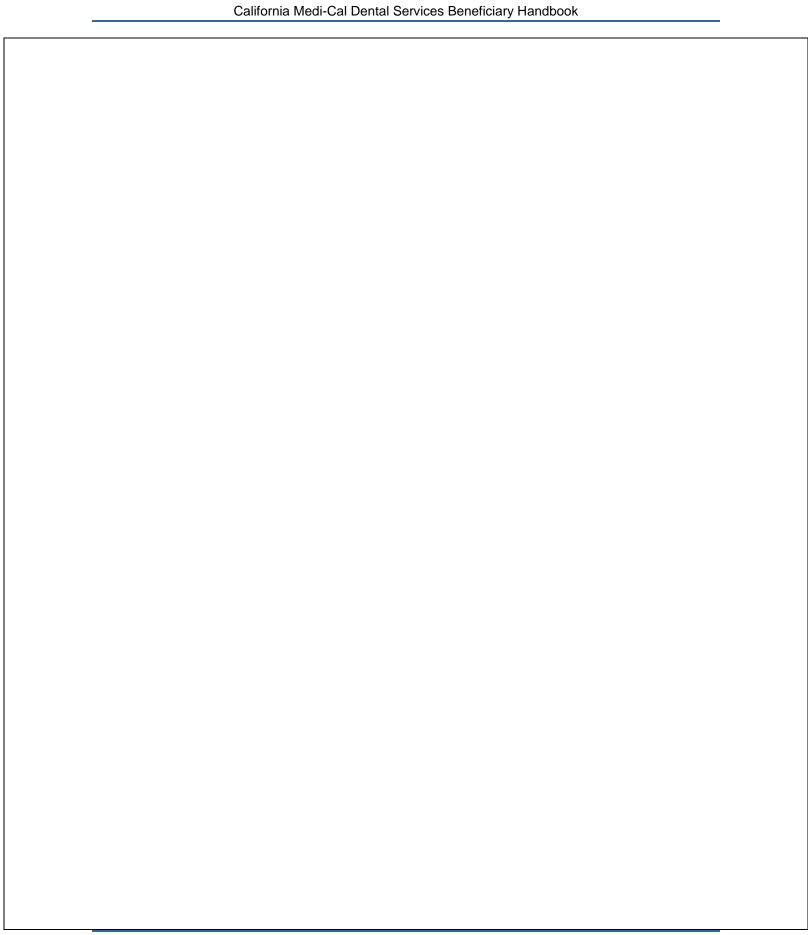
California Medi-Cal Dental Services

# **Beneficiary Handbook**







Can you read this document? If not, we can have somebody help you read it. You may also be able to get this document written in your language. For free help, please call 1-800-322-6384 (TTY: 711).

¿Puede leer este documento? Si no, podemos hacer que alguien lo lea por usted. También puede obtener este documento escrito en su idioma. Para obtener ayuda gratuita, llame al 1-800-322-6384 (TTY: 711). (Spanish)

您能自行閱讀本文件嗎?如果不能,我們可請人幫助您閱讀。您還可以請人以您的語言撰寫本文件。如需免費幫助,請致電 1-800-322-6384 (TTY: 711)。(Traditional Chinese)

您能阅读本文件吗?如果不能,我们可请人帮助您阅读。您还可以获得用您的语言书写的此文件。如需免费帮助,请致电 1-800-322-6384 (TTY: 711)。(Simplified Chinese)

Bạn có đọc được tài liệu này không? Nếu không, chúng tôi sẽ cử một ai đó giúp bạn đọc. Bạn cũng có thể nhận được tài liệu này viết bằng ngôn ngữ của bạn. Để nhận được trợ giúp miễn phí, vui lòng gọi 1-800-322-6384 (TTY: 711). (Vietnamese)

이 문서를 읽으실 수 있습니까? 그렇지 않다면, 다른 사람이 대신 읽어드리도록 도와드릴 수 있습니다. 또한 이 문서를 귀하의 모국어로 번역해드릴 수 있습니다. 무료 지원을 요청하시려면, 1-800-322-6384 (TTY: 711)번으로 연락하십시오. (Korean)

Mababasa mo ba ang dokumentong ito? Kung hindi, mayroong makatutulong sa iyo na basahin ito. Maaaring makuha mo rin ang dokumentong ito nang nakasulat sa iyong wika. Para sa libreng tulong, pakitawagan ang 1-800-322-6384 (TTY: 711). (Tagalog)

Вы можете прочитать этот документ? Если нет, то вы можете попросить кого-нибудь в нашей компании помочь вам прочитать этот документ. Вы также можете получить этот документ на своем языке. Для получения бесплатной помощи, просьба звонить по номеру 1-800-322-6384 (TTY: 711). (Russian)

هل تستطيع قراءة هذا المستند؟ إذا كنت لا تستطيع, يمكننا أن نُوفّر لك من يساعدك في قراءتها. ربما يمكنك أيضًا الحصول على هذا المستند مكتوبًا بلغتك. للمساعدة المجانية اتصل بـ 6384-322-1-170). (Arabic)

آیا می توانید این متن را بخوانید؟ در صورتی که نمی توانید، ما قادریم از شخصی بخواهیا تا در خواندن این متن به شما کمک کند. همچنین ممکن است بتوانید این متن را به زبان خود دریافت کنید. برای کمک رایگان با این شماره تماس بگیرید: 6384-322-800-1 (711: TTY). (Persian Farsi)

Կարո՞ղ եք արդյոք կարդալ այս փաստաթուղթը։ Եթե ոչ, մենք կարող ենք օգնել, որպեսզի որևէ մեկը կարդա այն Ձեզ համար։ Դուք կարող եք նաև ստանալ այս փաստաթուղթը՝ գրված Ձեր լեզվով։ Անվճար օգնության համար խնդրում ենք զանգահարել 1-800-322-6384 (TTY՝ 711) հեռախոսահամարով։ (Armenian)

