



Provider Bulletin

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TRAINING SEMINARS

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

Please note: Due to the COVID-19 pandemic, all seminars will be held as webinars.

PROVIDER ENROLLMENT ASSISTANCE LINE

Speak with an Enrollment Specialist. Go [here](#) for more information.

Available every Wednesday
8am - 4pm

PROVIDER EMAIL LIST SIGN-UP

Registration is quick and easy! Join the [provider email distribution list](#) and get the latest Medi-Cal Dental updates straight to your Inbox.

Medi-Cal Dental Provider Referral Process Update

Medi-Cal Dental has updated the process to be added or removed from the [Medi-Cal Provider Directory](#) on the [Find a Dentist page](#). The directory is a tool that members can use to search for Medi-Cal dental providers in their area who may be accepting new Medi-Cal patients.

Effective November 12, 2021, any provider participating in Medi-Cal Dental who did not complete the [Medi-Cal Dental Directory/Referral Form](#) during their initial enrollment or during the yearly referral update will automatically be listed in the directory. Please note that Safety Net Clinics (Federally Qualified Health Centers, Rural Health Clinics, and Indian Health Clinics) will only be added to the [Dental Clinics Serving Medi-Cal Members](#) static list.

If you wish to be removed from the directory so that your dental office is **not listed**, you must complete and submit a new Medi-Cal Dental Provider Directory/Referral Form. You can access the form by visiting the [Provider Forms page](#) on the Medi-Cal Dental website. Once removed, you may submit the form at any time to be readded to the directory.

For questions about this bulletin, please call the Telephone Service Center at (800) 423-0507.

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Coming Soon: Health Plan of San Mateo (HPSM)

Dental Integration Program

Effective January 1, 2022, the San Mateo County Organized Health System, Health Plan of San Mateo (HPSM), in collaboration with the Department of Health Care Services, will integrate dental services into the managed care plan's covered benefits. Medi-Cal dental Fee-For-Service (FFS) providers who wish to continue serving Medi-Cal members in San Mateo County must join HPSM's dental provider network.

Why will Medi-Cal dental benefits be delivered through HPSM?

Senate Bill (SB) 849 (Ch. 47, Statutes of 2018) added [Section 14184.90](#) to the Welfare and Institutions (W&I) Code authorizing DHCS to establish a dental integration program in San Mateo County as a component of the Medi-Cal 2020 demonstration project.

What is this dental integration program designed to do?

The program is designed to test the impact to oral care access, quality, and utilization through the delivery of dental care services under HPSM.

How will I know if this change affects me?

If you are a provider located in San Mateo County this change affects you. In May 2021, HPSM contacted all Medi-Cal dental FFS providers in San Mateo County by phone, mail, or in-person about this change. Medi-Cal Dental also sent these providers notifications regarding HPSM informational webinars held on May 20 and 25, 2021.

How do I become part of HPSM's dental provider network?

For information about how to join HPSM's provider network, call (650) 616-5046 or email dental@hpsm.org. Providers are encouraged to contract with HPSM as soon as possible prior to January 1, 2022, to ensure continuity of care for Medi-Cal patients in San Mateo County.

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Can I continue seeing my Medi-Cal patients if I choose **NOT** to join HPSM's provider network?

If you choose not to contract with HPSM and your Medi-Cal patients wish to continue seeing you, they may submit a continuity of care request to HPSM. If you agree to work with HPSM, your patients may continue seeing you for up to 12 months. After the 12-month period, unless you join HPSM's provider network, your Medi-Cal patients will transition to a dental provider within the HPSM provider network. Your Medi-Cal patients may contact HPSM Member Services at 1-800-750-4776 (toll-free) or 650-616-2133, Monday through Friday, 8:00 a.m. to 6:00 p.m. for more information.

How will my impacted Medi-Cal patients be notified of this change?

HPSM will mail notices to Medi-Cal members enrolled in HPSM to inform them of this change 90 days in advance, followed by 60- and 30-day notices. In addition to the 60 and 30 day notices, HPSM is required to conduct additional outreach to members which may include newsletters, pamphlets, or other mailers.

For questions about the HPSM transition, please contact HPSM at (650) 616-5046 or dental@hpsm.org. Providers can also visit the [HPSM website](#) for more information.

