



Office Portal User Guide

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Office Portal User Guide



Welcome to the Office Portal

LIBERTY Dental Plan ("LIBERTY") offers 24/7 real-time, no cost access to information and tools through our secure Office Portal. The portal features many useful and improved search tools and a more holistic view of member information that provides a more convenient way to connect with us at LIBERTY.

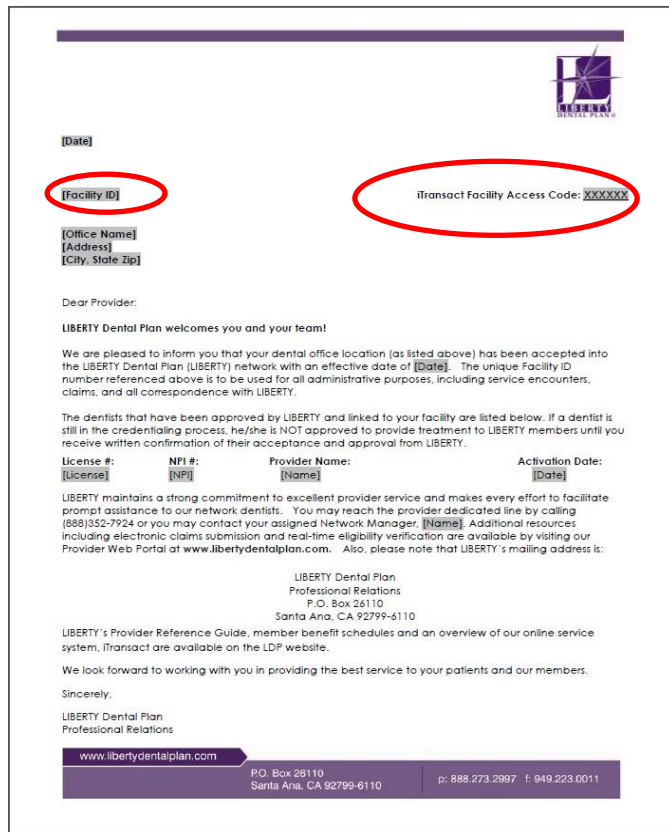
Getting Started

System Requirements

- Internet Connection compatible with Microsoft Edge, Google Chrome, and Mozilla Firefox
- Adobe Acrobat Reader

Office Number and Access Code

All contracted network dental offices are issued a unique **Office Number** and **Access Code**. These numbers can be found in your LIBERTY Welcome Letter and are required to register your office on LIBERTY's Office Portal. If you are unable to locate your Office Number and/or Access Code, please contact us at (888) 352-7924 for assistance.





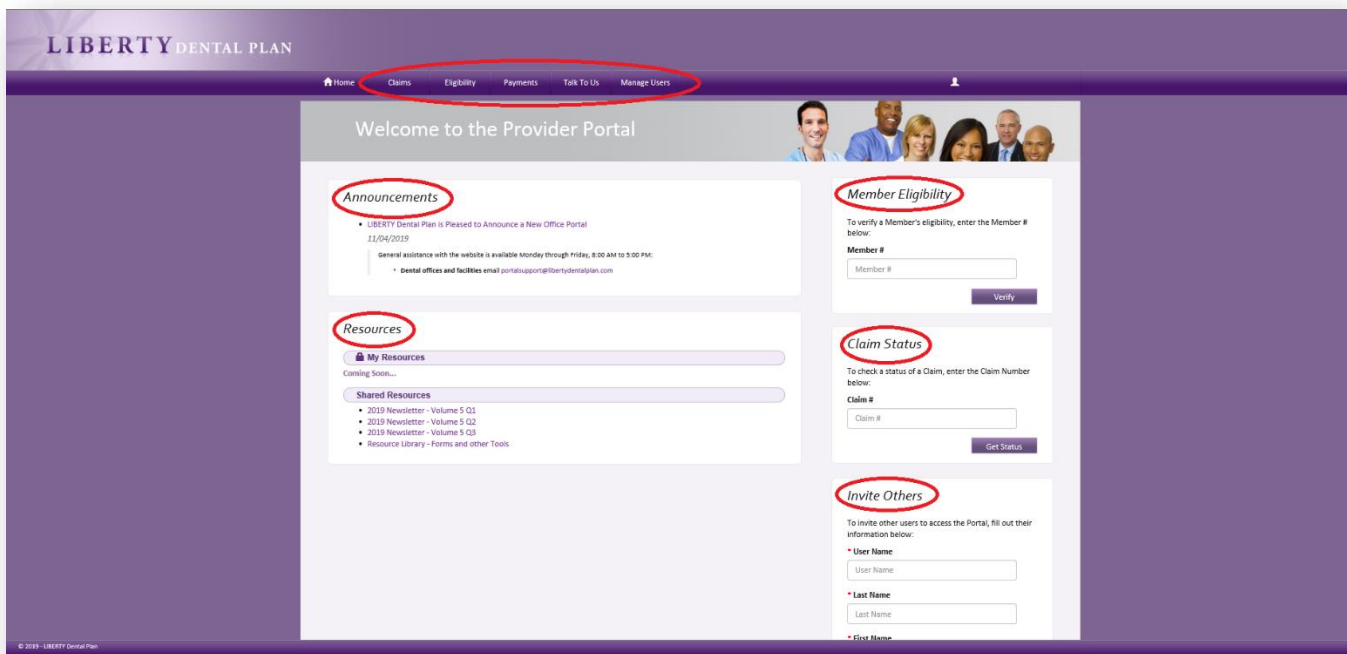
Office Portal User Guide



NEW Look: Home Page Features

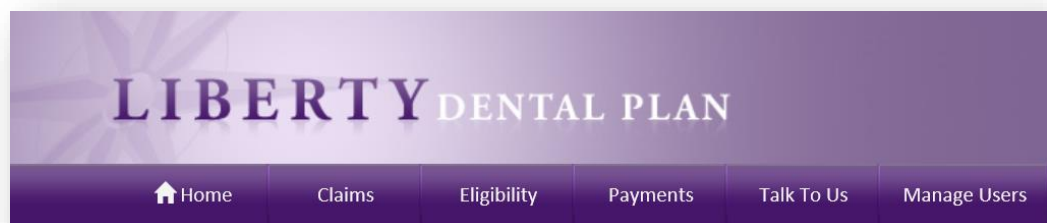
On the Office Portal landing page, you now have quick access to the following features:

- **Announcements:** view global LIBERTY announcements
- **Resources**
 - My Resources: view secure office specific documents (formerly "Attachments")
 - Shared Resources: view global/public documents
- **Member Eligibility:** ability to enter Member# with or without the suffix "-01, etc. "
- **Claims Status:** quick access to claims
- **Invite Others:** administrator access to setup new user(s)



The navigation buttons are now located horizontally on the top of the page. Hover over each selection to view options.

- Claims
- Eligibility
- Payments
- Talk To Us
- Manage Users





Office Portal User Guide



New Office Registration

Register a New Office

A designated Office Administrator should be the user to set up the account on behalf of all providers/staff. The Office Administrator will be responsible for adding, editing, and terminating additional users within the office.

1. To register a new office, enter the following website address into your browser:
www.libertydentalplan.com
2. Click on **Login → Dental Office**

The screenshot shows the Liberty Dental Plan website. At the top right, there are links for "Secure Email" and "GRIEVANCE Forms". The main navigation bar includes "LIBERTY DENTAL PLAN" logo, "Login", and a dropdown menu with options: "Broker", "Group", "Member", "Dental Office" (circled in red), and "Office Vendor". Below the navigation bar are links for "Members", "Providers", "Brokers", "Programs", and "Find a Dentist". The main content area features a large image of a man holding a child, with the text "Making members shine, one smile at a time™". Below this are four purple buttons: "Individual & Family Dental Plans" (Shop), "Healthcare Exchange Plans" (Explore), "Medicaid" (Explore), and "Group Sponsored Plans" (Explore). At the bottom left, there is a "LIBERTY National Coverage" section with a "Select your state to learn more." prompt, a "Select state" dropdown, and a "Go" button. At the bottom right, there is a "LIBERTY News" section with a list of news items and a "View All News >>" link.



