



Provider Bulletin

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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.

Use the Learning Management System (LMS) to Register for Seminars

Medi-Cal Dental invites all providers to attend the upcoming seminars. Provider training seminars are a great way to learn about the Medi-Cal Dental from experienced, qualified instructors. In addition, dentists, registered or certified dental assistants, and registered dental hygienists can earn free continuing education (CE) credits. Seminars are available year-round and cover the most current Medi-Cal Dental criteria, policies, and procedures.

The Provider [LMS](#) is an online platform through Medi-Cal Dental in which Providers can register to attend seminars. This platform allows providers to see their CE credits, choose coursework to enroll in, and other useful features.

These informative Seminar sessions will offer insights and guidance on topics such as:

Medi-Cal Provider Basic & Electronic Data Interchange (EDI) Seminar

- Medi-Cal Dental provider enrollment requirements
- How to apply for direct deposit
- What to do if using a Billing Intermediary
- How to access the Point of Service (POS) Network

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- Discuss commonly billed procedure codes and how to complete forms for billing
- Discuss member eligibility
- How to request first level appeals
- How to process claims for California Children’s Services (CCS), Genetically Handicapped Persons Program (GHPP), and hospital cases
- How Medi-Cal/Medicare crossover codes and other support services are used within the Medi-Cal Dental Program
- Classes contain Electronic Data Interchange (EDI) overviews

Medi-Cal Dental Provider Advanced Seminar

- Medi-Cal Dental provider enrollment requirements
- Medi-Cal Dental procedure codes and radiograph requirements
- Member eligibility
- Medi-Cal/Medicare Crossover Codes
- Other Health Coverage claims
- Discuss commonly billed procedures such as Periodontics, Endodontics, Oral Surgery, Crowns, and Prosthodontics
- Viewing of treatment slides

Medi-Cal Dental Orthodontic Seminar

- Medi-Cal Dental enrollment and certification requirements
- Discuss billing forms, billing procedures, and criteria and policies specific to Medi-Cal orthodontic benefits

Procedure Code D9920

- Clarify the criteria for D9920
- Help providers who treat patients with special healthcare needs get paid
- Minimize Claim Inquiry Forms (CIF) requests
- Provide examples of appropriate documentation

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Periodontal Training

- Prophylaxis (D1110 and D1120) for children and adults
- Full Mouth Debridement to enable a Comprehensive Periodontal Evaluation and Diagnosis on Subsequent Visit (D4355)
- Scaling in presence of generalized moderate or severe gingival inflammation – full mouth, after oral evaluation (D4346)
- Periodontal Scaling and Root Planing (D4341 and D4342)
- Periodontal Maintenance (D4910)

To find and register for a seminar, please visit the [Provider Training Seminar Schedule](#) page for a complete list of seminars. The July 2024 seminar schedule is listed below.

Date	Time	Seminar
July 10, 2024	8:30 AM - 12:30 PM	Medi-Cal Dental Provider Basic & Electronic Data Interchange (EDI) Seminar
July 11, 2024	8:30 AM - 12:30 PM	Medi-Cal Dental Provider Advanced Seminar
July 24, 2024	8:30 AM - 12:30 PM	Medi-Cal Dental Provider Basic & Electronic Data Interchange (EDI) Seminar
July 25, 2024	8:30 AM - 12:30 PM	Medi-Cal Dental Provider Advanced Seminar

For more information, please visit the [Medi-Cal Dental Provider Online Training Catalog](#) or call the Telephone Service Center (TSC) at (800) 423-0507, available Monday through Friday from 8:00 a.m. through 5:00 p.m.

Updates to Gabby

Medi-Cal Dental offers self-service phone calls using an automated voice response called Gabby. A guided greeting has been added that offers a list of options that are available to the caller for self-service.

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Medi-Cal Dental Providers can speak to Gabby for information on the following topics:

- Request claim status
- Seminar schedule
- Patient history
- Provider payments
- Provider enrollment

Gabby can also answer many Frequently Asked Questions, including:

- What if I forgot my Personal Identification Number (PIN)?
- How can a provider enroll in Electronic Funds Transfer (EFT)?
- How do I get a copy of the Provider Handbook?
- Can I request a copy of my EOB?
- How can I submit my claims?
- How do I enroll in EDI and submit claims electronically?
- How do I request a paper form?

Gabby is available 24 hours a day, seven days a week. To speak to a live representative you can also call the Telephone Service Center (TSC) at (800) 423-0507, Monday through Friday from 8:00 a.m. through 5:00 p.m.

