



Oral Health & Fluoride Varnish Application in the Medical Setting

A webinar for practical integration

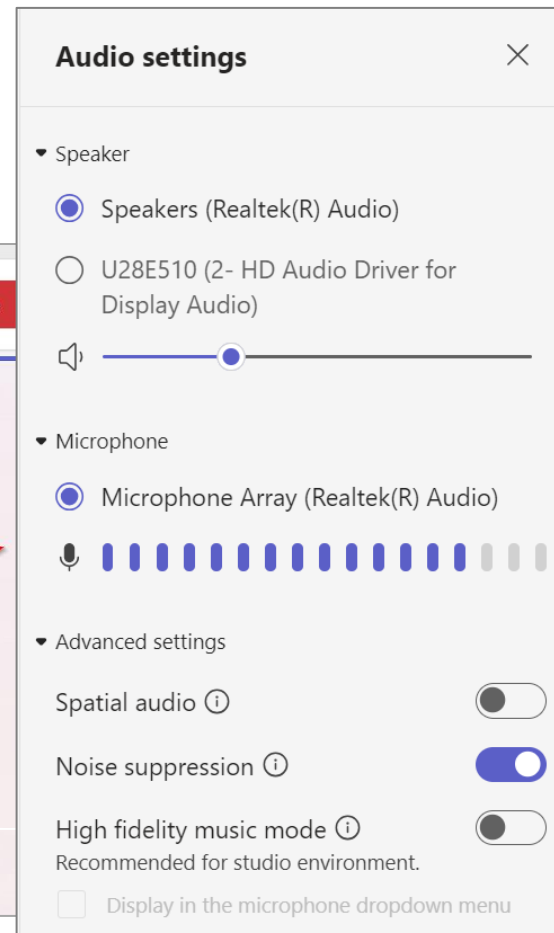
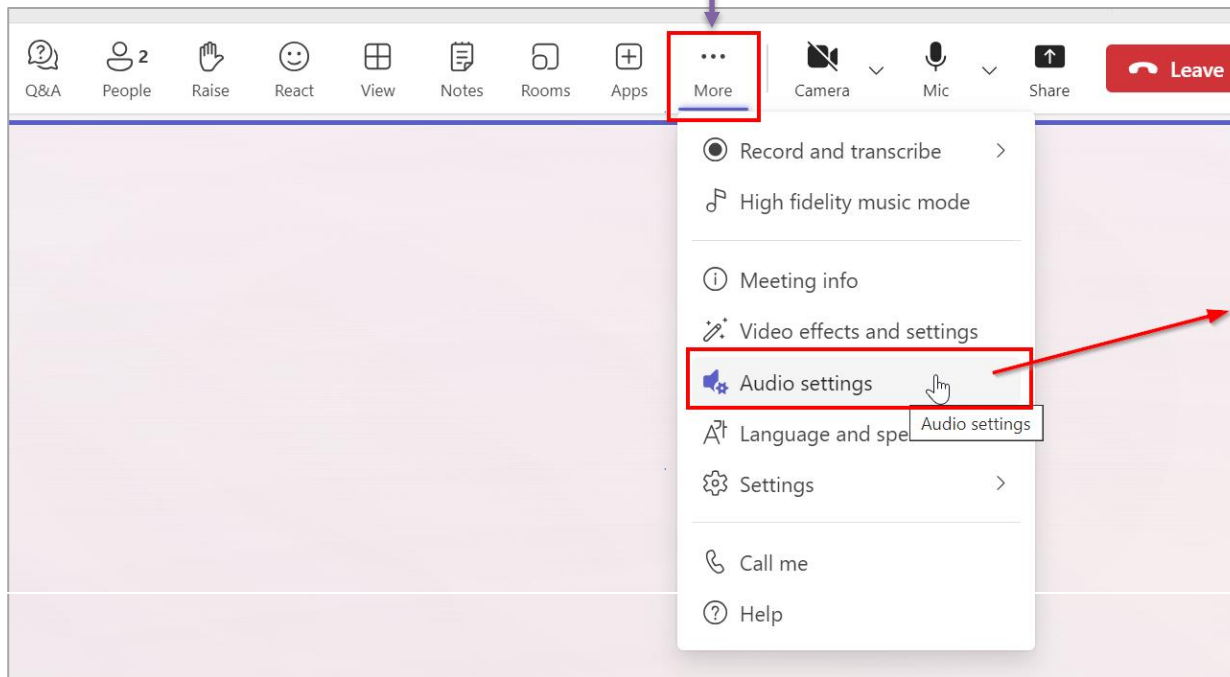


