CareOregon Dental Referral and Prior Authorization Guide

November 2025

Referral and Prior Authorization: Documentation

The checklist below outlines the required referral documentation for each service type to support accurate and timely referral processing. Missing documentation may delay processing of requested services while we work to obtain needed information.

Service Type	Requested Documentation
All Requests	- Chart notes relevant/related to the request - Medical history - Tooth chart in color or list of current conditions and planned procedures - Treatment plan - Relevant or related past procedure history - Current, labeled radiographs of the teeth/hard tissue pathology being requested that clearly show the entire tooth/teeth being requested - not needed if edentulous or if unavailable for pediatric and special needs requests - If unable to submit through our portal, please include our Down Time Request Form or ADA claim form
In addition to the above, please include the following information with your request:	
Endodontics	- Periapical radiograph(s) of the relevant teeth - Probings - Treatment plan and tooth chart include planned final restoration
All Partial Dentures	- Current intraoral radiographs of remaining teeth - Full periodontal charting within the last year - Applies to D5211/D5212 D5221/D5222 D5820/D5821
Periodontist	Full periodontal charting within the last year
Orthodontics	- Relevant chart notes that include: - Most recent comprehensive or recall exam - Most recent dental hygiene, periodontal or dental cleaning services - Orthodontic evaluation chart notes - Handicapping Labio-Lingual (HLD) Index California Modification Score Sheet - Casts can be accepted in lieu of HLD Score Sheet - Radiographs to include an FMX or panoramic image - Photographs (except for cases of cleft palate or cleft lip) - Facial photographs (3 views) - Intraoral photographs (5 views)

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Referral and Prior Authorization Submission and Tracking: CareOregon Connect Portal

Providers can submit and track referrals using the CareOregon Connect Portal. It is a fast and easy way to access your clinic's information as well as specialty provider information.

- Submit referrals and prior authorizations (PAs) electronically, using the CareOregon Connect Portal.

  - **To submit a new referral or PA**, simply click the "New Request – Dental" option. Our easy-to-use prompts will help guide you through the process.

  - **To check the status of a referral or prior authorization,** simply click into the "Referrals and Authorizations" tab. Your submission will be available to view, and should display as Approved, Pended, or Denied.

  - For a step-by-step guide, please view the process document here.

- Not using the CareOregon Connect Portal? Please submit a **New User Registration - Provider** request on the CareOregon Connect Homepage. To create a new account, select "Provider" under "New User Registration."

  PLEASE NOTE: Dental Providers create accounts and log-in directly with CareOregon Connect/Health Trio, and not the Single Sign Ons provided by OneHealthPort.

- Having trouble using the portal? Additional guides and helpful walkthroughs are here.

Need more help?
For password resets, lockouts and general technical support, call: *877-814-9909.* For other issues, reach out to CODProviderSupport@careoregon.org.

Procedure Codes Requiring Prior Authorization

Crowns	D2740 – porcelain/ceramic crowns
	D2751, D2752 – PFM crowns
Other Restorative	D2954 – prefabricated post and core
	D2980 – crown repair
Endodontics	D3346 – retreatment of prior root canal, anterior
Removable Prosthodontics	D5110, D5120 – complete dentures
	D5130, D5140 – immediate dentures
	D5211, D5212 – resin based partial dentures
	D5221, D5222 – immediate resin based partial dentures
	D5820, D5821 – interim partial dentures
Fixed Partial Dentures	D6980 – fixed partial denture repair
Oral Surgery	D7920 – skin graft
Orthodontics	D8000-D8999, except no PA required for D8660 for EPSDT beneficiaries