

Paving the Way for Dental Therapist: The fight to provide access to care

A groundbreaking new study on dental therapy by the Goldwater Institute was the feature presentation of a recent event presented by the Dental Care for Arizona Coalition. On April 11th, Deb Kappes, VP of AzDHA, joined a diverse group of advocates, stakeholders, and policy makers to learn about this provocative study and to dig a little deeper into the access to care challenges experienced in rural and tribal communities.

Naomi Lopez Baum, MA, Health Policy Director at the Goldwater Institute, the Arizona-based conservative and libertarian public policy think tank, is the author of the study, titled ["The Reform That Can Increase Dental Access and Affordability in Arizona"](#). The study's conclusion is summed up in the last line of the Executive Summary: "To increase dental access and affordability for Arizonans, lawmakers should allow for dental therapists". Before launching into the study, Ms. Lopez Baum acknowledged that access to care advocates and the Goldwater Institute may seem like strange bedfellows but not when you look a little deeper. She explained, "The Goldwater Institute is a national leader for constitutionally limited government and the role of government is to protect consumers by ensuring qualified practitioners, not to control the market, limit access, or protect the status quo."

Included in the study was background that summarized what we, as dental hygienists, know so well: Oral health matters and there is significant unmet need in Arizona. An interesting twist in the discussion, relevant to affordability and patient safety, came when she called our attention to the Mexican town of Los Algodones, dubbed "Molar City". This small town across the border near Yuma is home to about 5,500 residents – and 350 of them are dentists! It is not difficult to figure out who is being served by these dentists. She notes that Nogales is also a rising "dental tourism" destination. The care received across the border is not regulated by Arizona law and leaves these "dental tourists" without any patient protections or recourse if something goes awry. This begs the question: Why shouldn't we add well qualified dental therapists to the dental team if doing so could make treatment more affordable while ensuring the care received is safe?

Press Release

[Goldwater Institute Calls for a New Type of Dental Professional to be Allowed in Arizona.](#)

Will Humble, MPH, Executive Director of the Arizona Public Health Association, began his presentation with a thought provoking comment. He noted that when considering any means to increase access and affordability, we are always faced with balancing the risks associated with how and by whom treatment is rendered (patient safety) against the risks associated with no or insufficient dental

treatment. He shared some advocacy actions that can be taken immediately, intermediately, and in the long term.

Immediate actions include advocating to: 1) Fund adult emergency dental services for all Medicaid (AHCCCS) members, 2) Increase funding to the state's loan repayment program by \$350K (potentially allowing the state to qualify for a full \$1M in matching funds from HRSA) and on the federal level, 3) Encourage Congress to adequately fund the Health Resources and Services Administration (HRSA) in the FY2018 Labor, Health and Human Services, Education, and Related Agencies appropriations bill. To learn more about HRSA and why adequate funding is important, read the [Friends of HRSA letter](#) to Congress. Intermediate actions include: 1) Agencies should make sure they keep their Health Professional Shortage Area (HPSA) score worksheet up to date, 2) Foster teledentistry efforts throughout the state, and 3) Maximize the utilization of existing dental professionals, e.g. dental hygienists and community dental health coordinators (CDHC). And finally, in the long term, we should advocate for new types of providers, e.g. dental therapists.

An overview of some of the challenges faced by rural and tribal communities sparked an interesting discussion on how "social marketing" strategies might be used to recruit practitioners to these areas. For example, communities might use their website to highlight some of the less obvious benefits and amenities available in the area.

The last formal presentation of the morning came from Jamie Ritchey, MPH, PhD, Tribal Epidemiology Center Director, Inter Tribal Council of Arizona. As an epidemiologist, Dr. Ritchey is all about the data! She provided us with a data-driven look at the status of dental care among American Indians in Arizona. Here are a few of her summary points:

- Health Professional Shortage Area (HPSA) scores are important but have limitations and are often calculated differently across data sources.
- Dental spending informs us about those receiving care, but not about those that do not/cannot access care.
- Regardless of insurance status, about 11 – 20% of American Indian/Alaskan Natives and other groups could not get a needed dental service due to cost from 1990 – 2014.

In conclusion, she stated dental services are expensive and there is low utilization no matter what population we look at.

No doubt the conversation about access, affordability, and the controversy around dental therapy in Arizona will continue. These are complex issues and there is not a magic bullet or a single solution. Your professional association, the Arizona Dental Hygienists' Association, will continue to "be at the table" during these important conversations, advocating for innovative solutions to these challenges and the important role dental hygienists will play.