Oral Health Access
SANTA CRUZ COUNTY



HOUSEKEEPING

For audio troubleshooting





AGENDA

Learning Objectives

12:00-12:05	Welcome & Housekeeping <i>(Central California Alliance for Health)</i>
12:05-12:10	Who We Are, How We Got Here <i>(County of Santa Cruz, Local Oral Health Program)</i>
12:10-12:20	Importance & Safety of Fluoride Varnish Application <i>(Dientes)</i>
12:20-12:35	Best Practices, Standard of Care, Practical Workflows <i>(Santa Cruz Community Health)</i>
12:35-12:40	Coding, billing, and payment <i>(Central California Alliance for Health)</i>
12:40-12:45	Resources for getting started <i>(County of Santa Cruz, Local Oral Health Program)</i>
12:45-12:55	Q and A session <i>(All)</i>
12:55-1:00	Closing & Course Evaluation <i>(Central California Alliance for Health)</i>

TODAY'S HOSTS



Georgia Gordon, MHA HI
Quality Improvement Program Advisor II
Central Ca Alliance for Health



Monica Nicholas, MPH
Project Director, Oral Health Program
County of Santa Cruz, Public Health



TODAY'S PRESENTERS



Dr. Sepideh Taghvaei, DDS
Dentist, VP of Operations
Dientes Community Dental



Raelene Walker, MD, FAAP
Pediatric Medical Director
Santa Cruz Community
Health (SCCH)



Tera Mendoza, CPC
Senior Coding
Resource Specialist



The background of the slide is a teal-colored photograph of three healthcare professionals. On the left, a woman with blonde hair is gesturing with her hand near her forehead. In the center, a man with a mustache and a stethoscope around his neck is looking towards the right. On the right, another woman is partially visible, looking towards the man. A large, faint white stethoscope graphic is overlaid on the left side of the image.

Who We Are, How We Got Here

(Monica Nicholas, County of Santa Cruz Local Oral Health Program)

2015

Dientes grant-funded 1st Oral Health Needs Assessment

2016

Dientes founds OHA; Salud and other partners join and launch with 1st Oral Health Summit and roadshow