កើលោកអ្នកអាចអានឯកសារនេះបានទេ? បើសិនមិនអាចទេ យើងអាចឱ្យនរណាម្នាក់ជួយអានឱ្យលោកអ្ន ក។ លោកអ្នកក៍អាចទទួលបានឯកសារនេះជាលាយលក្ខណ៍អក្សរជាភាសារបស់លោកអ្នកជងដែរ។ សម្រាប់ ជំនួយឥតគិតថ្លៃ សូមទូរស័ព្ទទៅលេខ 1-800-322-6384 (TTY: 711)។ (Khmer)

Koj nyeem puas tau daim ntawv no? Yog tias koj nyeem tsis tau, peb muaj neeg pab nyeem rau koj. Tsis tas li ntawd, peb kuj tseem muaj daim ntawv no sau ua koj hom lus rau koj thiab. Txhawm rau qhov tau kev pab dawb, thov koj hu rau tus nab npawb xov tooj 1-800-322-6384 (TTY: 711). (Hmong)

ທ່ານສາມາດອ່ານເອກະສານສະບັບນີ້ ໄດ້ບໍ? ຖ້າທ່ານບໍ່ສາມາດອ່ານໄດ້, ພວກເຮົາມີຄົນຊ່ວຍອ່ານໃຫ້ທ່ານ. ນອກຈາກນີ້, ພວກເຮົາກໍຍັງມີເອກະສານສະບັບນີ້ທີ່ຂຽນເປັນພາສາຂອງທ່ານໃຫ້ກັບທ່ານ ອີກດ້ວຍ. ເພື່ອຂໍ ຄວາມຊ່ວຍເຫຼືອໂດຍບໍ່ເສຍຄ່າ, ກະລຸນາໂທ 1-800-322-6384 (TTY: 711). (Lao)

Meih haih doqc naaiv deix sou nyei fai? Se gorngv mv haih nor yie mbuo maaih mienh tengx doqc bun meih muangx. Meih corc se haih dorh ming faan benx meih nyei mienh waac njiec benx sou-nzangc bun meih siou. Liouh tov longc heuc baeqc tengx nor oix zuqc korh waac mingh taux 1-800-322-6384 (TTY: 711). (Mien)

INTRODUCTION	
HOW TO CONTACT US	
LANGUAGE ASSISTANCE	
DENTI-CAL WEBSITE	
MEDI-CAL DENTAL ELIGIBILITY AND ID CARD	
DENTI-CAL BENEFITS	
DENTI-CAL DENTISTS	10
GETTING DENTAL CARE	11
COST OF DENTAL SERVICES	14
TRANSPORTATION AND OTHER SERVICES	17
COMPLAINT PROCESS	18
STATE HEARING PROCESS	20
STOP FRAUD AND ABUSE	21
DENTAL TERMS AND OTHER DEFINITIONS	22
YOUR RIGHTS AND RESPONSIBILITIES	25
YOUR PRIVACY IS IMPORTANT TO US	

### Introduction

This booklet has been written for you. It is designed to inform you about your dental benefits. We want you to know how the program works and how you can obtain dental care. Keep this handbook so you can review it again if you have questions in the future.

### California Medi-Cal Dental Program (Denti-Cal)

Medi-Cal offers free or low-cost health care for eligible California residents. Dental benefits are provided through the Medi-Cal dental program also known as Denti-Cal. Dental health is an important part of overall health. The Denti-Cal program covers many services to keep your teeth healthy. You can get the most from your Denti-Cal benefits when you:

- See a Denti-Cal dentist to get covered services that you need.
- See your Denti-Cal dentist on a regular basis, even if you don't have a problem with your teeth.
- Follow your Denti-Cal dentist's advice about dental care (such as brushing and flossing).

If you live in Sacramento County you will need to enroll in Dental Managed Care (DMC) and will see a dentist through a dental managed care plan. If you live in Los Angeles County you can choose to remain in Denti-Cal or enroll in DMC. If you enroll in DMC, the plan you chose will send you information about your benefits.

#### How to Use This Handbook

Please read this Beneficiary Handbook completely and carefully. It explains how the Denti-Cal program works. This handbook contains important information about:

- Dental services covered by Medi-Cal
- How to get dental care
- How to get help in other languages
- Your rights and responsibilities
- How to make a complaint
- Other important information about dental services under Medi-Cal

This handbook uses some terms you should know:

Denti-Cal	Medi-Cal dental fee-for-service program	
Van Van My I Panafisian	The person eligible for Medi-Cal dental benefits or	
You, Your, My, I, Beneficiary	their authorized representative.	
We, us, our	Refers to Denti-Cal	
Your dentist	The Denti-Cal dentist you choose for your dental care	

Please read the "**Dental Terms and Other Definitions**" section. It explains many words that have special or technical meanings under the Denti-Cal program.

### **How to Contact Us**

### **Telephone Service Center**

Telephone Service Center (TSC) operators are there to help you Monday through Friday between 8:00 a.m. and 5:00 p.m. The TSC is closed for State holidays. If you have any questions that are not answered within this booklet, please call us at:

Denti-Cal Telephone Service Center: 1-800-322-6384

Teletext Typewriter (TTY): **1-800-735-2922** 

The call is free. TSC staff can answer any questions you have about going to the dentist. They can help you with:

- Finding a Denti-Cal dentist or clinic
- General Denti-Cal program questions
- Information about approved or denied services
- Availability of interpretive services
- Information about share of cost and copayments for covered dental benefits. Scheduling and rescheduling a clinical screening appointment
- Complaints and appeals

# What information can I get from the Denti-Cal automated telephone system?

When you call the TSC, you will be connected with the automated telephone system. You will select from a menu of options.

You can get general information on:

- Covered benefits
- How to file for a State Hearing
- Request copies of your dental records
- Reporting suspected Medi-Cal Fraud

You can also talk to TSC staff.

### What is the best time to call the Denti-Cal Telephone Service Center?

The best time to call the Denti-Cal TSC is any time between 8:00 a.m. and 5:00 p.m. Monday through Friday.

