

Cal MediConnect Dental Benefits in Los Angeles County

Cal MediConnect changes the way dual eligibles get their healthcare, including dental services.

In order to understand Cal MediConnect dental benefits, let's start with understanding the way Medi-Cal dental benefits work.

Medi-Cal Dental

In 2014, dental services for adults on Medi-Cal, including dual eligibles, were restored, but the Medi-Cal dental benefit is "carved out." This means a beneficiary's Medi-Cal plan is not responsible for providing or coordinating the dental benefit.

In Los Angeles County, Medi-Cal beneficiaries have TWO ways they can receive their Medi-Cal dental benefit:

DENTI-CAL

Fee-for-service

Beneficiaries will use their Medi-Cal benefits identification card (BIC)

OR

MEDI-CAL DENTAL MANAGED CARE PLAN

Health Net

Liberty Dental Plan

Access Dental Plan

Beneficiaries must access dental services from an in-network provider

Beneficiaries will receive a separate membership card

Now, many dual eligibles also have the option to enroll in CalMediConnect.

Cal MediConnect

Some Cal MediConnect plans offer supplemental dental benefits, like porcelain crowns, in addition to the Denti-Cal benefit. Dual eligibles enrolled in these Cal MediConnect plans with supplemental dental benefits may access:

DENTI-CAL

Denti-Cal covered dental services through Denti-Cal providers

AND

SUPPLEMENTAL DENTAL BENEFITS

Supplemental services through in-network dental providers of their Cal MediConnect plan

LA County Cal MediConnect Plans

LA Care: supplemental offered through Liberty Dental Plan of CA

HealthNet: supplemental offered through Liberty Dental Plan of CA

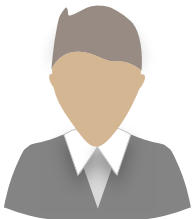
Blue Shield Promise: no dental supplement

Care More: no dental supplement

Molina: supplemental offered through Avesis

- » To the extent the supplemental networks overlap, beneficiaries can access both Denti-Cal and supplemental benefits through the same provider.
- » Beneficiaries should contact their Cal MediConnect plan to confirm that their providers are in-network.
- » When accessing supplemental services, members should show their Cal MediConnect identification card.

Examples



Mr. Lee opted out of Cal MediConnect and joined a Medi-Cal plan of his choosing. Since the Medi-Cal plan is not responsible for his dental benefit, and he did not make a separate enrollment decision about his Denti-Cal, he is in the default option: fee-for-service Denti-Cal. When he needs routine dental services, he visits a FFS Denti-Cal provider.



Ms. Hernandez enrolled in LA Care Cal MediConnect and chose fee-for-service for her Denti-Cal benefit. When she needed a tooth extraction, she visited a fee-for-service Denti-Cal provider for the service. Now she needs a porcelain crown, which is not a Denti-Cal covered benefit. Since porcelain crowns are covered under her LA Care Cal MediConnect plan via the Liberty dental supplement, she can get her porcelain crown from a Liberty Dental Plan provider.

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