

Denti-Cal California Medi-Cal Dental Bulletin

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Training Seminars:

Want to learn more about the Denti-Cal program? Come to one of our training seminars. Go to our website to **Reserve Your Spot**.

San Bernardino
Workshop/D301 - Dec 1, 2010

Milpitas
Workshop/D302 - Dec 8, 2010

Concord
Basic & EDI /D303 - Dec 9, 2010
Advanced/D304 - Dec 10, 2010

AB 1783– Medi-Cal Change of Location Form for Individual Physician or Individual Dentist Practices Relocating Within the Same County (DHCS 9096) Effective January 1, 2011

Effective January 1, 2011, Welfare and Institutions (W&I) Code, Section 14043.26(b) allows individual dentist practices or a corporation owned solely by the individual dentist who is the only dentist practitioner of the corporation who meets specified criteria, and who change their business locations within the same county, to use a “change of location” form. The implementation of the form is a requirement of Assembly Bill (AB) 1783 (Statutes of 2010).

Based upon the authority granted to the director of the Department of Health Care Services (DHCS) in W&I Code, Section 14043.75(b), the director has authorized the following form and established the procedures and criteria governing its use. This procedure is a regulation implementing W&I Code, Section 14043.26(b) and has the full force and effect of law. The change of location form, entitled *Medi-Cal Change of Location Form for Individual Physician or Individual Dentist Practices Relocating Within the Same County* (DHCS 9096) as well as the procedures and criteria governing its use, is effective beginning January 1, 2011. The form will be available on-line by December 31, 2010.

Procedures for Enrollment Using the “Change of Location” Form

Pursuant to W&I Code, Section 14043.26(b), an individual dentist who is enrolled and in good standing in the Medi-Cal Dental program may request enrollment at a new business location within the same county by submitting the *Medi-Cal Change of Location Form for Individual Physician or Individual Dentist Practices Relocating Within the Same County* (DHCS 9096) if they meet all of the following criteria:

- The dental provider must meet the definition of an “individual dentist practice” as defined in W&I Code, Section 14043.1(l)(1).

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HIGHLIGHT

No Claim Activity for 12 Months

Providers who have had no claim activity (submitting no claims or requesting reimbursement) in a 12-month period shall be deactivated per Welfare and Institutions Code Section 14043.62 (a) which reads as follows:

The department shall deactivate, immediately and without prior notice, the provider's number, including all business addresses used by a provider to obtain reimbursement from the Medi-Cal program when warrants or documents mailed to a provider's mailing address or its pay to address, if any, or its service or business address, are returned by the United States Postal Service as not deliverable or when a provider has not submitted a claim for reimbursement from the Medi-Cal program for one year. Prior to taking this action the department shall use due diligence in attempting to contact the provider at its last known telephone number and ascertain if the return by the United States Postal Service is by mistake or shall use due diligence in attempting to contact the provider by telephone or in writing to ascertain whether the provider wishes to continue to participate in the Medi-Cal program. If deactivation pursuant to this section occurs, the provider shall meet the requirements for reapplication as specified in this article or the regulations adopted thereunder.

If you have not had any claim activity in a 12-month period, and wish to remain an active provider in the Denti-Cal Program, please click on the paperclip icon on the lower-left corner of the Adobe Acrobat Reader window to find the No Claim Activity form:



After completing the No Claim Activity form please mail it to:

Denti-Cal
California Medi-Cal Dental Program
PO Box 15609
Sacramento, CA 95852-0609

If your provider number is deactivated, you must reapply for enrollment in the Denti-Cal Program. To request an enrollment package contact Denti-Cal toll-free at (800) 423-0507.

W&I Code Section 14043.1(l)(1) "Individual dentist practice" means a dentist licensed by the Dental Board of California enrolled or enrolling in Medi-Cal as an individual provider who is sole proprietor of his or her practice or is a corporation owned solely by the individual dentist and the only dentist practitioner is the owner. An individual dentist practice may include nondentist allied dental health professionals employed and supervised by the dentist."

