



# Provider Bulletin

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## THIS ISSUE

pg 1 COVID-19 Guidance on Reducing Aerosols and Educating Patients

## 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

## COVID-19 Guidance on Reducing Aerosols and Educating Patients

The Department of Health Care Services (DHCS) strongly recommends Medi-Cal dental providers review the California Department of Public Health (CDPH) [Interim Protocol for Preventive Dental Care During COVID-19 in Public Health Settings: Reducing Aerosols and Educating Patients](#). CDPH's new guidance includes instruction on techniques for providing preventive dental services to reduce aerosol emissions, as well as messaging to patients on what to do before and during preventive dental visits.

### Applying CDPH's Guidance to Medi-Cal Dental

CDPH's guidance states "preventive dental services should be a primary focus in preventing potential dental emergencies." In compliance with the requirements set forth in the [draft CDT-19 Manual of Criteria](#) (MOC), Medi-Cal dental providers may render and bill the following preventive dental services in a modified capacity.

### Dental Prophylaxis

Under Medi-Cal Dental, prophylaxis is defined as the preventive dental procedure of coronal scaling and polishing which includes the complete removal of calculus, soft deposits,

*Continued on pg 2*



plaque, stains, and smoothing of unattached tooth surfaces. Current Dental Terminology (CDT) procedure codes D1110 and D1120 may be billed for cleanings.

In alignment with CDPH's temporary guidance, Medi-Cal dental providers can perform prophylaxis using hand instruments, scalers, and perform selective tooth polishing. Instead of using the rubber cup polish (which produces aerosols), providers can opt for a toothbrush after hand scaling. Since extrinsic stain does not harbor bacteria and there is thus no therapeutic value in removing stain, providers might elect not to remove extrinsic stain during the COVID-19 pandemic, and should educate their Medi-Cal patients on the different types of stains and why alternate methods of polishing are being utilized. If a provider elects not to remove extrinsic stain during the pandemic, this shall not be cause for denial of payment of D1110 and D1120 for the duration of the CDPH's aerosol-reduction guidance period.

### **Dental Sealants**

Sealants are a Medi-Cal dental benefit for patients under the age of 21. When possible, providers should adhere to the techniques listed in CDPH's guidance, such as using a toothbrush to clean tooth surfaces prior to sealant placement and using cotton tips/gauzes, rather than an air/water syringe, to apply sealants. CDT procedure code D1351 may be billed for sealants.

### **Fluoride Varnish**

To avoid exposing dental providers, their staff, or their Medi-Cal patients to aerosols, providers are reminded that fluoride varnish can be applied without performing a cleaning. CDT procedure codes D1206 and D1208 are billable codes for topical application of fluoride.

### **Silver Diamine Fluoride**

Under Medi-Cal Dental, Silver Diamine Fluoride (SDF) may only be billed using CDT code D1354 as part of the Dental Transformation Initiative (DTI) Domain 2: Caries Risk Assessment and Disease Management bundle. Please refer to the [DTI page](#) of the DHCS website for specific information about DTI Domain 2 criteria and billing.

Providers are reminded, however, that D1354 may be rendered and billed outside of DTI Domain 2 when part of an Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) service. For the Medi-Cal Dental Program, medically necessary dental services provided for **any** Medi-Cal member who has not yet reached their 21st birthday can be approved under EPSDT with proper documentation establishing medical necessity. Please refer to Provider Bulletin [Volume 35, Number 11](#) for more information about EPSDT services.

For SDF, if a situation arises on a very young child or older child who is a special needs patient in which conventional restorative intervention is not feasible, then SDF may be the

*Continued on pg 3*



treatment of choice and, with proper documentation to establish medical necessity, can be approved under EPSDT.

### **Interim Therapeutic Restoration**

Though not mentioned in CDPH's guidance, providers are reminded of new CDT procedure code D2941, Interim Therapeutic Restoration - Primary Dentition, which was added as a New Benefit with the implementation of CDT-19, effective March 14, 2020. The new criteria are reflected via redlines in the draft MOC. Tooth preparation for this procedure can be performed with hand instruments to avoid creation of aerosols, thereby helping minimize the risk to dental providers and Medi-Cal patients.

For past CDPH COVID-19 guidance announcements, please refer to Provider Bulletins [Volume 36, Number 10](#) and [Volume 36, Number 18](#). Providers should 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](#).