


**Table 21.4 CHDP/EPSTD PERIODICITY SCHEDULE FOR DENTAL REFERRAL BY AGE**

Age (years)	Routine Dental Referral	Suspected Dental Problem
1* - 20	 <p>Refer every 6 months** (Children with special needs may need more frequent referrals)</p>	Refer at any age if a problem is suspected or detected

- A dental screening/oral assessment is required at every CHDP/EPSTD\*\*\* health assessment regardless of age.
- Refer children directly to a dentist:
  - **Beginning at age one** as required by California Health and Safety Code Section 124040 (6)(D) <http://www.leginfo.ca.gov/cgi-bin/displaycode?section=hsc&group=124001-125000&file=124025-124110>
  - **At any age** if a problem is suspected or detected – See CHDP Dental Referral Classifications <http://www.dhcs.ca.gov/formsandpubs/publications/Documents/CMS/pm160dentalguide.pdf>
  - **Every six (6) months for maintenance of oral health** See pp.13-15 [http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Benefits/Downloads/EPSTD\\_Coverage\\_Guide.pdf](http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Benefits/Downloads/EPSTD_Coverage_Guide.pdf)
  - **Every three (3) months** for children with documented special health care needs when medical or oral condition can be affected; and for other children at high risk for dental caries.
- To help find a dentist:
  - For a child with Medi-Cal, contact Denti-Cal at 1-800-322-6384 or <http://www.denti-cal.ca.gov/WSI/Bene.jsp?fname=ProvReferral>
  - For families with or without Medi-Cal, the local CHDP program can assist in finding a dentist. <http://www.dhcs.ca.gov/services/chdp/Pages/CountyOffices.aspx>

\* The American Academy of Pediatrics (AAP) policy is to establish a dental home by age one: <http://pediatrics.aappublications.org/content/134/6/1224.full.pdf+html>

\*\* See Medicaid Clinical Guidelines, P.5, <http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Benefits/Downloads/Keep-Kids-Smiling.pdf>  
For Medi-Cal eligible children, Denti-Cal will cover preventive services (exam, topical fluoride application, and prophylaxis) once in a six month period and more frequently if there is a documented necessity. Denti-Cal has adopted the American Academy of Pediatric Dentistry’s (AAPD) “Recommendations for Preventive Pediatric Oral Health Care” which indicates frequencies for diagnostic and preventive procedures: [http://www.denti-cal.ca.gov/provsrvcs/bulletins/Volume\\_26\\_Number\\_7.pdf](http://www.denti-cal.ca.gov/provsrvcs/bulletins/Volume_26_Number_7.pdf). The AAPD emphasizes the importance of very early professional intervention and continuity of care beginning with the eruption of the first tooth and no later than 12 months of age: [http://www.aapd.org/media/Policies\\_Guidelines/G\\_Periodicity.pdf](http://www.aapd.org/media/Policies_Guidelines/G_Periodicity.pdf)

\*\*\* Child Health and Disability Prevention (CHDP) Program/Early Periodic Screening Diagnosis and Treatment (EPSTD)