Advantage Dental
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Policy and Procedure

Policy Name:	**Provider Directory**	Policy ID:	**PLANCG-46**
Approved By:	Quality Assurance and Performance Improvement Committee	Last Revision Date:	01/09/2025
States:	Oregon	Last Review Date:	01/22/2025
Application:	Medicaid	Effective Date:	01/23/2025

PURPOSE

To establish Dental Care Organization's (DCO's) policy for obtaining and maintaining accurate and complete information on all participating providers.

POLICY

The Provider Directory will be made available to current and potential enrollees electronically on the DCO's website and in hard copy paper format. The website will make provider information available to the public in both searchable and printable formats.

The DCO will obtain information required for the Provider Directory on all credentialed providers during the credentialing and re-credentialing process.

Once all credentialing verifications are completed and the provider has been approved for participation in the DCO network, the Provider Relations department will load the provider information into the DCOs internal system. Provider information entered in this internal system will automatically update the DCO's online provider directory in real time.

The Provider Relations department is responsible for the maintenance of the provider database used for the Provider Directory. The Provider Relations department will receive and process updates to provider data and publish them on the website within three business days of notification. The Provider Relations department will also send out an annual survey to all providers to confirm accuracy of information on the Provider Directory. The provider information entered into the DCO's internal system will automatically update the DCOs online provider directory in real time.

New enrollees will receive information on how to access or request a Provider Directory within 14 days of the DCO receiving notice of enrollment. Current Coordinated Care Organization (CCO) enrollees will be notified annually by their CCO of the availability of the Provider Directory and how to access or request a copy. Enrollee requests to the DCO for hard copies are sent a Provider Directory within five days of the request.

The Provider Directory shall be a single, comprehensive resource that encompasses DCO's entire Provider Network, including any Providers contracted by Subcontractors that serve the DCO's Members and shall include a provider's:
1. Name and any group affiliation;
2. Gender
3. Street address
4. Telephone number, including TTY
5. Office hours
6. Website URL, as appropriate
7. Specialty, as appropriate

8. Acceptance of new members
9. Teledentistry
10. Hospital Privileges
11. Cultural and linguistic capabilities including:
    A. Availability of qualified or certified interpreters at no cost to enrollees ensuring oral interpretation is available in all languages and American Sign Language;
    B. Availability of auxiliary aids and services for all enrollees with disabilities upon request and at no cost;
    C. Whether the provider has completed cultural competence training as required by ORS 413.450;
    D. Whether the provider has verifiable language fluency in non-English; and
    E. Whether the provider's office or facility is accessible and has accommodations for people with physical disabilities, including information on accessibility of provider office, exam rooms, restrooms, and equipment.

REFERENCES
42 CFR 438.10 Information requirements
OAR 410-141-3585 MCE Member Relations: Education and Information

Revision History

Date:	Description
03/12/2018	Approval and adoption.
05/20/2019	Updates based on annual review.
12/9/2019	Conversion to revised policy and procedure format and naming convention.
11/18/2020	Updates based on annual review.
11/11/2021	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.
01/09/2025	Updates based on annual review.