




ISSUE DATE September 28, 2023	EFFECTIVE DATE October 3, 2023	NUMBER 27-23-15
SUBJECT 2023 Pediatric Dental Periodicity Schedule Updates		BY  Sally A. Kozak, Deputy Secretary Office of Medical Assistance Programs

IMPORTANT REMINDER: All providers must revalidate the Medical Assistance (MA) enrollment of each service location every 5 years. Providers should log into PROMISE to check the revalidation dates of each service location and submit revalidation applications at least 60 days prior to the revalidation dates. Enrollment (revalidation) applications may be found at: <https://www.dhs.pa.gov/providers/Providers/Pages/PROMISE-Enrollment.aspx>.

PURPOSE:

The purpose of this bulletin is to notify dental providers that the Department of Human Services (Department) updated the Pediatric Dental Periodicity Schedule, titled “Recommendations for Preventive Pediatric Oral Health Care,” in accordance with the American Academy of Pediatric Dentistry’s (AAPD) recommendations.

SCOPE:

This bulletin applies to Medical Assistance (MA) enrolled dental providers, who render services to MA beneficiaries under 21 years of age. Providers rendering services to MA beneficiaries in the managed care delivery system should contact the appropriate managed care organization with any billing questions.

BACKGROUND:

The American Academy of Pediatrics and the AAPD develop and update pediatric dental guidelines related to children’s access to dental services. The AAPD recommends that a child have a first examination at the eruption of the first tooth and no later than 12 months of age. Examinations should be repeated every 6 months or as indicated by the child’s risk status/susceptibility to disease. The establishment of a child’s dental home is to begin no later than 12 months of age. Additional information may be found in the document titled, “Guideline

COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:

Fee-for-service provider service center: 1-800-537-8862

Visit the Office of Medical Assistance Programs website at:

<https://www.dhs.pa.gov/providers/Providers/Pages/Health%20Care%20for%20Providers/Contact-Information-for-Providers.aspx>.

on Periodicity of Examination, Preventive Dental Services, Anticipatory Guidance/Counseling, and Oral Treatment for Infants, Children, and Adolescents” by accessing the AAPD’s website link: http://www.aapd.org/media/Policies_Guidelines/G_Periodicity.pdf.

The Department supports the AAPD’s recommendations regarding establishment of a pediatric dental home and issues a Pediatric Dental Periodicity Schedule that incorporates the recommendations of the AAPD and provides guidance on preventive dental care to MA beneficiaries under 21 years of age. The Department’s Pediatric Dental Periodicity Schedule is based upon the recommendations of the AAPD; however, it is separate and unique from Pennsylvania’s Early and Periodic Screening, Diagnosis and Treatment Program Periodicity Schedule, which addresses oral health services that may be provided by non-dentists including public health dental hygiene practitioners and physicians.

The Department’s Pediatric Dental Periodicity Schedule provides preventive dental care and screening recommendations for MA beneficiaries under 21 years of age for the following areas:

- Clinical Oral Examination (Includes Anticipatory Guidance, i.e., information/counseling given to children and families to promote oral health)
- Prophylaxis/Topical Fluoride Treatment
- Radiographic Assessment
- Assessment for Pit and Fissure Sealants
- Caries Risk Assessment
- Tobacco Use and Cessation Counseling

The Department last updated the Pediatric Dental Periodicity Schedule in 2018 through issuance of MA Bulletin 27-18-09, titled “Updates to the Pediatric Dental Periodicity Schedule”, issued and effective July 3, 2018

(https://www.dhs.pa.gov/docs/Publications/Documents/FORMS%20AND%20PUBS%20MAP/c_276792.pdf).

DISCUSSION:

The Department is issuing the Pediatric Dental Periodicity Schedule that incorporates changes resulting from the annual review of guidance provided by the AAPD. The annual review ensures that Pennsylvania’s Pediatric Dental Periodicity Schedule reflects the current trends in pediatric dental care and provides clear guidance for dental providers enrolled in the MA Program who render dental services to MA beneficiaries under 21 years of age.

