



# Provider Bulletin

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## SIGN UP FOR OUR EMAIL LIST

Learn the latest Medi-Cal Dental news and information by signing up for our Medi-Cal Dental Fee-For-Service Provider email distribution list [here](#).

## TRAINING SEMINARS

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

## PROVIDER ENROLLMENT

To enroll in the Medi-Cal Dental Program, or check the status of an existing enrollment application, click [here](#) or email [PAVE@dhcs.ca.gov](mailto:PAVE@dhcs.ca.gov).

# Specialty Dental Clinic Grant Program Now Accepting Applications

The Department of Health Care Services (DHCS) is pleased to announce that The California Health Facilities Financing Authority (CHFFA) is inviting eligible dental service providers to apply for the first funding round of the [Specialty Dental Clinic Grant Program \(SDCGP\)](#). Chapter 45, Budget Act of 2022, Section 47 provides the [statutory authority](#) for the program, which grants \$47,500,000.00 in capital funding for the Specialty Dental Clinic Grant Program. No grant may exceed \$5 million per individual grantee.

The deadline to apply for the first funding round is 5 p.m., Monday April 1, 2024. Eligible applicants include but are not limited to: primary care clinics, specialty clinics, community clinics, free clinics, surgical clinics, acute care hospitals, intermediate care facilities for the developmentally disabled, special hospitals, providers that are licensed with the Medical or Dental Board of California, and dental colleges. Eligible applicants must be enrolled and certified as a provider with the Medi-Cal program. Please see the [Medi-Cal Dental Provider Handbook, Section 2](#) for information on provider participation in the Medi-Cal Dental

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Medi-Cal Dental

[dental.dhcs.ca.gov](http://dental.dhcs.ca.gov)



Program. If you are not currently enrolled in Medi-Cal and is interested in enrolling, please apply through the [Provider Application and Validation for Enrollment \(PAVE\) Portal](#) or call the Provider Telephone Service Center at (800) 423-0507 for assistance.

Please visit the CHFFA's Specialty Dental Clinic Grant Program [webpage](#) for additional information and application. Applicants are strongly encouraged to review the [frequently asked questions](#) and [guidelines](#), which have definitions of terms and detailed requirements.

If you have any questions, please email [CHFFA \(chffa@treasurer.ca.gov\)](mailto:chffa@treasurer.ca.gov) or call 916-653-2799.

## Provider Seminars offer the Latest Medi-Cal Dental Program Information

[Medi-Cal Dental Provider training](#) seminars are a great way to learn about the Medi-Cal Dental Program from experienced and qualified instructors, which is referenced in the [Medi-Cal Dental Provider Handbook](#), Section 2 - Program Overview under Training Program.

In addition, dentists, registered or certified dental assistants, and registered dental hygienists can earn free continuing education unit (CEU) credits for the Basic, Advanced, and Orthodontic seminars by attending in-person, webinar, or On-Demand format. Please visit the [Medi-Cal Dental Provider Training](#) website for current information on upcoming seminars and trainings, and registration. Registering early is recommended.

Seminars are available year-round and cover the most current Medi-Cal Dental Program criteria, policies, and procedures in accordance to the [Medi-Cal Dental Provider Handbook](#) and [Provider Bulletins](#).

Providers can choose from the following series of seminars:

- **Basic and Electronic Data Interchange (EDI) Seminars:**
  - Basic seminars address general program purpose, goals, policies, and procedures. In addition, these seminars provide instructions for the correct use of standard billing forms and explain the reference materials and support services available to Medi-Cal dental providers.
  - The **presentation's EDI section** includes an overview of Treatment Authorization

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Request (TAR) and claims submissions, review and retrieval of reports, EDI label preparation, mailing of TARs and claims, and the submission of electronic attachments.

- **Advanced Seminars:** Advanced seminars offer current, in-depth information on topics such as Medi-Cal dental criteria, radiograph and documentation requirements, processing codes, and other topics of specific concern.
- **Orthodontic Seminars:** These specialized seminars for orthodontists address all aspects of the Medi-Cal orthodontic program, including enrollment and certification, completion of billing forms, billing procedures, and criteria and policies specific to Medi-Cal.
- **Workshops:** Workshops provide inexperienced billing staff with a hands-on opportunity to learn about Medi-Cal’s dental policies and procedures.

For assistance and questions regarding provider trainings, please call the provider Telephone Service Center at 1-800-423-0507. The call is free and Medi-Cal Dental representatives are available from 8:00 a.m. to 5:00 p.m., Monday through Friday.

## Treatment Authorizations After State Hearing Approval

The Department of Health Care Services would like to remind providers that members approved for dental treatment through a State Hearing will receive a Pre-Approval of Dental Treatment (pink letter), which the member can use to obtain services from any Medi-Cal provider of the member’s choice. This pink letter is authorization for the listed procedures. The provider who renders the procedures would need to submit the pink letter with the Medi-Cal dental claim for payment once the treatment has been completed.

**Note: Treatment allowed through the State Hearing process does not require a Medi-Cal Dental Treatment Authorization Request (TAR). However, this does not apply to authorizations for orthodontics. A TAR is required for allowed orthodontic treatment.**

### Treating Dentist’s Responsibilities:

- Be an enrolled Medi-Cal Dental dentist. Providers who are not currently enrolled in Medi-Cal and are interested in enrolling can apply through the [Provider Application and Validation for Enrollment \(PAVE\) Portal](#).

