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Prevention. Care. Recovery.

ProviderHub

ProviderHub training guide

Claim lodgement – Dental



Claim lodgement – Dental (ACC42)

ACC dental claims have previously been lodged using an ACC42 paper form. ProviderHub introduces an electronic version with a singular Claim lodgement (ACC45) feature for both dental and physical injury claims.

See more information about who can lodge a claim, and the information you'll need to include, on our website: Lodging claims

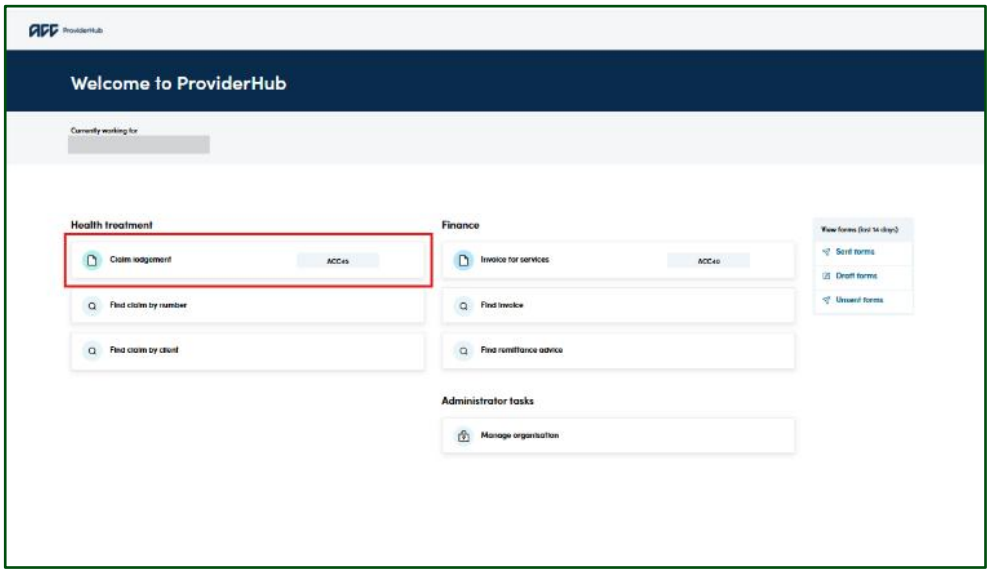
Non-clinical ProviderHub users can submit an ACC42 on behalf of an ACC provider. The treating provider must have assessed the patient, informed them of their obligation, and provided the information in the form.

This guide covers:

- how to lodge a dental claim through ProviderHub
- how to save your progress and resume a draft claim form
- how to find sent and draft forms.

If you don't have access to Claim lodgement, you'll need to make a request to your organisation's ProviderHub administrator for permission.

