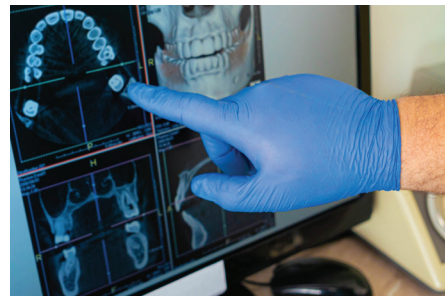


Workforce Strategies to Improve Access to Oral Health Care

Oral health is [integral to overall health](#), and accessing dental services is a way to maintain it. Yet those most in need of dental care are often among the least likely to receive it. Some [racial, ethnic and socioeconomic groups](#) have poor health outcomes because they live in communities with limited access to oral health professionals. States can increase access to oral health services through supporting, strengthening and expanding their oral health workforce.



Five Things to Know about Access to Oral Health Care and the Workforce

- 1 **Nearly 70 million Americans** live in dental health professional shortage areas, which are defined as areas with a population-to-provider ratio of at least 5,000 to one, or 4,000 to one if there are unusually high needs in the community.

- 2 **Rural Americans are more likely to experience tooth decay** (caries) and [twice as likely](#) to lose their adult teeth as their urban counterparts. Caries is the most common chronic disease in U.S. children, affecting approximately [23%](#) of children ages 2 to 5.

- 3 **Patients may be more comfortable receiving care or information** from a provider of their own race or a member of their community. In 2020, nearly [seven out of 10](#) dentists were white, with disproportionately lower representation of Black, Hispanic and Native American dentists.

- 4 **The high student debt** resulting from the cost of dental education may drive the distribution of the oral health workforce, increasing the likelihood that graduates will choose to practice in affluent areas. Dentists typically have the highest debt among major health professionals (approximately [\\$300,000](#)).

- 5 **Today's oral health workforce consists of more than 750,000 professionals**, including dentists, dental hygienists, dental therapists and community dental health coordinators. Those professionals serve [55%](#) of the U.S. population, including those with commercial insurance, Medicaid and self-pay.

Five Opportunities for States to Consider to Strengthen the Oral Health Workforce

1

Support dental schools and incentivize students to practice in dental health professional shortage areas.

In 2022, [Tennessee's](#) budget included \$11.8 million to expand the class sizes at the state's dental schools and to recruit and retain dentists through loan repayment programs.

[Maine](#) permits [eligible dentists](#) practicing in certain dental health professional shortage areas and medically underserved areas, including rural areas, to receive up to \$25,000 in loan forgiveness.

2

Diversify the oral health workforce by tapping into community leaders who may help facilitate access to care.

[Arizona](#) created a [licensing and regulatory structure](#) to allow dental therapists to fill cavities, place temporary crowns and perform certain tooth extractions. Practice is limited to certain entities.

[Illinois](#) regulates community health workers, frontline public health workers who can help with language, cultural and trust barriers for clients navigating the health care system. Through a [grant](#) from HRSA, the state trains these workers on the basics of oral health promotion in collaboration with local community colleges.

3

Consider opportunities for health care professionals to reach children outside of the dentist's office, such as through primary care or school settings.

Most states permit dental hygienists to practice in schools or community settings. For example, [Georgia](#) authorized [licensed dental hygienists](#) to perform certain functions under general supervision in certain settings.

4

Extend dental services to those in oral health shortage areas via teledentistry or mobile dental clinics.

[Connecticut](#) addresses rural access to oral health services by allowing a [mobile dental clinic](#) to submit claims for Medicaid reimbursement for services within 30 miles from the fixed dental location associated with the clinic.

[Montana](#) requires insurers to cover [teledentistry services](#) if that same service would be covered during an in-person visit.

5

Increase incentives for providers to treat publicly insured patients.

Several states have adopted policies that provide financial incentives or remove barriers that may prevent dentists from providing care to low-income patients. For example, [Virginia's 2022-2024](#) budget included a 30% fee increase in dental provider Medicaid reimbursement rates.