### Language Assistance

### What if I want to speak in a language other than English?

If you prefer to speak in a language other than English, call the TSC. Our TSC staff can help you in English and Spanish. If you speak a different language, we have interpreters we can call to help.

TSC staff can help you find a Denti-Cal dentist who speaks your language or who has office staff that speak your language.

# Can someone interpret for me when I talk to the dentist on the phone?

Yes. If you need an interpreter or help with language services, call the TSC. They can help you with an interpreter.

### Can someone interpret for me at the dentist's office?

Yes. If you cannot find a dentist that speaks your language you have the right to an interpreter at no charge.

You may ask for an interpreter to help explain dental terms. This includes what the dentist tells you at your visit and explanations of your plan of care or to talk to dental staff. Call your county social services office for help with interpretive services for your dental visit. You can find their phone number in your local telephone book. You can also check your county's website or use the Medi-Cal mobile app available at: <a href="https://mobilegallery.ca.gov/">https://mobilegallery.ca.gov/</a>.

### **Denti-Cal Website**

#### How do I find the Denti-Cal website?

You can locate the Denti-Cal website at: www.denti-cal.ca.gov

#### What information is on the Denti-Cal website?

The Denti-Cal website has a variety of important information about the Medi-Cal Dental Program including:

- Medi-Cal eligibility
- Beneficiary services
- Beneficiary dental resources
- Help in locating a Medi-Cal dentist
- How to avoid inappropriate care or fraudulent dentists
- How to get help with dental care problems
- Notice of Privacy Practice
- Health Insurance Portability and Accountability Act

You will also find answers to commonly asked questions and toll-free telephone numbers for the TSC.

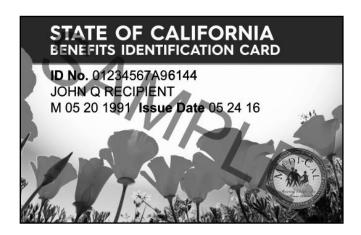
### **Dental Enrollment and ID Card**

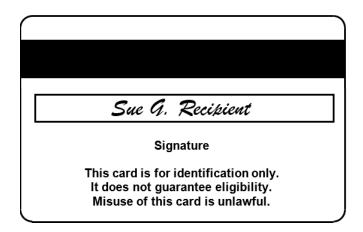
#### How do I find out if I'm enrolled in Denti-Cal?

Most people who become eligible for Medi-Cal are also eligible to get dental services. If you have any questions or you want to find out if you are eligible for Medi-Cal dental program benefits, call the TSC.

### What information is on my ID card?

Most Medi-Cal Benefits Identification Cards (BIC) show your ID number, name, gender, date of birth and card issue date.





When you get your card, sign your name on the back of the card. If you cannot sign your name on your Medi-Cal ID card, you are required to mark an "X" in place of a signature.

**NOTE:** You do not have to sign your Medi-Cal ID card if you are:

- Receiving emergency services;
- Seventeen (17) years old or less;
- Living in a long-term care facility or
- Not able to sign your name or mark an "X" in place of a signature.

### Are there different types of Medi-Cal Identification cards?

Some people may have a Medi-Cal ID card that looks different. This could be because they are enrolled in special programs or they have a temporary ID card. This card is a form of identification and you need to show the card at your dental appointment.

### How do I use my card?

Do not share your card with another person. You are the only person who can use your ID card for Medi-Cal services.

Show your ID card to your dentist whenever you receive dental care. If your dentist does not know you, he or she is required to make a good faith effort to verify your identity. Your dentist will match the name and signature on your Medi-Cal ID card with another form of identification such as:

- Beneficiary's Social Security Number (SSN);
- A valid California driver's license;
- Any identification card issued by the Department of Motor Vehicles (DMV);
- Any other document which appears to prove your identity.

### How do I replace my card if it gets lost?

If you lose your BIC card, contact your local county social services office. You can find the telephone number in your local telephone book, your county's website or through the Medi-Cal mobile app.

## **Denti-Cal Benefits**

This section provides an overview of the dental care that is covered by Medi-Cal. A more complete listing of services can be found near the back of this handbook.

#### What are the covered dental services under Medi-Cal?

Medi-Cal covers a variety of dental services such as:

- Examinations and x-rays (diagnostic services)
- Teeth cleanings (preventive services)
- Tooth extractions
- Root canal treatments
- Prosthetic appliances (such as dentures)
- Orthodontics (braces) for children who qualify
- Emergency services for pain control

### What are the dental services for children?

Most children ages 0 to 20 years have full scope Medi-Cal benefits and are eligible for dental services.

✓ Benefit 

X Not a benefit

Beneficiaries under the age of 21 (Child)					
Procedure	Full Scope	Pregnant and 60 days postpartum	Limited Scope	Regional Center Consumers	Residing in a Facility (SNF/ICF)
Oral Evaluation (Under age 3)	<b>/</b>	×	×	<b>✓</b>	<b>✓</b>
Initial Exam (Age 3-20)	<b>/</b>	<b>/</b>	×	<b>✓</b>	<b>✓</b>
Periodic Exam (Age 3-20)	<b>/</b>	<b>/</b>	×	<b>✓</b>	<b>✓</b>
Prophylaxis	/	<b>/</b>	×	<b>/</b>	<b>/</b>
Fluoride	/	<b>/</b>	×	<b>/</b>	<b>/</b>
Restorative Services - Amalgams Composites Pre-fabricated Crowns	/	<b>~</b>	×	<b>✓</b>	<b>&gt;</b>
Laboratory Processed Crowns*	/	<b>/</b>	×	<b>/</b>	<
Scaling and Root Planing**	<b>/</b>	<b>✓</b>	×	<b>/</b>	<b>✓</b>
Periodontal Maintenance	×	×	×	×	<b>✓</b>
Anterior Root Canals	<b>/</b>	<b>/</b>	X	<b>/</b>	<b>/</b>
Posterior Root Canals	<b>/</b>	/	X	/	<b>✓</b>
Partial Dentures	<b>/</b>	1	X	<b>/</b>	<b>✓</b>
Full Dentures	<b>/</b>	/	X	<b>/</b>	<b>/</b>
Extractions	<b>/</b>	1	<b>/</b>	<b>/</b>	<b>/</b>
Emergency Services	/	<b>/</b>	<b>/</b>	/	<b>✓</b>

### **Exceptions:**

<sup>\*</sup> Not a benefit under age 13

<sup>\*\*</sup> Not a benefit under age 13. Allowable under special circumstances.