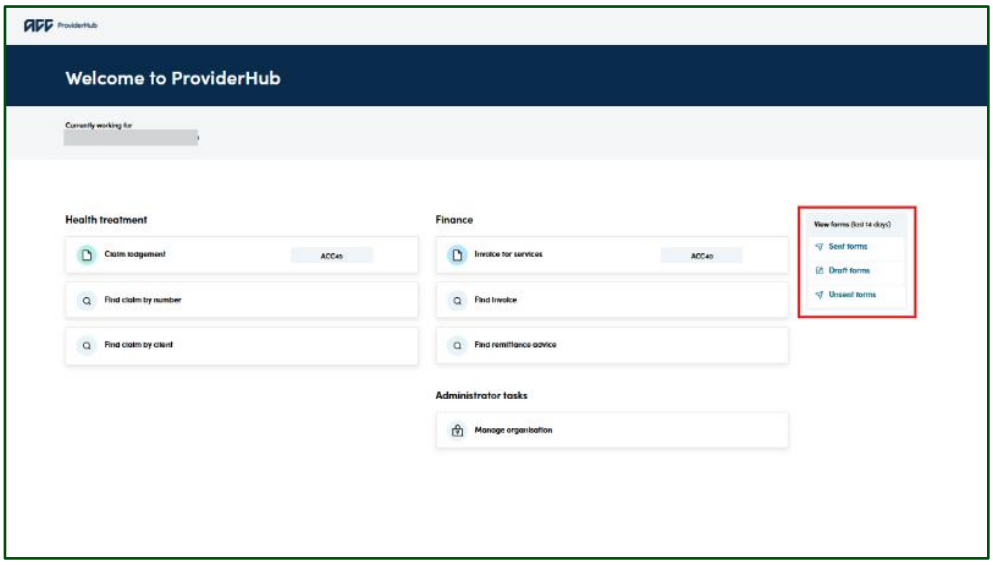
Navigating the Home page



When you log in to ProviderHub, you can select **Claim lodgement** under **Health Treatment** to begin a dental claim.



View forms



If you need to pause working on the form, you can save your progress by selecting **Save draft** at the bottom of the form's page.

You can resume the draft by navigating to the **Draft forms** on the right-side of the Home page. Draft forms will expire after two weeks.

Important: Save your progress before leaving the form or taking a break. You'll be logged out after 15 minutes and will lose the information you've entered on the form.

Once you've completed and sent your form, you can go to **Sent forms** to view it or download a PDF copy. To check the status of the claim you've sent us, under **Health treatment** go to **Find claim by number** and enter the claim number.

Completing the form

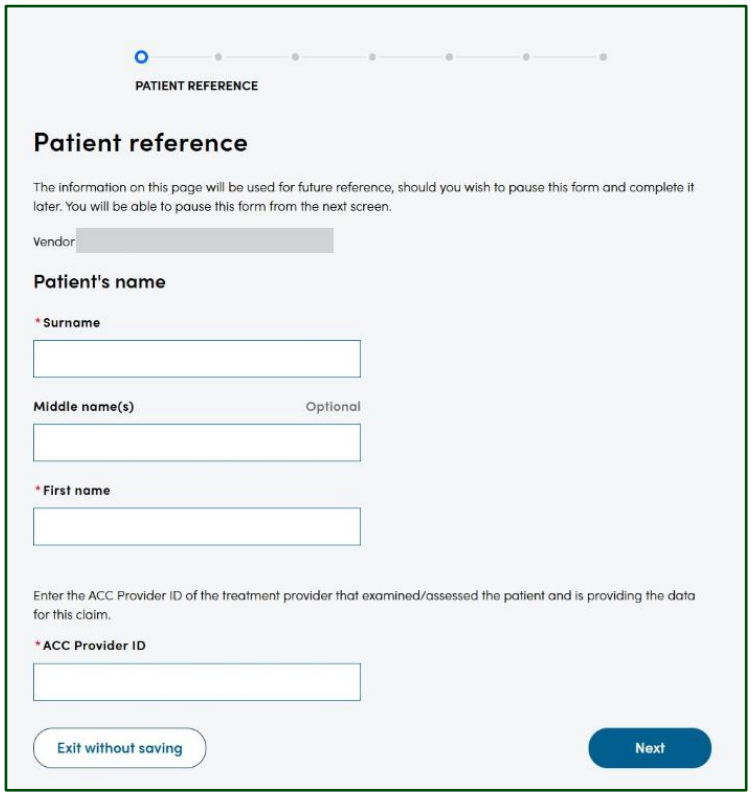
The claim lodgement form has been updated from November 2026 to allow for Dental injuries to be lodged electronically.

To successfully lodge a claim, you'll need to fill in the compulsory fields marked with a red asterisk (*).

The form is dynamic, so the information required and options presented to you will change depending on your selections.

