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Denti-Cal
California Medi-Cal Dental

Bulletin

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Training Seminars

Reserve an available spot for one of our open training seminars.

Elk Grove
Basic & EDI/D620 - Aug. 4, 2016
Advanced/D621 - Aug. 5, 2016

Webinar
Basic & EDI/D622 - Aug. 12, 2016
Advanced/D623 - Aug. 17, 2016

Bakersfield
Basic & EDI/D624 - Aug. 24, 2016
Advanced/D625 - Aug. 25, 2016

Provider Enrollment Assistance Line

Speak with an Enrollment Specialist.
Go here for more information!

Wednesday, August 17, 8 am - 4 pm.

New Aid Codes 0E, 2C, 4U, 7L, 9D, and J1-J8

A number of new aid codes have gone into effect. The table below outlines these new aid codes and their descriptions.

Aid Code	Aid Code Benefit	Share of Cost	Long Description
0E	Full Scope	No	Medi-Cal Access Prog Preg Women >213% through 322%
2C	No Dental	No	CCHIP 266% - 322%, 0 =< 19
4U	Full-Scope	No	FFCC Optional Coverage Group
7L	Full-Scope	No	ELE 19 through 64 <= 128% FPL - Disabled No Medicare
9D	No Dental	No	CCS Only Child Enrolled in a Health Care Plan
J1	Full-Scope	No	Full-scope No SOC County Med Probation/Comp Release
J2	Full-Scope	Yes	Full-scope SOC County Medical Probation
J3	Emergency/ Pregnancy	No	Restricted no SOC County Medical Probation
J4	Emergency/ Pregnancy	Yes	Restricted SOC County Medical Probation
J5	Full-Scope	Yes / No	FS LTC Aged No SOC/SOC County Med Prob/Comp Release
J6	Emergency/ Pregnancy	Yes / No	RS LTC Aged No SOC/SOC County Med Prob/Comp Release
J7	Full-Scope	Yes / No	FS LTC Dsbl No SOC/SOC County Med Prob/Comp Release
J8	Emergency/ Pregnancy	Yes / No	RS LTC Dsbl No SOC/SOC County Med Prob/Comp Release

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Revalidation of Enrollment

Under the provisions of the Affordable Care Act, the Centers for Medicare and Medicaid Services (CMS) published new anti-fraud regulations in the Federal Register. On March 25, 2011, these regulations established new requirements for the enrollment and screening of Medicare, Medicaid, and Children's Health Insurance Program providers at the Federal and State levels. The Code of Federal Regulations, Title 42, Section 455.414:

The State Medicaid agency must revalidate the enrollment of all providers regardless of provider type at least every 5 years.

All providers are required to submit a new enrollment application package in order to continue participating in the Denti-Cal program. Billing providers are notified when it is time to revalidate and are responsible for submitting applications for their rendering providers. **Providers who do not complete the revalidation process will be deactivated.**

Providers who are unsure of their enrollment status can contact the Denti-Cal Provider Customer Service line at (800) 423-0507 for more information or to request a call back from an enrollment representative.

Sign-Up for the Denti-Cal Fee-For-Service Provider E-Mail List

The Denti-Cal Provider E-Mail List is another option to receive updates related to the Denti-Cal program. To subscribe to the Denti-Cal Provider E-Mail List, please visit http://www.denti-cal.ca.gov/WSI/Prov.jsp?fname=dc_provider_email_signup_form and complete the online form. **After submitting the form, an e-mail will be sent requesting authorization to be added to the e-mail list.** After approval has been made, providers will receive regular updates and information about the Denti-Cal program.

Questions related to this topic or the Denti-Cal program in general can be directed to the Denti-Cal Provider Customer Service line at (800) 423-0507.

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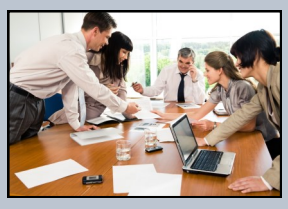
NEED MORE INFORMATION?

