

Periodicity Schedule & Alternatives for Pediatric Preventive Oral Health in Primary Care

Periodicity Schedule: Preventive Oral Health in Primary Care											
	6 Months	9 Months	12 Months	15 Months	18 Months	24 Months	30 Months	3 Years	4 Years	5 Years	Repeat years 6-21
Parent/Caregiver Oral Health Education	•	•	•	•	•	•	•	•	•	•	•
Oral Health Assessment	•	•	•		•	•	•	•	•	•	•
Fluoride Varnish	•		•		•	•	•	•	•	•	•
Fluoride Supplementation	•	•	•	•	•	•	•	•	•	•	•
Alternative 1: First Tooth Eruption at 9 Months											
	6 Months	9 Months	12 Months	15 Months	18 Months	24 Months	30 Months	3 Years	4 Years	5 Years	Repeat years 6-21
Parent/Caregiver Oral Health Education	•	•	•	•	•	•	•	•	•	•	•
Oral Health Assessment		•	•	•		•	•	•	•	•	•
Fluoride Varnish		•		•		•	•	•	•	•	•
Fluoride Supplementation		•	•	•	•	•	•	•	•	•	•
Alternative 2: First Tooth Eruption at 15 Months											
	6 Months	9 Months	12 Months	15 Months	18 Months	24 Months	30 Months	3 Years	4 Years	5 Years	Repeat years 6-21
Parent/Caregiver Oral Health Education	•	•	•	•	•	•	•	•	•	•	•
Oral Health Assessment				•	•	•		•	•	•	•
Fluoride Varnish				•		•	•	•	•	•	•
Fluoride Supplementation				•	•	•	•	•	•	•	•

Billing and Coding for Oral Health in Primary Care

Fluoride Varnish Application

MaineCare

- Billing codes: CPT 99188 or alternatively D1206
- Reimbursement rate: CPT 99188 & D1206- \$26.58/ application
 - Application of topical fluoride varnish is covered up to four (4) times per calendar year for members under the age of 21. These limitations apply across qualified providers, including dental providers. Qualified providers shall bill using CPT code 99188.
 - o Federally Qualified Health Centers, Rural Health Centers, and Indian Health Services are to use these codes for encounter purposes; reimbursement for the visit will continue to be paid at the core rate for the practice

Private Medical Insurers

- Billing Code: CPT 99188 with a modifier of 33
- Reimbursement Rate: Amount will vary based on insurer.
 - o Private insurers have to cover all level A and B recommendations of the US Preventive Service Task Force (UPPSTF)
 - o Fluoride varnish by medical providers for children ages 6 months through 5 years (to the 6th birthday) is a Level B recommendation
 - o If the provider is out of network the claim could be denied

Oral Evaluation

MaineCare

- Billing codes: Children under 3 years of age D0145; MaineCare members over age 3 D0191
- Reimbursement rate: D0145- \$50.21; D0191- \$14.55
 - o MaineCare covers oral health risk assessments for members who do not have a dental home and/or have not seen a dentist in the past year.
 - o The provider must:
 - Question about the existence of a current primary dentist/dental home;
 - Include risk screening questions based on oral health history;
 - Include assessment of mouth and teeth; and
 - Develop an oral health plan which, if needed, includes parent, legal guardian, and/or primary caregiver education about importance of establishing a primary dentist/dental home for the child, and provide a referral to a dentist (when possible).
 - MaineCare will cover two (2) evaluations per calendar year across all qualified providers, but no more than once every 150 days. Additional information is available in MBM, Chapter III, Section 25, Dental Services.

Private Medical Insurers

Currently there are no commercial insurers that reimburse for oral evaluation

Silver Diamine Fluoride (SDF)

MaineCare

- Billing code: D1354
- Reimbursement rate: D01354- \$27.82/tooth
 - Medicament application is covered twice per tooth per year for members with a documented history of high caries. Medicament applications are not covered on teeth that have received restoration service in the last twelve (12) months.

Private Medical Insurers

- Billing code: CPT 0792T
- Reimbursement rate: Unknown if commercial insurers will reimburse for SDF.