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Department of Health Care Services



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Index: Program Administration

TO: ALL COUNTY CALIFORNIA CHILDREN'S SERVICES (CCS)
ADMINISTRATORS, MEDICAL DIRECTORS AND MEDICAL
CONSULTANTS, AND STATE CHILDREN'S MEDICAL SERVICES
(CMS) BRANCH STAFF

Subject: INTERIM APPEAL AND FAIR HEARING PROCESS FOR DENTAL AND
ORTHODONTIC DENIALS MADE BY DENTI-CAL FOR CCS

This Numbered Letter explains the interim appeal and fair hearing process for non Medi-Cal CCS children denied by Denti-Cal/Delta Dental Plan of California (Delta) for dental/orthodontic services.

Background

On July 1, 2004, CCS instituted changes to the authorization and claims processing system for dental and orthodontic services provided to CCS clients.

Delta, the fiscal intermediary for Denti-Cal, is responsible for authorization (if required) and denial of dental services for non Medi-Cal CCS clients once a Service Authorization Request (SAR) is entered into the Denti-Cal system.

It is the responsibility of Denti-Cal/Delta to send an NOA to the family explaining the process to be followed. Counties and Regional Offices should not send another NOA or denial letter.

Interim Policy

It is Denti-Cal policy to allow the family 90 days to respond to a Notice Of Action (NOA). The family may respond either in writing or via a toll-free telephone number. In Denti-Cal, when a beneficiary responds to a NOA it is to request a State fair hearing rather than to appeal. The requests are directed to the California Department of Social Services (DSS). DSS may occasionally refer the family back to the County CCS program; however, policy now exists for a referral directly back to the State CMS Branch. If the family does contact the County CCS program, it should be explained that their appeal has been forwarded to the Branch for processing.

When the family submits their request for a hearing to DSS, it is sent back to Denti-Cal as a CCS case and Denti-Cal then notifies the CMS Branch. The Branch treats the request as a first level appeal, reviews the case, and responds within 21 days once all documentation has been sent by Denti-Cal and received by the Branch.

If the appeal is denied by the Branch, the family is sent a letter with the first level appeal decision. The family is then given instructions on how to request a fair hearing through the California Department of Health Care Services (DHCS) Office of Administrative Hearings and Appeals.

Fair Hearing County Responsibilities

1. When a hearing is scheduled, the County should sign and submit a State Representation Agreement to authorize the Department to represent the county in the fair hearing. Although the County did not deny the services, the State needs this agreement in order to represent and defend the County. Without this signed agreement, the County will be left to defend itself despite not making the decision that the child was found to be medically ineligible.
2. The County will be notified by the DHCS, Office of Administrative Hearings and Appeals, that a hearing is scheduled. A room will be requested from the County to hold the hearing on the date set. The County should reserve a conference room for these proceedings. If no conference room is available either in the CCS office or the local public health department, the Office of Administrative Hearings and Appeals should be notified immediately.
3. Copies of records may be requested from the County by the DHCS attorney and/or the Branch.
4. Some DHCS attorneys may request County representation at these hearings to explain the County process in determining residential and financial eligibility and the issuance of the SAR. This is up to the individual DHCS attorney.

Fair Hearing CMS Branch Responsibilities

1. Gather documents not available from the county and submit to DHCS attorney.
2. Dialogue with DHCS attorney regarding CCS policies and procedures.
3. Write "position statement" for the Branch/Department.
4. Attend fair hearing when feasible.
5. Testify either in person or via telephone.

DHCS Office of Administrative Hearings and Appeals Responsibilities

1. Provide attorney.
2. Prepare exhibit documents.
3. Defend CCS in front of an Administrative Law Judge (ALJ).
4. Will be notified, along with the family, when ALJ makes a decision. The Branch, County, and dental provider should also receive a copy of this decision.

Conclusion

County CCS programs and Regional Offices should not send a Notice of Action to CCS families denied dental/orthodontic treatment services by Denti-Cal. This interim policy will stay in effect until such time when a notification from Denti-Cal to the family can be revised to apply the usual CCS fair hearing process.

Original Signed By Luis R. Rico

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