

Advantage Dental

From DentaQuest

Policy Name: Out of Network Services	Policy Number: PL038- Out of Network Services-CARE
Type of Policy: DCO	Effective Date: 7/17/2019
Responsible Department: Plan Operations	
Page Number (s): 2	Revised Date: 5/20/2019
Approved By: Clinical and Credentialing Sub-Committee	Approved Date: 7/17/2019
PURPOSE: To establish guidelines for access to and billing of out of network services.	
FORMS: Non-Contracted Provider Credentialing Application	
<p>POLICY:</p> <p>OUT OF NETWORK EMERGENCY SERVICES</p> <p>If an enrollee is out of the area and needs dental emergency services the enrollee must contact their PCD to authorize the out of town provider to perform the emergency services. If the enrollee is unable to contact their PCD, the enrollee must contact the DCO Member Services Department. The DCO Member Services Department will contact the on-call provider, who will have the authority to give authorization for the emergency services and makes the arrangements with the out of network provider. The DCO reserves the right to authorize out of area dental emergency services.</p> <ol style="list-style-type: none"> 1. The DCO is obligated to pay for dental emergency services performed outside the service area if: <ol style="list-style-type: none"> A. Treating provider submits a claim to the DCO within 12 months of the date service. B. Treating provider completes the “Non-Contracted Provider Credentialing Application” so the encounter can be submitted to the Oregon Health Authority (OHA). 2. If the DCO has a reasonable basis to believe that the claim submitted was not for emergency services, the DCO may deny payment if the DCO notifies: <ol style="list-style-type: none"> A. The treating provider and the enrollee of the decision to deny, the basis for that decision, and the right to contest that decision under the appeal and grievance process. 3. The DCO will comply with and implement any OHA hearing decision, subject to any further rights to appeal. <p>OUT OF NETWORK ROUTINE CARE</p> <ol style="list-style-type: none"> 1. The DCO will not pay for routine or follow up care to out of network providers unless previously arranged through the DCOs Care Coordination department. <p>OUT OF NETWORK SERVICES MONITORING</p> <ol style="list-style-type: none"> 1. The DCO will monitor all out of network service requests on a case by case basis to ensure timely access to care. 	

Reviewed and Revised By:

5/20/2019	Missy Mitchell	Molly Johnson	Phebe Ditzler	Rosa Pedraza
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