Office Portal User Guide



Register a New Office *continued*



Please provide the following details.

Choose the TYPE of user you want to create an account for:

Office

Sign in name

Sign in name

Email verification is required prior to completing account setup.

Email Address

Email Address

Send verification code

New Password

New Password

Confirm New Password

Confirm New Password

User First Name

User First Name

User Last Name

User Last Name

Continue Cancel

I'm not a robot

reCAPTCHA
Privacy Terms

3. Select **Office** from the drop-down menu as the **TYPE** of user
4. Create a Sign in name
Note: The **Sign in Name** can contain any combination of letters, numbers, and special characters except for the following special characters: @, (,).
5. Enter Email Address
6. Select **Send Verify code** and then enter the verification code from the email address provided
7. Create New Password
Note: The **Password** must be a minimum of 8 characters in length and contain at least 3 of the following: 1 uppercase letter, 1 lower case letter, 1 number and 1 special character. (!@#%\$&*)
8. Create a User First Name and User Last Name
9. Check the box for **I'm not a robot**
10. Select **Continue**



Office Portal User Guide



Register a New Office *continued*

11. Enter Access Code, Office Number, and Office Phone Number
12. Select **Continue**

A screenshot of a web form for registering a new office. At the top is the Liberty Dental Plan logo. Below it is the text 'Please provide the following details.' followed by three input fields: 'Access Key', 'Office Number', and 'Office Phone Number'. At the bottom are two buttons: 'Continue' (purple) and 'Cancel' (yellow).

Please provide the following details.

Access Key
Access Key

Office Number
Office Number

Office Phone Number
Office Phone Number

Continue **Cancel**



Office Portal User Guide



My Preferences

After initial set-up, the user will be directed to the **My Preferences** tab.

1. Select your office's various Preferences

Note: The Evidence of Payment (EOP) is sent to providers and the Evidence of Benefits (EOB) is sent to members.

	NPI	Provider #	Provider Name
Selected <input checked="" type="checkbox"/>	-	0	ALL
Select <input type="checkbox"/>			

1 - 2 of 2 items

2. Select Provider Type: Dental

3. Show EOP after submitting a claim: Yes No

4. Show details after submitting a referral: Yes No

5. Default to Assignment of Benefits: Yes No

6. How many items to display per page: 5

7. How many days back for claims lookup: Last Week

8. Default to Place of Service on Claim Submission Page (HCFA claims only): 11-Office

9. Submit a claim default options: Service Date(s)

10. Default Billing currency: US Dollars

11. How many checks to display per page: 5

12. How many days back for checks lookup: Last Week

The Place of Service on Claim Submission page default is set to 11-Office. Another **Place of Service** can be selected as a default from the drop-down menu.

2. Select Provider Type:

3. Show EOP after submitting a claim:

4. Show details after submitting a referral:

5. Default to Assignment of Benefits:

6. How many items to display per page:

7. How many days back for claims lookup:

8. Default to Place of Service

9. Submit a claim default options:

10. Default Billing currency:

11. How many checks to display per page:

12. How many days back for checks lookup:

- 11-Office
- 03-School
- 02-Telehealth
- 15-Mobile Unit
- 12-Home
- 13-Assisted Living Facility
- 04-Homeless Shelter
- 05-Indian Health Service-Free Standing Facility
- 06-Indian Health Service Provider-Based Facility
- 07-Tribal 638 Free Standing Facility
- 08-Tribal 638 Provider Based Facility
- 23-Emergency Room - Hospital
- 24-Ambulatory Surgical Center
- 31-Skilled Nursing Facility
- 34-Hospice
- 49-Independent Clinic
- 50-Federally Qualified Health Center (FQHC)
- 53-Community Mental Health Center
- 71-Public Health Clinic
- 72-Rural Health Clinic
- 73-Unassigned
- 01-Pharmacy
- 16-Temporary Lodging
- 19-Off Campus-Outpatient Hospital
- 20-Urgent Care Facility
- 22-On Campus-Outpatient Hospital
- 25-Birthing Center
- 26-Military Treatment Facility



Office Portal User Guide



My Preferences *continued*

The **Submit a claim** default is set to Service Date(s). The date of service you enter for the first service line will automatically populate when you click in the Service Date box for any additional service lines entered when submitting a claim. (The steps on how to submit a claim, pre-estimate and referral will be explained in further detail; see page 27)

2. Select Provider Type: Dental

3. Show EOP after submitting a claim: Yes No

4. Show details after submitting a referral: Yes No

5. Default to Assignment of Benefits: Yes No

6. How many items to display per page: 5

7. How many days back for claims lookup: Last Week

8. Default to Place of Service on Claim Submission Page (HCFA claims only): 11-Office

9. Submit a claim default options: **Service Date(s)**

10. Default Billing currency: US Dollars

11. How many checks to display per page: 5

12. How many days back for checks lookup: Last Week

2. Click **Save**

Once your preferences have been saved, you will remain on the **Preferences** screen where you can select from the available drop-down features.

1. Select Provider:

Select	NPI	Provider #	Provider Name
Select	-	0	ALL
Select			
Select			
Select			

2. Select Provider Type: Dental

3. Show EOP after submitting a claim: Yes No

4. Show details after submitting a referral: Yes No

5. Default to Assignment of Benefits: Yes No

6. How many items to display per page: 5

7. How many days back for claims lookup: Last Week

8. Default to Place of Service on Claim Submission Page (HCFA claims only): 11-Office

9. Submit a claim default options: Service Date(s)

10. Default Billing currency: US Dollars

11. How many checks to display per page: 5

12. How many days back for checks lookup: Last Week

Save

Your office's preferences can be updated at any time by hovering over your name in the top right corner and then clicking on the **My Preferences** option in the drop-down menu.



Office Portal User Guide



Add a New User

The Administrator can add additional users by:

1. Click **Manage Users** from the drop-down menu on the top of the screen

The screenshot shows the 'Manage Users' page with a navigation bar at the top containing 'Home', 'Claims', 'Eligibility', 'Payments', 'Talk To Us', and 'Manage Users'. Below the navigation bar is a search form with fields for 'User Name', 'Last Name', 'Email', and 'First Name', and a 'User Status' dropdown menu. Below the search form, it says '2 user(s) found.' and displays a table with columns: 'User Name', 'First Name', 'Last Name', 'Roles', 'User Status', and 'Change Status'. The table contains two rows: 'Test User1' and 'Test User2'. Below the table is a pagination control showing '1' of '20' items per page. At the bottom left, the 'Add a User' button is circled in red.

2. Click **Add a User**

Note: All additional users must have their individual assigned User Name and Password. This will avoid multiple users being knocked off the portal due to the same User Name and Password.

3. Input a **User Name** (must be unique to the user), **First Name, Last Name and Email Address**. All fields marked with an asterisk (*) are required.

Note: The user will receive an email notifying them to click on the link next to the text to create their password upon first log on attempt.

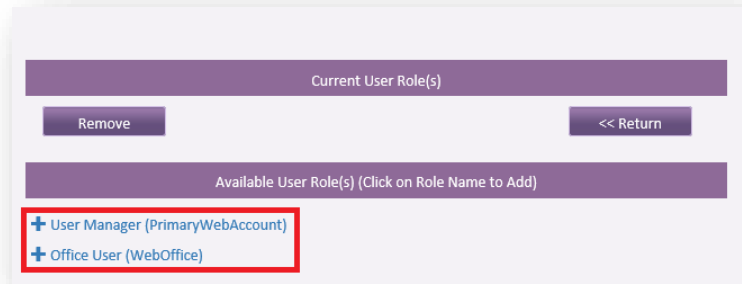
The screenshot shows the 'Adding additional User to' form. It has a title bar 'LIBERTY DENTAL PLAN' and a navigation bar with 'Home', 'Claims', 'Eligibility', 'Payments', 'Talk To Us', and 'Manage Users'. The form contains four required fields: 'User Name', 'First Name', 'Last Name', and 'Email Address'. Below the fields are 'Add User' and 'Cancel' buttons. The 'Add User' button is circled in red.