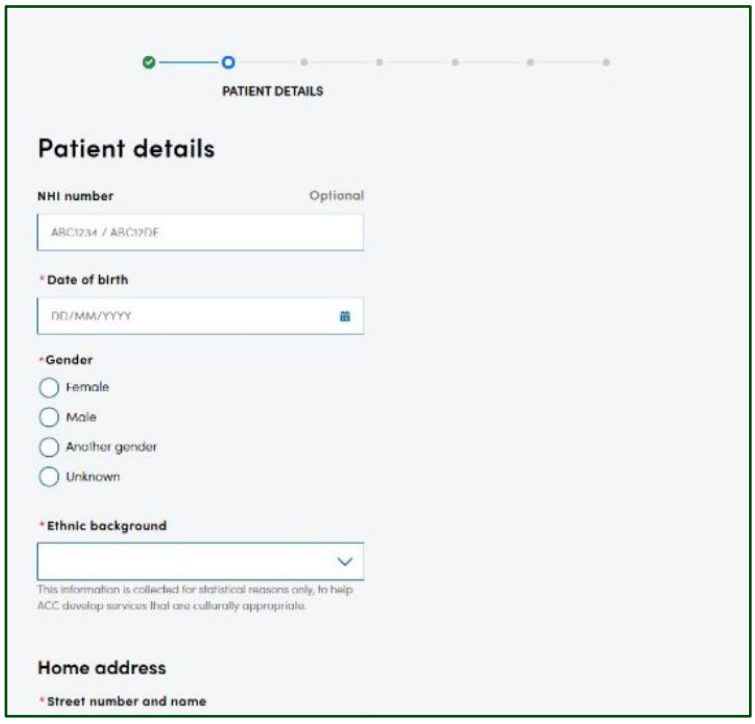


Patient reference



In the **Patient reference** screen, you'll need to enter the patient's name and the Dentist's ACC provider ID.

Patient details



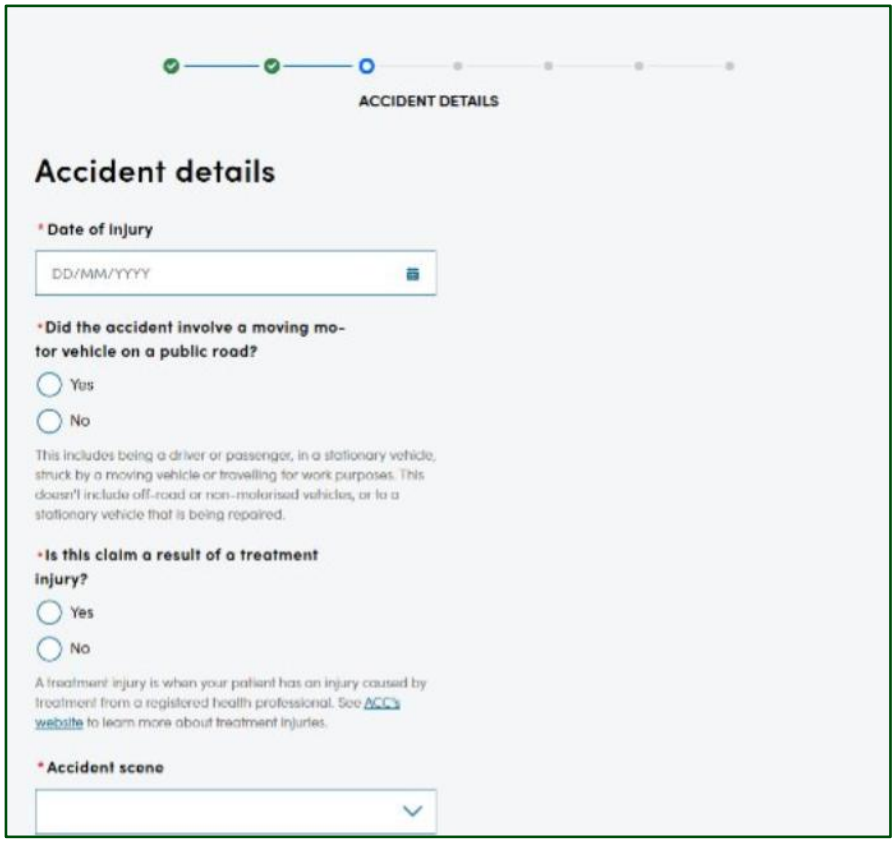
In the **Patient details** screen you'll need to enter information about the patient.

If you already have a claim number, you can enter it here. Otherwise, leave this blank and one will be created for you once you send the form.

