



R4+

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Release Notes: R4+ 9.1.2

The following enhancements are included in R4+ version 9.1.2. Fixes are cumulative: each new release contains all fixes from previous releases.

New Features in R4+ v9.1.2

NHS England – CCN 86 – Complex Care Pathway Interim Submissions

R4+ now generates and manages the Interim Declaration FP17 Claims that follow the Sign-Up Declaration on a Complex Care Pathway. Once the Sign-Up Declaration has settled, each Interim Declaration in the pathway sequence is created in turn.

- **Interim Declaration Claims:** Each Interim Declaration is created automatically when the preceding pathway Claim settles, as its own FP17 Claim linked to the same Treatment Plan. It is created as Not Ready, because a fresh Clinical Declaration must be completed before every submission.

The Pathway Type is read-only once Sign-Up is complete, and the Contract Value carries forward from the previous submission; the Performer also defaults to the previous submission's but can be changed under the same contract as accepted under Sign-Up.

- **Pathway sequence:** A Pathway 1 or Pathway 3 Course has four Interim Declarations, and a Pathway 2 Course has ten, each following the Sign-Up Declaration. The Complex Care tab shows where each Claim sits in that sequence, and new Prev Claim and Next Claim buttons step through every Claim that forms the pathway.
- **Clinical Declarations:** Every Interim Declaration requires the clinician to declare that the patient is still being treated at the practice and receiving care. Two optional declarations cover a concurrent Denture Modification or repair, and a concurrent Band 3 restoration. R4+ will not allow the Claim to be made Ready to Send until the mandatory declaration has been completed.
- **Monthly submission cadence:** Each Interim Declaration is assigned a target month, advancing one calendar month per submission from the month of the Date of Acceptance, and that month is shown on the Claim.
- **SCHEDL Response processing:** The Activity Units awarded and the Contract Unit Value returned are recorded against each individual submission, rather than a single value being held and overwritten for the Course, so every submission remains reconcilable in its own right.

The FP17 Claim Response screen shows the Scheduled Activity Units received and the Contract Unit Value for that submission, with Expected Activity Units shown as "Pathway" because a pathway's total is contract-specific and not known in advance. Any response that is not a rejection settles the submission.

- **NHS Activity Report:** A new Complex Care Pathways column group reports the Courses placed on a pathway and the cumulative UDA values returned so far, combining Pathways 1, 2 and 3 into a single pair of figures. Both figures are anchored to the Course's Date of Acceptance, so the values reported for a period will continue to rise as each submission in the pathway is transmitted and settled.
- **Concurrent Courses of Treatment:** Starting a further NHS Course for a patient already on a pathway now warns that, while the NHSBSA will accept the Claim, no further UDA payment may be due once the activity allowed alongside a pathway has been paid, and that any repeat Band 3 patient charge should be credited or refunded.
- **Upgrading from R4+ v9.1.0:** Sign-Up Declaration FP17 Claims that had already settled before the upgrade generate their next Interim Declaration automatically, so pathways started under v9.1.0 continue without any manual intervention.

Important Note: Course Completion and Close Plan Early remain restricted while a Course of Treatment is on a Complex Care Pathway. These options will be restored in a future R4+ update, once Final Declarations are implemented and Courses approach the natural end of the pathway timeline.



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NHS England, Wales & IoM – CCN 74 – Patient Registration Forms & Address Encoding

The NHSBSA has issued revised NHS Patient Registration (PR) Forms and standardised the way patient addresses are presented to its systems.

- **New PR Forms:** From 1 April 2026, R4+ produces Revision 11 of the PR Form for England and Revision 13 for Wales, replacing Revisions 10 and 12, in both Full Print and Overprint. Both revisions carry the new NHS Number "not recorded" options and the updated Ethnic Group categories, and the Overprint positions have been aligned to the new layouts.
- **Address encoding:** Patient addresses are now mapped to the NHSBSA's standard line structure when FP17 and FP17O Claims are encoded for transmission — the flat or house number and street name across the first two lines, and the town or city on the third. Where the first address line holds a comma-separated address and the second is empty, the first line is split across both. This prepares practices for the NHS Dental Services Portal; there is no change to how COMPASS processes Claims today.

NHS Wales – CCN 87 – Failed to Return Claims

The Failed to Return option, temporarily disabled for the day-one release of the 2026 Wales Dental Contract Reform, is available again when closing a Welsh Course of Treatment early because the patient did not return to complete their treatment.

