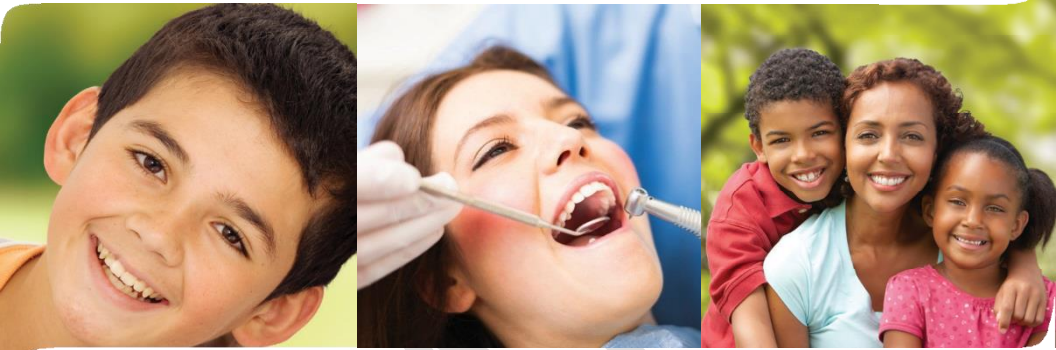


Nevada Medicaid Dental Program Member Handbook



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

Have Questions? Visit us at:
www.libertydentalplan.com/NV/Medicaid

Call us at [866.609.0418]

IMPORTANTE: ¿Puede leer este aviso? Si no, alguien le puede ayudar a leerla. Además, es posible que reciba este aviso por escrito en su propio idioma. Para obtener ayuda gratuita, llame ahora mismo al [866.609.0418]

LIBERTY Dental Plan of Nevada, Inc.



Making members shine, one smile at a time™

www.libertydentalplan.com

Welcome to LIBERTY Dental Plan

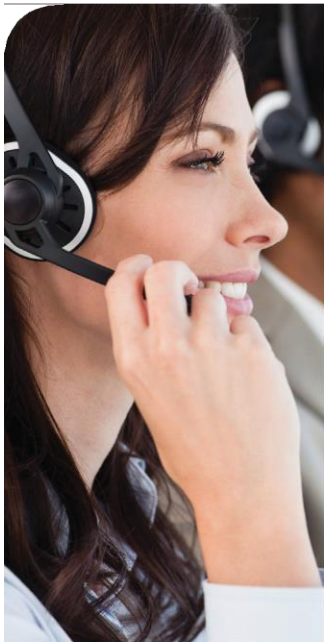
The LIBERTY Dental Plan Difference

At LIBERTY Dental Plan (LIBERTY), our goal is to provide You with local access to quality dental care as well as the 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 and pledge to support You through the excellent customer service You deserve.

You have joined the State of Nevada's Medicaid Dental Program. Your dental care is received through LIBERTY's network of dentists. As a recipient of this dental Plan, we encourage You to take an active part in ensuring the success of Your dental health by seeing Your dentist on a regular basis. When you choose a network dentist from our list of participating providers to be Your Dental Home, You will receive any necessary covered preventive or corrective dental care services at that location. LIBERTY and our participating dental providers are here to arrange and coordinate dental care services for You.

We want You to understand Your dental program and its benefits: the services You can receive, the services that are not covered, and any limitations on covered services. We are also here to assist You with information about non-dental services, such as how to obtain transportation to and



from Your dental office if You are unable to get to your appointments.

This handbook is a summary of the dental services available to You. Please keep this handbook for Your reference as it contains important information regarding LIBERTY and its operations. Any questions You have regarding coverage on any of the following specific provisions, or to change Your Dental Home, please call our Member Services Representatives at [866.609.0418] 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 serving you!



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

Notice of Nondiscrimination

Discrimination is against the law. LIBERTY Dental Plan (“LIBERTY”) complies with all applicable Federal civil rights laws and does not discriminate, exclude people or treat them differently on the basis of race, color, national origin, age, disability, or sex.

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 1-888-401-1128.

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:** 800-735-2929
- **Fax:** 888-273-2718
- **Email:** compliance@libertydentalplan.com
- **Online:** <https://www.libertydentalplan.com/About-LIBERTY-Dental/Compliance/Contact-Compliance.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

1-800-368-1019, 800-537-7697 (TDD)

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

Complaint forms are available at

<http://www.hhs.gov/ocr/office/file/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. (English)

ርስዎ፣ 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 ይደውሉ። (Amarhic)

إذا كان لديك أو شخص ما تساعده أية استفسارات عن LIBERTY Dental Plan لديك الحق في تلقي المساعدة والمعلومات بلغتك مجاناً. للتحدث إلى مترجم فوري، اتصل على الرقم (Arabic)

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. (Chinese)

اگر شما یا شخصی که به وی کمک می کنید، سؤالاتی در مورد LIBERTY Dental Plan 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 1-888-401-1128 تماس بگیرید (Farsi)

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. (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 an. (German)

No dakayo, wenna 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. (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、情報を入力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までお電話ください (Japanese)

만약 귀하 또는 귀하가 돕고 있는 어떤 사람이 LIBERTY Dental Plan에 관해서 질문이 있다면 귀하는 그러한 도움과 정보를 귀하의 언어로 비용 부담없이 얻을 수 있는 권리가 있습니다. 그렇게 통역사와 얘기하기 위해서는 1-888-401-1128 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 (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. (Spanish)

‘Afa’i 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’asomoa, 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. (Samoan)

Kung ikaw, o ang iyong tinutulungan, 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.

