



NEVADA MEDICAID AND NEVADA CHECK UP DENTAL PROGRAM MEMBER HANDBOOK

Have Questions?

Visit us at: www.libertydentalplan.com/NVMedicaid.

Call us at: 866-609-0418/TTY: 877-855-8039

IMPORTANTE:

¿Puede leer este aviso?

Si no, alguien le puede ayudar a leerla. Además, es posible que recibir este aviso por escrito en su propio idioma.

Para obtener ayuda gratuita, llame ahora mismo al 866-609-0418/TTY: 877-855-8039

Call Member Services toll-free at 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

**THIS HANDBOOK IS NOT A CERTIFICATE OF INSURANCE
AND IS NOT TO BE CONSTRUED OR INTERPRETED AS
EVIDENCE OF INSURANCE COVERAGE BETWEEN LIBERTY
AND THE RECIPIENT.**

Table of Contents

Welcome to LIBERTY Dental Plan	5
Notice of Non-discrimination	7
Notice of Language Assistance	9
How to Reach LIBERTY	12
Member Rights and Responsibilities	13
Notice of Privacy Practice	18
Eligibility and Enrollment	20
Care Coordination and Case Management	23
Transportation Services	25
Interpreter/Translation Services	26
How to Get Dental Care	28
Continuity of Care	32
Benefits and Services	33
Treatment Plan and Care	46
Reporting Fraud, Waste, and Abuse	51
Emergency Services	55
Summary of Special Programs	58
Reporting and Solving Problems	61
Notice of Adverse Benefit Determination (NABD):	64
Member Participation	73
Important Dental Tips	74

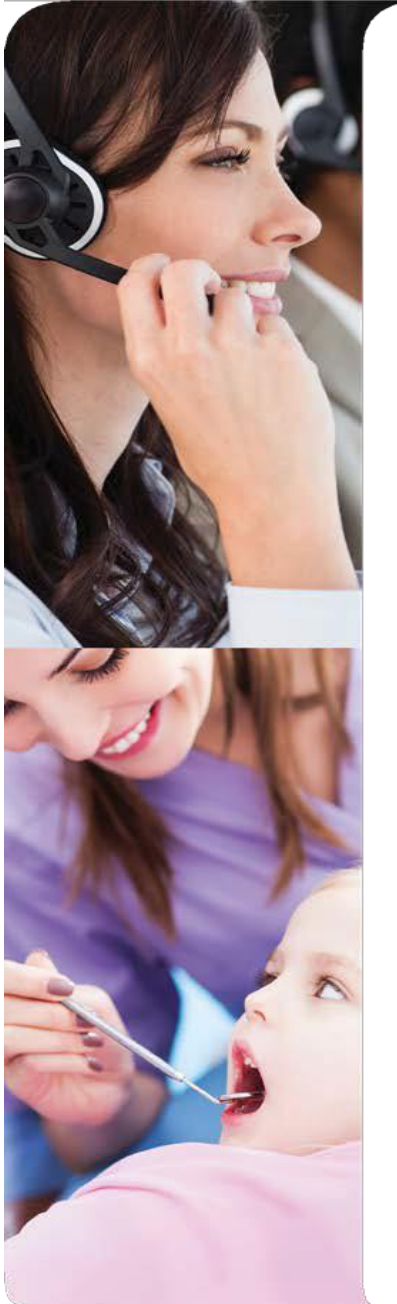
Effective: January 1, 2025

Page | 4

Definitions and Useful Terms.....	77
Frequently Asked Questions	87
Member Documents/Forms	88
Oral Health Risk Assessment (OHRA) Form	92

Call Member Services toll-free at 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

Welcome to LIBERTY Dental Plan



The LIBERTY Dental Plan Difference

At LIBERTY Dental Plan of Nevada, Inc. ("LIBERTY"), our goal is to provide you with local access to quality dental care. We use tools to help improve and maintain your overall dental health.

We are here to help guide you in making the most of your dental benefits. LIBERTY pledges to support you through the excellent customer service you deserve.

You have joined the State of Nevada's Medicaid or Nevada Check Up Dental Program. Your dental care is received through LIBERTY's network of dentists. As a member of this dental Plan, we encourage you to take an active part in the success of your dental health.

LIBERTY highly recommends that you to see your dentist on a regular basis. You can choose a network dentist from our list of providers to be your Dental Home or Dental Office. You will receive your essential covered dental care services at that location. LIBERTY and our network dentists and specialists are here to help schedule dental care services for you.

Call Member Services toll-free at 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

We want you to understand your dental program, benefits, and services. We can help you with covered and non-dental services, along with how to get transportation to and from your scheduled dental appointments.

This handbook is a summary of the dental services available to you. Please keep this handbook to look at for important information about LIBERTY and our operations.

Any questions you have about dental benefits, transportation, or changing your Dental Home, please call our Member Services Department at **866-609-0418 (TTY:877-855-8039)** or visit us online at www.libertydentalplan.com/NVMedicaid.

Our pledge to you

LIBERTY is committed to being the industry leader in providing quality and innovative dental benefits with the utmost focus on member satisfaction.



We look forward to helping you!

Call Member Services toll-free at 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

Notice of Non-discrimination

Discrimination is against the law. LIBERTY Dental Plan (“LIBERTY”) complies with all applicable State and Federal civil rights laws and does not discriminate, exclude people, or treat them differently on the basis of race, color, national origin, age, mental disability, physical disability, sex (including pregnancy, sexual orientation, and gender identity), religion, ancestry, ethnic group identification, medical condition, genetic information, marital status, or gender.

LIBERTY provides free aids and services to people with disabilities, and free language services to people whose primary language is not English, such as:

- Qualified interpreters, including sign language interpreters
- Written information in other languages and formats, including large print, audio, accessible electronic formats, etc.

If you need these services, please contact us at 888-401-1128 (TTY: 877-855-8039).

If you believe LIBERTY has failed to provide these services or has discriminated on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with LIBERTY’s Civil Rights Coordinator:

Phone: 888-704-9833

TTY: 877-855-8039

Fax: 833-250-1814

Email: CivilRightsComplaint@libertydentalplan.com

Online: <https://www.libertydentalplan.com/Members/File-a-Grievance-or-Appeal.aspx>

If you need help filing a grievance, LIBERTY's Civil Rights Coordinator is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights:

U.S. Department of Health and Human Services 200 Independence Avenue, SW

Room 509F, HHH Building Washington, D.C. 20201

800-368-1019, 800-537-7697 (TDD)

Online at: <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>

Complaint forms are available at

<https://www.hhs.gov/ocr/complaints/index.html>

Notice of Language Assistance

If you, or someone you support, have questions about LIBERTY Dental Plan, you have the right to get help and information in your language at no cost. To speak to an interpreter, call **1-888-401-1128/TTY: 1-877-855-8039. (English)**

እርስዎ፣ ወይም እርስዎ የሚያግዙት ግለሰብ፣ ስለ LIBERTY Dental Plan ጥያቄ ካላችሁ፣ ያለ ምንም ክፍያ በቋንቋዎ እርዳታና መረጃ የማግኘት መብት አላችሁ። ከአስተርጓሚ ጋር ለመነጋገር፣ **1-888-401-1128/TTY: 1-877-855- 8039 ይደውሉ። (Amharic)**

إذا كان لديك أو شخص ما تساعده أية استفسارات عن Plan LIBERTY Dental الحق في تلقي المساعدة والمعلومات بلغتك مجاناً. للتحدث إلى مترجم فوري، اتصل على الرقم **(Arabic) TTY:1-877-855-8039/1-888-401-1128**

如果您，或您正在幫助的人，有關於LIBERTY Dental Plan 方面的問題，您有權利免費以您的母語得到幫助和訊息 想要跟一位翻譯員通話，請致電 **1-888-401-1128/TTY: 1-877-855-8039. (Chinese)**

اگر شما یا شخصی که به وی کمک می کنید، سؤالاتی در مورد Plan LIBERTY Dental دارید، شما حق دارید که کمک و اطلاعات را به زبان خودتان و به طور رایگان دریافت کنید. برای گفتگو با مترجم شفاهی، با شماره تماس **(Farsi) TTY:1-877-855-8039/1-888-401-1128** بگیرید

Si vous, ou quelqu'un que vous êtes en train d'aider, a des questions à propos de LIBERTY Dental Plan, vous avez le droit d'obtenir de l'aide et l'information dans votre langue à aucun coût. Pour parler à un interprète, appelez **1-888-401-1128/TTY: 1-877-855-8039. (French)**

Falls Sie oder jemand, dem Sie helfen, Fragen zum LIBERTY Dental Plan haben, haben Sie das Recht, kostenlose Hilfe und Informationen in Ihrer Sprache zu erhalten. Um mit einem Dolmetscher zu sprechen, rufen Sie bitte die Nummer **1-888-401-1128/TTY: 1-877-855-8039 an. (German)**

No dakayo, wenno maysa a tao a tultulunganyo, ket adda kayatyo a saludsoden maipanggep iti LIBERTY Dental Plan, adda karbenganyo a dumawat iti tulong ken impormasion iti bukodyo a pagsasao nga awan ti bayadanyo. Tapno makipatang iti maysa a mangipatarus iti pagsasao, tumawag iti numero nga **1-888-401-1128/TTY: 1-877-855-8039. (Ilocano)**

ご本人様、またはお客様の身の回りの方でもLIBERTY Dental Planについてご質問がございましたら、ご希望の言語でサポートを受けたり、情報入手したりすることができます。料金はかかりません。通訳とお話される場合**1-888-401-1128/TTY: 1-877-855-8039**までお電話ください **(Japanese)**

만약 귀하 또는 귀하가 돕고 있는 어떤 사람이 LIBERTY Dental Plan 에 관해서 질문이 있다면 귀하는 그러한 도움과 정보를 귀하의 언어로 비용 부담없이 얻을 수 있는 권리가 있습니다. 그렇게 통역사와 얘기하기 위해서는 **1-888-401-1128/TTY: 1-877-855-8039**

로 전화하십시오. **(Korean)**

Если у вас или лица, которому вы помогаете, имеются вопросы по поводу LIBERTY Dental Plan, то вы имеете право на бесплатное получение помощи и информации на вашем языке. Для разговора с переводчиком позвоните по телефону **1-888-401-1128/TTY: 1-877-855-8039. (Russian)**

Si usted, o alguien a quien usted está ayudando, tiene preguntas acerca de LIBERTY Dental Plan, tiene derecho a obtener ayuda e información en su idioma sin costo alguno. Para hablar con un intérprete, llame al **1-888-401-1128/TTY: 1-877-855-8039. (Spanish)**

‘Afai olo’o iai se fesili iate oe, po o se tasi olo’o e fesoasoani i ai, e uiga i le LIBERTY Dental Plan polokalame, o iai iate oe le aia tatau e maua atu ai i se fesoasoani po o se fa’atamalaga e uiga i lena polokalame i le gagana fa’asamoa, auno ma se togiga o tupe. Ina ia talatalanoa i se tagata ua malamalama ai i le gagana fa’asoma, po o se tagata fa’aliliu gagana, vili atu e lau telefoni **1-888-401-1128/TTY: 1-877-855-8039. (Samoan)**

Kung ikaw, o ang iyong tinutulangan, ay may mga katanungan tungkol sa LIBERTY Dental Plan may karapatan ka na makakuha ng tulong at impormasyon sa iyong wika ng walang gastos. Upang makausap ang isang tagasalin, tumawag sa **1-888-401-1128/TTY: 1-877-855-8039. (Tagalog)**

หากคุณ หรือคนที่คุณกำลังช่วยเหลือมีคำถามเกี่ยวกับ **LIBERTY Dental Plan**, คุณมีสิทธิที่จะได้รับความช่วยเหลือและข้อมูลในภาษาของคุณได้โดยไม่มีค่าใช้จ่าย พูดคุยกับล่าม โทร **1-888-401-1128/TTY: 1-877-855-8039. (Thai)**

Nếu quý vị, hay người mà quý vị đang giúp đỡ, có câu hỏi về LIBERTY Dental Plan, quý vị sẽ có quyền được giúp và có thêm thông tin bằng ngôn ngữ của mình miễn phí. Để nói chuyện với một thông dịch viên, xin gọi **1-888-401-1128/TTY: 1-877-855-8039. (Vietnamese)**

Call Member Services toll-free at 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

How to Reach LIBERTY

If you have questions about your dental benefits, locating a network provider, or need help scheduling an appointment, please call LIBERTY's Member Services Department toll-free at **866-609-0418**.

Business hours are Monday through Friday 5:00 am to 5:00 pm Pacific Standard Time (PST). Hearing or speech-impaired members please call **877-855-8039**.

Our Address:

LIBERTY Dental Plan of Nevada, Inc.
P.O. Box 401086
Las Vegas, NV 89140

Fax: 1-888-401-1129

You can also contact us online at:

www.libertydentalplan.com/NVMedicaid

LIBERTY's Free Mobile App and Online Services:

LIBERTY's Mobile App and Online Services offer free, quick, and easy online services for you to access your account information. This puts our most popular online features at your fingertips.