The Department revised Pennsylvania’s 2023 Pediatric Dental Periodicity Schedule to include the Tobacco Use and Cessation Counseling recommendations to ensure alignment with AAPD recommendations. Tobacco Use and Cessation Counseling recommendations include counseling for tobacco, vaping and substance misuse for children between six and twenty-one years of age. There are no coding updates associated with the Pediatric Dental Periodicity Schedule.

The Department also revised Pennsylvania's 2023 Pediatric Dental Periodicity Schedule to reflect that Pennsylvania now pays for topical fluoride treatment for beneficiaries up to the age of 21. The Department issued MA Bulletin 27-22-27, titled "2022 Medical Assistance Program Dental Fee Schedule Update", on September 7, 2022, which advised providers of an increase to the age limit for procedure code D1206, topical application of fluoride varnish and procedure code D1208, topical application of fluoride - excluding varnish, from "16 years of age or under only" to "Under 21 years of age only" (<https://www.dhs.pa.gov/docs/Publications/Documents/FORMS%20AND%20PUBS%20MAP/MAB2022090701.pdf>).

PROCEDURE:

Effective with dates of service on and after October 3, 2023, dental providers should use the attached Pediatric Dental Periodicity Schedule, titled "Recommendations for Preventive Pediatric Oral Health Care," as a guideline for providing preventive pediatric oral health care.

ATTACHMENT:

Pediatric Dental Periodicity Schedule Recommendations for Preventative Pediatric Oral Health Care, Effective October 3, 2023

PEDIATRIC DENTAL PERIODICITY SCHEDULE
RECOMMENDATIONS FOR PREVENTIVE PEDIATRIC ORAL HEALTH CARE
Commonwealth of Pennsylvania, Department of Human Services, Office of Medical Assistance Programs
(Adapted from the American Academy of Pediatric Dentistry)
Effective October 3, 2023

Periodicity Recommendations					
Age	Infancy 6-12 Months	Late infancy 12-24 Months	Preschool 2-6 Years	School Aged 6-12 Years	Adolescence 12-20 Years
Clinical Oral Examination: ** First examination at the eruption of the first tooth and no later than 12 months of age. Repeat every 6 months or as indicated by the child's risk status/ susceptibility to disease. Includes assessment of pathology and injury.	X	X	X	X	X
Prophylaxis/ Topical Fluoride Treatment Especially for children at high risk for caries and periodontal disease.	X	X	X	X	X
Radiographic Assessment Timing, selection, and frequency determined by child's history, clinical findings and susceptibility to oral disease.	X	X	X	X	X
Assessment for Pit and Fissure Sealants For caries-susceptible primary molars, permanent molars, premolars and anterior teeth with deep pits and fissures, place as soon as possible after the eruption.			X First permanent molars as soon as possible after eruption	X Premolars, first and second permanent molars as soon as possible after eruption	X Second permanent molars and premolars as soon as possible after eruption
Caries Risk Assessment Must be repeated regularly and frequently to maximize effectiveness.	X	X	X	X	X
Tobacco Use and Cessation Counseling Counseling for tobacco, vaping, and substance misuse				X	X

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****Anticipatory Guidance**

Appropriate discussion and counseling should be an integral part of each visit for care. Topics for counseling when appropriate should cover oral hygiene counseling (1), injury prevention counseling (2), dietary counseling (3), counseling for non-nutritive habits (4), fluoride supplementation (5,6), assessment of oral growth and development (7), counseling for speech/language development, assessment and treatment of developing malocclusion, counseling for intraoral/perioral piercing, substance abuse counseling, assessment and/or removal of third molars and referral for regular periodic dental care/transition to adult dental care.

1. Initially, responsibility of parent, as child matures, jointly with parent, when indicated, only child.
2. Initially play objects, pacifiers, car seats; when learning to walk; then with sports and routine playing, including the importance of mouthguards.
3. At every appointment, initially discuss appropriate feeding practices, then the role of refined carbohydrates and frequency of snacking in caries development and childhood obesity.
4. At first discuss need for additional sucking; digits vs. pacifiers; then the need to wean from habit before eruption of a permanent incisor.
5. Consider when systemic fluoride exposure is suboptimal.
6. Up to 21 years of age.
7. By clinical examination.