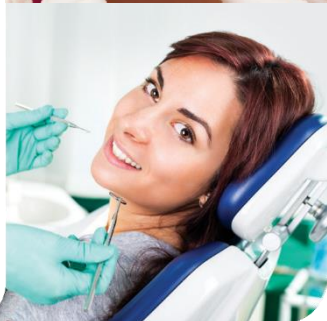
(Tagalog)

หากคุณ หรือคนที่คุณกำลังช่วยเหลือมีคำถามเกี่ยวกับ LIBERTY Dental Plan, คุณมีสิทธิที่จะได้รับความช่วยเหลือและข้อมูลในภาษาของคุณได้โดยไม่มีค่าใช้จ่าย พูดคุยกับล่าม โทร 1-888-401-1128. (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. (Vietnamese)

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Nevada Medicaid Dental Program Member Handbook
 © 2017 LIBERTY Dental Plan of Nevada, Inc.
 6385 S. Rainbow Blvd. Suite 200
 Las Vegas, NV 89118

Contacting LIBERTY

How to reach LIBERTY:

If You have questions regarding Your dental benefits, locating a participating provider, or for assistance obtaining an appointment, please contact 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 time.



Hearing or speech impaired recipients may call **[877.855.8039]**.



Our Address: LIBERTY Dental Plan of Nevada, Inc.
6385 S. Rainbow Blvd. Suite 200
Las Vegas, NV 89118
Fax: 888.401.1129



You can also contact us online at:
www.libertydentalplan.com/NVMedicaid

LIBERTY's Mobile App and Online Services:

LIBERTY's Mobile App and Online Services offers a quick and easy way for You to access Your account information and puts our most popular online features at Your fingertips.



LIBERTY's Mobile App features include:

- Locate a Network Provider
- Electronic ID Card
- Check Eligibility
- View Benefit Plan/Covered Benefits
- Check Your Usage
- Frequently Asked Questions (FAQ's)



LIBERTY's Online Services features include:

- Locate a Network Provider
- Print/Request an ID card
- View Claim Status
- View Benefit Plan/Covered Benefits
- Check Utilization
- Dental Health Questionnaire

Nevada Medicaid Eligibility:

Phone: **1.800.992.0900**

Website: <https://www.medicaid.nv.gov>

Medical/Dental Emergency:



Call: **911**

Member Rights and Responsibilities

LIBERTY must comply with any applicable Federal and State laws that pertain to recipient rights, and ensure that our staff and affiliated providers take those rights into account when providing services to Medicaid Recipients, as required by the Code of Federal Regulations, Enrollee Rights, 42 CFR § 438.100, which is available online at: <http://www.ecfr.Gov>
Upon enrollment, members are provided the written Member Rights and Responsibilities included in this handbook.

As a Member, You have the right to:

- To be treated with respect, and recognition of Your dignity and need for privacy and the need to maintain confidentiality of Your medical and dental information;
- To be provided with information about LIBERTY, its services, including covered services, the practitioners providing care, and Your rights and responsibilities;
- To be able to choose Your primary Dental care practitioner within the Plan's network;
- Freedom to change Your Primary Care Dentist upon request for any reason and as frequently as needed;
- To participate in decision-making regarding Your dental care, including Your preference about future treatment decisions, and the right to refuse treatment;
- To have access to the Grievance and Appeal system and pursue resolution of grievances and appeals about LIBERTY, Our network providers or care provided;
- To request an appeal;
- To formulate advance directives;
- To have access to Your Dental records in accordance with applicable federal and state laws and to request that they be amended or corrected as specified in 45 CFR Part 164;
- To be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience, or retaliation; and
- To receive information on available treatment options and alternatives, presented in a way You are able to understand.
- To be notified of your right to request and obtain a copy of Your member handbook at least once per year, or upon request.

As a Member, You have the responsibility to:

- Present Your Nevada Medicaid issued Medicaid ID card and LIBERTY issued ID card when using dental services.
- Do not permit the use of Your ID Card (s) by any other person.
- Provide the State of Nevada Medicaid office with changes in Your family that might affect eligibility or enrollment, as well as any name, telephone number or address changes.
- Take an active part in ensuring the success of Your dental health by seeing Your dentist on a regular basis, and following a mutually acceptable course of treatment.
- Understand Your dental program and its benefits: the services You can receive, the services that are not covered, and any limitations on covered services.
- Treat the Primary Care Dentist, office staff and LIBERTY staff with respect and courtesy.
- Provide providers with accurate and complete dental information.
- Keep scheduled appointments or contact the Dental Office twenty-four (24) hours in advance to cancel an appointment
- Ask questions of providers to determine the potential risks, benefits, consequences and cost of treatment and non-treatment and all relevant alternatives.
- Cooperate with the Primary Care Dentist in following a prescribed course of treatment, or letting the provider know the reasons the treatment cannot be followed, as soon as possible.
- Call or contact LIBERTY for any questions or information regarding the Plan.
- Follow LIBERTY's internal grievance and appeals process to resolve a disagreement or dissatisfaction with a provider or Plan decision.
- Live a healthy lifestyle and staying clear of behaviors known to be detrimental to Your health.
- Notify LIBERTY if you have any other dental insurance or coverage
- Be aware of and follow the organization's guidelines in seeking dental care.

