

# Assemblymember Mia Bonta, 18th Assembly District

## AB 350 (Bonta) Respecting Fluoride for Kids

(Updated - 02.14.25)

#### **SUMMARY**

This bill expands the coverage of fluoride varnish in primary care and public health settings for Medi-Cal and commercial plans.

#### **BACKGROUND AND PROBLEM**

Cavities (also known as caries and tooth decay) are the most common chronic condition experienced by children. Untreated cavities can cause pain and infections that may lead to problems with eating, speaking, playing and learning. Children who have poor oral health often miss more school and receive lower grades than children who don't. According to a 2020-21 National Survey of Children's Health, 14.8% of California's children had decayed teeth or cavities in the past 12 months studied. In 2021, the Department of Public Health (DPH) reported that California's third graders have a substantially higher proportion of tooth decay compared to the national median of 53%. Children from communities of color and Spanish-speaking households are more likely to experience tooth decay.

Fluoride is a mineral proven to fight cavity-causing bacteria and strengthen tooth enamel. Fluoride varnish is a safe, inexpensive, and effective dental treatment that can help prevent tooth decay. National dental societies recommend the application of topical fluoride, such as fluoride varnish, every three to six months. Dental offices commonly apply fluoride varnish, but fewer than half of children in the Medi-Cal program have annual dental visits. Primary care and public health settings such as schools offer additional access points for the application of fluoride varnish for children in Medi-Cal.

Unfortunately, current Medi-Cal policy, as printed in the Medi-Cal provider manual, is unnecessarily restrictive and only specifies the reimbursement of fluoride varnish in a primary care setting for children under five years old. The Medi-Cal policy requires a qualified health professional to "hold the brush" when applying fluoride varnish, making it more difficult and costly to incorporate into primary care and public health settings. So while schools and public health settings may offer additional opportunities for the application of fluoride varnish, and even though many types of non-clinical staff can be authorized to apply

the varnish, Medi-Cal will only cover this service if a qualified health professional applies the varnish. Similar restrictions are found in commercial insurance that only covers fluoride varnish for children under the age of five.

#### **EXISTING LAW**

Requires pupils of public and private schools be provided the opportunity to receive the topical application of fluoride, including fluoride varnish in a manner approved by the Department of Public Health (DPH).[Health and Safety Code (HSC)§104830]

Allows any person in a public health setting or program to apply fluoride varnish according to prescription and program issued and established by a physician or dentist. [(HSC) §104830]

Requires Medi-Cal to cover fluoride treatments for children 17 years of age and under. [(Welfare and Institutions Code (WIC) § 14132)]

Requires the coverage of fluoride treatments when medically necessary to all children under 21. [(WIC § 14131.10)]

#### **SOLUTION**

This bill will expand access to fluoride varnish and improve oral health outcomes for children across the state by:

- Requiring Medi-Cal and commercial plans to cover fluoride varnish in primary care settings for children under 21 years of age; and
- Requiring the Department of Health Care Services to create a Medi-Cal policy governing fluoride varnish application and reimbursement by authorized providers and their employees or contractors.

#### **SUPPORT**

Children Now (sponsor)

### FOR MORE INFORMATION

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