



STATE OF HAWAII  
DEPARTMENT OF HUMAN SERVICES  
Med-QUEST Division  
Clinical Standards Office  
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MEMO NOS.  
FFS M13-11 [FFS]  
ADM-1317 [QUEST]  
ADMX-1316 [QExA]

MEMORANDUM

TO: Primary Care Providers (PCP)  
QUEST & QUEST Expanded Access (QExA) Health Plans

FROM: <sup>UES</sup> Kenneth S. Fink, MD, MGA, MPH  
Med-QUEST Division Administrator

SUBJECT: COVERAGE OF TOPICAL FLUORIDE VARNISH APPLICATION

Topical fluoride application every six months is a Medicaid covered service. Previously, this was covered only when performed by dentists. Effective January 1, 2014, topical fluoride varnish application by qualified primary care providers will be covered for children age >1 and <6 years who have not received a topical fluoride treatment, by a dentist or qualified primary care provider, within the previous six months.

**Background**

Dental caries is the single most common chronic childhood disease. In addition, dental caries is one of the most common preventable diseases in children and is increasing in prevalence among children age 2-5 years. According to the American Dental Association (ADA), factors associated with high caries risk in children younger than six years include low socioeconomic status and suboptimal fluoride exposure. According to the Centers for Disease Control and Prevention in 2010 (the most recent data available), the national average for fluoridated community water supply (CWS) was 74%; in Hawaii 11% of the CWS was fluoridated, primarily military bases. Fluoride supplementation can occur through oral supplementation, fluoride toothpaste, and professionally applied topical fluoride.

ADA Recommended Dietary Fluoride Supplementation for Low Fluoridated CWS Areas:

<b>Age</b>	<b>Fluoride Amount</b>
0-6 months	None
6 months to 3 years	0.25 mg/day
3-6 years	0.50 mg/day

Fluoride supplements increase the risk of fluorosis. Odds ratios ranged from 1.3 to 10.7 in studies included in a systematic review, with the odds ratio being highest for children <2 years. Each gram of fluoride toothpaste contains approximately 1.0 mg of fluoride, and children age <6 years are estimated to swallow a mean of 0.3 g of toothpaste per brushing. Use of a pea-sized amount (approximately 0.25 g) of fluoride toothpaste twice a day is recommended for children age <6 years, with caution for fluoride toothpaste use in children <2 years.

The U.S. Preventive Services Task Force has recently updated its 2004 review for preventing dental caries in children <5 years. The three new studies included that evaluated fluoride varnish demonstrated a reduction in caries incidence when applied every six months. No study was identified that reported the risk of fluorosis associated with use of fluoride varnish, but the degree of systematic exposure after application is believed to be low.

In order to expand access to preventive pediatric dental services, providers able to be reimbursed for the application of fluoride varnish is being expanded from dental providers to also include primary care providers (PCPs). This expanded access to preventive dental services by PCPs is not a substitute for pediatric dental care by a dentist, but rather increases access to oral health care for children who did not receive a recommended dental visit.

The ADA recommends that parents take children to a dentist no later than their first birthday and then at intervals recommended by their dentist. The Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) program recommends dental visits at six-month intervals. Some evidence indicates that a health care providers' recommendation for dental care increases the likelihood of a subsequent dental visit.

### **Qualified PCPs**

Qualified PCPs include physicians and nurse practitioners. These PCPs may delegate under direct supervision to a physician assistant (PA), registered nurse (RN), licensed practical nurse (LPN), or Certified Medical Assistant (CMA). Prior to performing topical fluoride varnish applications, PCPs must receive either Continuing Medical Education (CME) or CME-equivalent training in fluoride varnish application approved by either the American Academy of Pediatrics (AAP) or the American Academy of Family Physicians (AAFP). Documentation of approved training must be provided upon request.

**Billing**

Topical fluoride varnish application shall be billed using HCPCS code D1206. This code shall be covered for children beginning at age one year until reaching age six years if they have not received a topical fluoride treatment in the previous six months. Providers can rely on the reported last receipt of fluoride treatment if dental services are not available on site, and should verify last receipt if dental services are available onsite. Reported or verified last receipt of topical fluoride should be documented in the visit note.

Non-Federally Qualified Health Center (FQHC) PCPs will be reimbursed \$4.16 per fluoride varnish application using HCPCS code D1206. For FQHCs, this service shall be included in the medical visit Prospective Payment Service (PPS) rate, and the FQHC shall add D1206 to the claim.

Please direct any question regarding billing to Patti Bazin at [pbazin@medicaid.dhs.state.hi.us](mailto:pbazin@medicaid.dhs.state.hi.us) or 808-692-8083.