LIBERTY Policies and Procedures for preserving the confidentiality of medical records are available and will be furnished to You upon request. No action or discrimination will be taken against Recipients who exercise their rights.

Eligibility and Enrollment

Nevada Medicaid is a program which provides quality health care services to low-income Nevadans who qualify based on federal and state law. Nevada Medicaid does not reimburse an individual for medical services; rather, payments are sent directly to the health care providers for services provided to Medicaid recipients.

Who is covered?

To be eligible for Nevada Medicaid You must qualify for a low income eligibility category. Generally, the categories of eligibility are children, pregnant women, families with dependent children, disabled adults or persons age 65 or older. You must be financially eligible for the Nevada Medicaid program. The rules for assessing your income and assets vary from category to category and are complex. A Division of Welfare and Supportive Services caseworker will work with You to evaluate financial eligibility and the programs for which you may be eligible. There are special rules for persons living in nursing homes and for disabled children living at home.

How do I enroll?

You must submit an application to determine if You are eligible to receive Nevada Medicaid or Nevada Check Up benefits. To apply for Medicaid, contact your local Division of Welfare and Supportive Services (DWSS) District Office. The contact information is in the DWSS District Office section of this guide. To apply for Nevada Check Up, call the toll-free number in the resource section at the end of this booklet and request an application or apply online at: <http://nevadacheckup.nv.gov>. Nevada Check Up offers applications in both English and Spanish.

LIBERTY will help You sign up with an in-network provider to help ensure You have a Dental Home for all Your dental health care needs. We accept all eligible recipients regardless of:

- Health Status or Health History
- Race, ethnicity, national origin, religion, sex, age, mental or physical disability, sexual orientation, genetic information or source of payment

Can I disenroll at any time?

You may ask to leave a health Plan for cause, at any time, for things like:

- Poor quality of care
- No access to covered services
- No access to providers within a reasonable distance or with reasonable appointment times.

You may also disenroll, without cause, for the following reasons:

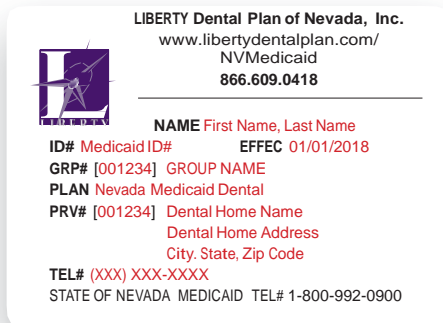
- For any reason in the first 90 days of being a Medicaid recipient
- Once every 12 months for any reason, following the initial 90 day period.
- Upon re enrollment of Medicaid eligibility if the annual disenrollment opportunity was missed.
- When the state imposes intermediate sanctions on Your Health Plan

Contact Nevada’s Medicaid office to exercise Your right to disenroll.

Recipient ID Cards

Each covered Recipient will receive a Medicaid identification (ID) card, issued by Nevada Medicaid. In addition, each Recipient will also receive an identification (ID) card from LIBERTY. You are responsible for bringing both ID cards with you to all dental appointments. You may call LIBERTY at [866.609.0418] to ask for a new ID card if You misplace it or need to correct any of the information on the card.

Sample of what Your LIBERTY Dental Insurance ID Card will look like:



Your LIBERTY Dental Insurance ID card will include

- Your Medicaid ID number
- Your first name and last name
- The name, location and telephone number of Your chosen Dental Home.
- Your effective date with LIBERTY
- What to do if You need emergency dental care
- The number to call to speak to LIBERTY's member service department or to file a grievance (complaint)
- The number to call to report any suspected fraud, waste or abuse

LIBERTY will send You a new card when:

- You request one
- You change or correct the spelling of a name
- Your card is lost or stolen

To request a new ID card call Member Services at **[866.609.0418]**, or request one online at www.libertydentalplan.com/NVMedicaid or through the free LIBERTY mobile app on your smart phone. Your card should arrive in 5 working days from the date requested.

A listing of current network providers is available and updated daily on our website. The listing includes address, phone number, accepting/ not accepting new members, days/hours of operation, languages, and Wheelchair accessibility.

Transportation Services

Do You need a ride to your appointment?

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

How Do I Schedule Transportation?

Transportation services are managed through MTM to provide You with non-emergency transportation to your dental appointments. If You have questions or need assistance setting up transportation. You may call MTM at **1.844.879.7341** or you may contact LIBERTY's Member Services at **[866.609.0418]** to help coordinate transportation for You.

When do I have to call?

You should call at least five working days before Your appointment, to set up transportation. MTM schedules routine trips Monday through Friday from 7 a.m. to 5 p.m. PST.

What information do I need to know when I call?