4. Click **Add User**



Set New User Roles

1. We recommend that you click on **Office User (WebOffice)** to grant the user access to view/submit claims and check eligibility. Once you click on each role in **Available User Role(s) (Click on Role Name to Add)**, the roles will move up to **Current User Role(s)**
2. Click **Return**



Note: The user must have a role mapped to be able to use the portal

Roles:

- **User Manager (PrimaryWebAccount)** – Allows the user to manage and add additional user accounts for the entire office. This includes resetting passwords, updating user information (First name, Last Name, Email Address), as well as disabling users in the event they should no longer have access to the account.
- **Office User (WebOffice)** – Allows access to all functionality on the portal, except limits access to “Manage Users” tab. The user would only have access to their account and no access to any other user accounts for that office.



Office Portal User Guide



Enable and Disable Users

Once a new user is set up, the Office Administrator has the ability to enable or disable their account.

1. Click on the **Manage Users** on the top of the screen
 - If the User Status is **Enabled**, the account is **activated**. To disable the account, click **Disable** under **Change Status**.
 - If the User Status is **Disabled**, the account is not active. To reinstate the account, click **Enable** under **Change Status**.

Manage Users

User Name: Last Name: User Status: ALL

Email: First Name: Search Reset

2 user(s) found.

	User Name	First Name	Last Name	Roles	User Status	Change Status
Edit	Test User1	Test	User	View Roles	Invited	Enable
Edit	Test User2	Test	User	View Roles	Enabled	Disable

1 - 2 of 2 items

Add a User



Office Portal User Guide



Edit User Information

The Office Administrator can edit a user's information:

1. Click on the **Manage Users** on the top of the screen

	User Name	First Name	Last Name	Roles	User Status	Change Status
Edit	Test User1	Test	User	View Roles	Invited	Enable
Edit	Test User2	Test	User	View Roles	Enabled	Disable

2. Click **Edit** for the user you would like to edit
3. Update user information

Note: All user information with an asterisk (*) can be edited.

4. Click **Update User**

LIBERTY DENTAL PLAN

Home Claims Eligibility Payments Talk To Us Manage Users

Edit User Details

User Name

* First Name

* Last Name

* Email Address

[Update User](#) [Resend Email](#) [Return](#)



Office Portal User Guide



My Profile

You can view your office's current business information by clicking on the **My Profile** on the top right side of the screen. Your current business information can be updated through the Provider Directory Information Verification (DIV) website at www.libertydentalplan.com/ProviderDIV

LIBERTY DENTAL PLAN

Home | Claims | Eligibility | Payments | Talk To Us | Manage Users

Office Properties

Name: _____
 Address: _____
 Contact Name: _____
 Contact Email: _____
 Phone #: _____
 Fax: _____
 Wheelchair Access: _____
 Available After Hours: _____
 Number Of Physicians: _____
 Extenders: _____
 Facility Operating Number: _____

Office Hours

Monday: 08:00 AM - 05:00 PM
 Tuesday: 08:00 AM - 05:00 PM
 Wednesday: 08:00 AM - 05:00 PM
 Thursday: 08:00 AM - 05:00 PM
 Friday: 09:00 AM - 05:00 PM
 Saturday: -
 Sunday: -

My Profile
 My Preferences
 Change Password
 Log Off

Mapped Providers

Last Name	First Name	Number	NPI

Languages

Name	Use
English	Primary
Farsi	Secondary
Spanish	Secondary

Additional Service(s)

No Records found

Mapped Providers

You can view a list of all the providers linked to your office in our system on the **Mapped Providers** section of the screen. If your office requires edits to a provider such as to add or terminate, you can request a provider change through the Provider Directory Information Verification (DIV) website at www.libertydentalplan.com/ProviderDIV. Your Provider Relations Network Manager will reach out to you for further details.

New: Providers with an "Active Contract" within the office will display. If a provider has termed, the provider will display for six (6) months and then drop from the **Mapped Providers** screen.

Note: Active Providers only identify a provider linked to your facility it does not verify the Line of Business (i.e., Medicaid, Commercial, etc.) the provider is linked to or the provider effective date. Please contact Provider Relations Department to verify the Line of Business and/or effective date for the individual Active provider prior to treating the member.



Office Portal User Guide



Accessing Your User Account

Login

Please visit www.libertydentalplan.com.

1. Click on **Login → Dental Office / Office Vendor**

The screenshot shows the Liberty Dental Plan website. At the top right, there are links for 'Secure Email' and 'GRIEVANCE Forms'. The main navigation bar includes 'Members', 'Providers', 'Brokers', 'Programs', and 'Find a Dentist'. A 'Login' button with a user icon is visible, and its dropdown menu is open, showing options: 'Broker', 'Group', 'Member', 'Dental Office' (circled in red), and 'Office Vendor'. Below the navigation is a hero section with the text 'Making members shine, one smile at a time™' and an image of a man lifting a child. At the bottom of the hero section are four purple boxes for 'Individual & Family Dental Plans', 'Healthcare Exchange Plans', 'Medicaid', and 'Group Sponsored Plans', each with a 'Shop' or 'Explore' button.

LIBERTY National Coverage

Select your state to learn more.

An interactive map of the United States with state abbreviations. Above the map is a dropdown menu labeled 'Select state' and a purple 'Go' button.

LIBERTY News

- 05/16/2018 [Some New News](#)
- 05/16/2018 [LA PHP Providers News](#)
- 06/25/2015 [Dental Managed Care Takes a New Tack](#)
- 05/27/2015 [Ernst & Young LLP \(EY\) announces LIBERTY Dental Plan's Founder Dr. Amir Neshat is an EY Entrepreneur Of The Year® \(EOY\) 2015 Award finalist](#)

[View All News >>](#)



Office Portal User Guide



Login *continued*

On the Office Portal Login screen:

2. Type in **User Name** and **Password**
3. Check **I'm not a robot** box to open the reCAPTCHA window
4. Follow the instructions and select the appropriate images in the reCAPTCHA window
5. Click **Verify** in the reCAPTCHA window



6. Ensure you see a green check mark next to **I'm not a robot**
7. Click **Sign In**



Office Portal User Guide



Password Reset/Expired Password

Please visit www.libertydentalplan.com.

1. Click [Login](#) → [Dental Office / Office Vendor](#)

Secure Email GRIEVANCE Forms

LIBERTY DENTAL PLAN

Members Providers Brokers Programs Find a Dentist

Login

- Broker
- Group
- Member
- Dental Office**
- Office Vendor

Making members shine, one smile at a time™

Individual & Family Dental Plans Shop

Healthcare Exchange Plans Explore

Medicaid Explore

Group Sponsored Plans Explore

LIBERTY National Coverage

Select your state to learn more.

Select state Go

LIBERTY News

- 05/16/2018 [Some New News](#)
- 05/16/2018 [LA PHP Providers News](#)
- 06/25/2015 [Dental Managed Care Takes a New Tack](#)
- 05/27/2015 [Ernst & Young LLP \(EY\) announces LIBERTY Dental Plan's Founder Dr. Amir Neshat is an EY Entrepreneur Of The Year® \(EOY\) 2015 Award finalist](#)

[View All News >>](#)



Office Portal User Guide



Password Reset/Expired Password *continued*

On the Office Portal Login screen:

2. Click **Forgot your password?**
3. Type Username and Email Address associated to user account and click **Send verification code**

LIBERTY DENTAL PLAN

Sign in with your user name

Username
Username

Password
Password

Sign In

I'm not a robot

reCAPTCHA
Privacy - Terms

Don't have an account? Sign up now

Forgot your password?

LIBERTY DENTAL PLAN

Please provide the following details.

Sign in name
Username

Email verification is required as part of the password reset process.

