

In response to COVID-19, CareOregon Dental is temporarily adjusting limited evaluation and teledentistry requirements. During this public health emergency, it is imperative that, where possible, members avoid travel to providers' offices, clinics, hospitals or other health care facilities where they could risk their own or others' exposure to illness. Accordingly, dentists may deliver services to members via teledentistry, in any geographic area and from a variety of places, including members' homes. With this flexibility, CareOregon Dental members can receive clinically appropriate services without coming into the dental clinic.

Summary

1. CareOregon Dental can adjudicate all teledentistry claims that are properly submitted based on this guidance.
2. Dentists are responsible and accountable for appropriate use of CDT codes, chart documentation, and claim form completion to support the provided services.
3. Reimbursement will be the same as for services provided in person.
4. Dental care providers do not have to be present at the originating site to engage in teledentistry.

Guidance for delivering services via telephone, two-way audio and video (synchronous) or store-and-forward (asynchronous):

1. These visits may be for established or unestablished CareOregon Dental members.
2. The appropriate CDT codes should be billed. Any covered service that can be appropriately provided to a patient without a provider at the originating site (patient location) can be billed. These codes follow the coverage and billing requirements as stated in the OARs Appropriate covered CDT codes include, but may not be limited to:
 - a. D0140 (limited oral evaluation – problem-focused)
 - b. D0170 (re-evaluation – limited)
 - c. You are required to include a teledentistry code with your claim for these visits:
 - i. D9995 (teledentistry – synchronous; real-time encounter with a dentist)
 - ii. D9996 (teledentistry – asynchronous)
 - d. A covered service must be provided for the teledentistry codes (D9995 and D9996) to be paid.
3. Box 38 (Place of Treatment) on your claim form must list "02" to denote telehealth services.
4. There is a preference for video or phone consult with photos, as long as photos may be stored securely as part of the patient record. However, we will still pay claims for phone encounters. Phone-only encounters should include documentation that mentions state of emergency and video is not available or feasible.
5. Only licensed dentists may provide these services.
6. Documentation must meet the same standards as face-to-face visits.

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7. Documentation must:

- a. Model SOAP charting or equivalent.
 - b. Include patient history, provider assessment, treatment plan and follow-up instructions.
 - c. Support the assessment and plan.
 - d. Be retained in the patient's record and be retrievable
- 8.** CareOregon Dental kindly requests that specialty referrals be completed only after an in-clinic visit with radiographs and a complete assessment of the patient and their urgent clinical needs. Please contact us directly for consultation prior to referring any exceptions.
- 9.** During this public health emergency, the requirement for your synchronous audio-video platform to be HIPAA compliant has been waived. A message from the Federal Department of Health and Human Services (HHS): "Effective immediately, the HHS Office for Civil Rights (OCR) will exercise enforcement discretion and waive penalties for HIPAA violations against health care providers that serve patients in good faith through everyday communication technologies such as FaceTime or Skype, during the COVID-19 nationwide public health emergency." For more information: [hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/index.html](https://www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/index.html) The American Dental Association is providing evolving guidance: [COVID-19 Coding and Billing Interim Guidance](#)