

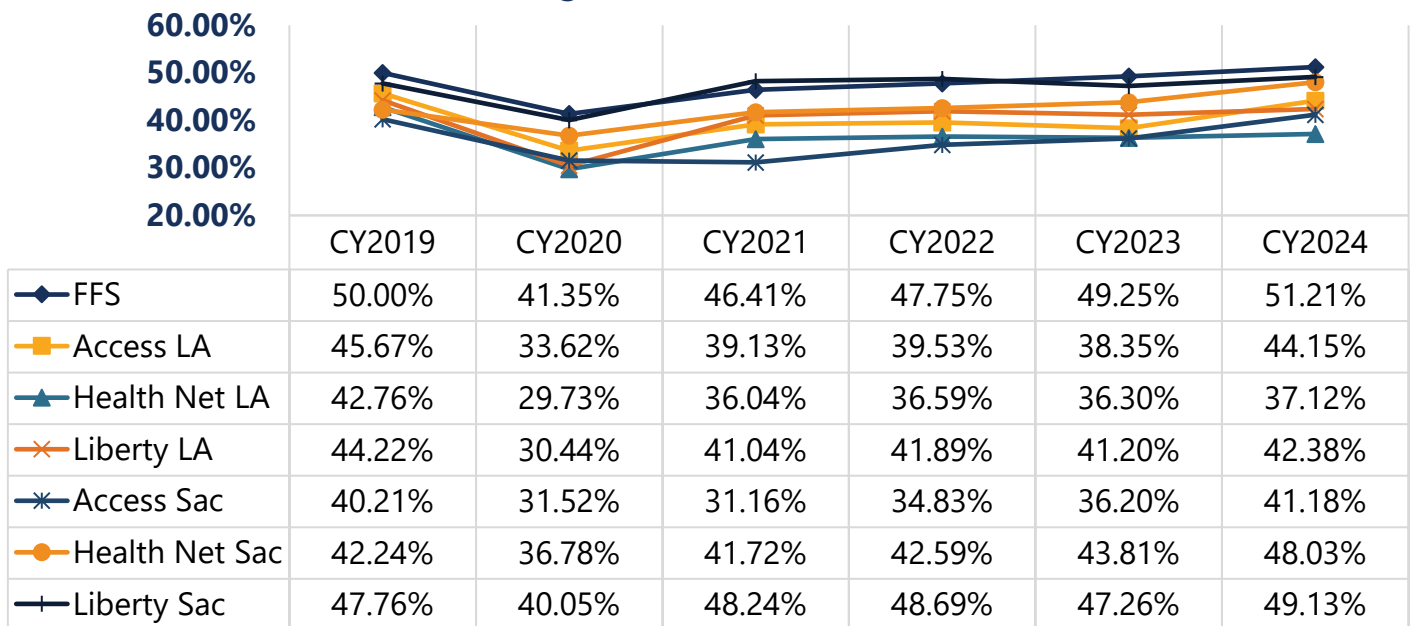
DENTAL UTILIZATION IN CHILDREN

The following section analyzes dental utilization¹ measures for both Fee-For-Service (FFS) and Dental Managed Care (DMC) plans for those aged 0 through 20² by year and by month. The monthly utilization chart shows year-to-date (YTD) 2025 data. At this time, the data is considered preliminary due to WIC § sections 14115, 14124.70 -14124.795, which states that a provider has up to one year after the date of service is performed to bill Medi-Cal. Thus, the monthly data is subject to change month-to-month.

Figure 1: Annual Dental Visits (ADV) by Year for Members ages 0-20

Annual Dental Visits - Annual

CY 2019 - CY 2024 Utilization for Eligibles 0 to 20



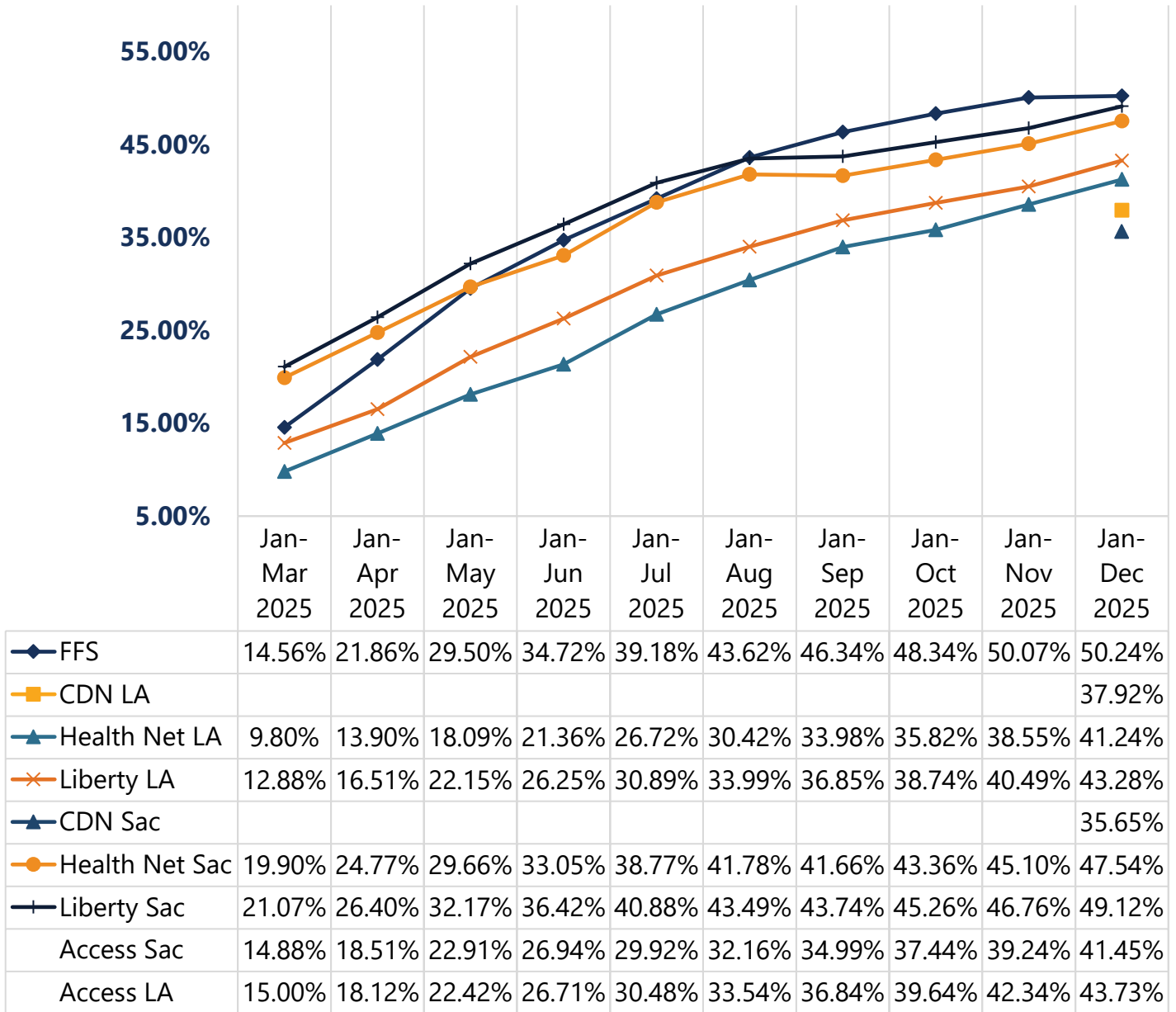
¹ Utilization is calculated based on: **Numerator:** Number of members in the denominator who received any dental service (Current Dental Terminology (CDT) D0100-D9999 or Current Procedural Terminology (CPT) 99188), including dental encounters at safety net clinics (SNCs). **Denominator:** Number of members with at least 90 days continuous enrollment in the same plan during the measurement period.