End Date for Treatment Authorization Request Exceptions during COVID-19

As originally announced in Provider Bulletin [Volume 36, Number 8](#), effective March 20, 2020, the Department of Health Care Services allowed Treatment Authorization Request (TAR) exceptions for providers unable to render treatment during COVID-19 dental office closures.

Effective December 31, 2021, these processing exceptions will end.

1. For existing authorization:

- a. Medi-Cal dental providers with existing valid authorization are instructed to retain the Notice of Authorization (NOA) in their dental office. Providers **should not** send the NOA to Medi-Cal Dental for an extension nor submit a new TAR to extend the authorization period.

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2. For existing authorization expired March 20, 2020 or after:

- b. If a Medi-Cal dental provider has a NOA that expired as of March 20, 2020 or after, and the provider has not been able to render treatment due to COVID-19 limitations, they should follow the two steps outlined below:
 - i. Treat the patient when the dental office is reopened **on or before December 31, 2021** and submit a new claim for payment for the previously authorized services. Providers are required to document the delay due to COVID-19 limitations. They should also note that the services were previously authorized and include the Document Control Number of the authorized NOA in the comments field (box 34) of the claim.
 - ii. Submit their expired NOA for deletion to clear the member's history in the Medi-Cal Dental system.
 - iii. If treatment will not be completed before December 31, 2021, a new TAR must be submitted for the treatment authorized on the expired NOA.

For questions about this bulletin, please call the Telephone Service Center at (800) 423-0507.

Stay Up-to-Date on the Latest Medi-Cal Dental News

Sign up for the Medi-Cal Dental Fee-For-Service provider distribution list and get important announcements directly to your Inbox, including the latest on:

- » COVID-19 Provider Relief Fund Payment information and deadlines
- » Medi-Cal dental policy updates, including Current Dental Terminology (CDT) changes
- » Electronic Data Interchange (EDI) details and sign up information
- » Dental Transformation Initiative (DTI) updates
- » Proposition 56 supplemental payment updates

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Registration is quick and easy! Just follow the steps below.

1. **Complete and submit the [online form](#) to subscribe.** After you submit, you'll receive a confirmation email from the Medi-Cal Dental Provider Email Distribution (dental@dhcs.ca.gov).
2. **Follow the instructions in your confirmation email to authorize Medi-Cal Dental adding you to the list.** *Hint:* If you don't see a confirmation email in your Inbox, please check your Spam folder.
3. **Begin receiving Medi-Cal communications.** Once you've confirmed your subscription, you'll begin receiving regular communications from Medi-Cal Dental.

Providers and partners can also sign up for Smile Alerts to stay informed about Medi-Cal's *Smile, California* campaign. To receive Smile Alerts, simply send an email to hello@smilecalifornia.org, and we'll be in touch.

You can visit the *Smile, California* [Partners & Providers page](#) to learn more about the campaign and access helpful oral health tools and resources.

Outdated Form: Justification of Need for Prosthesis

Effective January 1, 2022, providers must use Justification of Need for Prosthesis (DC054) forms with a **revision date of Rev 09/18** when submitting to Medi-Cal Dental. To confirm the version, check the revision date at the bottom of the form.

Outdated DC054 forms received after January 1, 2022 will be denied with **Adjudication Reason Code (ARC) 155** - *Procedure requires a properly completed prosthetic DC054 form.*

Order New Forms

Please recycle any old forms and reorder new ones. To order, please complete and fax the [Forms Reorder Request](#) to the number on the form.

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How to Complete the DC054 Form

Refer to Medi-Cal Dental [Provider Handbook](#) Section 6 – Forms, for detailed instructions.

Save Time and Submit Electronically

For Electronic Data Interchange (EDI) enrollment information, please contact:

- **EDI Support** at (916) 853-7373 or Medi-CalDentalEDI@delta.org
- **Telephone Service Center** at (800) 423-0507

NOTE: Safety Net Clinics (Federally Qualified Health Centers, Rural Health Clinics, and Tribal 638 Clinics) are not subject to prior authorization. However, documentation should be consistent with the standards set forth in the Manual of Criteria (MOC) for Medi-Cal Authorization (Dental Services) and all state laws. A current DC054 form is required for screening and processing prosthetic cases and must be retained as part of patient records.

For current submission and criteria requirements, please refer to the [draft Current Dental Terminology \(CDT\) 2021 MOC](#) and [draft CDT-21 Schedule of Maximum Allowances \(SMA\)](#) for dates of services on or after October 1, 2021.