PHYSICIAN BULLETIN

PHYSICIAN, PHYSICIAN ASSISTANT AND NURSE PRACTITIONER SERVICES

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BILLING FOR PHYSICIAN ASSISTANT SERVICES

Effective for dates of service on or after November 1, 2008, physician assistant services must be billed by a supervising physician using modifier AR (Physician provider services in a physician scarcity area/physician assistant services). This will allow the MO HealthNet Division (MHD) to track the volume and type of services provided by physician assistants.

Supervising physicians must be present a minimum of 66% of the clinic's hours for practice supervision and collaboration, and physician assistants must practice within 30 miles of the supervising physician. The supervising physician must be readily available in person or via telecommunication during the time the physician assistant is providing patient care.

PHYSICIAN ASSISTANT SERVICES IN THE HOSPITAL SETTING

Effective for dates of service on or after November 1, 2008, physician assistant services will be reimbursed when provided in a hospital setting. The services must be billed using modifier AR by a supervising physician. The supervising physician must be in the same facility 66% of the time for practice supervision and collaboration, and physician assistants must practice within 30 miles of the supervising physician. The supervising physician must be readily available in person or via telecommunication during the time the physician assistant is providing patient care.
BILLING FOR NURSE PRACTITIONERS

Effective for dates of service on or after November 1, 2008, nurse practitioner services billed by a supervising physician must be billed using modifier SA (Nurse practitioner rendering services in collaboration with a physician). This will allow the MO HealthNet Division (MHD) to track the volume and type of services provided by nurse practitioners billed by a supervising physician. Nurse practitioner services billed by a supervising physician are only billable when there is direct personal supervision by the physician. Direct personal supervision does not mean that the physician must be present in the same room with the auxiliary personnel. However, the physician must be present in the office suite and immediately available to provide assistance and direction throughout the time the nurse practitioner is performing the service.

Nurse practitioners may enroll as providers with MHD. The policy above is only for those nurse practitioner services billed by a supervising physician.

NURSE PRACTITIONER SERVICES IN THE HOSPITAL SETTING

Effective for dates of service on or after November 1, 2008, nurse practitioner services being billed by a supervising physician will be reimbursed when provided in a hospital setting. The services must be billed using modifier SA by the supervising physician. The supervision guidelines are similar to those in the office setting. The supervising physician must be on the hospital grounds and immediately available to provide assistance and direction throughout the time the nurse practitioner is performing the service.

Nurse practitioners may enroll as providers with MHD. The policy above is only for those nurse practitioner services billed by a supervising physician.

TOPICAL FLUORIDE VARNISH SERVICES

Topical fluoride varnish is a covered service as outlined in the Dental Provider Manual. Dentists may apply topical fluoride varnish to MO HealthNet participants ages 0-20.

Effective for dates of service on or after November 1, 2008, physicians and nurse practitioners may apply topical fluoride varnish (D1206) for MO HealthNet participants who are under six (6) years of age when the need is identified through an Early Periodic Screening, Diagnostic, and Treatment (EPSDT) visit. Application of the topical fluoride varnish is a preventive measure for early caries in children. The application of topical fluoride varnish is completed in addition to the EPSDT screening which includes caries screening, recording of notable findings within the oral cavity, preventive oral health and dietary counseling, and administration of topical fluoride varnish.

The maximum reimbursement allowed for the application of topical fluoride varnish (D1206) is $12.71 per application.

Coverage is limited to one (1) topical fluoride varnish application for each participant, two (2) times per rolling year, per provider.
TOPICAL FLUORIDE VARNISH APPLICATION TRAINING

Training in the application of topical fluoride varnish is required in order for physicians or nurse practitioners to bill MO HealthNet. Each physician or nurse practitioner must maintain documentation to support their completed training. This completed training documentation must be made available upon request by the MO HealthNet Division. Training is available online through the Department of Health and Senior Services, Division of Community and Public Health.

Attached is a Topical Fluoride Varnish Guide which contains an application protocol, parent information sheet, and post-application instructions. This guide is contained in Attachment A.

BILLING TOPICAL FLUORIDE VARNISH

Physicians and nurse practitioners will continue to bill services on the CMS-1500 claim form or the appropriate electronic claim form. To bill MO HealthNet for topical fluoride varnish, enter procedure code D1206 in field 24.D on the CMS-1500 or the appropriate field on an electronic claim form. D1206 may be billed in conjunction with an office visit procedure code or an EPSDT screening procedure code, whichever is appropriate. All remaining claim filing instructions are unchanged. Please refer to Section 15 of the Physician Provider Manual for instructions on completing the CMS-1500 claim form.

