



Provider Bulletin

OCTOBER 2020
Volume 36, Number 27



THIS ISSUE

- pg 1 Update to the Notice of Medi-Cal Dental Action
- pg 2 \$1,800 Dental Cap Clarification
- pg 2 Member Interactive Voice Response System Update
- pg 3 Medi-Cal Dental Fiscal Intermediary Name Change
- pg 3 Verifying Member Identification Policy Update
- pg 4 Enrollment Assistance
- pg 5 *Smile, California* COVID-19 Resources for Your Medi-Cal Members
- pg 6 October is National Dental Hygiene and Orthodontic Health Month

TRAINING SEMINARS

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

Please note: Due to the COVID-19 situation, all seminars will be held as webinars. These changes are noted in red on the [Provider Training Seminar Schedule page](#).

PROVIDER ENROLLMENT ASSISTANCE LINE

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

Available every Wednesday
8am - 4pm

Update to the Notice of Medi-Cal Dental Action

To comply with State and Federal Regulations, Medi-Cal Dental is required to send all Medi-Cal members a Notice of Medi-Cal Dental Action when treatment is denied, modified, or deferred. The notification indicates the status of the Treatment Authorization Request (TAR) and explains why the requested service was denied, modified, or deferred. Members do not receive written notification of approved TARs or services that have been performed.

Medi-Cal Dental recently expanded the number of Reason for Action Codes on a Notice of Medi-Cal Dental Action. Members will now be notified of any action taken on a TAR, including, but not limited to, a change from one procedure to another (Replaced and Substituted), denial of a procedure for any reason, and a Resubmission Turnaround Document (RTD) request for more information. When an RTD is issued on a TAR, the Notice of Medi-Cal Dental Action will be reported with a "Pending" status on all service lines on the member notification. For example, Medi-Cal members will now receive a Notice of Medi-Cal Dental Action if a procedure requiring authorization was denied, such as Adjudication Reason Code (ARC) 013A - *Procedure has been authorized. However, the actual fee allowance cannot be established until payment is requested with the hospital time documented in operating room report.*

Continued on pg 2



Medi-Cal members may contact the provider for assistance with inquiries concerning their Notice of Medi-Cal Dental Action notices. If the provider is unable to answer the member's questions, please refer them directly to Medi-Cal Dental. A Medi-Cal member or authorized representative may call the Telephone Service Center at (800) 322-6384 for assistance with inquiries about denied, modified, or deferred TARs.

For more information about the Notice of Medi-Cal Dental Action, please refer to [Provider Handbook](#) Section 6 - Forms, pages 6-20 through 6-24.

\$1,800 Dental Cap Clarification

The annual \$1,800 per member dental soft cap does not apply to procedures the Medi-Cal Dental Program deems medically necessary.

Medi-Cal dental providers do not need to take any action as a result of this change and are not responsible for checking a Medi-Cal member's dental cap prior to rendering medically necessary services. All previously authorized services on Treatment Authorization Requests or medically necessary procedures billed on claims will not be subject to the \$1,800 member dental cap as long as the procedures have met the criteria requirements outlined in the draft [CDT-19 Manual of Criteria](#).

Please note: The member dental cap balance displayed on the Notice of Authorization is informational only.

For details about the soft dental cap, please refer to [Provider Handbook](#) Section 4 -Treating Members. For questions regarding this notice, please contact the Telephone Service Center at (800) 423-0507.

Member Interactive Voice Response System Update

Medi-Cal Dental has updated the member Interactive Voice Response (IVR) system. In addition to English and Spanish, members can now access the IVR in Mandarin, Vietnamese, Russian, Farsi, Korean, Cantonese, Arabic, and Armenian. Most notable, members who need language interpretation assistance at a dental appointment may now request an interpreter through the IVRs main menu by selecting one of the languages noted and then choosing option 1 when prompted. The member IVR can be accessed by calling the Telephone Service Center toll-free at (800) 322-6384.

Continued on pg 3



As a reminder, language interpreter services are available to Medi-Cal members at no cost. Please note that language interpreter services cannot be scheduled in advance. Providers can supply a language interpreter in the office or call the Telephone Service Center at (800) 423-0507 and select IVR option 2 for interpreter services to access language interpreters in approximately 250 languages.

More information about the [provider](#) and [member](#) IVRs can be found on the Medi-Cal Dental website. Details about the provider IVR can be found in [Provider Handbook](#) Section 4 – Treating Members, pages 4-6 and 4-7.

Medi-Cal Dental Fiscal Intermediary Name Change

Effective October 1, 2020, providers may notice that the Department of Health Care Services (DHCS) Fiscal Intermediary (FI) for the Medi-Cal Dental Program, formerly DXC Technology, is operating under a new company name, “Gainwell Technologies.” Operations and interactions with providers **are not** impacted by this FI name change. There are no changes in the telephone numbers used by providers, including the Telephone Service Center (TSC) number, (800) 423-0507, as a result of this name change. The mailing addresses used by providers to conduct business with DHCS and the FI will remain the same as well. Any future updates regarding this change will be addressed in Provider Bulletins. To be notified of the latest news directly, please sign-up for the [Medi-Cal Dental provider email distribution list](#).

Verifying Member Identification Policy Update

Update: Medi-Cal dental providers must now accept expired photo identification (ID) up to six months from the date of expiration to verify a Medi-Cal patient’s eligibility. During this grace period, providers may not deny Medi-Cal patients service for an expired ID. For member eligibility verification and ID requirements, please refer to the following guidelines.

