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Adjudication Reason Code 271H

Medi-Cal Dental reminds providers of the Provider Handbook's General Policies for Restorative Procedures and Adjudication Reason Code (ARC) 271H.

Medi-Cal Dental Provider Bulletin Volume 38 Number 23 states:

"Restorative services provided solely to replace tooth structure lost due to attrition, abrasion, erosion or for cosmetic purposes are not a benefit."

Providers who continue to provide these services due to attrition, abrasion, erosion, or for purely cosmetic reasons will not be reimbursed by Medi-Cal Dental and will receive denials with ARC code 271H, which is defined in the Provider Handbook as follows:

"Procedure is disallowed due to the following: The replacement of tooth structure lost by attrition, abrasion or erosion is not a covered benefit."

In general, restorative services are a benefit when there is tooth destruction due to such conditions as decay, fracture, endodontic access or missing or defective restorations. However, if a patient has a high severity of attrition in which there is exposed dentin and the patient is experiencing sensitivity, Procedure Code D9910 (application of desensitizing medicament) can be a covered benefit. For further information regarding attrition, abrasion, and erosion, visit the <u>Journal of the American Dental Association</u>.

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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 <u>Provider Training Seminar</u> Schedule.





For questions and support, please contact the Medi-Cal Dental Telephone Service Center (TSC) at (800) 322-6384. The call is free. Medi-Cal Dental representatives are available 8:00 a.m. to 5:00 p.m., Monday through Friday to assist you and the Medi-Cal Dental Interactive Voice Response System (IVR) can navigate you to the services you need on the phone.

Public Health Emergency End Date for Southern California Fires

Medi-Cal Dental would like to inform providers impacted by the recent <u>Southern California fires</u> in Ventura and Los Angeles counties that the Public Health Emergency (PHE) declaration, <u>Disaster Assistance</u>, and <u>Federal Flexibilities</u> will end May 31, 2025.

Federal Flexibilities related to this PHE were released in the <u>Federal Disaster Resources</u> in a series of three requests from mid-January 2025 to mid-March 2025 with a retroactive effective date of January 7, 2025:

- First Request
 - > Temporarily waived provider screening requirements
 - > Paused revalidation deadlines
 - ➤ Allowed out-of-state provider reimbursement
- Second Request
 - > Long term services and support
 - > Timeline Adjustments
 - > Additional support as described
- Third Request
 - > Timeframe modification for submission of claims

Providers impacted by the Southern California wildfires are encouraged to use the resources provided to better serve Medi-Cal Dental members and ensure smooth operations during this incident while available.

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Upcoming Dental Managed Care Transition

The Department of Health Care Services (DHCS) has awarded contracts to three Dental Managed Care (DMC) plans in Sacramento and Los Angeles counties. Effective July 1, 2025, the DMC plans available in each of the counties are:

- Liberty Dental Plan
- Health Net of California
- California Dental Network

Medi-Cal DMC contracts provide health care services through established networks of organized systems of care, which emphasize preventive and consistent dental care.

DMC is mandatory in Sacramento County, which means members must enroll in one of the available DMC plans. If a provider would like to provide dental services to DMC plan members residing in Sacramento County, they must ensure they are contracted with a DMC plan. In Los Angeles County, enrollment in a DMC plan is voluntary. Members must actively choose to join a DMC plan; otherwise, they will remain in dental Fee for Service (FFS). Providers can contact the <u>DMC plan</u> if they would like to participate in the plan's network.

Dental Managed Care Plan		Provider Contact (Los Angeles County)
Liberty Dental Plan	(800) 268-9012	(888) 703-6999
Health Net Dental Plan	(800) 675-6110	(800) 675-6110
California Dental Network	(833) 479-1984	(855) 388-6257

Approximately 350,000 members affected by the new contract will receive transition notices explaining to them what is changing, if they need to make a plan choice, their continuity of care protections, and other important information. Members will receive 90-day, 60-day, and 30-day notices. Members will also receive a Medi-Cal Dental Managed Care enrollment packet.

If a member is currently enrolled in Access Dental Plan or dental FFS and wants to keep the provider they have, but their provider does not work with their new DMC plan, the member can ask their new Medi-Cal DMC plan for Continuity of Care. Continuity of Care may let the member keep their current provider for up to 12 months. Once Medi-Cal informs the member of their new Medi-Cal DMC plan, the member can call their new DMC plan's member services line to request Continuity of Care. Members must call at least 30 days before the new Medi-Cal DMC plan starts.

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It is important to remind members to ensure their local county office has their current contact information, so they do not miss essential information about their Medi-Cal coverage. Members can contact their local county office or visit KeepMediCalCoverage to report any changes to their name, address, phone number, or e-mail address.

More information about the Dental Managed Care transition can be found on the <u>DHCS</u> website.

For questions and support, please contact the Medi-Cal Dental Telephone Service Center (TSC) at (800) 423-0507. The call is free. Medi-Cal Dental representatives are available 8:00 a.m. to 5:00 p.m., Monday through Friday to assist you and the Medi-Cal Dental Interactive Voice Response System (IVR) can navigate you to the services you need on the phone.