Email Address
user@libertydentalplan.com

Send verification code

Continue Cancel



Office Portal User Guide



Password Reset/Expired Password *continued*

- The following message will appear on your screen directing you to your email address to reset your account.

- Enter** the code from the email in the **Verification code**
- Click Verify Code** and then click **Continue**



Office Portal User Guide



Password Reset/Expired Password *continued*

On the next screen:

7. Type in **New Password** and **Confirm New Password**

Note: Passwords must be a minimum of 8 characters in length and contain at least 3 of the following:
1 uppercase letter, 1 lower case letter, 1 number and 1 special character. (!@#\$\$%&*)

8. Click **Continue**

9. Type in **User Name** and **Password**
10. Check **I'm not a robot** box to open the reCAPTCHA window
11. Follow the instructions and select the appropriate images in the reCAPTCHA window
12. Click **Verify** in the reCAPTCHA window
13. Ensure you see a green check mark next to **I'm not a robot**
14. Click **Sign In**



Member Eligibility and Benefits

Check Member Eligibility

To check member eligibility:

You can access member eligibility in one of two ways:

- a) Main Home screen **Member Eligibility** by entering the **Member #** with or without the suffix “-01, etc.” or
 - b) Drop-down menu **Eligibility** on the top of the screen
1. From the main Home screen enter **Member#** in the field on the right side of the screen Member Eligibility and click **Verify**, or

The screenshot shows the Liberty Dental Plan Provider Portal. The header includes the logo and navigation links: Home, Claims, Eligibility, Payments, Talk To Us, and Manage Users. The main content area is titled "Welcome to the Provider Portal" and features a row of five diverse healthcare professionals. Below this, there are several sections:

- Announcements:** A notice dated 11/04/2019 stating that the Liberty Dental Plan is pleased to announce a new office portal and providing contact information for general assistance.
- Resources:** A section with "My Resources" and "Shared Resources" tabs. The "Shared Resources" tab is active, listing three newsletters from 2019 and a resource library.
- Member Eligibility:** This section is circled in red. It contains the text "To verify a Member's eligibility, enter the Member # below:" followed by a "Member #" input field and a "Verify" button.
- Claim Status:** This section contains the text "To check a status of a Claim, enter the Claim Number below:" followed by a "Claim #" input field and a "Get Status" button.
- Invite Others:** This section contains the text "To invite other users to access the Portal, fill out their information below:".



Office Portal User Guide



Check Member Eligibility *continued*

2. Click on **Eligibility** at the top of the screen
3. Users now have the ability to enter **Partial Last Name, Partial First Name** and **DOB** or **Member #** **(with or without the suffix, -01)**
*(We recommend using **Last Name, First Name** and **DOB** for best results)*

LIBERTY DENTAL PLAN

Home Claims **Eligibility** Payments Talk To Us Manage Users Un-impersonate

My Members
Check Eligibility
Check Multiple Eligibilities

"To check eligibility you are required to enter the following fields."
Liberty Dental Plan recommends entering the Last Name, First Name, and Date of Birth for best results.

Member Coverage Lookup (enter the following search criteria)

Member #: 123456 DOB: mm/dd/yyyy

Last Name: First Name: Search Clear

2 member coverage(s) found

Utilizations	History	Benefits	Member #	Last Name	First Name	DOB	Plan Name	Group Name	Effective Date	Expiration Date	Adc
View	View	View							11/1/2015	12/31/9999	Adc ^
View	View	View							12/1/2009	10/31/2015	Adc v

1 - 2 of 2 items

© 2019 - Liberty Dental Plan

4. Click **Search**



Office Portal User Guide



Check Member Eligibility *continued*

- To view a member's benefit utilization, click on 'View' under **Utilizations**
- To view a member's history, click on 'View' under **History**
Note: The history page will display **all** history LIBERTY has on file for the selected member
- To view a Summary of Benefits, click on 'View' under **Benefits**

Home Claims Eligibility Payments Talk To Us Manage Users

"To check eligibility you are required to use 3(or more) of the 4 fields."
Liberty Dental Plan recommends "First Name, Last Name, and Date of Birth" for best results.

Member Coverage Lookup (enter the following search criteria)

Member #: DOB:

Last Name: First Name:

[Search](#)
[Clear](#)

2 member coverage(s) found

Utilizations	History	Benefits	Member #	Last Name	First Name	DOB	Plan Name	Group Name	Effective Date	Expiration Date	Adc
View	View	View							11/1/2015	12/31/9999	Adc

Member Utilization Screen

LIBERTY recommends that the user refer to the **Next Available Date** and **Units Available** when determining member's utilizations.

Member Utilization [View Benefits](#) [Add Claim](#)

Member #: Start Date: End Date:

Last Name: First Name: [Refresh](#)

* Note - Next Available Date and Units will only be provided when the End Date for Utilizations is set to today

Service Type	Service Description	Units Used	Unit Value	Unit Type	Period	Next Available Date	Units Available
Fluoride Treatments	Fluoride Treatments	0.00	1.00	Units	6 Months	12/10/2019	1.00
Denture/Partial Reline - Maxillary	Denture/Partial Reline	0.00	2.00	Units	12 Months	12/10/2019	2.00
Denture/Partial Reline - Mandibular	Denture/Partial Reline - Mandibular	0.00	2.00	Units	12 Months	12/10/2019	2.00
Fluoride Treatments	Fluoride Treatments	0.00	1.00	Units	6 Months	12/10/2019	1.00
Prophylaxis (routine cleaning) Limitation	Prophylaxis (routine cleaning) Limitation	0.00	1.00	Units	6 Months	12/10/2019	1.00
Scaling & Debridement of Inflammation, Single Implant	Scaling & Debridement of Inflammation, Single Implant	0.00	1.00	Units	12 Months	12/10/2019	1.00
Prophylaxis (routine cleaning) Limitation	Prophylaxis (routine cleaning) Limitation	0.00	1.00	Units	6 Months	12/10/2019	1.00

Go Back

20 items per page 1 - 7 of 7 items



Office Portal User Guide



Check Multiple Member Eligibilities *continued*

To check the eligibility of multiple members at one time:

1. Click **Eligibility** on the top of the screen and click **Check Multiple Eligibilities**
2. Users now can enter **Partial Last Name, Partial First Name** and **DOB, Date of Service** or **Member Number (excluding the suffix)** and **Date of Service**
(We recommend using **Last Name, First Name, DOB** and **Date of Service** for best results)

Home Claims **Eligibility** Payments Talk To Us Manage Users Test User (Office #011340)

Information provided below will be cross-checked with member eligibility records for all programs.
You can search by Member Number or a combination of Member First Name, Last Name and Date of Birth.
Service Date is always required.

- My Members
- Check Eligibility
- Check Multiple Eligibilities**

Eligibility Verification Search						
	Line	Member Number	Member Last Name	Member First Name	Member Date of Birth	Date of Service
<input type="button" value="X Remove"/>	1	<input type="text" value="12345"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="mm/dd/yyyy"/>	<input type="text" value="12/10/2019"/>
<input type="button" value="X Remove"/>	2	<input type="text"/>	<input type="text" value="user"/>	<input type="text" value="test"/>	<input type="text" value="06/20/1981"/>	<input type="text" value="12/10/2019"/>
<input type="button" value="X Remove"/>	3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="mm/dd/yyyy"/>	<input type="text" value="12/10/2019"/>
<input type="button" value="X Remove"/>	4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="mm/dd/yyyy"/>	<input type="text" value="12/10/2019"/>
<input type="button" value="X Remove"/>	5	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="mm/dd/yyyy"/>	<input type="text" value="12/10/2019"/>
<input type="button" value="X Remove"/>	6	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="mm/dd/yyyy"/>	<input type="text" value="12/10/2019"/>

Number of Search Row(s) 1

3. Click **Search**

Note: The maximum Number of Search Row(s) you can add per screen at a time is 10

Example of Search Results:

Information provided below will be cross-checked with member eligibility records for all programs.
You can search by Member Number or a combination of Member First Name, Last Name and Date of Birth.
Service Date is always required.

