Frequently asked questions during ‘Into the Mouths of Babes’ training

Q: If Medicaid-eligible children are on a fluoridated water system should I apply the fluoride varnish?

A: Yes. Fluoride varnish is a topical fluoride, which strengthens and remineralizes tooth enamel. Miniscule amounts are swallowed, minimizing the risk of fluorosis. Combined use of topical fluorides with fluoridated water offers protection greater than either of these methods used alone.


American Academy of Pediatrics Campaign for Dental Health 2019
https://ilikemyteeth.org/learn-share/

Q: Should I prescribe a fluoride supplement for children not drinking fluoridated water?

A: The American Dental Association and the American Academy of Pediatric Dentistry recommend that children at high risk for tooth decay receive a fluoride supplement after their total systemic fluoride intake is determined to be inadequate. The American Academy of Pediatrics and US Preventive Services Task Force recommend prescribing oral fluoride supplementation starting at age six months for all children whose water supply is deficient in fluoride. Determining the fluoride status may involve testing a water sample from the child’s primary water source. The NC Oral Health Section has guidelines for fluoride supplementation and water testing at http://www2.ncdhhs.gov/dph/oralhealth/partners/

Q: Can a child swallow too much fluoride varnish?

A: No published evidence indicates that professionally applied fluoride varnish is a risk factor for dental fluorosis, even among children younger than 6 years of age. Proper application technique reduces the possibility that a patient will swallow varnish during its application and limits the total amount of fluoride swallowed as the varnish wears off the teeth over several hours. (Centers for Disease Control and Prevention http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5014a1.htm accessed 4/2/19

Q: Are fluoride varnish treatments associated with adverse events in young children?

A: A CDC meta-analysis found fluoride varnish was not associated with treatment-related adverse events in young children. https://www.cdc.gov/pcd/issues/2017/16_0372.htm accessed 4/2/19

Q: What about allergies to fluoride varnish products?

A: Fluoride varnish products are contraindicated in patients with ulcerative gingivitis or known sensitivity to colophony (up to 100 resin compounds from pine tree wood also found in paper, ink, chewing gum, adhesives, and detergents). The Medicom website states their fluoride varnish products (including Duraflor)
are free of gluten, peanuts, tree nuts, soy, corn, shellfish, egg and dairy products.  

https://www.cdc.gov/pcd/issues/2017/16_0372.htm

Q: Do private insurance companies reimburse for the fluoride varnish procedure?
A: Yes, now that the United States Preventive Services Task Force (USPSTF) recommends that all children through age five receive fluoride varnish as part of primary medical care visits, some private insurance companies began paying for this procedure in 2016. Contact the individual company to inquire about specific coverage.

Q: Is billing and coding the same for NC Medicaid and private insurance companies?
A: No, NC Medicaid requires CDT codes, with procedure code D1206 always billed on the detail line before D0145. Private insurance companies use CPT code 99188. Please refer to each company’s website provider portal or a company representative to obtain information about coding and billing.

Q: Are any modifiers needed for the fluoride varnish Medicaid billing codes?
A: No, and the only time a specific diagnosis code is needed for the fluoride varnish procedure is if it is the only service provided at that visit. In that case use the general dental examination code Z01.20 along with the D1206 and D0145 codes. When providing the fluoride varnish procedure along with a well-child visit or a sick visit, you only need the diagnosis code for the other service you are providing, along with the D1206 and D0145 codes, which must always be filed together on the same date of service.

Q: Are Medicaid billing procedures the same for medical practices, health departments, FQHCs, and CHCs?
A: Yes. The D1206 and D0145 codes are both billed on the same date of service in addition to other services rendered. Reimbursement is in addition to reimbursement received for the other services. Medicaid encourages billing the usual and customary fee required for the practice/clinic to render the service.

Q: If my patient had the fluoride varnish procedure at a dental office less than 60 days before coming to my office will my Medicaid claim be denied? Will it harm my patient if I repeat the varnish this soon?
A: No, your claim will not be denied if the procedure was done by a dental provider and no, it will not harm your patient. Your claim will be denied if the child had the fluoride varnish procedure by another primary care medical provider and it has been less than 60 days since the procedure.