Enhanced Protections for Medi-Cal Members

As Providers may not submit a claim to, or collect reimbursement from, a Medi-Cal member or an authorized representative, except for the specified share of cost a member's eligibility status requires for any service. Title 22, California Code of Regulations, Section 51002 (a) and Welfare and Institutions Code (WIC) Section 14019.4 (a) expressly prohibits a provider from billing a Medi-Cal member for services included in the Medi-Cal Dental Program scope of benefits. Furthermore, a provider may not bill both the member and the Medi-Cal Dental Program for the same dental procedure.

Senate Bill 639, effective July 1, 2020, specifies in Business and Professions (B&P) Code, if a dental provider accepts Medi-Cal, the treatment plan for a Medi-Cal patient shall indicate

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if Medi-Cal would cover an alternate, medically necessary service as defined in current law, WIC Section 14059.5. The treatment plan shall indicate that the Medi-Cal patient has a right to ask for only services covered by Medi-Cal and that the dental provider agrees to follow Medi-Cal rules to secure Medi-Cal covered services before treatment.

Current Law:

- Dentists shall not arrange for or establish third-party credit or loans for patients administered or under the influence of general anesthesia, conscious sedation, or nitrous oxide. [B&P Code § 654.3(g)].
- Dentists shall not charge to third-party lines of credit (arranged for or established in their office) any treatment costs before the treatments are provided, unless the dentist provides the patient a written or electronic notice and treatment plan, including an itemized list of treatments and services charged before rendering or incurring costs. [B&P Code § 654.3(b)].
 - The written treatment plan must include:
 - Each anticipated service to be provided and the estimated cost of each service;
 - The patient’s private or government-estimated share of cost for each service (if applicable, including whether Medi-Cal will cover the service); and
 - If services are not covered by patient’s private or other insurance (including Medi-Cal), notification that the services may not be covered and that the patient has the right to confirm coverage before starting dental treatment.
 - Written notice must be provided in patient’s threshold language. [B&P Code § 654.3(f)].

All of the current requirements above continue to apply, with the following additions:

- Dentists shall not charge to third-party lines of credit (arranged for or established in their office) any treatment costs more than 30 days before the treatments are rendered (except for orthodontia). [B&P Code § 654.3(c)]
- Dentists shall not arrange for or establish an open-end credit or loan that contains a deferred interest provision (which is common under many current third-party credit companies). [B&P Code § 654.3(b)]

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- Dentists shall not complete any part of a third-party credit or loan application (arranged for or established in their office) so that any application is not completely filled out by the patient. [B&P Code § 654.3(e)].
- Dentists shall provide the patient a written or electronic notice and treatment plan, including an itemized list of treatments and services charged before rendering or incurring costs.
 - o The notice must include the revised language specified in B&P Code § 654.3(g).
 - o For all Medi-Cal providers, the written treatment plan must indicate if Medi-Cal would cover an alternate medically necessary service. It must also notify the Medi-Cal patient that they have a right to ask for only services covered by Medi-Cal, and that the dentist must follow Medi-Cal rules to secure Medi-Cal-covered services before treatment. [B&P Code § 654.3(h)(1)].
- Dentists shall not arrange for or establish third-party credit or loans when patients are in a treatment area (including but not limited to exam rooms, surgical rooms, and any other area where dental treatment is provided) unless the patient agrees to do so. [B&P Code § 654.3(j)].

Providers can review Senate Bill 639 in its entirety [here](#). For more information about Medi-Cal billing practices, please refer to the [Provider Handbook](#).

For more information, please call the Telephone Service Center (TSC) at (800) 423-0507, available Monday through Friday from 8:00 a.m. through 5:00 p.m.

Electronic Data Interchange (EDI)

The Department of Health Care Services would like to remind enrolled providers who submit documents electronically to Medi-Cal Dental for processing that the [EDI How-To Guide](#) is available on the Medi-Cal Dental [website](#) and a great resource with sample reports, examples of electronic Resubmission Turnaround Documents (RTDs), Notice of Authorizations (NOA), and other helpful resources to help support correct and complete electronic submissions

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EDI Reports

EDI reports have valuable information to help providers track documents submitted electronically. The following reports are made available to providers who submit documents electronically to Medi-Cal Dental:

- **CP-O-973-P - Provider/Service Office Daily EDI Documents Received Today**

This report lists all accepted EDI documents received on the date displayed as “Period Ending:” prior to the daily cutoff time. It serves as a cross-reference between the Medi-Cal Dental Document Control Number (DCN) and the Provider Document Control Number (PDCN). The report is a confirmation of received claims, Treatment Authorization Requests (TARs), Notice of Authorizations (NOAs) and Adjustments.

