

# CareOregon Dental Referral and Prior Authorization Guide

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## 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 while we work to obtain the required information.

**PLEASE NOTE:** Specialty Providers must submit a Prior Authorization if a requested procedure is not included in the list of approved codes on the original referral to their office.

Service type	Requested documentation
All Requests	<ul style="list-style-type: none"> <li>• Chart notes relevant/related to the request</li> <li>• Medical history</li> <li>• Tooth chart in color or list of current conditions and planned procedures</li> <li>• Treatment plan (showing past and pending treatment)</li> <li>• Relevant or related past procedure history</li> <li>• <b>Current, labeled and dated</b> radiographs of the teeth/hard tissue pathology being requested that clearly show the entire tooth/teeth being requested                             <ul style="list-style-type: none"> <li>◦ not needed if edentulous or if unavailable for pediatric and special needs requests</li> </ul> </li> <li>• If unable to submit through our portal, please include our <a href="#">Down Time Request Form</a> or ADA claim form</li> </ul>
<b>In addition to the above, please include the following information with your request:</b>	
Endodontics	<ul style="list-style-type: none"> <li>• Periapical radiograph(s) of the relevant teeth</li> <li>• Treatment plan and tooth chart include planned final restoration</li> </ul>
All Partial Dentures	<ul style="list-style-type: none"> <li>• Current intraoral radiographs of remaining teeth</li> <li>• Full periodontal charting within the last year</li> <li>• Applies to D5211/D5212 D5221/D5222 D5820/D5821</li> </ul>
Periodontics	<ul style="list-style-type: none"> <li>• Full periodontal charting within the last year</li> </ul>
Orthodontics	<ul style="list-style-type: none"> <li>• Relevant chart notes that include:                             <ul style="list-style-type: none"> <li>◦ Most recent comprehensive or recall exam</li> <li>◦ Most recent dental hygiene, periodontal or dental cleaning services</li> <li>◦ Orthodontic evaluation chart notes</li> </ul> </li> <li>• Handicapping Labio-Lingual (HLD) Index California Modification Score Sheet                             <ul style="list-style-type: none"> <li>◦ Casts can be accepted in lieu of HLD Score Sheet</li> </ul> </li> <li>• Radiographs to include an FMX or panoramic image</li> <li>• Photographs (except for cases of cleft palate or cleft lip)                             <ul style="list-style-type: none"> <li>◦ Facial photographs (3 views)</li> <li>◦ Intraoral photographs (5 views)</li> </ul> </li> </ul>

## 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**, simply click the “New Request – Dental” option. If you do not see “New Request - Dental” and instead, see Physical or Behavioral Health options – please email [CODProviderSupport@careoregon.org](mailto:CODProviderSupport@careoregon.org)
  - **To check the status of a referral or prior authorization**, simply click the “Referrals and Authorizations” tab. Your submission should display as Approved, Pended, or Denied.
  - For a step-by-step guide, please view [the process guide](#). Additional guides and walkthroughs can be found on our [Provider Portal support web page](#).
- 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 directly with CareOregon Connect/Health Trio, and not OneHealthPort. **Need help?** For password resets, lockouts and general technical support, call: 877-814-9909. For additional support with the portal, reach out to [CODProviderSupport@careoregon.org](mailto:CODProviderSupport@careoregon.org)

### Procedure Codes Requiring Prior Authorization

<b>Crowns</b>	D2390, D2710, D2712 - resin-based composite crowns D2740, D2751, D2752 - porcelain/ceramic crowns & PFM crowns
<b>Other Restorative</b>	D2950 - core build up D2954 – prefabricated post and core D2980 – crown repair
<b>Endodontics</b>	D3310, D3320, D3330 - endodontic treatment (anterior, premolar, molar) D3346 - retreatment of prior root canal, anterior D3410 - apicoectomy - anterior D3430 - retrograde fill
<b>Periodontics</b>	D4210, D4211 - gingivectomy or gingivoplasty *limited coverage, please <a href="#">see Provider Manual</a>
<b>Prosthodontics</b>	D5110, D5120, D5130, D5140 – complete dentures D5211, D5212, D5221, D5222 – resin-based partial dentures D5710, D5711, D5720, D5721 – rebase, partial and complete dentures D5820, D5821 - interim partial dentures D6980 - fixed partial denture repair
<b>Oral Surgery</b>	D7920 - skin graft D7230, D7240, D7241 - removal of impacted tooth – bony D7250, D7251 - removal of residual tooth roots (cutting procedure) & coronectomy D7280 - exposure of an unerupted tooth D7283 - placement of a device to facilitate eruption of impacted tooth D7472, D7473 - removal of tori D7961, D7962, D7963 - frenectomy (frenulectomy) & frenuloplasty
<b>Orthodontics</b>	D8000-D8999, except no PA required for D8660
<b>Anesthesia</b>	D9222, D9223 - deep sedation, general anesthesia D9239, D9243 - IV moderate (conscious) sedation

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