LIBERTY's Mobile App features include:

- ✓ Find a Network Provider
- ✓ Look at Your Dental Plan Benefits/Covered Services
- ✓ Check Eligibility
- ✓ Get an Electronic Dental ID Cards
- ✓ Look at Frequently Asked Questions (FAQS)

Call Member Services toll-free at 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

LIBERTY's Online Services include:

- ✓ Locate a Network Provider
- ✓ View Dental Plan Benefits/Covered Services
- ✓ Check Claims History
- ✓ View Claims Status
- ✓ Print/Request Dental ID Cards
- ✓ Complete an Oral Health Risk Assessment Form

Nevada Medicaid Eligibility:

Phone: Northern Nevada 775- 684-7200
Southern Nevada 702-486-1646
Toll Free 800-992-0900

Website: <https://accessnevada.dwss.nv.gov>

Member Rights and Responsibilities

LIBERTY must meet the terms of all federal and Nevada laws that apply to your rights. We also make sure our staff and network providers follow and protect your rights when providing services to our Medicaid members, as required by the Code of Federal Regulations, Enrollee Rights, 42 CFR § 438.100, which is available online at: [eCFR: 42 CFR 438.100 -- Enrollee rights.](#)

Once you are enrolled with LIBERTY, you will have access to the Member Handbook online at: [https://client.libertydentalplan.com/NVMedicaid/Member/DocumentsAndResources.](https://client.libertydentalplan.com/NVMedicaid/Member/DocumentsAndResources)

The Member Handbook includes your Member Rights and Responsibilities. We're happy to provide you with a printed copy of your Member Handbook. Simply give our Member Service Department a call, and one of our friendly, trained representatives will be ready to assist

Call Member Services toll-free at 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

you with your request. You'll receive your copy within five business days, and there's no cost to you.

As a LIBERTY member, you have the right:

- To be treated with courtesy and respect.
- To have your dignity and privacy respected at all times.
- To keep your medical and dental data secure.
- To be given details about your dental benefits and how to use them, including what is covered, dental providers, and your rights/responsibilities.
- To be able to pick your primary care dentist/dental home that is in LIBERTY's network, including specialists if you have a chronic condition.
- To change your primary care dentist/dental home when you request it.
- To select or change your primary care dentist/dental home to a provider that meets your cultural and/or racial preferences
- To have choices about your dental care, including the right to refuse treatment.
- To receive information on available treatment options and alternatives in a way you can understand, regardless of cost or benefit coverage.
- To file a grievance, either over the phone or in writing, about LIBERTY, a dental provider/specialist, or the care you got.
- To ask for an appeal verbally or in writing of a decision made by LIBERTY that was not in your favor.
- To ask for verbal interpretation services in your preferred language at no cost to you.
- To receive fully translated written member information in your preferred language, including grievance and appeals notices.
- To get written Member documents in other forms (such as braille,

Call Member Services toll-free at 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

large-size print, audio, and accessible electronic formats) upon request and promptly based on the type needed at no cost to you.

- To prepare advance directives.
- To ask for a copy of your dental records following federal and state laws that apply and ask that your dental records be updated or corrected.
- To be free from any form of consequences, restraint or seclusion used as a means of coercion, discipline, convenience, or retaliation when making decisions about your care.
- To access your Member Handbook online at any time or to get a printed copy, upon request at no cost to you. Your request for a printed copy will be reviewed and fulfilled within 5 business days of your request.
- If you disagree with a decision or if a service or benefit was denied, you have the right to request a Fair Hearing. This can be done after you have filed an appeal with LIBERTY and are not satisfied with the outcome, or if you haven't received a decision within 30 days. You will also be informed of the circumstances under which an expedited Fair Hearing may be possible.
- To take part in LIBERTY's Member Advisory Committee and make recommendations.
- To have an appointment when you need one.
- To be given the definition of emergency care in case you have a life-threatening illness or injury.
- To have Minor Consent Services.
- To request a second opinion, at no cost.
- To know and understand why LIBERTY has denied, delayed, or limited a service or treatment.
- To have access to LIBERTY's health education programs and outreach services to improve dental health.
- To get free legal help at your local legal aid or other group.

Call Member Services toll-free at 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

- To use your rights without consequences affecting how LIBERTY, dental providers, or the State treats you.

As a LIBERTY member, you have the responsibility to:

- Read your Member Handbook.
- Show your Nevada Medicaid ID card from the State and/or your LIBERTY ID card when getting dental care.
- Go to your dental appointments on time. If you are running late or need to cancel, let your Dental Home know at least 24 hours before your visit to reschedule.
- Not let anybody else use your ID card.
- Please notify the State of Nevada Division of Welfare and Supportive Services if you or a family member experience a qualifying life event, such as pregnancy, that may affect eligibility or enrollment. Also, remember to update them with any changes to your: income, household composition, marital status, address, phone number, or additional medical insurance coverage.
- Take part in your dental health by seeing your dentist regularly and following what you and your dentist agree is best for you.
- Provide dentists with honest and detailed dental information.
- Tell your dentist if you have any sudden changes to your physical and dental health.
- Understand your dental plan and its benefits, the services you can get, what is not covered, and any limits on covered services.
- Treat your dental home, dentist, office staff, and LIBERTY staff, with respect and courtesy.
- Follow all the dental office's rules about care and conduct.
- Your actions if you refuse treatment or do not follow your dentist's or specialist's treatment plan, instructions, or advice.
- Ask your dentist questions to determine the possible risks,

Call Member Services toll-free at 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

benefits, outcomes, and cost of treatment and non-treatment and what options you have.

- Work with your dental home in following a care plan, or letting the dentist know why the treatment cannot be followed right away.
- Use LIBERTY's grievances or appeals processes in this handbook to ask us to take another look at something you don't agree with or when you are unhappy with a provider or Plan decision.
- Please notify LIBERTY and the State of Nevada Division of Welfare and Supportive Services if you have any other dental insurance or coverage.
- Know and follow what is covered by your plan when looking to get dental care.
- Take part in your own care by following your dentist's or specialist's care plan.
- Using the emergency room for true emergencies only.
- Tell us if you think there is provider fraud/abuse.
- Access the health information about you, including the right to inspect or obtain a copy, or both.
- Request in writing the transmission of your PHI to another person or entity you designate.
- Request amendment to your protected health information.
- Request an accounting of disclosures.
- Request restriction of the uses and disclosures of your information, including the right to receive confidential communications.

Call or contact LIBERTY for any questions or information about the Plan at **866-609-0418/TTY: 877-855-8039**.

Notice of Privacy Practice

A statement describing LIBERTY's policies and procedures for preserving the confidentiality of dental records. This Notice of Privacy Practices is available on our website at:

www.libertydentalplan.com/About-LIBERTY/Compliance/HIPAA-Privacy-Notice

You can also call our Member Services Department at **866-609-0418/TTY: 877-855-8039** to ask for a printed copy of this notice at no cost to you.

Confidential Communications

As required by law, this notice is about your rights, our legal duties, and privacy practices with respect to the privacy of Personal Health Information (PHI). This notice also talks about the way we can collect, use, and disclose your PHI. We must follow the notice currently in effect. We have the right to make changes to this notice from time to time and to make the changed notice effective for all PHI we keep. If we make a material change to this notice, we will let you know and will describe the change to you.

We will not disclose medical information related to Sensitive Services provided to a Protected Individual to the Subscriber or any plan enrollees other than the Protected Individual receiving care, absent an express written authorization of the Protected Individual receiving care.

A Protected Individual means any adult covered by the Subscriber's health care service plan or a minor who can consent to a health care service without the consent of a parent or legal guardian, pursuant to state or federal law.

Call Member Services toll-free at 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

“Protected Individual” does not include an individual that lacks the capacity to give informed consent for health care pursuant to Section 813 of the Probate Code.

A health care service plan will not require a Protected Individual to obtain the Subscriber or other enrollee’s authorization to receive Sensitive Services or to submit a claim for Sensitive Services if the protected individual has the right to consent to care.

Sensitive Services means all health care services related to mental or behavioral health, sexual and reproductive health, sexually transmitted infections, substance use disorder, gender affirming care, and intimate partner violence.

LIBERTY must fulfill reasonable requests by individuals to receive communications of protected health information by alternative means or at alternative locations.

To request confidential communications from LIBERTY, please call Member Services or you can submit a request in writing by mail or fax to any of the following:

- **Online:** LIBERTY’s website by visiting Confidential-Communications.
- **By mail to:** Privacy Officer, LIBERTY Dental Plan, PO Box 26110, Santa Ana, CA 92799-6110
- **By telephone to:** LIBERTY’s Member Services at 866-609-0418/TTY: 877-855-8039

Eligibility and Enrollment

LIBERTY is a dental plan for people who qualify for Nevada Medicaid or Nevada Check Up in certain areas of Washoe County or Clark County, Nevada. Payments are sent directly to the dental care providers for services provided to our members.

Who can become a member?

You are eligible for LIBERTY services because you qualify for Nevada Medicaid or Nevada Check Up and live in a covered area of Washoe County or Clark County.

The Division of Welfare and Supportive Services determines Nevada Medicaid and Nevada Check Up eligibility for our members. Online applications can be completed using Access Nevada at accessnevada.dwss.nv.gov.

Can I disenroll?

Nevada Medicaid and Nevada Check Up members enrolled in a medical Managed Care Entity (MCE) are automatically enrolled with LIBERTY. You will be automatically disenrolled if any of the following conditions take place:

- You are no longer eligible for Nevada Medicaid or Nevada Check Up if: you move to a part of the state that is outside of the service area.

If there is not a network provider in your area, LIBERTY will arrange for services at an out-of-network provider.

If you experience poor quality of care, you can change your provider at any time, and you can use your right to file a grievance (complaint).

Call Member Services toll-free at 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

For questions about enrollment or disenrollment, call the Nevada Medicaid District Office at:

Northern Nevada: 775-687-1900 or 800-992-0900 or TTY 7-1-1

Southern Nevada: 702-668-4200 or 800-992-0900 or TTY 7-1-1

Member ID Cards

Each covered member will get an Identification (ID) card from Nevada Medicaid or Nevada Check Up, and one from LIBERTY. You need to bring both your ID card(s) with you to all dental visits. If you lose your ID card or need to correct any information on the card, call Member Services at **866-609-0418/TTY: 877- 855-8039** to ask for a new one.

You can also visit us online at www.libertydentalplan.com/NVMedicaid, or by using the free LIBERTY app on your mobile device or computer to request your ID card. ID cards are mailed in 5 business days from the date of the request.

Your LIBERTY ID card will include:

- Your Medicaid dental ID number.
- Your first name and last name.
- The name, address, and phone number of your dental home/primary care dentist.
- The date you started with LIBERTY for dental benefits.
- What to do if you need emergency dental care.
- The number to call to speak to LIBERTY's Member Services Department or to file a grievance (complaint) or an appeal.
- The number to call to report any suspected fraud, waste, or abuse.

LIBERTY will send you a new card when:

- Your coverage starts
- You ask for one
- When you pick a new dental home/primary care dentist

Call Member Services toll-free at 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

Sample of what your LIBERTY Insurance ID Card will look like:

LIBERTY Dental Plan of Nevada, Inc.
www.libertydentalplan.com/NVMedicaid
 (866) 609-0418

NAME First Name, Last Name

ID# Medicaid ID#

EFPEC 1/1/2025

GRP# [000000]

PLAN Nevada Medicaid Dental

PRV# [000000] Dental Home Name

Dental Home Address

City, State, Zip Code

TEL# (000) 000-0000

STATE OF NEVADA MEDICAID TEL# 1-800-992-0900

NOTICE TO MEMBER

If you have a dental emergency, you should first contact your Primary Care Dentist for an immediate appointment. If your Primary Care Dentist is not available, contact LIBERTY Dental Plan Member Services for assistance. Please refer to your Member Handbook for specific emergency care coverage.

www.libertydentalplan.com/NVMedicaid

EDI Payer ID: CX083



Member Service/Grievance & Appeals:

(866) 609-0418

Normal Business Hours: Monday – Friday 5:00 a.m. – 5:00 p.m. Pacific Time

To report suspected Fraud, Waste or Abuse: (888) 704-9833

THIS CARD DOES NOT GUARANTEE ELIGIBILITY

Care Coordination and Case Management

LIBERTY's goal is to get you the right care, at the right time, from the right provider. You will qualify for Care Coordination/Case Management if you are pregnant, a young adult transitioning from foster care, have a serious medical or behavioral health condition, a dental condition that requires extra support, or have difficulty accessing dental services due to limited resources or conditions.

A Care Coordinator or Case Manager can help you get the care you need such as scheduling an appointment with your Primary Care Dentist (PCD) or dental specialist. Your Health Plan Case Manager can work with us to coordinate your dental care along with other medical services, community-based organizations, and/or the state of Nevada.

To better serve you and your oral health needs

LIBERTY recommends that you complete an Oral Health Risk Assessment (OHRA) to help us meet your health needs. The survey takes 2-3 minutes to complete. The answers you provide help us connect you the services you need. We can also connect you to other health services and community resources in your area to help improve your quality of life.

To take the survey online, scan the QR code below with your smart phone or go to our website at <https://memberohra.libertydentalplan.com/NV> or you can call our Member Services Department at **866-609-0418/TTY: 877-855-8039** to complete the OHRA form.

Call Member Services toll-free at This 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>



For better dental and healthcare support, LIBERTY encourages you to complete the OHRA within these timeframes:

- **Adult Members:** Within the first 90 days of enrollment
- **Child Members (Under 21):** Within 60 days of enrollment
- **Pregnant Members:** Within 30 days of enrollment

Enrolling in Case Management

You can ask to enroll in Case Management at any time by calling our Member Services toll-free at **866-609-04518/TTY 877-855-8039**, or you can email our Case Management Department at: casemanagernv@libertydentalplan.com. You can also ask your dental home/primary care dentist, or an authorized representative, to ask for you.