Your dentist can help you decide the best treatment, and what services you can have under the Medi-Cal program. During your first visit, show your BIC to your dentist so they can access your dental benefits.

## Are there limits to how much Medi-Cal will pay in a year? Is it different for children and adults?

Medi-Cal payment for certain dental services for beneficiaries 21 years of age or older is limited to \$1,800 per person for each calendar year. Dental services may go over the \$1,800 limit if shown to be medically necessary.

There is no yearly limit for children's covered dental services.

### Are there additional benefits for patients with special needs?

Special needs patients may have a physical, behavioral, developmental, or emotional condition that limits the dentist's ability to perform an exam. In these cases, the dentist may decide the patient must be sedated in order to get dental treatment.

### What benefits are available for pregnant women?

If you are pregnant, regardless of age and/or scope of benefits you are able to receive all covered dental procedures so long as all other requirements are met for that procedure. Pregnant beneficiaries will be eligible to receive these services for 60 days after the birth of the baby (postpartum). Eligibility continues through the end of the month in which the 60th day falls.

#### What benefits are now available for adults?

Dental benefits for adults currently include:

- Exams and x-rays
- Regular Cleanings (Prophylaxis)
- Fluoride treatments
- Fillings
- Root canals in front teeth
- Prefabricated crowns (stainless steel or tooth colored)
- Full dentures
- Denture relines
- Other medically necessary dental services





Not a benefit

Beneficiaries age 21 and older (Adult)					
	Full Scope	Pregnant and 60 days postpartum	Non- Pregnant Limited Scope	Regional Center Consumers	Residing in a Facility (SNF/ICF)
Initial Exam	/	<b>/</b>	×	<b>/</b>	<b>/</b>
Periodic Exam	1	<b>/</b>	×	<b>/</b>	<b>/</b>
Prophylaxis	1	<b>/</b>	×	<b>/</b>	<b>/</b>
Fluoride	/	<b>/</b>	×	<b>/</b>	<b>/</b>
Restorative Services - Amalgams Composites Pre-fabricated Crowns	<b>/</b>	~	×	~	~
Laboratory Processed Crowns*	×	<b>✓</b>	×	<b>✓</b>	<b>✓</b>
Scaling and Root Planing	×	<b>✓</b>	×	~	<b>/</b>
Periodontal Maintenance	×	×	×	×	<b>/</b>
Anterior Root Canals	/	<b>/</b>	×	<b>/</b>	<b>/</b>
Posterior Root Canals	×	<b>/</b>	×	<b>/</b>	<b>/</b>
Partial Dentures	X	<b>/</b>	×	<b>/</b>	<b>/</b>
Full Dentures	1	<b>/</b>	×	<b>/</b>	<b>/</b>
Extractions	<b>/</b>	<b>/</b>	<b>/</b>	<b>/</b>	<b>/</b>
Emergency Services	1	<b>/</b>	<b>/</b>	<b>/</b>	<b>/</b>

### **Exceptions:**

\*Allowable under special circumstances for posterior teeth

 A benefit only for the treatment of back teeth supporting an existing removable partial denture with cast clasps and rest.

OR

 When the treatment plan includes a supporting crown and removable partial denture (D5213 or D5214). Both shall be submitted on the same treatment request for prior authorization.

### Are there additional benefits for patients with special needs?

Special needs patients may have a condition that limits the dentist's ability to do an exam. In these cases, the dentist may decide the patient must be sedated to get their dental work done.

### **Denti-Cal Dentists**

You can get dental care from any Denti-Cal dentist (a dentist who is enrolled in Medi-Cal to provide dental services). Please read this section so you will know how to find a dentist in the Denti-Cal program.

#### How do I find a Denti-Cal Dentist?

You can choose any Denti-Cal dentist. For help finding Denti-Cal dentists in your area, call the TSC.

You can also look for a Denti-Cal dentist online by visiting the Denti-Cal website at <a href="http://www.denti-cal.ca.gov">http://www.denti-cal.ca.gov</a>. Click on the "Find a Medi-Cal Dentist" link on the left side of the screen.

#### What if I need to see a specialist?

Your Denti-Cal dentist may refer you to another dentist for specialized treatment. Call the TSC for help setting up your visit with the specialist.

### Can I go to a clinic for my dental services?

Yes. There are many clinics that see Medi-Cal patients and provide dental services. You can get your dental work done in a clinic as long as the clinic is approved to accept Medi-Cal and provides dental services as part of their covered services.

### What if I go to a dentist who is not a Denti-Cal dentist?

The Medi-Cal program will only pay for services you get from an enrolled dentist. If you go to a dentist who is not enrolled in Medi-Cal, you will have to pay for any dental services you get.

### Can I change dentists?

Yes. You can visit any dentist who is enrolled in Medi-Cal and is accepting new patients.

### How many times can I change my dentist?

There are no limits on changing dentists. However, there are limits on getting the same treatment from different dentists (for example, a cleaning).

### How does visiting the same dentist help me?

We suggest you select a dental home with a Denti-Cal dentist. This can be a general dentist or pediatric dentist for children. Seeing the same dentist for your regular check-ups and treatment can benefit you in many ways:

- You can get regular reminders for your next visit.
- Your dentist can help you find a dental specialist if you need treatment your regular dentist can't provide.
- Your dentist gets to know your health history and can help spot problems so you can get treatment early.

