

State

Coverage

Alabama

- Dental check-up and dental cleaning every 6 months
- X-rays, fillings, extractions, root canals, stainless steel crowns

Alaska

- Dental exam covered twice a year beginning at age 3

Arizona

- Scale and clean teeth every 6 months (as indicated by patient's needs)
- Topical fluoride every 6 months (or as indicated)
- Complete a radiographic assessment of pathology/abnormal growth and development as indicated

Arkansas

- Prophylaxis covered 1 time per fiscal year (more as medically necessary)
- Sealants once per lifetime on 1st and 2nd molars

California

- Scale and clean teeth every 6 months (as indicated by patient's needs)
- Topical fluoride every 6 months (or as indicated)
- Complete a radiographic assessment of pathology/abnormal growth and development as indicated

Colorado

- Scale and clean teeth every 6 months (as indicated by patient's needs)
- Topical fluoride every 6 months (or as indicated)
- Complete a radiographic assessment of pathology/abnormal growth and development as indicated

Connecticut

- Scale and clean teeth every 6 months (as indicated by patient's needs)
- Topical fluoride every 6 months (or as indicated)
- Complete a radiographic assessment of pathology/abnormal growth and development as indicated

Delaware

- Scale and clean teeth every 6 months (as indicated by patient's needs)
- Topical fluoride every 6 months (or as indicated)
- Complete a radiographic assessment of pathology/abnormal growth and development as indicated

District of Columbia

- Scale and clean teeth every 6 months (as indicated by patient's needs)
- Topical fluoride every 6 months (or as indicated)
- Complete a radiographic assessment of pathology/abnormal growth and development as indicated

Florida

- Oral exam, prophylaxis, and topical fluoride every 6 months
- Sealants one per tooth every 3 years
- Bitewings every 6 months
- Panoramic x-rays once per year
- Complete intraoral x-rays once in 3 year period

Georgia

- Prophylaxis twice a year
- One comprehensive oral evaluation and one periodic oral evaluation per calendar year
- Panoramic x-rays or full series x-rays once every 3 years (panoramic x-rays limited to those over 5 years of age)

Hawaii

- Oral exam, prophylaxis, and topical fluoride 2x/year (starting at age 1)
- Sealants for 1st and 2nd permanent molars
- Bitewings x-rays 2x/year
- Full-series x-rays every 3 years
- Panoramic x-rays every 2 years

Idaho

- Prophylaxis and topical fluoride every 6 months
- Periodic oral evaluation every 6 months; comprehensive oral evaluation every 12 months
- Intraoral x-rays once in 36 month period
- 4 bitewings (total) every 6 months

Illinois

- Prophylaxis every 6 months
- Clinical oral evaluation every 12 months
- Complete set of x-rays every 3 years

Indiana

- Regular assessments and preventative care every 6 months

Iowa

- Scale and clean teeth every 6 months (as indicated by patient's needs)
- Topical fluoride every 6 months (or as indicated)
- Complete a radiographic assessment of pathology/abnormal growth and development as indicated

Kansas

- Scale and clean teeth every 6 months (as indicated by patient's needs)
- Topical fluoride every 6 months (or as indicated)
- Complete a radiographic assessment of pathology/abnormal growth and development as indicated

Kentucky

- Comprehensive oral exam once a year
- 4 bitewings per year
- Prophylaxis covered once a year
- Sealants of 6 and 12 year molars every 4 years (3 per lifetime)

Louisiana

- Oral evaluation, topical fluoride, prophylaxis, and bitewings covered once per year

Maine

- Comprehensive oral exam 2x/year
- Prophylaxis and fluoride 2x/year
- Sealants for permanent teeth once every 3 years

Maryland

- Scale and clean teeth every 6 months (as indicated by patient's needs)
- Topical fluoride every 6 months (or as indicated)
- Complete a radiographic assessment of pathology/abnormal growth and development as indicated

Massachusetts

- Prophylaxis and fluoride 2x/year (no sooner than 6 months)
- Bitewings 2x/year
- Intraoral bitewings (complete set) once every 3 years
- Sealants on 1st and 2nd molars once every 3 years

Michigan

- Prophylaxis covered every 6 months
- Periodic oral evaluation every 6 months
- Complete series of x-rays every 5 years

