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DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF HEALTH CARE FINANCING AND POLICY

Helping people. It's who we are and what we do.



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Nevada Medicaid – Recipient's Dental FAQs

1. Q: Does my Managed Care Organizations offer dental services?

A: Nevada Medicaid recipients who live in urban Clark and Washoe counties and who are enrolled in a Managed Care Organization (MCO) will have their dental services managed by a Dental Benefits Administrator (DBA), which is LIBERTY Dental Plan of Nevada, Inc. (LIBERTY).

2. Q: Does the Fee for Service Medicaid program offer dental services?

A: Yes, Nevada Medicaid will offer dental services to all Medicaid recipients **not enrolled** in an MCO/DBA through the Fee for Service (FFS) delivery model.

3. Q: What dental services are covered?

A: Nevada Medicaid covers dental services for children under the age of 21 and pregnant women. Coverage for individuals over the age of 21 is limited to emergency extractions, pain management, and some adults may also be eligible to receive dentures and partials under certain conditions.

4. Q: How can I access my dental services?

A: Recipients with MCO coverage will go through LIBERTY Dental, recipients who are not in an MCO will receive benefits through the FFS delivery model. If you are in an MCO, you can contact LIBERTY at 888-401-1128 from 5:00 am – 5:00 pm or by visiting <https://libertydentalplan.com/NVMedicaid>.

5. Q: Can I keep my current dental provider?

A: If you are in an MCO and your dental provider is currently enrolled in Nevada Medicaid and in the LIBERTY network, you will be able to keep your dentist. You will be able to keep your dental provider even if you switch to another MCO. If you are in an FFS area and your dentist is currently enrolled in Nevada Medicaid, there will be no change.

6. Q: How can I find a dental provider?

A: You can find a dentist by using the Medicaid or LIBERTY Online Portals.

- If you **are not** enrolled in an MCO, you can find a provider by using the Medicaid (FFS) Online Portal at: <https://www.medicaid.nv.gov/hcp/provider/Resources/SearchProviders/tabid/220/Default.aspx>
- If you **are** enrolled in an MCO, you can find a provider by calling LIBERTY at 888-401-1128 or visiting the member tab of their Online Portal at: <https://libertydentalplan.com/NVMedicaid>

7. Q: Are referrals for specialty care required?

A: Yes. Specialty care referrals are required for endodontists, oral surgeons, or periodontists.

8. Q: Does my Managed Care cover Orthodontic dental services?

A: The Dental Benefit Administrator (DBA) will provide all covered medically necessary dental services except for orthodontic services, which are covered under Fee for Service.

9. Q: Can the client be a beneficiary of more than one plan? How is the Coordination of Benefits handle for the Nevada Medicaid Program?

A: Yes, Normally Nevada Medicaid is the payer of last resort and is a secondary option to most plans.

10. Q: How will my MCO prior authorizations (PAs) for dental services will be handled?

A: Your dental provider must request a PA from LIBERTY, if needed.

11. Q: If I have any questions regarding my dental services, who should I contact?

A: If you are not enrolled in an MCO, please call the Medicaid District Offices with questions.

- Carson City Office: 775-684-3651
- Reno Office: 775-687-1900
- Elko Office: 775-751-1101
- Las Vegas Office: 702-668-4200

If you are enrolled in an MCO, contact LIBERTY at 866-609-0418 or go to their website at <https://libertydentalplan.com/NVMedicaid>