

Oral Health Barriers and Disparities

Barriers for Patients

- Lack of Insurance / Financial Resources
- Lack of Providers in their Community
- Transportation Issues
- Unable to take time from School/Work

Workforce to provide care

As of June 30, 2013

4493 Dentists Licensed in Arizona: Focus is Repairing Oral Disease

3898 Dental Hygienists Licensed in Arizona: Focus is Preventing Oral Disease

45 Affiliated Practice Dental Hygienists have Collaborative Agreements with Affiliated Dentists on File with Board of Dental Examiners: Provide Preventive Treatment under Standing Orders

Barriers for Workforce

- ❖ Supervision Restrictions for Dental Hygienists
- ❖ Not all Dentists employ Dental Hygienists
- ❖ Credentialing Issues to be Providers for AHCCCS
- ❖ Expense of Teledentistry Equipment @ \$40,000
- ❖ Expense of Supplies
- ❖ Constantly Soliciting Grant funding

Challenges for Providers to be Reimbursed by AHCCCS

- Plans Credentialing Seems Arbitrary- may have Too Many (?) Providers in Zip Code
- No Category for Affiliated Practice Hygienists to be Credentialed
- Denials for Reimbursement of AP Hygienists services prior to Dentist Exam
- Teledentistry not included in AHCCCS Telemedicine Policy
- Both AP RDH and AP DDS must be AHCCCS Providers
- AP RDH usually has to bill AHCCCS through AP DDS (Delay in Payment)
- No Adult/Disabled Benefits Available

Statutes Currently Permit ANY Registered Dental Hygienist

To See Patients in Nursing Home, Health Care Facility, Public Health Agency, Public or Private School, or Homebound **IF** they have seen a Dentist in the Previous Twelve Months

Place Sealants **IF** First Examined by a Dentist

Statute Requires AP Hygienist Patients

To Be Seen By Dentist for Exam within 12 months of Initial Treatment or Can Not Provide Further Care

Must Refer to AP Dentist for Diagnosis and Treatment Plan

Cost Effectiveness of Prevention

For Every \$1 Spent on Prevention you Save a Minimum of \$5 on Repair

Healthier Child/Adult Means Fewer Lost School/ Work Hours Due to Oral Pain

Reduces Medical Expenses for Patients with Cardiac Issues, Diabetes, Respiratory Issues (COPD), Low Birth Weight Babies (Cost Approximately \$150,000 in Neonatal Critical Care)

Fewer Emergency Room Visits for Oral Pain (Arizona ER Visits with Oral Diagnosis Up 29% from 2009-2011 with Charges Up 69% during the Time Period— Cost over 20 MILLION Dollars!)

Resources for Further Study

National Governor's Association Report on Dental Hygienists

“The Role of Dental Hygienists in Providing Access to Oral Health Care”

www.NGA.org click on Publications issued January 6, 2014

www.adha.org FTC Comments on Dental Therapy issued January 2014

Want To Help Find Solutions To These Barriers? Contact:

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