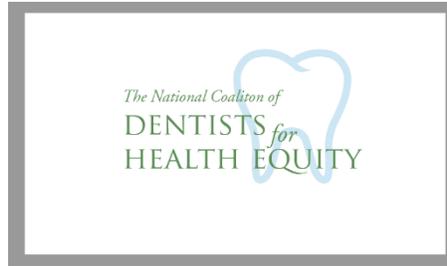


## Dental Therapy:

Expanding the dental team to improve access to dental care and diversify the dental workforce.



## Dental Therapy

*The NCDHE urges state legislatures and Tribal authorities to authorize dental therapists in their jurisdictions, and for the federal government to create policies to support dental therapy education programs and dental therapists' integration in the oral health care system.*

A Position Statement  
(Approval Date February 26<sup>th</sup>, 2021)

The National Coalition of Dentists for Health Equity (NCDHE) supports the education and employment of dental therapists in the United States to improve access to dental care for underserved populations and to diversify the dental workforce. The NCDHE advocates that all people have adequate access to dental care because oral health is necessary to achieve overall health. The addition of dental therapists to the U.S. dental team has the potential to revolutionize how people access care and who provides that care in the most cost-effective manner. It can lead to improved health for many Americans. The NCDHE therefore urges state legislatures and tribal authorities to implement dental therapy in their jurisdictions. The Coalition further urges the federal government to provide financial support for the implementation and maintenance of dental therapy educational programs in Title VII funding, for the inclusion of dental therapists in National Health Service Corp eligibility, and other appropriate mechanisms.

### **The Crisis in Access to Dental Care**

Oral health care is one of the greatest unmet health care needs in the U.S., disproportionately affecting children, people of color, tribal communities, and low-income families (1). It is estimated that approximately 180,000,000 people in the United States do not receive regular

### Dental Therapy:

Expanding the dental team to improve access to dental care and diversify the dental workforce.

dental care, (9) disproportionately impacting people of color, people with low incomes, and rural populations. As a result, these groups suffer higher rates of oral disease, including cavities, gum problems, and tooth loss (2). For many Americans, accessing dental care is difficult or even impossible. Approximately 60 million Americans live in federally-identified shortage areas—places without enough dentists (3).

Additionally, around one-quarter of Americans do not have dental coverage, including almost half of all seniors (due, in large part, to the exclusion of dental benefits from Medicare) (4). Even for those with dental insurance, dental care can often be prohibitively expensive. Finding dental care is also a particular challenge for the approximately 77 million Americans with Medicaid coverage; less than a quarter of dentists accept Medicaid (5). The continuing primary impediments to access for many of these groups are costs and the distribution of dentists willing to serve this population (6,7). As a result, only about 50% of children with Medicaid coverage receive dental care on a regular basis (8). Recent publications show a greater linkage between poor oral health and a rising number of chronic and systemic health issues (10). For all these and other reasons, the dental care system in the United States is broken (11).

### **Why dental therapists?**

Dental therapists are licensed or certified oral health providers who work under the supervision of a dentist to provide routine care like exams, fillings, and limited extractions. These providers began working in the United States in 2004 and currently work or are authorized in 13 states, and many more are considering their authorization (12). Education programs for dental therapists are accredited by the Commission on Dental Accreditation (CODA), the same entity that accredits all academic dental programs (13). In 2015, CODA created education standards for dental therapists, legitimizing the profession. Dental therapists deliver high-quality care. Studies demonstrate that, for their scope of practice, their care is of equal or higher quality to that of dentists' (14). Other research shows that oral health outcomes significantly improve after care provided by dental therapists (15).

### Dental Therapy:

Expanding the dental team to improve access to dental care and diversify the dental workforce.

Due to their much smaller scope of practice, dental therapists can be educated in less time than dentists and thus command a smaller salary—usually it is approximately one-third to half that paid to a dentist. This concentrated scope and lower employment cost makes dental therapists highly cost-effective to employ. By taking on routine procedures like exams and fillings, dental therapists can free up dentists to focus on more complicated care. Nonprofit clinics that have hired dental therapists report being able to treat more patients with the same budget, and private practices report increased profits (16,17,18,19).

Dental therapists have also proven to be highly effective at expanding care outside of the four walls of a traditional dental clinic. Dental therapists can bring care to people where they are, whether that's rural communities without dentists or community settings like schools or nursing homes.

