

Denti-Cal Bulletin



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THE MEDI-CAL DENTAL CRITERIA FOR ORAL PROPHYLAXIS

This bulletin is intended to clarify existing Denti-Cal policy with respect to oral prophylaxis.

The Manual of Criteria for Medi-Cal Authorization (Dental Services) states: “Oral prophylaxis means the preventive dental procedure of scaling and polishing, which includes complete removal of calculus, soft deposits, plaque, stains, and smoothing of unattached tooth surfaces. The object of the treatment is the creation of an environment in which hard and soft tissues can be maintained in good health by the patient.”

“Unattached tooth surfaces” refers to those tooth surfaces that are not attached to soft tissue by means of a connective tissue attachment, i.e., the periodontal ligament, or an epithelial attachment. These unattached tooth surfaces comprise the “clinical crown.” Denti-Cal’s criteria for oral prophylaxis focus on the clinical outcome, i.e., the creation of an environment in which hard and soft tissues can be maintained in good health by the patient, and do not prescribe a specific method.

According to the American Academy of Pediatric Dentistry’s (AAPD) *Clinical Guideline on the Role of Dental Prophylaxis in Pediatric Dentistry*, among children, there are several indications for an oral prophylaxis, including:

- Removal of plaque, stain and calculus
- Elimination of factors that influence the build-up and retention of plaque
- Demonstration of proper oral hygiene methods to the patient/caregiver
- Facilitation of a thorough clinical examination
- Introduction of the child to dental procedures

The type of professional prophylaxis recommended is based on an individual patient’s risk assessment for caries and periodontal disease. A prophylaxis can be performed using gauze, cloth, toothbrush, or rubber cup on the incisors of an infant only. Once the molars have begun to erupt, manual or power toothbrush, rubber cup, and/or hand instruments, followed by site-specific flossing, may be used. (See American Academy of Pediatric Dentistry. *Clinical Guideline on the Role of Dental Prophylaxis in Pediatric Dentistry*. Pediatric Dentistry 2003;25(7):64-66. Available at www.aapd.org/members/referencemanual/pdfs/02-03/G_Prophylaxis.pdf.) The AAPD *Clinical Guideline* contains a table indicating the benefits of different prophylaxis options, as well as a decision tree indicating the prophylaxis options dictated by different degrees of risk for caries/periodontal disease.

There are increasing efforts in California and nationally to promote fluoride varnish applications for young children, who often cannot tolerate other topical fluoride formulations, by both

medical and dental providers. Currently, Denti-Cal will reimburse for a fluoride varnish application the same as any other topical fluoride application, however, Denti-Cal requires that a topical fluoride application be accompanied by a prophylaxis. Because not all young children have calculus or staining that would require the use of hand instruments and/or a rubber cup, a toothbrush may be all that is needed for plaque removal. Use of a toothbrush for this purpose is often referred to as a “toothbrush prophylaxis.” Therefore, until such time as Denti-Cal implements *Current Dental Terminology* (CDT) procedure codes and there is a separate code for topical fluoride application, Denti-Cal will accept any professionally accepted clinical technique, including a “toothbrush prophylaxis,” when used appropriately, that satisfies the Denti-Cal criteria for oral prophylaxis. Any such prophylaxis, whether provided as a separate procedure (Procedures 049 and 050) or in conjunction with a topical fluoride application (Procedures 061 and 062), may be billed to the Medi-Cal Dental Program as an oral prophylaxis.