



**Department
of Health**

NEW YORK STATE ORAL HEALTH COALITION

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OCTOBER 16, 2025 | WEBEX

GREETINGS/INTRODUCTION



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AGENDA

- Greetings/Introduction
- NYS Medicaid Dental Program Mission
- Updates to the NYS Medicaid Dental Program
- 2025 NYS Prevention Agenda
- NYS Quality Strategy

NYS MEDICAID DENTAL PROGRAM MISSION



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NYS MEDICAID DENTAL PROGRAM MISSION

To provide access to essential, high quality dental care for all NYS Medicaid members by:

- Working to expand access and coverage
- Continue to improve the quality of services, with a focus on prevention
- Reduce health inequities

UPDATES TO THE NYS MEDICAID DENTAL PROGRAM



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NYS DOH MEDICAID DENTAL BENEFITS WEBSITE

Medicaid Dental Benefits website

- Member Benefits
 - Medicaid Dental Services
 - Importance of Oral Health
 - New Dental Benefit Highlights
 - How to Locate a Dental Provider
 - Updated “Dental Clinics that Accept Medicaid” list
- Provider Information
 - Provider Resources
 - New Dental Benefit Highlights

NEW YORK STATE MEDICAID DENTAL POLICY AND PROCEDURE CODE MANUAL

- New for 2025 Section
- New additions to manual highlighted in purple
- Hyperlinks
- Prior Approval checklist
- Appendix outlines:
 - Resources and additional benefits that apply to the Intellectual and Developmental Disability (IDD) population
 - Illustrations of dental implant components and malocclusion orthodontics

D1354 – CARIES ARRESTING MEDICAMENT (SDF)

- Beginning January 1, 2025, NYS Medicaid removed age restrictions for placement of D1354 (Silver Diamine Fluoride – SDF)
- Clinical Criteria for the use of Silver Diamine Fluoride (page 32 - [New York State Medicaid Dental Policy and Procedure Code Manual](#)) :
 - Stabilize **non-symptomatic** teeth with active carious lesions and no pulpal exposure
 - Moderate to high caries risk (Xerostomia, Severe Early Childhood Caries)
 - Treatment challenged by behavioral management
 - Difficult to treat carious lesions
- [ADA Guidance](#)
- Utilization

ECONSULTS IN THE DENTAL SETTING

- Effective January 1, 2025 providers can be reimbursed for **eConsults** in the dental setting utilizing Current Dental Terminology (CDT) code D9311
- Electronic consultations or interprofessional consultations between a dentist and another medical health care professional (Physician, physician assistant, nurse practitioner, midwife)
- Response to eConsult request should occur within 3 business days and include recommendations and rationale that warrant a re-consult or referral.
- Requesting or consultative dentist to spend **minimum of 15 minutes of dental consultative time**. Cannot be used for purpose of arranging a referral for in person visit .
- May be used for patients with or without an existing relationship with the consultative provider
- Complete record of the eConsult must be documented in the patient chart. Both treating/requesting provider and the consultative provider can bill for the eConsult. This includes any consultation required for dental services that are integral to the clinical success of a primary medical service
- See page 69 of the [New York State Medicaid Dental Policy and Procedure Code Manual](#) for further information

2025 MEDICAID UPDATES

- **Medicaid Update on Homeless Care Services** effective date February 1, 2025
 - Reimbursement
 - Eligible Providers
 - Covered Services
 - Reimbursement Conditions
- Please refer to the [NYS December 2024 Medicaid Update Volume 40-13](#) for more information

2025 MEDICAID UPDATES, CONTINUED

- [April 2025 Medicaid Update](#) - Topical Fluoride Application: Expansion of Provider Types
 - Effective immediately, an amendment to the Education Law permits registered dental assistants (RDAs) and licensed practical nurses (LPNs) to apply topical fluoride varnish
 - Dental settings: Current Dental Terminology (CDT) Code D1206 Topical Application of Fluoride. Reimbursable to dentists. Under the new expansion rule, RDA's can apply fluoride varnish under the direct supervision of a licensed dentist
 - Non-dental settings: Current Procedure Terminology (CPT) code 99188: Reimbursable to physicians and nurse practitioners. In addition to RN's and PA's, LPN's can also apply fluoride varnish