### Can I change dentists in the middle of treatment?

If services were prior authorized to one dentist and you wish to change your dentist, you must write a letter to request the change. Give the letter to your new dentist to send to Denti-Cal with his/her request for prior authorization. Denti-Cal will issue a new authorization to your new dentist for any remaining services.

## **Getting Dental Care**

### How do I schedule an appointment with a Denti-Cal dentist?

Call the dentist's office to schedule an appointment. Tell the dentist you are covered by Medi-Cal and ask the dentist to confirm that he or she is a Medi-Cal dentist. If you need help making an appointment, call the TSC.

### What do I need to bring when I go to the dentist?

Bring your BIC and a photo ID such as a driver's license or State ID card. In cases such as foster children, if foster parents have not received a BIC, a Social Security Number can be used to verify eligibility. If you have other dental coverage, bring that information to show your dentist.

### How often should I go to the dentist?

Healthy teeth and gums are an important part of overall health. Your dentist will tell you how often you should get regular checkups - usually every 6 to 12 months. As part of your regular checkup, your dentist will make a plan for any treatment or follow-up visits you may need.

If you have unexpected dental problems or issues in between your regularly scheduled visits, call your dental office for help. Call your dentist immediately if you have a mouth injury or are in pain.

### When should my baby go to the dentist?

Your baby should visit the dentist by the time their first tooth appears or their first birthday, whichever comes first. After their first visit, your child should have a dental checkup every six months, including an exam and cleaning.

Medi-Cal supports the American Association of Pediatric Dentists' recommended schedule for preventive dental services, which should be provided to most children. Children with special health care needs or disease or trauma may require a different set of services and/or time frames. Your child's dentist will determine the best schedule for preventive services for your child.

### What happens if I have an emergency?

During regular business hours, call your dentist and explain your issue. If you are unable to reach your dentist, call the TSC for help in getting dental care.

If you need emergency dental services <u>after business hours</u>, you should follow the instructions on your dentist's after-hours answering message. Go to the nearest emergency room to get care if you are not able to reach your dental office or you do not have a Medi-Cal dentist.

### What if I want to get a second opinion?

If you want a second opinion on your dental treatment, contact the TSC and ask for help to find a different dentist.

## Why is Denti-Cal asking me to go for a dental examination with another dentist?

You may receive a "Notice of Dental Examination Appointment" letter from Denti-Cal telling you to go to a dental examination appointment. Please make every attempt to do so. The appointment has been made on your behalf to verify if the treatment your dentist requested can be approved for authorization.

The appointment will last approximately 15 minutes. No dental work will be provided by the screening dentist. You are not required to pay any money for the appointment. Once the appointment is over the dentist will mail a report back to Denti-Cal. The report will be used as a tool to determine if the services should be allowed or denied.

If you are unable to attend, please call the TSC at least 48 hours before the appointment. If you do not attend the appointment and do not notify Denti-Cal, the requested services may be denied.

Here are some important tips to keep in mind:

- Be on time for your appointment. Your appointment may have to be rescheduled if you arrive late.
- If your appointment is in regards to dentures, and your dentist has requested new dentures, bring the dentures that you are currently wearing to the appointment.
- If you call the TSC, refer to the "Screening #" located on the bottom right hand corner of the letter when calling
- The phone number to the office is included on the letter for directions only.
   Call the Denti-Cal TSC with any other questions.
- The screening dentist will not be able to discuss whether or not the services will be approved or denied or his/her recommendation.

### What does "medical necessity" mean?

Medical necessity refers to the criteria used to decide if covered services are necessary and appropriate for the treatment of the teeth, gums, and supporting structures according to professionally recognized standards of practice.

### What if I need to cancel a dentist appointment?

If you cannot keep an appointment, call the dentist's office at least 24 hours in advance to cancel or as soon as possible. The dentist office can help you reschedule your appointment.

### What if I need dental services when I am out of California or country?

There are Medi-Cal dentists in some areas within the states along the California border. You can get covered dental services from any Medi-Cal dentist in these border areas. Prior authorization is required for all other out-of-state services other than emergencies.

Dental services performed outside the country are not covered by Medi-Cal, except for emergency services requiring you to be hospitalized in Canada or Mexico.

### **Cost of Dental Services**

### Do I have to pay anything for my dental care?

After your dentist confirms you are eligible for Medi-Cal dental services, the dentist can only ask you to pay any copayment or Share of Cost amount you may owe for covered services.

There are some other circumstances where your dentist may charge you for services. Some examples would be:

- You choose to have treatment that is not covered by the Medi-Cal program.
- You are age 21 or older, and want comprehensive orthodontic treatment (braces)

### What is a Copayment?

Some Medi-Cal services have a small copayment. The dentist will collect any copayment at your appointment. See the next page for a table of copayment criteria.

Medi-Cal Copayment Criteria				
Services Subject to Copayment	Copay Fee	Exceptions to Fee		
Non-Emergency Services Provided in	\$5.00	1. Persons aged 18 or under.		
An Emergency Room: A non-emergency service is defined as "any service not required for relief of severe pain or the immediate diagnosis and treatment of severe medical conditions which, if not immediately diagnosed and treated, would lead to disability or death." Such services provided in an emergency room are subject to copayment.		<ol> <li>Any woman receiving care during pregnancy and one month following delivery.</li> </ol>		
		<ol> <li>Persons who are in a health facility (hospital, skilled nursing facility, intermediate care facility).</li> </ol>		
		4. Any child in AFDC-foster care.		
		5. Any service for which the program's payment is \$10 or less.		
Outpatient Services:		1. Persons aged 18 or under.		
Physician, optometric, chiropractic, psychology, speech therapy, audiology, acupuncture, occupational therapy, pediatric, surgical center, hospital or clinic outpatient, physical therapy and dental.	\$1.00	Any woman receiving care during pregnancy and one month following delivery.		
		<ol> <li>Persons who are in a health facility (hospital, skilled nursing facility, intermediate care facility).</li> </ol>		
		4. Any child in AFDC-foster care		
		5. Any service for which the program's payment is \$10 or less.		
Drug Prescriptions:	\$1.00	All listed above, plus person aged 65		
Each drug prescription or refill.		or older.		

