

HEDIS MEASURE OVERVIEW

Topical Fluoride for Children (TFC)

Topical Fluoride for Children (TFC) is an important preventive measure for your patients' health and one of the Healthcare Effectiveness Data and Information Set (HEDIS®) performance measures used to evaluate the care and services provided by healthcare providers.

Please note: The information offered in this flyer is based on HEDIS technical specifications. It is not meant to preclude your clinical judgment.

Topical fluoride plays an important role in preventing dental decay, or cavities, caused by dental caries in children. In the U.S., dental caries is the most common chronic disease in children. From 2015–2016, the prevalence of total (untreated and treated) caries-related tooth decay was 46% for children 2–19 years of age.¹ If untreated, dental caries can lead to difficulties with eating, speaking and learning.

The U.S. Preventive Services Task Force (USPSTF) recommends primary care providers prescribe oral fluoride supplementation for children younger than 5, starting at 6 months for those whose water supply is deficient in fluoride, and apply varnish to the primary teeth of all infants and children, starting at the age of primary tooth eruption. The American Academy of Pediatric Dentistry (AAPD) recommends that topical fluoride treatments be provided every six months or at an interval appropriate to the child's individual needs, starting at 12–24 months and continuing into adolescence.

For further information, please see the American Academy of Pediatrics Clinical Guidance Report on Fluoride Use in Caries Prevention in the Primary Care Setting (Clark et al., 2020) at <https://publications.aap.org/pediatrics/article/146/6/e2020034637/33536/Fluoride-Use-in-Caries-Prevention-in-the-Primary>.

Who is included in the TFC measure?

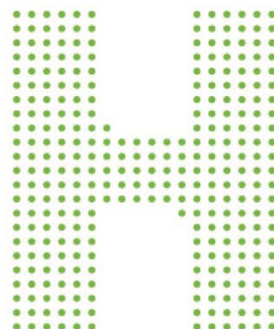
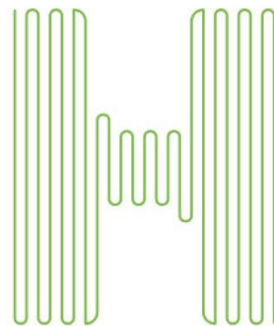
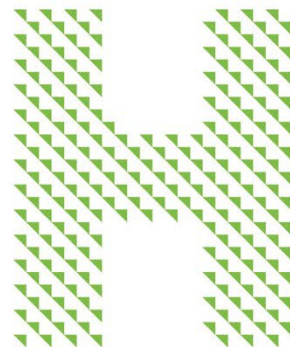
Patients who are 1–4 years of age

Exclusions

Unless otherwise indicated, these apply to Medicaid patients:

- Patients in hospice or using hospice services anytime during the measurement year
- Patients who died anytime during the measurement year

1. National Committee for Quality Assurance. (2025). *HEDIS Measurement Year 2025: Volume 1: Narrative*.



Performing well on the TFC measure

To address and satisfy the TFC measure, patients must have received at least two fluoride varnish applications during the measurement year, on two different dates of service by a dental provider, physician or other qualified health professional.

Education about providing oral health services can be found at www.smilesforlifeoralhealth.org. Physicians, nurse practitioners and physician assistants can qualify for reimbursement for fluoride varnish services by reviewing Online Course, the Smiles for Life Caries Risk Assessment, Fluoride Varnish and Counseling module, and passing the post-assessment.

Measure best practices

- Utilize the American Academy of Pediatrics Bright Future periodicity schedule, available at www.aap.org.
- Ensure the patient has a dental home to establish an ongoing relationship with family and access to care.
- Educate patients and guardians on the importance of dental health using culturally and linguistically appropriate methods.
- Recommend the use of a toothpaste with fluoride: a grain of rice-sized amount for children under 3 years of age and a pea-sized amount for most children 3 years of age and older.
- Perform an oral health risk assessment at every well-visit, starting when children are 6 months old.
- Apply fluoride varnish at least every three months, starting at tooth eruption.

Coding for the TFC measure

Current Dental Terminology (CDT) code	D1206 – Topical application of fluoride varnish by a dental provider
Current Procedural Terminology (CPT®) code	99188 – Topical fluoride application by a physician or other qualified health care professional

Coding included above is based on the NCQA Value Set, but each state's fee schedule determines which codes are reimbursed. Please consult your respective state's fee schedule for reimbursement information.

Information regarding inclusion, compliance and exclusions for this measure were sourced from the HEDIS Measurement Year 2025: Volume 2: Technical Specifications for Health Plans report. Qualitative information for this measure was sourced from the HEDIS Measurement Year 2025: Volume 1: Narrative report. The coding information in this document is subject to changing requirements and should not be relied on as official coding or legal advice. All coding should be considered on a case-by-case basis and supported by medical necessity and appropriate documentation in the medical record.

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