

# Preventive Care in Oral Health

## Tool Kit for Primary Care Providers

We are committed to improving the health of our clients through improved screening, diagnosis, treatment, and referral.

This tool kit is intended to provide guidance on how to document and address preventive care in oral health for Health First Colorado (Colorado's Medicaid Program) and the Children's Health Insurance Program (CHP+) clients.

For clinical guidelines on children's preventive care in oral health, visit: [American Academy of Pediatric Dentistry](#).

### How you can help:

- Review clinical guidelines
- Screen using risk assessment forms
- Diagnose, recording specific dental codes
- Treat/Refer, recording specific dental codes
- Follow reimbursement instructions
- Track health outcomes

### Screening:

Primary care providers make all the difference when it comes to getting children screened for oral health problems. According to the 2011 Medical Expenditure Panel Survey, 52.1 percent of children between the ages of 2 and 17 were offered advice from a health provider about the need for routine dental checkups. Children between the ages of 13 and 17 were offered advice for a dental checkup at a lower rate than those between the ages of 2 to 5 and 6 to 12 (45.7 percent versus 57.3 percent and 53.7 percent). Also, children from lower income families were much less likely to have received any dental care in 2011 than children from middle and higher income families. Primary care providers should screen all children for oral health problems like tooth decay during pediatric well child visits.

### Treatment and Referral:

Primary care providers can help children get the dental care they need by educating parents about the importance of regular dental visits, and by referring children to dentists. Establishment of a dental home should begin no later than 12 months of age. The dental home is the ongoing relationship between the dentist and the patient, and includes all the aspects of oral health care and is delivered in a comprehensive, continuously accessible, coordinated, and family-centered way.

Primary care providers can also administer some preventive dental services, which can be reimbursed by Health First Colorado and CHP+.

### Allowable Services

Trained medical personnel (see qualifications below) may administer fluoride varnish at a well-child visit to Health First Colorado and CHP+ children ages birth through 4 years (until the day before their fifth birthday) who have moderate to high caries risk after they complete a risk assessment and document it in the medical record. Risk assessment forms may be found either at [Cavity Free at Three](#) or at [HCPF: Forms](#).

Health First Colorado will reimburse for a maximum of three fluoride varnish administrations per year for each child who is eligible and at high risk and CHP+ will reimburse for a maximum of two per year for CHP+ clients. Additionally, State Managed Care Network CHP+ clients must be treated by a primary care provider who participates in the CHP+ network. Dental and medical providers are encouraged to communicate with one another to avoid duplication and nonpayment of services.

Providers who may bill directly for the above services include medical doctors, doctors of osteopathic medicine, and nurse practitioners. Other trained medical personnel employed through qualified physician offices or clinics may provide these services during a well child visit and bill using the physician's or nurse practitioner's Health First Colorado provider number. In order to provide this benefit and receive reimbursement, the medical provider must have participated in on-site training from the "Cavity Free at Three" team or have completed Module 2 (child oral health) and Module 6 (fluoride varnish) at the [Smiles for Life](#) curriculum. Medical personnel who complete the training must save the documentation for this training in the event of an audit.

### ***Billing Procedures***

*For children from birth – 2 years old (until the day before their third birthday):*

**Private practices:** D1206 (topical fluoride varnish) and D0145 (oral evaluation for a patient under three years of age and counseling with primary caregiver) must be billed together.

**Federally qualified health centers (FQHCs) and rural health clinics (RHCs):** D1206 and D0145 must be itemized on the claim with a well child visit, but reimbursement will be at the current encounter rate.

The secondary code is ICD V72.2 – ICD10 codes are Z01.20 (encounter for dental examination and cleaning without abnormal findings) and Z01.21 (encounter for dental examination and cleaning with abnormal findings).

*For children from 3 – 4 years old (from their third birthday until the day before their fifth birthday):*

**Private practices:** D1206 (topical fluoride varnish) and D0999 (dental screening) must be billed together.

**FQHCs and RHCs:** D1206 and D0999 must be itemized on the claim with a well child visit but reimbursement will be at the current encounter rate.

The secondary code is ICD V72.2 – ICD10 codes are Z01.20 (encounter for dental examination and cleaning without abnormal findings) and Z01.21 (encounter for dental examination and cleaning with abnormal findings).

Varnishes may be applied up to three times a year per eligible and high risk child enrolled in Health First Colorado and up to two times a year for CHP+ clients. For medical providers seeing CHP+ HMO members, fluoride varnish application is built into the CHP+ per member per month fee and therefore there is no additional fee paid for that service.

The Health First Colorado [provider fee schedule](#) is updated regularly.

Additional information about the CHP+ dental program can be found at [deltadentalco.com/CHP.aspx](http://deltadentalco.com/CHP.aspx)

### **Referrals:**

Primary care physicians can consult the following for a list of both Health First Colorado and CHP+ enrolled dental providers: [Find a provider](#) or [insurekidsnow.gov](http://insurekidsnow.gov)

### **Appendix A**

We are committed to improving the health outcomes of our clients. The performance measures we use for tracking oral health in Health First Colorado/CHP+ clients are outlined in Appendix A. Appropriate coding will give us the information we need to track changes in health outcomes. The data is updated annually, and is available for review at [Healthy Living Performance Measures](#). For more information on the [Healthy Living Initiatives](#), please link to our website.

### **Performance measures for tracking preventive oral health services in Health First Colorado/CHP+:**

We will document, track, and evaluate the diagnosis and treatment of preventive services in oral health, based on the following measures.

Goal: Improve dental outcomes in Health First Colorado and CHP+ children by promoting evidence-based strategies.

#### **Outcome indicator:**

- Percent of predominantly low income children in the third grade who have dental caries experience Basic Screening Survey

#### **Process indicators:**

- Percent of children who have received dental treatment services CHP+ data/CMS 416
- Percent of children who have received preventive dental services CHP+ data/CMS 416
- Percent of children who have received sealants Medicaid/CHP+ data