² Data Source: FFS claims processed through the California Dental Medicaid Management Information System (CD-MMIS); DMC claims received via encounter data submission from the DMC plans; CPT 99188 and SNC claims processed through the California Medicaid Management Information System (CA-MMIS) as of February 2026.

Figure 2: Annual Dental Visits (ADV) by Month for Members ages 0-20³

Annual Dental Visits - Monthly

January - December Utilization for Eligibles 0 to 20



³ California Dental Network (CDN) has replaced Access Dental Plan, effective July 1st, 2025. each member must have a minimum of three consecutive months of eligibility, followed by an additional three-month runout period for claims processing. As a result, January will be the first month in which CDN appears in the data. To maintain continuity and support comparative trend analysis, data from Access Dental activity from January through June will also be included.

Figure 3: Preventive Services by Year for Members ages 0-20

Preventive Services - Annual

CY 2019 - CY 2024 Utilization for Eligibles 0 to 20

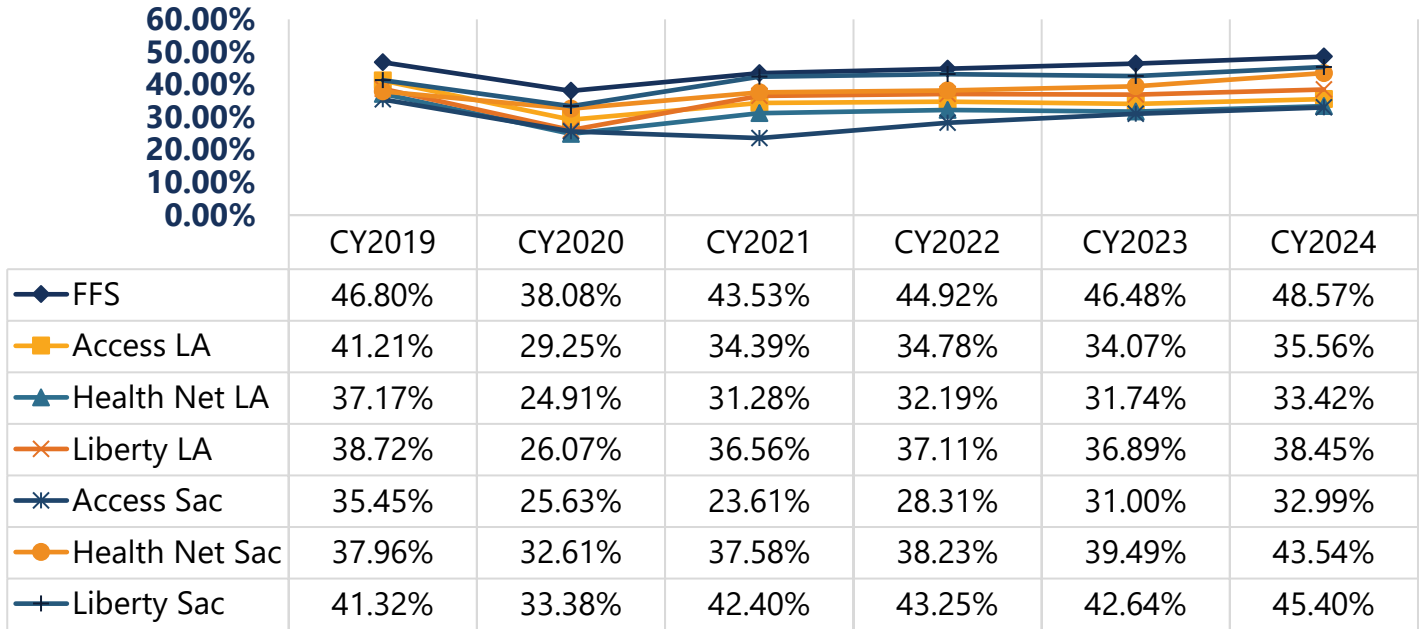


Figure 4: Preventive Services by Month for Members ages 0-20

Preventive Services - Monthly

January - December Utilization for Eligibles 0 to 20

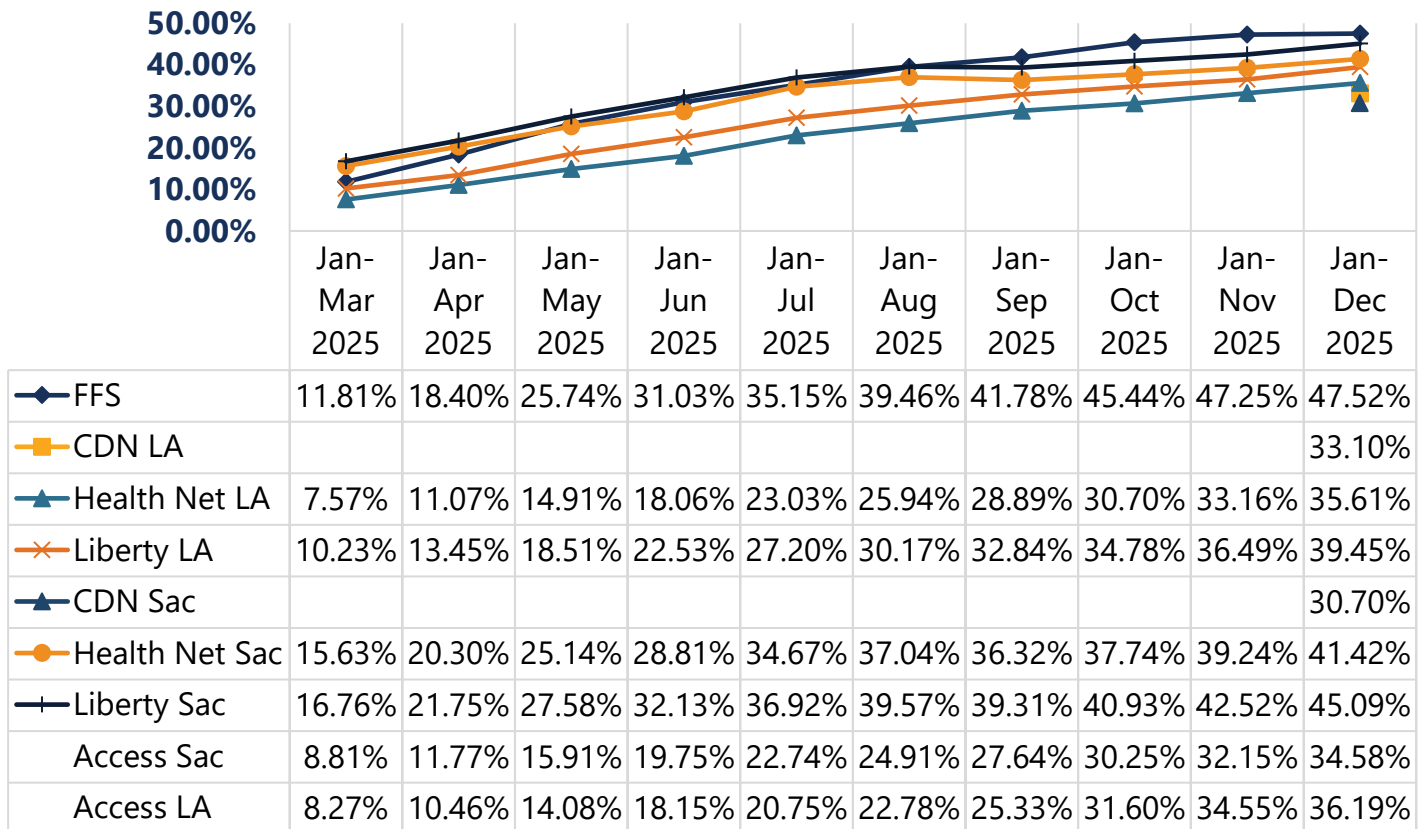


Figure 5: Sealants by Year for Members ages 6-9

Sealants - Annual

