

Dental Therapist-Hygienists

A Community Workforce Solution
for Improving Access to Quality Dental Care
for Rural, Tribal & Underserved New Mexico

Pamela K. Blackwell, JD
*Project Director, Oral Health Access
Health Action New Mexico*

*Health & Human Services Committee
Santa Fe, NM – December 19, 2013*

NM Dental Health Crisis

May 2013 - NM Healthcare Workforce Report to Legislature concluded:

- NM 39th worst in U.S. in number of dentists/1,000 people.
 - Represents dentists who hold a NM license, not who actually practice in NM, FT/PT
 - Approx. only ½ of NM dentists see Medicaid patients, Only have to see 1 Medicaid patient to be a Medicaid provider
 - Includes dentists in corporate dental practices, license all though all don't practice in NM
- 69% of dentists in NM metropolitan areas.
- **1.31 million New Mexicans** (63%) are either in a shortage area or underserved (38% in DHP SA, 25% underserved)
- NM needs 200-400 more dentists to meet need.
- 9 NM counties either have none or 1 dentist and/or hygienist. (NM Dental Board licensure data)
- 40 known long-standing vacancies for dentists in NM

(Adequacy of NM's Healthcare System Workforce, NM Dept. of Health Report to Legislative Finance Cmte. 5/15/13)

2

NM Dental Crisis...

Result of Shortage:

- 34% of all NM 3rd graders have untreated dental decay, worse for NA population.
- Thousands of New Mexicans –children, elders & persons with disabilities – do not have access to, or wait > 6 months for necessary dental care.
 - **Result:** Living in pain, missing school or work, low school performance, lost work productivity, life threatening medical emergencies, long-term serious health problems.

Other Factors that Worsen Shortage:

- Aging dentist workforce: 51% age 55+
- **Demand will only increase:** Federal law mandates dental coverage for children up to 21 yrs., Medicaid expansion.
- **NEW** – NM DOH announced expansion of Medicaid dental coverage to also cover adults (Sept.2013)

3

NM Healthcare Workforce Rpt. Recommendations

- The number of dental health professionals in the state and their maldistribution cannot adequately meet current or future demand.
- ***“The Legislature should also revisit the concept of dental therapists as an additional way to provide care to underserved areas under the supervision of dentists.”***

4

Who are Dental Therapists?

- Dental providers, general supervision of off-site dentists, study after study show provide high quality, cost-effective dental services to rural and tribal communities. (*April 2012, Review of Global Literature on Dental Therapists, David A. Nash*)
 - ZERO of 1100 studies and reports have revealed a problem with the quality of care dental therapists provide.
- Home-grown, culturally competent, selected by their communities, practice in their home or similarly situated communities.
- Obtain rigorous, competency-based education, training and clinical experience.
- *With Dental therapist you get access to a dentist, team of dental providers.* - Expand the reach of dentists to underserved and remote communities using telemedicine.

5

Dental Therapists...

- Since 2005, provide care in remote Alaskan tribal villages and recently in Minnesota. Over 90 years, provided care in 53 countries including industrialized countries.
- 40,000 more Alaskans now receiving routine and preventative care because of dental therapists.
- NOT “scope of practice issue”
- It is a Health Issue.
 - Oral health has too long been left out of overall health, though poor oral health means bad overall health.
 - DTHs, by providing access to dental services, bring the importance of dental health back to where it should be, with New Mexican’s overall health.

6

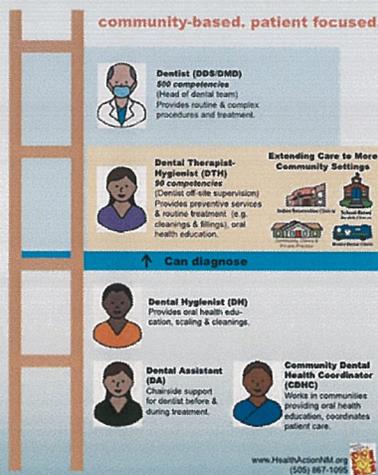
A Workforce Solution for NM

- **Jobs, Economic Opportunity & Career Pathways**
 - Career, jobs and economic opportunities for those in rural and tribal NM, say NM communities. (Con Alma rpt. 2010)
 - Career pathway for dental hygienists
 - With additional training dental hygienists can become dental therapists. This means providers serving the public sooner.

7

NM Dental Team – Community Based. Patient Focused.

New Mexico Dental Team community-based. patient focused.