LIBERTY Community Smiles Outreach Team

LIBERTY has a Community Outreach Team within the Community Smiles Program. This dedicated team of Representatives and Engagement Specialists covers urban Clark and urban Washoe Counties. LIBERTY's Community Smiles Outreach Team provides outreach and education to Medicaid and Nevada Check Up members to ensure dental benefits are used through community outreach events.

Community outreach engagements include, in-person and virtual talks, community-based training, offering educational materials and Call Member Services toll-free at This 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

information, supporting community events, and activities, coordinating access to preventive services with local dental providers, and joining in sponsorship opportunities including dental supply donations.

To find out more, call our Member Services at 866-609-0418/TTY: 877-855-8039

Transportation Services

Do you need a ride to your appointment?

Non-Emergency Medical Transportation (NEMT) is provided to Nevada Medicaid members to get necessary covered services. Nevada Check Up members are not eligible for NEMT services.

How do I schedule transportation?

Transportation services are handled through Medicaid Transportation Management (MTM) to give you NEMT to your dental appointments. You can schedule transportation by:

- Calling MTM's Customer Care Center at **844-879-7341/TTY 711**
- Using "MTM Link" smartphone app or the web portal that lets you and dental facilities book, view, and manage trips. Go online to <https://www.mtm-inc.net/nevada/> or download the mobile app on your smartphone through the app store of your choice.

You can call our Member Services Department at **866-609-0418/TTY: 877-855-8039** to help set up free transportation.

When do I have to call?

You must call at least 3 working days before your non-urgent appointment to set up transportation. If you have less than 3 working days before your appointment or if it is for urgent services, call MTM at

Call Member Services toll-free at This 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

844-879-7341/TTY 711 for help. MTM schedules routine trips Monday through Saturday from 7:00 a.m. to 6:00 p.m. PST.

What information do I need to know when I call?

- The street address, including the city and zip code of both where you need to be picked up from, where they are taking you, and the telephone number.
- If you have a Nevada Medicaid ID number, please be ready to provide it.
- The date and time of your appointment
- Any special needs, including if you need someone to ride with you
- Minors under age 18 must travel with an adult that is 18 years old or older with them. Members 15-17 years of age can travel alone if MTM has an approved Parental Consent Form on file.
- Minors under age 18 that are legally married, emancipated, or obtaining family planning services can travel alone.
- Transportation is only an option when you choose to get care at the closest network provider for the type of care needed.

What if I have a complaint about transportation?

You can file a complaint if you:

- Do not agree with a decision made by MTM.
- Are not happy with any services received from MTM.
- Are not happy about any other part of MTM's transportation services.

To file a complaint, call MTM's 'We Care Line' at 866-436- 0457 or you can go online at: <http://www.mtm-inc.net/nevada/>.

Interpreter/Translation Services

Call Member Services toll-free at This 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

We want to make sure you fully understand your dental benefits. If English is not your primary language, LIBERTY will provide you with free interpretation and translation services in your requested language. To ask for free language services or to let us know your preferred language, please call us at **866-609-0418/TTY: 877-855-8039**.

Who do I call for an interpreter?

To ask for an interpreter call LIBERTY's Member Services Department at **866-609-0418/TTY: 877-855-8039**.

The Member Services Department can help if you:

- Have trouble hearing.
- Have trouble seeing or reading.
- Need materials in other formats including large print, Braille, or Audio.
- Do not speak English.
- Do not read English.

How can I find a dentist who speaks my language?

LIBERTY's Provider Directory lists all languages spoken, including sign language, at each Dental Home/Office and if the office is accepting new members. You can also see an up-to-date and searchable provider directory anytime by visiting us online at www.libertydentalplan.com/NVMedicaid and selecting "Provider Directory".

For help finding a dental provider who speaks your primary language, or if you need a free printed provider directory, call Member Services at **866-609-0418/TTY: 877-855-8039** and we will mail one to you.

Call Member Services toll-free at This 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

If you cannot locate or access a dental provider that speaks your preferred language, free interpreter services can be provided to you.

How can I get a face-to-face interpreter for my dental visit?

To make sure that you can talk with your dentist, you can ask for free interpreter services for your scheduled appointments.

To ask for free face-to-face interpretation services, you must:

- Call LIBERTY at **866-609-0418/TTY: 877-855-8039**.
- Call at least 72 hours before your dental visit.
- Give us the primary language that you speak.
- Give us the details to the Dental Home/Office that you will be seen at.
- Give us the date and time of your scheduled appointment.

How to Get Dental Care

What is a Dental Home?

A “Dental Home” is the Primary Care Dentist or Pediatric Dentist that you or your child have been assigned to for your dental care needs. A Dental Home should be set-up for children by 12 months of age. A Dental Home is a dentist you see regularly for dental care and will always be available to you. Your Dental Home will help you care for your teeth by giving you dental assistance and dental treatment, including referrals for specialty care when needed.

If you have been to a dental office in the past, please check to see if the office is in LIBERTY’s provider network. To locate a Dental Home right for you and your family, call our Member Services Department at **866-609-0418/TTY: 877-855-8039**.

Call Member Services toll-free at This 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

Your Dental Home will work with you and your family to stay healthy. It is important to follow the treatment plan recommended by your dentist.

How do I change my dentist (Dental Home)?

You can call our Member Services Department at **866-609-0418/TTY: 877-855-8039** to change your Dental Home. A Member Services Representative will help you in locating a network provider over the phone.

You can also locate providers online at www.libertydentalplan.com/NVMedicaid on the “Find & Select a Dentist” page or use our LIBERTY Mobile App to change your Dental Home to better meet your social or oral health needs.

How can I find a Dentist?

A list of dentists in your area can be found in LIBERTY’s Provider Directory. The Provider Directory will list all the providers we have in our network, including Federally Qualified Health Centers (FQHCs).

The Provider Directory tells you if the provider is taking new patients and includes the office and provider names, addresses, phone numbers, business hours, and languages spoken by the staff.

In LIBERTY’s effort to improve dental health outcomes and health equity of our members, the Provider Directory includes information about special needs accessibility, tele-dentistry, the race/ethnicity of providers, and any special training they have completed.

The Provider Directory is available online at: www.libertydentalplan.com/NVMedicaid; on the “Find & Select a Dentist” page. or use our LIBERTY Mobile App. If you need a free printed

Call Member Services toll-free at This 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

Provider Directory, call Member Services at **866-609-0418/TTY: 877-855-8039**.

How do I make an appointment?

When you call your Dental Home, tell them that you are a LIBERTY member. Let them know you are calling to make an appointment with the dentist and see which dates and times are best for you.

Write down the date and time of the appointment on your calendar. Please be sure to be on time to your appointment so you will not have to reschedule.

On the date of your appointment, present your LIBERTY ID card and your Nevada Medicaid or Nevada Check Up ID card. The ID numbers on both cards are the same.

It is important that you show up for your dental appointments. If you cannot make it to your dental appointment for any reason, you must let your Dental Home know at least 24 hours before your appointment.

What if I choose to have services at an office that is not my Dental Home?

Call our Member Services Department at **866-609- 0418/TTY: 877-855-8039** to change your Dental Home prior to having dental services. Our Member Services Department will help you change your Dental Home. You have the freedom to be assigned to any LIBERTY network provider.

How do I get services from a dental specialist?

Your Dental Home must send a specialty referral to LIBERTY asking for approval to a dental specialist such as an Endodontist, Oral Surgeon, and/or Periodontist.

Call Member Services toll-free at This 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

Only services that have been pre-approved by LIBERTY, can be performed by a dental specialist. Your dental specialist will submit a prior authorization if you need more services. Services completed by a Pediatric Dentist (Pedodontist) do not require a specialty referral. If you would like for your child to see a Pediatric Dentist, call our Member Services Department at 866-609-0418/TTY: 877-855-8039 to change your child's Dental Home.

What are in-network and out-of-network dentists?

In-network dentists have agreed to join LIBERTY's network to treat our members. Out-of-network dentists have not joined our network.

Benefits will not be paid for services performed by an out-of-network dentist unless you have written approval from LIBERTY or if it is an emergency.

What if I choose to have services with a dentist that is out-of-network?

You will have to pay for any out-of-network services not pre-approved by LIBERTY, except for covered services needed for an emergency.

Medical/Dental Emergency:

LIBERTY covers emergency dental care. Emergency care is available if, without treatment, your health may be in danger, you may experience serious harm to bodily functions, or serious dysfunction of any bodily organ or part.

A dental emergency can be pain, bleeding, or swelling that can cause harm to you or your teeth if not fixed right away. Emergency dental care is available 24 hours a day, 7 days. You do not need approval from LIBERTY to get emergency care.

Call Member Services toll-free at This 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

For medical emergencies, call your primary care physician, call 911, or go to the nearest emergency room. For more information see the Emergency Services section in this handbook.

Continuity of Care

What if I am already receiving care with a dentist that is out-of-network?

You can keep seeing your dentist for up to 12 months from the date you are enrolled with LIBERTY. If your dentist does not join our network by the end of the 12 months, you will need to switch to a dentist in LIBERTY's network.

How do I know if I can keep receiving care from my dentist that is out-of-network?

To qualify for Continuity of Care you must have an existing relationship with the out-of-network dentist. The out-of-network dentist must provide records supporting that you have completed at least one non-emergency appointment during the 12 months before the date of initial enrollment with LIBERTY. All cases of continuity of care will be reviewed by the Case Management team.

Members transitioning from Fee-For-Service (FFS) or another dental plan can also request continuity of care.

What if my dentist stops working with LIBERTY?

If your dentist stops working with LIBERTY, you may be able to keep getting services from that dentist. This is another form of continuity of care. LIBERTY will continue your care for:

- Services that have not been finished by the dentist before leaving the LIBERTY network.
- Services that have not been finished by an out-of-network dentist when you became enrolled with LIBERTY.

Call Member Services toll-free at This 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

LIBERTY will continue your care if the following terms are met:

- The services are covered under your dental plan.
- The services are medically necessary (needed).
- The services meet our clinical guidelines.
- You do not have access to a LIBERTY dental provider in your area.

LIBERTY will **not** continue your care if:

- The services are not covered under your dental plan.
- The services are not medically necessary (needed).
- The services do not meet our clinical guidelines.
- You had access to a LIBERTY dental provider in your area.

To learn more about continuity of care, please call our Member Services Department at **866-609-0418/TTY: 877- 855-8039**.

Benefits and Services

What your dental plan covers

The following dental services are included in your LIBERTY dental plan. These covered services are free to you if they are medically necessary (needed).

Care is needed if it:

- Stops, prevents, and removes dental disease.
- Maintains your dental health.
- Stops pain and illness related to dental disease.
- Returns the form and function of the way your teeth come together.
- Corrects defects or injuries to the face.

Call Member Services toll-free at This 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

We offer these types of dental services:

Type of Service	Examples
<input type="checkbox"/> Diagnostic	Oral exams and x-rays
<input type="checkbox"/> Preventive	Teeth cleanings, fluoride treatments, and sealants (for children)
<input type="checkbox"/> Restorative	Fillings and crowns
<input type="checkbox"/> Endodontic	Pulpotomies and root canals
<input type="checkbox"/> Periodontal	Gum treatment and surgery
<input type="checkbox"/> Removal Prosthodontics	Immediate and complete dentures, relines
<input type="checkbox"/> Oral and Maxillofacial Surgery	Extractions (Tooth removal)
<input type="checkbox"/> Adjunctive General	Sedation, general anesthesia

Call Member Services toll-free at This 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

Summary of Benefits:

Summary of Covered Services by Age/Category			
Services	Newborn to Age 20	Adults 21 or older	Pregnant Adults 21 or Older
Comprehensive Exam	YES	YES ¹	YES
Focused Exam	YES	YES	YES
Periodic Exam	YES	NO	YES
X-rays	YES	YES	YES
Caries Risk Assessment	YES	NO	NO
Application of caries arresting medicament	YES	YES ¹	YES
Prophylaxis (cleaning)	YES	YES ¹	YES
Fluoride	YES	NO	YES
Fluoride Varnish	YES	NO	YES
Fillings; Amalgams (silver)/ Composites (white)	YES	YES ²	YES
Restorative Crowns	YES	YES ²	YES
Scaling and Root Planing (deep cleaning)	YES	NO	YES

Summary of Covered Services by Age/Category			
Services	Newborn to Age 20	Adults 21 or older	Pregnant Adults 21 or Older
Periodontal	YES	NO	YES

¹ Non-Pregnant adults age 21 and over receive coverage under LIBERTY's value-added services.

² Adults age 21 and over receive coverage under special circumstances and services must be priorauthorized by LIBERTY to be covered.

