

## **In Support of Legislation to Develop Advanced Dental Hygiene Practitioners**

By

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Millions of adults and children in the United States have inadequate access to dental care, which results in serious oral health problems. They experience, on a daily basis, untreated dental disease that causes painful, debilitating and life-threatening infections resulting in absence from school, loss of work and income, and, in the extreme, death. These problems are particularly acute for people of low income who live in inner cities and rural areas where there is a chronic shortage of health care professionals. Expanding the oral health care workforce to include Advanced Dental Hygiene Practitioners, as proposed in HB 5541, will allow access to basic dental care for this underserved population, which has long been neglected by traditional dental providers

In year 2000, the Surgeon General of the United States issued a report, *Oral Health in America*, which detailed an increasing shortage of dentists as a result of the expanding population and the retirement of dentists from active practice, who are barely being replaced by new dentists. (1) The report estimated that 25 million individuals reside in areas lacking adequate dental service. This number has likely increased since then, along with the increased shortage of dentists.

Even in areas where there is not a shortage of dentists, the disadvantaged population is often denied access to care in traditional private dental practices for reasons that are well known: the high cost of fee-for-service and the refusal of many dentists to accept the lower payments of Medicaid; the disinclination of many dentists to treat poor and minority children, or to treat children at all.

Dental therapists have been providing basic dental care — preventive, restorative and minor surgical treatment — mostly for children in government-sponsored programs in more than 53 countries, beginning in New Zealand in 1923. (2) Many independent studies have affirmed their technical quality of care and competency as equal to that of dentists within their clearly defined scope of practice. Since 2005, they have been effectively serving native Alaskan adults and children in remote communities. (3) If it was not for the longstanding opposition of the national and state dental associations, we would have long since had dental therapists to provide care to our underserved populations.

In conclusion, the evidence is overwhelming that there presently exists a shortage of dentists in the United States as a whole; the shortage is increasing; there is an oral health care crisis that cannot be alleviated by the current and anticipated future supply of dentists; and the development and deployment of dental therapists is a safe, logical, and economical addition to the dental workforce to serve the underserved population.

### References:

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