New Explanation of Benefits Update

The California Advancing and Innovating Medi-Cal (CalAIM) initiative went into effect on January 1, 2022. As part of this implementation, the Medi-Cal Dental Explanation of Benefits (EOB) form was updated to reflect CalAIM payment amounts. Providers can refer to Provider Bulletin Volume 38, Number 9 to learn about the initial CalAIM EOB update.

Effective March 16, 2022, the EOB form will be updated to further clarify CalAIM performance payment amounts. Please continue reading for details.

What’s New

1. CalAIM performance payment amounts will now be denoted on EOBs by “CALAIM CONT” (Continuity of Care) and “CALAIM PREV” (Preventive Services) under the Claim Service Line (CSL). “CALAIM CONT” replaces “CALAIM 3” and “CALAIM PREV” replaces “CALAIM 1”.

NEW Version:

```
   CLAIM TOTAL  101.00  152.50  152.50

Continued on pg 2
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2. CalAIM performance payment totals now appear as “CALAIM CONT” and “CALAIM PREV” on the EOB after the Claims/Adjustment section under “SUMMARY OF TOTAL AMOUNT INCLUDED IN THE PAID LINES FOR THIS CHECKWRITE”.

NEW Version:

```
SUMMARY OF TOTAL AMOUNT INCLUDED IN THE PAID LINES FOR THIS CHECKWRITE:

***************************************************
* TOTAL PROP 56 : 33.00 *
* TOTAL CALAIM PREVENTIVE (PREV) : 106.50 *
* TOTAL CALAIM CONTINUITY (CONT) : 55.00 *
***************************************************
```
PLEASE NOTE:

- **CALAIM CONT** refers to the Continuity of Care Pay-for-Performance (P4P) CalAIM initiative.
  - As a reminder, this is a flat rate of $55 paid once per calendar year, per member on procedures D0120, D0145, or D0150 if – and only if – an exam procedure was paid to the same dental provider service office location by Medi-Cal Dental in the previous year.
  - Please refer to the CalAIM P4P fee schedules to view the flat rate amount in addition to the Schedule of Maximum Allowances (SMA) for each procedure code.

- **CALAIM PREV** refers to the Preventive Services P4P CalAIM initiative.
  - Please refer to the CalAIM P4P fee schedules to view the performance payment amounts for select eligible procedure codes.

3. For easier viewing, a space will be added between the procedure code and date of service, and the “ / ” in the date of service will be removed for each CSL.

NEW Version:

```
CLAIM TOTAL  101.00  152.50
```

Current Version:

```
CLAIM TOTAL  101.00  152.50
```
For more information about CalAIM, please read Provider Bulletin Volume 38, Number 1.
To view the latest criteria and submission requirements, including current CalAIM and Prop 56 supplemental fee schedules, please refer to the Medi-Cal Dental Manual of Criteria and Schedule of Maximum Allowances page.