TOPICAL FLUORIDE VARNISH ORDERING INFORMATION

While your facility may use the manufacturer of your choice, to assist your office listed below are several sources for obtaining topical fluoride varnish:

Product: AllSolutions (5% NaF in a natural resin) Available in a unit-dose with an applicator
Company Name: Dentsply Professional
Phone: (800) 989-8825
Web site: www.dentsply.com/

Product: Durafluor (5% NaF in a natural colophonium resin)
Company Name: Medicom
Phone: (800) 361-2862
Web site: www.medicom.com/home.ch2

Product: Duraphat (5% NaF in a natural colophonium resin)
Company Name: Colgate Oral Pharmaceuticals
Phone: (800) 2-COLGATE ((800) 225-3756)

Product: Fluor-Protector (0.1% difluorosilane in a polyurethane base)
Company Name: Ivoclar North America-Vivadent
Phone: (800) 533-6825
www.ivoclarvivadent.us.com/
**Product:** Fluor-Protector (5%) NaFin a natural colophonium resin) Available in a unit-dose with an applicator

**Company Name:** Medical Products Laboratories, Inc.

**Phone:** (800) 523-0191

**Web site:** [www.medicalproductslaboratories.com/](http://www.medicalproductslaboratories.com/)

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**Provider Bulletins** are available on the MO HealthNet Division (MHD) (Formerly the Division of Medical Services) Web site at [http://dss.mo.gov/mhd/providers/pages/bulletins.htm](http://dss.mo.gov/mhd/providers/pages/bulletins.htm). Bulletins will remain on the Provider Bulletins page only until incorporated into the provider manuals as appropriate, then moved to the Archived Bulletin page.

**MO HealthNet News:** Providers and other interested parties are urged to go to the MHD Web site at [http://dss.missouri.gov/mhd/global/pages/mednewssubscribe.htm](http://dss.missouri.gov/mhd/global/pages/mednewssubscribe.htm) to subscribe to the electronic mailing list to receive automatic notifications of provider bulletins, provider manual updates, and other official MO HealthNet communications via E-mail.

**MO HealthNet Managed Care:** The information contained in this bulletin applies to coverage for:

- MO HealthNet Fee-for-Service
- Services not included in MO HealthNet Managed Care

Questions regarding MO HealthNet Managed Care benefits should be directed to the patient’s MO HealthNet Managed Care health plan. Before delivering a service, please check the patient’s eligibility status by swiping the red MO HealthNet card or by calling the Interactive Voice Response (IVR) System at 573-635-8908 and using Option One for the red or white card.

**Provider Communications Hotline**

573-751-2896
Program Policy Information

Description:  Topical Application of Fluoride Varnish

Effective Date:  November 1, 2008

Age Group:  MO HealthNet participants from birth through five (5) years of age

Provider Type:  Physicians/Nurse Practitioners

Covered CPT Codes:  D1206 Topical Application of Fluoride Varnish

Reimbursement:  $12.71

Limitations of Coverage:  D1206 will be allowed two (2) times per rolling year, per provider

Questions:  For more information concerning this policy, contact a MO HealthNet Specialist at (573) 751-2896
Topical Fluoride Varnish Application Guide

Purpose
The purpose of applying topical fluoride varnish is to retard, arrest, and reverse the process of cavity formation. Topical fluoride varnish is a thin coating of resin applied to the tooth surface to protect it from decay.

Advantages
- does not require special dental equipment,
- does not require a professional dental cleaning prior to application,
- easy to apply,
- dries immediately upon contact with saliva,
- safe and well tolerated by infants, young children, and individuals with special needs,
- inexpensive,
- requires minimal training, and
- MO HealthNet will reimburse physicians and nurse practitioners $12.71 per application.

Indications
Infants and children with a moderate or high risk of developing cavities. A list of some activities that could contribute to a child being considered at risk are:
- has had cavities in the past or has white spot lesions and stained fissures,
- continues to use the bottle past 1 year of age or sleeps with a bottle containing liquids other than water,
- breastfeeds on demand at night,
- has a developmental disability,
- chronically uses high sugar oral medications,
- has family members with a history of caries, or
- engages in prolonged or ad lib use throughout the day of a bottle or sippy cup containing liquids other than water.

