

Denti-Cal California Medi-Cal Dental Bulletin

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Training Seminars

Reserve your spot for one of our training seminars.

Webinar
Basic & EDI/D438 - Aug. 2, 2013

Oxnard
Basic & EDI/D439 - Aug. 7, 2013

Oxnard
Advanced/D440 - Aug.8, 2013

Merced
Workshop/D441 - Aug.29, 2013

Merced
Advanced/D442 - Aug.30, 2013

Provider Enrollment Assistance Line

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

Next available date:

Wednesday, August 21, 8 am - 4 pm.

Some Adult Dental Services to be Restored in 2014

On June 27, 2013, Governor Jerry Brown approved [Assembly Bill 82 \(AB 82\)](#) which restores some adult dental benefits to the Denti-Cal program. Beginning May 1, 2014, the following benefits will be restored to beneficiaries age 21 and older:

- ◆ Initial examinations, radiographs/photographic images, prophylaxis, and fluoride treatments.
- ◆ Amalgam and composite restorations.
- ◆ Prefabricated stainless steel, resin, and resin window crowns.
- ◆ Anterior root canal therapy.
- ◆ Complete dentures, including immediate dentures.
- ◆ Complete denture adjustments, repairs, and relines.

Please check the Denti-Cal website frequently for future updates and clarifications. For questions, please call the Customer Service Line at 1-800-423-0507.

New Aid Code G0 and Updated/New Aid Codes G1, G2, G5, G6, G7, and G8

Aid Code G0

The Medical Parole Program, as enacted by [Senate Bill 1399 \(SB 1399\)](#), authorizes the California Department of Corrections and Rehabilitation to provide Medical Parole to certain state inmates who are permanently medically incapacitated. An eligible inmate who has been medically paroled is eligible for all Medi-Cal covered services, including all Full Scope dental benefits .

Aid code G0 was created to identify and process claims for all Medi-Cal covered services provided to state inmates placed on Medical Parole, who are eligible for full scope Medi-Cal.

The details for Aid Code G0 are below.

Aid Code	Benefits	SOC	Program/Description
G0	Full	No	Full-scope no SOC; State medically paroled adults

Non-Dental Aid Codes G1, G2, G5, G6, G7, and G8

[Assembly Bill 396 \(AB 396\)](#) created the Medi-Cal Juvenile Inmate Program. This program provides Medi-Cal coverage to eligible state and county juvenile inmates for inpatient hospital and inpatient mental health services provided off the grounds of the correctional facilities. Through AB396, the following non-dental aid codes were updated or created.

Please note aid codes G1, G2, G5, G6, G7, and G8 are **non-dental aid codes** and are listed below for reference only. Non-dental aid codes are not eligible for dental benefits.

Aid Code	New/Updated	Program/Description
G1	Updated	Title XIX, Medi-Cal no share-of-cost (SOC) for state juvenile inmates. Medi-Cal benefits limited to covered inpatient hospital and inpatient mental health services only, for juvenile inmates in state correctional facilities who receive those services off the grounds of the correctional facility.
G2	Updated	Title XIX/Title XXI, Medi-Cal no SOC for undocumented state juvenile inmates. Medi-Cal benefits limited to covered inpatient hospital emergency and inpatient mental health emergency (Title XIX) and inpatient pregnancy-related (Title XXI) services only, for juvenile inmates in state correctional facilities who receive those services off the grounds of the correctional facility.
G5	New	Title XIX, Medi-Cal no SOC for county juvenile inmates. Medi-Cal benefits limited to covered inpatient hospital or inpatient mental health services only, for juvenile inmates in county correctional facilities who receive those services off the grounds of the correctional facility.
G6	New	Title XIX/Title XXI, Medi-Cal no SOC for undocumented county juvenile inmates. Medi-Cal benefits limited to covered inpatient hospital emergency, inpatient mental health emergency (Title XIX) and inpatient pregnancy-related (Title XXI) services only, for juvenile inmates in county correctional facilities who receive those services off the grounds of the correctional facility.
G7	New	Title XIX, Medi-Cal SOC for county juvenile inmates. Medi-Cal benefits limited to covered inpatient hospital or inpatient mental health services only, for juvenile inmates in county correctional facilities who receive those services off the grounds of the correctional facility.
G8	New	Title XIX/Title XXI, Medi-Cal SOC for undocumented county juvenile inmates. Restricted/Limited - Medi-Cal limited to covered inpatient hospital emergency, inpatient mental health emergency (Title XIX) and inpatient pregnancy-related (Title XXI) services only, for juvenile inmates in county correctional facilities who receive those services off the grounds of the correctional facility.

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COME SEE US!

Visit Denti-Cal at the CDA Scientific Session in San Francisco

Be sure to visit the Denti-Cal booths at the CDA Scientific Session in San Francisco, Thursday, August 15 through Saturday, August 17. Representatives from Denti-Cal will be on hand in Booth 825 of the Moscone South Convention Center to provide information and answer questions regarding enrollment, EDI, provider trainings, and more!



