



The Dental Crisis in New Mexico

Access, Dental Therapists and Considerations

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EXAMPLES OF THE PROBLEM

889,463 New Mexicans live in Dental Care Professional Shortage areas.

67% of dentists work in ABQ and Sta Fe.

25% of NM children in school have caries.

Under 50% of those on Medicaid do not use their benefit - not able to access a provider.

Source: [kff.org/other/state-indicator/dental-care-health-professional-shortage-areas-hpsas/?currentTimeframe=0&sortModel=%7B%22collid%22:%20%22Percent%20of%20Need%20Met%22,%22sort%22:%20%22asc%22%7D](https://www.kff.org/other/state-indicator/dental-care-health-professional-shortage-areas-hpsas/?currentTimeframe=0&sortModel=%7B%22collid%22:%20%22Percent%20of%20Need%20Met%22,%22sort%22:%20%22asc%22%7D) Sept, 2020





People living in rural areas, low-income families, the uninsured, communities of color including tribes, people with disabilities, veterans and certain age groups encounter the greatest barriers to receiving dental care.¹ Those on Medicaid also face a scarcity of care: Only about **one-third of U.S. dentists accept public insurance.**

<http://www.nidcr.nih.gov/DataStatistics/SurgeonGeneral/sgr/welcome.htm>.



