

**DEPARTMENT OF HEALTH CARE SERVICES  
NOTICE OF GENERAL PUBLIC INTEREST  
RELEASE DATE: FEBRUARY 14, 2020**

**PROPOSED STATE PLAN AMENDMENT TO THE MEDI-CAL DENTAL PROGRAM,  
CURRENT DENTAL TERMINOLOGY CODE SET POLICIES**

This notice provides information of public interest regarding the Department of Health Care Services' (DHCS') proposed State Plan Amendment (SPA) #20-0014, which would have an effective date of March 14, 2020. SPA #20-0014 will update DHCS' dental fee schedule and associated rates as published in the Medi-Cal Dental Program Provider Handbook, Manual of Criteria and Schedule of Maximum Allowances, Section 5. The proposed SPA will implement Current Dental Terminology (CDT) dental code sets from CDT-14 through CDT-19 in several releases between March and May 2020. These CDT code sets will replace the current CDT-13 code set. The CDT-13 code set is outdated and does not reflect current federal code standards and dental standards as defined by the American Dental Association. The CDT-19 code set will align Medi-Cal's dental billing code set with the current dental industry and federal code standards. All proposed SPAs are subject to approval by the Federal Centers for Medicare and Medicaid Services (CMS).

For dates of service (DOS) on and after March 14, 2020, the following CDT procedure codes and schedule of maximum allowances (SMA) will be in effect:

- D1516 space maintainer – fixed – bilateral, maxillary (no change)
- D1517 space maintainer – fixed – bilateral, mandibular (no change)
- D1526 space maintainer – removable – bilateral, maxillary (no change)
- D1527 space maintainer – removable – bilateral, mandibular (no change)
- D1999 unspecified preventive procedure, by report (SMA changed from “by report” to \$46)
- D2941 interim therapeutic restoration – primary dentition (new benefit, SMA \$45)
- D3427 periradicular surgery without apicoectomy (no change)
- D5511 repair broken complete denture base, mandibular (no change)
- D5512 repair broken complete denture base, maxillary (no change)
- D5611 repair resin partial denture base, mandibular (no change)
- D5612 repair resin partial denture base, maxillary (no change)
- D5621 repair cast partial framework, mandibular (no change)
- D5622 repair cast partial framework, maxillary (no change)
- D5863 overdenture – complete maxillary (no change)
- D5865 overdenture – complete mandibular (no change)
- D6013 surgical placement of mini implant (Manual Price)

- D6052 semi-precision attachment abutment (Manual Price)
- D6110 implant/abutment supported removable denture for edentulous arch – maxillary (Manual Price)
- D6111 implant/abutment supported removable denture for edentulous arch – mandibular (Manual Price)
- D6112 implant/abutment supported removable denture for partially edentulous arch – maxillary (Manual Price)
- D6113 implant/abutment supported removable denture for partially edentulous arch – mandibular (Manual Price)
- D6114 implant/abutment supported fixed denture for edentulous arch – maxillary (Manual Price)
- D6115 implant/abutment supported fixed denture for edentulous arch – mandibular (Manual Price)
- D6116 implant/abutment supported fixed denture for partially edentulous arch – maxillary (Manual Price)
- D6117 implant/abutment supported fixed denture for partially edentulous arch – mandibular (Manual Price)
- D8694 repair of fixed retainers, includes reattachment (SMA \$50)
- D9222 deep sedation/general anesthesia – first 15 minutes (SMA \$45.68)
- D9223 deep sedation/general anesthesia – each 15 minute increment (SMA \$45.68)
- D9239 intravenous moderate (conscious) sedation/analgesia – first 15 minutes (SMA \$21.07)
- D9243 intravenous moderate (conscious) sedation/analgesia – each 15 minute increment (SMA \$21.07)

For DOS on and after May 16, 2020, the following changes to CDT procedure codes will be effective:

- D0999 unspecified diagnostic procedure, by report (SMA changed from “by report” to \$46)
- D1575 distal shoe space maintainer – fixed – unilateral (new benefit, SMA \$120)
- D7979 non-surgical sialolithotomy (new benefit, SMA \$45)
- D8695 removal of fixed orthodontic appliances for reasons other than completion of treatment (new benefit, SMA \$50)
- D9995 teledentistry – synchronous; real-time encounter (new benefit, SMA \$0.24)
- D9996 teledentistry – asynchronous; information stored and forwarded to dentist for subsequent review (new benefit, SMA \$0)

All Medi-Cal dental Provider Bulletins related to these policy updates will be identified in Section 5-1 of the Medi-Cal Dental Provider Handbook, which is available online at the

following link: [https://www.denti-cal.ca.gov/DC\\_documents/providers/provider\\_handbook/handbook.pdf#page=135](https://www.denti-cal.ca.gov/DC_documents/providers/provider_handbook/handbook.pdf#page=135).

DHCS estimates that the annual aggregate Medi-Cal expenditures for the dental procedures listed above will decrease by \$107,765.40 Total Funds.

## **PUBLIC REVIEW AND COMMENTS**

DHCS is requesting stakeholder input on the impact, if any, on access to services as a result of the proposed SPA #20-0014.

Upon submission to CMS, a copy of the proposed SPA #20-0014 will be published at the following internet address:

<https://www.dhcs.ca.gov/formsandpubs/laws/Pages/PendingStatePlanAmendments.aspx>

If you would like to view the SPA in person once it becomes available, please visit your local county welfare department. You may also request a copy of proposed SPA #20-0014 or a copy of submitted public comments related to SPA #20-0014 by requesting it in writing to the mailing or email addresses listed below. Please indicate SPA #20-0014 in the subject line or message.

Written comments may be sent to the following address:

Department of Health Care Services  
Medi-Cal Dental Services Division  
Attn: Carolyn Brookins  
P.O. Box 997413, MS 4900  
Sacramento, California 95899-7413

Comments may also be emailed to [PublicInput@dhcs.ca.gov](mailto:PublicInput@dhcs.ca.gov). Please indicate SPA #20-0014 in the subject line or message.

To assure consideration prior to submission of the SPA to CMS, comments must be received no later than March 14, 2020, but DHCS may not be able to consider those comments prior to the initial submission of SPA #20-0014 to CMS.