of the normal relationship of upper teeth which only interfere with normal function to a minor degree; by less that 2 mm.
- irregularity of teeth which are less than 4 mm out of line
- open bites of less that 4 mm
- deep bites with no functional problems

**Grade 4:** applies to more severe degrees of irregularity and these do require treatment for health reasons
- upper front teeth that protrude more than 6 mm
- reversals of the normal relationship of upper teeth which interfere with normal function greater than 2 mm
- lower front teeth that protrude in front of the upper more than 3.5 mm
- irregularity of teeth which are more than 4 mm out of line
- less than the normal number of teeth (missing teeth) where gaps need to be closed
- open bites of more than 4 mm
- deep bites with functional problems
- more than the normal number of teeth (supernumerary teeth)

\(^{(1)}\) British Orthodontic Society
Grade 5: applies to severe dental health problems

- when teeth cannot come into the mouth normally because of obstruction by crowding, additional teeth or any other cause.
- a large number of missing teeth.
- upper front teeth that protrude more than 9 mm
- lower front teeth that protrude in front of the upper more than 3.5 mm and where there are functional difficulties too
- cranio-facial anomalies such as cleft lip and palate.

The Aesthetic Component (AC)

It is recognised that some children need orthodontic treatment just because their teeth look really bad. The AC is a scale of 10 colour photographs showing different levels of dental attractiveness. The grading is made by the orthodontist matching the patient to these photographs.

The AC will be used for border-line cases with Grade 3 DHC. If the case has a high AC score, orthodontic treatment under GDS can be considered.
**THE AESTHETIC COMPONENT**

The Aesthetic Component has 10 grades. The observer is meant to score the severity of the malocclusion in comparison with the image scale below. However, most incorrectly try and match the malocclusion with the images.

Orthodontic treatment is a type of dental treatment that is used to improve appearance, position and function of crooked or abnormally arranged teeth.

Orthodontic treatment under NHS general dental services (GDS) is available where the patient has been assessed as having a clear clinical need for treatment. A system known as Index of Orthodontic Treatment Need (IOTN) is used as a means of assessing whether orthodontic treatment is required and can therefore be provided under GDS. The IOTN is made up of five Grades, which are listed below.

- **Grade 1**: almost perfect teeth.
- **Grade 2**: minor irregularities with the teeth. For example teeth slightly out of line.
- **Grade 3**: greater irregularities with the teeth which normally do not need treatment for health reasons. For example, upper front teeth that protrude slightly.
- **Grade 4**: a more severe degree of irregularity with the teeth that require treatment for health reasons. For example, upper front teeth that protrude more than 6mm and missing teeth where gaps need to be closed.
- **Grade 5**: severe dental health problems. For example, a large number of missing teeth and upper front teeth that protrude more than 9mm.

Cases assessed as Grade 1 will not be considered as benefiting from orthodontic treatment and will therefore not be available under GDS. Cases assessed as Grade 2 will not normally be considered as benefiting from orthodontic treatment and will therefore not normally be available under GDS. Cases assessed as Grade 3 will be judged on a case-by-case basis dependent on the appearance of the teeth and treatment may be made available under GDS. Cases assessed as Grade 4 or 5 will be considered for orthodontic treatment under GDS.

Orthodontic treatment under GDS will only be considered where the patient has maintained a sustained good standard of oral health.

If the dentist thinks that orthodontic treatment may be needed you/your child may be asked to see an orthodontist to see if treatment is required. Being referred to an orthodontist for assessment doesn’t mean that orthodontic treatment will be necessary or will be provided under GDS.