

Fluoride Varnish Insurance Coverage Crosswalk

Payers are required to cover fluoride varnish application for all children 5 years and younger

Under the Patient Protection and Affordable Care Act, payers are required to cover preventive services, without cost-sharing, recommended by the US Preventive Services Task Force (USPSTF) and Bright Futures guidelines. The USPSTF recommended in 2014 that primary care clinicians apply fluoride varnish to the primary teeth of all infants and children starting at the age of primary tooth eruption. All children 5 years and younger deserve to have application of fluoride varnish fully covered, and for fluoride varnish application to be a covered benefit and separately paid service (ie, not considered incidental to the office visit).*

Payor	Is it covered?	Patient's cost per application	Who in the office can apply?	Ages				Additional Notes
				0-12 mo	13-24 mo	25 mo-3yo	4-5yo	
Aetna Commercial	Yes	0\$	Primary Care Provider (MD/DO, RN, PA, CNP, etc.)	x	x	x	x	Covers through age 11
Anthem Commercial	Yes	0\$	Primary Care Clinicians	x	x	x	x	
Cigna Commercial	Yes	0\$	PCP, PA, RN, any contracted medical provider	x	x	x	x	
Ohio Medicaid	Yes	0\$	Physician Physician Assistant APRN	x	x	x	x	In addition to the physical application of fluoride varnish, the procedure should include three components listed below*
Medical Mutual of Ohio	Yes	0\$	Primary Care Provider (MD/DO and mid-levels)	x	x	x	x	
United Commercial	Yes	0\$	Primary Care Clinicians	x	x	x	x	
UH Employee Health (All Plans)	Yes	0\$	Physician or other qualified health professional	x	x	x	x	Covered when ordered by a prescription

Exclusions

Pine nut allergy, or previous reaction to fluoride varnish.

Codes

CPT: 99188 (when applied by a non-dental practitioner (i.e. physician, physician assistant, APRN))

Best Practice

Apply fluoride varnish as part of the well visit to all patients at first tooth eruption every 180 days until age 6. To follow best patient care, always also refer patient to a pediatric dentist.

***Medicaid additional items to include in addition to the fluoride application:**

- 1) Oral assessment for the identification of obvious oral health problems and risk factors, which may be omitted if an oral assessment is conducted or has been conducted during an early and periodic screening, diagnostic, and treatment (EPSDT) visit (oral assessment must be done once per year)
- 2) Communication with the parent or guardian about the fluoride varnish procedure and proper oral health care for the child; and
- 3) If the child has obvious oral health problems and does not have a dental provider, referral to a dentist or county department of job and family services.

***References:**

- Patient Protection and Affordable Care Act, 42 USC §18001 (2010)
- Moyer, VA; US Prevention Services Task Force. Prevention of dental caries in children from birth through age 5 years: US Preventive Services Task Force recommendation statement. Pediatrics. 2014;133(6):1102–1111

Refer to the [incentive guide](#) for metric definition, target, and incentive information.