2019 Medi-Cal Dental Payment Schedule Changes

The Medi-Cal Dental payment schedule will be adjusted at various times throughout the 2019 calendar year. Below is a complete list of the 2019 payment schedule changes.

<table>
<thead>
<tr>
<th>Holiday Adjusted For</th>
<th>Week Of</th>
<th>Payment Issue Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cesar Chavez Day</td>
<td>April 1, 2019</td>
<td>April 5, 2019</td>
</tr>
<tr>
<td>Memorial Day</td>
<td>May 27, 2019</td>
<td>May 31, 2019</td>
</tr>
<tr>
<td>Independence Day</td>
<td>July 1, 2019</td>
<td>July 5, 2019</td>
</tr>
<tr>
<td>Labor Day</td>
<td>September 2, 2019</td>
<td>September 6, 2019</td>
</tr>
<tr>
<td>Columbus Day</td>
<td>October 14, 2019</td>
<td>October 18, 2019</td>
</tr>
<tr>
<td>Veterans Day</td>
<td>November 11, 2019</td>
<td>November 15, 2019</td>
</tr>
<tr>
<td>Thanksgiving Holiday</td>
<td>November 25, 2019</td>
<td>November 29, 2019</td>
</tr>
<tr>
<td>Christmas Holiday</td>
<td>December 23, 2019</td>
<td>December 27, 2019</td>
</tr>
<tr>
<td>New Year's Day</td>
<td>December 30, 2019</td>
<td>January 3, 2020</td>
</tr>
</tbody>
</table>

Please check the Medi-Cal Dental website [www.denti-cal.ca.gov](http://www.denti-cal.ca.gov) for future notifications. For questions, please call the Telephone Service Center at (800) 423-0507.

Reminder: Do Not Send Copies of Medi-Cal Dental Forms

Medi-Cal Dental requests that providers not send photocopies of Medi-Cal Dental forms. Copies of forms will not be processed and will be returned to the provider to resubmit using original forms. Medi-Cal Dental’s Optical Character Recognition (OCR)/Intelligent Character Recognition (ICR) technology allows for a more automated process of capturing information from paper documents and enables Medi-Cal Dental to adjudicate paper forms. OCR/ICR technology cannot properly process copies of Medi-Cal Dental forms.

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To improve processing times and avoid denials, please follow the form submission instructions in Provider Handbook Section - 6 Forms. Please note: providers should only use claim forms with a revision date no older than 2013. If you need to order forms, please complete and send the Forms Reorder Request form to Medi-Cal Dental. You can find the Forms Reorder Request form on the Medi-Cal Dental website at https://www.denti-cal.ca.gov/DC_documents/providers/dc204_form.pdf.

For questions, please call the Telephone Service Center at (800) 423-0507.

Verify Your Tax Identification Number

The amount paid to each enrolled billing provider is reported annually to the Internal Revenue Service (IRS) by Medi-Cal Dental. The business name and Tax Identification Number (TIN) must match exactly with the name and TIN on file with the IRS. If the business name and TIN do not match, the IRS requires Medi-Cal Dental to withhold 28% of future payments. If the business name and TIN appearing on your Medi-Cal Dental check/EOB (Explanation of Benefits) are correct, you do not need to notify Medi-Cal Dental.

Tax Identification Number

The TIN may either be a Social Security Number (SSN) or an Employer Identification Number (EIN). Medi-Cal Dental uses the TIN to report earnings to the IRS. The last four digits of the TIN are printed on the front of the check and on the EOB you receive from Medi-Cal Dental. Please verify that the business name and TIN on the next check/EOB you receive from Medi-Cal Dental are correct.

Updating Your Tax Identification Number

Updating your TIN is necessary only if your business type has changed (for example: sole proprietorship, corporation or partnership). You will be required to complete a new Medi-Cal Dental Provider Enrollment Application (DHCS 5300) form if:

- You have incorporated your business: attach a valid, legible copy of the Articles of Incorporation showing the name of your corporation and a legible copy of an official document from the IRS (Form 147-C, SS-4 Confirmation Notification, 2363 or 8109-C).
- You are doing business under a fictitious name: attach a valid, legible copy of the fictitious name permit issued by the Dental Board of California.

A copy of the Tax Identification Change Information form has been attached to this bulletin. Mail the completed form to:

Denti-Cal
Attention: Provider Enrollment Department
P.O. Box 15609
Sacramento, CA 95852-0609

To obtain the other forms mentioned above, please contact the Telephone Service Center at (800) 423-0507 or visit the Medi-Cal Dental website at www.denti-cal.ca.gov. Failure to submit the appropriate forms and supporting documents will delay the processing of your application and your application will be returned as incomplete.

Submit Documents Electronically through Electronic Data Interchange

Submitting Claims and Treatment Authorization Requests (TARs), Notices of Authorization (NOAs), and Claim Adjustments electronically using Electronic Data Interchange (EDI) makes billing and tracking documents easier, and helps maximize practice management system capabilities. EDI-enrolled providers can also receive their Notices of Authorization (NOAs), Resubmission Turnaround Documents (RTDs) and Explanation of Benefits (EOB) data electronically. More than 65% of documents received by the Medi-Cal Dental Program are submitted electronically.

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Providers can determine their own potential savings in submitting claims electronically by using the EDI savings calculator available on the National Dental EDI Council website (www.ndedic.org).

In conjunction with EDI documents, Medi-Cal Dental also accepts digitized radiographs and attachments submitted through electronic attachment vendors DentalXChange, National Electronic Attachment, Inc. (NEA), National Information Services (NIS), and Tesia-PCI, LLC.


For information on how to enroll in EDI, please contact the Telephone Service Center at (800) 423-0507, or call (916) 853-7373 and ask for EDI Support. EDI-related questions can also be emailed to denti-calEDI@delta.org.