8

CDHCs

- CDHCs are coordinators of care, not dental providers.
 - Can coordinate care, but cannot provide meaningful treatment services.
- Addition of CDHCs to the dental team leaves dental team incomplete.
- DTHs who can provide the routine and preventive care needed NOW by underserved patients are
 - Critically important to filling the gaps in care, and
 - Ensuring the patients seen by CDHCs have a provider who can treat them.
- E.g. – Break ankle, prevention provider like CDHC can tell you how to not break ankle again, but cannot set your ankle. Where do you go to set your ankle?
- Business model, ROI on CDHCs, unlike DTs has yet to be seen.

9

DTHs: A Solid Investment

Dental Therapist

- DT education cost: \$35k (total tuition for 2-yr program)
- DT salary: \$70k/yr
- Exceptional ROI for providers, livable-wage job serving our NM communities
- Use existing NM schools

Dentist

- Dentist student loan debt: \$200k - \$250k
 - 4 yr. professional dental education only, does not include BA/BS
- Dentist salary
 - Community clinics, public health: \$115 - \$125k/yr
 - Corporate: \$200 - \$225k/yr
- Cost of dental school: \$50 million (2008)

10

DTHs: A Solid Community Investment

- NM Communities
 - Dental services in home community, attract and keep residents
 - Jobs, economic opportunity for residents
 - NM \$ staying in NM communities
- NM Educational Institutions –
 - Use existing resources, community colleges, DH edu. programs
 - In-state training ensures retention of DTs in NM underserved communities
 - Job opportunities, faculty, staff, attracting education and other dental professionals to our state

11

NM Schools Can Train & Educate DTHs

- NM Education Institutions interested in establishing dental therapist education programs
 - Southwestern Indian Polytechnic Institute (SIPI)
 - Dona Ana Community College – Las Cruces
 - Northern NM University – Espanola
 - Eastern NM University – Roswell
 - Navajo Technical College - Crownpoint, NM
- **NM Dental Therapist Education Program Summit** (July 2013), national experts on how to establish effective and efficient DTH education programs

12

DTHs: A Successful Business Model

- DTs cost employers less than 30 cents for every dollar they generate when serving underserved populations.
 - Studied AK & MN DHATs, DTs, ADTs.
 - *(Community Catalyst Report, May 2013)*
 - Possibly more revenue generation for NM employers- NM Medicaid reimbursement rates higher than most states
 - Medicaid expansion includes adult dental care - 170,000 more NM have means to access dental care
- Can increase a dentist's productivity and profitability, including adding a 20% Medicaid patient mix. *(The Pew Center, Dec.2010)*
- **NEW** - Private Practice Dentist (MN) – DT made \$90k/yr, generated an additional \$20k in revenue that the practice would not have generated had they not had a DT

13

Support for Dental Therapist Model

- | | | | |
|---|---|--|--|
| • NM State Legislative Health & Human Services Committee – Endorsed dental therapist legislation (Nov.12) | • Nizhoni Smiles Dental Clinic - Shiprock, NM | • NM Religious Coalition for Reproductive Choice | • affordable housing organization. |
| • AARP New Mexico | • Northern New Mexico College – Espanola, NM | • NM Telehealth Alliance | • Union County Health & Wellness Network want dental therapists in their community – Clayton, NM |
| • Albuquerque Area Indian Health Board (AAIHB) | • NM Alliance for Retired Persons | • NM Voices for Children | • Union County General Hospital |
| • Center for Civic Policy | • NM Alliance for School-Based Health Care | • NM Youth Development, Inc., Elev8NM | • Women's Intercultural Center – Anthony, NM |
| • Concilio CDS, Inc. - Las Cruces, NM | • NM American Federation of Teachers Retirees | • Pueblo of Kewa/Santo Domingo Health Board - want dental therapists in their community. | |
| • Des Moines School Health Advisory Council | • NM Center on Law & Poverty | • RESULTS - Santa Fe | |
| • Lutheran Advocacy Ministry of New Mexico | • NM Conference of Churches | • Rio Arriba Community Health Council | |
| • Native American Professional Parent Resources, Inc. (NAPPR) | • NM Dental Hygienists' Association | • Rio Arriba County Health & Human Services | |
| • Native Health Initiative | • NM Health Resources (NMHR) | • Southwest Women's Law Center | |
| • Navajo Nation – want dental therapists in their community | • NM League of United Latin American Citizens | • Southwestern Indian Polytechnic Institute | |
| | • NM Public Health Association (NMPHA) | • Tierra del Sol (Las Cruces) – | |

14

Support cont...