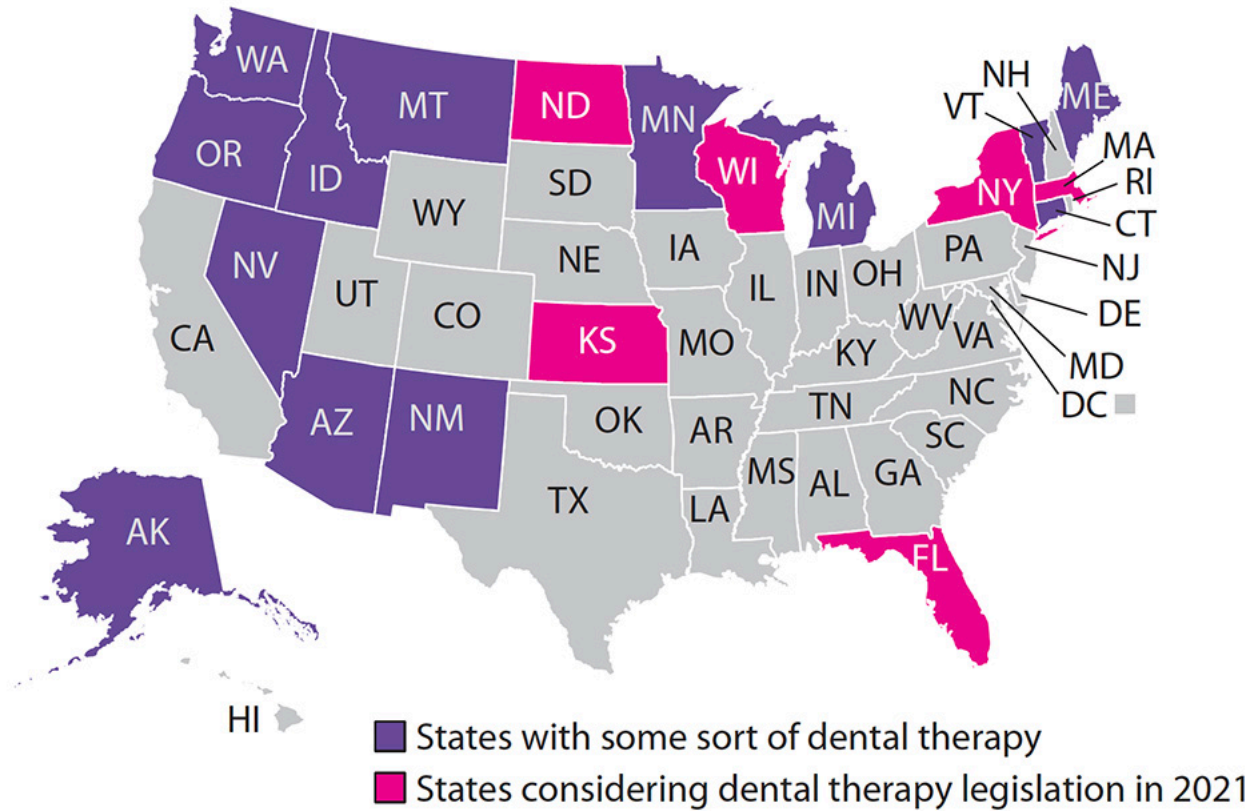


One response has been dental therapists -

- ✓ Dental Therapists are mid level providers akin to physician assistants.
- ✓ They receive a minimum of 3 years training in dental programs accredited by the Commission on Dental Accreditation.
- ✓ Dental Therapists receive rigorous training in a select set of the most commonly needed routine procedures.
- ✓ The quality of dental therapists has been studied in over 1000 studies around the globe. In the US two 10 year studies have been completed in Alaska and Minnesota showing high quality outcomes..
- ✓ Dental therapists started out in the states 18 years ago in Alaska and in the lower 48 in MN five years later.
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States who currently who have passed dental therapist legislation or are considering



Federal oral health initiatives and trends

- Democratic 2020 Platform (as had previous GOP platform) calls for the expansion of dental therapy.
- The removal of 10-year prohibition on funding alternative dental workforce demonstration programs
- BIA is moving forward programming and funding for IHS Community Health Aide Program for dental therapist (and mental health and primary care) and already has DT job description published.
- CODA has accredited its first DT program last fall and several more are in the process
- Dental in Medicare bill would allow DTs to bill.



New Mexico Dental Therapists



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- Dental Therapists Licensing Bill HB 308 passed in 2019
- HB 308 requires both a dental hygiene license as well dental therapist license. One third of states licensing dental therapists do not require this.
- NM Dental Healthcare Board immediately began the rule making process for dental therapists. Rules were finalized in April 2021. NM Dental Therapist Coalition was engaged with the Board during this process - both attending Board meetings and submitting written comments on proposed rules.
- Dental therapist's required practice setting in NM is with a FQHC or community health dental clinic.
- Main disagreement was over the final rule requiring a mandated exam by the supervising dentists after a patient is seen by a dental therapist unless patient has been seen by the supervising dentist in the past 11 months. No other state has imposed this restriction.
- Tribes in NM did not want the NM proposed model of dental therapist and exercised sovereignty in HB 308 to set up dental therapist programs on tribal lands as long as trained at CODA accredited facilities. Would not be licensed under NM DT law. Southwest Indian Politechnic Institute (SIPI) is currently undergoing a feasibility study to set up a DT training program.
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Dental Access Considerations/Recommendations

1. Governor's office consider appointments to the NM Board of Dental Care that more broadly represent NM to include FQHC, public health and tribal/IHS dental professionals.
2. Direct the NM Office of Oral Health to collect, analyze and disseminate statewide data on screening and application of sealants to primary and permanent molars and report annually.
3. Direct NMDOH's Office of Oral Health to provide technical assistance to pediatricians and clinics to apply fluoride varnish to children beginning with their first tooth with a goal to expand use of fluoride varnish to prevent caries.
4. Medicaid to provide "expedited dental access" to pregnant women both on Medicaid and pregnant women only program. Expedited access would mean educating pregnant women early in their pregnancy about the importance of seeking dental care and assuring them timely access to dentists accepting Medicaid.



Dental Access Considerations/Recommendations

5. It is time to talk about more integrated care of dental and medical care. NM has one of the country's most robust FQHC systems. With the co-location of at least 45 sites with dental and medical care, it would be an exciting step for Primary Care Association (and HRSA) to consider cross utilization of data and in some cases services for a more integrated approach.





NM Dental Opportunities

- ❑ NM has a **well-developed community college** system. Expanding dental therapy in the future utilizing this system would increase job opportunities and more home grown providers.
- ❑ The pandemic uniquely showed us:
 - the importance of a public health, **population health approach** to health care.
 - the **inequities** in our current health reality. This is especially true in the lack of access to dental care.
 - **Now is the time to invest in equitable dental access.**



➤ **LEARN MORE!!!**

➤ <https://www.facebook.com/dentaltherapynm/>

➤ National Partnership for Dental Therapy

➤ <https://www.dentaltherapy.org/>

➤ National Indian Health Board - Tribal Oral Health Initiative:

➤ <https://www.nihb.org/oralhealthinitiative/>

➤ National Coalition of Dentists for Health Equity

➤ <https://www.dentaltherapy.org/the-national-coalition-of-dentists-for-health-equity-dhe>

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