



DEPARTMENT OF REHABILITATION PROVIDER REFERENCE GUIDE FOR DENTAL SERVICES

Introduction

The Department of Rehabilitation (DOR) is the state department charged with the vocational rehabilitation of adults and transitioning high school students with significant disabilities (collectively known as consumers). The DOR's mission is to assist consumers to achieve their employment goals, maintain successful employment, and live independently. Assisting consumers to reach these goals may include purchasing dental evaluations and treatment.

The DOR's payment rates

Most of the DOR payment rates are comparable to the Denti-Cal rate schedules. However, the DOR may also purchase additional services not covered by Denti-Cal in order to meet a DOR consumer's vocational rehabilitation needs.

Prompt Payment Commitment

The DOR follows the California Prompt Payment Act, which requires state agencies to make payments not more than 45 days after the receipt of a properly submitted and undisputed invoice.

Evaluation

The dental office will complete the dental evaluation and intraoral, complete series of X-rays (including bitewings).

After the evaluation, the following documents should be submitted to DOR electronically or by hardcopy, preferably within 10 business days from the date the evaluation was completed:

- Completed intraoral, complete series (including bitewings)
 - Electronically must be an image file format of TIF, JPG, PNG, or GIF.
 - Hardcopy must be original and on X-ray film.
- Completed dental treatment plan/claim
- Completed periodontal charting (if applicable)
- Completed justification for prosthesis (if applicable)

See step-by-step table for specific instructions on where and how to send documents.

Authorization

No services may be provided or paid for without a DOR authorization document. Only those services authorized, in advance, on an official DOR authorization will be honored at the time of invoice.

Once the treatment plan and supporting documentation are received, the DOR reviews and determines the appropriateness of services in alignment with the consumer's employment goal and plan. The Statewide Dental Consultant (SDC) may work with the provider on any modifications that may be needed.

Once the treatment plan is approved by the SDC and the DOR is ready to purchase the service(s) for the consumer, the DOR will send the provider a single written Authorization and Invoice for Medical Services (DR 297C) form itemizing all services.

Treatment

The dental office will perform the approved treatment listed on the Authorization and Invoice for Medical Services (DR 297C).

Billing the DOR for dental services

It is a state policy that if the consumer/patient has Denti-Cal or other private dental insurance, the dental office will invoice these benefits first. Whatever is not covered by the comparable benefits can then be invoiced to DOR. Each provider must attach the evidence of benefit (EOB) or denial. See step-by-step table for specific invoicing instructions.

When billing the DOR for evaluations, include the documents listed above in the Evaluation section of this document.

When billing the DOR for treatment services, you have two billing options:

1. Simply sign the bottom of the Authorization and Invoice for Medical Services (DR 297C), write in the dates of service and the invoiced amounts in the appropriate columns.
2. Invoice on a completed dental claim form or company invoice. The procedure codes need to match the procedure codes approved on the DR 297C document.

Step-by-Step In-Depth Guide

This section provides a description of each step in the dental services process. See the sections above for more detailed information on policies, processes, and documentation.

Step	Purchase Phase	Action	Standard Actor
1	Evaluation	<p>Issue authorization for dental evaluation and X-rays.</p> <p>Commonly used dental procedure codes:</p> <ul style="list-style-type: none"> • D0150 – Comprehensive oral evaluation - new or established patient. • D0210 – Intraoral, complete series (including bitewings) <p>Notate on the authorization if the consumer has Denti-Cal or other private dental insurance.</p>	DOR Office
2a	Evaluation	<ul style="list-style-type: none"> • Examine consumer: evaluate dental status and needs. • Develop treatment plan, including intraoral, complete series (including bitewings) and all other required documentation, recommending appropriate dental services for successful employment outcome. <p>Submit intraoral, complete series (including bitewings), dental evaluation (dental claim, periodontal charting, justification for prosthesis (if applicable)) to DOR:</p> <ul style="list-style-type: none"> • Electronic submission: 	Provider

Step	Purchase Phase	Action	Standard Actor
		<ul style="list-style-type: none"> - Electronic intraoral, complete series (including bitewings) must be in an image file of TIF, JPG, PNG, or GIF - Dental treatment plan including dental claim form, periodontal charting, and justification for prosthesis (if applicable) <p>Send to medical.servicesunit@dor.ca.gov</p> <ul style="list-style-type: none"> • Hardcopy submission: <ul style="list-style-type: none"> - Original intraoral, complete series (including bitewings) must be on x-ray film - Hardcopy dental treatment plan including dental claim, periodontal charting, and justification for prosthesis (if applicable) <p>Send to DOR field address on the authorization for the dental evaluation and intraoral, complete series (including bitewings).</p>	
2b	Evaluation	<ul style="list-style-type: none"> • Invoice the consumer's Denti-Cal or other private dental insurance (if applicable). • Invoice the DOR for remaining balance. Attach EOB or denial. 	Provider
3	Evaluation	The DOR will prepare the dental treatment packet for the Statewide Dental Consultant's review.	DOR Office
4	Treatment	The DOR Statewide Dental Consultant reviews treatment packet, works with provider as needed, and approves appropriate services.	DOR Office
5	Treatment	Issue authorization for dental treatment, utilizing correct procedure codes and approved rates.	DOR Office
6a	Treatment	Perform authorized treatment.	Provider
6b	Treatment	<ul style="list-style-type: none"> • Invoice the consumer's Denti-Cal or other private dental insurance (if applicable). • Invoice the DOR for remaining balance. Attach EOB or denial. 	Provider