



NOTICE OF GENERAL PUBLIC INTEREST

RELEASE DATE: DECEMBER 18, 2025

ADDENDUM TO PUBLIC NOTICE FOR PROPOSED STATE PLAN AMENDMENT (SPA) 26-0001 TO THE MEDI-CAL DENTAL PROGRAM CURRENT DENTAL TERMINOLOGY CODE SET POLICIES

This is an addendum to the SPA 26-0001 Public Notice, published December 9, 2025. The following updates have been made to the original Public Notice. The description for CDT Code D5909 is updated to 'Maxillary guidance prosthesis with guide flange.' The description for CDT Code D5930 is updated to: Maxillary guidance prosthesis without guide flange.'

CDT Codes	SMA	Supplemental Payment (Proposition 56)	Total Amount
D5909 – Maxillary guidance prosthesis with guide flange	\$1700.00	\$680.00	\$2380.00
D5930 – Maxillary guidance prosthesis without guide flange	\$1400.00	\$560.00	\$1960.00

The effective date of the proposed SPA 26-0001 will be changed to May 1, 2026. No other terms or conditions listed in the original public notice have changed.

All proposed SPAs are subject to approval by the Centers for Medicare and Medicaid Services (CMS).



STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
STATE: CALIFORNIA

Payment for Dental Services

The State-developed fee schedule rates are the same for both public and private providers of dental services. Dental services are paid based on procedure codes. The agency's dental fee schedule and rate updates are published under Section 5 of the Medi-Cal Dental Program Provider Handbook, Manual of Criteria and Schedule of Maximum Allowances, which was updated on May 1, 2026, and are effective for services on or after that date. The Medi-Cal Dental Program Provider Handbook is published at:

https://www.dental.dhcs.ca.gov/Dental_Providers/Medi-Cal_Dental/Provider_Handbook

TN No: 26-0001

Approval Date: _____

Effective Date: May 1, 2026

Supersedes

TN No: 24-0016

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
STATE: CALIFORNIA

Continuation of Proposition 56 Supplemental Payments for Certain Dental Services

The Medi-Cal Dental Program provides supplemental payments for certain dental services in the following dental categories: visits and diagnostics, preventive, restorative, endodontic, periodontic, prosthetic, oral and maxillofacial surgery, orthodontic, and adjunctive services.

These supplemental payment rates for the existing categories stated above will be between 20-60 percent of the Dental Schedule of Maximum Allowances (SMA), unless a proposed change to the procedure code is identified in the table referenced below.

For the previously identified top 26 utilized dental services, including general anesthesia, periodontal and orthodontia, the supplemental payments will continue to either reflect a specific dollar increase per the identified code or will be a percentage increase above the existing Medi-Cal SMA rate.

The table reflecting the rates in effect on July 1, 2019, March 14, 2020, October 1, 2021, January 1, 2022, March 1, 2023, April 1, 2023, and May 1, 2026, for the procedure codes that are eligible for the dental supplement payments can be found at this website: <https://www.dhcs.ca.gov/services/Documents/MDSD/Prop%2056/Prop-56-Dental-FY19-Codes.pdf>

The supplemental payment for services in these categories will be reimbursed to providers who have the ability to bill for these services through the Dental Fiscal Intermediary. The SMA and supplemental payments will be issued together on a claim line basis. The supplemental payments will be issued for the specified codes for dates of service effective on July 1, 2019, March 14, 2020, October 1, 2021, January 1, 2022, March 1, 2023, April 1, 2023, and May 1, 2026.

For reference, the SMA is published in the Provider Services Handbook, Section 5. The SMA website link can be found here:

https://www.dental.dhcs.ca.gov/Providers/Medi_Cal_Dental/Provider_Publications/MocSmaVersions

For reference, the SMA is published in the Provider Services Handbook, Section 5, pages 5-106 through 5-126. This supplemental program makes no change to the underlying fee schedule rates.

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Supersedes

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