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TRAINING SEMINARS

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Clarification of Criteria for Periodontal Maintenance (D4910)

Effective January 1, 2018, the Department of Health Care Services (DHCS) restored optional adult dental benefits for members ages 21 and older with full-scope dental coverage. The list of dental benefits included Periodontal Maintenance (D4910) as a new benefit. However, some Medi-Cal adult members may have received the Scaling and Root Planing (SRP) via private pay method or another dental plan during the period that it was not a covered Medi-Cal benefit. Claims for the periodontal maintenance procedure were automatically denied for some members whose record does not reflect a paid SRP in their Medi-Cal dental history.

Effective July 31, 2019, some modifications will be made to the criteria outlined in Provider Bulletin <u>Volume 33, Number 15</u> for Periodontal Maintenance (D4910).

These modifications are identified on the next page in **red**. Providers are required to abide by the updated criteria requirements outlined in this bulletin. The submission and criteria requirements for the Periodontal Maintenance (D4910) will not be added to the Manual of Criteria (MOC) until the implementation of CDT-19 occurs.

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PROCEDURE D4910 - PERIODONTAL MAINTENANCE

- 1. This procedure does not require prior authorization.
- 2. A benefit:
 - a. only when preceded by a periodontal scaling and root planing (D4341-D4342) that has been paid by the Medi-Cal Dental Program.
 - b. only after completion of all necessary scaling and root planings.
 - c. once in a calendar quarter.
 - d. only in the 24 month period following the last scaling and root planing.
- 3. Not a benefit in the same calendar quarter as scaling and root planing.
- 4. Not payable to the same provider in the same calendar quarter as prophylaxis- adult (D1110) or prophylaxis- child (D1120).
- 5. This procedure is considered a full mouth treatment.

The above change allows members to have Periodontal Maintenance (D4910) as a benefit when a paid Periodontal Scaling and Root Planing (D4341-D4342) is not in their Medi-Cal dental history. In these cases, providers are required to submit documentation with the claim form that demonstrates the SRP was actually performed within the last 24 months. Documentation can be in the form of patient records or insurance paperwork showing a date of service (DOS) the SRP was completed.