2017

County receives LOHP \$1M grant to facilitate OHA

2018

1st Oral Health Report Card Released

2021

2nd Oral Health Summit; 2nd Report Card released

2023

Delta awards Dientes and Salud SOHP Grant

2022

Dientes funds 2nd needs assessment; County receives 2nd \$1M grant for OHA

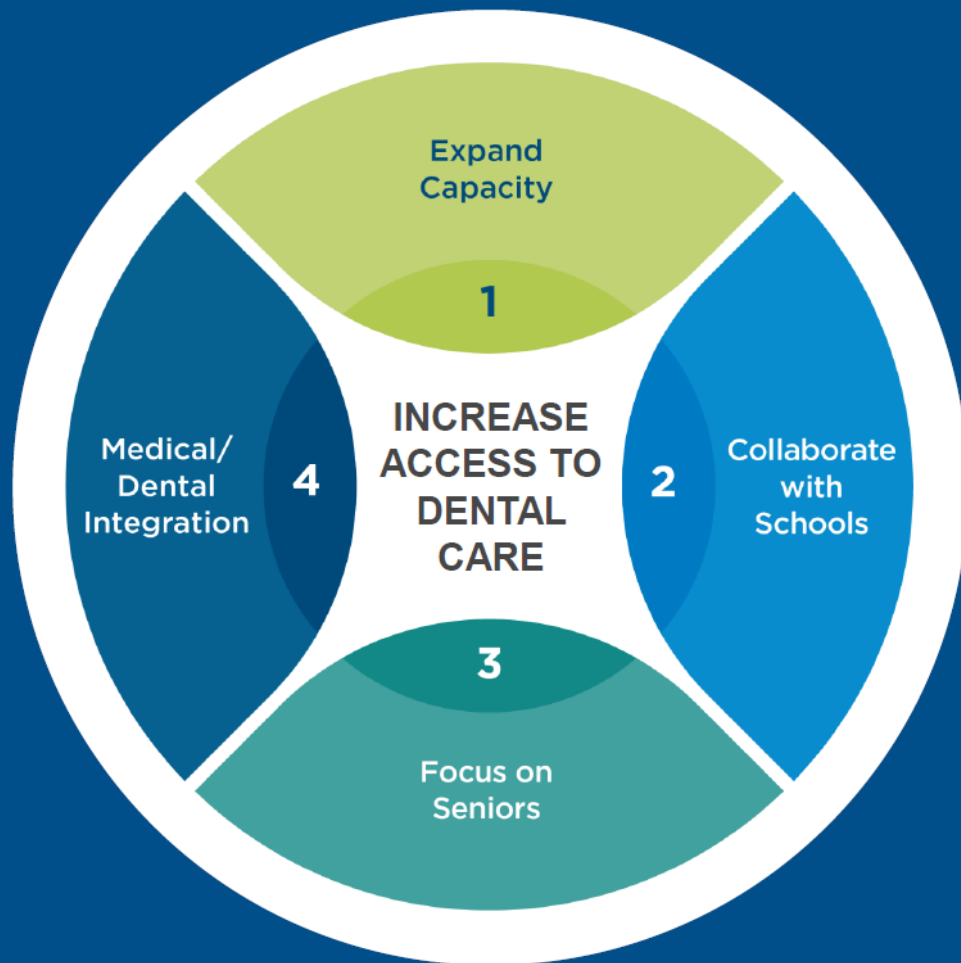
2024

OHA announces New Strategic Plan at 3rd Oral Health Summit



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2024 – 2028 Strategic Plan



History of Local Collaboration



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Salud Para La Gente
Working Together for a Healthy Community



Importance & Safety of Fluoride Varnish

(Dr. Sepi Taghvaei, Dientes Community Dental)



Dental Decay



Dental Decay

Most common chronic childhood disease

ALMOST COMPLETELY PREVENTABLE

Can lead to

- Pain and infection
- Difficulty eating, sleeping, speaking
- Inability to do well in school and missed school days
- Low self-esteem/ being teased or bullied



Low-income children and children of color



Are more at risk for dental caries due to lack of access to health care and other resources



Experience disproportionate health burdens due to systemic and institutionalized racism



Benefit from early intervention that alleviate some of the health burden they experience