- The street address including city and zip code of your pick up and drop off locations and telephone number.
- If You have a Nevada Medicaid ID number, please have it ready for the reservation specialist.
- For minors age 12 and under, you need the name of the adult traveling with the child.
- Transportation is available to the provider of choice within 20 miles radius of Your home or the closest available provider.

What if I have a complaint?

You can file a complaint if you:

- Do not agree with a decision made by MTM
- Are not happy with any services received
- Are not happy about any other part of MTM's transportation services
- You may do this by calling MTM's WE Care Line at: **1.866.436.0457** or by going online at <http://www.mtm-inc.net/nevada/>

Interpreter/Translation Services

We want to make sure You fully understand Your benefits, if English is not Your first language; LIBERTY provides interpretation services and translation of certain written materials in Your preferred language at no cost to You. To ask for language services call **[866.609.0418]**. If You have a preferred language, please notify us of Your personal language needs by calling **[866.609.0418]**.

Who do I call for an interpreter?

Call LIBERTY's Member Services at **[866.609.0418]** to request any interpreter services you may need.

Member Services can help if You:

- Have problems hearing TTY/TDD **[877.855.8039]**
- Have problems seeing or reading, other formats may be available
- Do not speak English an interpreter will be used to communicate
- Do not read English- translated materials are available in Spanish; other languages may be translated upon request.



How can I find a dentist who speaks My language?

The provider directory lists any languages spoken at each provider location. For help locating a provider who speaks Your language, or if you need a free provider directory, call Member Services at **[866.609.0418]** and we will mail one to you. You can also view an up to date and searchable provider directory anytime by visiting us online at www.libertydentalplan.com/NVMedicaid. If You are unable to locate or access a provider office that speaks Your language, interpreter services can be provided to You at no cost.

How can I get a face-to face interpreter for My dental appointment?

To ensure that You are able to communicate with Your dentist during Your appointment, we can arrange for interpreter services during Your dental appointments, at no cost to You. To plan You must:

- Call LIBERTY at **[866.609.0418]**
- Call at least 48 hours before the appointment
- Provide the language that You speak
- Provide details on the provider office where You will have services
- Provide details on Your appointment date/time

Using Your Benefits

What is a Dental Home (Primary Care Dentist)?

LIBERTY encourages the establishment of a Dental home. A dental home is a dentist You see regularly to provide dental care and will always be available to You. Your Dental Home will help You care for Your teeth by providing dental guidance and appropriate dental treatment as needed. If You have been to a dental office in the past, please ensure the dental office participates in the network. If You have not seen a dentist, please contact our Member Services Department at [866.609.0418] to locate a dental office suitable to You and your family.

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 find a Dentist?

You can see any in-network provider you choose. For information on which dentists are in-network or to get a listing of dentists available to treat You, please call LIBERTY's Member Services [866.609.0418]. We can help You find the closest dentist which participates in the program.

To locate a provider online, go to www.libertydentalplan.com/NVMedicaid and choose “Find a Dentist” at the top of the page, then follow directions for one of the options available. The listing includes address, phone number, accepting/not accepting new members, days/hours of operation, languages, and Wheelchair accessibility.

How Do I Change my Dental Office?

You may contact our Member Services Department at [866.609.0418] to change your dental office, Member Services will assist You in locating a network provider over the phone, You can also locate providers on our online portal by visiting our website at www.libertydentalplan.com/NVMedicaid.

How do I make an appointment?

When You call the dentist’s office, identify Yourself as a LIBERTY member. Let them know You are calling to make an appointment with the dentist. See which dates and times are convenient for You. Write down the date and time of the appointment on Your calendar. On your appointment, please be sure to be on time to avoid having to reschedule. On the date of Your appointment, present your LIBERTY ID card and/or your Medicaid ID Card. The ID numbers on both cards are the same.

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

Contact our Member Services Department at [866.609.0418] to ensure you have selected an in-network office before obtaining services. Our Member Services Department will assist You in changing your dental office. Recipients have the freedom to select any contracted general dentist in the network.

How do I get services from a Dental Specialist?

Your Dental Home office must submit a referral request to LIBERTY for approval. You may only receive services from a dental Specialist that have been Pre-Authorized for You by LIBERTY. Your Specialist will submit a secondary Pre-Authorization for services to LIBERTY for any additional services required. All services performed by a Dental Specialist must be prior authorized by LIBERTY.

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

In-network dentists have agreed to join LIBERTY’s network of dentists 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, with the exception of certain emergency situations.

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 authorized by LIBERTY, except for emergency care.

What services are covered?

Newborns through age 20 have comprehensive dental benefits that include, Regular checkups, Teeth cleanings, Fluoride treatment, Sealants, X-rays, Fillings, Root canals, Crowns/Dentures, Extractions, Anesthesia, Space maintainers and Emergency dental care. For a detailed list of covered services, limitations and exclusions, including services requiring prior authorization please see the included schedule of benefits.

Adults age 21 and over receive emergency extractions, palliative care and may also be eligible to receive prosthetic care (dentures/partials) under certain guidelines and limitations. For a detailed list of covered services, limitations and exclusions, including services requiring prior authorization please see the included schedule of benefits.