CY 2019 - CY 2024 Utilization for Eligibles 6 to 9

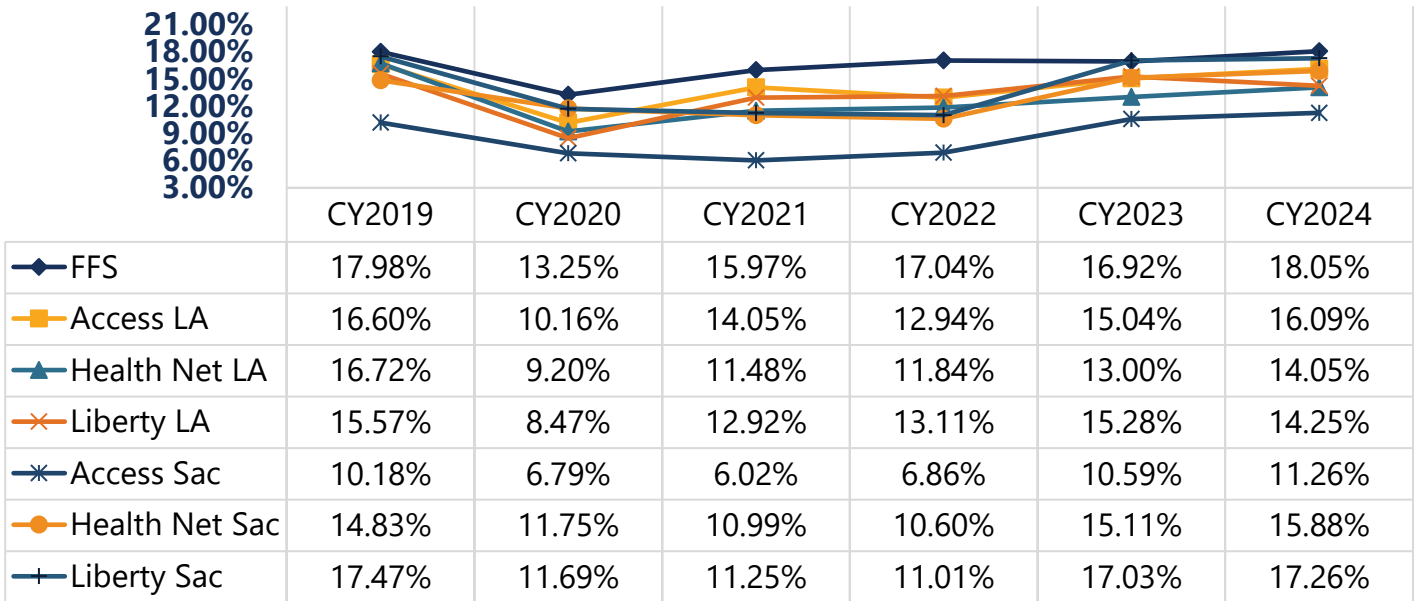


Figure 6: Sealants by Month for Members ages 6-9

Sealants - Monthly

January - December Utilization for Eligibles 6 to 9

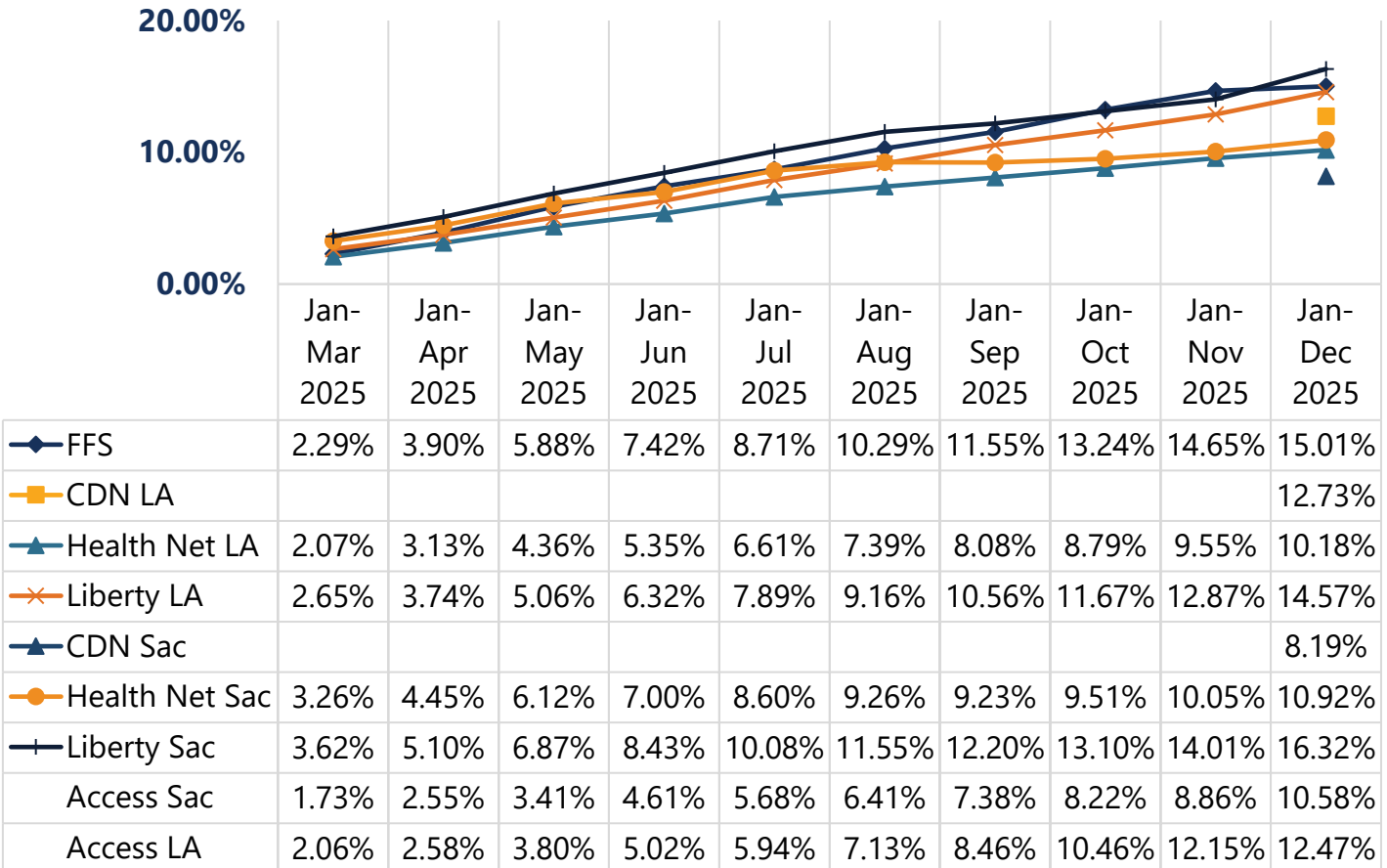


Figure 7: Sealants by Year for Members ages 10-14

Sealants - Annual

CY 2019 - CY 2024 Utilization for Eligibles 10 to 14

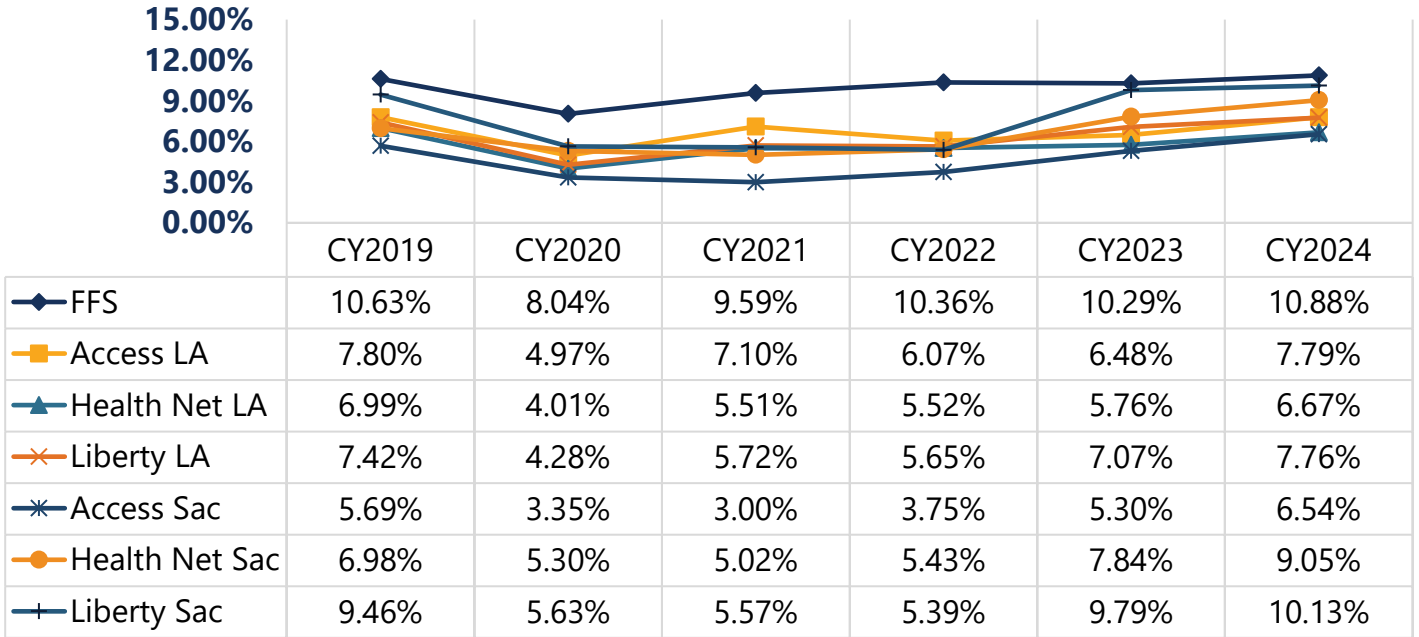
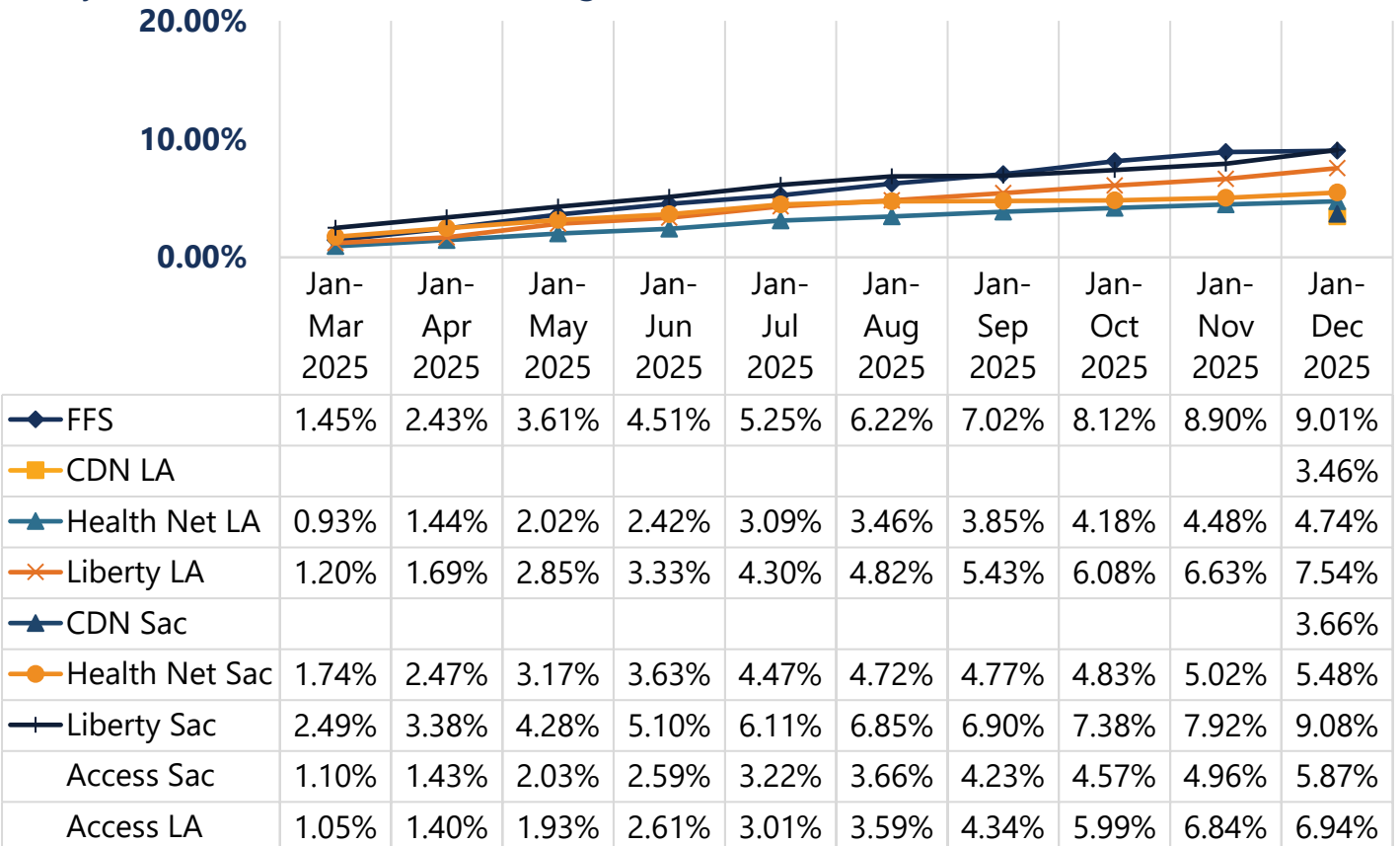


