

# COLORADO MEDICAID BILLING REFERENCE

## Dental Services for Children



### Dental Providers <sup>1</sup>

#### Billing Ages 0-2

<b>D0145</b> Oral evaluation, counseling with primary caregiver of child < 3	<b>\$30.87</b>
<b>D1206</b> Topical Fluoride Varnish	<b>\$16.24</b>

- ◆ Document formal [Caries Risk Assessment](#) in patient chart
- ◆ Reimbursable twice per year, two additional per year for high caries risk children

#### Billing Ages 3-4

<b>D0190</b> Dental Screening	<b>\$16.13</b>
<b>D1206</b> Topical Fluoride Varnish	<b>\$16.24</b>

- ◆ Document formal [Caries Risk Assessment](#) in patient chart
- ◆ Reimbursable twice per year, two additional per year for high caries risk children

#### Billing Ages 5-20

<b>D0190</b> Dental Screening	<b>\$16.13</b>
<b>D1206</b> Topical Fluoride Varnish	<b>\$16.24</b>

- ◆ Reimbursable a maximum three times, regardless of risk

#### High Caries Risk Documentation

- ◆ To submit a “High Risk” claim: write the words “HIGH RISK” followed by the qualifying criteria in the notes field in the Optional Information section of the claim entry screen on the DentaQuest Provider Portal

<sup>1</sup> For [Federally Qualified Health Centers \(FQHCs\)](#) and [Rural Health Centers](#), dental HCPCS should be included on the 837I electronic claim form with the [well child visit HCPC and ICD 10 code](#). Use appropriate revenue code.

