

**COUNTY OF LOS ANGELES – DEPARTMENT OF PUBLIC HEALTH
CALIFORNIA CHILDREN’S SERVICES (CCS)**

**ORTHODONTIA PROGRAM
PROVIDERS - Frequently Asked Questions (FAQ)**

November 12, 2013

1. Who can be referred to the Los Angeles County (LAC) California Children’s Services (CCS) Orthodontia program?

- Children without orthodontic benefits between the ages of 13 and 19 may submit a request for orthodontia treatment to the LA CCS program.
- The request can be submitted by anyone, but the preferred source is a Dentist or a Denti-Cal certified Orthodontist.
- Providers treating clients with Full Scope Medi-Cal must submit a Denti-Cal Treatment Authorization Request (TAR) directly to Denti-Cal since the CCS Orthodontia Program is not involved with approval for clients with Full Scope Medi-Cal.

2. What is the orthodontia services request process?

- To begin the CCS process, the Dental provider must submit a “CCS Dental and Orthodontic Service Authorization Request” SAR form (DHCS 4516) (see #3 below). The provider may fax or mail the form to LAC CCS (see #4 below).
- The CCS program will review the requested services and determine if the patient qualifies based on medical, financial, and residential eligibility criteria.
- If approved, CCS will issue a Service Authorization Request (SAR) for the approved Service Code Group(s) authorizing services up to one year to a Denti-Cal approved Orthodontia provider. The provider must obtain the SAR prior to performing orthodontic services.
- The approved CCS SAR does not guarantee payment. Payment is always subject to the dental criteria and submission requirements of the Denti-Cal program. The provider must also send a TAR directly to Denti-Cal checking the box “CCS” on the TAR form. Information for the TAR can be found on:
www.denti-cal.dhs.ca.gov

3. Where can I find the “CCS Dental and Orthodontic Service Authorization Request” SAR form?

The SAR form is located on the CCS Website:

<http://www.dhcs.ca.gov/formsandpubs/forms/Pages/CCSForms.aspx>. Select CCS Client Dental and Orthodontic Service Authorization Request - DHCS 4516.

4. Where can the “CCS Dental and Orthodontic Service Authorization Request” SAR form be sent?

- Fax: (855) 481-6821 (*Preferred*)
- U.S. Mail: 9320 Telstar Avenue, Suite 226, El Monte, CA 91731

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5. How long will it take to process the referral request?

Within five (5) working days, the request information will be reviewed and the Case Manager will begin the eligibility process.

6. If the client does not live in Los Angeles County, can I still refer the client to the LAC CCS Orthodontia Program?

No. In order to be referred to LAC CCS, the client must to be a resident of Los Angeles County. The client, however, can be referred to the CCS Program in the county of legal residence, as long as they live in the State of California, and do not have full scope Medi-Cal coverage. The contact information to your local county’s CCS office can be obtained from the following website:

<http://www.dhcs.ca.gov/services/ccs/Pages/CountyOffices.aspx>.

7. What do I need to do in order to update the current Service Authorization Request (SAR)?

- Within 60 days prior to the end of the current SAR eligibility period providers must to fax/mail a CCS Client Dental and Orthodontic SAR along with a copy of the TAR that indicates the client requires continued treatment (D8080) or retention (D8680) to LAC CCS.
- A new eligibility period will not be established without documentation that the client continues to require treatment.

8. What happens when the client becomes eligible for Full Scope Medi-Cal?

- If a client becomes eligible for Full Scope Medi-Cal with no Share of Cost after starting treatment through CCS, the client’s case will be closed. At that point, providers are to send a TAR directly to Denti-Cal for approval to continue treatment.
- Providers may be asked by Denti-Cal to submit additional documentation; LAC CCS will not be responsible for forwarding documentation previously submitted to CCS.