- William H. Johnson, Jr. – Fmr. NM Cabinet Secretary for Human Services Dept.
- Alfredo Vigil, MD FAAP–Fmr. NM Cabinet Secretary for Health & Human Services - Taos, NM.
- Ronald J. Romero, DDS – Fmr. NM Dept. of Health Dental Director, Private practice dentist – Santa Fe, NM.
- DezBaa Damon-Malette, DDS – member of Navajo Nation, Aztec & Shiprock NM
- Howard Rhoads, DDS: – Farmington, NM
- Bob Giannini, DDS – Fmr. NM Dental Board Chair
- Roger Ames, DDS
- Bill Niendorff, DDS
- Harris Silver, MD
- William H. Wiese, MD, MPH, Ret. UNM faculty; Fmr. NM DOH Public Health Division Director

15

Tribal Sovereignty, Right to Self-Determination

- **State Law Change Required to Restore Tribal Sovereignty and Rural Community Right to Self-Determination -**
 - For NM rural communities, tribes, pueblos and nation to have the right to train and employ a dental therapist, NM state law must specifically allow dental therapists to practice in NM.
 - Federal law (Indian Health Improvement Act 2010) took away these communities' rights to have dental therapists.
- 2006- American Dental Association (ADA) and Alaska Dental Society (ADS) sued and AK DHAT program and all AK dental therapists
- 2007 - ADA & ADS withdrew suit. ADA/ADS settled for compromise in Indian Health Improvement Act of 2010
 - Key legal opinions upheld sovereignty for tribes

16

Sovereignty cont...

- Compromise: AK program can continue, but no other tribe or tribal organization in the other states can have DTs, unless state law allows for DTs. [25 U.S. Code 18, §1616l, (d)(2)(B) and (3)(A)]
 - **“The Secretary shall exclude dental health aide therapist services from services covered under the program.”** [Community Health Aide Program (CHAP), federal program for provision of primary care services to N/AN]-
 - **The Secretary can include dental health aide therapists in the CHAP if:**
 - “an Indian tribe or tribal organization” or “IHS” elects to have dental therapists AND is
 - “located in a state in which the use of dental health aide therapist services or midlevel dental provider services is authorized under State law to supply such services in accordance with State law.”
- Tribes that try to do this without state law change would be breaking federal law and risk being sued.
- Non-Native Communities, state law must allow DTs.
- ACA allows 15, \$4 million grants for training and education of DTs and other alternative dental providers
 - DTs have to be in state law to be eligible

17

Dental Therapists: An Innovative, Tested Model for NM

- Proposals for a NM Dental Therapist program are not new to NM.
 - 2008 – Presentation to Interim HHS Cmte.
 - Jan. 2011 - Introduced HB 495, dental therapist legislation for the 2011 NM legislative session
 - Oct. 2011 -Proposal presented to Indian Affairs Cmte.
 - 2012 – Proposal presented to Interim HHS Cmte. Endorsed
 - 2013 – Introduced dental therapist-hygienist legislation
 - Sept.-Oct. 2013 – Present to legislative cmtes. – Health & Human Services, Indian Affairs, Economic & Rural Development
 - Dec. 2013 – Introduce legislation
 - Jan. 2014 – Legislative session, 30-day session

18

NM Dental Crisis Demands Action

- We have a growing, committed coalition of supporters.
- We have reached out to and met with those who oppose our proposal, and we will continue to do so.
- However, the NM dental crisis is bigger than all of us. **This is a Health Issue.**
- It demands action, and legislative leadership, an innovative and tested solution for all New Mexicans.
- Solution: Legislation that allows for NM Dental Therapist-Hygienists, and NM Dental Therapist-Hygienist education programs.

19

Call to Action

- **Dental care is a crisis in NM, NOW.**
- **We have a solution.**
 - Improve NM rural, tribal and underserved access to quality, cost-effective dental services,
 - Provide jobs, stimulate economic opportunity for these communities,
 - Restore community self-determination and tribal sovereignty, and
 - Allow the best of NM's training institutions and communities to partner to solve our dental care crisis.

Request: Support and recommend legislation that includes dental therapist-hygienists as part of New Mexico's dental team

20

-Thank you -

Pamela K. Blackwell, JD
Project Director, Oral Health Access
Health Action New Mexico
505.508.2768
pamela@HealthActionNM.org

21

