

A large, vibrant photograph of a diverse group of people of various ages and ethnicities, all smiling and looking towards the camera. The image is partially obscured by a purple curved shape at the bottom right.

2025 Liberty Dental Sharing Guidelines

Effective December 1, 2024

30 years of
sharing
1995 - 2025

Liberty Dental Sharing Program Guidelines

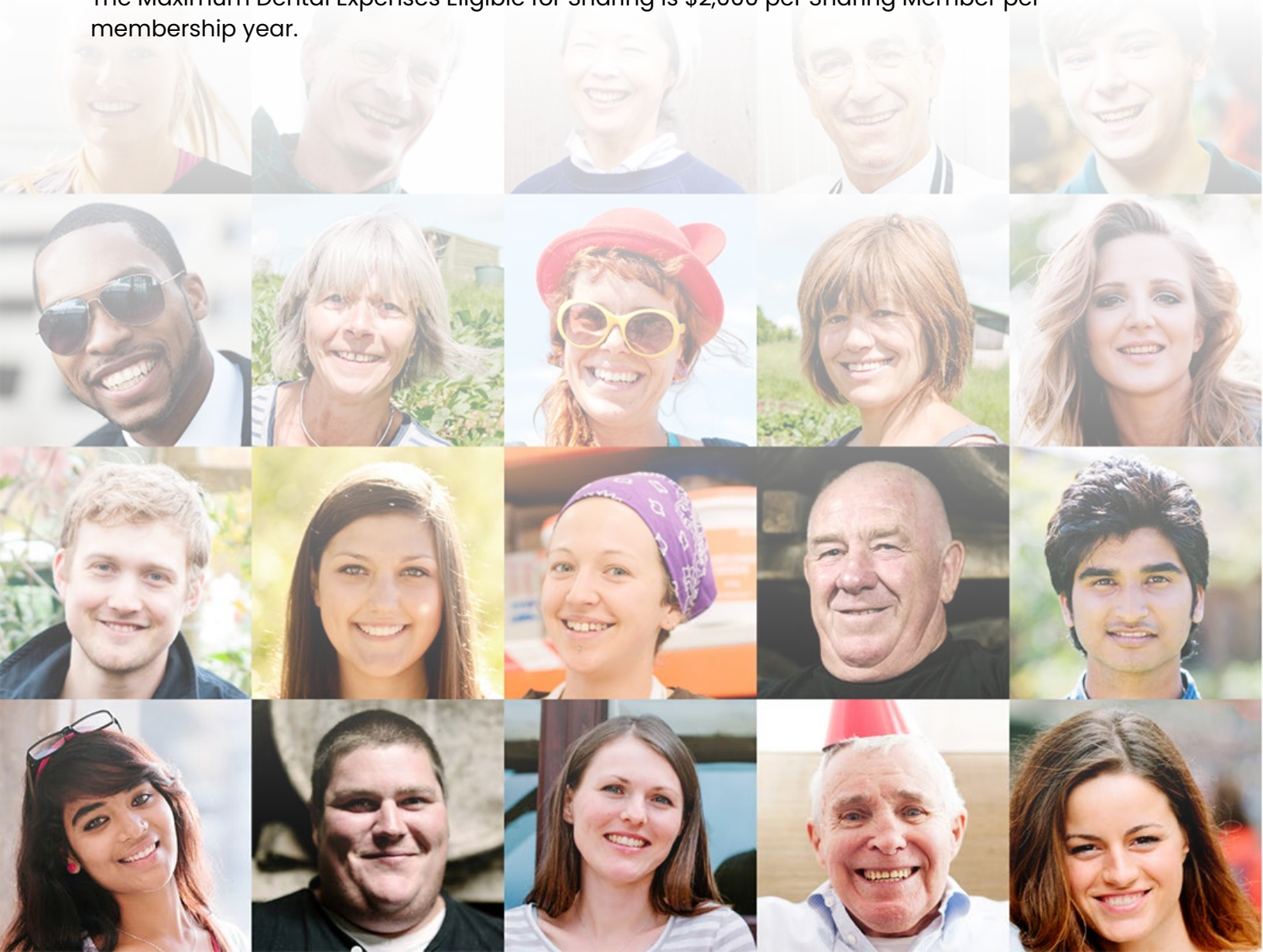
The Primary Member of any Liberty HealthShare® Program may choose to enroll their membership in the Liberty HealthShare Dental Sharing Program. The Dental Sharing Program is not a stand-alone program. Every member on the membership must be enrolled. The Liberty HealthShare Dental Sharing Program can only be discontinued from a membership 60 days prior to the annual membership renewal date.

Eligible dental expenses through the Liberty HealthShare Dental Sharing Program will be submitted for sharing between and among members based on the eligibility requirements outlined below. In this program:

- (1) expenses are considered for sharing the first of the month following enrollment,
- (2) are not subject to a two (2) month waiting period, and
- (3) must be administered or performed by a licensed dentist and subject to the sharing limitations of the program.

The Annual Unshared Amount (AUA) is based on your Liberty HealthShare membership year.

The Maximum Dental Expenses Eligible for Sharing is \$2,000 per Sharing Member per membership year.



A. Class Services

Class A (Preventative) Services

These services are eligible for sharing at 100% with a limit of two visits per member per membership year unless otherwise noted. AUA is waived.

- Exams
- Bitewing X-rays
- Cleanings and Fluoride Treatments
- Sealants
- Panoramic Radiographic Image (Eligible for sharing once every 3 membership years)

Class B (Basic) Services

These services are eligible for sharing at 80% and are subject to AUA prior to sharing.

