smile, CALIFORNIA
MEDI-CAL HAS DENTAL COVERED

Provider Bulletin

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TRAINING SEMINARS

To reserve a spot online or to view a complete list of training seminars, to go the Provider Training Seminar Schedule.

PROVIDER ENROLLMENT ASSISTANCE LINE

Speak with an Enrollment Specialist. Go here for more information.

Available every Wednesday
8am - 4pm

New Resources for National Children's Dental Health Month

This February, celebrate National Children's Dental Health Month with new *Smile, California* materials for the children in your community. You can download the new children's oral health lesson packages and pledge certificates here. These packages include age-appropriate activities and worksheets designed to help children understand the importance of good oral health and regular dental check-ups. The *Smile, California* pledge certificates are designed to promote and strengthen children's commitment to healthy dental habits.

Once you've downloaded the lesson packages and pledge certificates, share how you're using them in your practice by posting photos on Facebook or Instagram using the hashtags: #SmileCalifornia and #NCDHM. Posting with these hashtags gives you the chance to be featured on the *Smile, California* Facebook or Instagram and connects you with other Medi-Cal dental providers celebrating National Children's Dental Health Month.

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Benefit Reminder: Aid Codes 2C, L6, and L7 under Medi-Cal Dental

Effective October 1, 2019, as announced in Provider Bulletin Volume 35, Number 35, aid code 2C was changed from a non-dental benefit aid code to a full scope benefit aid code with no share of cost.

Additionally, as part of the Affordable Care Act expansion, effective October 1, 2019, aid code L6 was added as a full scope aid code with no share of cost, and aid code L7 was added as a restricted/limited aid code with no share of cost.

The aid code descriptions are as follows:

Aid Code	Benefits	SOC	Program/Description
2C	Full Scope	No	CCHIP above 266% - 322% FPL, age 0 < 19
L6	Full Scope	No	Disabled/Blind 19 through to 65 at or below 128% FPL Citizen
L7	Restricted or limited benefits	No	Disabled/Blind 19 up to 65 at or below 128% FPL undocumented

To treat these members, dental providers must be enrolled in Medi-Cal and must confirm the children are transitioned into Medi-Cal by viewing their eligibility status. Providers can verify eligibility through the Medi-Cal website or the Automated Eligibility Verification System (AEVS). For more information on member eligibility, please refer to the Medi-Cal Dental Provider Handbook, Section 4 - Treating Beneficiaries, pages 4-3 through 4-5. Medi-Cal Dental providers must bill the Medi-Cal program for dental services according to the criteria outlined in the Provider Handbook, Section 5 - Manual of Criteria and Schedule of Maximum Allowances.

Don't miss out on serving these members by getting your name on the Patient Referral List! Sign up by clicking here, complete the form and send it in. If you have any questions about Medi-Cal Dental, please call the Telephone Service Center at (800) 423-0507.

Management of Patients' Dental Fear and Anxiety Resources

The Department of Health Care Services encourages Medi-Cal patients to utilize their covered dental benefit. However, some patients do not access this benefit due to fear and anxiety over dental treatment.

The American Dental Education Association (ADEA), currently offers a free American Dental Association (ADA) accredited Continuing Education webinar titled Understanding

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and Managing Dental Fear and Anxiety (1 credit hour). Providers do not have to be a member of the ADEA or the ADA but are required to create a free login to access the webinar. The course is available as a recording with a PowerPoint presentation reference guide. During the webinar recording, Dr. Cameron Randall offers a psychological perspective on the role that pain, fear and anxiety can play in oral health as well as associated non-pharmacological management strategies.

This helpful resource for providers can be accessed here:
https://www.pathlms.com/adea/courses/13071

Providers can also refer patients to view the Dental Visits tab on SmileCalifornia.org, where they can learn five quick tips about overcoming anxiety and what to expect during the visit.

2020 Medi-Cal Dental Payment Schedule Changes

The Medi-Cal Dental payment schedule will be adjusted at various times throughout the 2020 calendar year. Below is a complete list of the 2020 payment schedule changes. **Please note**: Providers who receive payments via Electronic Funds Transfer (EFT) may not receive payment until the following Monday.

2020 Medi-Cal Dental Payment Schedule Changes		
Adjusted For	**Week Of**	**Payment Issue Date**
Martin Luther King Jr. Day	January 20, 2020	January 24, 2020
President's Day	February 17, 2020	February 21, 2020
Caesar Chavez Holiday	March 30, 2020	April 3, 2020
Memorial Day	May 25, 2020	May 29, 2020
Labor Day	September 7, 2020	September 11, 2020
Columbus Day	October 12, 2020	October 16, 2020
Veteran's Day	November 9, 2020	November 13, 2020
Thanksgiving Holiday	November 23, 2020	November 27, 2020

Please check the Medi-Cal Dental website for future notifications. For questions, please call the Telephone Service Center at (800) 423-0507.

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Need to access your Medi-Cal Dental information? The Provider Website Application makes it quick and easy!

Save time by accessing your Medi-Cal Dental information with the Provider Website Application. You and your staff can securely login to view:

- Claim Status and History
- Treatment Authorization Request Status and History
- Weekly Check Amounts
- Monthly Payment Totals and Year-to-Date Payments

The Provider Website Application is even mobile friendly, so you can stay updated on the go. Need help getting started? Check out the Provider Website Application User Guide for step-by-step instructions on how to create an account.

