

# L.A. Care Medicare Plus (HMO D-SNP) FAQs

Liberty is passionate about improving the oral health outcomes of diverse, low-income populations.

## 1. When will the L.A. Care Medicare Plus dental benefit go into effect?

The benefit goes into effect **January 1, 2025**.

## 2. Who is Liberty Dental Plan?

Liberty is a privately held dental benefits corporation that was established in 2001. Liberty has built a solid reputation by meeting and exceeding our clients, providers and members expectations allowing us to maintain customer loyalty with over 99% client retention.

## 3. What will be the Exclusive Provider Organization (EPO) network?

Liberty's Exclusive Provider Organization (EPO) network is CA Choice Medicare Advantage DUALS.

## 4. How are these benefits different from what Medi-Cal provides?

L.A. Care Medicare Plus (HMO D-SNP) is offering additional benefits to members over and above the Medi-Cal dental benefits. Coordination of benefits will be established to ensure that members receive access to both their Medicare and Medi-Cal benefits.

## 5. Are members allowed to use Denti-Cal (Medi-Cal) after exhausting their Liberty benefits or will the member need to first exhaust their DentiCal benefits before using Liberty Dental Plan?

Providers will bill Liberty first (primary payor). Denti-Cal is the secondary payor or last resort. If additional benefits are offered and covered by Denti-Cal, providers must submit claims for these services directly to Denti-Cal.

## 6. Will the members be issued a separate dental card to access benefits?

No. A separate Dental ID card will not be provided. It is recommended that members present their LA Care ID card and Medicaid (Medi-Cal) ID card during their appointment.

## 7. Will the member need to have a referral to see a specialist?

No. Referrals are not required on this plan.

## 8. How would the member obtain a prior authorization?

When the office submits a prior-authorization, the member will receive a copy of the final determination. The standard time on a decision for prior authorization is 14 days. Members can also call Liberty to obtain a status of the authorization.



**9. Does a member need to be assigned to a dentist or dental office?**

Assignment is not required but the member must see a Liberty/Denti-Cal in-network provider.

**10. Can members keep their same dental provider under Denti-Cal?**

Liberty's CA Choice Medicare Advantage DUALS network consists of a Medi-Cal participant network. All providers listed on the directory are Liberty + Denti-Cal providers. If a Denti-Cal provider is not listed in the Liberty network, members have the option to nominate a dentist here: [www.libertydentalplan.com/lacaremedicare](http://www.libertydentalplan.com/lacaremedicare)

**11. Will implants be covered by Liberty Dental Plan?**

No. Implants are not a covered benefit.

**12. What is the denture coverage for this plan?**

Yes. Dentures are a covered benefit.

For more information on Denti-Cal benefits, please contact the state Medi-Cal Dental Program to request coverage at: Smile, California PH: **1-800-322-6384**  
<https://smilecalifornia.org/contact-us/>

**13. How much will I have to pay?**

You will pay \$0 for any covered services.

**14. What if a member has another private dental plan? Sometimes beneficiaries will buy a freestanding dental or vision plan to reduce or eliminate their Share of Cost. How will the coordination of benefit occur?**

If a member has a private plan, that policy will be primary and Medicare Secondary.

**15. How can I obtain information on what is covered under this plan?**

For more information on dental benefits, please call Liberty's toll-free number: **1-855-552-8243** TTY 1-800-735-2922 or visit <https://client.libertydentalplan.com/lacaremedicare>.