Pregnant women age 21 or older have expanded dental services in addition to the adult dental services. These expanded pregnancy-related services require prior authorization. Covered dental services include Regular checkups, Teeth cleanings, Fluoride treatment, X-rays, Fillings, Periodontal Maintenance, Periodontal scaling and root planning, Crowns/Dentures, Extractions, Anesthesia and Emergency dental care. For a detailed list of covered services, limitations and exclusions, including services requiring prior authorization please see the included schedule of benefits.

What services are not covered?

Only those services that are medically necessary and listed on your schedule of benefits are covered, all services that are not listed are

considered 'not-covered'. LIBERTY understands there may be multiple treatment options that can be offered to You, however Your network provider is responsible for providing "Covered Services" as listed by Your Plan. Any treatment not covered by the Plan will be Your responsibility (meaning that if You elect "Alternative Treatment", You will incur the "Cost" of the "Non-Covered" services).

Do I have to get prior authorization for services?

Newborns through age 20 Most covered dental services not require prior-authorization when done by a network general dentist; however, some services such as veneers, dentures or adjustments for dentures, surgical services, and orthodontic services do require prior authorization. All services performed by a dental specialist require a referral and prior authorization. For a detailed list of covered services, limitations and exclusions, including services requiring prior authorization please see the included schedule of benefits.

Adults age 21 and over require prior authorization for many covered services, including surgical services, restorative services and services for dentures. All services performed by a dental specialist require a referral and prior authorization. For a detailed list of covered services, limitations and exclusions, including services requiring prior authorization please see the included schedule of benefits.

Pregnant women age 21 or older Most of the expanded benefits for pregnant members require prior-authorization. All services performed by a dental specialist require a referral and prior authorization. For a detailed list of covered services, limitations and exclusions, including services requiring prior authorization please see the included schedule of benefits.

Treatment Plan and Care

Once Your dentist has performed an oral evaluation, He/She will provide You with a treatment Plan and care. He/She will also discuss the benefits and consequences of treatment vs non-treatment. At a minimum, Your dentist will discuss treatment with respect and due consideration with dignity and privacy, receipt of information on available treatment options



and alternatives, participation in decisions regarding his or her health care including the right to refuse treatment.

Recipients are responsible and encouraged to communicate any third-party payment for services to vendors.

What if I want a second opinion?

At no cost to You, You may request a second dental opinion diagnosis for services covered under Your plan when appropriate, by directly contacting Member Services at [866.609.0418] or by writing to: LIBERTY Dental Plan, 6385 S. Rainbow Blvd. Suite 200, Las Vegas, NV 89118.

Your Dental Home office may also request a second dental opinion on Your behalf by submitting a Standard Specialty or Orthodontic Referral form with appropriate X-rays.

All requests for a second dental opinion are processed by LIBERTY within five (5) business days of receipt of the request, or within 72 hours of receipt for cases involving an imminent and serious threat to Your health including, but not limited to, severe pain, potential loss of life, limb, or major bodily function. Upon approval, LIBERTY will make the appropriate second dental opinion arrangements and advise the attending dentist of Your concerns. You will then be advised of the arrangement so an appointment can be scheduled. Upon request, You may obtain a copy of LIBERTY's policy description for a second dental opinion.

Do I need to Submit Claims?

You are not required to file claims directly with LIBERTY. Your general dental services are arranged with the participating Primary Care Provider who submits claims or encounters on Your behalf. Services provided by a Specialist are reported to LIBERTY via the Specialist. If You receive services out-of-network due to an emergency after-hours or Out-of-Area situation, consult the section below on Emergency Services.

How can I report suspected fraud, waste or abuse?

LIBERTY is committed to conducting its business in an honest and ethical manner. We seek to operate in strict compliance with all regulatory requirements that relate to and govern our business and dealings with employees, recipients, providers, business associates, suppliers, competitors and government agencies.

Health care fraud includes but is not limited to, the making of intentional false statements, misrepresentations or deliberate omissions of material facts from any record, bill, claim or any other form for the purpose of obtaining payment, services, or any type of compensation for health care services for which You are not entitled.

Health care fraud, waste, and abuse cost 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
- Falsifying eligibility information in order to gain coverage

You may remain anonymous if you prefer. All information received or will be treated as confidential, and the results of investigations will be discussed only with persons having a legitimate reason to receive the information.

To report possible unethical business practices or potential illegal activity regarding our health Plan, our providers, vendors, or recipients, You may contact LIBERTY:

Compliance Hotline: **888.704.9833**

E-mail: compliance@libertydentalplan.com

Mail: LIBERTY Dental Plan Compliance Department
340 Commerce, Suite 100
Irvine, CA 92602

How can I take part in reviewing and making public policies?

If You wish to participate in LIBERTY's Public Policy Committee, which reviews Plan performance and assists in establishing LIBERTY's public policies, please contact Member Services Department at **[866.609.0418]**, or contact LIBERTY's Quality Management Department at qm@libertydentalplan.com. Information on the structure and operation of the vendor and information about provider incentive plans is available upon written request.

