



Provider Bulletin

MARCH 2024
Volume 40, Number 13



THIS ISSUE

pg 1 Denture Replacement
Clarification of Exceptions:
Prosthodontics
(Removable)
General Policies

Denture Replacement Clarification of Exceptions: Prosthodontics (Removable) General Policies

The Department of Health Care Services (DHCS) has added denture replacement clarification to our current [prosthodontics \(removable\) general policies](#) and criteria as published in the Medi-Cal Dental Provider Handbook, in Section 5, Manual of Criteria.

Currently, DHCS provides complete and partial dentures as a covered benefit once in a five-year period. When adequately documented, certain exceptions shall apply to this five-year period. In an effort to control utilization on the replacement of dentures, DHCS has added clarification that our current [prosthodontics \(removable\) general policies](#) and criteria cover one set of dentures (complete, partial or combination) every 5 years with no lifetime limit. When adequately documented, the following exceptions as stated in the Provider Handbook, Section 5 **must apply**:

- j. A removable prosthesis is a benefit only once in a

Continued on pg 2

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.



Medi-Cal Dental

dental.dhcs.ca.gov



five-year period. When adequately documented, the following exceptions must apply:

- i. Circumstances beyond the control of the patient: For a patient that submits a request to replace the appliance based on circumstances beyond their control, those circumstances can be demonstrated by documentation of all of the following: (1) a demonstration of continued medical necessity; (2) an explanation of the circumstances surrounding the loss which clearly explains how the loss occurred and why the loss was beyond the control of the patient; and (3) a clear explanation of the remedial measures the patient will take to safeguard against subsequent loss. Where loss from an activity wherein there was involvement from a fire department agency, law enforcement agency, or other governmental agency, documentation should include a copy of the official public service agency report, if such a report is relevant and available.
- ii. A need for a new prosthesis due to surgical or traumatic loss of oral-facial anatomic structure.
- iii. The removable prosthesis is no longer serviceable as determined by a clinical screening dentist.
- iv. Dentures no longer fit due to significant medical condition. Documentation from the patient's physician supporting the medical necessity of early replacement and a letter from the dentist stating that the existing denture cannot be made functional.
- v. A non-catastrophic loss or misplacement may be granted twice per lifetime. Documentation must include an explanation of preventive measures instituted to alleviate the need for further replacement. Additional requests, beyond the two lifetime exceptions shall be submitted as procedure code D5899 and will be considered on a case-by-case basis.