Eligibility Verification Search						
Row	Date of Service	Member Number	Member Name	Member Date of Birth	Group/Plan Name	Eligibility Status
1	12/10/2019			06/20/1981		Check Eligibility

Page 1 of 1 1 - 1 of 1 items



Office Portal User Guide



Check Multiple Member Eligibilities *continued*

4. Click **Check Eligibility Status** to validate if the member is eligible to be seen in your office
New: Within **Check Eligibility**, LIBERTY has added a status feature. This enables your office to view any provider that is linked to your office contract and what plan the Member is linked to.
Note: For plans requiring member assignments via a member roster, please refer to your member roster. Members not appearing on your roster should be referred to LIBERTY Dental Plan to be assigned to your office prior to services being rendered.
5. Click **Provider** from the drop-down menu then click **Check Eligibility**

Check Eligibility Status

Provider

Please select a provider

Check Eligibility

Close

Note: After clicking **Check Eligibility**, one of the following color-coded messages will be displayed:

Red: member is not eligible and/or not assigned to your office

Green: member is eligible and assigned to your office

Check Eligibility Status

Provider

Alex M

Check Eligibility

Member is not eligible for services on 12/10/2019 from Alex M

Member Information

JOHN A

Member Number
123456789-01

Date of Birth
01/28/1989

PCP
John Doe

PCP Office
ABC Office

Effective Date
01/01/2018

Expiration Date
12/31/9999

Status
Not Eligible

Group/Plan Name
ABC Group

Other Health
Coverage ?
null

Close

6. Click **Close** to exit the **Check Eligibility Status**



Office Portal User Guide



Member Rosters

Capitation Plans/Dental Home Assignment

Offices that participate in a capitation program or with a program that requires Dental Home assignment may view their rosters by clicking on **Eligibility** located on top of the screen, then click **My Members**. The **My Members** screen allows the user to view all members assigned to the office.

To sort membership assigned to an office by month, use the drop-down menus to select **Month/Year** and select **All**. Click **Find**.

To sort membership assigned to a specific provider, go to **Providers** and use the drop-down menu to select individual provider. Click **Find**.

New: Export to **Excel feature** is now available

New: Within the Member Roster, LIBERTY has added **Home Phone** and **Language**.

Note: Home Phone will display for Medicaid plan members (if applicable) and/or if LIBERTY has a Home Phone on file for the Member.

The screenshot shows the 'Member Roster' page in the Office Portal. The navigation bar includes Home, Claims, Eligibility, Payments, Talk To Us, Manage Users, and Un-impersonate. The 'Eligibility' menu is expanded, with 'My Members' circled in red. Below the menu, there are filters for 'Month/Year' (December, 2019) and 'Providers (only active shown)' (ALL), with a 'Find' button. A message indicates '15030 Member(s) found'. A filter bar for 'Filter Members by last name' shows 'ALL' selected, with letters A-Z. An 'Export to Excel' button is circled in red. The table below has columns for Member #, Member Name, DOB Gender, City State Zip, Home Phone, Language, Effective Date, Expiration Date, Group # Group Name, and Provider Name. The first row shows a member with Arabic language, effective date 12/1/2018, and expiration date 12/31/9999. The second row shows a member with English language, effective date 10/1/2019, and expiration date 12/31/9999. The third row shows a member with Other language, effective date 11/1/2019, and expiration date 12/31/9999. The fourth row shows a member with Other language, effective date 12/1/2018, and expiration date 12/31/9999. The footer shows '10 items per page' and '1 - 10 of 15030 items'.

	Member #	Member Name	DOB Gender	City State Zip	Home Phone	Language	Effective Date	Expiration Date	Group # Group Name	Provider Name
<ul style="list-style-type: none"> Utilization History Benefits Add Claim 						Arabic	12/1/2018	12/31/9999		
<ul style="list-style-type: none"> Utilization History Benefits Add Claim 						English	10/1/2019	12/31/9999		
<ul style="list-style-type: none"> Utilization History Benefits Add Claim 						Other	11/1/2019	12/31/9999		
<ul style="list-style-type: none"> Utilization History Benefits Add Claim 						Other	12/1/2018	12/31/9999		



Office Portal User Guide



Claims, Pre-Estimates and Referrals

Submit a Claim, Pre-Estimate or Referral

1. Click **Claims** located on top of the screen, then click **Submit Claim**

THE FOLLOWING INFORMATION IS REQUIRED FOR INITIAL CLAIM OR PRE-ESTIMATE SUBMISSIONS:

Expedited/Estimate if the member is experiencing pain, swelling, infection or periodontal services as expedited/emergency services. In the event that a member is experiencing a dental emergency and you are submitting an expedited appeal on their behalf, please contact the Quality Management Department at 1-888-703-6999 ext. 5383.

IF YOU HAVE NOT RECEIVED A DENIAL, you may use the form below to submit your claim(s) or pre-estimate to LIBERTY:

Switch to Referral Claim | Switch to Pre-Estimate Claim

Dental Claims

Last claim(s)

Last claim submitted: Claim # 0025406475. View EOP

Provider:

Select a Provider ***Only Active providers are shown

Vendor:

Please select a provider first

Patient (Please select a Patient)

Member # [] DOB: [mm/dd/yyyy] []

Last Name [] First Name [] [Find]

In-office Details:

Patient Acct # [] Referral #: [] Authorization #: []

Billed Currency: US Dollars

Diagnosis Codes

A. [] B. [] C. [] D. []

Apply default values to lines

Service Date From: 12/17/2019 POS: 11-Office [] [Apply] [Clear]

Line	Service Date From	Procedure Code	Diag Ptr	Tooth	Quadrant	Surface	POS	Units	Amount	Additional Information
X Remove 1	12/17/2019						11-Office	1	50.00	
X Remove 2	12/17/2019						11-Office	1	50.00	
X Remove 3	12/17/2019						11-Office	1	50.00	
X Remove 4	12/17/2019						11-Office	1	50.00	
X Remove 5	12/17/2019						11-Office	1	50.00	

+ Add Service Lines 1 [] Total Charge: 50.00

Hide Procedure Description

Additional Information

AGREE PATIENT'S OR AUTHORIZED PERSON'S SIGNATURE I authorize the release of any medical or other information necessary to process the claim. I also request payment of government benefits either to myself or to the party who accepts assignment above.

AGREE PROVIDER'S OR AUTHORIZED PERSON'S SIGNATURE I authorize payment of medical benefits to the undersigned physician or supplier for services described above.

Submit Claim

- a. You can view **Last Claim** for a treating provider
- b. Choose treating provider from **Select a Provider** drop-down menu (only Active providers are shown)
- c. Choose office/location from **Vendor** drop-down menu for **(Dental Claim)** or **(Pre-Estimate Claim)** submission (only Active vendors are shown)
- d. Input patient information i.e. **Partial Last Name, Partial First Name** and **DOB** or **Member # (with or without the suffix, -01)** (We recommend using **Last Name, First Name** and **DOB** for best results)
- e. Input **Diagnosis Codes** and **Diagnosis Pointers** (Diagnosis Pointers must be letters A-D)
- f. Submit up to 30 service lines at a time by completing the fields in each row. To add additional lines, click **Add service line(s)**.



Office Portal User Guide



Submit a Claim, Pre-Estimate or Referral *continued*

THE FOLLOWING STATEMENT IS APPLICABLE TO APPEALS ONLY, AND NOT FOR INITIAL CLAIM OR PRE-ESTIMATE SUBMISSIONS:
 Expedited/Emergency services are available if the member is experiencing pain, swelling, bleeding, infection or other-life threatening conditions that could jeopardize life, limb or bodily function.
 The plan does not consider denture fabrication or periodontal services as expedited/emergency services.
 In the event that a member is experiencing a dental emergency and you are submitting an expedited appeal on their behalf, please contact the Quality Management Department at 1-888-703-6999 ext. 5383.