Provider Enrollment Workshops



Are you a dental provider who is interested in joining the Denti-Cal program but don't know where to start? Do you have questions about the Denti-Cal enrollment process? Then please drop-in anytime during the hours scheduled below to attend one of our enrollment workshops! Registration is preferred, but not required.

Date/Time:	Location:	County:
Wednesday, August 10, 2016 8:00 AM - 4:00 PM Register Now!	Double Tree 34402 Pacific Coast Hwy Dana Point, CA 92629	Orange County
Wednesday, August 24, 2016 8:00 AM - 4:00 PM Register Now!	Hilton San Bernardino 285 East Hospitality Lane San Bernardino, CA 92408	San Bernardino County

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Reminders for Submitting Documents

To expedite Treatment Authorization Request (TAR)/Claim processing and payment, providers are reminded of the following guidelines for radiograph/photograph and form submissions:

- All radiographs/photographs **must be mounted** and include the beneficiary's name, date the radiograph/photograph was taken, and orientation (right/left or individual tooth numbers).
- **Do not** tape bitewings or radiographs/photograph to white sheets of paper in lieu of mounts.
- **Do not** write any required information on the backside of any images or attachments.
- Use one radiograph/photograph per sleeve. Make sure the sleeve is clean and properly labeled on the front side of the mount.
- Use only one staple in upper right or left corner of the TAR/Claim to attach radiographs/photographs or paper copies.
- **Do not** glue radiographs/photographs or post-it notes to Denti-Cal forms or attachments.
- **Do not** submit original radiographs/photographs (note: Denti-Cal does not return radiographs//photographs).
- Fields 26 through 33 **must** be completed for each claim service line.
- Leave fields 36 ("Patient Share of Cost Amount") and 37 ("Other Coverage Amount") **blank** if there are no share of cost or other coverage amounts. If there is other coverage, then mark field 13 ("Other Dental Coverage?") and enter the amount in field 37.
- All printed characters need to stay within field boundaries.
- All Denti-Cal forms require a live signature from the provider or authorized staff member in blue or black ink.

For answers to questions or for more information, please contact the Denti-Cal Provider Customer Service line at (800) 423-0507.

Are You New to the Denti-Cal Program? Then Attend a Provider Seminar!

Denti-Cal provider seminars are a great way to learn about the Denti-Cal program including upcoming changes to the adult dental benefits and earn Continuing Education credits too. The seminars are held year round across California and are conducted by experienced, qualified instructors.

Seminars include:

- **Basic and EDI Seminars**: These seminars cover the general program purpose, goals, policies and procedures as well as the correct use of standard billing forms. Reference materials and support services available to Denti-Cal providers are also discussed. An Electronic Data Interchange (EDI) overview will be given which includes examples of Treatment Authorization Requests and claim submissions, review of reports, examples of EDI label preparation for mailing of radiographs, photographs and attachments, and the submission of electronic attachments.
- **Advanced Seminars**: This seminar covers in-depth information on topics such as Medi-Cal dental criteria, radiograph and documentation requirements, processing codes, and other topics of specific concern to Denti-Cal providers.
- **Ortho Seminars**: This specialized seminar for orthodontists addresses all aspects of the Denti-Cal orthodontic program, including enrollment and certification, completion of billing forms, billing procedures and criteria and policies specific to Denti-Cal orthodontic services.
- **Workshops**: Workshops provide the inexperienced billing staff a hands-on opportunity to learn about the Medi-Cal Dental Program's policies and procedures.
- **Webinars**: Join Denti-Cal online for a webinar presentation of the Basic and EDI seminars.

