2026 CA D-SNP CalOptima Health OneCare Complete

CalOptima Health OneCare Complete	
• 0% coinsurance plan • Frequencies and limitations apply • No out-of-network benefits	No Deductible
Covered Services	**Member Responsibility**
Diagnostic Services Limited Oral evaluations	0%
Restorative Services Crowns	0%
Prosthodontic Services — Removable Replace all teeth and acrylic on cast metal frame, and rebase complete and partial dentures	0%
Prosthodontic Services — Fixed Bridges (pontic and retainer crowns)	0%
Other Services Consults	0%

OneCare
CalOptima Health

LIBERTY
DENTAL PLAN®

CalOptima Health OneCare, has partnered with Liberty Dental Plan to provide covered dental services through participating dental providers. Liberty Dental Plan offers dental benefits to support improved oral health for whole-body wellness. Follow these simple steps to get started on your oral health journey. CalOptima Health OneCare (HMO D-SNP), a Medicare Medi-Cal Plan, is a Medicare Advantage organization with Medicare and Medi-Cal contracts. Enrollment in CalOptima Health OneCare depends on contract renewal. Call CalOptima Health OneCare Customer Service toll-free at **1-877-412-2734** (TTY **711**), 24 hours a day, 7 days a week. Visit us at **www.caloptima.org/OneCare**.

How to Locate a Dental Provider

You may request a list of participating dental providers from Liberty Dental Plan or locate one online at **www.libertydentalplan.com/Find-a-Dentist**. Dental benefits are only available if they are provided by a contracted Liberty provider that is also contracted with Medi-Cal Dental. Please check with your dental office before receiving services to make sure the office is a Liberty/Medi-Cal Dental provider. To ensure the dental office is a participating dentist of our plan, please provide the office your CalOptima Health OneCare Complete member ID number to confirm. Referrals are not required.

Make a Dental Appointment

To find a dentist in your area, you can go to our website at www.libertydentalplan.com, download the mobile app on your smartphone, or call us toll-free at **1-888-704-9838** (TTY **711**), Monday through Friday from 8 a.m. to 8 p.m. Once you have located a Participating Provider, you can call the office to schedule an appointment. The dental office will contact us to verify your eligibility. Be sure to identify yourself as a CalOptima Health OneCare/Liberty Dental Plan member when you call the dentist for an appointment. We also suggest that you take this information with you, along with your CalOptima Health OneCare Complete member ID card when you go to your appointment. You can then reference benefits and applicable charges, which are the out-of-pocket costs associated with your plan.

Log in to Your Liberty Dental Plan Member Portal

Your Liberty Dental Plan account now has information about your dental coverage. When you log into your account online you can:

- View your Dental Benefit Plan
- View Dental Claim Status
- Find a Dentist
- View Dental History and Benefits

Review Your Dental Benefits

Your Schedule of Dental Benefits will explain how your plan works, including a list of dental services that are covered, and what you will be financially responsible for. Your Schedule of Dental Benefits is also available from the Member Portal. **Note:** The Schedule of Dental Benefits is reviewed annually and is subject to change effective **January 1** of each year.

What the CalOptima Health OneCare Complete dental benefit does not cover may be available through the Medi-Cal Dental Program. For a full list of services covered by the Medi-Cal Dental Program, call **1-800-322-6384** (TTY **1-800-735-2922**). These resources can also help you locate a Medi-Cal dental provider and file a grievance or complaint.

