

ASSEMBLY BILL

No. 2229

**Introduced by Assembly Member Huffman
(Principal coauthor: Assembly Member Berg)
(Coauthor: Assembly Member Horton)**

February 20, 2008

An act to amend Section 14132.88 of the Welfare and Institutions Code, relating to Medi-Cal.

LEGISLATIVE COUNSEL'S DIGEST

AB 2229, as introduced, Huffman. Medi-Cal: dental examinations.

Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Care Services under which qualified low-income individuals receive health care benefits, including, to the extent funds are made available in the annual budget, dental prophylaxis cleanings and initial dental examinations for beneficiaries 21 years of age or older.

This bill would provide for one dental examination per year for Medi-Cal beneficiaries living in long-term care facilities as a covered Medi-Cal benefit, to the extent funds are made available in the annual Budget Act.

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: no.

The people of the State of California do enact as follows:

- 1 SECTION 1. Section 14132.88 of the Welfare and Institutions
- 2 Code is amended to read:

1 14132.88. (a) Notwithstanding subdivision (h) of Section
2 14132 and to the extent funds are made available in the annual
3 Budget Act for this purpose, the following are covered benefits
4 for beneficiaries 21 years of age or older under this chapter:

- 5 (1) One dental prophylaxis cleaning per year.
- 6 (2) One initial dental examination by a dentist.
- 7 (3) *One dental examination per year for beneficiaries living in*
8 *long-term care facilities.*

9 (b) The following are covered benefits for beneficiaries under
10 21 years of age under this chapter:

- 11 (1) Two dental prophylaxis cleanings per year.
- 12 (2) Two periodic dental examinations per year.

13 (c) For persons 21 years of age or older, laboratory-processed
14 crowns on posterior teeth are not a covered benefit except when
15 a posterior tooth is necessary as an abutment for any fixed or
16 removable prosthesis.

17 (d) Any prefabricated crown made from ADA-approved
18 materials may be used on posterior teeth and may be reimbursed
19 as a stainless steel crown.

20 (e) The department shall reduce the rate of subgingival curettage
21 and root planing by 41 percent for all beneficiaries except those
22 residing in a skilled nursing facility or an intermediate care facility
23 for the developmentally disabled. Notwithstanding Section 14105
24 and Chapter 3.5 (commencing with Section 11340) of Part 1 of
25 Division 3 of Title 2 of the Government Code, the department may
26 implement this subdivision by means of a provider bulletin or
27 similar instruction, without taking regulatory action.

28 (f) (1) Except as provided in paragraph (2), the department
29 shall require pretreatment radiograph documentation on
30 posttreatment claims to establish the medical necessity for dental
31 restorations. The pretreatment documentation required under this
32 subdivision is intended to reduce fraudulent claims for unnecessary
33 dental fillings. In order to avoid any undue barriers to accessing
34 dental care, the department shall stipulate that the pretreatment
35 radiograph documentation for posttreatment claims will be required
36 only when there are four or more dental fillings being completed
37 in any 12-month period.

38 (2) For any beneficiary who is under four years of age, or who,
39 regardless of age, has a developmental disability, as defined in
40 subdivision (a) of Section 4512, radiographs or photographs that

1 indicate decay on any tooth surface shall be considered sufficient
2 documentation to establish the medical necessity for treatment
3 provided.

4 (3) Notwithstanding Chapter 3.5 (commencing with Section
5 11340) of Part 1 of Division 3 of Title 2 of the Government Code,
6 the department shall implement this subdivision by means of a
7 provider bulletin or similar instruction, without taking regulatory
8 action.

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