Member eligibility for the Medi-Cal Dental Program is determined by a County Social Services office and reported to the State of California. When a member is eligible for Medi-Cal, they will receive a Medi-Cal Benefits ID Card (BIC). While the BIC serves as a permanent ID for a Medi-Cal member, possession of the card does not guarantee eligibility for Medi-Cal benefits. **A member’s Social Security Number (SSN) is also an allowable**

Continued on pg 4



method to verify Medi-Cal eligibility and is especially important when providing necessary services to foster children whose foster parents may not have the child's BIC readily available.

Providers should always verify Medi-Cal eligibility prior to rendering services. Providers may access the Medi-Cal Automated Eligibility Verification System (AEVS) or the [Medi-Cal website](#) and, with the member's approval, may use the member's BIC or SSN to verify eligibility. Please note that verifying eligibility on the Internet requires providers to complete and mail the [Medi-Cal Point of Service \(POS\) Network/Internet Agreement](#) to the POS/Internet Help Desk. Providers can also verify eligibility by calling Medi-Cal AEVS at (800) 456-AEVS (2387).

If the member is unknown to the provider, the provider is required to make a "good faith" effort to verify the member's ID. A provider can do this by matching the name and signature on the BIC to that on a valid, current photo ID (a California driver's license, a photo ID card issued by the Department of Motor Vehicles, or any other document that appears to validate and establish identity). **However, as noted in the statement above, providers must now accept ID up to six months expired.** Providers must retain a copy of this ID in the member's records.

In accordance with [Provider Handbook](#) Section 4 - Treating Members, there are some circumstances where no ID verification is required. ID verification is **not** required when:

- The member is 17 years of age or younger;
- The member is receiving emergency services;
- The member is a resident in a long-term care facility.

A Medi-Cal eligible member may receive dental services through the Medi-Cal Dental Program. However, some restrictions may apply to the following individuals:

- Assigned special aid codes
- Limited to minor consent restricted services

Please remember that a Medi-Cal member's eligibility is not necessarily a guarantee of payment by Medi-Cal Dental and each requested procedure must meet all criteria and policies.

Enrollment Assistance

Medi-Cal Dental offers scheduled, one-on-one enrollment assistance to providers interested in becoming a Medi-Cal Dental Fee-for-Service (FFS) provider. [Dental Enrollment Application On-Sites](#) are intended to assist dental providers with completing their Medi-Cal Dental

Continued on pg 5



Enrollment Application Package. Those who are interested may [register online](#). At this time, Enrollment Application On-Sites are being held virtually. Once you are registered, a representative will contact you to schedule a convenient time to meet with you via phone call or Zoom video conference call.

A number of resources are also currently available on the [Medi-Cal Dental website](#) to successfully guide providers with completing the enrollment [application forms](#). Below is a brief list of the available resources:

- [Enrollment Toolkit](#): A collection of tips, hints, application forms, and more all designed to help complete the enrollment application.
- [Provider Enrollment Assistance Line](#): You may [register online](#) to use the Dental Provider Enrollment Assistance Line. The assistance line is offered every Wednesday 8:00 am - 4:00 pm.
- [Enrollment FAQs](#): Have questions? Check out the Provider Enrollment Frequently Asked Questions (FAQs) for answers.

Questions regarding the enrollment application forms or process can be sent to an enrollment specialist directly by emailing

Medi-CalDentalEnrollmentDept@gainwelltechnologies.com.

For enrollment requirements, please refer to [Provider Handbook](#) Section 3 - Enrollment Requirements for more information.

Smile, California COVID-19 Resources for Your Medi-Cal Members

The Department of Health Care Services continues to monitor the evolving COVID-19 situation closely and has developed COVID-19 specific materials to help guide members through these uncertain times. As your Medi-Cal patients begin to return for routine dental visits, please let them know that Medi-Cal Dental shared a flyer (available in [English](#) and [Spanish](#)) and [video](#) titled “What You Should know About Returning to the Dentist During COVID-19” on the [Smile, California website](#). Members can also stay updated on the latest COVID-19 and program-related communications by reading monthly Member Bulletins. Each new Member Bulletin is linked under the Latest News section on the *Smile, California* homepage, and past Member Bulletins can be found on the Medi-Cal Dental website [here](#).

Providers are encouraged to check the [Partners & Providers page](#) of the *Smile, California* website regularly. For the latest *Smile, California* campaign news directly to your Inbox, please sign-up to receive [Smile Alerts](#).

Continued on pg 6



October is National Dental Hygiene and Orthodontic Health Month

This October, Medi-Cal dental providers are encouraged to educate their Medi-Cal patients on the importance of preventive dental practices and positive oral health habits.

Dental hygiene plays a significant role in overall mental and physical well-being. According to the American Dental Association's (ADA) [Mouth Healthy website](#), patients should continue regular and healthy brushing habits along with flossing, a well-balanced diet, and routine dental check-ups. Providers should encourage their Medi-Cal patients to:

- Use a properly fitted toothbrush to brush teeth two times a day
- Replace toothbrush after three to four months, or sooner as needed
- Brush with a compliant toothbrush: check that it's ADA-accepted

Maintaining good dental hygiene is essential for patients undergoing orthodontic treatment. Patients with braces should use oral hygiene aids such as a toothbrush, an interproximal brush, and floss when cleaning their teeth. For more information, check out the American Association of Orthodontists article, [Six Must-Haves for Cleaning Teeth with Braces or Aligners When You're on the Go](#).

Providers can also find helpful tools and educational resources for themselves and their Medi-Cal members on the [Smile, California website](#).