For more information on current and upcoming seminars, including seminar descriptions, the current seminar schedule, registration for seminars in your area and to get driving directions, please visit the Provider Seminars page on the Denti-Cal website:

http://www.denti-cal.ca.gov/WSI/Prov.jsp?fname=SeminarHome

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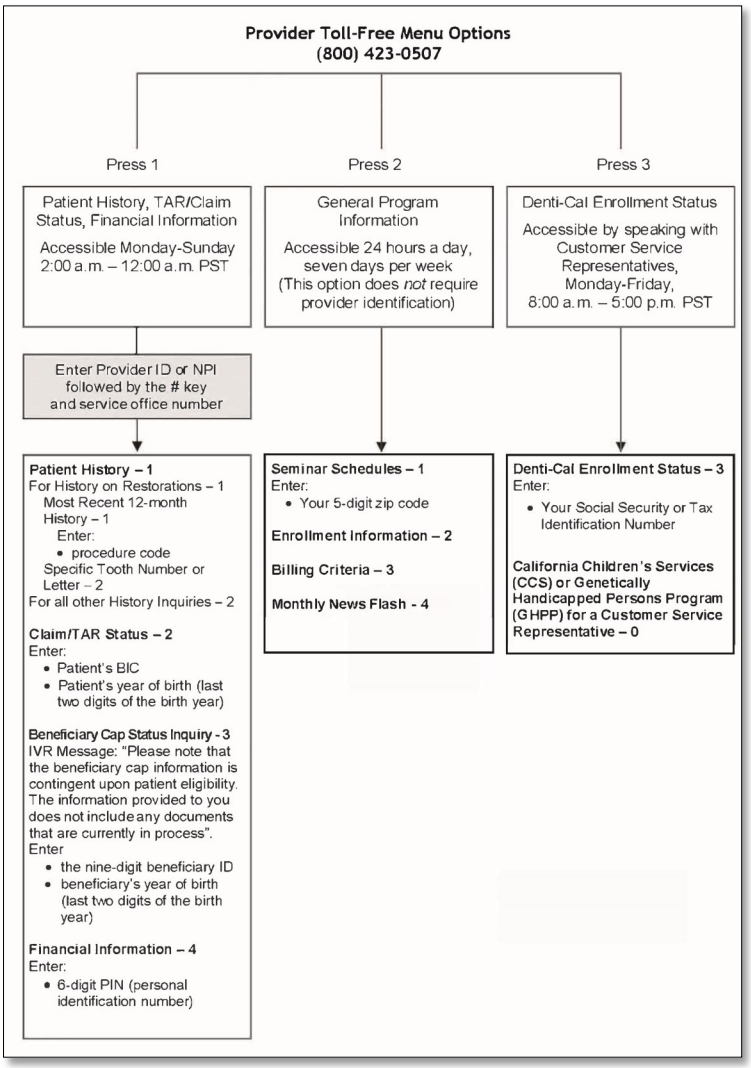
Save Time and Use the Interactive Voice Response (IVR) System!

Take advantage of the Denti-Cal Interactive Voice Response (IVR) system to access general program information. It is available to Denti-Cal providers from 2:00 AM to midnight, seven days a week. The IVR system can be used to verify the following:

- Verify patient history
- Check claim/TAR status
- Beneficiary dental cap information
- Financial information

The IVR System is a touch tone only system. If using the IVR to check beneficiary history, please enter only the numeric portion of the Current Dental Terminology (CDT) 13 or CDT 11-12 procedure code followed by the pound (#) sign. When confirming patient information with the benefits identification card number, please refer to the following chart when entering an alphabetic character:

Letter	2-Digit Code	Letter	2-Digit Code
A	*21	N	*62
B	*22	O	*63
C	*23	P	*71
D	*31	Q	*11
E	*32	R	*72
F	*33	S	*73
G	*41	T	*81
H	*42	U	*82
I	*43	V	*83
J	*51	W	*91
K	*52	X	*92
L	*53	Y	*93
M	*61	Z	*12



For more information on verifying beneficiary identification, please refer to the Provider Handbook or to obtain beneficiary eligibility, please contact Medi-Cal at (800) 456-2387.

Denti-Cal
California Medi-Cal Dental Program

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