## What if I can't pay the copayment when I go to my appointment?

A Medi-Cal dentist cannot refuse to treat you if you cannot make the copayment at your appointment. However, you will still be responsible for any copayment owed.

#### What is a Share of Cost and how do I find out if I have one?

A Share of Cost (SOC) amount is the share of health care expenses that a beneficiary must pay before any Medi-Cal payments can be made for that month. If you want to find out if you have a SOC, your SOC amount, or any other questions about Share of Cost, contact your county social services office. You can find the phone number listed in your local telephone book, your county's website or through the Medi-Cal mobile app.

#### What do I do if I paid for a service that I didn't have to pay for?

Call the TSC for help with your specific situation. If you were charged or paid for a dental procedure, which is a benefit of the Medi-Cal Program based on your aid code, we can help you get a refund.

### What if I get a bill from the dentist?

First, you should call you dental office and ask them why they sent you the bill. The dental office will explain the charges and why they are asking you to pay. For example, if you have a SOC amount, you will need to pay that amount before the dentist can ask Denti-Cal to pay for the treatment. Or, if you get treatment that is not covered by Medi-Cal or other insurance, you will have to pay the dentist for that treatment.

If you still have questions about what your dentist is charging you and/or what Medi-Cal pays for, call the TSC.

### What happens if I have other dental insurance?

Your dentist must bill your other dental insurance before asking Medi-Cal to pay for any treatment. The Medi-Cal program does not pay any benefits you can get through other dental insurance including other government programs, TRICARE (CHAMPUS) or Workers' Compensation. Coverage provided under Medi-Cal is secondary to all other coverage.

If you have other dental insurance that does not pay for a service that is covered by Medi-Cal, or pays less than the amount paid by Medi-Cal, your dentist will send a claim to Medi-Cal for any unpaid amount. Your dentist cannot ask you to pay for any treatment that is covered by Medi-Cal.

## **Transportation and Other Services**

### If I do not have a ride, how can I get to the dentist's office?

Medi-Cal provides non-emergency transportation services to eligible beneficiaries if your doctor or dentist proves medical necessity through prior authorization. Beneficiaries can request transportation from their homes to their dental and medical visits. For transportation assistance, call the TSC. The transportation must be used only for necessary health care covered by the Medi-Cal program. Call your county social services office for help if you need a ride to your appointment and you don't qualify for medically necessary non-emergency transportation services.

### What if I need help making an appointment to see a dentist?

Call the TSC if you need help making an appointment with a dentist. A TSC operator will help you set up an appointment by locating and contacting a dentist that accepts patients before they connect you to the dental office.

### What if I'm hearing-impaired or speech-impaired?

If you have limitations hearing or speaking, call us Monday through Friday, from 8:00 a.m. and 5:00 p.m. through our TTY line at 1-800-735-2922. At all other times, please call the California Relay Service TDD/TTY at 711 to get the help you need. When requesting assistance, please have the following information available:

- Date of dental appointment
- Start and end time of appointment
- Appointment Type (for example: "Dental Appointment, Surgical Appointment, Consultation, etc.")
- Name of person needing American Sign Language (ASL) services
- Beneficiary ID
- Office location Address
- Office Contact Person Name
- Office Phone Number
- ASL translation services are provided by law.

### What if I am vision impaired?

This handbook and other important materials will be made available in large print, enlarged computer disk (CD) formats, and audiotape for the vision impaired. For alternative formats, or for direct help in reading this handbook or other Denti-Cal materials, please call the TSC.

# What if I have a medical condition or other problem that makes it hard for me to get dental care?

Call the TSC. TSC staff can help you find a dentist who can treat you. They can also help coordinate your care with your medical provider, if needed.

## What if I have a physical limitation that makes it hard for me to go see a dentist?

Every effort is made to ensure that the offices and facilities of Denti-Cal dentists are physically accessible to the disabled. If you are not able to locate an accessible dentist, please call the TSC and we will help you.

### **Complaint Process**

Denti-Cal has procedures to resolve dentist and beneficiary complaints about:

- Dental services
- Quality of care
- Modification or denial of a treatment authorization request
- Other aspects of services provided under the Denti-Cal Program.

Examples of when a complaint can be filed:

- You can't get a service, treatment, or medicine you need.
- A service is denied as not medically necessary.
- You have to wait too long for an appointment.
- You received poor care or were treated rudely.
- Your dental office keeps sending you a bill you believe you should not have to pay.

# What should I do if I have a complaint? / How do I file a formal complaint?

Before filing a complaint, talk to your dentist. Often, the dentist can quickly resolve your complaint. If the dentist is unable to resolve your complaint, call the TSC. Give them your name and the name of the dentist involved. Describe your problem including the services involved and any action or inaction.

You can also request a Beneficiary Medi-Cal Dental Program Complaint Form and we will mail the form to you. Complete and return the form to Denti-Cal at the address printed on the form.

## What can I do if Denti-Cal denies or limits a service my dentist has asked for?

If you are denied services that your dentist has requested approval for, contact your dentist and ask if the dentist can request a re-evaluation.

#### How will I find out if Denti-Cal has denied a service?

Denti-Cal will send you a written notice when services requested by your dentist have been denied or modified. The notice explains why the requested service was denied or modified. The notice also provides information about what you can do if you disagree with the action.

### What happens after I file a complaint?

When you call the TSC, they will make every effort to resolve the problem during the telephone call. They may refer you back to the dentist to fix the problem, or send you a Complaint Form to complete.