- **CP-O-971-P - Provider/Service Office X-Ray/Attachment Request**

This report identifies TARs and claims that require radiographs and/or hard copy attachments for processing. By displaying the Medi-Cal Dental assigned DCN and the provider PDCN, the report enables providers to identify the TARs and claims requiring radiographs and/or hard copy attachments.

- **CP-O-971-P2 - X-Ray/Attachment Labels**

Labels are produced for submitters to use in identifying the claims and TARs associated with the radiographs and attachments sent to Medi-Cal Dental through the mail. The data in these labels has been preformatted to match special labels designed for the EDI process. Providers receiving these labels must affix them to special EDI radiograph envelopes before mailing.

- **CP-O-978-P - Provider/Service Office Daily EDI Documents Waiting Return Information Greater Than 7 Days**

This report lists all EDI documents awaiting radiographs and/or hard copy attachments or electronically generated RTDs for more than seven (7) days.

- **CP-O-RTD-P - Notice of Resubmission also referred to as Resubmission Turnaround Document (RTD)**

Providers may opt to receive this electronic report in lieu of hard copy RTDs. It identifies requests for missing or additional information and is printed, completed, signed, and returned to Medi-Cal Dental for processing.

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- **CP-O-NOA-P - Notice of Authorization**

Providers may opt to receive the electronic NOA in lieu of the hardcopy form. This report has the Medi-Cal Dental authorization of services requested by the provider on a TAR. If a provider selects this option, the electronic NOA may be printed, completed, signed, and returned to Medi-Cal Dental for billing.

- **CP-O-959-P - Provider/Service Office Document Rejections**

This report lists EDI transactions that passed Technical Report 3 (TR3) compliance validation but were subsequently rejected by Medi-Cal Dental. These documents must be corrected and retransmitted before they can be processed.

All reports are made available electronically to providers within 24-48 hours following the EDI submission. If a provider is not receiving these reports, the provider should check with their electronic vendor, clearinghouse, or contact EDI Support at 800-423-0507.

For information and training on EDI, please visit the Medi-Cal Dental Provider Basic and EDI Webinar at: [Training Schedule](#).

Provider Application and Validation for Enrollment (PAVE)

The PAVE Provider Application and Validation for Enrollment provider portal simplifies and accelerates the dental provider enrollment processes. PAVE features a secure login, document uploading, electronic signature, application progress tracking, intuitive guidance, social collaboration, and more.

Effective October 31, 2022, paper applications are no longer accepted. Providers must now use the PAVE portal to complete and submit applications, report changes to current enrollment, and respond to Department of Health Care Services initiated requests for revalidation. For additional information including contact information available to providers, see below:

- Enrollment Inquiries

For Medi-Cal provider enrollment information, please contact PED using the Inquiry Form on [PED's website](#) under "Provider Resources." You can also call the PED Message Center at (916) 323-1945. For PAVE application questions, email PED at pave.dhcs.ca.gov, or send a message through the PAVE portal.

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- Revalidation Inquiries

Dental providers required to submit revalidation applications through PAVE will receive notice via mail. Revalidation notices will be mailed to the service address on file with Medi-Cal so it is important you maintain this information current. For more information, please contact PED using contact information noted under Enrollment Inquiries.

- PAVE Technical Support

For technical issues related to PAVE, please call the PAVE Help Desk at (866) 252-1949. The Help Desk is available Monday through Friday from 8:00 a.m. through 6:00 p.m., excluding State holidays. You can also use the PAVE Chat feature while in PAVE. Chat is available Monday through Friday from 8:00 a.m. through 4:00 p.m., excluding State holidays.

- Billing Inquiries

For billing inquiries, please call the Medi-Cal Dental Telephone Service Center (TSC) at (800) 423-0507, available Monday through Friday from 8:00 a.m. through 5:00 p.m.

- Electronic Funds Transfer (EFT) Inquiries

For EFT inquiries, please call the Medi-Cal Dental TSC at: (800) 423-0507, available Monday through Friday from 8:00 a.m. through 5:00 p.m. Instructions for completing the EFT enrollment form may also be found on the Providers Application Forms page of the Medi-Cal Dental website.

- PIN Confirmation/Reset

To confirm or reset a PIN, please send a written request to Medi-Cal Dental at PO Box 15609, Sacramento, CA 95852-0609. A PIN cannot be confirmed or reset over the telephone. If you have additional questions regarding your PIN, please call the Medi-Cal Dental TSC at (800) 423-0507, available Monday through Friday from 8:00 a.m. through 5:00 p.m.

For more information about PAVE, please visit the [PAVE](#) portal or call the Telephone Service Center (TSC) at (800) 423-0507.