



# Provider Bulletin

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## TRAINING SEMINARS

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

**Please note: Due to the COVID-19 pandemic, all seminars will be held as webinars.**

## PROVIDER ENROLLMENT ASSISTANCE LINE

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

Available every Wednesday  
8am - 4pm

## New 2022 Provider Customer Service Satisfaction Survey

Medi-Cal Dental invites providers to share their experience with the Medi-Cal Dental Program by taking the [2022 Provider Customer Service Satisfaction Survey](#) now through **April 15, 2022**.

The survey is available on the Medi-Cal Dental [website](#) and *Smile, California* [website](#) for all providers to complete, and was mailed to a randomly selected group on March 1, 2022.

Thank you for your continued participation in the program and taking time to respond. The results will be used to assess how we can better serve our Medi-Cal dental providers.

## Provider Handbook Section 5 Updated

The Department of Health Care Services (DHCS) has updated its Medi-Cal Dental [Provider Handbook Section 5](#) – *Manual of Criteria and Schedule of Maximum Allowances* and has included the Current Dental Terminology (CDT) 2021 draft [Manual of Criteria \(MOC\)](#) and [Schedule of Maximum Allowances \(SMA\)](#). These updates became effective January 1, 2022.

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For convenience and easy access to the latest submission criteria and guidelines, providers can also visit the dedicated [Medi-Cal Dental Manual of Criteria and Schedule of Maximum Allowances page](#) for:

- Draft MOCs and SMAs, including effective dates and bulletin announcements
- Proposition 56 Supplemental Payment Fee Schedule
- CalAIM Pay-for-Performance Preventive Services and Continuity of Care Fee Schedules

DHCS updates the Medi-Cal Dental Program CDT code set annually. Providers will be notified of changes through future Provider Bulletins.

## Explanation of Benefits Update

The California Advancing and Innovating Medi-Cal (CalAIM) initiative went into effect on January 1, 2022. As part of this implementation, the Medi-Cal Dental Explanation of Benefits (EOB) form was updated to reflect CalAIM payment amounts.

### What's New

- » CalAIM and Proposition 56 (Prop 56) supplemental payment amounts now appear on EOBs under the Claim Service Line (CSL).
  - The CSL shows how much of each supplemental amount was included in the total payment for the eligible billed procedure.
  - See example below:

| FOR ANY QUESTIONS REGARDING THIS DOCUMENT |                      |               |            |                 |                   |             |               |                |               |                |               |
|---|----------------------|---------------|------------|-----------------|-------------------|-------------|---------------|----------------|---------------|----------------|---------------|
| B   | MEMBER NAME          |               |            |                 | MEDI-CAL I.D. NO. |             | MEMBER ID     |                | SEX           | BIRTH DATE     |               |
| C   | DOCUMENT CONTROL NO. | TOOTH CODE    | PROC. CODE | DATE OF SERVICE | STA-TUS           | REASON CODE | AMOUNT BILLED | ALLOWED AMOUNT | SHARE OF COST | OTHER COVERAGE | AMOUNT PAID   |
| <b>ADJUDICATED CLAIMS</b>                 |                      |               |            |                 |                   |             |               |                |               |                |               |
| B   | AAAAAAA              | LAAAA         |            |                 |                   | 91111111A   |               | 91111111A      | F             | 04/05/17       |               |
| C   | 22162161297          | D012006/07/22 | P          |                 | 270               | 61.00       |               | 100.00         |               |                | 100.00        |
| C   |                      |               |            |                 | 505               |             |               |                |               | 30.00          | PROP 56       |
| C   |                      |               |            |                 | 507               |             |               |                |               | 55.00          | CALAIM 3      |
| C   |                      | D112006/07/22 | P          |                 |                   | 40.00       |               | 52.50          |               |                | 52.50         |
| C   |                      |               |            |                 | 506               |             |               |                |               | 22.50          | CALAIM 1      |
| <b>CLAIM TOTAL</b>                        |                      |               |            |                 |                   |             | <b>101.00</b> | <b>152.50</b>  |               |                | <b>152.50</b> |

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- » The CalAIM and Prop 56 supplemental payment amount totals now appear on the EOB after the Claims/Adjustment section under “**SUMMARY OF TOTAL AMOUNT INCLUDED IN THE PAID LINES FOR THIS CHECKWRITE**”.

- See example below:

|  |                 |       |   |
|--|-----------------|-------|---|
| <b>SUMMARY OF TOTAL AMOUNT INCLUDED IN THE PAID LINES FOR THIS CHECKWRITE:</b> |                 |       |   |
| *****  |                 |       |   |
| *  | TOTAL PROP 56 : | 33.00 | * |
| *  | TOTAL CALAIM 1: | 64.50 | * |
| *  | TOTAL CALAIM 2: | .00   | * |
| *  | TOTAL CALAIM 3: | 55.00 | * |
| *****  |                 |       |   |

**PLEASE NOTE:**

- **CalAIM 1** refers to the **Preventive Services** Pay-for-Performance (P4P) CalAIM initiative. Please refer to the [CalAIM P4P fee schedules](#) to view the performance payment amounts for select eligible procedure codes.
- **CalAIM 2** refers to the Caries Risk Assessment (CRA) and Silver Diamine Fluoride (SDF) new benefit portion of CalAIM. Please refer to Provider Bulletin [Volume 38, Number 1](#) for details.
- **CalAIM 3** refers to the **Continuity of Care** P4P CalAIM initiative. As a reminder, this is a flat rate of \$55 paid once per calendar year, per member on procedures D0120, D0145, or D0150 if – *and only if* – an exam procedure was paid to the same dental provider service office location by Medi-Cal Dental in the previous year. Please refer to the [CalAIM P4P fee schedules](#) to view the flat rate amount in addition to the Schedule of Maximum Allowances (SMA) for each procedure code.