- The dental provider must be changing the location of his or her individual dental practice within the same county.
- The information submitted by the dental provider in his or her last approved Medi-Cal application package, including their last Medi-Cal Disclosure Statement, remains true, accurate and complete to the best of the dental provider's knowledge and belief.

If a dental provider does not meet all of these criteria, she or he must submit a complete application package for their new business address, consisting of a current *Medi-Cal Provider Application* (DHCS 6204) and a *Medi-Cal Disclosure Statement* (DHCS 6207) and a *Medi-Cal Provider Agreement* (DHCS 6208).

While the "change of location form" may be submitted in lieu of a complete application package, it is subject to similar review. Pursuant to W&I Code, Section 14043.26(g), DHCS has 90 days to review the "change of location form" and notify the applicant that the department is taking one of the following actions:

- Enrolling the applicant beginning with provisional provider status for 12 months;
- Returning the application package as incomplete with a list of deficiencies that must be corrected and the application returned within 60 days;
- Exercising its authority to conduct background checks, pre-enrollment inspections or unannounced visits, or;
- Denying the application package for specified reasons.

DHCS must notify physician and dentist applicants within 15 days that his or her application was received.

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The *Medi-Cal Change of Location Form for Individual Physician or Individual Dentist Practices Relocating Within the Same County* (DHCS 9096) will be available on-line by December 31, 2010.

The full text of AB 1783 can be viewed online at www.leginfo.ca.gov/pub/09-10/bill/asm/ab_1751-1800/ab_1783_bill_20100827_chaptered.html.

Registering and Using the National Provider Identifier (NPI)

All providers are required to obtain a National Provider Identifier (NPI) prior to enrolling in the Medi-Cal program. Denti-Cal continues to encourage currently enrolled providers to obtain, register with Denti-Cal, and use their National Provider Identifier (NPI). Providers who do not have an NPI are strongly encourage to request one from the National Plan and Provider Enumeration System (NPPES) Web site: <https://nppes.cms.hhs.gov>.

Registering Your NPI

Before providers can use their NPI on Denti-Cal forms, both the billing NPI and rendering NPI must be registered with Denti-Cal. Providers can register their NPI in one of two ways:

Providers can register NPI numbers in one of two ways:

- **Online via the Denti-Cal NPI Collection System.** To expedite NPI registration, register via the Denti-Cal NPI Collection System found on the Denti-Cal Web site. Go to <http://www.denti-cal.ca.gov> and click on the National Provider Identifier (NPI) tab, and then on the [Register Your NPI](#) link. Print the confirmation page from the website as a record of registration. After completing the registration process, please allow three (3) business days prior to submitting documents with the NPI.
- **Using the NPI Registration Form DHS 6218.** To obtain the paper NPI Registration Form [DHS 6218](#) and instructions on how to register your NPI, visit the Denti-Cal Web site at <http://www.denti-cal.ca.gov> and click on the National Provider Identifier (NPI) tab, and then on the [Register Your NPI](#) link.

Remember to retain a copy of the letter received from Denti-Cal as a record of registration. *Providers should not use their NPIs when submitting documents for authorization or payment until they have received a confirmation letter from Denti-Cal, which can take up to 15 business days.*

For questions about the Denti-Cal NPI Collection System or registration of the NPI, please call Denti-Cal toll-free at (800) 423-0507.

Using an NPI

Denti-Cal providers are to use their registered NPI on the following forms:

- Treatment Authorization Request/Claim (DC-202, DC-209, DC-217)
- Claim Inquiry Form (DC-003)
- Forms Reorder Request (DC-204)
- Notice of Authorization (DC-301)

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Unregistered NPI Can Lead to Denied Claims

Claims with an unregistered NPI will be denied with Adjudication Reason Code 319A, which reads as follows:

319A The submitted rendering provider NPI is not registered with Denti-Cal. Prior to requesting re-adjudication for a dated, denied procedure on a Claim Inquiry Form (CIF), the rendering provider NPI must be registered with Denti-Cal.

To avoid denials on claims due to unregistered NPI, providers should wait for confirmation of registration before using the NPI.