Note: Ensure the correct patient details are entered to prevent delays in a cover decision.



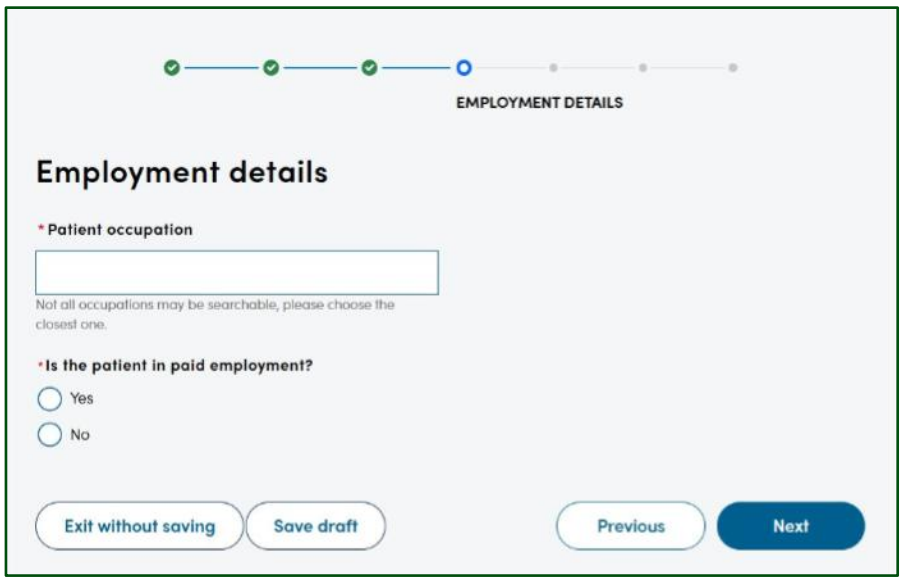
Accident details



You'll need to enter details of the accident. This includes the date of injury, scene, location, and a description of the accident.

Note: For cover, the accident that caused the injury must be clearly identifiable.

Employment details



Next, search the patient's occupation by typing and selecting from the drop-down options.

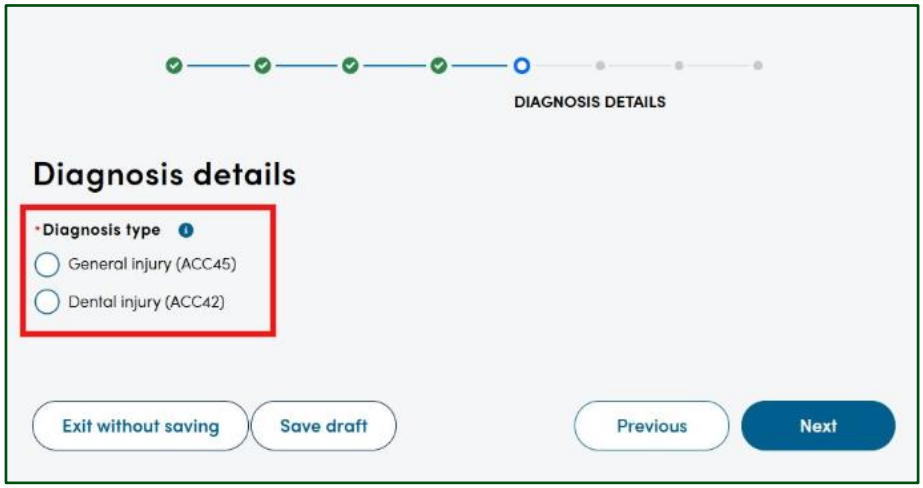
Please indicate if the patient is in paid employment. If you select **Yes**, you'll need to enter additional employment information.





Note: Dentists must select **Yes** to this question as they are not medical or nurse practitioners, as per the help text. This will skip the Fitness for work step.