Figure 8: Sealants by Month for Members ages 10-14

Sealants - Monthly

January - December Utilization for Eligibles 10 to 14

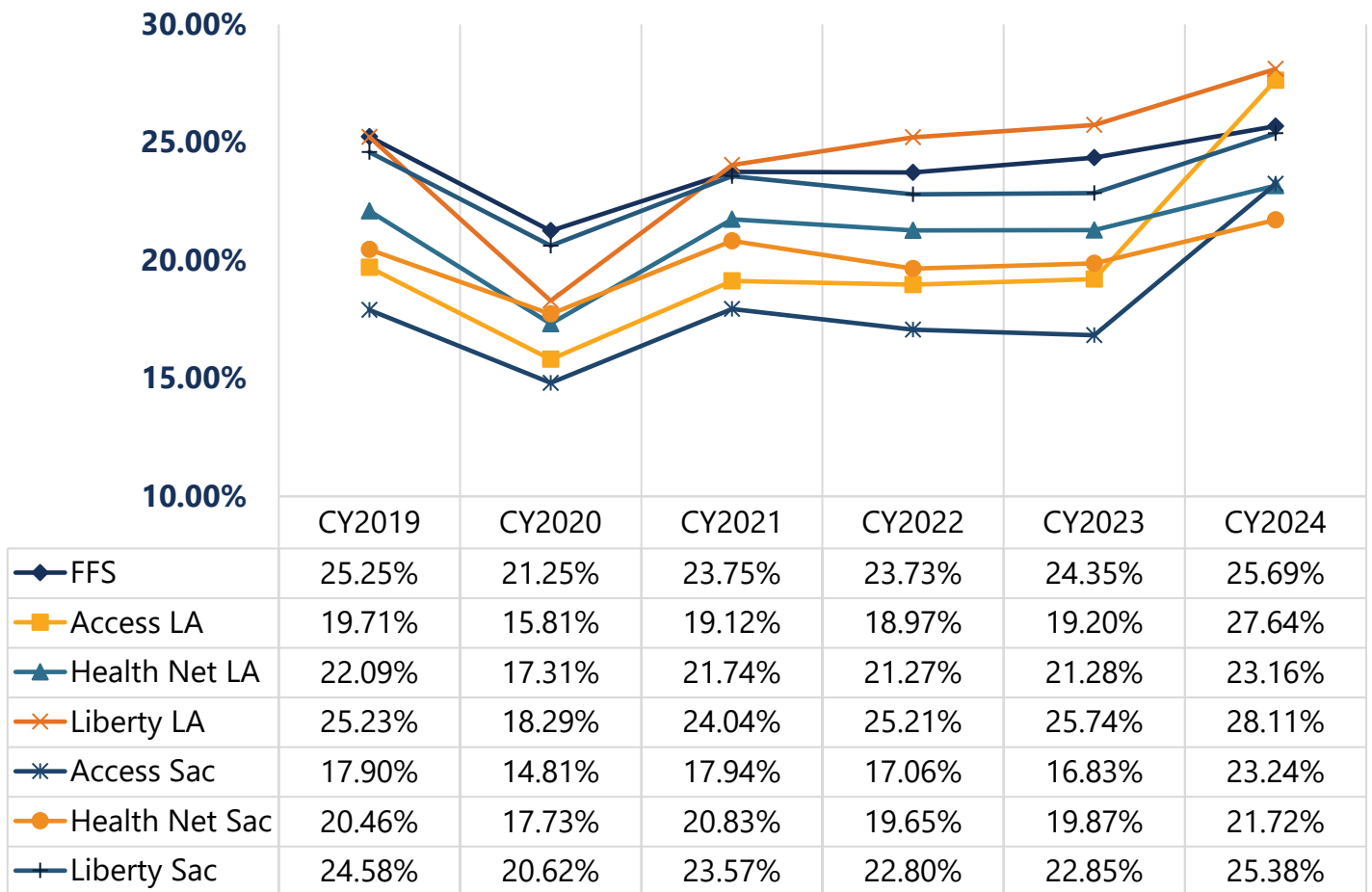


DENTAL UTILIZATION IN ADULTS (AGES 21+)

The following section analyzes dental utilization⁴ measures for both FFS and DMC plans for those aged 21⁵ and above by month. The monthly utilization chart shows YTD 2025 data. At this time, the data is considered preliminary due to WIC § sections 14115, 14124.70 -14124.795, which states that a provider has up to one year after the date of service is performed to bill Medi-Cal. Thus, the monthly data is subject to change month-to-month.

Figure 9: Annual Dental Visits (ADV) by Year for Members ages 21 and older

Annual Dental Visits - Annual CY 2019 - CY 2024 Utilization for Eligibles 21+



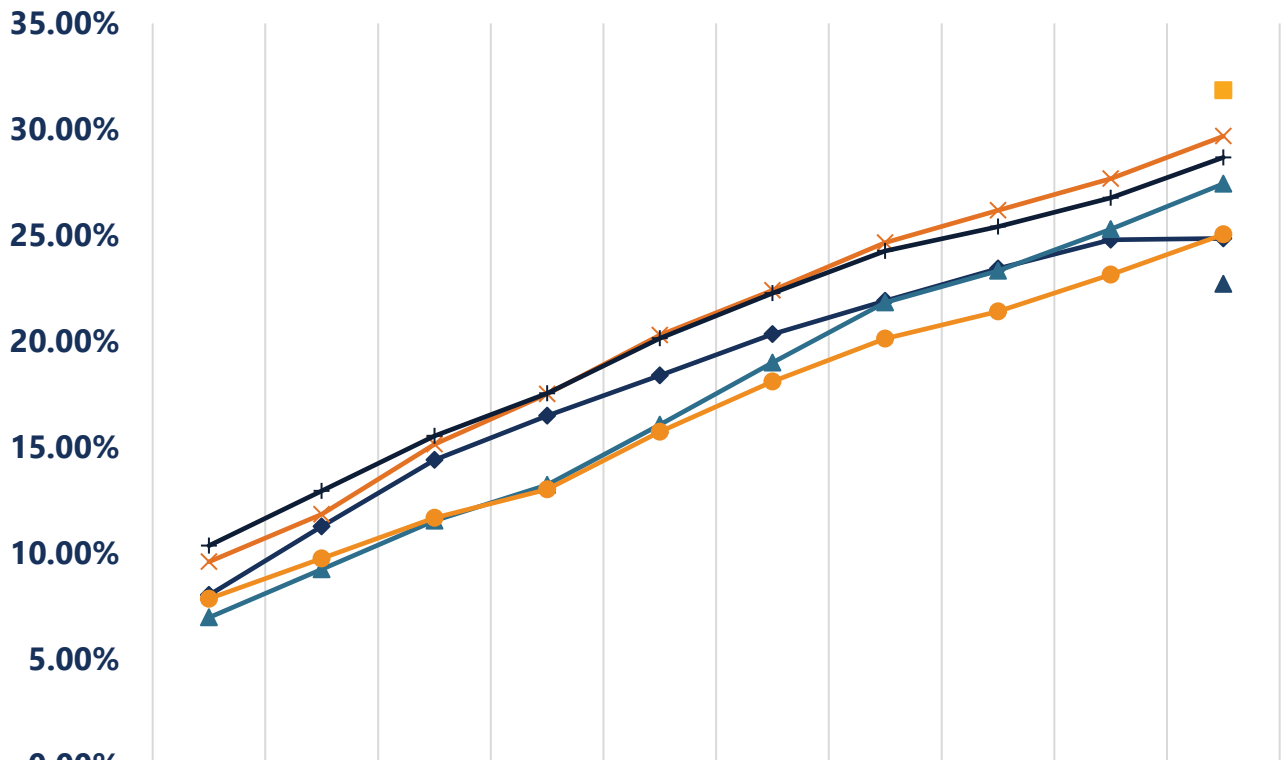
⁴ Utilization is calculated based on: **Numerator:** Number of members in the denominator who received any dental service (Current Dental Terminology (CDT) D0100-D9999 or Current Procedural Terminology (CPT) 99188), including dental encounters at safety net clinics (SNCs). **Denominator:** Number of members with at least 90 days continuous enrollment in the same plan during the measurement period.

⁵ Data Source: FFS claims processed through the California Dental Medicaid Management Information System (CD-MMIS); DMC claims received via encounter data submission from the DMC plans; CPT 99188 and SNC claims processed through the California Medicaid Management Information System (CA-MMIS) as of February 2026.

