



5 Dental Therapy FAQs

Overview

An emerging type of provider is helping dentists in private practice and public health settings address the gaps in access to dental health care that many Americans face. People living in rural areas, low-income families, the uninsured, communities of color, people with disabilities, and certain age groups encounter the greatest barriers.¹ More than 48 million people live in areas of the United States with dentist shortages. The 72 million children and adults who rely on Medicaid and the Children's Health Insurance Program also face a scarcity of care: Only about one-third of U.S. dentists accept public insurance.

Q: What are dental therapists?

A: Dental therapists are midlevel providers, similar to physician assistants in medicine. Dentists hire and supervise dental therapists to expand quality care to more patients, grow their practices, and provide treatment to underserved at-risk populations in community settings, such as schools or nursing homes. Dental therapists provide preventive and routine restorative care, such as filling cavities, placing temporary crowns, and extracting badly diseased or loose teeth.

Q: How much education and training do dental therapists receive?

Dental therapists receive rigorous training in a select set of the most commonly needed routine procedures. Under the Commission on Dental Accreditation's national dental therapy accreditation standards, students must receive at least three academic years of full-time instruction, including clinical experience. However, programs such as Alaska's that use a year-round, full-time schedule can take as little as two years.² For specific areas of practice in which they overlap, dental therapists receive the same training as dentists. They also are taught how to effectively collaborate with dentists.

Q: Where is dental therapy practiced?

The Alaska Native Tribal Health Consortium introduced dental therapists to Alaska's tribal communities in 2004. The new providers were authorized in compliance with federal law and were the first such workers in the nation.

Minnesota in 2009 approved the nation's first statewide legislation to authorize dental therapists.

Maine and Vermont enacted legislation in 2014 and 2016, respectively, authorizing dentists to hire dental therapists, and the states are now working to implement the laws and create training programs.

The Swinomish Indian Tribal Community, located in Washington state, hired a dental therapist in January 2016.

Oregon approved a pilot in February 2016 allowing two local tribes to hire dental therapists.

More states—including Arizona, Kansas, Massachusetts, Michigan, New Mexico, and Ohio—are considering legislation, pilots, and other proposals to authorize midlevel providers. Additionally, more than 50 countries allow dental therapists to provide routine preventive and restorative care.³

Q: Do dental therapists provide quality care?

Research shows that dental therapists deliver high-quality, safe care: More than 1,000 studies from across the globe found no quality concerns for these midlevel providers.⁴ Since dental therapists began practicing in Minnesota and Alaska, no malpractice claims have been filed.⁵ In addition, more than 40,000 Alaska Native people have regular access to dental care because of the addition of dental therapists to dentists' teams.⁶

Q: How can dental therapists help dentists?

Dental therapists can help dentists provide routine services to more patients, expand their practices, and generate additional revenue. Dentists can oversee dental therapists without being physically present, which offers maximum flexibility when employing dental therapists, whether in the dental office to expand operating hours or in community-based settings.

Dental therapists earn lower salaries than dentists, so incorporating them into the team can also help dentists provide more cost-effective care. By delegating some of the routine procedures to these midlevel staff members, dentists can lower their per-unit costs, treat more patients, and generate higher revenue. In one case study, a private practice dentist who hired a dental therapist saw patient visits increase by 27 percent and the number of new patients grow 38 percent in the first year. The practice also treated more than 200 additional Medicaid patients and earned nearly \$24,000 in additional profit.

Endnotes

- 1 National Institute of Dental and Craniofacial Research, "Oral Health in America: A Report of the Surgeon General," U.S. Department of Health and Human Services (2000), <http://www.nidcr.nih.gov/DataStatistics/SurgeonGeneral/sgr/welcome.htm>.
- 2 U.S. Public Health Service, Dental Category, "Alaska Dental Health Aide Therapist Program FAQs," <https://dcp.psc.gov/osg/dentist/documents/AKDentalHealthAideFAQs508.pdf>; Alaska Native Tribal Health Consortium, "Curriculum & Application: Curriculum for ANTHC's Dental Health Aide Therapist Educational Program," accessed April 20, 2016, <http://anthc.org/dental-health-aide/students>.
- 3 David A. Nash et al., "Dental Therapists: A Global Perspective," *International Dental Journal* 58, no. 2 (2008): 61-70, <http://www.ncbi.nlm.nih.gov/pubmed/18478885>.
- 4 David A. Nash et al., "A Review of the Global Literature on Dental Therapists," *Community Dentistry and Oral Epidemiology* (2013), <http://onlinelibrary.wiley.com/doi/10.1111/cdoe.12052/abstract>.
- 5 Minnesota Department of Health and Minnesota Board of Dentistry, "Early Impacts of Dental Therapists in Minnesota" (February 2014), <http://www.health.state.mn.us/divs/orhpc/workforce/dt/dtlegisrpt.pdf>; Patrick Blahut, deputy director, U.S. Indian Health Service, Division of Oral Health, pers. comm., March 18, 2015.
- 6 Alaska Native Tribal Health Consortium, "Dental Health Aide," accessed April 19, 2016, <http://anthc.org/dental-health-aide>.

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