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Dental Exclusions and Limitations

Our plan partners with Liberty Dental to provide your dental benefits. Please note that some services require clinical review for pre-authorization approval prior to treatment. Certain documentation must be submitted with these pre-authorization requests. These services are clinically reviewed using the provided documentation to determine if they are indicated and appropriate based on industry standards, and that they meet all requirements specific to such services as outlined in Liberty's Clinical Criteria and Guidelines. Any treatment which, in the opinion of Liberty's Dental Director, is not necessary or does not meet the plan's criteria will not be covered. If the required documentation is not provided, the service cannot be adequately reviewed and will therefore be denied. If the prior authorization is denied for any reason, the service will not be covered, and you will be responsible for all associated costs. Dental procedures for cosmetic or aesthetic reasons are not covered. Coverage is limited to the services listed in the Schedule of Benefits. If a service is not listed, it is not included and is not covered. To locate a network provider or to review Liberty Dental Plan's Clinical Guidelines, you may call Member Services at **1-888-704-9838** or search the Liberty Dental online provider directory at **www.libertydentalplan.com/Find-a-Dentist**. It is recommended that you work with your in-network dentist to check benefit coverage prior to obtaining dental services. If you choose to use a provider outside of the network, the services you receive will not be covered. Additional Limitations and Exclusions are listed below the Schedule of Benefits.

2026 California D-SNP Dental Explanation of Coverage			
CDT Code	Service	Frequency / Limits	Prior Authorization
Diagnostic Services			
D0140	Limited oral evaluation	When medically needed	No

Covered when:
   • Exams are needed to check dental health, review your history, or look at a specific dental problem.
Not covered when:
   • Exams are done more often than allowed.
   • Exams are requested only for appearance.			

Restorative Services			
D2750	Crown – porcelain fused to high noble metal	When medically needed	Yes
D2752	Crown – porcelain fused to noble metal		
D2790	Crown – full cast high noble metal		
D2792	Crown – full cast noble metal		

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2026 California D-SNP Dental Explanation of Coverage

Covered when:
- A tooth is badly broken or has a very large cavity that fillings cannot fix.
- More than half of the tooth is damaged or weak.
- The tooth and gums around it are healthy enough to support the crown for many years.

Not covered when:
- The crown is only for looks (cosmetic).
- The crown is requested because of normal wear from chewing or grinding.
- The tooth already has a crown that still works well.

CDT Code	Service	Frequency / Limits	Prior Authorization
Prosthodontic Services – Removable (Dentures & Partials)			
D5670	Replace all teeth & acrylic on cast metal frame, maxillary	When medically needed	No
D5671	Replace all teeth & acrylic on cast metal frame, mandibular		
D5710	Rebase complete maxillary denture	2 of (D5710–D5761) per arch every year	
D5711	Rebase complete mandibular denture		
D5720	Rebase maxillary partial denture		
D5721	Rebase mandibular partial denture		

Covered when:
- Teeth are missing and you need a denture or partial to chew and speak properly.
- An existing denture or partial no longer fits because your gums or jawbone have changed.
- Rebasing (replacing the inside material) is needed to make a loose denture fit again.
- You can get this service up to 2 times per arch (top or bottom) each year.

Not covered when:
- The denture or partial is still working and can be repaired.
- Replacement is requested only to improve appearance.
- The gums or teeth cannot support the denture for long-term use.

CDT Code	Service	Frequency / Limits	Prior Authorization
Prosthodontic Services – Fixed (Bridges: Pontics & Retainers)			
D6240	Pontic – porcelain fused to high noble metal	When medically needed	Yes
D6242	Pontic – porcelain fused to noble metal		
D6750	Retainer crown – porcelain fused to high noble metal		
D6752	Retainer crown – porcelain fused to noble metal		

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2026 California D-SNP Dental Explanation of Coverage

Covered when:
- One or more teeth are missing and a bridge is needed to fill the space.
- The teeth next to the space are healthy and strong enough to hold the bridge.
- The gums and jawbone around the teeth are healthy.

Not covered when:
- The bridge is only for looks.
- The teeth that would hold the bridge are unhealthy or cannot support it.
- The bridge being replaced is still in good working order.

CDT Code	Service	Frequency / Limits	Prior Authorization
Adjunctive General Services			
D9310	Consultation	When medically needed	No

Covered when:
- A dentist needs to send you to another dentist or specialist to review your case and plan care.

Not covered when:
- The visit is only for cosmetic or non-medical reasons.
- The visit is not medically necessary.