Within 5 calendar days of receiving your written complaint, Denti-Cal will let you know it has been received. The written complaint may be referred to a Denti-Cal dental consultant, who will determine the next course of action. We may:

- Contact you and/or the dentist
- Refer you for a clinical screening examination
- Send a referral to the appropriate peer review body

Denti-Cal will send you a letter summarizing the findings and reasons for the decision within 30 days of our receipt of the complaint. The 30-day time frame can be extended in some circumstances. For example, you may need additional time to attend your clinical screening appointment.

# If I don't like what happens when I file a complaint, is there anything else I can do?

If you are not satisfied with the decision of the complaint review process, you may ask for a **State Hearing**. You may also ask the Department of Managed Health Care for help.

### **State Hearing Process**

### Can I ask for a State Hearing?

If you are not happy with the resolution of your complaint, you may request a State Hearing through the California Department of Social Services (CDSS). Your local county social services office can assist you with this request. You can find the phone number listed in your local telephone book, your county's website, or using the <a href="Medi-Cal mobile app">Medi-Cal mobile app</a>.

If a dental care service you or your dentist requested has not been allowed, you have the right to use the Medi-Cal State Hearing process regardless of whether or not a complaint has been submitted or if the complaint has been resolved.

You can represent yourself at the State Hearing, or be represented by a friend, lawyer, or any other person. You are responsible for making the arrangements if you want someone else to represent you. To get free legal assistance, call the Public Inquiry and Response Unit of CDSS at the toll-free number listed below. This unit can also help with general information about the State Hearing process.

Requesting a hearing will not affect your eligibility for dental services and you will not be penalized for asking for a hearing. We will maintain confidentiality during the entire complaint process.

### What is the time frame for asking for a State Hearing?

A Denti-Cal notice is mailed to you if your dentist's treatment request has been modified or denied. You can request a State Hearing up to 90 days after the date on this notice.

### How do I start the process?

You can start the process by calling toll-free (800) 952-5253. You may also write to:

California Department of Social Services State Hearings Division P.O. Box 944243 MS 19-37 Sacramento, CA 94244-2430

Be sure to include the Document Control Number (DCN), located on the Denti-Cal notice, with your request. The DCN connects to the denied services and helps speed up processing of your request.

### **STOP FRAUD AND ABUSE**

#### What is fraud and abuse?

Most Medi-Cal beneficiaries are honest people who need quality dental care. However, there are a very few people who commit fraud or become involved in fraudulent schemes. The following are some types of known Medi-Cal beneficiary fraud:

Recipient Exceeds Income or Asset Requirement: Occasions where a beneficiary does not report income or assets to their county worker.

Identity Theft: Someone using another person's personal information to get Medi-Cal benefits. Sometimes the person whose identity was stolen is not aware until they begin to receive mail from the Medi-Cal program.

Most Medi-Cal dentists are honest in their billing practices and provide quality dental care to their patients. However, a relatively small number of dentists commit fraud directly or become involved in fraudulent schemes. The following are some types of known Medi-Cal dentist fraud:

**Capping:** When a person gives money or offers gifts in exchange to participate in the Medi-Cal program. It is also against the law for an individual to receive payment or gifts to participate in the Medi-Cal program.

**Balance Billing:** A dentist charging someone receiving Medi-Cal benefits for the difference between the Medi-Cal reimbursement rate and the customary charge for the service.

**Dentist Illegally Billing Medi-Cal**: Some examples of illegal billing include:

- Dentists ordering unnecessary x-rays or tests
- Dentists performing unnecessary teeth extractions on adults or children
- Dentists billing for services that were not performed

# How do I report someone I think may be misusing or cheating the Denti-Cal program?

The Department of Health Care Services asks that anyone suspecting Medi-Cal fraud, waste, or abuse to call the DHCS Medi-Cal Fraud Hotline at 1-800-822-6222. The call is free and the caller may remain anonymous.



You can also report suspected Medi-Cal fraud online by visiting this link: http://dhcs.ca.gov/fraud

## **Dental Terms and Other Definitions**

There are many words used in the Denti-Cal program that have special or technical meaning. And, some dental terms may not be familiar. We hope you find the following definitions helpful. If you have any questions, call the TSC and talk to one of our representatives.

**Appeal:** A formal request asking Denti-Cal to review denied services for treatment provided. An appeal may be filed by your dentist.

Authorization: See Prior Authorization.

**Beneficiary:** A person who is eligible for Medi-Cal benefits.

**Beneficiary Identification Card (BIC):** The identification card provided to beneficiaries by the Department of Health Care Services. The BIC includes the beneficiary number and other important information.

**Benefits:** Medically necessary dental services provided by a Denti-Cal dentist that are available through the Medi-Cal dental program.

**Clinical Screening:** An examination by a dentist to provide an opinion about the appropriateness of treatment proposed or provided by a different Denti-Cal dentist. The Denti-Cal program may require a clinical screening under certain circumstances.

**Complaint:** A verbal or written expression of dissatisfaction, including any dispute, request for reconsideration, or appeal made by a beneficiary, or a dentist on the behalf of the beneficiary. Typically a complaint is filed due to the conditions of the environment or staff in which the service was rendered.

**Copayment:** A small portion of the dentist's fee that is paid by the beneficiary.

**Covered Services:** The set of dental procedures that are benefits of the Denti-Cal program. Denti-Cal will only pay for medically necessary services provided by a Denti-Cal dentist that are benefits of the Denti-Cal program.

**Dental Specialist:** A dentist providing specialty care such as endodontics, oral surgery, pediatric dentistry, periodontics, and orthodontics (braces).

**Denti-Cal:** The Medi-Cal dental fee-for-service program.

**Denti-Cal Dentist:** A dentist who has been approved to provide covered services to Medi-Cal beneficiaries.

**Early and Periodic Screening, Diagnosis and Treatment Program (EPSDT):** A federal program that provides health care for children through periodic screenings, diagnostic and treatment services. Dental care is included in the EPSDT program.

