

Please return to:

LIBERTY Dental Plan Quality Management Department P.O. Box 26110 Santa Ana, CA 92799-6110 (888) 401-1128

Date:	Member Name:	
Subscriber ID:		
Member Home Address:		
Member Phone Number: Home		
Employer Name:		
Dental Facility Name:		
Date of last visit:		
		(OVER)

If you are not satisfied with LIBERTY's final decision, you may contact the Florida Department of Financial Services (FDFS) in writing within 365 days of receipt of the final decision letter. You also have the right to contact FDFS at any time to inform them of an unresolved grievance.

*The Florida Department of Financial Services Consumer Complaints Division State Capitol Larson Building 200 East Gaines Street, Room 637 Tallahassee, Florida 32399-0300 Telephone 1-800-342-2762*