Incomplete treatment is now recorded as a single flag on the FP17 Claim. The band of the outstanding treatment is no longer recorded, and Activity Banding is omitted from the Claim altogether.

NHS Wales – CCN 87 – Referral for Advanced Services & High Needs

Treatment on Referral is discontinued in Wales under the 2026 Wales Dental Contract Reform. The Treatment on Referral option has been removed from the Clinical Chart Treatment Plan item menu and from Create Plan, and the Referral frame is hidden on the FP17 Claim. Two new Claim Options take its place — Referral for Advanced Services and Referral for High Needs — and are encoded on the Claim in its stead.

The existing Claim Options "Domiciliary Services" and "Sedation Services" have been renamed "Referral for Domiciliary Services" and "Referral for Sedation Services". This wording change applies in England and the Isle of Man as well as Wales, as the meaning of the options is the same in each.

NHS Wales – CCN 94 – Care Package Tooth Counts where an RCT Overlaps

Where Root Canal Treatment is proposed or completed on a tooth, that tooth no longer counts towards the Simple/Extended Caries or the Crown/Bridge/Inlay/Onlay & Veneer Care Package within the same Treatment Plan, because the RCT Care Package already covers the treatment provided on it.

The treatments themselves continue to be recorded as normal — only the counts that produce the patient charge and the Care Package CDS exclude a tooth covered by an overlapping RCT.



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Defects Fixed in R4+ v9.1.2

NHS England – Complex Care Pathway Activation Blocked by a Proposed or Superseded Treatment Plan

Where a patient had a Band 1 or 2 Treatment Plan that had been proposed but never accepted, or that had been superseded by a later version, R4+ counted it as an open Course and blocked Complex Care Pathway activation, reporting that the patient had an open Treatment Plan with NHS Treatment under Bands 1 or 2. Only genuinely open, accepted and current Courses are now counted, so activation proceeds — while a real concurrent Course still blocks it as intended.

NHS England – Errors Creating a New Submission on a Complex Care Pathway Sign-Up Claim

Creating a new submission from a Complex Care Pathway Sign-Up FP17 Claim, either from the Claim itself or from EDI Management, immediately raised database errors and the submission was not created. A new submission increment is now generated without error.

NHS England – Concurrent Band 3 Claim Encoded with the Wrong Declaration and Patient Charge

Where a Band 3 Course of Treatment was claimed alongside an active Complex Care Pathway, the BCDS1 message carried the wrong clinician declaration and omitted the patient charge. Both are now encoded correctly.

NHS England – FP17 Claims Unable to Reach Adjusted Status

Since CCN 84 became active, every incoming payment schedule (SCHEDL) response whose value differed from the Claim was automatically Settled, so a Claim could never reach Adjusted and the difference could not be reviewed and confirmed using Make Settled. Automatic settlement is now limited to Unscheduled Care responses; any other differing value once again sets the Claim to Adjusted.

NHS England – Treatment under Guarantee Inflating the Patient's Charge Band

Treatment marked under guarantee is not charged to the patient, but three or more guaranteed permanent fillings or extractions still counted towards the rule that escalates a Course to Band 2. On a Course combining guaranteed fillings with a chargeable Band 1 item, such as a scale and polish, the patient was charged at Band 2 instead of Band 1. Only chargeable treatment now counts towards the patient's charge band; the Performer's UDA activity is unaffected.

NHS England – EDI File Creation Failing where Treatment under Guarantee and Treatment on Referral are both Set

Selecting both "Treatment under Guarantee" and "Treatment on Referral" on a Dental Plan caused EDI file creation to fail with an error. Files are now created successfully.

NHS England – NHS Activity Report not Reporting Band 2(B) and 2(C) Courses

Courses banded 2(B) or 2(C) were included in the UDA Total Activity column but reported as zero Courses and zero UDA under Charge Band 2B and Charge Band 2C, and the report raised an error. Both bands now report their Courses and UDA values correctly.



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NHS England – Error Using the Accepted Date Selector on an NHS Claim

Opening the date selector next to the Accepted date on an FP17 Claim raised an error, whether a new date was chosen or the selector was cancelled. The date selector now opens and closes without error.