IF YOU HAVE NOT RECEIVED A DENIAL, you may use the form below to submit your claim(s) or pre-estimate to LIBERTY:

Switch to Dental Claim Switch to Pre-Estimate Claim

Referral

Last claim:

Last claim submitted: Claim # 0025108934 View EOP

Provider:

***Only Active providers are shown

Emergency Referral

Specialty Category: Specialist

Specialty Subcategory: Select Specialty Subcategory
 Orthodontics
 Periodontics
 Oral Surgery
 Endodontics
 Pediatric Dentistry

Patient: (Please select a Patient)

Member # DOB: mm/dd/yyyy
 Last Name First Name Find

In-office Details:

Patient Acct # Referral #: Authorization #:

Billed Currency: US Dollars

Diagnosis Codes

A. B. C. D.

Apply default values to lines

POS: 11-Office Apply Clear

	Line	Procedure Code	Diag Ptr	Tooth	Quadrant	Surface	POS	Units	Additional Information
X Remove	1						11-Office	1	
X Remove	2						11-Office	1	

2. Click on the Claims menu, then click **Submit Referral** from the drop-down menu
 - a. Select the **Provider** referring the patient from the drop-down menu
 - b. For emergency referrals, check the **Emergency Referral** box
 - c. Select the appropriate option from the **Specialty Category** drop-down menu (Defaulted to Specialist)
 - d. Select the appropriate option from the **Specialty Subcategory** drop-down menu
 - e. Input patient information i.e. **Partial Last Name, Partial First Name** and **DOB** or **Member # (with or without the suffix, -01)**
 (We recommend using **Partial Last Name, Partial First Name** and **DOB** for best results)
 - f. Submit up to 30 service lines at a time by completing the fields in each row. To add additional lines, click **Add service line(s)**.



Office Portal User Guide



Submission with Additional Information

1. Check the **Additional Information** box towards the bottom of the Submit a Claims screen
 - a. Enter any comments in the Remarks box
 - b. **Add File** – this feature can be used to attach digital x-rays or other information pertaining to the claim.
Note: There is an 8MB limit per attachment and up to 25MB in total. Multiple Attachments can be uploaded at once.

2. Check both **I Agree** boxes
3. Click **Submit Claim**

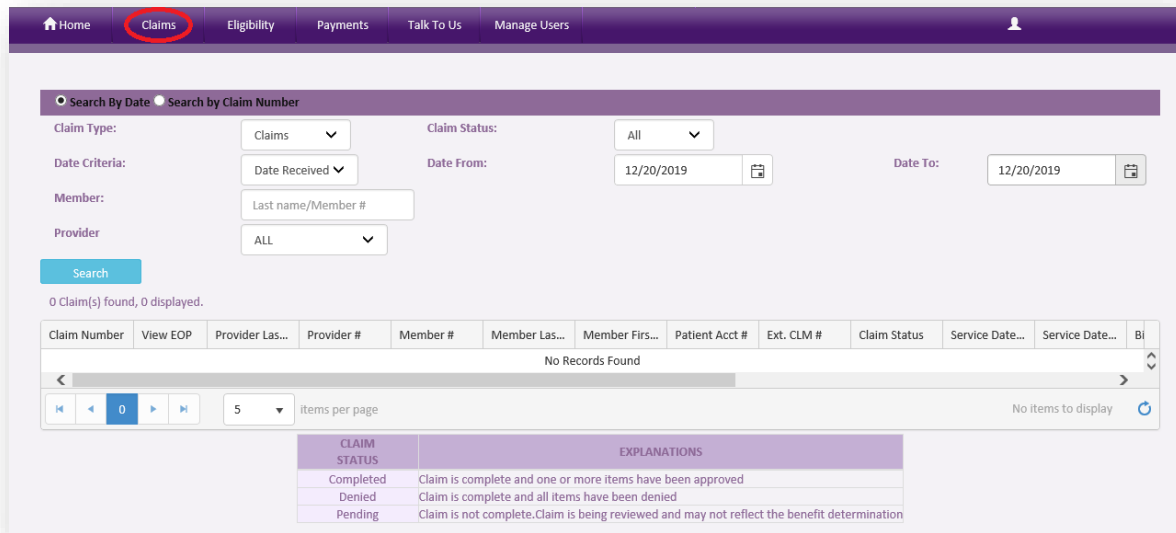


Office Portal User Guide

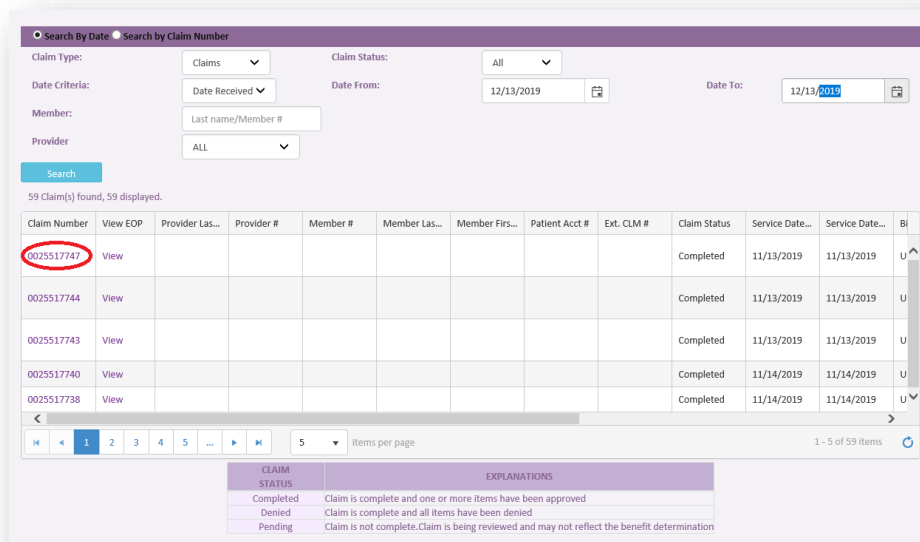


Resubmit/Correct a Claim, Pre-Estimate or Referral

1. To resubmit/correct a claim, pre-estimate or referral, click on the **Claims** menu, then click **View Office Claims** from the drop-down menu



2. Click on **Search by Date** or **Search by Claim Number** radio buttons to find the claim, pre-estimate or referral that needs to be resubmitted/corrected
3. Once the claim is found, click on the **number** under the Claim Number column of the claim that needs to be resubmitted/corrected





Office Portal User Guide



Resubmit/Correct a Claim, Pre-Estimate or Referral *continued*

- After the Explanation of Payment is displayed, click on **Resubmit Claim**

This document has been received.

This document may not reflect the final determination. Please verify the "Claim Status" on the claims screen.

- * Pending - Claim is not complete. Claim is being reviewed and may not reflect the benefit determination
- * Complete - Claim is complete and 1 or more items has been approved
- * Denied - Claim is complete and all items have been denied

For additional information, please call 888-703-6999

Resubmit Claim

Health Net Sacramento GMC Adults over 21
Provider Claim Summary

Note: This is to be used for informational purposes only and does not replace the Explanation of Payment mailed to the Provider Office

Patient:
Patient #:
Claim #: 0025517747

DOS	Code	Procedure Description	Tooth	Surface	Total Charges	Allowed Amount
11-13-2019	D2391	Resin-based composite, one surface, posterior	2	O	\$0.00	\$0.00
11-13-2019	D2392	Resin-based composite, two surfaces, posterior	3	MO	\$0.00	\$0.00
Total					\$0.00	

1 - 2 of 2 items

← BACK

- When **Resubmit Claim** is selected, the information from the claim, pre-estimate or referral will populate on the **Submit Claim** screen
- Note:** You can correct any missing teeth#, surfaces, quadrant, etc. that require correction
- Check the **Additional Information** box towards the bottom of the **Submit Claim** screen
 - Enter any comments in the Remarks box
 - Add File** – this feature can be used to attach digital x-rays or other information pertaining to the claim.
- Note:** There is an 8MB limit per attachment and up to 25MB in total. Multiple Attachments can be uploaded at once.