Further, the dentist workforce in the United States does not represent the diversity of the population—a challenge that dental therapists can help resolve (20). “Increasing the racial and ethnic diversity of the health care workforce is essential for the adequate provision of culturally competent care to our nation’s burgeoning minority communities. A diverse health care workforce will help to expand health care access for the underserved, foster research in neglected areas of societal need, and enrich the pool of managers and policymakers to meet the needs of a diverse populace.” (21) The shorter time and cost to attain a degree in dental therapy allows schools to create accessible education programs for people from communities with limited access to dental care. For example, the dental therapy workforce in Alaska is strongly representative of the local Native population. In Minnesota, 18% of dental therapists represent diverse communities and are more diverse than the dentists in that state (22).

This model of empowering community members to become the oral health provider in their community stands in sharp contrast to the current method of recruiting dentists to work in underserved communities with short-term economic incentives, usually loan forgiveness. Such

## Dental Therapy:

Expanding the dental team to improve access to dental care and diversify the dental workforce.

programs often create a revolving door of providers and compromise continuity of care for communities that are already experiencing severe oral health disparities.

### **Recommended policy approach:**

State, tribal, and federal policymakers should take action to advance dental therapy. They can do so by ensuring dental therapists are able to serve their communities, and by investing in the profession's pipeline."

For **state legislatures and tribal authorities**, the NCDHE urges policymakers to:

- Authorize dental therapy in their jurisdictions, and
- Implement the dental therapist profession in their respective states based on the CODA standards (13) and the National Model Act for Licensing and Certification of Dental Therapists (23).

For the **federal government**, [we/the coalition] urges policymakers to:

- Provide financial support for the implementation and maintenance of dental therapy educational programs in Title VII funding, for the inclusion of dental therapists in National Health Service Corp eligibility, and other appropriate funding mechanisms.
- Include dental therapists in all sources of funding that are currently available for the training and utilization of dentists and dental hygienists.

Expansion of dental therapists nationwide is a high quality, cost-effective approach to improve the oral health of communities nationwide. Dental therapy can also increase the diversity of dental workforce, key to enhancing more culturally competent, effective oral health care. By adopting these recommendations, policymakers can take critical steps to resolve America's crisis in access to dental care.

## **REFERENCES**

1. U.S. Department of Health and Human Services Oral Health Strategic Framework, 2014–2017 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4765973/>

## Dental Therapy:

Expanding the dental team to improve access to dental care and diversify the dental workforce.