Maintenance			
Root Canals	YES	NO	YES ¹
Full Dentures	YES	YES	YES
Extractions	YES	YES	YES
Emergency Services	YES	YES	YES

1 Value Added Benefits offered by LIBERTY dental

2 prior authorization is required. Covered services are for adjacent/ abutment tooth for partials

Nevada Medicaid Members under age 21

The table below includes the following examples of the dental services, and the allowed amounts allowed, that Nevada Medicaid covers for **members under age 21** that do not require prior authorization:

Covered Services for members under age 21 that do not require prior approval:						
Service	Per Rolling Months:					Lifetime
	3	6	12	36	60	
Periodic Exam		1				
Limited Exam		2				
Comprehensive Exam			1			
Screenings and Assessments		1	1*			
Oral Exams for Children 0-3		1				
Full Mouth X-rays				1		

Call Member Services toll-free at This 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

Covered Services for members under age 21 that do not require prior authorization:						
Service	Per Rolling Months:					Lifetime
	3	6	12	36	60	
Periapical (Single) X-rays			13			
Bitewing X-rays		1				
Panoramic X-ray				1		
Teeth Cleaning		1				
Fluoride Services		1	1*			
Sealants					1	
Fillings (Per Tooth)				1		
Restorative crowns (per tooth)						1
Pulpotomy (Per Tooth)				1		
Root Canals (Per Tooth)						1
Periodontal Scaling Root Planing (Deep Cleaning)			1			
Cleaning		1				
Extractions						1
Full Dentures					1	
Partial Dentures					1	
Palliative Treatment		2				

LIBERTY members, under age 21, receive additional benefits for the following services:

- *One additional fluoride and screening service every 12 months performed by a PCP or their office clinical staff or by Mobile Unit based providers.
- Caries risk assessment 1 per 12 months.
- Interim Caries Arresting Medicament (D1354) application per tooth, every 6 months.

For more information on the dental benefits for members under the age of 21, you can visit our website at:

https://client.libertydentalplan.com/Content/documents/NVMedicaid/LDP_NV_Medicaid_DentalPlan_FactSheet.pdf

You can also call our Member Services at **866-609- 0418/TTY: 877-822-8039** with any questions you have on your dental benefits.

Newborns through age 20 require the following services to be prior authorized:

- ✓ Any service not listed under the section ‘What Does Your Dental Plan Cover’ must be prior authorized.
- ✓ All services performed by a dental specialist require a referral and prior authorization.

Services completed by a Pediatric Dentist do not require a specialist referral. If you would like for your child to see a Pediatric Dentist, call Member Services at **866-609-0418/TTY: 877-822-8039** to change your child’s Dental Home.

Additional benefits under Early and Periodic Screening, Diagnostic and Treatment (EPSDT) can be available for members under the age of 21

when they are medically necessary. If you have questions on EPSDT, please contact your Dental Home and speak to your dentist.

Early and Periodic Screening, Diagnostic and Treatment (EPSDT)

The EPSDT program recommends that all children have an established Dental Home by 12 months of age to help with early intervention.

Children under the age of 21 qualify for EPSDT benefits when covered under Medicaid. EPSDT services identify healthcare issues early to prevent the child's health from getting worse. EPSDT allows for the following:

- Dental services that are medically necessary and covered by Medicaid but are not part of the current Nevada Medicaid or Nevada Check Up Programs.
- Dental services that are needed more often than the frequency allowed by the Nevada Medicaid or Nevada Check Up Programs.
- Dental services that include relief of pain and infection, restoration of teeth, and maintenance of dental health.

In these cases, the member may be eligible for EPSDT when the documentation from the child's Dental Home supports the medical necessity (need) to correct and improve the member's condition.

LIBERTY will decide medical necessity (need) based on information and documents your Dental Home sends us. EPSDT services are provided at no cost to you.

Call our Member Services at **866-609-0418/TTY: 877-855-8039** for more information or contact your Dental Home and speak to your Primary Care Dentist.

Nevada Medicaid Adult Members ages 21 and over:

The table below includes the following examples of the dental services, and the allowed amounts, that Nevada Medicaid covers for **adult members ages 21 and over:**

Services for adult members ages 21 and over						
Service	Per Rolling Months:					Lifetime
	3	6	12	36	60	
Limited Exam		2				
Focused Exam		1				
Services for adult members ages 21 and over						
Service	Per Rolling Months:					Lifetime
	3	6	12	36	60	
Comprehensive Exam ¹			1			
Screenings and Assessments		1				
Full Mouth X-rays				1		
Periapical (Single) X-rays			13			
Bitewing X-rays		1				
Panoramic X-ray				1		
Fillings (Per Tooth) ²				1		
Crowns ²						1
Extractions						1

Call Member Services toll-free at This 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

Full dentures					1	
Partial dentures¹					1	
Denture relines²		1				
Alveoloplasty* (smoothing of gums)						1 per quadrant
Palliative treatment		2				

* Only allowable in preparation for full dentures

¹ Partial dentures are allowed for adults ages 21 and over when at least 4 or more teeth in a row are missing, not including third molars (wisdom teeth)

² Denture relines are allowed 3 per arch every 60 months. No additional payment is allowed for relines within 6 months from delivery of the denture.

LIBERTY members, ages 21 and over, receive additional benefits for the following services:

- Teeth cleaning (prophylaxis) once every 12 rolling months.
- Interim Caries Arresting Medicament (D1354) application per tooth – 2 every 12 months.

Adults ages 21 and over require the following services to be prior authorized:

- All services performed by a dental specialist require a referral and prior authorization.
- Fillings
- Crowns
- Periodontal Maintenance (for pregnant adults only).
- Periodontal scaling/root planing (deep cleaning) (for pregnant adults only).

Services that are not covered by your dental plan:

There are some services that are not covered by LIBERTY or Nevada Medicaid, including:

- Non-dental related services
- Any dental procedure that is not specifically listed as covered under the Nevada Medicaid or Nevada Check Up plans.
- Dental services started before active coverage or after termination of coverage with LIBERTY.
- Procedures, services, appliances, or restorations to treat Temporomandibular Joint Dysfunction (TMJ).
- Dental services that are determined to be for cosmetic purposes

by a LIBERTY dentist.

- Dental services for the removal of third molar teeth (wisdom teeth) that do not have meaningful signs of decay, irreversible pain, and infection and/or the teeth are not blocking the eruption of other teeth.
- Dental services that are determined not to be medically necessary (needed), by a LIBERTY dentist.
- Procedures performed to restore tooth structure lost from abrasion, erosion, attrition, or abfraction (tooth grinding, clenching, or wear not from decay)
- Procedures to change the position of the way your upper and lower teeth come together and the space between them.
- Any services performed outside of your Dental Home office, unless approved by LIBERTY or covered as emergency dental care.
- Routine dental service performed by a dentist or dental specialist in an inpatient/outpatient hospital setting.

LIBERTY understands there can be other treatment options that can be offered to you; however, your Dental Home is responsible for providing covered services as listed by your Plan. If you choose to have any non-covered service(s) you will be responsible for all the costs of the service(s), LIBERTY will not pay or cover any non-covered service(s).

Nevada Medicaid Adult Members, ages 21 and over, that are pregnant:

The table below includes the following examples of additional dental services, and the allowed amounts, that Nevada Medicaid covers for **adult members, over age 21, that are pregnant:**

Additional Covered Services for adult Members ages 21 and over that are pregnant

Service	Per Rolling Months:				
	3	6	12	36	60
Comprehensive Exam			1		
Interim Caries Arresting Medication		1			
Teeth Cleaning		1			
Topical Fluoride		1			
Gingivectomy/ Gingivoplasty					4
Periodontal Scaling Root Planing (Deep Cleaning)			1		
Periodontal Maintenance	1				

As a member of LIBERTY, who is pregnant and age 21 and over, you also receive these additional services at your Dental Home while you are pregnant:

- 2 additional cleanings (prophylaxis) every 12 rolling months.
- 1 deep cleaning (D4346) every 12 months.
- 1 root canal every 12 months.
- Interim Caries Arresting Medicament (D1354) application per tooth, every 6 months.

Additional pregnancy related services are available only when you are determined eligible for pregnancy-related services by the Welfare Division.

It is important that you notify the Welfare Division immediately when your pregnancy has been confirmed by a medical professional so your additional dental benefits can be received. You can call the Welfare Customer Service unit at:

Northern Nevada: 775-687-1900 or 800-992-0900 or TTY 711

Southern Nevada: 702-668-4200 or 800-992-0900 or TTY 711

Pregnancy related dental services stop on the date of delivery, except for services that were approved but not completed prior to the end of the pregnancy.

Do I have to get prior authorization for services?

There are some services that are covered but you must get pre-approval before you can get them done. Pre-approval means that LIBERTY has reviewed the services your Dental Home or dental specialist has requested and agrees that the care is medically necessary (needed).

For services that require pre-approval, your Dental Home will send LIBERTY the request with the needed information to decide if the services are medically necessary. The request will be reviewed by a LIBERTY dentist. LIBERTY will notify you, and your Dental Home in writing of our decision to approve or deny the services requested.

Only a licensed dentist who works for LIBERTY can deny services requested by your Dental Home due to medical necessity (need). Standard pre-approvals are processed within 14 calendar days of receipt and urgent prior authorization requests are processed within 72 hours of receipt.

You or your Dental Home can request up to 14 additional calendar days if more time is needed for you to send additional information you want LIBERTY to consider.

LIBERTY can also request up to 14 additional calendar days if we think it is in your best interest to gather additional information. Requests for extensions must be approved by the Division of Health Care Financing and Policy/Medicaid Division. Requests will be submitted by LIBERTY to Medicaid and the results shared with you.

Treatment Plan and Care

Once your oral exam has been done at your Dental Home, you will be given a treatment plan. Your dentist will discuss the benefits and importance of treatment against non-treatment along with any alternative treatment options.

You have the right to receive information on available treatment options, choices, and to take part in decisions about your health care including the right to refuse treatment.

What if I want a second opinion?

You can request a second opinion from another LIBERTY dentist or an out-of-network dentist for any reason at no cost. To request a second opinion, please call our Member Services Department at **866-609-0418/TTY: 877-855-8039**.

Your Dental Home can also request a second opinion for you. They will submit the forms needed with supporting x-rays to LIBERTY. All requests for second opinions are handled by LIBERTY within 5 business days of receipt of the request.

If you or your dentist believe it is an emergency, let LIBERTY know and

your second opinion may be completed within 72 hours of receipt. LIBERTY will call your Dental Home about any concerns you may have. Once you have been told that your second opinion is approved, you can schedule an appointment. You can request a copy of LIBERTY's policy for a second opinion for free.

Do I need to submit claims?

You do not need to file claims directly with LIBERTY. Claims are sent by your Dental Home on your behalf.

Services done by a dental specialist are reported to LIBERTY by the specialist. If you receive services from an out-of-network provider due to an emergency after-hours or out-of-area situation, please see the Emergency Service section of this handbook for more information.

Can I ask for copies of my dental records?

Yes. You can ask LIBERTY for a copy of your dental records, and for a copy of all the information that was used by the Plan to decide on a claim, prior authorization, appeal, or grievance.

We will give you one free copy of the requested records we have on file from your provider. For a copy of your full dental records, you will need to speak with your Dental Home.

If you would like to ask for a copy of your records that LIBERTY has on file or the information used to decide on a claim, prior authorization, appeal, or grievance, please send your request in writing to one of the following:

Mail: LIBERTY Dental Plan
Member Services Department
P.O. Box 401086
Las Vegas, NV 89140

In Person: 6385 S Rainbow Blvd #200 Las Vegas, NV 89118

Fax: 1-888-401-1129

Once your authorization to release records is submitted and reviewed, LIBERTY will provide you with a copy of the records for your review.

To request assistance in obtaining your dental records and authorizing release, please call our Member Services Department at **866-609-0418/TTY: 877-855-8039**.

What if I have other insurance coverage?

As a member, you must tell us if you have any other health insurance (third party liability). If you or anyone in your family has other dental insurance, you must tell LIBERTY, the State of Nevada Division of Welfare and Supportive Services, and your dentist.

Any other insurance coverage is considered primary to your coverage with LIBERTY and must pay first, with the exception of the Ryan White Program.

You can have other dental insurance through your job, or your children can have other dental insurance through another parent. You must tell LIBERTY if you have any other coverage, by calling Member Services at **866-609- 0418/TTY: 877-855-8039**. When you visit your Dental Home, you must also let them know about any other insurance coverage. This will help us make sure all your services are paid. You will also need to advise the State of Nevada Division of Welfare and Supportive Services to prevent eligibility issues.

How can I report suspected fraud, waste, or abuse?

LIBERTY is committed to doing business in an honest and ethical

Call Member Services toll-free at This 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

manner. We seek to operate in strict compliance with all regulatory requirements that relate to and run our business and dealings with employees, members, providers, business associates, suppliers, competitors, and government agencies.

Health care fraud includes, but is not limited to, making planned statements that are not true, misrepresentations, or leaving out important facts on purpose from any record, bill, claim, or any other form to get payment, services, or any type of compensation for health care services that you are not allowed.

Health care fraud, waste, and abuse costs taxpayers billions of dollars each year. You can help stop fraud by reporting it.

Some types of health care fraud are:

- Using someone else's ID card to get a service or product.
- Loaning, selling, or giving your ID card to someone.
- Doctors billing for a service not performed, or billing for a service or product that is not needed.
- Faking eligibility information to gain coverage.
- Members seeking prescriptions for opioids or controlled substances which are not medically necessary (needed).
- Providers writing prescriptions for opioids or controlled substances which are not medically necessary (needed).