Figure 10: Annual Dental Visits (ADV) by Month for Members ages 21 and older

Annual Dental Visits- Monthly

January - December Utilization for Eligible Members 21+



| | Jan-Mar 2025 | Jan-Apr 2025 | Jan-May 2025 | Jan-Jun 2025 | Jan-Jul 2025 | Jan-Aug 2025 | Jan-Sep 2025 | Jan-Oct 2025 | Jan-Nov 2025 | Jan-Dec 2025 |
|------------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|
| ◆ FFS | 8.02% | 11.26% | 14.40% | 16.48% | 18.39% | 20.34% | 21.90% | 23.43% | 24.79% | 24.85% |
| ■ CDN LA | | | | | | | | | | 31.84% |
| ▲ Health Net LA | 6.96% | 9.23% | 11.53% | 13.21% | 16.06% | 18.99% | 21.83% | 23.32% | 25.29% | 27.43% |
| ✕ Liberty LA | 9.59% | 11.82% | 15.14% | 17.50% | 20.28% | 22.39% | 24.64% | 26.17% | 27.67% | 29.67% |
| ▲ CDN Sac | | | | | | | | | | 22.70% |
| ● Health Net Sac | 7.85% | 9.74% | 11.66% | 13.01% | 15.72% | 18.09% | 20.12% | 21.40% | 23.14% | 25.04% |
| ✚ Liberty Sac | 10.35% | 12.93% | 15.52% | 17.54% | 20.13% | 22.27% | 24.25% | 25.41% | 26.76% | 28.67% |
| Access Sac | 9.36% | 11.13% | 13.03% | 14.93% | 16.43% | 17.75% | 19.59% | 21.30% | 22.79% | 24.70% |
| Access LA | 11.73% | 13.90% | 16.22% | 18.47% | 20.35% | 21.94% | 23.86% | 25.66% | 27.30% | 28.04% |

Figure 11: Preventive Services by Year for Members ages 21 and older

Preventive Services - Annual

CY 2019 - CY 2024 for Eligible Members 21+

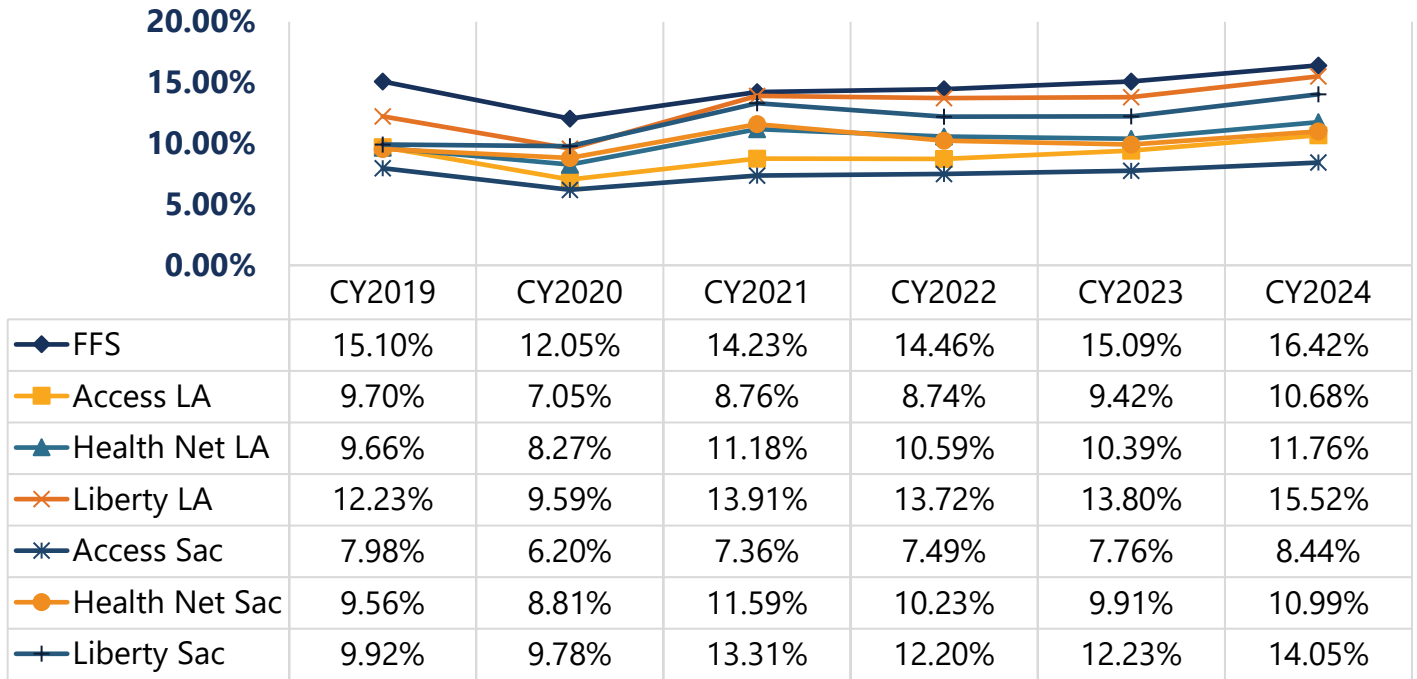
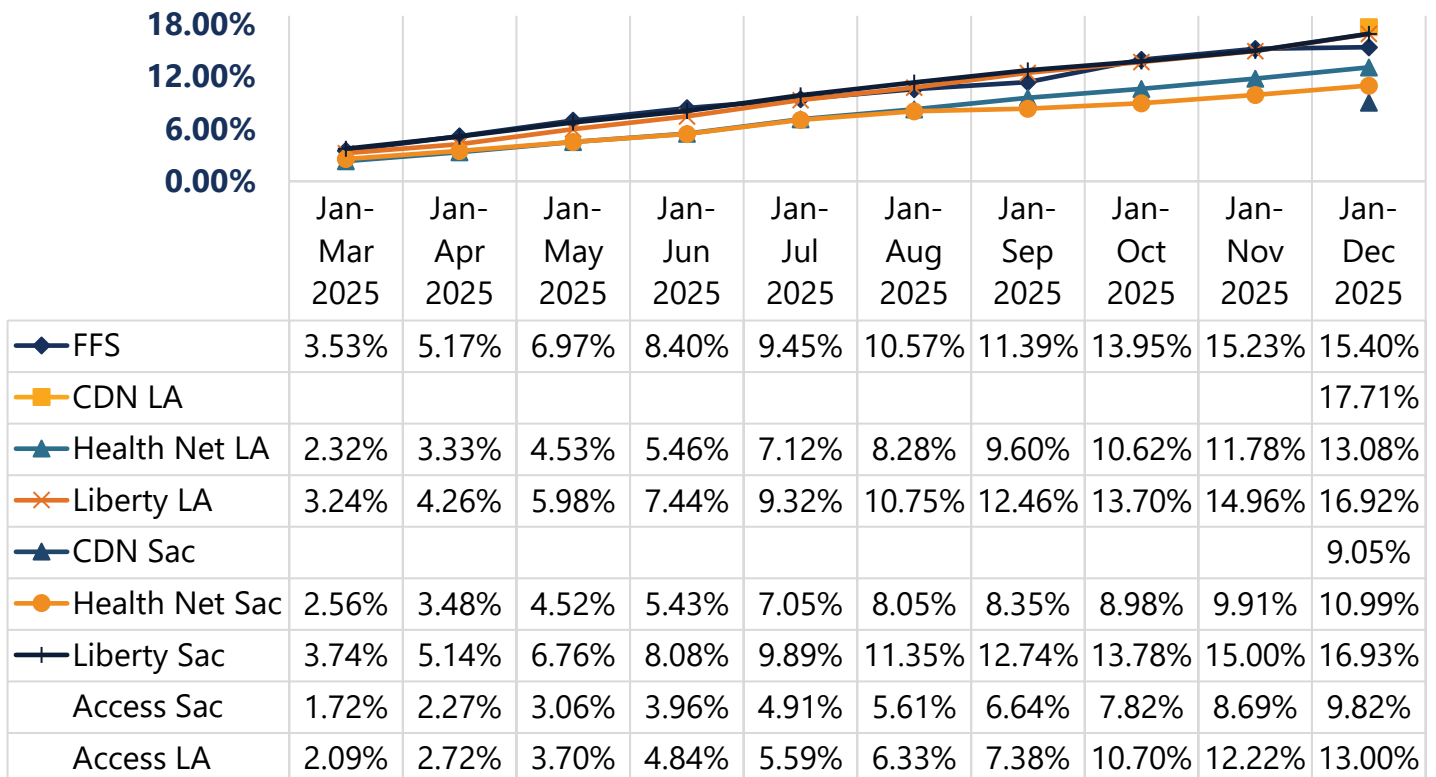


