Provider Bulletin

MARCH 2024
Volume 40, Number 12

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.

Provider Seminars Offer the Latest Medi-Cal Dental Program Information

Provider training seminars are a great way to learn about the Medi-Cal Dental Program from experienced, qualified instructors. In addition, dentists, registered or certified dental assistants, and registered dental hygienists can earn free continuing education credits.

Seminars are available year-round and cover the most current Medi-Cal Dental Program criteria, policies, and procedures. To find and register for a seminar, please visit the Provider Training Seminar Schedule page for a complete list of seminars.

Note: In-person seminars are back! Along with our current virtual webinar schedule, our in-person seminars offer opportunities for providers to learn more about the Medi-Cal Dental Program. The Provider Training page contains information on upcoming seminars, including seminar descriptions, current schedules, and registration. Registering early is recommended.

Seminars

Providers can choose from the following series of seminars:

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- **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 Requests (TARs) 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.

Seminars On-Demand

Providers have the option to register and take the seminars online to earn Continuing Education (CE) Credits. CE Credits are available for the following on-demand courses:

- Basic Seminar

- Advanced Seminar

- Orthodontic Seminar

- Procedure Code D9920

- Periodontal Training

For current submission and criteria requirements, please refer to the Medi-Cal Dental Manual of Criteria and Schedule of Maximum Allowances webpage and Section 2 – Program Overview of the Provider Handbook.

Updated Requirements and Procedures for the Enrollment of Medi-Cal Dental Providers

Effective October 31, 2022, dental providers may apply for enrollment in the Medi-Cal Dental Fee-For-Service program as individuals, group providers, rendering providers, ordering/referring/prescribing providers, or crossover-only providers. These providers can submit an electronic application through the Provider Application for Validation and Enrollment (PAVE) online enrollment portal, along with all supporting documentation. Please see the Department of Health Care Services (DHCS) Provider Enrollment Provider Bulletin Updated Requirements and Procedures for the Enrollment of Medi-Cal Dental Providers for additional information.

Application Requirements

Dental providers requesting initial enrollment, changes to enrollment, and continued enrollment must submit an electronic application through the PAVE online enrollment portal, along with all "required documents." Please note that paper applications are no longer accepted.

Types of Enrollments

- Preferred Provisional Provider Eligibility

- University Enrollment

- Rendering Physician Enrollment

- Specialized Enrollments

    o   Facility-Based Dental Provider

    o   School-Based Dental Provider Enrolment

    o   Mobile Dental Clinic Enrollment

    o   Registered Dental Hygienists in an Alternative Practice

Questions and Assistance

For provider enrollment inquiries and assistance, please contact the Provider Enrollment Division (PED) using the Inquiry Form on PED's website under "Provider Resources." You can also call the PED Message Center at (916) 323-1945, email PED at PAVE@dhcs.ca.gov, send a message through the PAVE portal. For assistance with enrollment and resolving deficiencies, please contact the Medi-Cal Dental Provider Enrollment Concierge Service at (888) 284-0623.

Medical Record Retention Guidelines

Retaining medical records is crucial for maintaining comprehensive patient continuity of care. It is important to maintain these records in accordance with the Provider Handbook and California State Law. Here are some reminders for providers regarding record retention requirements:.

Required Records

Per Title 22, California Code of Regulations (CCR), Section 51476. (a), each provider shall keep, maintain, and have readily retrievable records as necessary to fully disclose the services provided to a Medi-Cal member. Required records shall be made at or near the time the service is rendered. Records shall include the following:

- Billings

- Treatment Authorization Requests (TARs)

- All medical records, service reports, and orders prescribing treatment plans.

- Records of medications, drugs, assistive devices, or appliances prescribed, ordered for, or furnished to members.

- Copies of original purchase invoices for medication, appliances, assistive devices, written requests for laboratory testing and all reports of test results, and drugs ordered for or supplied to members.

- Copies of all remittance advices which accompany reimbursement to providers for services or supplies provided to members.

- Identification of the person rendering services. Records of each service rendered

by nonphysician medical practitioners (as defined in CCR, Title 22, Section 51170) shall include the signature of the nonphysician medical practitioner and the countersignature of the supervising physician.

