Effective for dates of service on or after June 1, 2006, HCPCS code D1206 (topical application of fluoride [prophylaxis not included], child) is a Medi-Cal benefit for children younger than 6 years of age, up to three times in a 12-month period.

Because many dentists are not willing to see children this young, medical providers who routinely see pregnant women and young children offer the best hope for preventing and controlling tooth decay through the application of fluoride varnish. Physicians, nurses and medical personnel are legally permitted to apply fluoride varnish when the attending physician delegates the procedure and establishes protocol. (See Medi-Cal Update - Billing and Policy, May 2006, Bulletin 382).

BACKGROUND

Fluoride varnish is a newer form of topical fluoride that is more effective in preventing tooth decay than other forms of topical fluoride, and more practical and safer to use with young children. Fluoride varnish, used in accordance with the manufacturer's instructions, is safe for babies and young children, and the application is fast and easily performed. Fluoride varnish can be swabbed directly onto the teeth in less than 3 minutes and sets within one minute of contact with saliva. The application requires no special dental equipment and can be applied with minimal training by physicians, nurses, and supervised medical assistants.

The early application of fluoride varnish protects the primary teeth, and ideally should be performed as soon as possible after the teeth first erupt. Providers may purchase fluoride varnish in tubes containing sufficient product for multiple applications; however, many providers find it easier and more convenient to use prepackaged single use (unit dose) tubes, which come with a small disposable applicator brush.
Early childhood caries (ECC) is defined as tooth decay found in the primary dentition of a child younger than 6 years of age. ECC is an infectious process caused by acid producing bacteria, primarily Streptococcus mutans and Lactobacilli species.

Dental caries is the most common chronic medical problem in children. It is five times more prevalent than asthma and seven times more common than hay fever. ECC affects more than 50 percent of children by kindergarten. A recent California survey found that 28 percent of children in kindergarten through 3rd grade had untreated tooth decay.

ECC may cause in children:

- Chronic pain;
- Infection
- Failure to thrive and delayed growth; and
- Inability to concentrate and interference with intellectual tasks

The cost of ECC treatment can be significant and often ranges from $200-$5000 and can cost even more if a child with ECC requires hospitalization.

ADDITIONAL INFORMATION

Member Informing:

In accordance with contractual requirements, plans must inform Members, in a manner that ensures that the Member understands, all Medi-Cal covered services, including the new service benefit of fluoride varnish. Members should be informed that fluoride varnish is an available service for Members under 6 years of age and should be instructed that the service may be offered at an office visit of their Primary Care Physician (PCP).

Informing methods may include but are not limited to:

1. Member Services Guide;
2. Member service and health care bulletin;
3. Member postcard; and
4. Instructions on how to arrange for an office visit that will include the provision of fluoride varnish.

Provider Training:

It will be necessary for plans to make fluoride varnish training information available to network providers and their staff. Important training elements include instruction on:

- Obtaining fluoride varnish supplies;
- Fluoride varnish application, periodic dental assessments, and parental anticipatory guidance. The First Smiles program, funded by the California Children and Families (First 5) Commission, is conducting training for medical and dental professionals in various locations around the State. More information on training dates and locations is available at http://www.first5oralhealth.org;
- Referring children to a dentist for dental examination and care at 1 year of age per Child Health and Disability Prevention (CHDP) guidelines; and
- Coordination of member care with dental professionals.

Processes and Procedures

In accordance with contractual requirements to have processes and procedures to ensure that all medically necessary covered services are available and accessible to all members plans should

1. Require contracted plan health care providers to document dental assessment and fluoride varnish application in the Member’s medical record in a timely manner. Documentation could occur on the CHDP Confidential Screening/Billing Report (PM 160 form);

2. Monitor the rate of fluoride varnish utilization;

3. Encourage providers to schedule visit(s) that include fluoride varnish application; and

4. Promote fluoride varnish application via quality improvement strategies and training of providers.

Should you have any questions or require additional information regarding this policy letter, please contact your contract manager.

Sincerely,

[Signature]

Vanessa M. Baird, MPPA, Chief
Medi-Cal Managed Care Division