



# Member Bulletin

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Learn more about free or low-cost dental services to help keep you and your smile healthy at [SmileCalifornia.org](https://SmileCalifornia.org).

## FIND A DENTIST

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

## Reminder: End Date for Extended Timeframe for State Hearing Requests During COVID-19

On March 1, 2020, the Department of Health Care Services (DHCS) extended the timeframe from 90 days to 210 days for Medi-Cal members to request State Hearings when a treatment is denied.

**On April 16, 2022, the extended timeframe of 210 days to submit a State Hearing request will end** and the timeframe will go back to 90 days from the date on your Notice of Action (NOA). You can find the date at the top of your NOA:



All other existing State Hearing processes will stay the same. You can learn more by reading the [Member Handbook State Hearing Process](#) section.

If your dentist told you a treatment was denied and you did not receive a NOA, please call the Telephone Service Center at 1-800-322-6384 for help.

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# 2022 Member Customer Service Satisfaction Survey

We are pleased to announce a new Member Customer Service Satisfaction Survey is now available! Please take the survey to share your experience with the Telephone Service Center. The survey is online [here](#). You can also find the survey in 19 languages on the [Smile, California homepage](#) or the [Medi-Cal Dental website](#). It will be open until **March 17, 2022**.

The survey will also be mailed on February 1, 2022 to a randomly chosen group of Medi-Cal members. If you receive the survey by mail, you can respond by mail or take the online survey. The survey is offered in these languages:

- Arabic
- Armenian
- Cambodian
- Chinese (Mandarin and Cantonese)
- English
- Farsi
- Hindi
- Hmong
- Japanese
- Korean
- Lao
- Punjabi
- Russian
- Spanish
- Tagalog
- Thai
- Vietnamese

We value your opinion and look forward to your feedback. The results of this survey will be used to find out how we can better serve you.

## Visiting the Dentist

Regular dental checkups help keep your smile healthy. With Medi-Cal, children are covered for **two visits per year**. Adults are covered for **one visit per year**.

### Returning to the Dentist During COVID-19

To keep you safe during COVID-19, your dental visit may look a little different. Click the links below to learn more:

- » [What You Should Know About Returning to the Dentist During COVID-19 Flyer](#)

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» [What You Should Know About Returning to the Dentist During COVID-19 Video](#)

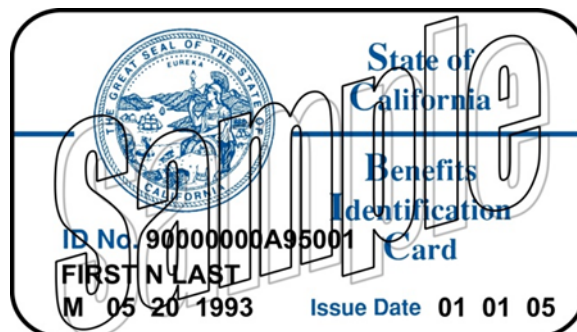
## Get Ready to Go

- **Find a Dentist** – You can easily search for a Medi-Cal dentist online. Just visit the *Smile, California* [Find a Dentist page](#).
- **Confirm the Appointment** – Dental offices appreciate when you can confirm your appointment with them. If you need to cancel, make sure you give them at least a 24-hour notice.
- **Bring Your Medi Cal Card** – Bring your Medi Cal Card/Benefits Identification Card (BIC) with you to the appointment. The office staff will ask to see the card to complete your patient information. Below are examples of valid 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																			
<table border="1"> <tr> <th colspan="2">PROVIDER USE ONLY</th> </tr> <tr> <td>MEDI-CAL APPLICATION FILED:</td> <td>PROVIDER SIGNATURE:</td> </tr> <tr> <td>PE PROVIDER SIGNATURE:</td> <td>STAMP HERE</td> </tr> <tr> <td>PE PROVIDER TITLE:</td> <td></td> </tr> <tr> <td>SECOND GOOD THRU:</td> <td></td> </tr> <tr> <td>MEDI-CAL ID: 12-7G-ZA34567-8-90</td> <td></td> </tr> <tr> <td>FIRST GOOD THRU: 10/31/99</td> <td></td> </tr> <tr> <td>PATIENT NAME: JANE DOE</td> <td></td> </tr> <tr> <td>DOB (MM/DD/YY): 123170</td> <td></td> </tr> </table>		PROVIDER USE ONLY		MEDI-CAL APPLICATION FILED:	PROVIDER SIGNATURE:	PE PROVIDER SIGNATURE:	STAMP HERE	PE PROVIDER TITLE:		SECOND GOOD THRU:		MEDI-CAL ID: 12-7G-ZA34567-8-90		FIRST GOOD THRU: 10/31/99		PATIENT NAME: JANE DOE		DOB (MM/DD/YY): 123170	
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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:

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 _____	
TERMVTAMCICSTRANYYYMMDDHHMMSSDDOPRXXXXDISWKR	

- **Ask Questions** – Bring a list of questions you may have for your dentist. Do not be afraid to share your concerns.

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## What to Expect During the Exam

- **Baby's First Visit** – A dental visit for your baby is faster than a full exam. Your baby can often stay in your lap the entire time. The dentist may check your baby's mouth by looking inside or rubbing a finger on the gums and teeth. This will not hurt your baby in any way.

During your baby's first dental visit, the dentist will make sure your baby's gums and teeth are in good shape. Your dentist will also talk with you about:

- \* How to care for your baby's mouth
- \* Baby bottle tooth decay
- \* Teething and milestones of development
- \* How food affects oral health

- **Your Child's Exam** – During your child's visit, the dentist might want to take x-rays of your child's teeth. X-rays are done at least once a year to check development. X-rays also help look for problems, like early signs of cavities.

Your dentist or a hygienist will then clean your child's teeth. They will finish up by polishing and flossing your child's teeth.

If your child already has molars, the dentist will look to see if your child needs sealants. Molar sealants are coatings placed on top of the teeth farthest back in the mouth. They protect against harmful bacteria and cavities.

- **Your Exam** – If this is your first dental visit, you may have a full set of x-rays taken of your teeth. You will also be asked about your dental history. The dentist will look for problems with your gums and teeth. The dentist will recommend preventive services to protect your teeth from disease or restorative services to fix any damage to your teeth.

To learn more about your dental benefit, visit the [Smile, California website](#) today.

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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)**

ՈՒՇԱՄԻՐՈՒԹՅՈՒՆ՝ Եթե խոսում եք հայերեն, ապա ձեզ անվճար կարող են տրամադրվել լեզվական աջակցություններ։ 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).

### **हंदी (Hindi)**

ध्यान दें: यदि आप हंदी 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: បើសិនជាអ្នកនិយាយ ភាសាខ្មែរ, បសវនករយើងនឹងជួយអ្នក ដោយមិនគិតថ្លៃ ក៏អាចមានសំរាប់អ្នក។ ចូរ ទូរស័ព្ទ 1-800-322-6384 (TTY: 1-800-735-2922)។

### **ພາ ສາ ລາ ອ (Lao)**

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