Diagnosis details



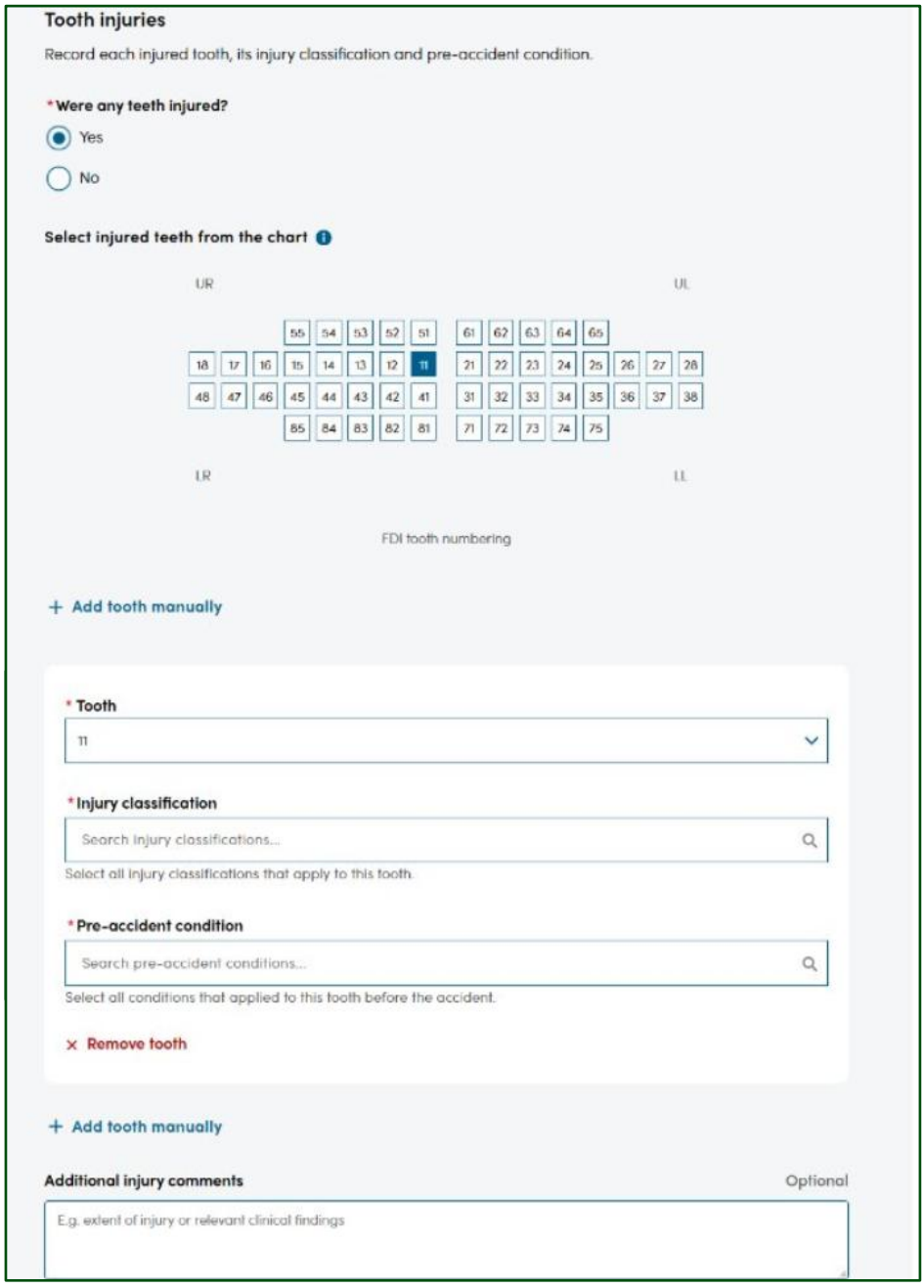
Select **Dental injury (ACC42)** for a dental claim lodgement.