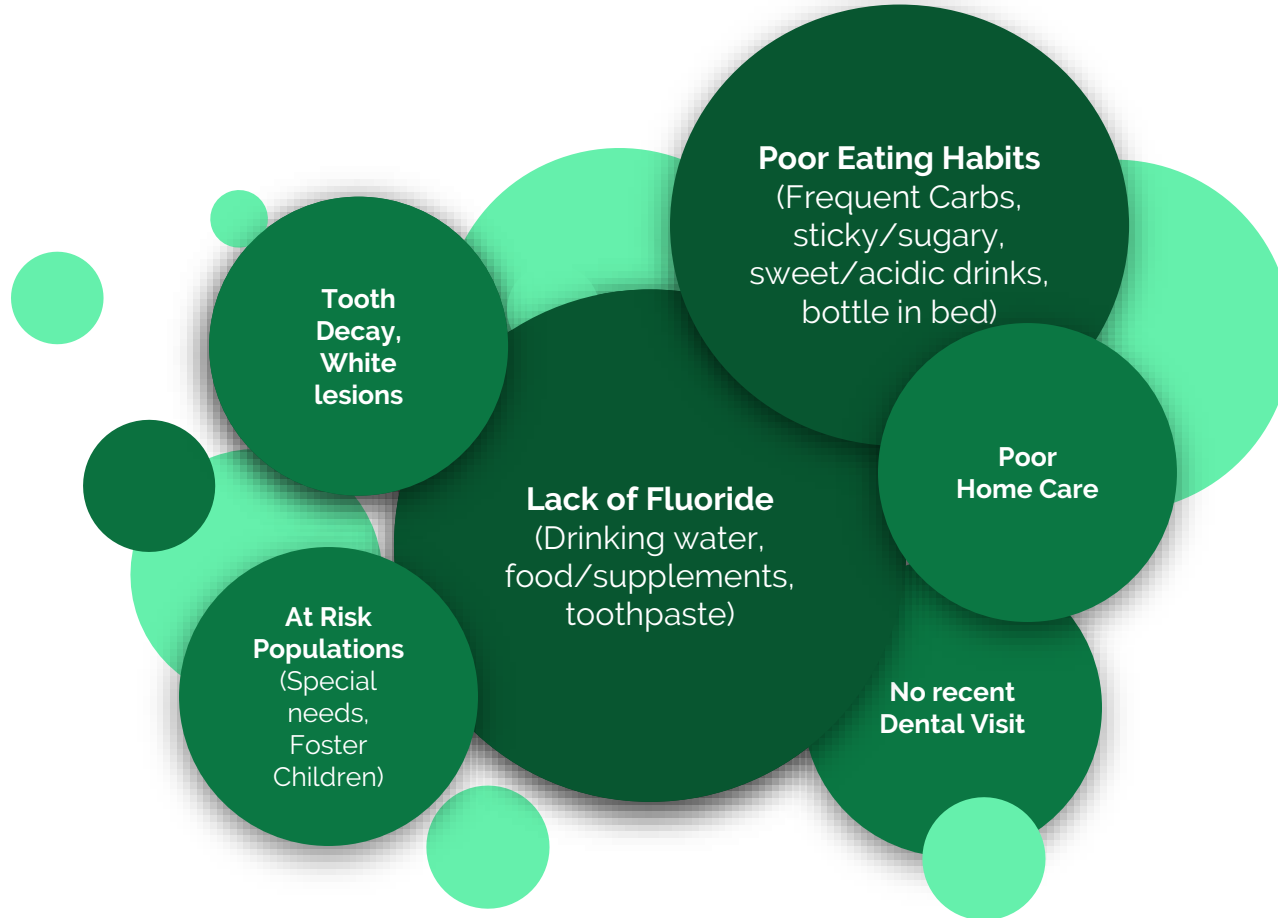


Oral Health Disparities

- In California, nearly 54 percent of kindergarten children and over 70 percent of third graders have a history of tooth decay (CDPH).
- Untreated cavities are almost **three times** more common in children aged 2 to 5 years living in low-income than in higher income households.
- **70%** of Mexican American children aged 6 to 9 years have had cavities in their primary (baby) or permanent teeth compared with **43%** of non-Hispanic White children.



Additional Risk Factors



How are Cavities Formed?

Cariogenic bacteria
metabolize sugars and
carbs and produce
acid

The acid
demineralizes the
adjacent enamel
crystal surface



How Does Fluoride Help?

FL helps re-mineralize demineralized enamel producing a structure that's more acid-resistant

Inhibits the process by which cariogenic bacteria metabolize carbohydrates to produce acid



We need help from our medical colleagues

1st Tooth 1st
Birthday dental
referrals

Applying FL
varnish at medical
well-child visits!



Fluoride Varnish at Medical Well-Child Visits

- **Safe and effective**
- Cannot contribute to fluorosis
- Can reduce rates of decay by up to 40%!
- Best practice (US Preventive Services Task Force and American Academy of Pediatrics.)
- Can be applied up to 4-5 times a year for high-risk children
- Can be applied by trained medical doctor, nurse, or MA
- Ensure child doesn't have any allergies (if they do, check ingredients of FV varnish)





Thin,
protective
coating!

Fluoride varnish application in the medical setting

Safe,
Quick,
Doesn't
hurt!



A large, light-colored graphic on the left side of the slide. It consists of a heart shape in the center, with a stethoscope's tubing looping around it. The tubing extends downwards and then curves back up to the heart, forming a continuous loop.

Best Practices, Standard of Care, & Practical Workflows

(Dr. Raelene Walker, Santa Cruz Community Health FQHC Clinic)

Why add Fluoride Varnish Application to a busy Pediatric Primary Care Setting?