TELEHEALTH POLICY MANUAL JULY 2025



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Billing Guidelines for Teledentistry Services:

- Teledentistry allows dentists and dental hygienists to deliver care from a distance; this includes performing evaluations and delivering services within scope of practice, using either synchronous or asynchronous means.
- When services are provided via teledentistry (audio-visual telehealth) to a member located at an originating site, the servicing provider should bill for the telemedicine encounter as if the provider saw the member in-person using the appropriate billing rules for services rendered. Required accompanying codes “D9995” or “D9996” will identify the encounter as **synchronous** or **asynchronous**.
- Dental telehealth services shall adhere to the standards of appropriate patient care required in other dental health care settings, including but not limited to appropriate patient examination and review of the medical and dental history of the patient.
- More information on billing for teledental services can be found on pages 15-17 in the [NYS Medicaid Telehealth Policy Manual](#).

2025 NYS PREVENTION AGENDA



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2025 – 2030 PREVENTION AGENDA

- Six-year initiative launched in July 2025, aimed at improving the health status of individuals in NY and reducing health disparities through a strong emphasis on **prevention**.
- Outlines 24 key priorities to address health conditions, behaviors, and systemic issues such as poverty, education, housing, and access to quality healthcare – issues crucial to address for reducing health disparities. These 24 priorities were grouped into **five domains**:
 1. Economic Stability
 2. Social and Community Context
 3. Neighborhood and Built Environment
 4. **Health Care Access and Quality**
 - **Priority: Oral Health Care - Increase the percentage of Medicaid enrollees with at least one preventive dental visit within the last year from 25.8% to 27.1% with subpopulation focus of Medicaid enrollees aged 2-20 from 42.8% to 44.9%.**
 5. Education Access and Quality

2025 – 2030 PREVENTION AGENDA ORAL HEALTH INTERVENTIONS

- Increase the proportion of people whose water systems have the recommended amount of fluoride
- Promote oral health literacy by sharing education materials via different means (smartphone apps, videos, games, text messages)
- Prescribe oral fluoride supplementation starting at age 6 months for children whose water supply is deficient in fluoride, including areas with predominate well water use
- Incorporate oral health education into nursing programs including how to apply fluoride varnish
- Collaborate with and train health care professionals on oral health promotion, early detection of oral diseases, and fluoride varnish application
- Promote use of more affordable, less complex, minimally invasive care (MIC) to address caries disease early on
- Promote use of teledentistry to provide access to care for geographically isolated patients
- Provide and maintain updated lists of Medicaid-enrolled dental providers who are accepting new patients
- Implement written protocols and standard operating procedures for providing oral care to non-ventilated patients for prevention of aspiration pneumonia (hospitals, residential care, and long-term care facilities)
- Local Health Departments develop a page dedicated to oral health which provides education on the importance oral health beginning during pregnancy, early caries prevention through nutritional counseling, benefits of fluoride varnish application in the primary care office, benefits of fluoridated water, and risks for and early detection of oral cancer.

NEW YORK STATE MEDICAID QUALITY STRATEGY



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NEW YORK STATE MEDICAID QUALITY STRATEGY

Federal Regulation 42 CFR 438.340 requires that all states providing managed care must develop and publish a Quality Strategy and update at least every three years.

Purpose:

- To establish a comprehensive quality improvement strategy that is consistent the National Quality Strategy;
- Assess the quality of care that NYS Medicaid/CHPlus members receive;
- Establish measurable goals and set targets for improvement, and identify interventions to promote improvement

Oral health objectives include:

- Improve access to and quality of dental care
- Promote sustainable provider workforce and capacity
 - Priority area: Increase the number of participating dental providers and overall access to dental care
 - Medicaid-enrolled Dental Provider Survey

[Final version](#) published September 5, 2024.

QUALITY STRATEGY DENTAL METRICS

- **Topical Fluoride for Children**
 - Mainstream Medicaid Managed Care, HIV SNP, and CHPlus members aged 1 to 20 who receive at least two fluoride varnish applications
- **Annual Dental Visit (Performance Improvement Project (PIP) Measure Adults)**
 - Mainstream Managed Care, HARP, HIV SNP, and Medicaid Fee-For-Service members ages 21 to 64 who have at least one preventive dental visit



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