For more information about CalAIM, please read Provider Bulletin [Volume 38, Number 1](#). To view the latest criteria and submission requirements, including current CalAIM and Prop 56 supplemental fee schedules, please refer to the [Medi-Cal Dental Manual of Criteria and Schedule of Maximum Allowances page](#).

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# Coming Soon: 2022 Provider Participation Survey

Medi-Cal Dental is pleased to announce that dental providers, including allied dental professionals, will have an opportunity to take the **2022 Provider Participation Survey** starting **April 1<sup>st</sup>**. The goal of this survey is to understand the factors that influence a provider’s decision not to participate in the Medi-Cal Dental program. The survey will be available on the Medi-Cal Dental [website](#) and *Smile, California* [website](#) from **April 1, 2022 to May 16, 2022**.

**NOTE: Please only complete this survey if you are not currently enrolled in Medi-Cal.**

We will notify providers of the survey release in a future Provider Bulletin. Join the [Provider Email List Sign Up](#) to receive the latest Medi-Cal Dental updates.

# 2022 Medi-Cal Dental Payment Schedule Changes

The Medi-Cal Dental payment schedule will be adjusted at various times throughout the 2022 calendar year. Below is a complete list of the 2022 payment schedule changes.

| 2022 Medi-Cal Dental Payment Schedule Changes |                   |                    |
|---|-------------------|--------------------|
| Holiday Adjusted For                          | Week Of           | Payment Issue Date |
| Martin Luther King Jr. Day                    | January 17, 2022  | January 21, 2022   |
| President’s Day                               | February 21, 2022 | February 25, 2022  |
| Memorial Day                                  | May 30, 2022      | June 3, 2022       |
| Independence Day                              | July 4, 2022      | July 8, 2022       |
| Labor Day                                     | September 5, 2022 | September 9, 2022  |
| Thanksgiving Holiday                          | November 21, 2022 | November 25, 2022  |
| Christmas Holiday                             | December 26, 2022 | December 30, 2022  |

Providers will be notified of payment delays through future Provider Bulletins. Join the [Provider Email List Sign Up](#) to get these notifications straight to your Inbox.

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# Important Reminder: End Date for Extended Timeframe for Member State Hearing Requests During COVID-19

**Effective April 16, 2022, the extended timeframe for members to request a State Hearing will end.**

On March 1, 2020, the Department of Health Care Services (DHCS) extended the State Hearing request timeframe from 90 days to 210 days to support members during the COVID-19 public health emergency. On April 16, 2022, the timeframe will revert to 90 days from the date on the Medi-Cal Dental Notice of Action.

A Member Bulletin will be issued to remind members of this change. For questions about this bulletin, please contact the Telephone Service Center at (800) 423-0507. For information about the State Hearing process, please refer to [Provider Handbook](#) Section 4 – Treating Members.

## Reminder: Annual Medi-Cal Dental Provider Directory Refresh

Medi-Cal Dental will be updating the [Provider Directory](#) with its Annual Refresh Campaign. The directory is a tool members can access on the *Smile, California* [Find a Dentist page](#) and use to search for enrolled providers in their area who are accepting Medi-Cal patients. Displaying your status in the Provider Directory is an excellent way to build, maintain, and increase your patient base while also serving Medi-Cal members in your community.

### Provider Directory Refresh Steps

1. You will get a notification from Medi-Cal Dental requesting that you complete and submit the [Medi-Cal Dental Provider Directory/Referral Form](#). This is your opportunity to update your status in the directory so that your office either appears as “Accepting New Patients” or “Not Accepting New Patients”.

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2. Once you receive the notice, you will have **35 business days** to complete and submit the form.
  - » **IMPORTANT:** If you wish to remain on the Directory as “Accepting New Patients”, you must submit a new form. **If you do not submit a form, your dental office will be listed as “Not Accepting New Patients” in the directory.**
3. You can submit the completed form in any of the following ways:
  - » Email it to [Medi-CalDentalEnrollmentDept@delta.org](mailto:Medi-CalDentalEnrollmentDept@delta.org).
  - » Mail it to Medi-Cal Dental in the postage paid envelope provided with the notification letter you received in the mail.
  - » Fax it to the Provider Enrollment Department at (916) 853-6315.
  - » Call the Telephone Service Center at (800) 423-0507 to have a representative assist you with completing and submitting the form.

**Please note:** Safety Net Clinics (Federally Qualified Health Centers, Rural Health Clinics, and Indian Health Clinics) will only be added to the [Dental Clinics Serving Medi-Cal Members](#) static list.

Thank you for your continued support and participation as we strive to improve oral health for Medi-Cal members all over California.

## Access Your Medi-Cal Information Quickly and Easily with the Dental Provider Website Application

Did you know that you and your staff can save time and get up-to-date information on your Medi-Cal dental operations by using the [Provider Website Application](#)? With the Provider Website Application, you can securely log in to view:

- Patient history, including all dental services a member received from Medi-Cal dental providers in the last two years. Each line item shows:
  - » Tooth information

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- » Procedure(s)
- » Dates of service
- » Denied/allowed status
- Claim status and history
- Treatment Authorization Request status and history
- Weekly check amounts
- Monthly payment totals and year-to-date payments

The Provider Website Application is even mobile friendly, so you can stay current no matter where you are. **Need help getting started?** Check out the [Provider Website Application User Guide](#) for step-by-step instructions on how to create an account.