

Networks for Oral Health Integration Within the Maternal and Child Health Safety Net

Colorado



Environmental Scan Results 2023

Executive Summary

This Environmental Scan seeks to understand the baseline facilitators and barriers to integrating oral health into primary care for pregnant people and children. The information summarized here was compiled from key stakeholders (primary care and health professional associations) and state and federal agencies (HRSA, Medicaid, public health, etc.).

Colorado is the 20th most populous state in the nation. In 2012, Colorado expanded Medicaid eligibility rules to include a \$1,500 dental benefit for adults. In 2023, the limitation was removed. The state has one of the most expansive dental hygiene scope of practice laws in the nation. Colorado ranks [18th out of 51](#) on access to and affordability of health care. Colorado does not currently have an oral health coalition.

There are [19](#) federally qualified health centers providing care to ~[644,316](#) patients annually at [243](#) delivery sites around the state. Thirty percent ([30%](#)) of health center patients are children. As of 2022, [4.6%](#) of Colorado children were uninsured, on par with the national rate of [5%](#). In the same year, [10.3%](#) of women of childbearing age were uninsured. Nearly [20%](#) of Colorado health center patients were uninsured.

Health disparities correlate with income, race, and the distribution of human and physical resources. Colorado residents who are underserved face multiple barriers to disease prevention and treatment options. These results specifically describe oral health services available to children and pregnant people in the community health center primary care setting.

Fluoride Varnish Application

- Children insured by Medicaid ages birth through 4 years can receive 2 fluoride varnish applications per year as part of an EPSDT well child visit if they are at low risk for caries and up to 4 applications per year if they are at high risk for caries. Children and adolescents ages 5 through 20 years can receive 3 fluoride varnish applications per year outside of a well child visit regardless of risk level. Medical and dental providers are encouraged to collaborate to avoid duplication.
- Non-dental providers who apply fluoride varnish are required to complete an oral health training course, either [Cavity Free at Three](#) or [Smiles for Life: A National Oral Health Curriculum](#), and to keep proof of completion on file in case of audit.

Fluoride Varnish Billing

The following non-dental providers can provide and be reimbursed for fluoride varnish application:

- Physicians
- Physician assistants
- Nurse practitioners
- Nurses and medical assistants can apply fluoride varnish if physician delegates the task and codes directly.
- Midwives have prescriptive authority and can bill for oral health services but do not typically see older infants with dentition.
- In federally qualified health centers (FQHCs) fluoride varnish application must be itemized in the well-child visit, but reimbursement is part of the FQHC's negotiated encounter rate.

Non-dental providers in non-FQHC settings can receive fee-for-service reimbursement from Medicaid and CHP+ for fluoride varnish application.

Dental Hygienist, Therapist & Assistant Scope of Practice

- Dental hygienists can bill Medicaid directly, although certain services require collaboration with a dentist.
- Dental hygienists can practice independently in Colorado and can treatment plan and apply silver diamine fluoride. They can apply atraumatic restorative treatments (D2941) when treatment is planned by a dentist.
- Dental assistants can perform a risk assessment and apply fluoride varnish under dentist supervision.
- In June 2022, Colorado enacted dental therapy legislation, which took effect in January 2023.

Teledentistry

- Dentists are the only health professionals permitted to bill Medicaid and receive payment for synchronous teledentistry visits.
- Synchronous teledentistry visits with dentists are limited to emergency visits only.

Community Water Fluoridation

- As of 2020, 75% of the population was on community water systems receiving fluoridated water, which is on par with the national average of 73%.

Strengths

- Expand Medicaid payment for dentist and dental hygiene teledentistry visits to include non-emergency care.
- All preventive oral health coding and training requirements are easily located online and easy to understand.
- Prenatal Plus is a Medicaid program that offers medical and dental services for pregnant women.
- Medicaid allows patients to be seen for three different services (behavioral, dental, medical) in one visit and permits an FQHC or other medical facility to bill for all three same-day visits.
- There are Medicaid managed care incentives (key performance indicators) to motivate both dental and medical professionals to prioritize patient oral health.

Opportunities

- Re-establish a statewide oral health coalition to include medical, dental, public health, payor, and other relevant stakeholders.
- Incentivize and promote school dental screenings.
- Update Medicaid benefit to provide children ages 0 through 4 years at high risk for caries 4 fluoride varnish applications per year outside of an EPSDT well child visit (regulatory).
- Allow healthcare providers to assess and document caries risk assessment with their preferred caries risk assessment tool (regulatory).
- Expand dental hygienist practice act to allow treatment planning of minimally invasive restorations including atraumatic restorative treatments (D2941).
- Establish a mechanism for payment to medical professionals applying silver diamine fluoride (Code 0792T).

Resources

- [*Allowable and Prohibited Duties for Dental Assistants: Colorado*](#)
- [*Cavity-Free at Three*](#)
- [*Dental Hygiene Scope of Practice*](#)
- [*Variation in Dental Hygiene Scope of Practice by State*](#)
- [*Welcome, Health First Colorado Dental Program Providers*](#)
- [*Smiles for Life: A National Oral Health Curriculum*](#)

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NOHI Project

To learn more about the NOHI project, please visit www.mchoralhealth.org/pdfs/nohi-overview-profiles.pdf

Disclaimer

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