Contraindications
Children with a low risk of cavity formation who consume optimally fluoridated water or children who receive routine fluoride treatments through a dental office.

Topical Fluoride Varnish Application Procedure
Pre-application instructions:
- Remind the parent/guardian to give the child something to eat and drink before coming to receive a fluoride application.
- Advise the parent/guardian that the child’s teeth may become discolored temporarily as topical fluoride varnish has a yellow-ish tinge. Tell the parent/guardian that the yellow-ish color can be brushed off the following day.

You will need to have:
- disposable gloves,
- gauze sponges (2x2),
- topical fluoride varnish,
- small disposable fluoride applicator, and
- paper towels or disposable bibs to place under the child's head (optional).
**Position the child:**
- For an infant – place the child on the parent's/guardian's lap with the child's head on the provider's knees and the child's legs around the parent's/guardian's waist. Position yourself knee-to-knee with the parent/guardian and treat the child from behind the head or, place the infant on an exam table and work from behind the head.
- For a young child, place the child in a prone or sitting position and work from above the head as with an infant.
- For older children, adapt a method that works best for you.

**The application:**
- Using gentle finger pressure, open the child's mouth.
- Remove excess saliva with a gauze sponge.
- Use your fingers and sponges to isolate the dry teeth and keep them dry. You will usually be able to isolate a quadrant of teeth at a time, but may have to work with fewer teeth in some children. Infants are easiest because they have only anterior teeth.
- Apply a thin layer of the topical fluoride varnish to all surfaces of the teeth. Avoid applying the topical fluoride varnish on large open cavities where there may be pulp involvement.
- Once the topical fluoride varnish is applied, you need not worry about moisture (saliva) contamination. The topical fluoride varnish sets quickly.

**Post-application instructions:**
- Eat a soft, non-abrasive diet for the rest of the day.
- Do not brush or floss until the next morning.
- Inform the parent/guardian that it is normal for the teeth to appear dull and yellow until they are brushed.
- Advise the parent/guardian that regular dental visits should begin by six (6) months to one (1) year of age. Refer the child to either a pediatric or general dentist for comprehensive care in addition to the topical fluoride varnishes given in the physician's office.

**To keep the topical fluoride varnish on the teeth as long as possible and to achieve the best result:**
- Your child should eat soft foods for the rest of the day.
- Teeth should not be cleaned until tomorrow morning.
- In the morning, clean the mouth and teeth as usual.
Information for Parents/Guardians about Topical Fluoride Varnish

Why do we recommend putting topical fluoride varnish on children’s teeth?
Tooth decay is one of the most common preventable diseases seen in children. Children as young as 12-18 months can get cavities. Cavities in baby teeth can cause pain and even prevent children from being able to eat, speak, sleep and learn properly. Children do not lose all their baby teeth until they are about 12 to 13 years old.

What is topical fluoride varnish?
Topical fluoride varnish is a protective coating painted on teeth to help prevent new cavities and to help stop cavities that have already started.

Is topical fluoride varnish safe?
Yes, topical fluoride varnish can be used on babies from the time they have their first teeth. Only a very small amount of topical fluoride varnish is used. Topical fluoride varnish is approved by the FDA and is endorsed by the American Dental Association.

How is it put on the teeth?
The topical fluoride varnish is painted on the teeth. It is quick and easy to apply and does not have a bad taste. There is no pain, but your child may cry just because babies and children don’t like having things put in their mouths especially by people they don’t know! Your child’s teeth may be yellow after the topical fluoride varnish is painted on, but the yellow color will come off when you brush your child’s teeth tomorrow.

Post-application instructions:
• Eat a soft, non-abrasive diet for the rest of the day.
• Do not brush or floss until the next morning.
• Teeth may appear dull and yellow until they are brushed.
• Regular dental visits should begin by six (6) months to one (1) year of age.

The American Academy of Pediatrics, the American Academy of Pediatric Dentist and The American Dental Association all advise that children see a dentist by the age of one year. Make your child an appointment with your General or Pediatric Dentist today.

Baby Teeth are Important!
Remember, do not clean your child's teeth today and do not give them hot, hard or sticky foods. Start cleaning your child's teeth tomorrow morning. The yellow color will come off when you brush your child's teeth.