- All Other X-rays
- Space Maintainers
- Palliative Treatment (Emergency)
- Basic Restorative (Fillings, etc.)
- Endodontics
- Non-surgical Periodontics
- Simple Extractions
- Surgical Periodontics
- Complex Oral Surgery
- General Anesthesia

Class C (Major) Services

These services are eligible for Sharing at 50% after 12 consecutive months of active dental membership and are subject to AUA prior to sharing. Lab fees associated with these services are not eligible for sharing.

- Inlays, Onlays, Crowns, and Single Implant Crowns
- Repair of Inlays, Onlays, and Crowns
- Prosthetics (Bridges, Dentures)
- Repairs of Bridges, Dentures
- Replacement of Missing Teeth

Dentures, bridges and crowns can be replaced if installed at least 5 years prior and are not repairable.

B. Dental Services Not Eligible for Sharing

- Class D Orthodontic Services.
- House or hospital calls for dental services and for hospitalization costs (e.g. facility-use fees).
- Injury that is the responsibility of Workers' Compensation or employer's liability insurance, or for treatment of any automobile-related injury in which the Member is entitled to payment under an automobile insurance policy.
- The HealthSharing contributions would be in excess to the third-party benefits and therefore, Liberty HealthShare would have right of recovery for any sharing in excess.
- Prescription and non-prescription drugs, vitamins, or dietary supplements.
- Procedures that are cosmetic in nature as determined Liberty HealthShare. (e.g. bleaching, veneer facings, personalization, or characterization of crowns, bridges, and/or dentures).
- Elective procedures (e.g. the prophylactic extraction of third molars).
- Congenital mouth malformations or skeletal imbalances (e.g. treatment related to cleft lip or cleft palate, disharmony of facial bone or required as the result of orthognathic surgery including orthodontic treatment).



- Dental implants and any related surgery, placement, restoration, or prosthetics (except single implant crowns).
- Maintenance and removal of implants.
- Diagnostic services and treatment of jaw joint problems. Examples of these jaw joint problems are temporomandibular joint disorders (TMD) and craniomandibular disorders or other conditions of the joint linking the jawbone and the complex of muscles, nerves, and other tissues related to the joint.
- Treatment of fractures and dislocations of the jaw.
- Treatment of malignancies or neoplasms.

- Services and/or appliances that alter the vertical dimension (e.g. full-mouth rehabilitation, splinting, fillings) to restore tooth structure lost from attrition, erosion, or abrasion, appliances, or any other method.
- Replacement or repair of lost, stolen, or damaged prosthetic or orthodontic appliances.
- Preventive restorations.
- Periodontal splinting of teeth by any method.
- Duplicate dentures, prosthetic devices, or any other duplicative device.
- Plaque control programs, tobacco counseling, oral hygiene, and dietary instructions.
- Any condition caused by or resulting from declared or undeclared war or act thereof or resulting from service in the National Guard or in the Armed Forces of any country or international authority, or intentional involvement in terroristic action or civil unrest (including riots, violent protests, or civil disobedience).
- Treatment and appliances for bruxism (e.g. night grinding of teeth).
- Any expenses submitted by the Member or on behalf of the Member in excess of 180 days after the date of service.
- Incomplete treatment (e.g. patient does not return to complete treatment) and temporary services (e.g. temporary restorations).
- Procedures that are:
 - part of a service but are reported as separate services.
 - reported in a treatment sequence that is not appropriate.
 - misreported or that represent a procedure other than the one reported.
 - specialized procedures and techniques (e.g. precision attachments, copings, and intentional root canal treatment).
- Fees for broken appointments.
- Those not Dentally Necessary or not deemed to be generally accepted standards of dental treatment. If no clear or generally accepted standards exist, or there are varying positions within the professional community, the opinion of Liberty HealthShare applies.
- Final restoration of Endodontics.
- Lab fees associated with Prosthodontics-Dentures.



- Services discountable or payable by any other source, such as through a member's medical or health insurance, a government program, liable third-party, or any other third-party payors.
- **Dental care** services provided prior to the membership Enrollment Date or after membership is suspended, expired, or the Member is no longer an Active Member in Good Standing.
- Experimental Procedures.
- Replacement of dentures, bridges, and crowns if installed or placed within current 5 years.
- Implants – not eligible for sharing if prior extraction.

C. How to submit an expense for evaluation of sharing:

- Members select a Licensed Dentist of their choice.
- Members present their Liberty HealthShare Dental Program ID at the time of service.
- Members request that their Licensed Dentist submit the expense electronically.
- If the Member's Licensed Dentist does not submit the expense electronically, the member must mail their dental expense information to the vendor's address detailed on the Liberty HealthShare Dental card.

D. Receipt of Payment from Other Sources

To the extent that dental expenses are subsequently paid by any other source, as allowed by law, the Sharing Member is responsible for reimbursing Liberty HealthShare members for any payment subsequently received from another source which was previously shared among the members and paid.

The right to reimbursement to Liberty HealthShare's members shall take priority over that of the Sharing Member and applies even if the payment received from the other source does not provide full compensation for the actual loss suffered by the Sharing Member, without regard to any asserted "Made Whole" doctrine.

LEGAL NOTICE

This program is not an insurance company nor is it offered through an insurance company. For a complete and state specific list of Legal Notices, please visit www.libertyhealthshare.org/legal-notices.