

South Carolina
DEPARTMENT OF HEALTH AND HUMAN SERVICES
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MEDICAID BULLETIN

<i>DEN</i>	<i>07-17</i>
<i>PHY-PC-FP/GP</i>	<i>07-18</i>
<i>PHY-PC-INT</i>	<i>07-20</i>
<i>PHY-PC-PED</i>	<i>07-20</i>

TO: Primary Care Physicians and Dentists

SUBJECT: Fluoride Varnish Application

Effective August 1, 2007, the South Carolina Department of Health and Human Services (SCDHHS) will cover the application of topical fluoride varnish for children up to three years old in a primary care physician's office during Early Periodic, Screening, Diagnostic and Treatment (EPSDT) well child visits. The purpose of applying fluoride varnish during an EPSDT well child visit is to increase access to preventive dental treatment in an effort to intercept and prevent Early Childhood Caries in children at moderate to high risk for dental caries.

Lack of access to fluoridated water, lack of access to education on dental health, high sugar diet, lack of sufficient dental home care, family history of tooth decay and lack of dental evaluations or treatment are factors in determining if a child is at high risk for dental services. Fluoride varnish is a topical agent containing a high concentration of fluoride in a resin or synthetic base. Fluoride varnishes are painted directly onto teeth and are intended to remain in close contact with enamel for several hours. An oral prophylaxis is not required prior to applying fluoride varnish.

The best practices of the American Academy of Pediatrics recommends children up to three years old that are at high risk for dental caries should receive fluoride varnish application in their Primary Care Physician's office during their EPSDT well child visit two times a year (once every six months) and in their dental home two times per year (once every six months). From 3 to 21 years of age, beneficiaries may continue to receive fluoride varnish application in their dental home as part of their fluoride regimen as determined by their dentist. A Caries Assessment Tool (CAT) should be used prior to the application of the fluoride varnish to determine the necessity for the procedure.

In coordination with application of fluoride varnish, primary care physician offices must provide anticipatory guidance on oral health to parents or care givers to promote oral health to children and families. Anticipatory guidance topics include oral development, tooth eruption, gum/tooth cleaning, appropriate use of fluoride, bottle use, and feeding and eating practices.

It is also very important that Medicaid beneficiaries receiving fluoride varnish application during EPSDT well child visits in a primary care physician office be referred to a dentist so that a dental home can be established.

The American Dental Association has established a new Current Dental Terminology (CDT) procedure code, D1206, for the application of topical fluoride varnish. The primary care physician can bill this procedure on the CMS-1500 claim form. Dental providers can bill this procedure code on the ADA claim form.

Procedure Code	CDT Descriptor	Fee
D1206	Topical fluoride varnish; therapeutic application for high risk patients Application of topical fluoride varnish, delivered in a single visit and involving the entire oral cavity. Not to be used for desensitization	\$17

Prior to billing Medicaid for these services, staff members in the primary care physicians office that will be using the CAT and applying fluoride varnish must complete a training module, available online, outlining the use of the CAT and illustrating the correct process of applying fluoride varnish. Each staff member must complete a post test to be retained in the office files for documentation purposes.

For a link to the fluoride varnish-training module created by the National Maternal and Child Oral Health Resource Center, go to <http://www.mchoralhealth.org/OpenWide>.

Questions regarding this bulletin should be directed to your respective Program Coordinator; Dentists should call (803) 898-2568, Primary Care Physicians should call (803) 898-2660. Thank you for your continued support and participation in the South Carolina Medicaid Program.

/s/

Susan B. Bowling
Acting Director

SBB/mhw

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