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:

- Recipient and provider surveys used to measure satisfaction
- Monitoring Recipients that have been identified as ‘at risk’ and helping with the coordination of their care.
- Educating Recipients through newsletters, health fairs and other means.
- Reviewing the types and quality of services given to Recipients.
- Giving Recipients access to various education materials and tools online.
- Measuring various access standards like how long it takes for a Recipient to get an appointment.
- Phone calls are also monitored to make sure calls are answered timely and that all information provided is accurate and complete.
- All Recipient complaints are reviewed, and tracked for any trends or opportunities for improvement.

All of LIBERTY’s contracted private practice dentists have undergone strict credentialing procedures, background checks and office evaluations. In addition, each participating dentist must adhere to strict contractual guidelines. All dentists are pre-screened and reviewed on a regular basis. We conduct ongoing contract management to assure compliance with continuing education, accessibility for recipients, appropriate diagnosis and treatment planning.

For more information about LIBERTY’s quality programs, call Member Services at [866.609.0418].

Early Periodic Screening, Diagnosis and Treatment (EPSDT)

Medicaid’s federally mandated comprehensive and preventive children’s health program, Early Periodic Screening, Diagnosis and Treatment (EPSDT), promotes early prevention and treatment. Requirements include periodic screening, vision, dental and hearing services. In Nevada, the EPSDT program is called Healthy Kids and covers most Members under the age of 21.

As part of the Dental Screening, Members will receive an oral inspection for a child at any age. Tooth eruption caries, bottle tooth decay, developmental anomalies, malocclusion, pathological conditions or dental injuries should be noted. The oral inspection is not a substitute for a complete dental screening examination provided by a dentist. An initial dental referral should be provided on any child age 3 or older.

Call LIBERTY at [866.609.0418] to receive assistance in scheduling an appointment. EPSDT Services are provided to the Recipient at no cost.

Emergency Services

Emergency care is covered anywhere in the world. If it is a true medical emergency, call 911 or go to the nearest hospital. It is an emergency if You reasonably believe that not getting immediate care could be dangerous to Your life or to a part of Your body. Emergency care may include care for a bad injury, severe pain, or a sudden serious dental illness. All follow-up care should be done by your Dental Home. Do not go back to the emergency room.

You do not need prior authorization to receive emergency/urgent dental services from a network provider. You have the right to use any network provider for emergency/urgent services. You can also call LIBERTY's Member Services [866.609.0418], LIBERTY's 24 hour on call service will help you. or you may visit www.libertydentalplan.com/NVMedicaid to find a dentist and location where emergency/ urgent dental care is provided. Your provider will inform You about their after-hours urgent dental care policy, including how to contact a network dental provider 24 hours a day, 7 days a week for emergency/urgent services.

Directions for what to do In an Emergency

In the event You require Emergency Dental Care, contact Your Primary Care Dentist to schedule an immediate appointment. For urgent or unexpected dental conditions that occur after-hours or on weekends, contact Your Primary Care Dentist for instructions on how to proceed. All LIBERTY Primary Care Dental offices provide availability of Emergency Dental Services twenty-four (24) hours per day, seven (7) days per week.

If Your Primary Care Dentist is not available, or if You are out of the area and cannot contact LIBERTY to redirect You to another contracted Dental Office, contact any licensed dentist to receive emergency care. The dentist may need you to pay in full for the emergency dental care. We will refund you for dental emergency services. LIBERTY may not pay for services that are not deemed a dental emergency. If you pay a bill for emergency care, send a copy within 90 days to:

LIBERTY Dental Plan of California
Claims Department
6385 S. Rainbow Blvd. Suite 200
Las Vegas, NV 89118

You should notify LIBERTY as soon as possible after receipt of Emergency Dental Services, preferably within 48 hours. If it is determined that Your

treatment was not due to a dental emergency, the services of any non-contracted dentist will not be covered.

What services are covered under Emergency Care?

The Plan provides coverage for Emergency Dental Services only if the services are required to alleviate severe pain or bleeding or if a Recipient reasonably believes that the condition, if not diagnosed or treated, may lead to disability, dysfunction or death. If You encounter a dental emergency condition or situation in which there is an imminent and serious threat to Your health including but not limited to, the potential loss of life, limb, or other major body function, You may also wish to consider calling the 911 emergency response system. The use of such system should be done so responsibly.

Emergency Dental Service and care include (and are covered by LIBERTY) 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 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 Plan, or if LIBERTY determines the services were not dental in nature.

Grievance and Appeals

If You are dissatisfied with LIBERTY, Your selected Primary Care Dentist, personnel, facilities, specialty referral, Pre-Authorization, or the dental care You receive, You have the right to complain to the dental Plan.

A grievance is any expression of dissatisfaction with any aspect of care or services You receive by LIBERTY or at your dental provider's office.

If You received a notice of action letter from LIBERTY indicating that we will not pay for all or a part of a requested service, You have the right to appeal that action.

How do I submit a Grievance (complaint)?

You may submit your Grievance by calling LIBERTY's Member Services Department at [866.609.0418]. Or Your complaint or Grievances/Appeal may be:

- Sent in writing to: LIBERTY Dental Plan of Nevada, Inc.
6385 S. Rainbow Blvd. Suite 200
Las Vegas, NV 89118 or
- Sent by facsimile to: LIBERTY Dental Plan's Member Services

Department facsimile at [949.223.0011], or

- Submitted verbally: LIBERTY Dental Plan Member Services Representative at LIBERTY's toll-free number: [866.609.0418], or
- Submitted using our online Grievance filing process by visiting: www.libertydentalplan.com/NV/Medicaid.

