Alameda Alliance Wellness (HMO D-SNP)
Dental Benefit
Frequently Asked Questions (FAQs)

Overview

Starting Thursday, January 1, 2026, the Alameda Alliance for Wellness Health Maintenance Organization Dual Special Needs Plan (HMO D-SNP) dental benefit will go into effect. Please see below for a set of frequently asked questions (FAQs) to help you understand your benefit.

Q: When will the Alameda Alliance Wellness dental benefit go into effect?

A: The benefit goes into effect on Thursday, January 1, 2026.

Q: What is Liberty Dental Plan?

A: Liberty Dental Plan has been providing dental benefits since 2001. Liberty has a contracted network of providers that will be providing dental care to Alameda Alliance for Wellness members.

Q: What is the Exclusive Provider Organization (EPO) network?

A: Liberty Dental Plan's Exclusive Provider Organization (EPO) is the network of providers you must use for your Liberty Dental Plan benefits.

Q: How are the Liberty Dental Plan benefits different from what Medi-Cal Dental provides?

A: Alameda Alliance Wellness is offering dental benefits in addition to Medi-Cal Dental benefits. These benefits will be coordinated to ensure you have access to both your Liberty Dental Plan benefits and Medi-Cal Dental benefits.

Q: Do I have to use my Medi-Cal Dental benefits first, before I use my Alameda Alliance Wellness Liberty Dental Plan benefits?

A: Your dentist (provider) will bill Liberty Dental Plan first, and Medi-Cal Dental second, or as a last resort. If additional benefits are offered and covered by Medi-Cal Dental, your dentist (provider) will have to submit claims for these services directly to Medi-Cal Dental.

Q: Will I get a separate dental card to access dental benefits?

A: No, you will not get a separate dental ID card. Please present your Alameda Alliance Wellness member ID card and Medi-Cal ID card at your dental appointment.

Q: Do I need a referral to see a specialist?

A: No, referrals are not required for the Liberty Dental Plan.

Q: How do I get prior authorization (approval) for services?

A: When the dentist (provider) submits a prior authorization, you will get a copy of the final decision. You can also call Liberty Dental Plan to get an update about an authorization.

Q: Do I need to be assigned to a dentist or dental office?

A: Assignment is not required, but you must see a Liberty Dental Plan/Medi-Cal Dental in-network provider.

Q: Can I keep my same dental provider under Medi-Cal Dental?

A: Please visit **https://findadentist.libertydentalplan.com** and select "Alameda Alliance Wellness D-SNP" to find a provider that is part of the Liberty Dental Plan network. All providers listed in the network directory are Liberty Dental Plan and Medi-Cal Dental providers. You must see a Liberty Dental Plan/Medi-Cal Dental in-network provider.

Q: What is the denture coverage for this plan?

A: Denture coverage guidelines fall under Medi-Cal Dental.

For more information on Medi-Cal Dental benefits, please contact:

> Medi-Cal Dental: Smile, California
> Toll-Free: **1.800.322.6384**
> TTY: **1.800.735.2922**
> **https://smilecalifornia.org/contact-us**

Q: How much will I have to pay?

A: You pay $0 for covered services.

Q: What if I have another private dental plan? How will benefits be coordinated?

A: If you have a private freestanding dental plan, it will be the primary plan, and Liberty Dental Plan will be the secondary plan.

Q: How can I obtain information on what is covered under this plan?

A: For more information on dental benefits, please call:

> Liberty Dental Plan
> Toll-Free: **1.888.704.9838**
> TTY: **1.877.855.8039**
> **libertydentalplan.com**