


<b>DEPARTMENT</b>			
	<i>Policy and Procedure</i>		
	Policy Name:	<b>Buy-Ups and Enrollee Fee Responsibility</b>	Policy ID: <b>PLANCG-06</b>
	Approved By:	Peer Review and Credentialing Committee	Last Revision Date: 01/09/2026
	States:	Oregon	Last Review Date: 04/01/2026
Application:	Medicaid	Effective Date: 04/02/2026	

**PURPOSE**

To establish Dental Subcontractor’s policy on buy-ups and enrollee’s fee responsibility for non-covered services.

**POLICY**

1. Buying-up means the practice of obtaining client payment in addition to the Division or managed care plan payment to obtain a non-covered service or item.
2. Dental Subcontractor providers are not permitted to bill and accept payment from Oregon Health Authority (OHA) or the Dental Subcontractor for a covered service when:
  - A. A non-covered service has been provided; and
  - B. Additional payment is sought or accepted from the enrollee.
3. If an enrollee wants to purchase a non-covered service or item, they must be responsible for full payment. OHA or Dental Subcontractor payment for a covered service cannot be credited toward the non-covered service.

EXAMPLE: An additional enrollee payment to obtain a gold crown (not covered) instead of the stainless-steel crown (covered).

4. If enrollee wants a non-covered service, the provider must do the following:
  - A. Explain to enrollee that service is not covered and offer to submit a preauthorization to the Dental Subcontractor for verification.
  - B. Explain total cost of service prior to enrollee receiving service.
  - C. Be very specific about the service and cost so that the enrollee understands that they are choosing a non-covered service in place of a covered service and will be responsible for the full cost of the service.

EXAMPLE: Gold crown (non-covered) cost \$565. Enrollee is responsible for entire cost of \$565.

- D. Have enrollee sign the OHP [Agreement to Pay Form](#), which must include all of the above information. The completed Agreement to Pay Form is valid only if it contains all of the required information set forth in OAR 410-120-1280; the estimated fee does not change; and the service is scheduled within 30 days of the client’s signature. Before providing the non-covered service, the provider shall:
  - a. Explain to the member that the requested service is a non-covered service; and
  - b. Provide the estimated total cost of the non-covered service, including all related charges; and
  - c. Document in the member’s record that the member knowingly and voluntarily agrees to pay for the non-covered service; and

- d. Document in writing the date and time in the member’s record, indicating that:
1. the provider gave the member or the client’s authorized representative the information described above;
  2. the member had an opportunity to ask questions, obtain additional information, and consult with their representative; and
  3. the member agreed to privately pay for the non-covered service by signing an agreement to pay form. This will be audited by the Dental Subcontractor in the Chart Audit process.
- e. Give a copy of the signed and dated agreement to pay form to the member and keep a copy of the form in the member’s medical record.

For additional billing requirements as established in the Oregon Administrative Rules (OARs) please refer to OAR 410-120-1280 Medical Assistance Programs: Billing.

Common mistakes to avoid in executing an invalid Agreement to Pay form include, but are not limited to:

- Failure to retain a signed copy of the Agreement to Pay form
- Failure to ensure all check boxes are completed on the Agreement to Pay form
- Failure to cite the condition being treated on the Agreement to Pay form
- Failure to provide the service(s) within 30 days of the enrollee signing the Agreement to Pay form
- Failure to obtain all necessary signatures (provider, enrollee and witness) on the Agreement to Pay form

If you have questions or would like additional training regarding Agreement to Pay forms, please contact Provider Relations at 888-480-4478 Option 4, or by email at [providerrelations@advantagedental.com](mailto:providerrelations@advantagedental.com).

**DEFINITIONS**

“**Buying Up**” means the practice of obtaining client payment in addition to the Division or managed care plan payment to obtain a non-covered service or item.

**REFERENCES**

- OAR 410-120-0000 Acronyms and Definitions
- OAR 410-120-1280 Billing
- OAR 410-120-1350 Buying-Up

**FORMS AND OTHER RELATED DOCUMENTS**

- Agreement to Pay Form-English <https://sharesystems.dhsoha.state.or.us/DHSForms/Served/he3165.pdf>
- Agreement to Pay Form- Spanish <https://sharesystems.dhsoha.state.or.us/DHSForms/Served/hs3165.pdf>

***Revision History***

Date:	Description
10/04/2012	Approval and adoption.

05/02/2014	Updates based on annual review.
02/23/2015	Updates based on annual review.
02/14/2017	Updates based on annual review.
03/12/2018	Updates based on annual review.
04/23/2019	Updates based on annual review.
12/05/2019	Conversion to revised policy and procedure format and naming convention.
10/23/2021	Updates based on annual review.
01/14/2022	Updates based on annual review.
12/31/2022	Updates based on annual review.
11/13/2023	Updates based on annual review.
3/28/2024	Updates based on annual review.
1/9/2025	Updates based on annual review.
1/9/2026	Updates based on annual review.