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.

Please note: Due to the COVID-19 situation, all seminars will be held as webinars. These changes are noted in red on the Provider Training Seminar Schedule page.

PROVIDER ENROLLMENT ASSISTANCE LINE

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

Available every Wednesday 8am - 4pm

Personal Protective Equipment (PPE) Announcement

Medi-Cal dental providers resuming deferred and preventive dental care, as announced in Provider Bulletin Volume 36, Number 14, must ensure they have sufficient supply of PPE per guidance from the California Department of Public Health.

During disruptions of the supply chain, dentists may request supplies through local Medical and Health Operational Area Coordinator (MHOAC). However, requests for supplies from MHOAC will be granted on a priority basis and are at the discretion of each MHOAC.

The Department of Health Care Services recognizes that providers are having difficulty with acquiring affordable PPE; however, due to budget constraints, the Medi-Cal Dental Program is unable to reimburse dental providers for PPE. **Note: Current Dental Terminology (CDT) code D1999 is not billable for PPE**. Claims with CDT code D1999 will be denied with Adjudication Reason Code (ARC) 269A - *Procedure denied for the following reason: Included in the fee for another procedure and is not payable separately*.

Providers may not charge Medi-Cal members for PPE costs. Pursuant to Title 42, Code of Federal Regulations, Section 447.15, providers agree that accepting Medi-Cal payments is considered payment in full, unless the member has a

share-of-cost requirement or has other insurance to cover the cost of the services performed.

For information on Medi-Cal Dental billing and payment policies, please refer to Provider Handbook Section 2 – Program Overview, page 2-14.

Language Interpreter Assistance for Dental Offices

Medi-Cal Dental reminds providers that language interpreter services are available to Medi-Cal members at no cost. To let your Medi-Cal patients know about these services, you can download the Provider Office Language Assistance Tagline and display it in your dental office. This at-a-glance, one-page sheet is written in threshold languages and lets Medi-Cal members know they should indicate if interpreter services are needed.

To obtain language interpreter services, either the Medi-Cal dental provider office or the member can call the Telephone Service Center, Monday through Friday, between 8 a.m. and 5 p.m. to request assistance over the phone or to schedule an American Sign Language (ASL) translator be present at the time of the appointment. Please note: Language interpreter services cannot be scheduled in advance. Providers can supply a language interpreter in the office or call the Telephone Service Center at 1-800-423-0507 and select the Interactive Voice Response (IVR) option 2 for interpreter services when prompted, to access language interpreters in approximately 250 languages.

New Aid Code for Emergency Assistance Foster Care

The Resource Family Approval (RFA) long-term funding solution mitigates the financial burden on families who have accepted placement of a child/youth or a Non-Minor Dependent on an emergency or compelling reason basis. State law requires counties to provide short-term payments to caregivers in an amount equal to the foster care basic level rate a child/youth would have otherwise received in an approved foster care home.

As of July 1, 2018, state law requires counties to continue funding for emergency caregivers in an amount equal to the foster care basic level rate paid to all resource families. New aid code 5L will serve children or youth who are either a dependent or ward of the court who

are placed with an emergency caregiver as an emergency or compelling reason placement, have submitted a RFA 01A application and are not currently eligible for a federal Temporary Assistance for Needy Families payment under the EA program.

Effective July 1, 2018, aid code 5L provided full scope Medi-Cal benefits to the child/ youth population.

New aid code description is as follows:

Aid Code	Benefits	Share of Cost	Program/Description
5L	Full Scope	No	Emergency Assistance Foster Care – Non-Federal

For questions regarding this new aid code or any other aid codes, please refer to Provider Handbook Section 7 – Codes or contact the Telephone Service Center at (800) 423-0507.

Corrected: New Aid Code for COVID–19 Testing

The House Resolution (H.R.) 6201 Families First Coronavirus Response Act authorized the Department of Health Care Services to provide Presumptive Eligibility (PE) benefits to individuals in need of COVID-19 diagnostic testing and treatment at no cost to the member. The member is enrolled on the date of application and their PE eligibility period will end on the last day of the following month.

Effective March 18, 2020, aid code V2 will be available to individuals with no insurance and individuals who have private insurance that does not cover COVID-19 diagnostic testing and treatment. Individuals assigned to **aid code V2 are not eligible to receive dental benefits**.

New aid code description is as follows:

Aid Code	Benefits	Share of Cost	Program/Description
V2	No Dental	No	PE for COVID-19 Diagnostic Testing, Testing-Related, and Treatment Services Only –Limited Scope. There are no age, income, or resource limits. Satisfactory immigration status is not required.

For questions regarding this new aid code or any other aid codes, please refer to Provider Handbook Section 7 – Codes or contact the Telephone Service Center at (800) 423-0507.

COVID-19 Guidance for Resuming Deferred and Preventive Dental Care

The Department of Health Care Services (DHCS) strongly recommends Medi-Cal dental providers review the California Department of Public Health (CDPH) guidance for resuming deferred and preventive dental care amidst the novel coronavirus (COVID-19) pandemic. CDPH's guidance includes specific criteria regarding local infection rates, personal protective equipment (PPE) requirements, COVID-19 screenings for patients and infection control clarifications from the Centers for Disease Control and Prevention (CDC).

- Providers must ensure they have adequate supplies, including sanitation supplies.

- It is strongly recommended that dental practices have a minimum 2-week supply of PPE for dentists and staff. This includes N95 respirators, face shields, goggles, surgical masks, and other infection control equipment.

- Place visual alerts such as signs and posters at entrances and in strategic places providing instruction on hand hygiene, respiratory hygiene, and cough etiquette.

- All patients and dental practice staff must be screened for symptoms of COVID-19 prior to entering the dental facility.

- Screen all patients for COVID-19 symptoms or contact a COVID-19 patient before the dental appointment using a telehealth platform to confirm non-COVID status.

- Dentists must refer patients who fail COVID-19 screening protocols to an appropriate provider or facility that will provide necessary care, avoiding emergency room referrals to the extent possible.

- Ensure that all patients are wearing a face covering while in the office. Dental offices should consider having a supply of facemasks or cloth face coverings to provide to patients who arrive without their own.

- Evaluate the necessity of the dental care based on urgency of dental problems and schedule the appointments accordingly.

- Limit the number of patients in the office or clinic at any one time to maintain physical distancing of a minimum of six feet between patients.

Providers are encouraged to regularly monitor the CDPH website for updates as they become available. Providers can also visit the California Dental Association (CDA) website for practice support resources, including a checklist and county-specific information.

Medi-Cal Eligible State Inmate Program (MSIP) Aid Codes

In November 2019, the Department of Health Care Services (DHCS) identified that Medi-Cal providers were improperly submitting and being paid for Medi-Cal State Inmate Program (MSIP) claims. To date, MSIP has followed a unique claiming structure that allows only the California Department of Corrections and Rehabilitation (CDCR) to claim federal reimbursement for services provided to Medi-Cal eligible state inmates and does not allow for direct Medi-Cal provider billing for MSIP services.

MSIP claims with the following aid codes submitted by an entity other than CDCR will be denied and directed to CDCR.

- **Medi-Cal State Inmate aid codes**:
    - F1, F2, GO, G1, G2, G9, N5, N6, N9, K2, K3, K4, and K5

Providers whose claims have been denied due to the aid codes referenced above should direct those claims to the mailing address below:

CorrectCare Integrated Health
P.O. Box 349206
Sacramento, CA 95834-9206

For questions about this MSIP aid code denials, please contact the Telephone Service Center at (800) 423-0507.