Main Objectives:
- Increase rates of dental varnishing.
- Primary Care Providers routinely look into the mouth using a risk assessment tool.
- Link children to a dental home.

Key Points

**What is Dental Varnishing?** Dental varnishing is a topical fluoride application that is applied to erupted teeth in the primary care setting. The visit also includes oral evaluation and parent/caregiver education. Physicians and nurses may apply the varnish.

**Why should Providers Varnish?** Access- The AAP recommends “every child should have a dental home established by 1 year of age.” The reality is that 89% of children in this age group see a physician at least once yearly while only 1.5% sees a dentist. This points to the importance of a risk assessment screen in primary care.

**Frequency?** Fluoride varnish can be applied to infants and toddlers teeth up to 6 times by age 3 ½ or through age 41 months. Application can take place during well or sick visits and at an optimal frequency of every 3-4 months (minimum of 60 day interval between procedures).

**Evidence?** Research shows that children having 4 or more varnishings before their 3rd birthday have the most benefit by reducing cavities and the need for dental fillings.

**Screening and Referrals**

Evidence of screening and appropriate dental referral are components of the Into the Mouths of Babes program. The following are approved screening tools:

- NC Priority Oral Risk Assessment and Referral Tool (PORRT)
- Bright Futures Oral Health Risk Assessment Tool

**Billing, Coding, and Reimbursement**

<table>
<thead>
<tr>
<th>Dental Varnish Visit</th>
<th>Reimbursement</th>
</tr>
</thead>
<tbody>
<tr>
<td>D0145: Oral Evaluation &amp; Counseling to Caregiver</td>
<td>$35.62</td>
</tr>
<tr>
<td>D1206: Application of Dental Varnish</td>
<td>$15.72</td>
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</tbody>
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The goal is to reduce the incidence of early childhood tooth decay in North Carolina by assessing for oral risk in primary care, applying varnish, and linking children to a dental home.