To report possible unethical business practices or potential illegal activity regarding our Dental Plan, our providers, vendors, or members, you can contact LIBERTY at the following:

Phone: 888-704-9833/TTY: 877-855-8039

Fax: 1-714-389-3529

Call Member Services toll-free at This 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

E-mail: compliancehotline@libertydentalplan.com

Mail: LIBERTY Dental Plan Special Investigation Unit
P.O. Box 401086, Las Vegas, NV 89140-1086

In person: 6385 S Rainbow Blvd #200 Las Vegas, NV 89118

You can remain unidentified if you want. All information received will be treated as confidential, and the results of investigations will be discussed only with persons having a real reason to receive the information.

What kind of quality control or improvement is done by LIBERTY?

We have many quality programs in place to ensure you get the care you need. Some examples of our quality programs include:

- Member and provider surveys used to measure satisfaction.
- Supporting members that have been identified for assistance and helping with the coordination of their care.
- Educating members through newsletters, health fairs, and other means.
- Reviewing the types and quality of services given to members.
- Giving members access to various educational materials and tools online.
- Measuring various access standards like how long it takes for a member to get an appointment.
- Member Advisory Committee (application in Forms section).

Phone calls are also monitored to make sure calls are answered timely and that all information provided is correct and complete. All member complaints are reviewed and tracked for any trends or areas for

improvement.

All of LIBERTY's contracted dentists have gone through strict credentialing procedures, background checks, and office reviews. Each dentist must follow strict contractual rules and be reviewed on a regular basis to ensure compliance with Nevada and federal laws.

Reporting Fraud, Waste, and Abuse

LIBERTY has multiple ways that allow you to confidentially report potential violations to LIBERTY, Medi-Cal, and HHS-OIG. These options include the following:

- LIBERTY's Corporate Compliance Hotline: 888-704-9833
- LIBERTY's Compliance Unit email: compliancehotline@libertydentalplan.com
- LIBERTY's Special Investigations Unit Hotline: 888-704-9833
- LIBERTY's Special Investigations Unit email: SIU@libertydentalplan.com
- Fraud, waste, and abuse can be confidentially reported to the U.S. Department of Health & Human Services, Office of Inspector General (HHS-OIG) Whistle Phone number at 1-800-HHS-TIPS 1-800-447-8477 or TTY 1-800-377-4950.

Fraud is knowingly and willfully executing, or attempting to execute, a scheme or artifice to defraud any health care benefit program or to obtain, by means of false or fraudulent pretenses, representations, or promises, any of the money or property owned by, or under the custody or control of, any health care benefit program.

Examples of fraud can include:

Call Member Services toll-free at This 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

- Billing for services and treatments that were not completed.
- Misrepresenting the services or treatments performed (submitting a different dental procedure code to increase reimbursement).
- Soliciting, offering, or receiving a kickback, bribe, or rebate.

- Waste includes practices that, directly or indirectly, result in unnecessary costs to the Medicaid Program, such as overusing services. Waste is not normally considered to be caused by criminally negligent actions but rather by the misuse of resources.
- Examples of waste may include:
 - Over-utilization of services or treatments.
 - Misuse of resources.

Abuse includes actions that can, directly or indirectly, result in unnecessary costs to the Medicaid Program. Abuse involves paying for items or services when there is no legal entitlement to that payment, and the provider has not knowingly or intentionally misrepresented facts to obtain payment.

Examples of waste can include:

- Misusing dental procedure codes on a claim.
- Charging excessively for services, treatments, or supplies.
- Billing for services that were not medically necessary (needed).

Both fraud and abuse can expose providers to criminal and civil liability. LIBERTY expects all providers and members to comply with applicable laws and regulations, including, but not limited to, the following:

- Federal and State False Claims Act
- Qui Tam Provision (Whistleblower)
- Anti-Kickback Statute

- Physician Self-Referral Law (Stark Law)
- HIPAA
- Social Security Act
- US Criminal Codes

State & Federal False Claims Laws

The Federal False Claims Act is a law that prohibits a person or entity, from “knowingly” presenting or causing to be presented a false or fraudulent claim for payment or approval to the Federal government, and from “knowingly” making, using, or causing to be made a false record or statement to get a false or fraudulent claim paid or approved by the Federal government. The Federal False Claims Act also prohibits a person or entity from conspiring to defraud the government by getting a false or fraudulent claim allowed or paid. These prohibitions extend to claims submitted to Federal health care programs, such as Medicare or Medicaid.

The Federal False Claims Act broadly defines the terms “knowing” and “knowingly.” Specifically, knowledge will have been proven for purposes of the Federal False Claims Act if the person or entity: (1) has actual knowledge of the information; (2) acts in deliberate ignorance of the truth or falsity of the information; or (3) acts in reckless disregard of the truth or falsity of the information. The law specifically provides that a specific intent to defraud is not required to prove that the law has been violated.

Whistleblower Protection Act: Private persons are permitted to bring civil actions for violations of the Federal False Claims Act on behalf of the United States (also known as "qui tam" actions) and are entitled to receive percentages of monies obtained through settlements, penalties

and/or fines collected. Persons bringing these claims, also known as relators or whistleblowers, are granted protection under the law.

Specifically, any whistleblower who is discharged, demoted, suspended, threatened, harassed, or in any other manner discriminated against by his or her employer because of reporting violations of the Federal False Claims Act will be entitled to reinstatement with seniority, double back pay, interest, special damages sustained as a result of discriminatory treatment, and attorneys' fees and costs.

Anti-Kickback Statute: The Anti-Kickback Statute is the popular name for The Medicare and Medicaid Fraud and Abuse Statute, 42 U.S.C. § 1320a-7b (b). The Anti-Kickback Statute is a federal criminal law. It prohibits offering or accepting kickbacks to generate health care business.

The Anti-Kickback Statute is a healthcare law that prohibits individuals and entities from a willful and payment of “remuneration” or rewarding anything of value – such as position, property, or privileges – in exchange for patient referrals that involve payables by the Federal healthcare programs. These payables include, but are not limited to, drugs, medical supplies, and healthcare services availed by Medicare or Medicaid beneficiaries. Under the provisions of the Anti-Kickback Statute, the law prohibits the soliciting, receiving, offering, or paying any remuneration (including any kickback, bribe, or rebate) directly or indirectly, overtly, or covertly, in cash or kind.

Stark Law Physician Self-Referral Law: The Physician Self-Referral Law the Stark Law refers to Section 1877 of the Social Security Act (the Act) 42 U.S.C. 1395nn. The Physician Self-Referral Law, commonly referred to as the Stark law, prohibits physicians (including dentists) from

referring patients to receive “designated health/dental services” payable by Medicare or Medicaid from entities with which the physician (including dentist) or immediate family member has a financial relationship.

Law now insists that any medical professional who provides such a referral to a Medicare or Medicaid patient must concurrently provide written notice of that patient’s right to go elsewhere along with a list of nearby alternatives.

Finalizing new, permanent exceptions for value-based arrangements to that will permit physicians and other health care providers to design and enter value-based arrangements without fear that legitimate activities to coordinate and improve the quality of care for patients and lower costs would violate the physician self-referral law. This supports the Center of Medicare and Medicaid Services (CMS) broader push to advance coordinated care and innovative payment models across Medicare, Medicaid, and private plans.

LIBERTY requires all its providers and members to report violations and suspected violations on the part of its employees, associates, persons, or entities providing care or services to all Medicaid enrollees.

Examples of such violations include bribery, false claims, conspiracy to commit fraud, theft, or embezzlement, false statements, mail fraud, health care fraud, obstruction of a state and/or federal health care fraud investigation, money laundering, failure to provider medically necessary services, marketing schemes, illegal remuneration schemes, identity theft, or enrollees’ medication fraud.

Emergency Services

Call Member Services toll-free at This 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

Emergency care is covered anywhere in the world. If you reasonably believe that not getting immediate care could be dangerous to your life or to a part of your body, call 911 or go to the nearest hospital.

Emergency care can include care for a bad injury, severe pain, or a sudden serious dental condition. All follow-up care should be done at your assigned Dental Home. Do not go back to the emergency room for follow-up dental care.

You do not need pre-approval to receive emergency/urgent dental services from any in-network or out-of-network provider. You have the right to use any provider for emergency/urgent services. You can also call LIBERTY's Member Services at **866-609-0418/TTY: 877-855-8039**; LIBERTY's 24-hour on-call service will help you.

You can also visit www.libertydentalplan.com/NVMedicaid to find a dentist and location where emergency/urgent dental care is provided. Your Dental Home will inform you about their after-hours urgent dental care policy, including how to contact a dental provider 24 hours a day, 7 days a week for emergency/urgent services.

Directions for what to do in an emergency

If you require emergency dental care, call your Dental Home to schedule an immediate appointment. For urgent or unexpected dental conditions that occur after-hours or on weekends, contact your Dental Home for instructions on what steps to take.

If your Dental Home is not available, or you are out of the area and cannot contact LIBERTY for help, you can call any licensed dentist to receive emergency care.

The dentist may need you to pay in full for the emergency dental care.

Call Member Services toll-free at This 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

However, LIBERTY will refund you for covered dental emergency services that you paid for. If you pay a bill for emergency care, send a copy within 90 calendar days to:

Mail: LIBERTY Dental Plan
Member Services Department
P.O. Box 401086
Las Vegas, NV 89140
Fax: 1-888-401-1129

You should let LIBERTY know as soon as possible after you receive emergency dental services by calling our Member Services at **866-609-0418/TTY: 877-855-8039**.

What services are covered under emergency care?

LIBERTY will cover emergency dental services only if services are needed. LIBERTY will also cover these services if you believe that the condition, if left untreated, can lead to disability, dysfunction, or death. If you encounter a situation in which there is an imminent and serious threat to your health, you can choose to call 911. The use of such system should be done so responsibly.

Emergency dental services covered by LIBERTY include dental screenings, examinations, and evaluations by a dentist or dental specialist.

The dental provider will determine the emergency services necessary to relieve any emergency symptoms.

Medical emergencies are not covered by LIBERTY if the services are done in a hospital setting which are covered by your Medical Health Plan, if LIBERTY determines the services were not dental in nature, or if the services are not covered under your dental plan.

Summary of Special Programs

Healthy Behaviors Program

LIBERTY's Healthy Behaviors Program's goal is to help keep you healthy and to help encourage you to live a healthier life. As a member of the Nevada Medicaid or the Nevada Check Up Program, you or your child may be eligible for a \$25 gift card reward.

Who is eligible:

- Infants under the age of 1.
- Child members between the ages of 1-20.
- And/or a pregnant person.
- A member that has not seen a LIBERTY dentist in the last 12-months.

How does it work?

1. Get a dental checkup or other preventive care service (in person.)
2. Sign up and provide your updated contact information and email address at www.libertydentalplan.com/NVMedicaid
3. A Healthy Rewards gift card will be emailed to you.

To request your next dental appointment, scan the QR code, below, with your smartphone camera to make an appointment that works best for you.



If you have questions or want to join the program go to our website at <https://memberohra.libertydentalplan.com/NV> or you can call our Member Services Department at **866-609-0418/TTY: 877-855-8039** for more details on the Healthy Behaviors Program.

Call Member Services toll-free at This 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

Tele-dentistry

Need to speak with a dentist about an urgent issue or unsure whether you need treatment? LIBERTY provides tele-dentistry as a way of getting services without being in the same physical location as your dentist.

Tele-dentistry can involve having a private and secure live conversation with your provider or can involve sharing information with your dentist without a live conversation. Your personal health information cannot be shared without your permission and will not be transmitted unless through an encrypted (protected) format.

It is important that both you and your dentist agree that the use of tele-dentistry for a particular service is appropriate for you. You can contact your dentist to learn which types of services may be available through tele-dentistry.

When you use tele-dentistry services it is important that the provider asks for your informed consent (approval). Informed consent for tele-dentistry services can include, but are not limited to:

- Giving you the option to access services through a face-to-face visit or through tele-dentistry.
- Telling you about the type of tele-dentistry services that will be used, and procedures for responding to electronic communications with the provider.
- Issue or risk about confidentiality and security of personal health information when using tele-dentistry services.
- The limitations on the availability and appropriateness of dental services provided through tele-dentistry.

It is important to note that not all situations are appropriate for tele-dentistry services, and the providers will need to know your health

history and complete an evaluation of your oral condition before any care can take place, including writing prescriptions. All prescription must be appropriate to treat your oral condition and following the established standards by the state of Nevada.

To request a tele-dentistry appointment, visit www.libertydentalplan.com or scan the QR code below and follow the instructions on the website or call our Member Services at **866-609-0418/TTY: 877-822-8039**.



LIBERTY also offers tele-dentistry after hours. If you have an urgent issue and are unable to reach your dental provider, call Member Services and ask to be connected to our After- Hours Tele-dentistry Program.

Value Based Program (B.R.U.S.H. Program)

Caries risk assessments for children (B.R.U.S.H.) can help you find possible risk factors such as poor oral hygiene habits, and more that can cause dental diseases. You can ask your Dental Home to give you a caries risk assessment and talk about your results. LIBERTY offers educational resources on our website to help you with these risk factors.

Visit www.libertydentalplan.com/NVMedicaid to access these resources.

Call Member Services toll-free at This 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

Community Smiles Program

LIBERTY's Community Smiles Program is a self-referral program to connect our members to free and low-cost community resources to address needs such as food insecurity, housing, personal safety, and lack of transportation.

