

State of California—Health and Human Services Agency Department of Health Care Services



DATE:

October 1, 2014

TO:

ALL MEDI-CAL DENTAL MANAGED CARE PLANS

SUBJECT: APL 14-009: Comprehensive Services for Pregnant Beneficiaries Effective October 1, 2014

The purpose of this All Plan Letter (APL) is to inform the Medi-Cal Dental Managed Care (DMC) plans that effective October 1, 2014, pregnancy-related dental services and dental services for the treatment of conditions that might complicate the pregnancy will be expanded.

The Medi-Cal Dental Services Division (MDSD) requires DMC plans to ensure dental plan providers are informed of and adhere to this policy amendment. If pregnancy is appropriately identified, **all** services delineated in the Denti-Cal Manual of Criteria (MOC), i.e., all services that were covered prior to the mid-2009 adult dental cuts, may be provided to pregnant beneficiaries, regardless of age, aid code, and/or scope of benefits (e.g., limited scope or pregnant/emergency services only), subject to their compliance with the Denti-Cal MOC. These services also include sixty (60) days of postpartum care as well as any remaining days in the month in which the 60th day falls. If "pregnancy" or "postpartum" is appropriately documented on the claim form, the applicable services may be rendered to a pregnant beneficiary and reimbursed accordingly.

Please forward this information to your dental plan providers. In addition to this APL, the Denti-Cal website will contain supplementary information (www.denti-cal.ca.gov) regarding this policy change.

If you have any questions regarding this letter please contact me at (916) 464-0210.

Sincerely,

Nik Ratliff, Chief

Contract Management & Policy Unit Medi-Cal Dental Services Division