Dental Injury diagnosis and pre-accident condition



Select the relevant options for the dental injury in all mandatory fields. There are also optional fields which may be relevant





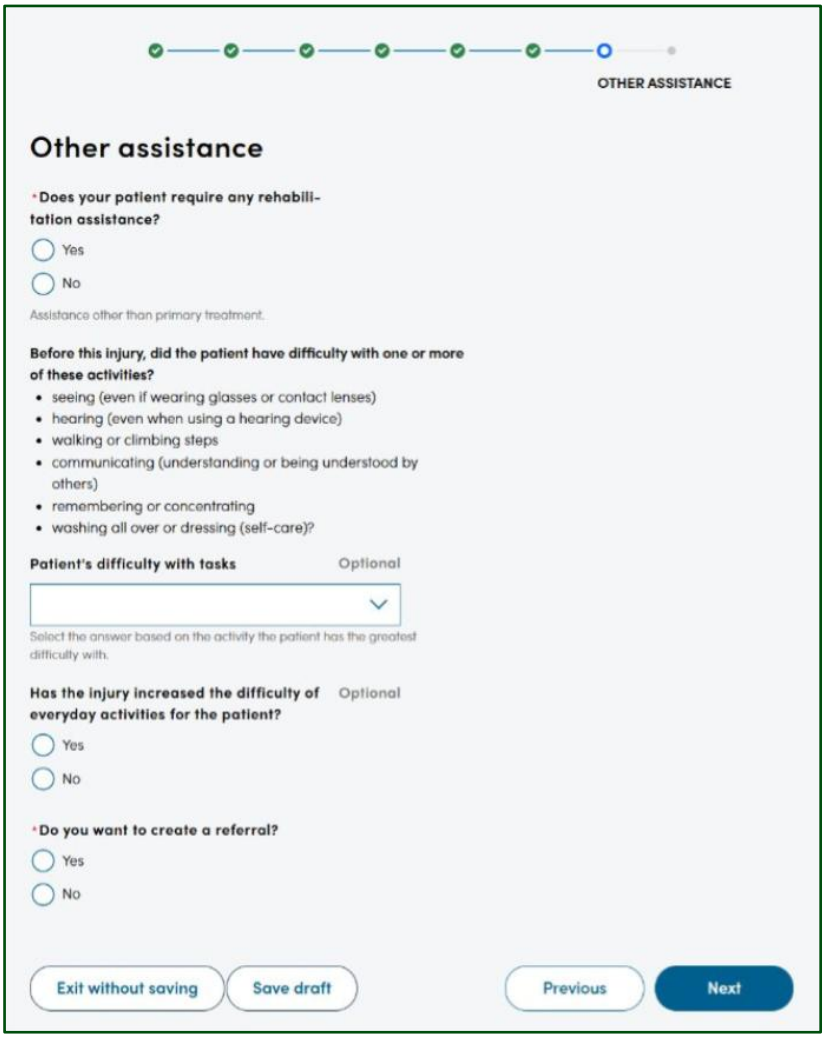
When recording injuries to teeth, select **Tooth** numbers from the chart available or add manually in the Tooth field.

Continue through the form.

Once all mandatory and relevant optional fields have been completed, click **Next** to continue.