**Eligibility:** Refers to meeting the requirements to receive Medi-Cal benefits.

**Emergency Dental Condition:** A dental condition that the absence of immediate attention could reasonably be expected to result in placing the individual's health in jeopardy, causing severe pain or impairing function.

**Endodontist:** A dental specialist who limits his or her practice to treating disease and injuries of the pulp and root of the tooth.

**Identification:** Refers to something that proves who a person is, such as a driver's license.

**Limitations:** Refers to the number of services allowed, type of service allowed, and/or the most affordable dentally appropriate service.

**Medically Necessary:** Covered services which are necessary and appropriate for the treatment of the teeth, gums, and supporting structures and that are (a) provided according to professionally recognized standards of practice; (b) determined by the treating dentist to be consistent with the dental condition; and (c) are the most appropriate type, supply and level of service considering the potential risks, benefits, and covered services which are alternatives.

**Other Health Coverage / Other Health Insurance:** Coverage for dental related services you may have under any private dental plan, any insurance program, any other State or federal dental care program, or under other contractual or legal entitlement.

**Oral Surgeon:** A dental specialist who limits his or her practice to the diagnosis and surgical treatment of diseases, injuries, deformities, defects and appearance of the mouth, jaws and face.

**Orthodontist:** A dental specialist who limits his or her practice to the prevention and treatment of problems in the way the upper and lower teeth fit together in biting or chewing.

**Pediatric Dentist:** A dental specialist who limits his or her practice to treatment of children from birth through adolescence, providing primary and a full range of preventive care treatment.

**Periodontist:** A dental specialist who limits his or her practice to treatment of diseases of the gums and tissue around the teeth.

**Prior Authorization:** A request by a dentist to approve services before they are performed. Dentists receive a Notice of Authorization (NOA) from Denti-Cal for approved services.

**Prosthodontist:** A dental specialist who limits his or her practice to the replacement of missing teeth with dentures, bridges or other substitutes.

**Provider:** An individual dentist, Registered Dental Hygienist in an Alternative Practice (RDHAP), dental group, dental school or dental clinic enrolled in the Medi-Cal program to provide health care and/or dental services to Medi-Cal beneficiaries.

**Requirements:** Refers to something that you must do, or rules you must follow.

**Responsibility:** Refers to something that you should do, or are expected to do.

**Share of Cost:** The share of health expenses that a beneficiary must pay or promise to pay before any Medi-Cal payments can be made for that month.

**State Hearing:** A State Hearing is a legal process that allows beneficiaries to request a reevaluation of any denied or modified Treatment Authorization Request (TAR). It also allows a beneficiary or dentist to request a reevaluation of a reimbursement case.

**Treatment Authorization Request (TAR):** A request submitted by a Denti-Cal dentist for approval of certain covered services before treatment can begin. A TAR is required for certain services and under special circumstances.

## Your Rights and Responsibilities

### What are some of my rights under the Medi-Cal program?

You have the right to:

- Be treated with respect and dignity.
- Get dental services you are eligible to receive as a benefit of the Medi-Cal program by an enrolled dentist of your choice.
- Get appointments within a reasonable amount of time.
- Participate in talks and decisions about your dental care needs, including appropriate or medically necessary treatment options.
- Have your dental records kept confidential. This means that we will not share your dental care information without your written permission or unless it is allowed by law.
- Tell us concerns about Denti-Cal, or about dental services you received.
- Get information about Denti-Cal, available services and dentists.
- Make recommendations about your rights and responsibilities.
- See your dental records.
- Request an interpreter at no charge to you.
- Use interpreters who are not your family or friends.
- File a complaint if your language needs are not met.

### What are some of my responsibilities under the Denti-Cal program?

Your responsibilities are to:

- Give your dentists and Medi-Cal correct information.
- Understand your dental problem(s) and participate in developing treatment goals, as much as possible, with your dentist.
- Always show your Beneficiary Identification Card when getting services.
- Ask questions about any dental condition and make certain that the explanations and instructions are clear to you.
- Make and keep dental appointments. You should inform your dentist at least twenty-four (24) hours in advance if you must cancel an appointment.

- Help Denti-Cal maintain accurate and current medical records by providing timely information about changes in address, family status and other health care coverage.
- Notify Denti-Cal as soon as possible if a dentist bills you incorrectly or if you have a complaint.
- Treat all Denti-Cal staff and dentists respectfully and with courtesy.

## Your Privacy is Important to Us

This section describes how to receive information about how medical information may be used and disclosed. It also describes how you can get access to your information.

### **Notice of Privacy Practices**

The Department of Health Care Services mails you a Notice of Privacy Practices as part of your Medi-Cal welcome packet. You can also access a copy online by visiting <a href="http://dhcs.ca.gov/privacyoffice">http://dhcs.ca.gov/privacyoffice</a>. This notice describes your privacy rights and choices about your health information.

## How can I see what protected health information Denti-Cal has about me?

You have the right to request to see your protected health information in records which Denti-Cal maintains. You also have the right to request copies of those records. <u>You may be charged for the cost of copying records and postage for mailing</u>. You will receive a response within 30 days after we receive your request.

You will need to send us a photocopy of your California driver's license, DMV Identification Card, or any other identification which appears to prove your identity. You will also need to send documentation verifying your address.

You can get the request form by calling the TSC or go online to fill out and print the form:

- 1. Go to <a href="http://www.denti-cal.ca.gov">http://www.denti-cal.ca.gov</a>.
- 2. Go to the **Beneficiaries** tab at the top of the webpage.
- 3. Select Form to Request Protected Health Information.

Mail the completed form along with your identification to:

Correspondence Specialist c/o Delta Dental of California P.O. Box 15539 Sacramento, CA 95852-1539 800-322-6384

Note: any attempt to falsely gain access to protected health information is subject to legal penalties.

Denti-Cal is committed to protecting the information you provide us. To prevent unauthorized access or disclosure, to maintain data accuracy, and to ensure the appropriate use of the information, Denti-Cal has in place appropriate physical and managerial procedures to safeguard the information we collect.