

Fluoride Treatment by a Primary Care Physician

State(s): ☑ Idaho ☑ Montana ☑ Oregon ☑ Washington ☐ Other:	LOB(s): ☑ Commercial ☐ Medicare ☑ Medicaid
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Commercial and Medicaid Policy

Clinical Guidelines are written when necessary to provide guidance to providers and members in order to outline and clarify coverage criteria in accordance with the terms of the Member's policy. This Clinical Guideline only applies to PacificSource Health Plans, and PacificSource Community Solutions in Idaho, Montana, Oregon, and Washington. Because of the changing nature of medicine, this list is subject to revision and update without notice. This document is designed for informational purposes only and is not an authorization or contract. Coverage determination are made on a case-by-case basis and subject to the terms, conditions, limitations, and exclusions of the Member's policy. Member policies differ in benefits and to the extent a conflict exists between the Clinical Guideline and the Member's policy, the Member's policy language shall control. Clinical Guidelines do not constitute medical advice nor guarantee coverage.

Background

Fluoride varnish is a type of topical fluoride that acts to retard, arrest, and reverse the caries process and is applied to all surfaces of the teeth. The teeth then absorb the fluoride varnish, strengthening the enamel and helping prevent cavities. Application of fluoride varnish by primary care providers during visits is strongly encouraged by the American Academy of Pediatrics. Further, the U.S. Preventative Services Task Force maintains the practice of primary care providers applying fluoride varnish to the primary teeth of all infants and children starting at the age of primary teeth eruption as a Grade B Recommendation.

Under Section 2713 of the ACA, private health plans must provide coverage for a range of preventive services and may not impose cost-sharing (such as copayments, deductibles, or co-insurance) on patients receiving these services.

To guide primary care providers with assessment of the necessity of fluoride varnish and with oral health status, the American Academy of Pediatrics (AAP) has developed a risk assessment tool to aid in the implementation of oral health risk assessment and fluoride varnish during health supervision visits. This tool has been subsequently reviewed and endorsed by the National Interprofessional Initiative on Oral Health.

https://www.aap.org/en-us/Documents/oralhealth_RiskAssessmentTool.pdf

Criteria

Commercial

Once teeth are present (approximately 6 months up to 6 years of age), fluoride varnish may be applied to all children every 3-6 months in the primary care office, as indicated by the oral health assessment.

The dental/oral health assessment and education components typically include:

- Caries risk assessment and identifying dental disease
- Educating care givers/parents on the care and cleaning of the teeth and mouth
- Educating care givers/parents on how to prevent dental and gum disease
- Offering anticipatory guidance on obtaining periodic dental care from dental providers
- Initiating a referral to the a dental provider as indicated
- · Prescribing fluoride supplements as indicated
- Applying fluoride varnish as indicated

99188 Application of topical fluoride varnish by a physician or other qualified health care professional

- This code was approved to begin January 1, 2015. It only includes varnish application, not risk assessment, education, or referral to a dentist.
- A maximum of four applications in a twelve-month period through age five is allowed.

D0191 Dental assessment is covered for children age 6 and under once per year

Medicaid

PacificSource Medicaid follows Oregon Administrative Rules (OAR) 410-123-1260 for enhanced oral health services in the primary care setting.

Coding Information

D0191 Assessment of patient

D1206 Topical application of fluoride varnish

D1208 Topical application of fluoride

99188 Application of topical fluoride varnish by a physician or other qualified health care professional

99429 Unlisted preventive medicine service

99499 Unlisted evaluation and management service

References

Achieving Bright Futures. 18 Month Visit. American Academy of Pediatrics. Accessed 9/14/2017, 10/16/2018, 9/25/2019, 1/27/2020

https://www.aap.org/en-us/professional-resources/practice-transformation/getting-paid/Pages/Achieving-Bright-Futures.aspx

Achieving Bright Futures. 30 Month Visit. Implementation of the ACA Pediatric Preventive Services Provision. American Academy of Pediatrics. Accessed 9/14/2017, 10/16/2018, 9/25/2019, 1/27/2020 https://www.aap.org/en-us/professional-resources/practice-transformation/getting-paid/Pages/Achieving-Bright-Futures.aspx

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Oral Health Coding Fact Sheet for Primary Care Physicians. American Academy of Pediatrics. 1/1/2016. Accessed 9/14/2017, 10/16/2018, 9/25/2019, 1/27/2020 https://www.aap.org/en-us/Documents/coding factsheet oral health.pdf

Recommendation for Preventive Pediatric Health Care. Bright Futures/American Academy of Pediatrics. 10/2015. Accessed 9/14/2017, 10/16/2018, 9/25/2019, 1/27/2020

https://www.aap.org/en-us/Documents/periodicity_schedule.pdf

The Henry J. Kaiser Family Foundation. Preventive Services Covered by Private Health Plans under the Affordable Care Act. Fact Sheet. August 2015. Accessed 9/14/2017, 10/16/2018, 9/25/2019, 1/27/2020

http://files.kff.org/attachment/preventive-services-covered-by-private-health-plans-under-the-affordable-care-act-fact-sheet

U.S. Preventive Services. Task Force. Dental Caries in Children from Birth Through Age 5 Years: Screening. Release Date: May 2014. Accessed 9/14/2017, 10/16/2018, 9/25/2019, 1/27/2020 http://www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/dental-caries-in-children-from-birth-through-age-5-years-screening?ds=1&s=dental

Appendix

Policy Number: [Policy Number]

Effective: 2/1/2020 Next review: 2/1/2021

Policy type: Commercial

Author(s): [Authors]

Depts: Health Services

Applicable regulation(s): N/A

External entities affected: N/A