



Member Bulletin

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Notice of Medi-Cal Dental Action Update

If your dental treatment request is denied or changed, you will receive a Notice of Medi-Cal Dental Action. The notice tells you why the dental treatment is denied, changed, or pending. It also tells you what you can do if you do not agree.

Medi-Cal Dental recently expanded the number of reasons for denied, changed, or pending treatment that may be listed on the notice. The notice will tell you about a change or a pending action for the dentist or Medi-Cal Dental. You should talk to your dentist if you have any questions about the notice or you can call the Telephone Service Center at 1-800-322-6384.

If you do not agree with the Notice of Medi-Cal Dental Action, you should first talk to your dentist about options or next steps. If you and your dentist agree that a different treatment plan is not an option, you can request a State Hearing. You can find more information in the [Member Handbook](#) and in this [Member Informational Document](#) which can be found on the *Smile, California* website on the Members tab under the [Medi-Cal Dental Materials](#) drop-down or on the Medi-Cal Dental website Members page under [Important Links](#).

Learn more about free or low-cost dental services to help keep you and your smile healthy at: SmileCalifornia.org

FIND A DENTIST

Click for a complete list of Medi-Cal dental providers in your area.

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Member Automated Call System Update

Medi-Cal Dental has updated the member automated call system to include eight (8) new languages. As a Medi-Cal member, you have the right to an interpreter at no charge. When you call the Telephone Service Center (TSC) at 1-800-322-6384, follow the prompts to access these languages:

- English, press 1
- Spanish, press 2
- Mandarin, press 3
- Vietnamese, press 4
- Russian, press 5
- Farsi, press 6
- Korean, press 7
- Cantonese, press 8
- Arabic, press 9
- Armenian, press 10
- For a language not listed, press 11

You can also ask for language assistance when you call the TSC. An interpreter can answer your questions and:

- Explain what your dentist tells you at your visit
- Explain your plan of care
- Talk to dental staff

If you get to your dental visit and need an interpreter in the dental office, you or your dentist may call the TSC at 1-800-322-6384. Please note that language interpreter services cannot be scheduled before an appointment.

Medi-Cal Member Identification

Make sure you are ready for your next dental visit! Remember to bring the items below each time you visit the dentist:

- » **Medi-Cal Benefits Identification Card (BIC):** The BIC is identification (ID) for Medi-Cal members. Having the card does not guarantee eligibility for Medi-Cal benefits.

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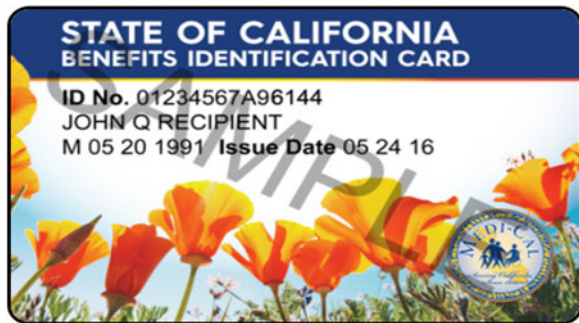


- » **Valid, current photo ID:** Bring a valid, current California photo ID, such as a driver’s license or ID card. If your photo ID has expired, the dental office will accept it up to six months from the expiration date.
- » **Social Security Number (SSN):** If a foster child has not received a BIC, the dental office can use the foster child’s SSN to check eligibility.
- » **Other dental coverage:** If you have other dental coverage, bring that information to show the dental office.

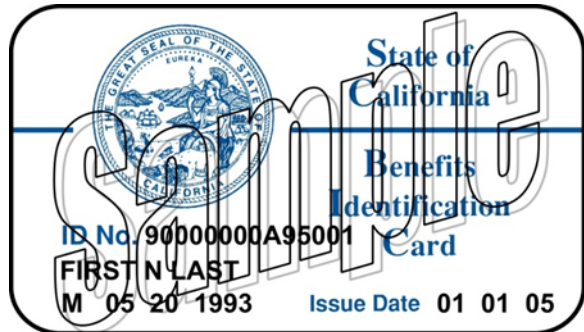
Your dental office uses these items to check your Medi-Cal coverage and eligibility. Your dental office will tell you which dental services are covered by Medi-Cal. They can also help you decide the best treatment.

Below are examples of Medi-Cal ID cards.

BIC Poppy Design:



BIC Pre-Poppy Design:



Medi-Cal Identification Card Presumptive Eligibility:

DO NOT DESTROY THIS CARD/NO DESTRUYA ESTA TARJETA	
SIGNATURE/FIRMA: <i>Jane Doe</i>	DATE/FECHA: 09/19/99
THE PERSON NAMED ON THIS CARD IS ELIGIBLE TO RECEIVE BENEFITS UNDER PRESUMPTIVE ELIGIBILITY	
VALID FOR AMBULATORY PRENATAL CARE AND PHARMACY SERVICES ONLY	PROVIDER USE ONLY
	MEDI-CAL APPLICATION FILED: PROVIDER
	PE PROVIDER SIGNATURE: STAMP
	PE PROVIDER TITLE: HERE
	SECOND GOOD THRU:
	MEDI-CAL ID: 12-7G-2A34567-8-90
	FIRST GOOD THRU: 10/31/99
	PATIENT NAME: JANE DOE
	DOB (MM/DD/YY): 123170
PE Provider Signature: <i>John Jake, MD</i>	Date: 09/19/99
PE Provider Title: M.D.	