Other assistance



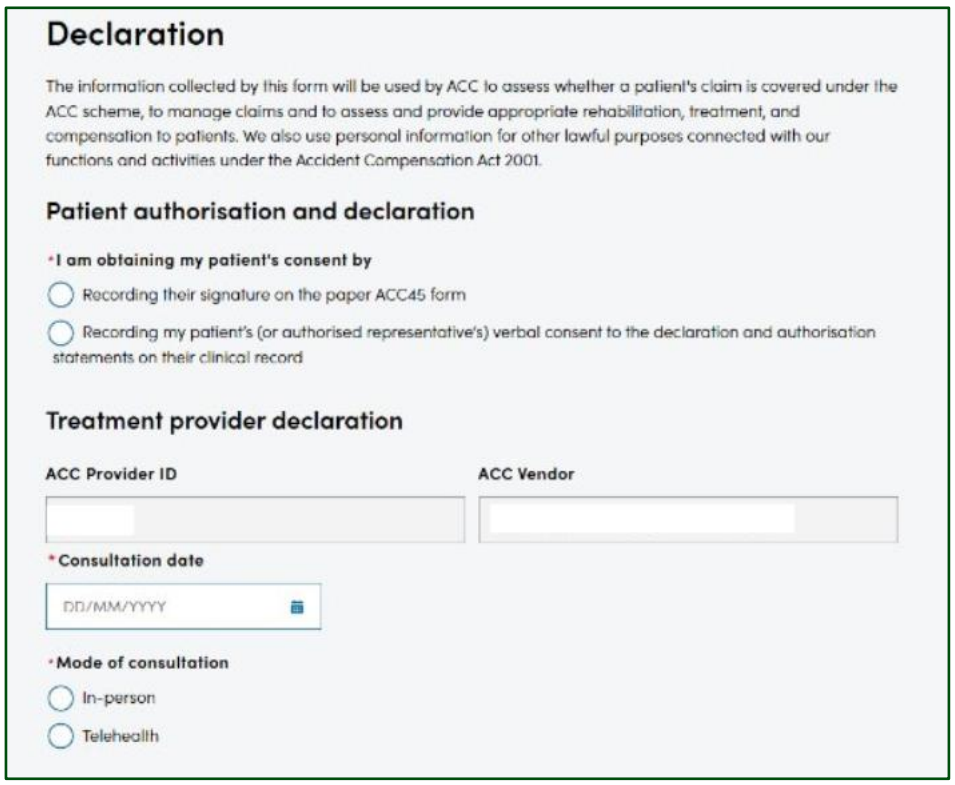
You can indicate any further assistance required on this screen.

If you want to create a referral, start the request by selecting the referral type and adding referral notes.

Note: You can add up to five referrals.

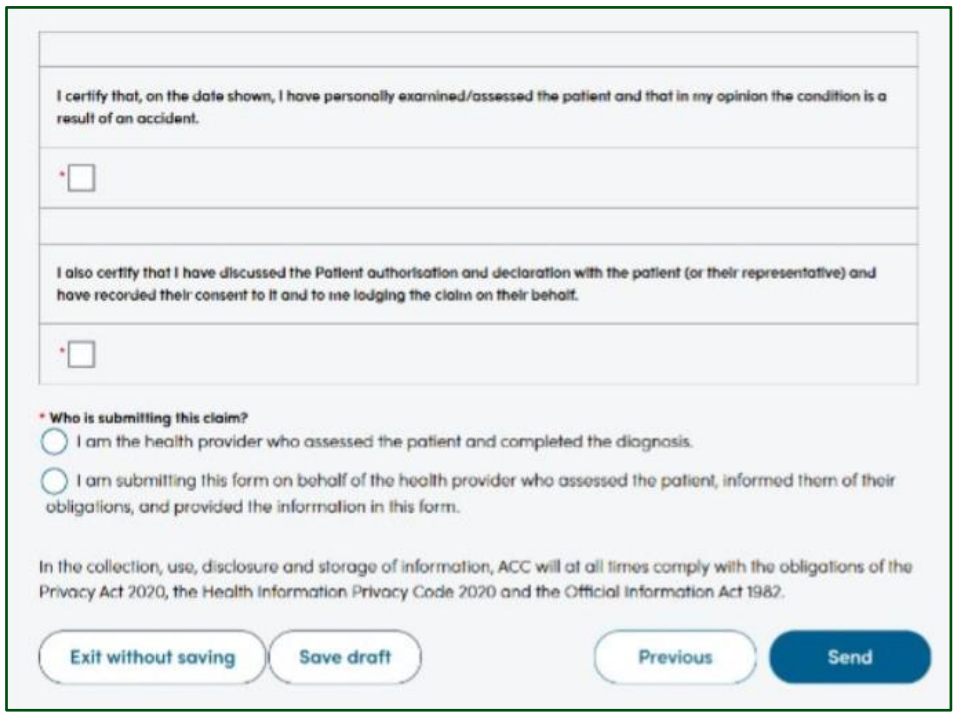


Summary and declaration



Review the summary of all the information that you've entered.

Edit any section if necessary.



Read and complete the declaration and click **Send**.

If you didn't add a claim number at the start of the form, one will be created when you **Send**.