Members can also self-search for programs on our website using the findhelp.org platform to help navigate themselves to any applicable programs. Members can access this resource via LIBERTY's homepage <https://communityresources.libertydentalplan.com/> on a computer or cell phone.

You can also scan the QR code below, with your smartphone camera to access the Community Smiles Program resources.



Provider Incentive Program

A copy of LIBERTY's provider incentive program is available upon request. If you would like to request a copy, please call our Member Services at 866-609-0418/TTY: 877-855-8039.

Reporting and Solving Problems

There are two kinds of problems that you may have with LIBERTY:

- A **grievance** (complaint) is when you have a problem with LIBERTY, a dental provider, or with the dental care or treatment you got from a provider.
- An **appeal** is when you don't agree with LIBERTY's decision not to cover or to change your services.

Call Member Services toll-free at This 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

You should use LIBERTY's grievances and appeals process first to let us know about your problems. This does not take away any of your legal rights. We will not discriminate or take any action against you for filing a grievance and/or appeal.

We will not discriminate or take any action against your provider for supporting your rights to file a grievance and/or appeal, or for filing a grievance or appeal for you with your written consent. Letting us know about your problems will help us improve care for all members.

You should always contact LIBERTY first to let us know about your problem. Call us Monday through Friday 5:00 a.m. to 5:00 p.m. (PST) at **866-609-0418/TTY: 877-855-8039** to tell us about our problem.

How do I submit a grievance (complaint)?

You can file a complaint in person, over the telephone or in writing at any time. Our Member Service will help you and can take your complaint over the telephone.

You can also send your complaint in the following ways:

Mail: LIBERTY Dental Plan of Nevada, Inc.

Grievance and Appeals Department

P.O. Box 26110

Santa Ana, CA 92799

In person: 6385 S Rainbow Blvd #200

Las Vegas, NV 89118

Fax: 1-833-250-1814

Email: or

Online at: www.libertydentalplan.com/NV-Medicaid-Check-Up/File-a-Grievance.aspx?state=NV

Call Member Services toll-free at This 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

Complaint forms are also available on our website, <https://www.libertydentalplan.com/NVmedicaid> under the “File a Grievance or Appeal” section under Nevada. A LIBERTY grievance and appeals form is not required to submit a complaint. LIBERTY will review your complaint submitted in any form.

You can also ask your dental provider or someone else to help you file a complaint. If someone files a complaint on your behalf, they must have your written approval. This is called an authorized representative. You can find an authorized representative form on our website at <https://www.libertydentalplan.com/About-LIBERTY/Privacy-1/Authorize-a-Representative.aspx>. You can also call our Member Services Department if you need assistance with or if you would like a copy of the Authorized Representative form mailed to you.

We will start working on your complaint the first day that it is received. We will also send you a letter within 5 calendar days to tell you that we received your complaint. The letter will include a form that you can complete and return to us if you want to give us more information about your concerns.

If you need help filing your complaint, we can help you. We can give you free language services both over the phone and in writing. Please call our Member Services at **866-609-0418/TTY 877-855-8039**.

When will I get a response to my grievance (complaint)?

LIBERTY will review your concerns and send you an answer as quickly as your dental and health conditions require. We will take no longer than 30 calendar days from the day we receive your complaint to send you an answer in writing.

You or your Dental Home can ask for up to 14 additional calendar days if more time is needed for you to send additional information you want LIBERTY to review.

LIBERTY can also request up to 14 additional calendar days if we think it is in your best interest to gather additional information. Requests for extensions must be approved by the Division of Health Care Financing and Policy/Medicaid Division. Requests will be submitted by LIBERTY to Medicaid and the results will be shared with you.

If we are going to take more than 30 calendar days to send you an answer, we will call you and mail a letter to tell you within 2 calendar days letting you know. If you disagree with our decision to take more time, you can file a complaint about the delay.

IMPORTANT: Complaints are not eligible for the State Fair Hearing process talked about later in this Handbook.

What is an appeal?

An appeal is different from a grievance (complaint). An appeal is a request for LIBERTY to review and change a decision we made about benefits for a requested service from a dental provider.

Notice of Adverse Benefit Determination (NABD):

A NABD is a written notice of a decision made by LIBERTY about a dental benefit or service. An NABD could be a denial, delay, reduction, change, or ending of your dental benefits.

Members have the right to appeal an NABD decision that can include,

but is not limited to:

- A denial or partial denial of a requested service.
- A reduction, suspension, or termination of an already approved service.
- A denial, in whole or in part, of payment for a completed service.
- A failure by LIBERTY to provide services in a timely manner.
- A failure by LIBERTY to act within specified time frames.
- A failure by LIBERTY to allow out-of-network benefits for rural area members with limited access to providers.
- A denial of a member request disputing financial liability.

If we sent you an NABD telling you that we are denying, delaying, changing, or ending services, and you do not agree with the decision, you can file an appeal.

If you are currently getting treatment and you want to continue getting treatment, you must ask for an appeal within 10 calendar days from the date written on the NABD or before the date the NABD says services will stop. When you request the appeal, tell us that you want to continue receiving services.

How do I submit an appeal?

You can file an appeal online, through email, over the telephone, in writing, or in person. Our Member Services will help you and can take your appeal over the telephone. You can also send your appeal to us in the following ways:

Mail: LIBERTY Dental Plan of Nevada, Inc.
Grievance and Appeals Department
P.O. Box 26110
Santa Ana, CA 92799

Call Member Services toll-free at This 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

In person: 6385 S Rainbow Blvd #200 Las Vegas, NV 89118

Fax: 1-833-250-1814

Email: or

Online at: www.libertydentalplan.com/NV-Medicaid-Check-Up/File-a-Grievance.aspx?state=NV

Appeal forms are also available on our website, <https://www.libertydentalplan.com/NVmedicaid> under the “File a Grievance or Appeal” section under Nevada. A LIBERTY Grievance and Appeals Form is not required to submit an appeal. LIBERTY will review your appeal submitted in any format.

All appeals must be submitted within 60 calendar days from the date written on the NABD letter sent by LIBERTY.

You can also ask your provider or someone else to help you file an appeal. If someone files an appeal on your behalf, they must have your written approval. This is called an authorized representative. You can find an authorized representative form on our website at <https://www.libertydentalplan.com/About-LIBERTY/Privacy-1/Authorize-a-Representative.aspx>. You can also call our Member Services Department if you need assistance with or if you would like a copy of the Authorized Representative form mailed to you.

We will start working on your appeal the first day that it is received. LIBERTY will provide you with the chance to review your file in person or we can mail a copy of it to you.

We will also send you a letter within 5 calendar days to tell you that we received your appeal. The letter will include a form that you can complete and return to us if you want to give us more information

about your appeal. If you need help completing the form, please call our Member Services at **866-609-0418/TTY: 877-855-8039**.

It is very important that you provide us with as much information as possible to explain why you think our original decision to deny, delay, reduce, change, or end your services was incorrect. You can provide this information to us online, by email, over the telephone, in writing, or in person.

Your appeal should include:

- Your Medicaid ID number
- Your date of birth.
- Your mailing address.
- The number associated with the NABD.
- The date of service(s) for payment denial(s).
- An explanation of why you feel LIBERTY's decision was wrong and your services should be approved.
- Any documents or records to support your appeal.

If you, your dentist, or a member of our staff thinks you need an expedited (fast) decision because 30 calendar days would put your life, health, or ability to function in danger, we will immediately notify our clinical staff reviewer who will look at your appeal. If our staff dentist believes you need a decision quickly, we will treat your appeal as an expedited (fast) appeal as described later in this document.

When will I get a response to my appeal?

LIBERTY staff and dental care professionals will review your appeal. The LIBERTY staff reviewing your appeal will not be the same people who

made the first decision to deny, delay, reduce, change, or end your services, and they do not work for the individuals who were involved in making the first decision.

LIBERTY will review your appeal and send you an answer in a Notice of Appeal Resolution letter within 30 calendar days from the day we receive your appeal.

You or your Dental Home can ask for up to 14 additional calendar days if more time is needed for you to send additional information you want LIBERTY to review.

LIBERTY can also ask for up to 14 additional calendar days if we think it is in your best interest to gather additional information. Requests for extensions must be approved by the Division of Health Care Financing and Policy/Medicaid Division. Requests will be submitted by LIBERTY to Medicaid and the results will be shared with you.

If we are going to take more than 30 calendar days to send you an answer, we will call you and mail you a letter letting you know within 2 calendar days. If you disagree with our decision to take more time, you can file a grievance about the delay.

Expedited (fast) appeals

As mentioned above, our staff is trained to identify when your request for an appeal should be treated as an expedited (fast) appeal.

You, or your dental provider, can ask for a fast appeal if you believe 30 calendar days would put your life, health, or ability to function in danger. To ask for a fast appeal, call our Member Services at **866-609-0418/TTY: 877- 855-8039**.

A clinical staff reviewer will review your request for a fast appeal. It is

important that you, or someone filing for you, provide LIBERTY with documentation to support your fast appeal as soon as possible. We will call you with a decision within 72 hours from when we receive your request for a fast appeal, and we will also send you a Notice of Appeal Resolution letter.

You can ask for up to 14 additional calendar days if more time is needed for you to send additional information you want LIBERTY to consider.

LIBERTY can also ask for up to 14 additional calendar days if we think it is in your best interest to gather additional information and will request permission from Nevada Medicaid for the extension.

If we are going to take more than 72 hours to send you an answer, we will call you to tell you and we will mail you a letter letting you know within 2 calendar days. If you disagree with our decision to take more time, you can file a complaint about the delay.

If a LIBERTY staff dentist decides that your health condition does not require a fast appeal, we will treat it as a standard appeal and send you our decision within 30 calendar days. If you disagree with our decision not to expedite your appeal, you can file a complaint.

LIBERTY will not take any action against you if you request an expedited appeal. We will also not take action against your provider for supporting your appeal or asking for a fast appeal for you.

Can I ask for my benefits to be continued or restarted while I wait for a response to my appeal?

LIBERTY will continue or restart the dental benefits you are appealing if the following are met:

- Your request for a continuation of benefits is sent to LIBERTY within

10 calendar days from the NABD, or the date the NABD will go into effect (whichever is later).

- You filed an appeal within 60 calendar days from the date on the NABD.
- Your appeal is about the termination, suspension, or reduction of previously approved services.
- Your appeal is about services ordered by a LIBERTY dental provider.
- The service period covered by the original authorization has not expired.
- You specifically requested to have your benefits extended.

If LIBERTY fails to notify you that we have received your appeal or fails to decide on your appeal within the timeframes explained above, you can ask for a State Fair Hearing.

What if I am not satisfied with the response to my appeal?

If you are not happy with the outcome of your appeal, you can contact the State Hearings Unit at the State of Nevada's Division of Health Care Financing and Policy at **775-684-3604** or **800-992-0900, extension 43604** to request a State Fair Hearing.

A copy of the State Fair Hearing request form will be included with the Notice of Appeals Resolution letter sent to you by LIBERTY.

IMPORTANT: You must complete the appeal process with LIBERTY before you can ask for a State Fair Hearing.

State Fair Hearing

You or your dental provider have the right to ask for a Fair Hearing from the State of Nevada after you have gone through LIBERTY's internal

appeal process.

If someone asks for a Fair Hearing on your behalf, they must have your written approval. This is called an authorized representative. You can find an authorized representative form on our website at <https://www.libertydentalplan.com/About-LIBERTY/Privacy-1/Authorize-a-Representative.aspx>. You can also call our Member Services Department if you need assistance with or if you would like a copy of the Authorized Representative form mailed to you.

If you are not happy with the resolution to your appeal, you can contact the State Medicaid Hearings Unit within the Division of Health Care Financing and Policy at **775-684-3604** or **800-992-0900, extension 43604**.

You can ask for a Fair Hearing by completing and sending the Fair Hearing request form in the Forms section of this handbook or on our website, <https://www.libertydentalplan.com/NVmedicaid> under the “File a Grievance or Appeal” section under Nevada (and attach your LIBERTY

Notice of Appeals Resolution letter) to:

Mail to:

Nevada Medicaid Hearings Unit
4070 Silver Sage Dr. Carson City, NV 89701

Fax: 775- 684-3610

Email: dhcfphearings@dhcfp.nv.gov

You can also go online to access the State’s Fair Hearing Request Form at <http://dhcfp.nv.gov/resources/PI/Hearings/>.

You or your dental provider must ask for a Fair Hearing within 90 calendar days from the date on LIBERTY's Notice of Appeal Resolution letter. You can choose a person to act on your behalf to file the written Fair Hearing request.

LIBERTY will continue or restart the dental benefits you are appealing during the State's Fair Hearing process, if the following are met:

- Your Fair Hearing Request is received within 10 days after LIBERTY's Notice of Appeals Resolution action or the planned effective date.
- Your Fair Hearing Request is about the termination, suspension, or reduction of previously approved services.
- Your Fair Hearing Request is about services ordered by a LIBERTY dental provider.
- You specifically requested to have your benefits extended.

Please note that if the outcome of the Fair Hearing is not in your favor, you may have to pay the cost of any continued benefits that you received.

If you need information or help regarding your Fair Hearing, call the Nevada Medicaid Customer Service Unit at:

Northern Nevada: 775-687-1900 or 1-800-992-0900 or TTY 711

Southern Nevada: 702-668-4200 or 1-800-992-0900 or TTY 711

If you need legal assistance, call the Nevada Legal Services Program:

Clark County: 1-702-386-0404 or 1-866-432-0404 or TDD 702-386-1059

Washoe County: 1-775-284-3491

If you need information or help, call our Member Services toll-free at: 866-609-0418 / TTY: 877-855-8039.