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- Verify member's Medi-Cal eligibility for the month treatment is completed.
- Provide the allowed treatment within 180 days from the date on the pink authorization letter.
- Submit a Medi-Cal Dental Claim form no more than six months after the end of the month in which the treatment was given. The Medi-Cal Dental Claim must include the original pink allowance notice. The Medi-Cal Dental Claim may be submitted electronically through your clearinghouse or by mail with the pink pre-approval letter attached.

The claim can be **mailed to:**

Medi-Cal Dental Program  
ATTN: State Hearing Department  
P.O Box 13898  
Sacramento, CA 95853-4898

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

## Dental Coverage for Members with both Medicare and Medi-Cal

On October 11, 2023, the California Department of Health Care Services (DHCS) released a new fact sheet for dental providers posted here: [Dental Benefits for Patients Dually Eligible for Medicare and Medi-Cal: Information for Dental Providers](#). The fact sheet provides information on dental benefits that Medicare and Medi-Cal offer, and how providers can bill for dental services provided to these members. Medicare, the primary payer for dual eligible members, does not cover most dental care. Medi-Cal covers a variety of dental benefits, administered by Medi-Cal dental providers. A dual eligible member may also receive dental benefits through their Medicare Advantage plan. For dental services covered by Original Medicare or a Medicare Advantage plan, the services must be billed to Original Medicare or the Medicare Advantage plan first.

If you have questions about Medicare, call 1-800-Medicare (1-800-633-4227 or

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TTY 1-877-486-2048), or call the Health Insurance Counseling & Advocacy Program at 1-800-434-0222.

If you have questions about Medi-Cal Dental, call the provider Telephone Service Center at 1-800-423-0507. If members have questions about Medi-Cal, they can call the member Telephone Service Center at 1-800-322-6384. Both telephone service center numbers are free and Medi-Cal Dental representatives are available to assist you and members from 8:00 a.m. to 5:00 p.m., Monday through Friday.

## Sacramento County Dental Managed Care Plan Parity

As part of the California Advancing and Innovating Medi-Cal (CalAIM) 1915(b) waiver Special Terms and Conditions (STC), the Department of Health Care Services (DHCS) conducted a parity evaluation to assess the performance (utilization) of Sacramento County dental managed care (DMC) plans compared to the statewide dental fee-for-service (FFS) delivery system. The evaluation was based on utilization measures for calendar year 2022 in the following categories: Annual Dental Visits, Preventive Dental Services, and Use of Sealants for children and adults.

Based on the evaluations, DHCS has determined that none of the three DMC plans operating in Sacramento County – Access Dental Plan, Health Net Dental, and Liberty Dental Plan – met parity with statewide FFS utilization averages in all required measures. As a result, members currently enrolled in DMC plans will have the option to enroll in FFS.

Beginning in November 2023, DHCS will send notices to approximately 614,000 members currently enrolled in DMC plans in Sacramento County. The notices will inform affected DMC members of their option to either stay with their current plan or disenroll and join FFS because their current DMC plan did not ensure adequate quality of services. This disenrollment will be effective on December 1, 2023. The notice will provide information on how members can access dental services if they choose FFS or their option to choose an alternate DMC plan only if the member is able to establish an access to care issue in FFS. This notice will be sent only once to currently enrolled DMC plan members in Sacramento County.

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Additionally, effective December 1, 2023, newly eligible Medi-Cal members will be enrolled by default into dental FFS. Starting in November 2023, newly eligible Medi-Cal members in Sacramento County will no longer receive a Medi-Cal Choice Packet for DMC enrollment. Newly eligible individuals will instead receive a dental FFS welcome packet containing an insert informing the member of their option to select a DMC plan if the member is able to establish access to care issues within the dental FFS delivery system. The notice will direct members to contact Medi-Cal Dental to determine if an access to care issue exists, and if an access to care issue does exist, a choice packet to enroll in a DMC plan will be sent. The insert will continue to be mailed to newly enrolled members in Sacramento County until DHCS procures for new DMC plans in this county.

To review dental FFS and DMC performance reports, visit the [Dental Data Reports webpage](#).

Members will still get the same dental coverage whether they are in FFS or in a DMC plan. Additional information regarding the change including member questions and answers are available on the website at: <https://smilecalifornia.org/sacramento/>.

### **What does this mean for Medi-Cal DMC providers?**

- If you are already enrolled as a Medi-Cal dental FFS provider, you can continue to see Medi-Cal members.
- If you are a Medi-Cal DMC provider and **NOT** currently enrolled as a Medi-Cal dental FFS provider, you will need to enroll in the dental FFS program to continue seeing members who elect to switch to FFS.
- If you are interested in becoming a Medi-Cal dental FFS provider, you can apply by visiting the Provider Application and Validation for Enrollment (PAVE) portal at: [www.dhcs.ca.gov/provgovpart/Pages/PED.aspx](http://www.dhcs.ca.gov/provgovpart/Pages/PED.aspx) or contact the Medi-Cal Dental Program at **1-800-423-0507** for assistance.