NHS England – Referral Fields Appearing when Overriding the UDA Value or Patient Charge

Overriding the UDA Value or Patient Charge on an FP17 Claim — or simply clicking Apply without making a change — caused a Treatment on Referral checkbox and Date of Referral field to appear on the Dental Treatment tab, overlapping and displacing the Claim Options. Those fields no longer appear, and the Claim Options remain correctly positioned.

NHS Wales – Urgent Dental Access Portal Patient DNA Claims not Recording the Expected Fees

Setting New Urgent Patient Referral – Patient DNA on an Urgent FP17 Claim clears the calculated CDS, because a patient who did not attend attracts a different payment from an attended Course. The Claim nevertheless kept the expected fees calculated beforehand, so it did not match correctly on settlement and could not be reported on accurately. The expected fees are now set to those due where the patient did not attend — £75.00 from the NHS, with no patient charge.

NHS Wales – Patient DNA Claims Setting ACORN Assessment Carried Out

On a Claim marked New Urgent Patient Referral – Patient DNA, the "ACORN Assessment Carried Out" option is correctly disabled and left unticked, but the Claim re-displayed it as ticked once the form had been closed and reopened. Any subsequent change then saved it as ticked, encoding an ACORN Assessment onto a Claim where it is not permitted. The form and the stored Claim now remain in step.

NHS Wales – ACORN Assessment Carried Out Re-Ticked when a Claim is Reopened

On a non-urgent Welsh Course, recording an Examination correctly unticked and saved "ACORN Assessment Carried Out", but reopening the Claim silently re-ticked it — breaking the rule that an Examination and an ACORN Assessment are mutually exclusive. The saved setting is now honoured when the Claim is reloaded.

NHS Wales – "Exam not Necessary" Reason Lost on Reload, Blocking Submission

Where an Examination was recorded with the reason "Exam not Necessary", for example on a prescription-only Claim, the Examination was discarded when the Claim was reloaded and submission was then blocked with "Claim must contain either an Examination or that an ACORN Assessment was carried out.", obliging the user to assert an Examination or ACORN Assessment that had not been carried out. The recorded Examination and its reason now persist across a reload.

NHS Wales – Free Examination Charged where a Prescription is also Provided

Patients under 25 or over 60 are exempt from the charge for an Examination, and no charge applies to a prescription, but a Course of Treatment combining the two was charging the patient for the Examination. The NHSBSA has confirmed such a Course is charge exempt, and R4+ now treats it as free of charge.

NHS Wales – New Patient Examination Care Package Fee Incorrect for Patients Aged Four

For a patient aged four, the New Patient Examination Care Package applied a fee of £70.00 rather than the £75.00 that applies to younger children. The age boundary used by the charge calculation has been corrected.



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NHS Wales – Trauma Related Injury Encoding a Treatment Code COMPASS Cannot Accept

Treatment marked as a Trauma Related Injury encoded treatment code 9240 alongside the Trauma Care Package, and COMPASS rejected the Claim reporting a non-existent treatment code. Code 9240 is not accepted until COMPASS is replaced by the NHS Dental Services Portal, so it is now omitted; the Trauma Care Package continues to be transmitted as normal.

NHS Wales – EDI Responses Moving to Non-Conforming XML

Welsh practices using Send and Receive found payment schedules rejected against the XML schema and moved into Non-Conforming XML, so the schedule was not processed at all. The schema has been corrected. Negative adjustments returned by the NHSBSA against a Claim are also now applied correctly, where previously the Scheduled values recorded against the Claim were wrong.

NHS Wales – "Further Treatment Within 2 Months" Shown Incorrectly on a Care Package Claim

The 2-month continuation rule is retired under the 2026 Wales Dental Contract Reform, but the checkbox's visibility was carried over from the previously viewed Claim — so it appeared on a Care Package Claim opened first in a session, and was then hidden on a banded Claim opened afterwards. The checkbox is now set from the Claim being displayed. A related issue, where viewing a COVID-19 Triage Claim left the Failed to Return option and Completed date hidden on every Claim viewed afterwards, has also been resolved.

NHS Wales – Error Running the NHS Activity Report

Running the NHS Activity Report on a Wales contract returned an error and no activity data. The report now runs without error.

NHS FP17 Claims – Processing Schedule Interchanges could Error if a Claim receives multiple Responses

If an FP17 Claim receives more than one response within a Schedule Interchange this would result in an error when being processed. This has been addressed so an Interchange will process without error.