



Provider Bulletin

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TRAINING SEMINARS

To reserve a spot online or to view a complete list of training seminars, to go the [Provider Training Seminar Schedule](#).

Pasadena: Basic & EDI/D780
June 11, 2019 | 8:00am - 12:00pm

PROVIDER ENROLLMENT ASSISTANCE LINE

Speak with an Enrollment Specialist. Go [here](#) for more information.

Available every Wednesday
8am - 4pm

Medi-Cal Dental Policy Changes CDT Bulletin 2

The Department of Health Care Services (DHCS) is implementing policy changes to the current CDT-13 code set. The policy changes will be implemented in releases between June and July 2019.

The Manual of Criteria (MOC) in Section 5 of the Provider Handbook will be updated with new changes to the procedure codes after all the releases have been implemented. DHCS will notify providers via a Provider Bulletin when the MOC has been updated.

Policy changes for the following CDT-13 procedure codes will be effective for dates of service (DOS) on and after July 10, 2019.

Procedure Code	Updated Policy
D9430	<p>PROCEDURE D9430 OFFICE VISIT FOR OBSERVATION (DURING REGULARLY SCHEDULED HOURS) – NO OTHER SERVICES PERFORMED</p> <ol style="list-style-type: none"> 1. This procedure cannot be prior authorized. 2. A benefit once per date of service per provider. 3. Not a benefit for visits to patients residing in a house/ extended care facility.
D9910	<p>PROCEDURE D9910 APPLICATION OF DESENSITIZING MEDICAMENT</p> <ol style="list-style-type: none"> 1. This procedure cannot be prior authorized. 2. Written documentation for payment –shall include the tooth/teeth and the specific treatment performed.

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Procedure Code	Updated Policy
D9910	<ol style="list-style-type: none">3. A benefit:<ol style="list-style-type: none">a. once per date of service per provider regardless of the number of teeth and/or areas treated.b. for permanent teeth only.4. Not a benefit when any other treatment is performed on the same date of service, except when radiographs/photographs are needed of the affected area to diagnose and document the emergency condition.5. This procedure is considered to be an emergency treatment only.

Provider Bulletins related to these policy updates will be identified and linked in Provider Handbook [Section 5 - Manual of Criteria and Schedule of Maximum Allowances](#) in the Policy Changes table on page 5-1. For questions, please call the Telephone Service Center at (800) 423-0507.