 

**ADULT ORAL HEALTH PROGRAM**

Adult Oral Health clients are screened through the **Mid-Ohio Valley Health Department (MOVHD)** and placed with area dentists.

These dentists are volunteering their services from their own offices and are paid by MOVHD for their costs. Public Health Dental Hygienists provide the screening at MOVHD. Dental treatments or pain medications **will not** be given at the Health Department.

**PROGRAM REQUREMENTS:**

* income up to 250% Federal Poverty Level
* must be WV or OH resident age 18 and over
* established patients of record with an area dentist **do not qualify**
* provide proof of income (required)
* WV/OH Driver’s License or WV/OH state I.D. card
* pay a minimal fee in advance for services performed **(non-refundable)**
* provide WV Medicaid card for charges (if applicable) **Cannot Accept Ohio Medicaid at this time**
* May qualify under sliding fee.

**SCREENING FEE(S) OF $40.00 COVERS THE FOLLOWING SERVICES:**

* health history review
* blood pressure screening
* oral cancer screening
* dental x-rays
* record past dental treatment and disease conditions
* oral health education (including diet and tobacco cessation)
* oral health supplies for home use
* placement with area dental providers for dental treatment
* transfer of records to treating dentist
* follow-up with records once treatment received

**All fees for services will be required in advance and are non-refundable. Clients are eligible to return through the program, additional fees apply. No show appointments may be cause for dismissal from the program.**

**CHILDREN’S ORAL HEALTH PROGRAM**

Please complete one application for **each** child that you would like to be seen at the Early Smiles Dental Visit. Remember, this application is for a child that **does not** have a dentist or **has not** seen a dentist in over a year.

**\* WV Medicaid and WV CHIP card will pay 100% for all dental treatment for children. \***

**Public Health Dental Hygienist will provide the screening for children ages 1 to 17.**

Visual look of the mouth and teeth

Oral health education for parents or guardian

Referral to a dentist

Oral health supplies for home use

**In addition, if needed, children will receive:**

**Toothbrush/Polish cleaning $40.00**

**Fluoride varnish $20.00**

**Sealants (per tooth) $30.00**

**\*CHILDREN MUST BE ACCOMPANIED BY A LEGAL GUARDIAN\***

For more information please contact (304) 485-7374 x 106.

  





 

 

