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Current Processing Time Frames for Claims and **Treatment Authorization** Requests (TARs)

Medi-Cal Dental wants to remind providers about tips to avoid denials and delays for their submitted claims and Treatment Authorization Requests (TARs).

As of November 15, 2024, processing time for claims is under 20 business days and under 5 business days for TARs.

Some Tips to Avoid Delays:

Medi-Cal Dental is currently receiving a significant volume of incomplete document submissions and this issue slows down processing times and necessitates the return of the document to the provider via a Resubmission Turnaround Document (RTD). leading to delays in TAR processing, claims processing, and payment.

To avoid delays and ensure prompt processing and payment of claims, it is crucial to complete all required claim fields such as the correct National Provider Identifier (NPI) number, member information, date(s) of service, and supporting documentation.

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.

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dental.dhcs.ca.gov



Some Tips to Avoid Denials:

RTDs requesting missing or additional information related to both paper and Electronic Data Interchange (EDI) documents must be completed and returned by mail in regular mailing envelopes within 45 calendar days of the RTD mailing to:

Medi-Cal Dental P.O. Box 15609

Sacramento, CA 95852-0609

The Medi-Cal Dental system automatically denies TAR and Claims where a response is not received within 45 calendar days. Get paid faster and avoid denials by returning the RTDs with the necessary documentation and without delay.

For more information about RTD codes and messages, please refer to <u>Provider Handbook</u> <u>Section 7 - Codes, Pages 7-38 to 7-42</u>. For questions, please call the Telephone Service Center at (800) 423-0507.

Reminder: Dental Case Management Program

Medi-Cal Dental offers the Dental Case Management Program to help members with special healthcare needs to schedule and plan necessary treatments.

Members with special healthcare needs are defined as those who have medical, physical, developmental, mental, sensory, behavioral, cognitive, emotional, or other conditions that require medical management, use of special services, like hospital dentistry, or another specialized healthcare intervention.

Referrals for Case Management services can be initiated by the member's medical provider, dental provider, case worker, Community Health Worker (CHW), or healthcare professional and are based on a current, comprehensive evaluation and treatment plan.

To refer a Medi-Cal member, the appropriate professional must complete the online <u>Case</u> Management Referral Form.

If you have questions when submitting the referral, please contact the provider Telephone Service Center (TSC) at (800) 423-0507.



The Need to Document Pregnancy/Postpartum Status

Medi-Cal Dental wants to remind providers of the importance of documenting pregnancy/postpartum status, defined as:

• Postpartum: Postpartum benefits are applicable for the 12-month period after a pregnancy ends and until the end of the month in which the 12-month period ends.

Pregnant or postpartum members, regardless of aid code, are eligible for <u>full-scope</u> Medi-Cal benefits.

However, procedures for pregnant/postpartum members must still meet Medi-Cal Dental criteria for services to qualify for coverage.

Some documentation standards are different for pregnant/postpartum members, such as:

- Prior Authorization for Scaling and Root Planing (procedure codes D4341 or D4342) is waived for members with pregnant/postpartum status.
- Reduced radiographic requirements:
 - ➤ For procedures that would usually require them, arch integrity radiographs are not required to be submitted by the provider.
 - ➤ When requesting payment for Scaling and Root Planing (procedure codes D4341 or D4342) for members with pregnant/postpartum status, the provider may choose not to submit bitewing radiographs.
- Scaling and Root Planing procedure codes may be submitted on a claim without prior authorization so long as medical necessity criteria are met for members with pregnant/postpartum status.
- The provider must document pregnancy or postpartum status on each document submitted.

For more information on documenting pregnancy/postpartum status for patients please visit the following resources:

Provider Handbook Section 7: Codes

Postpartum Care Extension Implementation Letter

Aid Codes Master Chart

Provider Bulletin: Volume 37 Number 10

For further information or questions regarding documentation of pregnant/postpartum status, please call the Provider Telephone Service Center at (800) 423-0507.



Provider Seminars offer the Latest Medi-Cal Dental Information

Medi-Cal Dental Provider training seminars are a great way to learn about Medi-Cal Dental from experienced and qualified instructors. Training seminars are referenced in the Medi-Cal Dental Provider Handbook, Section 2 - Program Overview under Training Program.

In addition, dentists, registered or certified dental assistants, and registered dental hygienists can earn free continuing education unit (CEU) credits for the Basic, Advanced, and Orthodontic seminars by attending in-person, webinar, or on-demand format. Please visit the Medi-Cal Dental Provider Training website for current information on upcoming seminars and trainings, and registration. Registering early is recommended.

Seminars are available year-round and cover the most current Medi-Cal Dental criteria, policies, and procedures in accordance with the Medi-Cal Dental Provider Handbook and Provider Bulletins.

Providers can choose from the following series of seminars:

- Basic and Electronic Data Interchange (EDI) Seminars:
 - > Basic seminars address general program purpose, goals, policies, and procedures. In addition, these seminars provide instructions for the correct use of standard billing forms and explain the reference materials and support services available to Medi-Cal dental providers.
 - > The presentation's EDI section includes an overview of Treatment Authorization Request (TAR) and claims submissions, review and retrieval of reports, EDI label preparation, mailing of TARs and claims, and the submission of electronic attachments.
- Advanced Seminars: Advanced seminars offer current, in-depth information on topics such as Medi-Cal dental criteria, radiograph and documentation requirements, processing codes, and other topics of specific concern.
- Orthodontic Seminars: These specialized seminars for orthodontists address all aspects of the Medi-Cal orthodontic program, including enrollment and certification, completion of billing forms, billing procedures, criteria and policies specific to Medi-Cal.
- Workshops: Workshops provide inexperienced billing staff with a hands-on opportunity to learn about Medi-Cal's dental policies and procedures.

For assistance and questions regarding provider trainings, please call the provider Telephone Service Center at (800) 423-0507 Monday through Friday from 8:00 a.m. to 5:00 p.m.