

Michelle Baass | Director

**DATE:** April 26, 2023

# ALL PLAN LETTER 23-001

# TO: ALL MEDI-CAL DENTAL MANAGED CARE PLANS

SUBJECT: TELEDENTISTRY EXPANSION POLICY

#### **PURPOSE:**

The purpose of this Dental All Plan Letter (APL) is for the Department of Health Care Services (DHCS) to provide Medi-Cal Dental Managed Care (DMC) plans with requirements for providing broad teledentistry coverage post-Public Health Emergency (PHE), via both asynchronous and video and audio-only synchronous interaction.

## **BACKGROUND:**

Pursuant to Welfare and Institutions Code (WIC) Section 14132.725 (c)(4)<sup>1</sup>, telehealth can be used, via video synchronous interaction consistent with any requirements imposed by the Department, to establish a new patient relationship. Effective January 1, 2023, WIC Section 14132.725(c)(5)<sup>2</sup> provides that a health care provider shall not establish a new patient relationship with a Medi-Cal beneficiary via asynchronous store and forward, telephonic (audio-only) synchronous interaction, remote patient monitoring, or other virtual communication modalities, except as described in WIC Section 14132.100(g)(4)<sup>3</sup>.

Currently, DHCS uses teledentistry as an alternative modality for the provision of select dental services, which can be rendered using Current Dental Terminology (CDT) code D9995 (Teledentistry- Synchronous; Real-Time Encounter) and D9996 (Teledentistry – Asynchronous; Information stored and forwarded to dentist for subsequent review).

- D9995 (Teledentistry Synchronous; Real-Time Encounter) and
- D9996 (Teledentistry Asynchronous; Information stored and forwarded to dentist for subsequent review).



California Health and Human Services Agency

<sup>&</sup>lt;sup>1</sup> WIC Section 14132.725 (c)(4)

<sup>&</sup>lt;sup>2</sup> WIC Section 14132.725 (c)(5)

<sup>&</sup>lt;sup>3</sup> WIC Section 14132.100 (g)(4)

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# POLICY:

Effective May 1, 2023, in an effort to broaden access to care for Medi-Cal dental beneficiaries, and in recognition of Senate Bill (SB) 184<sup>4</sup>, DHCS will expand its teledentistry policy to allow DMC providers the ability to establish new patient relationships through an asynchronous store and forward modality, consistent with Federally Qualified Health Center/Rural health Clinic (FQHC/RHC) providers. Additionally, DHCS will enable providers the flexibility to use teledentistry as a modality to render services based upon service categories and parameters, verses designated CDT codes as is the current policy, when in compliance with <u>ALL</u> of the following requirements:

- The procedure is a diagnostic (D0100-D0999) or preventive (D1000-D1999) service. Teledentistry is not allowable for all other service categories and CDT codes (D2000-D9999) except D9995 and D9996, which are the teledentistry modality codes; and D9430 office visit for observation (during regularly scheduled hours – no other services performed).
- 2) Dental providers billing for services delivered via teledentistry must be enrolled as Medi-Cal dental providers. The dental provider rendering Medi-Cal covered benefits or services via a teledentistry modality must be licensed in California, enrolled as a Medi-Cal Dental rendering provider, and operate within their allowable scope of practice and meet applicable standards of care.
- 3) Providers must inform the patient prior to the initial delivery of teledental services about the use of teledentistry and obtain verbal or written consent from the patient for the use of teledentistry as an acceptable mode of delivering dental care services. Providers also need to document when a patient consents to receive services and such documentation must be maintained in the patient's medical (dental) record.
- 4) All services rendered through teledentistry must be in compliance with the Manual of Criteria, including documentation requirements to substantiate the corresponding technical and professional components of billed CDT codes.
- 5) A patient who receives teledentistry services under these provisions shall also have the ability to receive in-person services from the dentist or dental practice or assistance in arranging a referral for in-person services.
- 6) The referral to the dentist or dental practice must be documented in order to use asynchronous teledentistry to establish a patient relationship. Procedure does not require in-person presence of the patient in a dental facility, such as, administration of anesthesia, require direct visualization, or require instrumentation of the mouth by a licensed dentist.

<sup>&</sup>lt;sup>4</sup> <u>SB-184</u>

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 Procedure does not involve the insertion/removal of dental devices or products – such as crowns, implants, removable partials or dentures, or orthodontic appliances.

## **REQUIREMENTS:**

If the requirements contained in this APL, including any updates or revisions to this APL, necessitate a change in a DMC plan's contractually required policies and procedures (P&Ps), the DMC plan must submit its updated P&Ps with and without Track Changes to DHCS' Medi-Cal Dental Services Division (MDSD) at <u>DMCdeliverables@dhcs.ca.gov</u> within 90 days of the release of this APL. If a DMC plan determines that no P&P changes are necessary, the DMC plan must submit an email confirmation to <u>DMCdeliverables@dhcs.ca.gov</u> within 10 days of the release of this APL, stating that the DMC plan's P&Ps have been reviewed and no changes are necessary. The email confirmation must include the title of this APL as well as the applicable APL release date in the subject line.

DMC Plans are responsible for ensuring that their Subcontractors and Network Providers comply with all applicable state and federal laws and regulations, contract requirements, and other DHCS guidance, including APLs and Policy Letters. These requirements must be communicated by each DMC Plan to all Subcontractors and Network Providers.

If you have any questions regarding this APL, please contact MDSD at <u>DMCdeliverables@dhcs.ca.gov</u>.

Sincerely,

Original signed by:

Adrianna Alcala-Beshara, JD, MBA Chief, Medi-Cal Dental Services Division Department of Health Care Services