Grievance Forms are also available on our website, www.libertydentalplan.com, or by calling LIBERTY Member Services or by asking Your Provider. Grievance/Appeal Forms are not required to submit a grievance. LIBERTY will investigate a Grievance/Appeal submitted in any format.

If You have limited English proficiency, visual or other communication impairment, LIBERTY will assist You in filing a Grievance. Assistance may include translation of Grievance procedures, forms and LIBERTY's responses, and may also include access to interpreters, telephone relay systems to aid disabled individuals to communicate.

When will I get a response to my Grievance?

LIBERTY's representatives will review the problem with You and make every effort to get you an answer within 30 calendar days.

For cases involving an imminent and serious threat to Your health including, but not limited to, severe pain, potential loss of life, limb, or major bodily function, LIBERTY will expedite the processing of Your Grievance upon notification of this urgent condition. LIBERTY will resolve to the urgent condition within 3 calendar days of receipt of the Grievance, or sooner, based on the condition. In the case of urgent Grievances, You are not required to await the determination by LIBERTY before accessing the State Fair Hearing.

How do I submit an appeal?

Your or Your provider may submit an appeal to LIBERTY within 90 calendar days from the date you received the notice of action from LIBERTY. All appeals must be sent to us in writing and include the following:

- Your name
- Your Medicaid ID number
- Your date of birth
- Your providers name
- The date of Service
- Your mailing address
- An explanation of why You feel the decision should be reversed
- Any supporting documents or records



- If You feel that the standard time frame for an appeal could cause serious harm or jeopardy to your dental health, you may request an expedited (fast) appeal.

Appeals should be mailed to and addressed as follows:

LIBERTY Dental Plan of Nevada, Inc.
Attn: Grievance and Appeal Department
6385 S. Rainbow Blvd. Suite 200
Las Vegas, NV 89118

When will I get a response to my Appeal?

A committee of senior management staff and/or appropriate level health care professionals that did not take part in the initial decision will review Your appeal. You will receive a written response to Your appeal within 30 calendar days. In the case of an expedited appeal, You will receive a response within 72 hours of receipt of your appeal. The response time is always completed as expeditiously as the condition requires, but no later than the time frames described above.

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

If You are not satisfied with the resolution initially provided, You may contact the State Fair Hearing process by calling **1.775.684.3704**. You may also submit additional materials for additional consideration to LIBERTY's Quality Management Department. Your requests must be in writing with a detailed summary and should be directed to:

LIBERTY Dental Plan of Nevada, Inc.
Quality Management Department
6385 S. Rainbow Blvd. Suite 200
Las Vegas, NV 89118

You will not be discriminated against in any way by LIBERTY or Your Provider for filing a Grievance or Appeal.

Fair Hearing

You have the right to ask for a fair hearing from the state after you have gone through LIBERTY's internal appeal process. If You disagree with LIBERTY's decision on your Grievance or Appeal, You can access the State Fair Hearing process by calling the Nevada Medicaid hearings Unit at **1.775.684.3704**, or You may send it in writing to:

Nevada Division of Health Care
Financing and Policy Hearings
1100 East William Street, Suite 204
Carson City, NV 89701

You must ask for this hearing within 90 days of receiving the final appeal notice from LIBERTY.

If you need information or help, call the State Medicaid Office at:
Las Vegas: 702-668-4200 or 1-800-992-0900
Carson City: 775-684-3651 or 1-800-992-0900

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

Clark County: 702-386-0404 or 1-866-432-0404
Washoe County: 775-284-3491 or 1-800-323-8666

If you need information or help, call us at:
Toll-Free: 1.866.609.0418
TTY/TTD: 1.877.855.8039

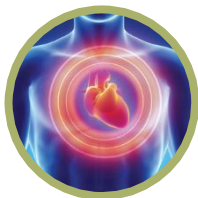
**COVERED BENEFITS,
LIMITATIONS &
EXCLUSIONS**

See attachment insert

Important Dental Tips



Oral Health is critical to whole body health, especially for children. Dental visits can provide key diagnostics – identifying diabetes and other chronic diseases – and, 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 likely to have heart disease.
- **Stroke and Blood Clots** Periodontal disease (gum disease is one of the most common, preventable diseases in adults) increases susceptibility of stroke and blood clots.
- **Respiratory Disease** Bad bacteria from the mouth can be an agent for pneumonia and bronchitis.
- **Diabetes** Periodontal disease disrupts the control of blood sugar.
- **Kidney Disease** Harmful bacteria from poor oral hygiene can weaken kidneys.



For most of us, thorough daily oral hygiene lays the groundwork for a healthy smile. Just a simple routine of brushing and flossing, in addition to regular dental checkups, can be enough in most cases 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
- As with brushing, use a gentle touch to avoid injuring your gum tissue
- Clean between Your teeth once a day



Brushing up on technique

Since there are various techniques for brushing Your

teeth, it's a good idea to ask Your dentist which one to use. Here are a few tips to help you develop a good brushing routine:

Brushing Your teeth

Brush Your teeth at least twice a day - in the morning and before bed

- 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, and 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 cause bad breath

The Benefits of a Dental Home

Having a “Dental Home” helps produce and maintain a healthy smile. Families are encouraged to build a relationship with their dental office so they have a great a “Dental Home” – an environment that encourages Recipients of the family to have regular dental checkups.

