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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.

Kindergarten Oral Health Assessment Program

Poor oral health can affect a child's attendance, grades, and overall performance in school. To make sure your child is ready for school, California law requires that children have a dental check-up. The check-up must be done by **May 31st** of your child's first year in public school (kindergarten or 1st grade). This requirement is called the **Kindergarten Oral Health Assessment** (KOHA).

Steps to Complete the KOHA

- 1. Look out for information from your child's school. They will give you a:
 - a. Letter about the KOHA requirement
- b. Form that the dentist will complete during your child's check-up
- 2. Take your child to the dentist by May 31st. You can use the Find a Dentist tool to find one that's right for your family.
- 3. Ask the dentist to fill out the KOHA form at your child's visit. Remember to ask any questions you have. Don't be afraid to share your concerns.
- **4. Give your child's school the completed form.** At this point, you're done with the requirement but not with your child's dental

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care! As a Medi-Cal member, your child is covered for two dental visits each year.

For more information, visit the Smile, California Oral Health and School Readiness page.

Don't Forget to Use Your Dental Benefit this Year!

Keeping your teeth healthy is important for your overall health. Start the new year right. Get the most out of your Medi-Cal dental benefit before 2022 ends.

With Medi-Cal, adults are covered for a dental exam **once every 12 months.** Kids and teens are covered **every 6 months, and sometimes more.**

Check out the table below to see what Medi-Cal covers at every age. You can also visit the *Smile, California* Covered Services page for details.

SERVICES	BABIES	KIDS	TEENS	PREGNANCY	ADULTS	SENIORS
Exam*	*	*	*	*	*	*
X-rays	*	*	*	*	*	*
Teeth cleaning	*	*	*	*	*	*
Fluoride varnish	*	*	*	*	*	*
Fillings	*	*	*	*	*	*
Tooth removal	*	*	*	*	*	*
Emergency services	*	*	*	*	*	*
Sedation	*	*	*		*	*
Molar sealants**		*	*			
Root canals		*	*	*	*	*
Orthodontics (braces)***			*			
Crowns****			*	*	*	*
Partial and full dentures			*	*	*	*
Denture relines			*	*	*	*
Scaling and root planing			*	*	*	*

Exceptions:

To find a Dentist near you, you can use our <u>Find a Dentist</u> search tool. For more information, visit the <u>Smile, California website</u>.

^{*}Free or low-cost checkups every six months for members under the age of 21, every 12 months for members over the age of 21.

^{**}Permanent molar sealants are covered for kids and teens up to age 21.

^{***}For those who qualify.

^{****}Crowns on molars or premolars (back teeth) may be covered in some cases.



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)。

Հաղ երեն (Armenian)

ՈՒՇԱԴՐՈՒԹՅՈՒՆ՝ Եթե խոսում եք հայերեն, ապա ձեզ անվ մար կարող են տրամադրվել լեզվական աջակցության ծառայություններ : Զանգահարեք 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).

(Farsi) فارسى

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

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)

ਧਿਆਨ 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।

(Arabic) قىبرعلا

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 6384-322-800-1 (رقم هاتف الصم والبكم: 2922-730-10).

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៖ បរើសិនជាអ្នកនិយាយ ភាសាខ្មែរ, បសវាជំនួយខ្នួនកភាសា បោយមិនគិត្ត្យល គឺអាចមានសំរារ់របរើអ្នក។ ចូរ ទូរស័ព្ទ 1-800-322-6384 (TTY: 1-800-735-2922)។

<u>ພາສາລາວ (Lao)</u>

ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັງຄ່າ, ແມ່ນມີພ້ອມໃຫ້ ທ່ານ. ໂທຣ 1-800-322-6384 (TTY: 1-800-735-2922).