NHS
Business Services Authority

Adjustment Request

Reference number:

NHS Dental Services
1 St Annes Road
Eastbourne
East Sussex
BN21 3UN

Tel : 0300 3301348
Fax: 01323 433222
Email: nhsbsa.dentalservices@nhsbsa.nhs.uk
Website: www.nhsbsa.nhs.uk/dental

Provider Contract Number: _____/_____ Period _____

Please omit the patient name column if you are submitting this request by email attachment.

FT = Further Treatment **FRR = Free Repair / Replacement**

Patient Name	Claim No. Image No.	Performer No.	FT (tick)	FRR (tick)	Trt Band / Exemption	NHSBSA USE ONLY