Call Member Services toll-free at This 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

Member Participation

Ways to get involved as a member

LIBERTY wants to hear from you. Once every 3 months, we have meetings to talk about what works well and how we can improve. Members are invited to attend and make recommendations. **Join us and tell us what you think!**

Member Advisory Committee

We have a committee called the Member Advisory Committee (MAC). The MAC is made up of Nevada Medicaid and Nevada Check Up members, community stakeholders, and Plan support staff. The MAC talks about how to improve LIBERTY policies and takes part in:

- Reviewing quality reports to make sure members are happy.
- Recommending ways to better serve our members.
- Development of education materials.
- Helping to set policies that affect you.

MAC members will be paid for every meeting they attend. If you're interested in the chance to participate, please apply using the following:

- **QR Code:** Scan the QR code to access member application.



- **Call:** 866-609-0418/TTY: 877-855-8039 and ask about taking part in the MAC.
- **Email:** Print the form and send the completed application to QM@libertydentalplan.com

Call Member Services toll-free at This 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

- **Online:** www.libertydentalplan.com/Members/Member-Facing-Committee.aspx

You can also complete the application under the “FORMS” section of this handbook, and mail it to:

LIBERTY Dental Plan Quality Management

P.O. Box 26110

Santa Ana, CA 92799-6110

Important Dental Tips

LIBERTY Dental Plan helps you understand the connection between your oral health and your overall health. As a guide for your best dental care, **we are here to help you, and your loved ones enjoy a healthy smile.**

Taking care of your mouth is one of the best ways to prevent a wide range of health problems. Here are some ailments that are linked to poor oral health - so take care of your pearly whites!

- **Heart Disease:** Those with gum disease are 2X more likely to have heart disease.
- **Stroke and Blood Clots:** Gum disease is one of the most common, preventable diseases in adults that increases susceptibility of stroke and blood clots.
- **Respiratory Disease:** Bad bacteria from the mouth can be an agent for pneumonia and bronchitis.
- **Diabetes:** Gum disease disrupts the control of blood sugar.
- **Kidney Disease:** Harmful bacteria from poor oral hygiene can weaken kidneys.

Call Member Services toll-free at This 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

Thorough daily oral hygiene lays the base for a healthy smile. Regular brushing, flossing, and dental visits can be enough to help prevent tooth decay, gum disease, and bad breath.

The importance of flossing

Cleaning between your teeth is every bit as important as brushing. Since brushing cannot effectively clean between teeth, it's important to use floss to get to those areas.

- Other items also are available to help you clean between your teeth. Ask your dentist which ones to use.
- Floss between your teeth once a day and brush your teeth at least twice a day.

Brushing up on technique

Our toothbrushes need to be replaced every three months or when they are damaged.

Choosing the right toothbrush plays a big role in our daily care routine. The right toothbrush works to keep our teeth and gums healthy every day.

It's a good idea to ask your dentist which one to use. Included below are a few tips to help you develop a good brushing routine:

Brushing your teeth

- Brush your teeth at least twice a day – once in the morning and once before bed.
- When brushing, use a gentle touch to avoid injuring your gum tissue.
- Use a toothpaste with fluoride to help prevent tooth decay.
- Concentrate on brushing all surfaces.

Use a gentle touch – it doesn't take much pressure to remove the plaque from your teeth, a vigorous scrubbing could irritate your gums.

Brushing gums

- Hold your toothbrush at a slight angle toward the gums when brushing along the gum line.

Brushing your tongue

- Brushing your tongue gently can help remove bacteria that causes bad breath.

The benefits of a Dental Home

A Dental Home is a dental office that people always go to for their dental care. A Dental Home can be a safe, friendly space where you can feel comfortable. It makes your visits easier and helps dentists spot and fix tooth problems early.

- Having a Dental Home helps you keep a healthy smile.
- Families are encouraged to build a relationship with their Dental Home.
- A great Dental Home encourages members to schedule regular dental check-ups.

Benefits of establishing a Dental Home

- Patients become comfortable with the dentist, the office staff, and the office.
- Promotes early and regular access to preventive and routine dental services.
- Increases continuity of care, prevention, dental and overall health.
- Decreases duplication of dental services caused by seeking dental care from multiple dental offices.

The American Academy of Pediatrics (AAP), the American Dental Association (ADA), and the American Academy of Pediatric Dentistry (AAPD) recommend establishing a “Dental Home” for your child by one year of age. Children who have a Dental Home are more likely to receive the preventive and routine dental care that is needed. A well-established Dental Home also includes the right referrals to dental specialists.

With the rising rate of tooth decay among young children, having a Dental Home can be key in promoting preventive care. In addition to implementing lifelong oral health at home, establishing, and maintaining an ongoing relationship between the dentist and the patient is important.

The Dental Home is an open door to all parts of oral health care delivered in a comprehensive, continuously accessible, coordinated, and family-centered way.

Benefits of visiting the dentist during pregnancy

During pregnancy, hormonal changes can affect your teeth and gums, making oral care essential. You may notice gum sensitivity, bleeding, or increased risk of cavities due to changes in diet or morning sickness. Gentle, regular care and dental check-ups can help keep your smile healthy, supporting both you and your baby during this special time.

Getting oral health care during pregnancy can support overall health.

- Seeing your dentist for regular check-ups and cleanings during pregnancy can help in the treatment and prevention of cavities
- Maintaining good oral hygiene can help to prevent pregnancy gingivitis.

Definitions and Useful Terms

Call Member Services toll-free at This 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

- **Access:** Your ability to obtain dental care determined by the availability of services, the acceptability, the location, transportation, hours of operation, and cost of care.
- **Appeal:** A way for you to challenge our action if you think we made a mistake. You can ask us to change a coverage decision by filing an appeal.
- **Authorization (Prior Authorization):** The notification of approval by LIBERTY that you can proceed with treatment requested by your dental provider.
- **Benefits:** The medically necessary (needed) dental services available under the Nevada Medicaid and Nevada Check Up Dental Program.
- **Benefit Plan:** The dental benefit plan provided under your Nevada Medicaid or Nevada Check Up coverage by LIBERTY.
- **Care Coordination /Case Management:** Services provided to help improve the quality of life for enrolled members with chronic medical/health conditions.
- **Caries:** Tooth decay or cavities
- **Complaint:** See “Grievance”
- **Co-payment:** A payment paid by you in order to receive medical care.
- **Covered Services:** The dental services and treatment that are covered under the State of Nevada Medicaid or Nevada Check Up Program. Covered services may be reviewed for medical necessity (need) by LIBERTY prior to or after services and treatment are completed.
- **Dental Emergency:** A n emergency is defined as a severe condition, including severe pain, that you could reasonably expect would result in putting your (or your unborn child, if pregnant) health in serious jeopardy; serious impairment to bodily functions; or serious

dysfunction of any bodily organ or part if immediate dental care is not received.

- **Dental Home:** A Dental Home is the primary care dentist or pediatric dentist that you have been assigned to for your dental care needs. A Dental Home promotes an ongoing relationship between the dentist and you, inclusive of all aspects of oral health care delivered in a comprehensive, continuously accessible, coordinated, and family-centered way. The Dental Home should be established no later than 12 months of age and includes referrals to dental specialists when appropriate. Also known as primary care dentist (PCD) or primary care provider (PCP).
- **Dental Insurance:** Coverage for services that help your teeth and gums, such as teeth cleanings, tooth removals, and tooth restorations.
- **Dental Records:** Refers to diagnostic intraoral and extraoral radiographs (x-rays), written treatment records including but not limited to progress notes, dental and periodontal chartings, treatment plans, consultation reports, or other written material relating to an individual's medical and dental history, diagnosis, condition, treatment, or evaluation.
- **Dental Specialist:** A dentist who provides specialty care such as an Endodontist, Oral Surgeon, Periodontist and Orthodontist.
- **DHCFP:** The abbreviation for the State of Nevada Division of Health Care Financing and Policy, also known as Nevada Medicaid.
- **Durable Medical Equipment:** Certain items your doctor orders for you to use at home. Examples are walkers, wheelchairs, or hospital beds.
- **Early and Periodic Screening, Diagnostic and Treatment (EPSDT) Program:** A federal program that provides additional medically

necessary (needed) dental care services for children under the age of 21.

- **Eligible:** Meeting the requirements to receive certain medical and dental benefits funded by the State of Nevada Medicaid or Nevada Check Up Program.
- **Emergency Care/Emergency Dental Service:** Emergency Dental Service and care include (and are covered by LIBERTY) a dental screening, examination, evaluation by a Dentist or dental specialist to determine if an emergency dental condition exists, and to provide care that would be acknowledged as within professionally recognized standards of care and in order to alleviate any emergency symptoms in a dental office. Medical emergencies are not covered by LIBERTY if the services are rendered in a hospital setting which are covered by a Medical Health Plan, or if LIBERTY determines the services were not dental in nature.
- **Emergency Medical Condition:** An emergency means your life could be threatened or you could be hurt permanently (disabled) if you don't get care quickly. If you are pregnant, it could mean harm to the health of you or your unborn baby.
- **Emergency Medical Transportation:** Your condition is such that you are unable to go to the hospital by any other means but by calling 911 for an ambulance.
- **Emergency Room Care:** A hospital room staffed and equipped for the treatment of people that require immediate medical care and/or services.
- **Emergency Services:** Services provided in an emergency room by a provider trained to treat a medical or behavioral health emergency.
- **Endodontist:** A dental specialist that treats disease and injuries to the pulp and root of a tooth.

- **Enrollee:** A Medicaid or Nevada Check Up member who is eligible to receive dental benefits through LIBERTY, also known as Member or Recipient.
- **Excluded Services:** Services that are not covered under the Medicaid benefit.
- **Exclusion:** Any dental procedure or services that is not available under the State of Nevada Medicaid or Check Up Program or through LIBERTY.
- **Fair Hearing:** A legal process through the State of Nevada Medicaid program that allows a member to request a re-evaluation of any denied or modified prior authorization or claim issued by LIBERTY. Also known as a State Fair Hearing.
- **General Dentist:** A licensed dentist who provides general dental services and who does not identify as a specialist.
- **Grievance:** A complaint you make about us or one of our network providers or pharmacies. This includes a complaint about the quality of your care.
- **Habilitation Services and Devices:** Services and devices that help you keep, learn, or improve skills and functioning for daily living.
- **Health Insurance:** Type of insurance coverage that pays for health, medical and surgical expenses incurred by you.
- **Home Health Care:** Health care services a person receives in the home including nursing care, home health aide services and other services.
- **Hospice Services:** A program of care and support to help people who have a terminal prognosis live comfortably. A terminal prognosis means that a person has a terminal illness and is expected to have six months or less to live. An enrollee who has a terminal prognosis has the right to elect hospice. A specially trained team of professionals and caregivers provide care for the whole person,

including physical, emotional, social, and spiritual needs.

- **Hospitalization:** The act of placing a person in a hospital as a patient.
- **Hospital Outpatient Care:** Care or treatment that does not require an overnight stay in a hospital.
- **In-Network Benefits:** Benefits available to you when you receive services from a LIBERTY contracted provider.
- **Limitation:** The number of services and types of services allowed, and/or the most affordable dentally appropriate service.
- **Managed Care Organization (MCO):** A term used for a Health Plan that manages the cost and use of covered services and treatment to improve care.
- **Medical Necessity or Medically Necessary:** This describes the needed services to prevent, diagnose, or treat your medical condition or to maintain your current health status. This includes care that keeps you from going into a hospital or nursing home. It also means the services, supplies, or drugs meet accepted standards of medical practice or are otherwise necessary under current Nevada Medicaid coverage rules.
- **Member:** A Medicaid or Nevada Check Up member who is eligible to receive dental benefits through LIBERTY, also known as an Enrollee, Beneficiary, or Recipient.
- **Network:** A network is a directory of doctors, health care professionals, hospitals, and health care facilities that a plan has contracted with to provide medical care to its members.
- **Non-Covered Services:** A dental procedure or service that is not covered by the State of Nevada Medicaid or Nevada Check Up Program or LIBERTY.
- **Non-Participating Provider:** A provider or facility that is not employed, owned, or operated by our plan and is not under contract

to provide covered services to members of our plan.

- **Notice of Adverse Benefit Determination (NABD):** A written decision made by LIBERTY regarding a dental benefit or payment. An adverse decision could be a denial, reduction, change, or termination of dental benefits. Members have the right to appeal adverse decisions to include (not all- inclusive):
 - Denial or partial denial of a requested service(s)
 - Denial or partial dental of payment for a service(s)
 - Denial of a member’s right to dispute financial liability
 - Denial of a rural area member’s request to seek services with an out-of-network provider.
 - Failure to provide services in a timely manner
 - Failure of LIBERTY to act within specified time frames
- **Oral Surgeon:** A dental specialist who surgically treats diseases, injuries, deformities, defects, and the appearance of the mouth, jaws, and face.
- **Orthodontist:** A dental specialist who treats and prevents problems with the way the upper and lower teeth fit together in biting or chewing.
- **Out-of-Area Coverage:** Benefits provided when you are out of the Plan’s Service Area, or away from your Dental Home.
- **Out-of-Network Provider:** A dentist or specialist that is not contracted with LIBERTY to provide services to LIBERTY members. Also known as a non-participating provider.
- **Palliative Care:** Treatment that relieves pain but does not fix the problem causing the pain or provides only a temporary fix.
- **Participating Dental Group, Dental Office, or Provider:** Providers, hospitals, home health agencies, clinics, and other places that gives

you health care services, medical equipment, and long-term services and supports that are contracted with your health plan. Participating providers are also “in-network providers” or “plan providers.”