- Recommended, Standard of Care
- Needed for prevention and Intervention
- Appropriate
- Feasible
- Reimbursable



Fluoride Varnish **Standard of Care**

- **The United States Preventive Services Task Force (USPSTF) recommended first in 2014 that primary care clinicians apply fluoride varnish to the teeth of all infants and children, starting with the appearance of the first primary tooth through age 5, at least every 6 months. USPSTF recommendations were reaffirmed in 2021.**
 - Recommendation applies to ALL children; no longer a risk-based recommendation
 - Assigned a “B” grade recommendation
- All children should receive a professional fluoride treatment at least every 6 months in the primary care medical home.
- Higher risk children should receive fluoride varnish application every 3months.
- Fluoride varnish application by a PCP is cost-savings intervention, especially in children 3 years and under. One study in Virginia found that, accounting for averted restoration cost, PCP fluoride varnish application would save \$75.32 per child, or a total population savings of almost \$2 million/year for VA Medicaid.
- Though helpful in reducing caries, varnish is not a replacement for appropriate diet, regular brushing, indicated systemic fluoride supplements, or routine dental care.



Initiating Fluoride Varnish Application

Step 1

Identify Participating Staff & Roles

- Develop policy & workflows
- Implement EMR & billing changes
- Standardize ordering & tracking
- Staff training

Step 2

Implement

- Choose initial pt visit & add sequentially (recommend 9-12 months)
 - Pt selection issues & documentation
 - Share benefits & purpose, train entire staff
- Go live! Start small, consider pilot

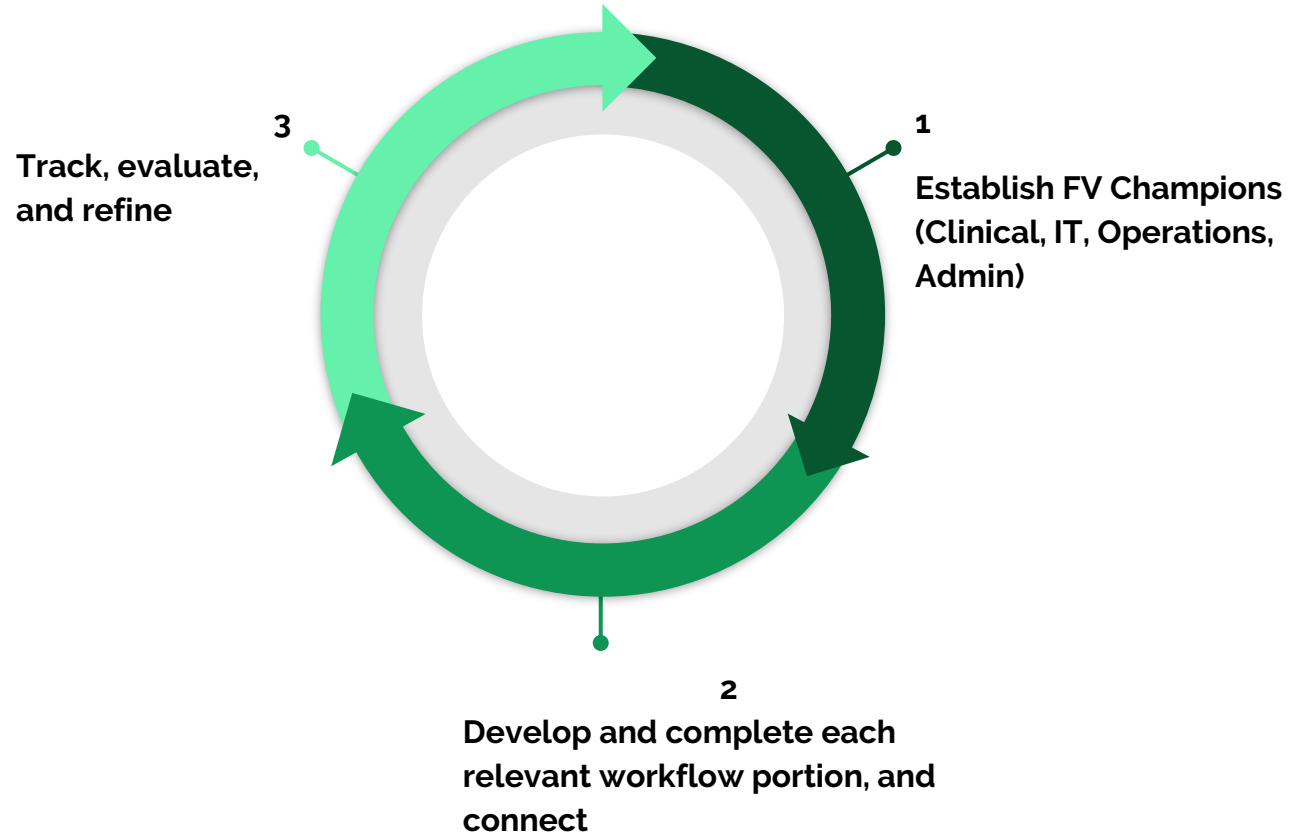
Step 3

Reassess, Refine, Reward

- In 2-3 months, re-evaluate
- Add new age group, recommend age 3
- Celebrate!



