

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

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**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 was last updated 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 and can be found at this website:

[https://www.dhcs.ca.gov/services/Documents/MDSD/Prop\\_56/Prop-56-Dental-FY19-Codes.pdf](https://www.dhcs.ca.gov/services/Documents/MDSD/Prop_56/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 and after 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](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.

TN No: 26-0001

Supersedes

TN No: 23-0001

Approval Date: May 15, 2026 Effective Date: May 1, 2026

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.

TN 20-0015  
Supersedes  
TN None

Approval Date: June 11,2020      Effective Date: March 14, 2020