


<b>ISSUE DATE</b>  July 3, 2018	<b>EFFECTIVE DATE</b>  July 3, 2018	<b>NUMBER</b>  27-18-09
<b>SUBJECT</b>  Updates to the Pediatric Dental Periodicity Schedule		<b>BY</b>   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:  
[http://www.dhs.pa.gov/provider/promise/enrollmentinformation/S\\_001994](http://www.dhs.pa.gov/provider/promise/enrollmentinformation/S_001994).

**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 in both the Fee-for-Service and managed care delivery systems.

**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 of age 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 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](http://www.aapd.org/media/Policies_Guidelines/G_Periodicity.pdf).

<p><b>COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:</b></p> <p>The appropriate toll free number for your provider type.</p> <p>Visit the Office of Medical Assistance Programs Web site at:  <a href="http://www.dhs.pa.gov/provider/healthcaremedicalassistance/index.htm">http://www.dhs.pa.gov/provider/healthcaremedicalassistance/index.htm</a>.</p>
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The Department supports the AAPD's recommendations regarding establishment of a pediatric dental home approach 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

#### **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 and issuance ensures that Pennsylvania's Pediatric Dental Periodicity Schedule reflects the current trends in pediatric dental care and provides clear guidance for dentists enrolled in the MA Program who render dental services to MA beneficiaries under 21 years of age. The Department revised Pennsylvania's 2018 Pediatric Dental Periodicity Schedule to update the Clinical Oral Examination and Caries Risk Assessment language, to ensure alignment with AAPD recommendations and clarity of information. There are no coding updates associated with the Pediatric Dental Periodicity Schedule.

#### **PROCEDURE:**

Effective with dates of service on and after July 3, 2018, 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

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 July 3, 2018

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 <b>every 6 months or as indicated by the child's</b> 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 Payment for topical fluoride treatment is limited to individuals up to at least 16 years of age
Radiographic Assessment Timing, selection, and frequency determined <b>by child's history, clinical findings and</b> 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

PEDIATRIC DENTAL PERIODICITY SCHEDULE  
RECOMMENDATIONS FOR PREVENTIVE PEDIATRIC ORAL HEALTH CARE  
Commonwealth of Pennsylvania, Department of Human Services, Office of Medical Assistance Programs  
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Effective July 3, 2018

\*\*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 at least 16 years.
7. By clinical examination.