Additional Information

Does the Member have another health plan?

Remarks

Treatment Resulting From
 Occupational Illness/Injury Auto Accident Other Accident

Date of Accident: Auto Accident State:

Is Treatment for Orthodontics?
 Yes No Date Appliance Placed:

Months of Total: Months of Treatment Remaining:

Missing Teeth Information separate tooth number by commas

Replacement of Prosthesis? Date Prior Placement

Add Files

I AGREE PATIENT'S OR AUTHORIZED PERSON'S SIGNATURE
I authorize the release of any medical or other information necessary to process the claim. I also request payment of government benefits either to myself or to the party who accepts assignment above.

I AGREE INSURED'S OR AUTHORIZED PERSON'S SIGNATURE
I authorize payment of medical benefits to the undersigned physician or supplier for services described above.

Submit Claim

- Check both **I Agree** boxes
- Click **Submit Claim**



Office Portal User Guide



Check the Status of a Claim, Pre-Estimate or Referral *continued*

1. To view a Claim, Pre-Estimate or Referral associated with your office, click on the **Claims** menu, then click **View Office Claims** from the top of the screen
2. Click on **Search by Date** or **Search by Claim Number** radio buttons
3. When searching by date, use the **Claim Type** drop-down menu to select **Claims, Pre-Estimate** or **Referral**
4. You can narrow your search results using the **Claim Status** drop-down menu or **Member Last Name** box
5. Click **Search**

The screenshot shows the search interface with the following fields:

- Search By:** Search by Date (selected) / Search by Claim Number
- Claim Type:** Claims (dropdown)
- Claim Status:** All (dropdown)
- Date Criteria:** Date Received (dropdown)
- Date From:** 12/13/2019 (calendar icon)
- Date To:** 12/13/2019 (calendar icon)
- Member:** Last name/Member # (text input)
- Provider:** ALL (dropdown)
- Search:** (button)

Example of Search Results:

The screenshot shows search results for 59 claims. The table below displays the first five rows of results.

Claim Number	View EDP	Provider Las...	Provider #	Member #	Member Las...	Member Firs...	Patient Acct #	Ext. CLM #	Claim Status	Service Date...	Service Date...	Bi
0025517747	View								Completed	11/13/2019	11/13/2019	U
0025517744	View								Completed	11/13/2019	11/13/2019	U
0025517743	View								Completed	11/13/2019	11/13/2019	U
0025517740	View								Completed	11/14/2019	11/14/2019	U
0025517738	View								Completed	11/14/2019	11/14/2019	U

59 Claim(s) found, 59 displayed.

1 2 3 4 5 ... 5 Items per page 1 - 5 of 59 items

CLAIM STATUS	EXPLANATIONS
Completed	Claim is complete and one or more Items have been approved
Denied	Claim is complete and all Items have been denied
Pending	Claim is not complete. Claim is being reviewed and may not reflect the benefit determination

All data fields will remain the same, except when searching for a Referral. The **Referring Entity** column will display a 'Y' instead of 'N'



Search a Claim by Claim Number

1. Click on the **Search by Claim Number** radio button

Home Claims Eligibility Payments Talk To Us Manage Users

Search By Date Search by Claim Number

Claim number:

Search

CLAIM STATUS	EXPLANATIONS
Completed	Claim is complete and one or more items have been approved
Denied	Claim is complete and all items have been denied
Pending	Claim is not complete.Claim is being reviewed and may not reflect the benefit determination

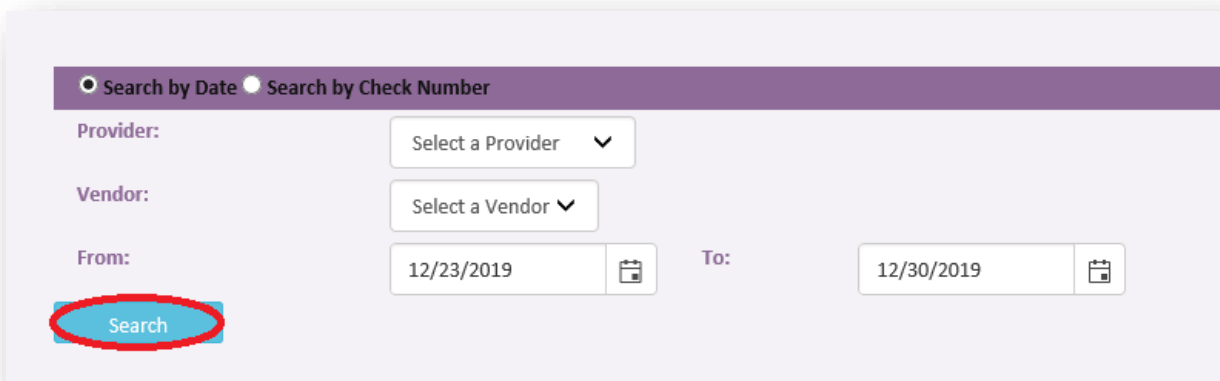
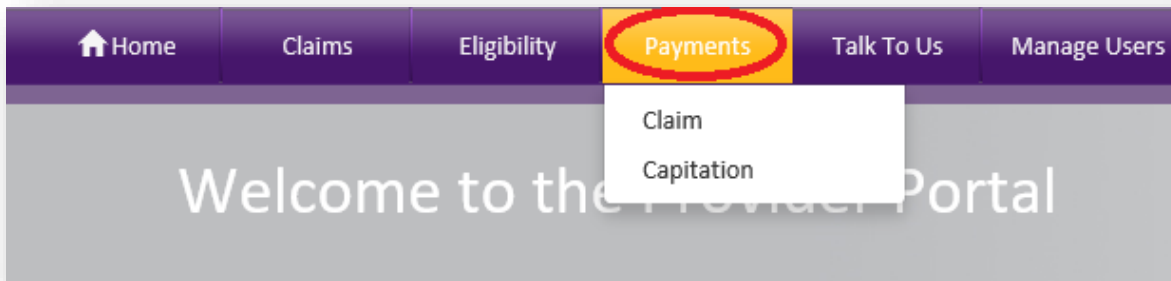
2. Enter the **Claim Number** in the search field
3. Click **Search**



Payments

View checks paid to the vendor, along with the details of the payment

1. Click **Payments** on the top of the screen to view available claim payments (Payments is formerly "My Checks")



2. Click which **Payment Type** to review the details of the payment
3. Click on **Search by Date**, or **Search by Check Number** radio buttons
4. Click **Provider** and **Vendor**
5. Input Date range
6. Click **Search**



Office Portal User Guide



Resources

My Resources

Here you will find unique documents specific to your office.

1. Click **Home** on the top of the screen to view available documents (My Resources is formerly "Attachments")

The screenshot shows the Liberty Dental Plan Provider Portal. At the top, a navigation bar contains links for Home, Claims, Eligibility, Payments, Talk To Us, and Manage Users. The 'Home' link is circled in red. Below the navigation bar is a banner with the text 'Welcome to the Provider Portal' and a group photo of healthcare professionals. The main content area is divided into three columns. The left column has an 'Announcements' section with a single announcement dated 10/01/2019 and a 'Coming Soon!' indicator. Below this is a 'Resources' section, which is circled in red. It contains two sub-sections: 'My Resources' (with a lock icon and 'Coming Soon...' text) and 'Shared Resources' (with a list of links: 'Provider Resource Library' and 'LDP On-Line Provider Portal User Guide'). The right column has two sections: 'Member Eligibility' with a form to enter a Member # and a 'Verify' button, and 'Claim Status' with a form to enter a Claim # and a 'Get Status' button.