- **Pediatric Dentist (Pedodontist):** A dental specialist who only treats children from birth through adolescence.
- **Periodontist:** A dental specialist who treats the disease of gums and the tissue around the teeth.
- **Physician Services:** Care provided by you by an individual licensed under state law to practice medicine, surgery, behavioral health.
- **Plan:** Plan refers to a Managed Care Organization offering medical services to its members.
- **Preauthorization (Pre-Approval):** A decision by your plan or the DHCFP that a health care service, treatment plan, prescription drug or durable medical equipment is medically necessary. Sometimes called prior authorization, prior approval or precertification.
- **Premium:** A monthly payment a health plan receives to provide you with health care coverage.
- **Prescription Drug Coverage:** Prescription drugs or medications covered (paid) by your health plan. Some over-the-counter medications are covered.
- **Prescription Drugs:** A drug or medication that, by law, can be obtained only by means of a physician’s prescription.
- **Primary Care Dentist (PCD):** A dentist contracted with LIBERTY to provide services to eligible Medicaid and Nevada Check Up members. The Primary Care Dentist is responsible to provide or arrange for needed dental services. Also known as a Dental Home.
- **Primary Care Physician:** Your primary care physician is the doctor or other provider you see first for most health problems. He or she

makes sure you get the care you need to stay healthy. He or she also may talk with other doctors and health care providers about your care and refer you to them.

- **Primary Care Provider (PCP):** Physicians who practice general medicine, family medicine, general internal medicine, general pediatrics, or osteopathic medicine. They are responsible to provide, arrange, and coordinate all aspects of your health care. Often, they are the first person you should contact if you need health care. Physicians who practice obstetrics and gynecology may function as PCPs for the duration of the health plan member's pregnancy.
- **Procedure Code:** A code that identifies a specific medical or dental service.
- **Provider:** A person who is authorized to give health care or services. Examples of providers include doctors, nurses, behavioral health providers, nursing homes and specialists.
- **Provider Directory:** A list of all contracted dental providers in the LIBERTY network.
- **Recipient:** A Medicaid or Nevada Check Up recipient who is eligible to receive dental benefits through LIBERTY, also known as an Enrollee, Beneficiary, or Member.
- **Referral:** A request from your Dental Home that says you need care from another provider, usually a dental specialist. Some covered services and treatments require a referral and pre-approval.
- **Rehabilitation Services and Devices:** Treatment you get to help you recover from an illness, accident, or major operation to restore you to the best possible functional level.
- **Requirements:** Something that you must do, or a rule you must follow.

- **Responsibility:** Something that you should do, or you are expected to do.
- **Service Area:** The urban areas of Clark and Washoe Counties in Nevada where LIBERTY provides dental benefits.
- **Signature:** Your name written in your handwriting.
- **Skilled Nursing Care:** Skilled Nursing care means assessments, judgements, interventions, and evaluations of intervention, which require the training and experience of a licensed nurse. Skilled Nursing care includes, but is not limited to:
 1. Performing assessments to determine the basis for action or the need for action;
 2. Monitoring fluid and electrolyte balance;
 3. Suctioning of the airway;
 4. Central venous catheter care;
 5. Mechanical ventilation; and
 6. Tracheotomy care.
- **Specialist:** A doctor who provides health care for a specific disease or part of the body.
- **State Fair Hearing:** A legal process through the State of Nevada Medicaid program that allows a member to request a re-evaluation of any denied or modified prior authorization or claim issued by LIBERTY. Also known as a Fair Hearing.
- **Urgent Care:** Care when you need to see a doctor and your doctor is not able to see you or the office is closed. Care is needed for a sudden illness, injury, or condition that is not an emergency but needs to be treated right away.
- **Utilization Management (UM):** A system used by LIBERTY to ensure that services provided are appropriate and medically

necessary.

- **Us/We/Our:** LIBERTY Dental Plan of Nevada, Inc. (LIBERTY)
- **You/Your:** Member, recipient, or “you”, are equivalent in this document.

Frequently Asked Questions

How can I find a contracted LIBERTY dentist? Or change my dentist?

You can find dental providers on our website at www.libertydentalplan.com/NVMedicaid; by clicking on ‘Find & Select a Dentist’ to do a search or you can call our Member Services at **866-609-0418/TTY: 877-855-8039**.

A Member Service Representative will help you find a dentist near you.

Can I change my dental home?

Yes. See the section on “How do I change my dentist (Dental Home)” of this handbook.

I lost my Dental ID card. How can I get another?

Call our Member Services at **866-609-0418/TTY: 877-855-8039** to request an ID card. You can also see the section on “Member ID Cards” of this handbook.

How do I know what’s covered under my dental plan? See the section on “Benefits and Services” of this handbook.

What if I don’t have transportation to my dental appointment?

LIBERTY can help you set up transportation to your dental appointment. See the section on “Transportation Services of this handbook.

Does LIBERTY offer interpreter services?

Yes. See the section “Interpretation/Translation” of this handbook.

Call Member Services toll-free at This 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

What if I want a second opinion?

See the section “Treatment Plan and Care” of this handbook.

How do I exercise an advance directive?

To exercise an advance directive please fill out the authorize a representative form and return to LIBERTY

- The form can be found on our website at www.libertydentalplan.com/About-LIBERTY/Privacy-1/Authorize-a-Representative.aspx

Return the completed form to:

Email :

privacy@libertydentalplan.com

Mail :

Privacy Officer

LIBERTY Dental Plan

1730 Flight Way, Suite 125

Tustin, CA 92782

Fax :

1-888-273-2718

What if I want to enroll into Fee-For-Service (FFS)?

Please contact the NV Medicaid District Office Customer Service for your area:

- Northern Nevada 775-684-7200
- Southern Nevada 702-486-1646
- Toll Free 800-992-0900

Member Documents/Forms

LIBERTY’s member documents, forms, and resources can be located online at www.libertydentalplan.com/NVMedicaid.

Call Member Services toll-free at This 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

Forms:

Coordination of Benefits
Grievance and Appeals Form
State Fair Hearing Form
Oral Health Risk Assessment

Documents:

Nevada Medicaid Dental Information Sheet
Adult Provider Directory
Child Provider Directory
Your Rights
Language Assistance
Member Newsletters
Member Satisfaction Survey Results

Oral Health and Wellness Tips:

Adult/Child/Teen Care



Nevada Member Advisory Committee Application

Thank you for your interest in joining LIBERTY's Nevada Member Advisory Committee. If you are accepted to join this Committee, you will receive payment for every eligible meeting you attend.

- The committee(s) will meet once (1) per quarter and four (4) times per year.
- Members will be compensated \$50 per quarter and no more than \$200 per year.

What is your first and last name?
What is your date of birth?
What is your address?
What is your daytime phone number?
What is your LIBERTY ID number?
Where do you work?
What is your job title?
Please select your education level: <input type="checkbox"/> 8 th Grade <input type="checkbox"/> High School <input type="checkbox"/> College <input type="checkbox"/> Other _____

- **QR Code:** Scan the QR Code provided with the camera on your smartphone.



- **Online:** You can visit us at:
<https://www.libertydentalplan.com/Members/Member-Facing-Committee.aspx>
- **Email:** Complete this form and email to
QM@libertydentalplan.com
- **Mail/Fax:** Complete this form, mail, or fax to
LIBERTY Dental Plan,
Quality Management Dept.
P.O. Box 26110,
Santa Ana, CA 92799-6110
Fax: 1-888-334-6027

Oral Health Risk Assessment (OHRA) Form

Child Oral Health Risk Assessment



**LIBERTY
DENTAL PLAN**

Filling out this form is voluntary. The member will not be denied care based on your answers. This information is private.

Member's Name:	Date of Birth:	ID Number:
----------------	----------------	------------

1. Does the child have a dentist that they see often? (Within 6 months)	Yes <input type="checkbox"/> No <input type="checkbox"/>
2. Does the child brush their teeth every day?	Yes <input type="checkbox"/> No <input type="checkbox"/>
3. Do the child's teeth hurt when eating cold, hot, or sugary foods? *	Yes <input type="checkbox"/> No <input type="checkbox"/>
4. Does the child live in an area with fluoridated drinking water?	Yes <input type="checkbox"/> No <input type="checkbox"/>
5. Does the child snack between meals?	Yes <input type="checkbox"/> No <input type="checkbox"/>
6. Does the child drink a lot of soda, juices, or energy drinks?	Yes <input type="checkbox"/> No <input type="checkbox"/>
7. Is English your and your child's main language?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If no, language spoken: _____	
8. Does the child have cavities? *	Yes <input type="checkbox"/> No <input type="checkbox"/>
9. Does a parent have a history of cavities?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, relation(s): _____	
10. Do the child's teeth look like they have filmy matter called plaque? *	Yes <input type="checkbox"/> No <input type="checkbox"/>
11. Does the child go to bed with a bottle of milk, juice, or other drink? *	Yes <input type="checkbox"/> No <input type="checkbox"/>
12. Does the child see a doctor often for a serious medical condition?	Yes <input type="checkbox"/> No <input type="checkbox"/>

Call Member Services toll-free at This 866-609-0418/TTY: 877-855-8039. LIBERTY is here to help Monday through Friday, 5:00 a.m. to 5:00 p.m. Visit online at <https://client.libertydentalplan.com/NVMedicaid>

If yes, circle all that apply: cancer, diabetes, kidney disease <input type="checkbox"/> other: _____ _____	
13. Does the child have special health care needs?	Yes <input type="checkbox"/> No <input type="checkbox"/>
14. Has the child been told they have a mental, behavioral, or physical disability?	Yes <input type="checkbox"/> No <input type="checkbox"/>
15. Are there any non-medical/social conditions that would affect the member's ability to obtain care?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, select all that apply: <input type="checkbox"/> food <input type="checkbox"/> housing <input type="checkbox"/> transportation <input type="checkbox"/> other: _____ _____	
16. Is the child pregnant?	Yes <input type="checkbox"/> No <input type="checkbox"/>
17. Has the child gone to the emergency room for dental problems in the past year?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please explain: _____	
Cell Phone: _____ Email Address: _____	

***If you have pain, swelling, bleeding, or infection please contact LIBERTY for immediate assistance.**

I understand that this information will be disclosed to my new dental plan.

Signature: _____ Date: _____

If not signed by the enrollee, please select one:

Parent of minor Guardian

Other representative: _____

Please return to: LIBERTY Dental Plan, P. O. Box 26110, Santa Ana, CA, 92799-6110

Adult Oral Health Risk Assessment



**LIBERTY
DENTAL PLAN.**

Filling out this form is voluntary. The member will not be denied care based on your answers. This information is private.

Member's Name:	Date of Birth:	ID Number:
----------------	----------------	------------

1. Has it been more than 12 months since you last saw a dentist?	Yes <input type="checkbox"/> No <input type="checkbox"/>
2. Do your teeth hurt when eating cold, hot, or sugary foods?*	Yes <input type="checkbox"/> No <input type="checkbox"/>
3. Do you have pain in your mouth or gums?*	Yes <input type="checkbox"/> No <input type="checkbox"/>
4. Do you have an infected tooth or teeth?*	Yes <input type="checkbox"/> No <input type="checkbox"/>
5. Is your mouth dry?	Yes <input type="checkbox"/> No <input type="checkbox"/>
6. Do your gums bleed when you brush or floss?*	Yes <input type="checkbox"/> No <input type="checkbox"/>
7. Have you had any gum (periodontal) treatments?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, list the last visit date: _____	
8. Do you wear full or partial fake teeth?	Yes <input type="checkbox"/> No <input type="checkbox"/>
9. Is English your main language?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If no, language spoken: _____	
10. Are you pregnant?	Yes <input type="checkbox"/> No <input type="checkbox"/>
11. Do you see a doctor often for a serious medical condition?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, circle all that apply: cancer, diabetes, kidney disease other: _____	
12. Are you currently receiving radiation or chemotherapy	Yes <input type="checkbox"/> No <input type="checkbox"/>
13. Do you have or been told that you have a mental, behavioral, or physical disability?	Yes <input type="checkbox"/> No <input type="checkbox"/>

14. Has the member gone to the emergency room for dental problems in the past year?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, explain: _____	
15. Are there any non-medical/social conditions that would affect the member's ability to obtain care?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, select all that apply: <input type="checkbox"/> food <input type="checkbox"/> housing <input type="checkbox"/> transportation <input type="checkbox"/> other: _____	
16. Have you been to the emergency room for dental problems in the past year?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, explain: _____	
Cell Phone: _____ Email Address: _____	

***If you have pain, swelling, bleeding, or infection please contact LIBERTY for immediate assistance**

I understand that this information will be disclosed to my new dental plan.

Signature: _____ Date: _____

If not signed by the enrollee, please select one:

Parent of minor Guardian

Other representative: _____

Please return to: LIBERTY Dental Plan, P. O. Box 26110, Santa Ana, CA, 92799-6110