

# Meeting summary for TI 2.0 Information Session: Peds PCP Dental Varnish (04/18/2024)

*Generated by Zoom's AI Companion*

## Quick recap

Cameron led a discussion on the importance of dental health and the need for cultural sensitivity in dental care, with a focus on the TI program's milestones and requirements. There were also discussions about the coverage and reimbursement of dental varnish, the frequency of EPSDT visits, and the need for tracking service refusal and compliance. The meeting also addressed the need for collaboration with dental providers, the importance of random sample audits, and the need for further clarification on various policy issues.

## Next steps

- Cameron will confirm the policy on dental varnish reimbursement and clarify if additional insurance is required for providers.
- Cameron will investigate and provide information on whether dental varnish can be applied to patients up to 18 years old.
- Cameron will check the Year 3 milestone requirements to clarify if compliance is measured on a per-visit or overall basis.

## Summary

### TI Programs Milestone

Cameron, the program administrator for the TI programs, led a meeting focusing on the milestones specific to Pediatric primary care. Cameron outlined the format of the meeting, which included muting participants upon entry, prioritizing verbal questions, and recording the session for those unable to attend. The goal was to incorporate the discussion and notes into the milestone guidance and FAQs.

## Addressing Dental Care Inequities and Milestones

He noted that dental problems can lead to lost work and school hours. Cameron stressed the significance of connecting people to a dental provider who can serve their entire family, and highlighted the need for cultural sensitivity to maintain these relationships. He also pointed out disparities in dental care, especially among high need groups, and the impact of the COVID-19 pandemic on these inequities. Finally, he outlined the dental milestone as ensuring in-house dental varnish and regular dental check-ups for members.

## Year 2 Program Requirements and Guidelines

Cameron outlined the requirements for Year 2 of the program, emphasizing the need to identify a qualified provider consistent with AMPM410, who is trained in placing dental varnish. He clarified that qualified providers include MDs, PAs, DOs, and independent RNs, but not MAs and other support staff. Cameron also highlighted the importance of creating referral coordination protocols and documenting referrals into the child's chart for follow-up. Key dates, including document validation and application attestation, were provided, with the latter not available until Fall 2024. Virtual QIC Sessions were encouraged, and resources including training materials and milestones were made available.

## Dental Varnish Coverage and Training

Greg and Cameron discussed the requirements for providing dental varnish in a primary care setting. Cameron clarified that additional training could be completed online and that dental varnish was covered by the AHCCCS plan for children up to age 5. However, Sandhya stated that no additional insurance was needed and that the coverage only applied to every third visit or every six months, not if it was applied every two months. Cameron committed to confirming the exact policy details and also mentioned that the recent increase in coverage to age 5 might have been effective from the previous October. Veronica brought up the issue of missing billing codes, which Cameron confirmed were reimbursed.

## EPSDT Visits, Reimbursements, and Policies

Cameron and Veronica discussed the frequency of EPSDT visits and the corresponding reimbursements, with Veronica indicating it could be up to three times a year, but the policy recommends twice a year. Cameron agreed to clarify this issue and reference the policy. They also addressed questions regarding the duplication of services and dental varnish coverage for children over five years old. Cameron committed to further investigate these issues to ensure alignment with access policies.

## Service Refusal, Compliance, and Dental Help

Cameron discussed the importance of tracking service refusal and compliance with TI measures, and highlighted the need for random sample audits in the third year of the program. There was a discussion about the need for dental help information, with Cameron agreeing to explore collaboration opportunities with the MCOs. Mary Beth requested specific information on dental providers for members, which was agreed to be helpful. Questions regarding the reimbursement policy and the frequency of compliance checks in year three were addressed, with Cameron promising to provide clarification.

***AI-generated content may be inaccurate or misleading. Always check for accuracy.***

## Q&A Session Takeaways

- **How often can PCPs bill dental varnish?**
  - every three months from eruption of first tooth (at least 6 months) to 5 y.o at time of well-visit.
  - MCOs cannot be more restrictive than AHCCCS policy.
  - If all other criteria are met for reimbursement, there's no reason an MCO should deny reimbursement for applying varnish "late" (to yesterday's example- denied claim 7 months since last application when expected to apply every 6 months).
  - Ideally, members will continue going to the dentist for this service once a relationship is established. This requires patient awareness and comfortability with the dental provider (hence the education and referral pieces of this milestone and the CLAS standards/ health equity milestones). Unfortunately, AHCCCS members (by definition, low-income or living with other disabilities) can't always afford taking time off work (typically hourly wages) and/or finding transportation to take the child to well visits and dental visits.
- **Will the TI milestone apply to all peds members or align with AHCCCS policy?**
  - Option 2 (currently up to age 5)
- **Will the TI milestone require application once per year, or more often?**
  - TI aligns AHCCCS policy. So, we're looking for application at each well-visit (6 months to 5 y.o.).
  - If the member refuses the service, they're not counted towards your numerator or denominator in Y3.
- **Who is qualified to apply dental varnish for reimbursement in a primary care outpatient setting?**
  - Current policy allows the following AHCCCS provider types:
    - CN-clinical nurse
    - 08- MD-physician

- 18- Physician's assistant
    - 31- DO-physician osteopath
    - 46 - Independent RN
    - 90- QMB only provider
  - NOTE: the provider must complete required training, and MCOs likely require proof of training before reimbursing ([AMPM431](#)).
- **Why aren't MAs allowed?**
  - TI aligns with AHCCCS policy which currently does not include MAs.
  - It seems the jury is still out on this one:
    - Most stewards allow it as a best practice. [Others](#) do not.
    - The Dental board has refused to comment to date (they don't provide guidance on MA scope).
    - The Medical board has refused to comment to date (they don't provide guidance on dental services).
    - AHCCCS is renewing our request for guidance to ensure future policy aligns with state policy.
  - AHCCCS policy updates are effective each October, and it's too late (especially pending SME feedback) to amend the policy effective this coming October. Don't plan on MAs being added to the policy during the TI 2.0 process measure years (Y2 and Y3).
- **What services are covered, and which service code is used on the claim?**
  - Application of topical fluorides and fluoride varnish. The use of a prophylaxis paste containing fluoride or fluoride mouth rinses do not meet the AHCCCS standard for fluoride treatment.
  - CPT 99188
- **What if the dentist applies varnish in the followup appointment (i.e. less than 3 months after a TI participant applies the varnish)?**
  - Nothing special- both services are reimbursed as normal.
  - CDT code frequency will not infringe on CPT code frequency limits. This was intentional to maximize the opportunities for kids to receive fluoride varnish knowing we have high no show rates.
- **Is additional malpractice/ provider insurance needed for this new service?**
  - One of the attendees currently offering the service shared they did not need it.
  - AHCCCS can't provide guidance here- Good question for your insurance carrier.