Office Portal User Guide

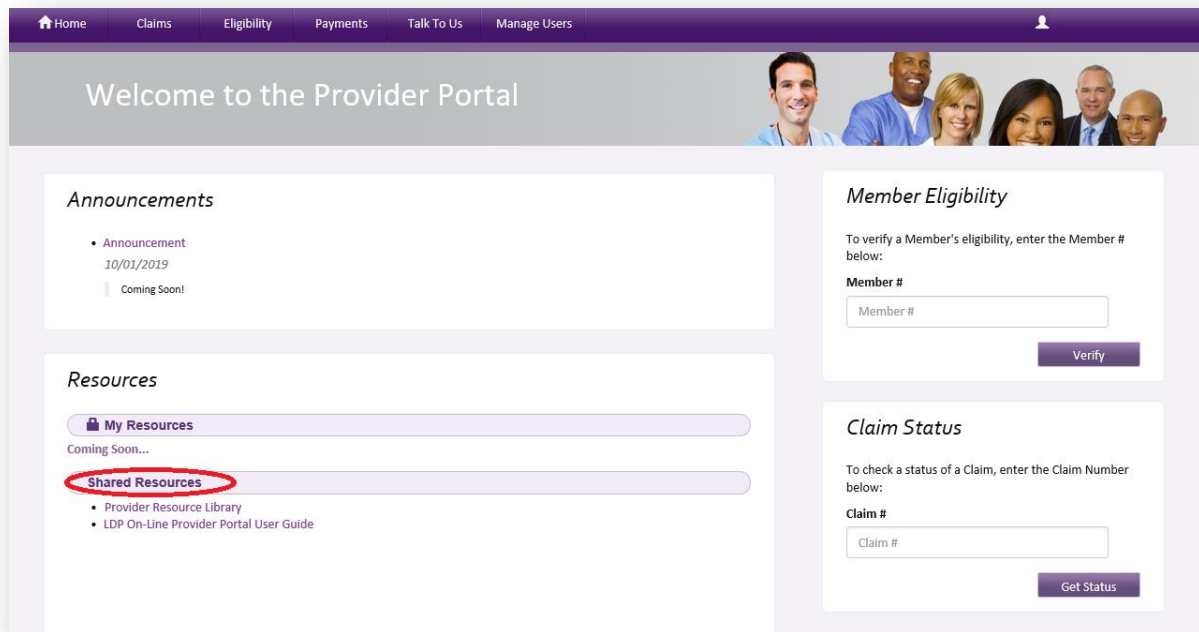


Resources

Shared Resources - Forms and Provider Reference Guides

Forms and Provider Reference Guides can be downloaded from the Office Portal/LIBERTY website.

1. Click on **Home** on top of the screen then refer to the **Shared Resources** section of the screen to view and download the following:
 - a. Provider Reference Guides specific to your state
 - b. Provider Newsletters
 - c. Office Portal User Guide



2. Click on **Provider Resource Library** which will launch a new web browser
Click on the link provided at the bottom of the web page to launch the **Provider Resource Library**

<https://www.libertydentalplan.com/Providers/Provider-Resource-Library.aspx>



Office Portal User Guide



Provider Resource Library

1. Select the state from the **Please select your state** drop-down menu
2. Click **Continue**

The screenshot shows the Liberty Dental Plan Office Portal. At the top is a purple navigation bar with the Liberty Dental Plan logo on the left and a 'Login' button on the right. Below the navigation bar is a horizontal menu with the following items: 'Members', 'Providers' (circled in red), 'Brokers', 'Programs', 'Find a Dentist', and 'About LIBERTY'. The main content area has a purple header with the word 'PROVIDERS' and a background image of a dentist wearing a mask. On the left side, there is a vertical sidebar menu with the following items: 'Providers', 'Join Our Network', 'Secure Email Portal', 'Provider Resource Library' (highlighted in purple), 'Provider Training', 'Florida Medicaid Webinar', 'Missouri Medicaid Webinar', 'Nevada Medicaid Webinar', 'New York Medicaid Webinar', 'Americans with Disabilities Act (ADA) Survey', 'Frequently Asked Questions', 'Secured Documents', and 'Self Service Tools'. The main content area contains a welcome message: 'Welcome to the LIBERTY Dental Plan Resource Library. To download a form or user guide, please select your state and then choose from the list of available documents.' Below this is a note: 'Note: The documents below are in PDF format and required Adobe Acrobat reader.' There is a horizontal line, followed by a 'Please select your state:' label, a dropdown menu with 'California' selected, and a 'Continue' button. Below the dropdown menu is a list of document links: 'ADA Claim Form', 'AdultCare & KidCare - Oral Health & Wellness Tips', 'California Provider Reference Guide', 'Clinical Criteria Guidelines and Practice Parameters', 'Clinical Guidelines for Prescribing Fluoride Supplements for Caries Prevention', 'Consent for Non-Covered Treatment - English', 'DHCS 6216 Application Form', 'DHCS 5300 Application Form', 'Electronic Fund Transfer (EFT) Form', 'Employee Language Pre-Screening Tool Kit', and 'Grievance Form - English'.

3. Click on the form(s) needed to view and/or print



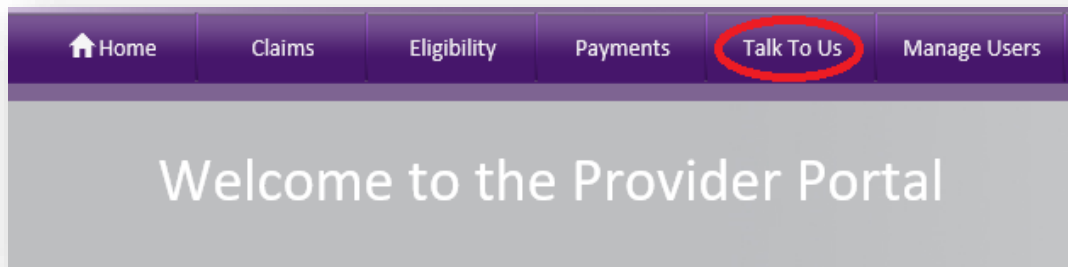
Office Portal User Guide



Talk To Us

Submitting a Written Inquiry

A LIBERTY Representative can be contacted through the Office Portal by clicking the **Talk To Us** on the top of the screen.



1. Enter the **Subject**
2. Enter the **Details**
3. Attach any pertinent files by clicking on **Select File(s)...**

Submit a request for:

Office Current Provider (Not Selected) Please use My Preferences to select Provider

Talk to Us: (Please be sure to fill out all required fields)

Contact Reason: Inquiry

Description: Inquiry

* Subject:

* Details:

Attachment(s):

4. Click **Process Request**



Office Portal User Guide

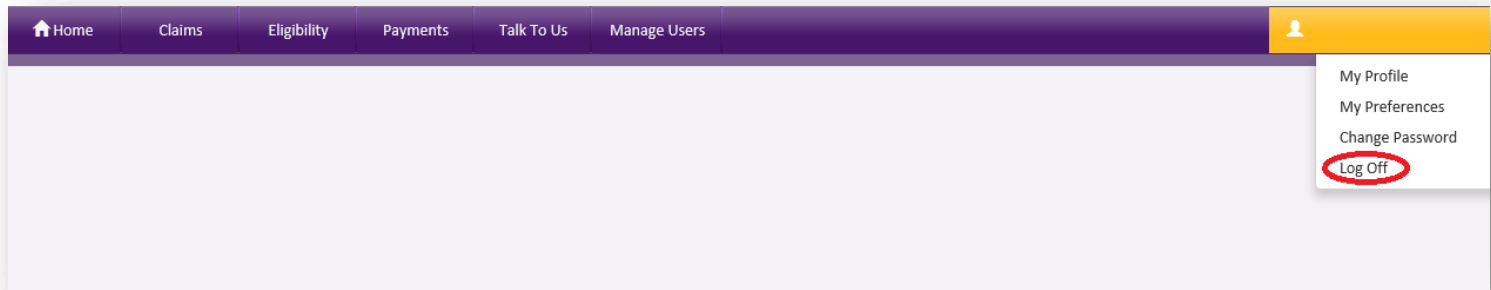


Log Off

To Log Off of the Office Portal

1. Click the **Log Off** on the right side of the screen

Note: You will be automatically logged off within 5 minutes of inactivity





Office Portal User Guide



Making members shine, one smile at a time™