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State/Territory Name: CA

State Plan Amendment (SPA) CA: 22-0020

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services
Center for Medicaid & CHIP Services
233 North Michigan Ave., Suite 600
Chicago, Illinois 60601



Financial Management Group

May 11, 2022

Jacey Cooper
Chief Deputy Director, Health Care Programs
California Department of Health Care Services
P.O. Box 997413, MS 0000
Sacramento, CA 95899-7413

RE: TN 22-0020

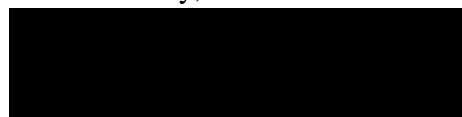
Dear Ms. Cooper:

We have reviewed the proposed California State Plan Amendment (SPA) to Attachment 4.19-B, CA-22-0020, which was submitted to the Centers for Medicare & Medicaid Services (CMS) on April 12, 2022. This SPA would allow the Current Dental Terminology (CDT) dental codes to be updated from the CDT 2021 ("CDT-21") code set to the CDT 2022 ("CDT-22") code set for the purpose of dental service reimbursement.

Based upon the information provided by the State, we have approved the amendment with an effective date of May 1, 2022. We are enclosing the approved CMS-179 and a copy of the new state plan pages.

If you have any additional questions or need further assistance, please contact Blake Holt at 303-844-6218 or blake.holt@cms.hhs.gov.

Sincerely,



Todd McMillion
Director
Division of Reimbursement Review

Enclosures

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER 2 2 — 0 0 2 0 2. STATE CA

3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT XIX XXI

TO: CENTER DIRECTOR
CENTERS FOR MEDICAID & CHIP SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE
May 1, 2022

5. FEDERAL STATUTE/REGULATION CITATION
42 U.S.C. Section 1396a; 42 C.F.R. 447, Subpart F

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)
a. FFY 2022 \$ 3,994
b. FFY 2023 \$ 9,585

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT
Attachment 4.19-B, Page 20b

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (if Applicable)
Attachment 4.19-B, Page 20b

9. SUBJECT OF AMENDMENT
Current Dental Terminology (CDT) Code Set Update to CDT-22

10. GOVERNOR'S REVIEW (Check One)
 GOVERNOR'S OFFICE REPORTED NO COMMENT
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL
 OTHER, AS SPECIFIED:
Please note: The Governor's Office does not wish to review the State Plan Amendment.

11. AGENCY OFFICIAL
[REDACTED]
12. TYPED NAME
Jacey Cooper
13. TITLE
State Medicaid Director
14. DATE SUBMITTED
April 12, 2022

15. RETURN TO
**Department of Health Care Services
Attn: Director's Office
P.O. Box 997413, MS 0000
Sacramento, CA 95899-7413**

FOR CMS USE ONLY
16. DATE RECEIVED
April 12, 2022
17. DATE APPROVED
May 11, 2022

PLAN APPROVED - ONE COPY ATTACHED
18. EFFECTIVE DATE OF APPROVED MATERIAL
May 1, 2022
19. SIGNATURE OF APPROVING OFFICIAL
[REDACTED]
20. TYPED NAME OF APPROVING OFFICIAL
Todd McMillion
21. TITLE OF APPROVING OFFICIAL
Director, Division of Reimbursement Review

22. REMARKS

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
STATE: CALIFORNIA

Payment for Dental Services

The State developed fee schedule rates are the same for both public and private providers of dental services. Dental services are paid based on procedure codes. The agency's dental fee schedule and rate updates are published under Section 5, Manual of Criteria and Schedule of Maximum Allowances, of the Medi-Cal Dental Program Provider Handbook, which was updated on May 1, 2022, and are effective for services on or after that date. The link to the Medi-Cal Dental Program Provider Handbook is as follows:

https://www.dental.dhcs.ca.gov/Dental_Providers/Medi-Cal_Dental/Provider_Handbook/

TN No. 22-0020
Supersedes:
TN No. 21-0019

Approval Date: May 11, 2022 Effective Date: May 1, 2022