The table for the following non-dental aid codes is for reference only:

Aid Code	Benefits	SOC	Program/Description
G1	None	N/A	Full-scope no SOC; State medically paroled adults
G2	None	N/A	Medi-Cal No SOC St Juvenile Inmate Undoc Emerg/Preg
G5	None	N/A	Limited Medi-Cal No SOC County Juvenile Inmate
G6	None	N/A	Medi-Cal No SOC Cty Juvenile Inmate Undoc Emerg/Preg
G7	None	N/A	Limited Medi-Cal SOC County Juvenile Inmates
G8	None	N/A	Medi-Cal No SOC Cnty Juvenile Inmate Undoc Emerg/Preg.

For questions regarding these new aid codes or any other aid codes, please contact the Customer Service line at 1-800-423-0507.

New Aid Code R1

On January 1, 2007, [Senate Bill 1569 \(SB 1569\)](#) established the Trafficking and Crime Victims Assistance Program (TCVAP), a state-funded program to provide social services and Full Scope benefits (including Full Scope dental benefits) to noncitizen individuals who have been victims of human trafficking, domestic violence, or other serious crimes and are not eligible for federally-funded programs. Services and Full Scope benefits provided under TCVAP are equivalent to federal benefits that are available to persons who enter this country with the immigration status of refugee.

The details of Aid Code R1 are below:

Aid Code	Benefits	SOC	Program/Description
R1	Full Scope	N	CalWORKs TCVAP Trafficking Victims

For questions regarding this new aid code or any other aid codes, please contact the Customer Service line at 1-800-423-0507.

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. Effective 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.

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JOIN US ONLINE!

August Webinar: Basic and EDI Seminar

Join Denti-Cal online for a webinar presentation of the Basic and EDI Seminar! The webinar will be held on Friday, August 2 from 8:30 am until 12:00 pm and will be capped at 25 registrants. Visit the Denti-Cal [Provider Seminar Schedule page](#) on the Denti-Cal website (www.denti-cal.ca.gov) for a description of the seminar and a link for registration. [Sign-up now](#): space is very limited!

For more information about Denti-Cal seminars or webinars, please call the Provider Customer Service line at (800) 423-0507.

Compliance with CMS Final Rule

The [Code of Federal Regulations, Title 42, Section 455.414](#) states:

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

As a result, Denti-Cal must:

- ◆ Revalidate the enrollment of all active providers by March 25, 2016.
- ◆ Revalidate the enrollment of all active providers on an on-going basis every five years.

In 2014, Denti-Cal will begin the revalidation process. All providers will be required to submit a new enrollment application package in order to continue participating in the Denti-Cal program.

The revalidation of enrollment will be implemented in phases. Providers will receive written notification prior to their revalidation due date. Please DO NOT submit a new enrollment application for revalidation until you've received your revalidation notification letter.

Additional information will be provided in upcoming bulletins and provider seminars.

Inform Your Healthy Families Patients of the Healthy Families Transition

The Department of Health Care Services is providing a pre-drafted letter for dental providers who wish to inform their patients of the Healthy Families transition to Medi-Cal. The letter is attached to this bulletin and is available [here](#) on the [Denti-Cal website](#) for download. Please use this letter as a source to provide patients with further information regarding the transition.

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 encouraged 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:

- ◆ **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.

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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)

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.

For Faster Denti-Cal Payments, Enroll in Direct Deposit Today!

Denti-Cal encourages providers to enroll in the direct deposit program. With direct deposit, Denti-Cal automatically deposits payments into a provider's designated savings or checking account, which means:

- ◆ No more lost or misdirected checks
- ◆ No more waiting for checks to arrive in the mail
- ◆ No more trips to the bank
- ◆ Payments are available faster

To participate in the program, providers must complete and sign the attached [Direct Deposit Enrollment Form](#). Providers can also obtain a form by calling the Telephone Service Center at (800) 423-0507, or by writing to Denti-Cal at this address:

Denti-Cal
Attn: Provider Enrollment Department
PO Box 15609
Sacramento, CA 95852-0609

The back of the form contains instructions for completing the Direct Deposit Enrollment Form. The Direct Deposit Enrollment Form must include the following:

- ◆ The provider's original signature (in blue ink)
- ◆ A preprinted, voided check attached to the form

Providers must mail the completed form and voided check to Denti-Cal at the address shown above.

Upon receipt of the Direct Deposit Enrollment Form, Denti-Cal sends a "test" deposit to the bank. This will result in a "zero" deposit for that payment date. The test cycle usually takes three to four weeks to complete. During the test cycle period, providers will continue to receive Denti-Cal payment checks through the mail.

The amount of each deposit will appear on the corresponding Explanation of Benefits once direct deposit begins.

More information about direct deposit can be found in "[Section 3: Enrollment Requirements](#)" of the Provider Handbook.

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

Enrollment Workshops

If you're interested in joining the Denti-Cal program but are not sure where to start, or if you have questions about the enrollment process, then please join us at one of our enrollment workshops!

August 20 **11 AM - 7 PM**
Holiday Inn, 545 Humboldt Ave Willows, CA (530)934-8900

August 22 **11 AM - 7 PM**
Lake Tahoe Resort Hotel, 4130 Lake Tahoe Blvd. South Lake Tahoe, CA (530) 544-5400

August 27 **11 AM - 7 PM**
Red Lion Hotel, 1929 4th St, Eureka, CA 95501 (707)445-0844



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