

Health Family Program/CHIP Regulation¹ Benefits vs. Medi-Cal Dental Services Scope of Benefits

Medi-Cal Dental (Denti-Cal) and CHIP children² dental benefits are considered full scope for eligible individuals; Medi-Cal eligible children are individuals under the age of 21; CHIP eligible children under Medi-Cal are individuals under the age of 19. The criteria for these benefits can be found in the Manual of Criteria on the Denti-Cal website www.denti-cal.ca.gov and medical necessity is a requirement for the provision of the covered benefit.

Under the Medi-Cal program, Early Periodic Screening, Diagnosis and Treatment (EPSDT) are a requirement of covered services for eligible children under the age of 21 who are eligible for full-scope benefits. For purposes of any benefit under Medi-Cal where there is a limitation on the amount, duration or scope of a covered service, if medical necessity is demonstrated, EPSDT requirements can supersede these limitations.

Dental Procedure	CHIP/HFP Regulations 2011-2012	Medi-Cal Dental Program Scope of Benefits 2014-present ³
Initial and periodic oral examinations	A benefit	A benefit
Consultations, including specialist consultations	A benefit	A benefit
Radiographs	<u>Bitewings:</u> once every six months <u>Full series:</u> once every 24 months <u>Panoramic film:</u> once every 24 months	<u>Bitewings:</u> once every six months per provider <u>Full series:</u> once per provider every 36 months <u>Panoramic film:</u> once every 36 months
Prophylaxis services	Two in a twelve month period	Once every six months
Topical fluoride treatment	A benefit	Once every six months
Dental sealant treatment	Permanent first and second molars only	Permanent first and second molars only
Space maintainers	A benefit	A benefit
Preventive dental education and oral hygiene instruction	A benefit	Included in the fee for cleanings, not payable separately
Restorative dentistry •Amalgam, composite	A benefit * Composite not a benefit in posterior teeth	A benefit * Composite is a benefit in posterior teeth

¹ 10 CCR 2699.6709

² CHIP eligible children are now covered under Medi-Cal as Optional Targeted Low Income Children's Program beneficiaries.

³ HFP/CHIP transition to Medi-Cal occurred during calendar year 2013

Dental Procedure	CHIP/HFP Regulations 2011-2012	Medi-Cal Dental Program Scope of Benefits 2014-present³
Extractions, biopsy, alveolectomy, excision of cysts, removal of tori, frenectomy, abscess drainage, post-operative services and root removal.	A benefit	A benefit
Endodontics • Direct pulp capping • Pulpotomy and vital pulpotomy • Apexification • Root amputation • Root canal therapy • Apicoectomy • Vitality tests	A benefit	A benefit * Direct pulp capping is included in the fees for restorative and endodontic procedures
Periodontics • Emergency treatment • Scale and root planing- five quadrants in 12 months • Gingivectomy • Osseous surgery	A benefit	A benefit * Scale and root planing is benefit for patients age 13 or older and once per quadrant every 24 months
Crowns and fixed bridges • Stainless steel crowns • Recementation of crowns, cast posts and repairs	A benefit every 36 months A benefit every 36 months A benefit	A benefit every five years for lab crowns and bridges A benefit every 12 months for child stainless steel crown A benefit
Removable prosthetics, partial and complete • Office and lab relines • Denture repair, adjustment • Tissue conditioning	A benefit every 36 months A benefit once per arch in 12 months A benefit A benefit limited to two per denture	A benefit once in a five year period A benefit once per arch in 12 months A benefit A benefit twice per denture in a 36 month period
Implants	Optional benefit	A benefit under limited circumstances
Orthodontics	A benefit	A benefit