- Bitewings every 12 months

Minnesota

- Unclear: State documents call for verbal referral from medical screener to a dentist at age 3 or ear

Mississippi

- Prophylaxis 2x/year
- Comprehensive exams 2x/year
- Comprehensive x-rays every 2 years
- Sealants covered only for 1st and 2nd molars

Missouri

- Prophylaxis 2x/year (starting at 6 months of age)

Montana

- Oral exam and prophylaxis every 6 months

Nebraska

- Periodic oral evaluations every 6 months
- Prophylaxis every 6 months
- Fluoride at provider suggestion
- Intraoral complete series every 3 years

Nevada

- Complete exam and cleaning 2x/year (fluoride covered)

New Hampshire

- Scale and clean teeth every 6 months (as indicated by patient's needs)
- Topical fluoride every 6 months (or as indicated)
- Complete a radiographic assessment of pathology/abnormal growth and development as indicated

New Jersey

Up to age 17:

- Prophylaxis and fluoride every 6 months
- Comprehensive dental exam every 6 months

Age 17 and older:

- Prophylaxis and fluoride every 12 months
- Comprehensive dental exam every 12 months

New Mexico

- Periodic oral exam every 6 months
- Prophylaxis every 6 months
- Complete intraoral x-rays every 3 years
- Bitewings every 12 months

New York

- Prophylaxis and fluoride every 6 months
- Complete intraoral x-rays every 3 years
- Bitewings every 6 months
- Sealants between 5 and 15 years of age, reapplication every 3 years

North Carolina

- Routine dental exam every 6 months (earlier as indicated)

North Dakota

- Prophylaxis 2x/year · Panoramic films every 5 years

Ohio

- Prophylaxis and fluoride every 6 months
- Comprehensive oral exam every 6 months

Oklahoma

- Prophylaxis with or without fluoride 2x/year
- Dental exams 2x/year

- Bitewings 2x/year (beginning at age 3)

Oregon

- Scale and clean teeth every 6 months
- Topical fluoride every 6 months
- Sealants as needed

Pennsylvania

- Scale and clean teeth every 6 months (as indicated by patient's needs)
- Topical fluoride every 6 months (or as indicated)
- Complete a radiographic assessment of pathology/abnormal growth and development as indicated

Rhode Island

- Semi-annual coverage of dental exams, cleaning, and fluoride treatment

South Carolina

- Cleaning, x-rays, and topical fluoride every 6 months

South Dakota

- Prophylaxis and topical fluoride 2x/12 months
- Initial or periodic oral exam 2x/12 months
- Bitewings (single, two, four films) 2x/12 months
- Sealant-per tooth, limited to 1st and 2nd molars only once every 3 years

Tennessee

- Scale and clean teeth every 6 months (as indicated by patient's needs)
- Topical fluoride every 6 months (or as indicated)

- Complete a radiographic assessment of pathology/abnormal growth and development as indicated

Texas

- Routine dental check-up services available for eligible recipients one year of age or older every 6 months
- Preventive dental services include prophylaxis, topical fluoride, dental sealants, oral nutritional counseling

Utah

- Prophylaxis with or without fluoride 2x/year

Vermont

- Oral exam 2x/year
- Prophylaxis and fluoride 2x/year
- Complete intraoral x-rays once every 3 years

Virginia

- Periodic oral examinations, prophylaxis, and fluoride covered every 6 months under age 21
- Sealants covered once per tooth (anterior teeth, 3rd molars, or premolars not covered)

Washington

- Periodic oral exam once every 6 months
- Intraoral x-rays once in 3 year period
- Bitewings: total of 4 allowed every 12 months· Topical fluoride once every 6 months

West Virginia

- Periodic oral exam every 6 months
- Prophylaxis and topical fluoride once every 6 months
- Single film bitewings 4x/year

Wisconsin

0-12:

- Periodic oral exam every 6 months
- Prophylaxis with topical fluoride every 6 months
- Complete x-rays once every 3 years, regional intraoral x-rays every 6 months

Over 12:

- Period exam once a year (up to 2 more exams per year with HealthCheck referral)
- Topical fluoride once a year
- Sealants on 1st and 2nd molars once per 3 year period (certain teeth covered without prior approval)

Wyoming

- Prophylaxis and topical fluoride once every 6 months (more if medically necessary)

