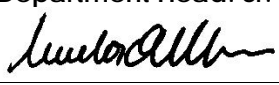
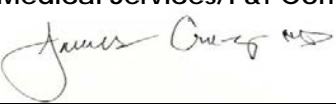


Policy Title: Dental Services		POLICY #: 10.2.8	
		Line of business: Medi-Cal	
Department Name: Utilization Management	Original Date 11/97	Effective Date 5/19	Revision Date 12/18
Department Head: Sr. UM Director 			Date: 3/21
Medical Services/P&T Committee: (If Applicable) PHP CMO 			Date: 3/21

PURPOSE

To ensure that Blue Shield Promise of California Health Plan (Blue Shield Promise) member receive dental screenings and appropriate intravenous (IV) sedation and general anesthesia services provided by a physician in conjunction with dental services for Blue Shield Promise Medi-Cal beneficiaries in hospitals, ambulatory medical surgical settings, or dental offices in compliance with the APL-15-012.

POLICY

1. Dental services are excluded from the Managed Care Plan (MCP) but may be provided to Medi-Cal beneficiaries on a fee-for-services basis (FFS) through Denti-Cal or through Dental Managed Care Plan (DMC). Blue Shield Promise shall provide oral screenings and referrals in accordance with Recommendations for Preventative Pediatric Health Care. Dental screening is a part of the Initial Health Assessment (IHA) for all Members and, for Member's under 21, is included as a part of each periodic health assessment.
2. Blue Shield Promise is responsible for reimbursing contractually covered prescription drugs, laboratory services, pre-admission physical examinations required for dental offices, admission to ambulatory medical surgical settings or an inpatient hospital for a dental procedure and facility fees as applicable and intravenous (IV) sedation and general anesthesia services for Blue Shield Promise Medi-Cal beneficiaries in hospitals, ambulatory medical surgical settings, or dental offices.
3. Medi-Cal beneficiaries enrolled in Blue Shield Promise are entitled to treatment under general anesthesia when medically necessary, or medically or clinically indicated for a dental procedure in a dental office, hospital or surgery center.
4. Blue Shield Promise requires prior authorization:
 - a. Authorization for IV sedation and general anesthesia related to dental services will be authorized by Blue Shield Promise Health Plan based on the guidance of Attachment A in APL 15-012.
5. Blue Shield Promise providers are required to adhere to all regulatory requirements on pre-operative and peri-operative care; monitoring and equipment requirements; emergencies and transfers and monitoring guidelines per DHCS APL 15-012

PROCEDURE

1. Primary Care Physicians (PCP) are responsible for:
 - a. Dental screening during the IHA for all members.
 - b. Members under 21 years of age:
 - i. Completing a dental screening/oral health assessment during the Initial Health Assessment and at every periodic assessment.
 - ii. Provide annual dental referrals commencing at age 3 or earlier if conditions warrant.
2. Members are to be referred to appropriate Medi-Cal Dental Providers
3. Blue Shield Promise will educate contracted providers on dental screenings and the coordination of appropriate referrals for dental services to include medically indicated intravenous (IV) sedation and general anesthesia services via the provider manual that includes access to this policy and procedure
4. Blue Shield Promise Health Plan will cover and ensure the provision of covered medical services component of dental services that are not provided by dentists or dental anesthetists.
5. Covered medical services covered by Blue Shield Promise include:
 - a. Contractually covered prescription drugs
 - b. Medical laboratory services
 - c. Pre-admission physical examinations required for admission to out-patient or inpatient care required for a dental procedure. *(including facility fee and anesthesia services for both inpatient and outpatient services)*
6. Beneficiaries may receive treatment for a dental procedure provided under general anesthesia by a Blue Shield Promise anesthesiologist in the settings listed below only if the MCP determines the setting is appropriate and according to the criteria outlined in Attachment A:
 - a. Hospital;
 - b. Accredited ambulatory surgical center (stand-alone facility);
 - c. Dental office; and
 - d. A community clinic that:
 - i. Accepts Medi-Cal dental program (Denti-Cal or DMC plan) beneficiaries;
 - ii. Is a non-profit organization; and
 - iii. Is recognized by the Department of Health Care Services as a licensed community clinic or a Federally Qualified Health Center (FQHC) or a FQHC look-alike.
7. Blue Shield Promise shall cover general anesthesia for dental services for a beneficiary who meets at least one (1) of the following criteria when the medical necessity is based on a mental or physical limitation or contraindication to a local anesthetic agent:
 - a. Beneficiary is under 7 years of age;
 - b. Beneficiary has a developmental disability
 - c. Beneficiary has an underlying clinical or medical condition for which general anesthesia is medically necessary

8. Blue Shield Promise shall cover general anesthesia services provided by either dental personnel, or individuals other than dental personnel and any associated prescription drugs, laboratory services, physical examinations required for admission to a medical facility, outpatient surgical center services, and inpatient hospitalization services required for a dental procedure.
9. Blue Shield Promise's responsibility for general anesthesia:
 - a. Blue Shield Promise shall coordinate all necessary non anesthesia covered services provided to a beneficiary
10. Blue Shield Promise Health Plan may require prior authorization for medical services required in support of dental procedures. All covered Dental Services are subject to prior authorization (see P&P # 70.2.50 Prior Authorization Review & Approval Process) and follow the same turn-around-time standards to avoid undue delay
11. Blue Shield Promise will assist providers and members with the prior authorizations process as a form of care coordination and to avoid delays for dental services.
12. Authorization for general anesthesia provided by a physician anesthesiologist to a beneficiary during an inpatient stay must be a part of the authorization for the inpatient admission.
13. Blue Shield Promise shall reimburse facility fees for services provided in any dental office, hospital, ambulatory surgery center, or community clinic that meet the requirements set forth in this policy.

REFERENCES

Health & Safety Code Section 1367.71
APL 15-012, May 14, 2015, revised August 21, 2015