Benefits of establishing a Dental Home:

- Patients become familiar with the dentist, their 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) all recommend establishing a “Dental Home” for your child by one year of age. Children who have a dental home are more likely to receive appropriate preventive and routine care. A





well-established Dental Home also includes appropriate referrals to dental specialists.

With the rising incidence of tooth decay among young children, having a Dental Home can be essential 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 imperative. The Dental Home is an open door to all aspects of oral health care delivered in a comprehensive, continuously accessible, coordinated, and family-centered way.

Definitions and Useful terms

Action: A decision made by LIBERTY that you have the right to appeal, including:

- Denial or partial denial of a requested service
- Denial, in whole or in part, of payment for a service
- Failure to provide services in a timely manner
- Failure of LIBERTY to act within specified time frames

Appeal: A request for review of a notice of action (see action)

Authorization: The notification of approval by LIBERTY that You may proceed with treatment requested.

Benefits: the dental health care services available under the Nevada Medicaid Dental Program.

Benefit Plan: The dental benefit Plan provided under Your Medicaid coverage by LIBERTY.

Covered Services: Those dental services that are covered under Your Medicaid benefits and described on your Schedule of Benefits.

Dental Home: This is usually a General Dentist who You are assigned to and provides Your basic care and coordinates the care You need from other dental specialty Providers.

Dental Necessity or Dentally Necessary: A Covered Service that meets Plan guidelines for appropriateness and reasonableness by virtue of a clinical review of submitted information. Covered Services may be



reviewed for Dental Necessity prior to a signed contract to provide services or after rendering. Payment for services occurs for Covered Services that are deemed Dentally Necessary by the Plan.

Dental Records: Refers to diagnostic aid, intraoral and extra-oral radiographs, written treatment record 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.

DHCFP: is the abbreviation for the State of Nevada Division of Health Care Financing and Policy.

Emergency Care/Emergency Dental Service: Emergency Dental Service and care include (and are covered by LIBERTY) 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 Plan, or if LIBERTY determines the services were not dental in nature.

Exclusion: A statement describing one or more services or situations where coverage is not provided for dental services by the Plan.

General Dentist: A licensed dentist who provides general dental services and who does not identify as a Specialist.

Grievance: Any expression of dissatisfaction with any aspect of care other than the appeal of actions.

In-Network Benefits: Benefits available to You when You receive services from a Contracted Provider

Non-Participating Provider: A dentist that has no contract to provide services for LIBERTY.

Out-of Area Coverage: Benefits provided when You are out of the Plan's Service Area, or away from Your Primary Care Provider.

Out-of Area Urgent Care: Urgent services that are needed while You are located out of the Service Area or away from Your Primary Care Provider.

Participating Dental Group, Dental Office, or Provider: A dental facility and its dentists that are under contract to provide services to LIBERTY recipients in accordance with LIBERTY's rules and regulations.

Plan: LIBERTY Dental Plan of Nevada, Inc.

Pre-Authorization: A document submitted on Your behalf requesting an advance determination and approval to render desired treatment services for You.

Primary Care Provider: A dentist affiliated with LIBERTY to provide services to covered recipients of the Plan. The Primary Care Dentist is responsible to provide or arrange for needed dental services. Also known as a Dental Home.

Professional Services: Dental services or procedures provided by a licensed dentist or approved auxiliaries.

Provider: A contracted dentist providing services under contract with the Plan.

Recipient/Member: Any presently enrolled Medicaid Recipient who has completed a Plan membership application and receives Plan benefits through LIBERTY, also known as Enrollee.

Service Area: The counties in Nevada where LIBERTY provides coverage.

Specialist: A Dentist that has received advanced training in one of the dental specialties approved by the American Dental Association as a dental specialty, and practices as a Specialist. Examples are Endodontists, Oral and Maxillofacial Surgeon, Periodontists and Pediatric Dentist.

Urgent Care: See Emergency Care

Us/We/Our: LIBERTY Dental Plan, Inc. (LIBERTY)

You/Your/My/I: Recipient, Member or “You”, or equivalent in this document.



Frequently Asked Questions

How can I find a contracted LIBERTY dentist?

Contact LIBERTY at **866.609.0418**, our staff can help You find a dentist close to You. You can also visit our website www.libertydentalplan.com/NVMedicaid and click “Find a Dentist” to locate a dentist in Your area.

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

Contact LIBERTY at **866.609.0418** to request an ID card

Can I change My dentist?

Yes. See page XX for details.

How do I know what’s covered under My dental Plan?

Page XX of this handbook will provide you with “Covered Benefits”.

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

LIBERTY can arrange transportation to Your dental appointment. See page XX for details.

Does LIBERTY offer interpreter services?

Yes. See page XX for details.

What if I want a second opinion?

You may request a second opinion. See page XX for details.

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