


PLAN OPERATIONS	 From DentaQuest			
	<i>Policy and Procedure</i>			
	Policy Name:	Treatment Planning and Documentation	Policy ID:	PLANCG-57
	Approved By:	Peer Review and Credentialing Committee	Last Revision Date:	01/20/2026
	States:	Oregon	Last Review Date:	04/01/2026
Application:	Medicaid	Effective Date:	04/02/2026	

PURPOSE

To establish the Dental Subcontractor's policy on treatment planning for enrollees and what documentation is needed for treatment planning.

POLICY

Treatment planning and documentation shall follow all Board of Dentistry guidelines.

1. In the treatment planning and documentation the provider will incorporate the treatment and recommendations of other agencies and providers as it pertains to the enrollee's special health needs.
2. The provider will develop this treatment plan with the enrollee's participation. Enrollees may also choose to have family involved in such treatment planning. Charts must be completed accurately, timely and completely to avoid negative findings in Dental Subcontractor chart reviews and audits.
3. Always present the enrollee with a treatment plan, as well as what is covered and not covered under the enrollee's Oregon Health Plan. The treatment plan must be presented in a manner appropriate to the member's health condition, preferred language and ability to understand.
4. Enrollees have the right to accept or refuse treatment. If treatment is accepted, obtain the enrollee's consent prior to beginning treatment. Treatment plans must be signed by the enrollee or the enrollee's legal guardian. The age of consent for dental services is 15 years old.

Provider Signatures

The purpose of provider signatures is to indicate that the services have been accurately and fully documented, reviewed and authenticated. The individual who ordered and/or provided services must be clearly identified in the dental records to confirm that the provider acknowledges the dental necessity and reasonableness of the service(s) that were rendered.

All dental records, chart notes, procedures and orders submitted for review must be signed and dated by the rendering provider.

- Acceptable Signatures
 - Handwritten Signatures:
 - Appear on each entry (multiple page dental records require one signature at the end of the last page as long as it is clearly documented to be one encounter)
 - Be legible
 - Include the practitioner's first initial and last name, at minimum
 - Requires the practitioner's credentials
 - Digitized/Electronic Signatures:
 - The responsibility for, and authorship of, the digitized or electronic signature should be clearly defined in the record.
 - A "digitized signature" is an electronic image of an individual's handwritten signature. It is typically generated by encrypted software that allows for sole usage by the practitioner.

- An electronic or digitized signature requires a minimum of a date stamp (preferably includes both date and time notation) along with a printed statement such as, "Electronically signed by," or "Verified/reviewed by," followed by the practitioner's name and a professional designation. An example would be:
Electronically signed by: John Doe, DMD 03/31/2016 08:42 am.
- Unacceptable Signatures
 - Signature "stamps"
 - Missing signature on dictated and/or transcribed documentation
 - "Signed but not read" notations
 - Illegible lines or marks

Important: Procedures that are considered a non-covered benefit under the Oregon Health Plan will need to be documented on the agreed treatment plan and an Agreement to Pay Form will need to be filled out acknowledging the enrollee's responsibility for non-covered services. Copies of the treatment plan and Agreement to Pay form will be given to the enrollee at the time of the appointment.

REFERENCES

42 CFR 438.100 Enrollee rights
 OAR 410-141-3870 Intensive Care Coordination
 OAR 410-141-3590 MCE Member Relations: Member Rights and Responsibilities

FORMS AND OTHER RELATED DOCUMENTS

[Agreement to Pay Form](#)

Revision History

Date:	Description
06/14/2012	Updates based on annual review.
06/06/2014	Updates based on annual review.
03/12/2015	Updates based on annual review.
02/23/2016	Updates based on annual review.
02/14/2017	Updates based on annual review.
03/12/2018	Updates based on annual review.
05/20/2019	Updates based on annual review.
12/09/2019	Conversion to revised policy and procedure format and naming convention.
04/23/2021	Updates based on annual review.
11/11/2021	Updates based on annual review.
1/18/2022	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.
01/20/2026	Updates based on annual review.