Immediate Need Card:

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*****
STATE OF CALIFORNIA
TEMPORARY BENEFITS IDENTIFICATION CARD
*****
=====
FOR IDENTIFICATION PURPOSES ONLY
PROVIDER: PLEASE VERIFY ELIGIBILITY
=====
*****
ID NO. BICIDNUMBERXXX          ISSUE DATE: MM/DD/YYYY
FIRSTNAME I LASTNAME APL      GOOD THRU : MM/DD/YYYY
F MM/DD/YYYY
SIGNATURE _____
*****
TERMVTAMCICSTRANYYYYMMDDHHMSSDDDPXXXXDISWRKR
*****

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If you have any questions about your Medi-Cal coverage or eligibility, please call the Telephone Service Center at 1-800-322-6384.

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Important: Your Contact Information

Help us keep your contact information current so you can receive important updates. Some examples include:

- Provider referrals
- Member Complaint Forms
- Medi-Cal Dental notices about your dental treatment
- Refund claims

If you need to update your information, please contact your local County Social Services office. A complete list of county offices can be found on the Department of Health Care Services website [here](#).

October is National Dental Hygiene and Orthodontic Health Month

Did you know that keeping your mouth clean is an important part of your overall health? You should brush and floss your teeth daily and go to your dentist regularly. The American Dental Association's (ADA) [Mouth Healthy website](#) suggests that you:

- Use the right size toothbrush to brush your teeth two times each day
- Get a new toothbrush after three to four months, or sooner if needed
- Brush with an ADA compliant toothbrush. Check the packaging for the ADA-accepted seal

Keeping your mouth clean and regular dental visits are also a must when you have braces. When cleaning your teeth, don't forget to use:

- Water for rinsing your mouth (after every meal, snack, or acidic drink)
- A toothbrush
- An interdental brush (a small dental brush that can reach where a regular toothbrush can't)
- Floss

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Check out the American Association of Orthodontists article [Six Must-Haves for Cleaning Teeth with Braces or Aligners When You're on the Go](#) for more information. You can also ask your Medi-Cal dentist how best to keep your mouth and braces clean.

Need to find a dentist? You can [click here](#) to find one online. For more ways to keep your smile healthy, visit [SmileCalifornia.org](#).

Find a Dentist

Do you need to find a Medi-Cal dentist near you? You can easily search for one by clicking on the Find a Dentist button on [SmileCalifornia.org](#).

Once you click on the [Find a Dentist](#) button you can view the lists to find one. We understand it may be hard to find an open dental office during COVID-19 restrictions; to help you locate one, please check out the [COVID-19 Provider Emergency Service Locations](#) map on the Medi-Cal Dental website.

If you cannot find a dentist in your area who accepts Medi-Cal or your regular dental office is closed, please call the Telephone Service Center at 1-800-322-6384 for help.

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Language Assistance

English

ATTENTION: If you speak another language, language assistance services, free of charge, are available to you. Call 1-800-322-6384 (TTY: 1-800-735-2922).

Español (Spanish)

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-322-6384 (TTY: 1-800-735-2922).

Tiếng Việt (Vietnamese)

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-800-322-6384 (TTY: 1-800-735-2922).

Tagalog (Tagalog – Filipino)

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-800-322-6384 (TTY: 1-800-735-2922).

한국어 (Korean)

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다.

1-800-322-6384 (TTY: 1-800-735-2922). 번으로 전화해 주십시오.

繁體中文 (Chinese)

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-800-322-6384 (TTY: 1-800-735-2922)。

Հայերեն (Armenian)

ՈՒՇԱՂԴՐՈՒԹՅՈՒՆ ԵՐԵ ՀԱՅ ԵՐԵՆ, ապա ձեզ անվճար կարող են տրամադրվել լեզվակապակցում աջակցություն ծառայություններ: Ձանգահարեք 1-800-322-6384 (TTY (հեռատիպ)՝ 1-800-735-2922):

Русский (Russian)

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-800-322-6384 (телетайп: 1-800-735-2922).

فارسی (Farsi)

توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با 1-800-322-6384 (TTY: 1-800-735-2922) تماس بگیرید.

日本語 (Japanese)

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。1-800-322-6384 (TTY: 1-800-735-2922) まで、お電話にてご連絡ください。

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Hmoob (Hmong)

LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau 1-800-322-6384 (TTY: 1-800-735-2922).

ਪੰਜਾਬੀ (Punjabi)

ਪਿਆਨ ਦਿਓ: ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਭਾਸ਼ਾ ਵਿੱਚ ਸਹਾਇਤਾ ਸੇਵਾ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਉਪਲਬਧ ਹੈ। 1-800-322-6384 (TTY: 1-800-735-2922) 'ਤੇ ਕਾਲ ਕਰੋ।

العربية (Arabic)

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-800-322-6384 (رقم هاتف الصم والبكم: 1-800-735-2922).

हिंदी (Hindi)

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-800-322-6384 (TTY: 1-800-735-2922) पर कॉल करें।

ภาษาไทย (Thai)

เรียน: ถ้าคุณพูดภาษาไทยคุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี โทร 1-800-322-6384 (TTY: 1-800-735-2922).

ខ្មែរ (Cambodian)

ប្រយ័ត្ន: បើសិនជាអ្នកនិយាយភាសាខ្មែរ, បសវនកររបស់យើងនឹងជួយអ្នកដោយមិនគិតថ្លៃ គឺអាចមានសំរាប់បរិស្ថាន។ ចូរ ទូរស័ព្ទ 1-800-322-6384 (TTY: 1-800-735-2922)។

ພາສາລາວ (Lao)

ໂປດຊາບ: ຖ້າວ່າທ່ານເວົ້າພາສາລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທ 1-800-322-6384 (TTY: 1-800-735-2922).