Prescriptions

Per Title 22, CCR, Section 51476. (d), every practitioner who issues prescriptions for Medi-Cal members shall maintain the patient's chart and records with the following for each prescription:

- Name of the patient

- Date prescribed

- Name, strength, and quantity of the item prescribed

- Directions for use

Services Rendered Portion of the Patient Chart

Examples of appropriate documentation to be placed in the services rendered portion of the patient chart include, but are not limited to:

- Type and dosage of local anesthetic;

- Type and dosage of vasoconstrictor;

- Number of carpules used;

- When local anesthetic is not used for procedures which normally call for local anesthetic, but is not used;

- Original radiographs and photographs must be included;

- Specific treatment and materials placed for restorative services;

- Specific service provided for topical fluoride application;

- Written documentation explaining emergency services;

- The extent and complexity of a surgical extraction; and

- Specific documentation for medical necessity, observations and clinical findings, the specific treatment rendered and medications or drugs used during periodontal procedures.

Retention periods

Records herein required to be kept and maintained shall be retained by the provider for a period of ten years from the date the service was rendered.

Questions

For more information, please contact the Provider Telephone Service Center at (800) 423-0507. The Telephone Service Center Representatives are available to answer phone calls between 8:00 a.m. and 5:00 p.m., Monday through Friday.

Dental Billing Tips

Accurate billing practices are essential for efficient claims processing and timely reimbursement. This article covers resources for billing criteria and questions, top claim and Treatment Authorization Request (TAR) denial reasons, helpful hints to avoid the denials, and tips for claim and TAR form submissions.

Resources

1. Provider Bulletins provide the latest updates on the Medi-Cal Dental program.

   a. Go to [Welcome to the Medi-Cal Dental Program](#).

   b. In the search box, enter the procedure name, for example, type "laboratory processed crowns".

   c. From the list of results select the latest bulletins on the topic.

2. The Manual of Criteria outlines criteria for each procedure that must be met to be considered a covered service in. The General Policies Sections in the MOC also provide guidelines for each procedure category.

   a. Go to the [Manual of Criteria](#).

   b. Click the find button in the upper right and search procedure name, for example, "laboratory processed crowns".

   c. Click the down or up arrows in the search box to learn more about the procedure.

3. The Telephone Support Center is available to assist providers with questions about billing and claims.

   a. Providers may call Medi-Cal Dental toll-free at (800) 423-0507.

   b. The Telephone Service Center representatives are available to answer phone calls between 8:00 a.m. and 5:00 p.m., Monday through Friday.

   c. Patient history, claim/TAR status, or financial information can be accessed between 2:00 a.m. and 12:00 midnight, seven days per week, using the automated Interactive Voice Response system.

   d. General program information is available 24 hours a day, seven days a week, using the automated system.

4. Training Sessions are designed to meet the needs of our providers.

   a. Medi-Cal Dental's extensive training program is available to all Medi-Cal Dental providers and their staff.

   b. The following In-Person Seminars, Webinars, and Seminars On-Demand trainings provide free CE Credits.

Top Denial Reason Codes

In addition to the resources listed above, here are the top five reasons for claim and TAR denials:

1. Reason Code 128: Cast and prefabricated posts are benefits for endodontically treated devitalized permanent teeth only when crowns have been authorized and/or paid by the Medi-Cal Dental program.

2. Reason Code 113: Tooth does not meet the Manual of Criteria for a laboratory processed crown. Re-evaluate for alternative treatment. Refer to Restorative General Policies (D2000-D2999) in section 5 of the Provider Handbook.

3. Reason Code 081: Periodontal procedures cannot be justified based on pocket depth, bone loss, and/or degree of deposits as evidenced by the submitted radiographs and/or charting. Refer to Periodontal General Policies (D4000-D4999) in section 5 of the Provider Handbook.

4. Reason Code 048: Extraction of a tooth is not payable when pathology is not demonstrated in the radiograph, or when narrative documentation submitted does not coincide with the radiographic evidence. Refer to Oral and Maxillofacial General Policies (D7000-D7999) in section 5 of the Provider Handbook.

