


<b>PLAN OPERATIONS</b>	 From DentaQuest			
	<i>Policy and Procedure</i>			
	Policy Name:	<b>Timely Access Monitoring</b>	Policy ID:	<b>PLANCG-54</b>
	Approved By:	Quality Assurance and Performance Improvement Committee	Last Revision Date:	01/20/2026
	States:	Oregon	Last Review Date:	04/06/2026
Application:	Medicaid	Effective Date:	04/07/2026	

**PURPOSE**

To establish guidelines for the monitoring of timely access to care.

**POLICY**

The Dental Care Organization (Dental Subcontractor) is committed to providing quality dental care for enrollees in a timely manner. This Timely Access Monitoring Policy has been developed as part of the Quality Improvement (QI) Program to ensure all enrollees have timely access to care as required by Oregon Administrative Rules and community standards.

Weekly Reporting:

The Dental Subcontractor shall require all Primary Care Dentist (PCD) offices to report into the Dental Subcontractor’s survey system of when the third next available appointment (TNAA) is for routine care, emergencies, urgencies, and prioritized routine care (pregnant women and foster children) – along with the time enrollees are waiting in the office for their scheduled appointments and scheduling delays related to interpreter availability. The Dental Subcontractor’s Provider Relations Department will monitor reporting on a weekly basis and will follow up with all PCD offices who have not responded to the survey. When necessary, the Dental Subcontractor staff shall assist the office in filling out the survey through the Dental Subcontractor’s online system.

The Dental Subcontractor shall require all specialist offices to report into the Dental Subcontractor’s survey system of when the third next available appointment (TNAA) is for routine care. The Dental Subcontractor’s Provider Relations Department will monitor reporting on a weekly basis and will follow up with all specialist offices who have not responded to the survey. When necessary, the Dental Subcontractor staff shall assist the office in filling out the survey through the Dental Subcontractor’s online system.

Ongoing Monitoring:

In order to ensure compliance with scheduling timeframes as defined in the Dental Subcontractor’s Appointment Scheduling Policy, the Dental Subcontractor’s Provider Relations Department shall monitor all PCD responses on a weekly basis.

If a PCD office did not meet the threshold for:

- a. TNAA for an emergency within 1 day (24 hours)
- b. TNAA for urgencies (for all populations, including pregnant women) within 7 days
- c. TNAA for prioritized routine care (including pregnant women) within 28 days
- d. TNAA for routine care within 56 days

The Dental Subcontractor shall follow up with the PCD office and track the following:

- 1) Office explanation for scheduling past threshold
- 2) Office plan to resolve scheduling issues

- 3) Timeframe in which the Dental Subcontractor may expect the issue to be resolved
- 4) Potential next steps of corrective action if the scheduling issues are not resolved

For offices who are without a provider for an extended period of time, the Dental Subcontractor may close the office to new membership until the office has a provider available and has maintained compliance for four consecutive weeks.

The Dental Subcontractor shall continue to monitor performance and follow up with the office after the expected resolution to ensure compliance. If the issue is not corrected by the established resolution date, the staff shall report this to the Network Adequacy Workgroup that they may suggest the next steps, including a Corrective Action Plan (CAP). In cases where the PCD is found to be non-complaint for four or more consecutive weeks in any area (emergent, urgent, priority routine, or routine) the PCD may be placed on a formal CAP. The formal CAP may include the PCD being closed to all new assignment. The PCD's CAP will be resolved and they will be open for assignment once the office is able to maintain compliance for four consecutive weeks. Failure to comply with the CAP could result in termination. All CAPs will be reported to the Peer Review and Credentialing Committee until the CAP is closed.

When PCDs or specialists report outside of the thresholds, these will be brought to the Network Adequacy Workgroup for review and potential additional provider recruitment.

#### REFERENCES

- OAR 410-141-3515 Network Adequacy

#### *Revision History*

Date:	Description
03/05/2019	Approval and adoption.
05/20/2019	Updates based on annual review.
12/09/2019	Conversion to revised policy and procedure format and naming convention.
01/06/2020	Updates based on CCO partner audit findings.
5/20/2021	Updates based on annual review.
9/30/2021	Updates based on annual review.
12/31/2022	Updates based on annual review
11/13/2023	Updates based on annual review
04/26/2024	Updates based on annual review
01/10/2025	Updates based on annual review
09/16/2025	Updates based on Network Adequacy Workgroup recommendations.
01/20/2026	Updates based on annual review.