

Dental Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) --Chairside Guide--

1

Diagnosis

ORAL EVALUATION

- Position the child
Infants and Toddlers: knee-to-knee position with parent/caregiver
Coding (only one can be used per visit):
 - D0145- infants & toddlers <3years
 - D0150- initial evaluation ≥ 3 years
 - D0120- recall evaluation ≥ 3 years

RISK ASSESSMENT

Coding:

- **D0425**- caries susceptibility test
Document risk on claim form
- D0601- low risk
- D0602- moderate risk
- D0603- high risk

2

Preventive Care

Coding:

- D1120- prophylaxis
- D1206- fluoride varnish

3

Anticipatory guidance to caregiver

Coding:

- **D1310**-oral hygiene instruction
- **D1330**-nurtitional counseling

4

Set patient goals related to:

Recall appointment periodicity

- High-risk children may have 6 visits per year

Nutrition

- Reducing frequency of sipping

Sharing behaviors

- Parents understand their dental health impacts child dental health and are counseled to avoid sharing behaviors

****Bolted** codes are reimbursable through MT Medicaid for trained providers.

Find the latest fee schedule at
<https://medicaidprovider.mt.gov/enduserproposedfs>