Arrow Clinic Assignment Provider Frequently Asked Questions

What is member assignment?

Member assignment is an option for connecting Medicaid members with dental care. The dental plan assigns members who do not have an established dentist to a dental home located close to their residence. Members can only receive dental care at this dental office.

Why was my established patient assigned to the Arrow Clinic?

It was not the intention of ODS to assign your established patient to the Arrow Clinic. To request an assignment correction call ODS dental customer service at 800-342-0526.

My claim denied due to my patient's assignment to Arrow Clinic, what should I do?

Call ODS dental customer service to request the assignment removal and re-processing of the claim.

Does my patient have to call ODS customer service to request the assignment correction or can I make the call?

If the member is an established patient in your practice you may call ODS customer service on their behalf to request the assignment correction. When making the call, be prepared to report member name, subscriber ID number, and date of your patient's next appointment.

Can I request an assignment correction for family members of my established patients who are currently assigned to Arrow?

If the family member is not your established patient they will need to call ODS dental customer service to request an assignment change.

I check eligibility on the day of my patient's appointment in Benefit Tracker. If they are assigned to Arrow do I have to cancel the appointment?

No, you do not have to cancel the appointment. Call dental customer service to request the assignment removal.

What steps do I take to check for Arrow assignment?

When conducting daily eligibility confirmation simply navigate to the Group Limitations page in Benefit Tracker. Arrow assignment will be clearly noted in the Group Limitations notes. It is important to note that ODS has assignment agreements with several dental clinics throughout Oregon. These assignments will also be indicated in this section of Benefit Tracker. Refer to the screen shot on page 2 for an example of a member assignment note in Group Limitations.

I'm a specialist who has had an assigned member referred to me. Is assignment correction needed?

No, as long as there is a referral on file no action will be needed. Your claim will process as normal based off of the referral received.



Example of Assignment Note in Benefit Tracker Group Limitations:

Dental search Documents ~ Fir	nd Care 🗹	
Family		
Limits		
Eligibility and Benefits Group limit	ations Claims EOBs Memberha	ndbook
ID number: Subscriber name: Subscriber address:	Insurance type: Group number: Group name: Plan number: State issued:	Oregon Health Plan 10010572 DCO Health Share of Oregon AD002042 OR
For limitations not listed on this page, p	lease refer to Standard Processing Policie	5.
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