Figure 12: Preventive Services by Month for Members ages 21 and older

Preventive Services - Monthly

January - December Utilization for Eligible Members 21+



RENDERING PROVIDER DATA

The following section provides the count of enrolled providers who provided services separated by counties within the last year to dental offices or Safety Net Clinics (SNCs) within Sacramento, the Los Angeles-area, El Dorado County, Placer County, and Yolo County in both the Fee-For-Service (FFS) and Dental Managed Care (DMC) delivery systems.⁶

Figure 13: Rendering Provider Overlap by County

Rendering Provider Overlap by County

Active Rendering Providers from December 2025

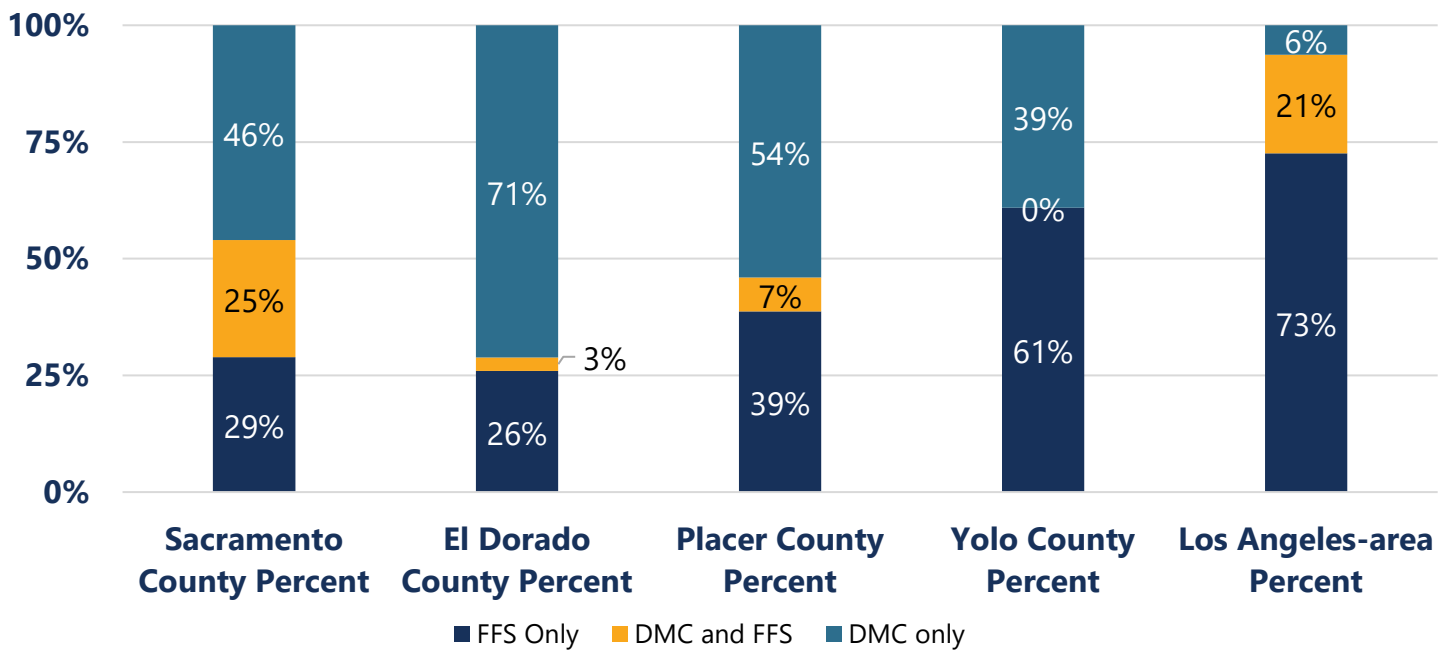


Table 1: Rendering Provider Overlap in FFS and DMC Statewide

| Category | Sacramento Rendering Provider Count | Los Angeles Rendering Provider Count | El Dorado Rendering Provider Count | Placer Rendering Provider Count | Yolo Rendering Provider Count |
|--------------|-------------------------------------|--------------------------------------|------------------------------------|---------------------------------|-------------------------------|
| FFS Only | 257 | 6,422 | 27 | 134 | 53 |
| DMC and FFS | 223 | 1,865 | 3 | 25 | 0 |
| DMC Only | 409 | 559 | 74 | 187 | 34 |
| Total | 889 | 8,846 | 104 | 346 | 87 |

⁶ Data Source: Contractor reports from December 2025.