

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
90 Seventh Street, Suite 5-300 (5W)
San Francisco, CA 94103-6706



Regional Operations Group

August 22, 2019

Mari Cantwell
Chief Deputy Director, Health Care Programs
California Department of Health Care Services
P.O. Box 997413, MS 0000
Sacramento, CA 95899-7413

Dear Ms. Cantwell:

Enclosed is an approved copy of California State Plan Amendment (SPA) 19-0039, which was submitted to the Centers for Medicare & Medicaid Services (CMS) on June 18, 2019. SPA 19-0039 allows the Department of Health Care Services to implement policy changes to the current Code on Dental Procedures and Nomenclature (CDT) 13 code set, known as the CDT-13, for the California Medi-Cal Dental Program.

The effective date of this SPA is June 1, 2019. Enclosed is the following approved SPA page that should be incorporated into your approved state plan:

- Attachment 4.19-B, page 20b

If you have any questions, please contact Cheryl Young at 415-744-3598 or via email at Cheryl.Young@cms.hhs.gov.

Sincerely,

A solid black rectangular box redacting the signature of Richard C. Allen.

Richard C. Allen
Director
Center for Medicaid and CHIP Services
Regional Operations Group

Cc: Jacey Cooper, California Department of Health Care Services (DHCS)
Rene Mollow, DHCS
Alani Jackson, DHCS
Carolyn Brookins, DHCS
Angeli Lee, DHCS
Amanda Font, DHCS

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER <u>1 9 — 0 0 39</u>	2. STATE California
3. PROGRAM IDENTIFICATION: Title XIX of the Social Security Act (Medicaid)	
4. PROPOSED EFFECTIVE DATE June 1, 2019	

TO: REGIONAL ADMINISTRATOR
CENTERS FOR MEDICARE & MEDICAID SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

5. TYPE OF PLAN MATERIAL (*Check One*)

- NEW STATE PLAN AMENDMENT TO BE CONSIDERED AS NEW PLAN AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (*Separate transmittal for each amendment*)


6. FEDERAL STATUTE/REGULATION CITATION 42 U.S.C. Section 1396a; 42 CFR 447, Part F7- <u>Subpart F</u>	7. FEDERAL BUDGET IMPACT a. FFY <u>2019</u> \$ <u>(184,215)</u> b. FFY <u>2020</u> \$ <u>(368,429)</u>
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 4.19-B, Page 20b	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (<i>If Applicable</i>) Attachment 4.19-B, Page 20b

10. SUBJECT OF AMENDMENT

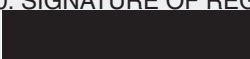
To implement policy changes to the current CDT-13 code set in several releases between June and July 2019. D0210 was changed to only be billable for patients age 11 or older. For patients age 10 or under, medically necessary radiographs taken shall be billed separately using the following CDT-13 procedure codes: D0220, D0230, D0240, D0270, D0272 and D0274.

11. GOVERNOR'S REVIEW (*Check One*)

- GOVERNOR'S OFFICE REPORTED NO COMMENT OTHER, AS SPECIFIED
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL 	16. RETURN TO Department of Health Care Services Attn: Director's Office P.O. Box 997413, MS 0000 Sacramento, CA 95899-7413
13. TYPED NAME Mari Cantwell	
14. TITLE State Medicaid Director	
15. DATE SUBMITTED June 18, 2019	

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED June 18, 2019	18. DATE APPROVED August 22, 2019
PLAN APPROVED - ONE COPY ATTACHED	
19. EFFECTIVE DATE OF APPROVED MATERIAL June 1, 2019	20. SIGNATURE OF REGIONAL OFFICIAL 
21. TYPED NAME Richard C. Allen	22. TITLE Director, Centers for Medicaid & CHIP Services, Regional Operations Group

23. REMARKS

For Box 10: This change is for clinical appropriateness - most children 10 years old and younger do not have second molars and require less radiographs than what is required to bill D0210.

For Box 11 "Other, As Specified," Please note: The Governor's Office does not wish to review the State Plan Amendment.

Box 6: CMS pen & ink change made per CA response to CMS' informal questions dated 7/24/19.

Box 7: CMS pen & ink change made per CA response to CMS' informal questions dated 7/24/19.

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, Manual Criteria and Schedule of Maximum Allowances, of the Medi-Cal Dental Program Provider Handbook, which was updated on June 1, 2019 and are effective for services on or after that date. The link to the Medi-Cal Dental Program Provider Handbook is as follows:

https://www.denti-cal.ca.gov/DC_documents/providers/provider_handbook/handbook.pdf#page=240

TN No. 19-0039
Supersedes:
TN No. 18-0025

Approval Date: August 22, 2019

Effective Date: June 1, 2019