Reminder: Outdated Versions of Treatment Authorization Request (TAR)/Claim Forms No Longer Accepted

Medi-Cal Dental is decommissioning outdated versions of the Treatment Authorization Request (TAR)/Claim form. As a reminder, **effective January 30, 2020**, providers must use a current version of the TAR/Claim form when submitting to Medi-Cal Dental. The current TAR/Claim form numbers and revision dates are:

- DC-202 (R 08/13) and (R 10/19) - for filling in by hand
- DC-209 (R 07/13) and (R 10/19) - for pin-fed printers
- DC-217 (R 9/13) and (R 10/19) - for laser printers

Providers can confirm that they are using the most current version by checking the revision date at the bottom of the form. If you have outdated TAR/Claim forms in your dental office, please recycle the old forms and reorder new ones.

To order current TAR/Claim forms, please complete and fax the Forms Reorder Request to the number on the form. Providers can find the Forms Reorder Request on the Medi-Cal Dental website here.

For information on how to complete the TAR/Claim form, please refer to the Provider Handbook Section 6 - Forms, pages 6-6 and 6-7. For questions about the TAR/Claim form decommissioning effort, please contact the Telephone Service Center at (800) 423-0507.

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Reminder: Criteria Requirements for General Anesthesia and Intravenous Sedation

Effective November 1, 2015, criteria and guidelines were developed by the Department of Health Care Services (DHCS) for Intravenous Conscious Sedation/Analgesia (procedures D9241/D9242) and Deep Sedation/General Anesthesia (procedures D9220/D9221). These policies are currently in effect across all delivery systems in medical and dental programs. Providers rendering general anesthesia (GA) and intravenous (IV) sedation services are required to submit Treatment Authorization Requests (TARs). The TARs should be submitted with documentation justifying the medical necessity for the IV Sedation/GA.

Please note, the submission and criteria requirements outlined in the Manual of Criteria (MOC) will not be updated until the implementation of CDT-19 occurs. Providers are required to abide by the updated requirements outlined in Provider Bulletin Volume 31, Number 21 along with the attached flowchart to be used in conjunction with the Dental GA/IV Sedation policy.

The flowchart was developed to aid and ensure that providers are submitting appropriate documentation to justify medical necessity of the IV Sedation or GA. Each case requiring IV Sedation/GA is unique and should be evaluated as such. Although standard forms may be used to document the medical necessity for IV Sedation/GA, it is imperative that providers submit additional documentation that is specific to the case. If a dental treatment plan is available, it should be included with the justification for the IV Sedation/GA.

For more information, please call the Telephone Service Center at (800) 423-0507.

CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES

Treatment Authorization Request (TAR) submitted for Intravenous Sedation or General Anesthesia

#1/2 Local Anesthesia/conscious sedation (oral/inhalation) ***failed***

Documentation provided must support/justify the need for the consideration of using IV Sedation or GA.

#3

Effective communicative techniques and the <u>ability for immobilization</u> failed or was not feasible based on the medical needs of the patient.

Documentation provided must support/justify the need for the consideration of using IV Sedation or GA.

#1/2 Local Anesthesia/conscious sedation (oral/inhalation) was ***not feasible***

#4

Requires <u>extensive</u> dental restorative treatment or surgical treatment that cannot be rendered under local anesthesia or conscious sedation.

Submitted documentation outlines the extensive treatment or surgical treatment plan based on radiographs or visual exam (if unable to obtain radiographs) of the referring Dentist.

#5

Patient has acute situational anxiety due to <u>immature cognitive functioning</u>.

Submitted documentation indicates the patient is uncooperative due to cognitive immaturity whereby they are unable to follow commands from provider rendering the needed dental/surgical interventions.

#6

Patient is uncooperative due to certain physical or mental <u>compromising</u> conditions.

Documentation provided must support/justify the need for the consideration of using IV Sedation or GA.

When a provider determines that a beneficiary meets one of the criteria of 3-6, <u>it is not automatically considered</u> to be documentation that conscious sedation or IV sedation was not feasible; rather the submitted documentation of the criteria that was met <u>must be clearly stated</u> in the patient's records and the submitted documentation requesting GA must clearly demonstrate the need for this covered benefit.

April 2017

CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES

Dental Treatment Plan

Diagnostic / Preventive

Most diagnostic and preventive treatment can be rendered without IV Sedation/GA unless the patient is so uncooperative that even a dental examination cannot be completed without sedation.

Restorative

It is critical for the patient to be immobilized either through effective communicative techniques or physical restraints. Medical condition and/or cognitive maturity of the beneficiary can seriously impact the safe delivery of this treatment.

Surgical

Treatment can be lengthy based on the type of surgery. It is critical for the patient to be able to tolerate the length of the surgery as well as be immobilized either through effective communicative techniques or physical restraints. Medical condition and/or cognitive maturity of the beneficiary can seriously impact the safe delivery of this treatment.

Extensive dental treatment is not defined by the number of procedures rendered but the treatment that can be reasonably tolerated and rendered in a safe and humane fashion based on cognitive maturity and medical condition of the beneficiary. ***April 2017***