

Expand Access to Dental Care in Massachusetts

Sen. Chandler (S. 1169) & Rep. Pignatelli (H. 2474)

An Act Authorizing Dental Therapists to Expand Access to Oral Health would improve access to dental care by authorizing a new type of dental professional, a Dental Therapist, to serve our most vulnerable populations

The Importance of Oral Health

Oral health is critical to overall health. Research increasingly supports the importance of oral health to a number of other conditions including diabetes, heart disease, and perinatal outcomes. Poor oral health also has significant emotional impacts in the form of missed work/school days, lower job attainment, and poor self-esteem. Yet for many in Massachusetts, access to adequate dental care remains elusive.

Disparities & Access Challenges Persist

Despite recent progress on health care, many residents in Massachusetts struggle to access dental care. Reasons include not being able to find a dentist that accepts public insurance, the prohibitive cost of dental care, or challenges in travelling to a dentist's office. **A person's ability to receive adequate dental care is largely determined by age, race, income, insurance status, and geography.** If you are a senior living in the Berkshires or a child on MassHealth in South Boston, the reality is the same: it may be hard to get adequate dental care.

This is compounded by the fact that the majority of dental providers in MA do not accept Medicaid. In 2014 just 35% of dentists treated a MassHealth patient and only 26% billed at least \$10,000 to the program. Furthermore, MA has 62 federally designated dentist shortage areas including 69 cities/towns with no dentist at all; an estimated 244,000 people in those areas are not able to have their dental needs met.

Repercussions Reported: The High Cost of Untreated Dental Pain

When patients do not have access to a dentist, their oral health care needs often go unaddressed until the pain becomes so severe they seek relief in an emergency room.

- More than 30,000 Massachusetts adults visited ERs each year from 2008-2011 for dental conditions that likely could have been treated in a dentist's office.
- Repeat visits where patients came in 3 or more times accounted for 30% of visits, showing that the ED is wholly ineffective at treating causes of dental issues long-term and instead offer temporary pain relief.
- MassHealth paid \$11.6 million from 2008 to 2011 for emergency room dental care for adults.

Lack of access to adequate dental care negatively affects all individuals, but certain populations are especially harmed:

- 47% of children (1-21 years) on MassHealth did not see a dentist in 2014 – more than 290,000 kids.
- 17% of third-graders had untreated tooth decay in 2007. **African-American, Hispanic and low-income students had significantly higher rates of untreated decay than their white or higher income peers.**
- Low income seniors were 7 times more likely to have lost all their teeth than seniors with household incomes exceeding \$75,000 in 2014. **African-American seniors were twice as likely as white seniors to have lost all their teeth.**
- 59% of seniors in long-term care facilities had untreated tooth decay in 2009.
- **30% of adults with disabilities were missing six or more teeth in 2014, compared to only 10% of non-disabled residents.**
- 30% of adults with annual household incomes under \$25,000 were missing six or more teeth, compared to only 6% in households with incomes over \$75,000 in 2014.

How This Bill Will Improve Dental Access

This bill would create a new midlevel dental provider, the Dental Therapist. **Dental Therapists are trained to deliver basic but critically necessary care to underserved populations in the state.** Dental Therapists will work under the general supervision of a dentist, using telehealth technology to share X-rays and patient records with the dentist and consult on complicated cases. **This will allow Dental Therapists to bring care directly to people in schools, nursing homes, and other community settings.** Dental Therapists will deliver critical dental services like filling cavities, placing temporary crowns, and extracting loose teeth.

Dental Therapists Provide Quality Care & Improve Access: A Look at the Evidence

Similar practitioners in Minnesota have been providing preventive and basic restorative care in a variety of settings (private practices, community health centers, schools, nursing homes) since 2011. Evidence shows:

- The **quality of care** provided by dental therapists over the last 60 years was **consistently comparable to that of a dentist**, and in some studies was judged to be superior.
- Savings from the lower costs of dental therapists **allowed clinics to treat more Medicaid or uninsured patients.** One private practice that employs a dental therapist made an additional \$24,000 in profit and served an additional 500 Medicaid patients in the therapist's first year.
- A similar economic analysis done at Edward M. Kennedy Community Health Center in Worcester also showed that **hiring a dental therapist could allow them to see more patients and increase net revenue by \$60,000.**
- Similar providers have been practicing in Alaska for ten years, increasing access for 40,000 people living in rural communities, and Maine authorized them in 2014. Several more states and over 50 countries have embraced this model.

Please join our efforts to ensure that all individuals in Massachusetts are able to access the dental care they need.

For more information, contact Jeremy Crandall at jcrandall@pewtrusts.org

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