5. Reason Code 326: Procedures being denied on this document due to an invalid response to the Resubmission Turnaround Documents (RTDs) or, if applicable, failure to provide radiographs/attachments for this EDI document.

Common Clinical Reasons for Denials

- Non-diagnostic radiographs

- Missing or incomplete submission of radiographs

- Radiographs/photographs fail to demonstrate medical necessity for restorative procedures.

- Poor prognosis for treatment, such as severe bone loss or gross destruction rendering the tooth/teeth/arch unrestorable.

Common Administrative (Clerical) Reasons for Denials

- Other coverage claims for payment must have an Explanation of Benefits/Remittance Advice attached showing action taken from the prime carrier. Medi-Cal Dental is always the secondary carrier.

- Failure to submit treating provider/NPI numbers.

Helpful Hints to Avoid Denials

- To streamline your billing process and reduce the chance of claim denials:

    - For members 21 years and older

        o authorized procedures on a Notice of Authorization (NOA) remain payable even if the member's 21st birthday occurs before the NOA's expiration date.

        o Orthodontic coverage is available up to age 21 for qualifying members. Authorized Ortho treatment can be provided through the month of their 21st birthday.

- All Medi-Cal Dental forms (e.g., claims, TARs, NOAs, RTDs, Claim Inquiry Forms) require a wet signature from the provider or authorized staff member. Rubber stamps or "signature on file" cannot be accepted.

- Bitewing radiographs are considered arch films and remain current for 36 months.

- Anterior periapical radiographs and bitewings suffice to establish arch integrity of the upper/lower arches.

- Use x-ray envelopes exclusively for radiographs and photographs, not for periodontal charts or other documentation. Staple all attachments to the back of the Claim/TAR form. Do not reuse X-ray envelopes returned by Medi-Cal Dental.

Form Submission Tips

- Accurate and thorough completion of the form is crucial for processing.

- Unless stated otherwise, every field must be filled out completely.

- Any claim service line (CSL) submitted with an invalid procedure code, or an empty procedure code field will be denied, regardless of whether it's submitted electronically or as paper documents.

- Documents received with a missing or incorrect address or NPI can cause delays in the processing of TARs and claims and may increase the risk of payments being sent to the wrong office.

We hope the information in this provider bulletin assists enables you to have an improved claims processing experience. For more information on top reasons for TAR and claim denials, please visit the Provider Related FAQs.

For any questions, please contact the Provider Telephone Service Center at (800) 423-0507. The Telephone Service Center representatives are available to answer phone calls between 8:00 a.m. and 5:00 p.m., Monday through Friday.

New Periodontal On-Demand Training Is Now Available for Providers Through LearnUpon

Medi-Cal Dental is pleased to announce the addition of a new Periodontal On-Demand training course. Dentists, registered dental hygienists, and registered dental assistants can now earn 1 free continuing education credit by completing this course.

The new training will cover the following topics:
Prophylaxis (D1110 and D1120) for children and adults;

- Full Mouth Debridement to Enable a Comprehensive Periodontal Evaluation and Diagnosis on Subsequent Visit (D4355);

- Scaling in presence of generalized moderate or severe gingival inflammation – full mouth, after oral evaluation (D4346);

- Periodontal Scaling and Root Planing (D4341 and D4342); and,

- Periodontal Maintenance (D4910)

This training is focused on improving the approval rate for providers periodontal claims by focusing on criteria and submission requirements. As a reminder, radiographs should be current, of diagnostic quality, and labeled with the date the radiograph was taken and have the provider's name, patient name, provider billing number, and have the tooth/quadrant/area/orientation indicated. Radiographs and photographs should adhere to all guidelines described in the Medi-Cal Dental Provider Handbook, Section 5, General Diagnostic Policies, Radiographs and Photographs.

Please visit the Medi-Cal Dental Provider Training website to create an account in LearnUpon and access this training. All on-demand training modules are available 24 hours a day, seven days a week. On-Demand Medi-Cal Dental training seminars are a great way to learn about the Medi-Cal Dental Program from experienced and qualified instructors.