

A healthy smile just got easier with your dental benefit!

As a Molina Healthcare member, you get Dental Options+, your supplemental dental services. Using this benefit is as easy as ABC.

ACCESS

How do I access
the benefit?



Molina gives you more options for your routine dental needs.

Preventive Dental Services

If you use a network provider, you get preventive dental services like:

- oral exams,
- cleanings,
- fluoride treatments, and
- x-rays

at no cost to you.

Annual Allowance

In addition, you will have an annual allowance on your MyChoice card for any comprehensive services at a network provider. To maximize your benefit, remember to use a network provider.

Non-Network Providers

If you go to a dental provider outside of the network, for all services (including preventive or comprehensive services) you must use your MyChoice card and only up to the benefit allowance.

MyChoice

The MyChoice card is a debit card (not a credit card). You can use it for your dental needs. Molina loads your dental benefit allowance to your MyChoice card. We load the allowance at the start of your benefit period (annually). At the end of each benefit year, any unused benefit allowance expires and does not carry over to the following period or plan year.

For questions about your MyChoice Card, call Molina Member services. You can also see your Evidence of Coverage on our website.

Find a Provider

To find a network provider close to you:

- Search online – use our provider search tool at DentalProviderFinderWI.com
- Call Member Services at (855) 315-5663 (TTY: 711), Monday – Friday, 8 a.m. to 8 p.m., local time.

When you call, a representative will verify your eligibility and search for a network dental provider in your area. You do not need a referral from your Primary Care Physician (PCP) for this benefit.

BENEFIT

What is the benefit?

B

Preventive dental services have no annual maximum allowance. Preventive dental services include exams, cleanings, fluoride and x-rays.

We only cover the American Dental Association (ADA) procedure codes listed below. The ADA may update these codes during the year. If you have a question about an ADA code, call Member Services.

Schedule of Covered Supplemental Dental Services

Dental Service Category	Dental Code Description	In-Network You Pay	Out-of-Network You Pay
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PREVENTIVE BENEFITS

Preventive Care: No Maximum Allowance

Oral Exam:	2 every Calendar Year	0%	100%
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Detail:	2 per year either D0120, D0150, or D0180 D0120 – periodic oral evaluation – established patient D0150 – comprehensive oral evaluation – new or established patient D0180 – comprehensive periodontal evaluation		
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Prophylaxis – Cleaning:	2 every Calendar Year	0%	100%
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Detail:	Up to 2 per Calendar Year - D1110 D1110 – prophylaxis – adult		
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Fluoride Treatment:	2 every Calendar Year	0%	100%
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Detail:	Up to 2 per Calendar Year - D1206, D1208 D1206 – topical application of fluoride varnish D1208 – topical application of fluoride		
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DIAGNOSTIC

Members can receive **either** Bitewing, Periapical or Panoramic X-rays

Bitewing X-ray:	4 every Calendar Year	0%	100%
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Detail:	Up to 4 per Calendar Year - D0272, D0274 D0272 – bitewings – two radiographic images D0274 – bitewings – four radiographic images		
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BENEFIT

What is the benefit?

B

Schedule of Covered Supplemental Dental Services (continued)

Periapical X-ray:	6 every Calendar Year	0%	100%
Detail:	Up to 6 per Calendar Year - D0220, D0230 D0220 – intraoral periapical-1st radiographic image D0230 – intraoral periapical-each additional radiographic image		
Panoramic Radiographic X-ray:	1 every 5 calendar years	0%	100%
Detail:	D0330 one per 5 Calendar Years D0330 – panoramic radiographic images		

CONTACT

How do I contact Member Services?

C

Remember you must use a Molina dental network provider. Need help? Call Member Services

Molina Member Services

Phone	(855) 315-5663 (TTY: 711)
Hours	Monday – Friday, 8 a.m. to 8 p.m., local time
Website	MolinaHealthcare.com

Molina network dentists may collect usual, reasonable, and customary fees for all services not covered under your supplemental dental benefit.

Molina Healthcare is a DSNP and HMO plan with a Medicare contract. DSNP plans have a contract with the state Medicaid program. Enrollment depends on contract renewal.

Molina Healthcare complies with applicable Federal civil rights laws and does not discriminate on the basis of race, ethnicity, national origin, religion, gender, sex, age, mental or physical disability, health status, receipt of healthcare, claims experience, medical history, genetic information, evidence of insurability, geographic location.

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