Develop Clinic Workflows



Epic Template Example *(Santa Cruz Community Health)*

Have you had a dental visit in the last three months, or will you have one within three months of today's visit? **Yes**

☒ Yes

Hearing & Vision

☐ NO: SA370 Complete Today

Have you had a dental visit in the last three months, or will you have one within three months of today's visit? NO: **SA370 Complete Today**

☐ Would you like to complete fluoride application today? SA370Yes/No

Have you had a dental visit in the last three months, or will you have one within three months of today's visit? NO: Would you like to complete fluoride application today? **SA370Yes/No**

☐ Yes

☐ No

Hearing & Vision



Potential Challenges to Implementation

- Logistics, concern about it being time consuming or difficult
 - Time consuming
 - Technically difficult
 - Patient selection, clinic admin duties, documentation, and EMR issues
 - How to fit in with overpacked well child visits
- Lack of provider support
- Lack of clinic/admin support
- Financial considerations



Recommendations for Success

- Decide to implement and pick a single starting point -- recommend 9-12 months Well Child visit
- Through behind the scenes prep:
 - IT (EMR, billing, care gaps)
 - Operations: clinic policy, create your workflows, admin support
 - Clinical: Trainings for clinical staff in addition to new hire training
- Communicate and connect
- Reassess, reassess, reassess
- Make it routine, and be flexible





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The background of the slide is a solid teal color. On the left side, there is a large, light-colored stethoscope graphic where the chest piece forms a heart shape. On the right side, there is a faint, semi-transparent image of a computer keyboard with a stethoscope resting on it.

Coding, Billing, and Payment

(Tera Mendoza, CPC, Certified Coding Resource Specialist, Central California Alliance for Health)

FLUORIDE VARNISH FOR CHILDREN

- CPT Code 99188
- At least one topical fluoride varnish application for members 6 months to 5 years
- Data collected from claims and provider submissions via data submission tool (DST)



Resources for Getting Started (County of Santa Cruz, Local Oral Health Program)

Digital Resource Toolkit

Oral Health Resource for your County, Local Oral Health Program (LOHP) Contacts

County	LOHP Project Director	Email
San Benito	Jennifer Frusetta	Jfrusetta@sanbenitocountyca.gov
Monterey	Luz Luquin	LuquinL@countyofmonterey.gov
Mariposa	Margarita King	margaritaking@mariposacounty.org
Merced	Natalie Perez	Natalie.Alfaro-Perez@countyofmerced.com
Santa Cruz	Monica Nicholas	Monica.Nicholas@santacruzcountyca.gov



Q&A



Course Evaluation



UPCOMING: Webinar - Lunch & Learn Series

The Alliance invites you to attend a Behavioral Health webinar on May 21st, 2025. Our in-house Behavioral Health Manager and Behavioral Health Medical Director will speak on important topics that impact providers and patients alike. The webinar will also include a Q&A about the upcoming transition from Carelon to the Alliance, as we begin managing these services in-house.

Key Topics

- AMM – Antidepressant Medication Management
- ADD – Follow-Up Care for Children Prescribed ADHD Medication
- SSD – Diabetes Screening for People with Schizophrenia or Bipolar Disorder who are using Antipsychotics Medication
- APM – Metabolic Monitoring for Children and Adolescents on Antipsychotics
- Referrals
- Continuity and Coordination of Care
- Best Practices

Details and registration

When: Wednesday **May 21st, 2025**, from noon to 1:00p.m.

Where: [Online via Microsoft Teams](#)

***The first clinic to register and attend will receive a complimentary lunch from the Alliance. ***

Register today by visiting our website, or contacting your Provider Relations Representative at 800-700-3874, ext. 5504.





Thank You!



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