2. Centers for Disease Control and Prevention, Disparities in Oral Health  
[https://www.cdc.gov/oralhealth/oral\\_health\\_disparities/index.htm](https://www.cdc.gov/oralhealth/oral_health_disparities/index.htm)
3. Designated Dental Health Professional Shortage Areas 2020,  
[file:///C:/Users/frankcat/AppData/Local/Temp/BCD\\_HPSA\\_SCR50\\_Qtr\\_Smry.pdf](file:///C:/Users/frankcat/AppData/Local/Temp/BCD_HPSA_SCR50_Qtr_Smry.pdf)
4. [https://www.nadp.org/Dental\\_Benefits\\_Basics/Dental\\_BB\\_1.aspx#:~:text=Two%2Dthirds%20or%20164.2%20million,part%20of%20a%20medical%20plan](https://www.nadp.org/Dental_Benefits_Basics/Dental_BB_1.aspx#:~:text=Two%2Dthirds%20or%20164.2%20million,part%20of%20a%20medical%20plan)
5. <https://surveys.ada.org/reports/RC/public/YWRhc3VydmV5cy01ZmM3OWU0ZGFkNTU2NTAwMGY5NDdjNDctVVJfM3BaeGhzWm12TnNMdjB4>
6. Main Barriers to Getting Needed Dental Care All Relate to Affordability  
[https://www.ada.org/~media/ADA/Science%20and%20Research/HPI/Files/HPIBrief\\_0419\\_1.pdf?la=en](https://www.ada.org/~media/ADA/Science%20and%20Research/HPI/Files/HPIBrief_0419_1.pdf?la=en) accessed 1/15/2021
7. Surdu S, Langelier M, Qiushuang L, Dhar S, Stufflebeam MJ. Consumer Survey of Barriers to and Facilitators of Access to Oral Health Services. Rensselaer, NY: Oral Health Workforce Research Center, Center for Health Workforce Studies, School of Public Health, SUNY Albany; March 2019
8. <https://www.medicaid.gov/medicaid/benefits/early-and-periodic-screening-diagnostic-and-treatment/index.html> Accessed 1/15/2021.
4. 9. Survey: More Americans want to visit the dentist,  
<https://www.ada.org/en/publications/ada-news/2018-archive/march/survey-more-americans-want-to-visit-the-dentist> .Accessed 1/15/2021
10. Alfano, M.C.: The Economic Impact of Periodontal Inflammation, in Glick M. The Oral-Systemic Health Connection, 2nd Edition 2019, Quintessence Publishing; 357-368
11. Vujicic, M., Our dental care system is stuck: and here is what to do about it. JADA. 2018; 149: 167-169
12. Simon L, Donoff RB, Friedland B, Dental therapy in the United States: Are developments at the state level a reason for optimism or a cause for concern? J Public Health Dent. 2020 Aug 17. doi: 10.1111/jphd.12388. Online ahead of print. PMID: 32805762
13. Commission on Dental Accreditation Dental Therapy Educational Standards  
[https://www.ada.org/~media/CODA/Files/dental\\_therapy\\_standards.pdf?la=en](https://www.ada.org/~media/CODA/Files/dental_therapy_standards.pdf?la=en)
14. American Dental Association Council on Scientific Affairs, 2013. Wright JT, Graham F, Hayes C, Ismail AI, Noraian KW, Weyant RJ, et al. A systematic review of oral health outcomes produced by dental teams incorporating midlevel providers. J Am Dent Assoc [Internet]. 2013 Jan [cited 2016 Apr 7];144(1):75–91. Available from:  
<http://www.ncbi.nlm.nih.gov/pubmed/23283929>
15. Chi et al, Dental therapists linked to improved dental outcomes for Alaska Native communities in the Yukon-Kuskokwim Delta, Journal of Public Health Dentistry, 78 (2018) 175-182
16. Expanding the Dental Team: Increasing Access to Care in Public Settings (June 2014)  
[http://www.pewtrusts.org/~media/assets/2014/06/27/expanding\\_dental\\_case\\_studies\\_report.pdf](http://www.pewtrusts.org/~media/assets/2014/06/27/expanding_dental_case_studies_report.pdf)
17. Midwest Dental: Dental Therapist Case Study and Addendum: Dental Therapist Production and Revenues (May 2017)

## Dental Therapy:

Expanding the dental team to improve access to dental care and diversify the dental workforce.

[https://www.wilder.org/sites/default/files/imports/DeltaDentalRenvilleAddendum\\_5-17.pdf](https://www.wilder.org/sites/default/files/imports/DeltaDentalRenvilleAddendum_5-17.pdf)

18. Expanding the Dental Team- Studies of two private practices (February 2014)

[http://www.pewtrusts.org/~media/legacy/uploadedfiles/pcs\\_assets/2014/expandingdentalteamreportpdf.pdf](http://www.pewtrusts.org/~media/legacy/uploadedfiles/pcs_assets/2014/expandingdentalteamreportpdf.pdf)

19. Langelier M, Surdu S, Moore J. The Contributions of Dental Therapists and Advanced Dental Therapists in the Dental Centers of Apple Tree Dental in Minnesota. Rensselaer, NY: Center for Health Workforce Studies, School of Public Health, SUNY Albany; August 2020.

20. Garcia, R. et al, Workforce diversity in dentistry - current status and future challenges, J Public Health Dent, 2017 Mar;77(2):99-104. doi: 10.1111/jphd.12219. Epub 2017 May 12.

PMID: 28497850 DOI: 10.1111/jphd.12219

21. "The Case for Diversity in The Health Care Workforce," Jordan J. Cohen, Barbara A. Gabriel, and Charles Terrell, HEALTH AFFAIRSVOL. 21, NO. 5: HEALTH WORKFORCE POLICY REVISITED, <https://www.healthaffairs.org/doi/10.1377/hlthaff.21.5.90>

22. Minnesota Department of Health, Office of Rural Health, Minnesota's Dental Therapist Workforce, September 2019, accessed 1/15/2021.

23. [https://www.dentaltherapy.org/resources/file/Dental-Therapist-National-Standards-Report-and-Model-Act\\_FINAL.pdf](https://www.dentaltherapy.org/resources/file/Dental-Therapist-National-Standards-Report-and-Model-Act_FINAL.pdf)