



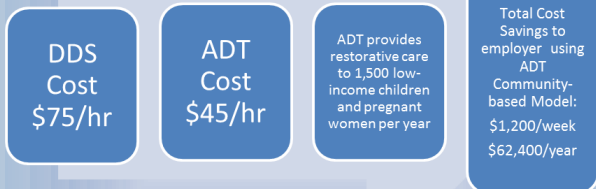
Children's Dental Services

Since 1919, Children's Dental Services (CDS) is dedicated to improving the oral health of children from families with low incomes by providing accessible treatment and education in our diverse community.

Dental Therapy in Minnesota: Update 2014

FINANCIAL IMPACT:

Cost-benefit analysis based on a Dental Therapist providing services covered under the DT statute for 2,080 hours per year in a public health dental clinic:



EFFECTIVE PROVIDER TYPE ACROSS SETTINGS

Successful integration of therapists in the oral health community is occurring in a variety of employment settings, including:

- ◆ Hospitals
- ◆ Community-based clinics
- ◆ Private Practice
- ◆ FQHCs
- ◆ Nursing Homes
- ◆ School-based settings

A Minnesota Department of Health study of 15 clinics employing dental therapists found:

- Nearly 1/3 of patients experienced shorter wait times since the dental therapist was employed, with the impact more pronounced in rural areas
- Dental therapists may reduce emergency room use by expanding capacity at dental clinics serving vulnerable populations.

For the full report, visit :

<http://www.health.state.mn.us/divs/orhpc/workforce/dt/dtlegisrpt.pdf>

CHILDREN'S DENTAL SERVICES: SERVICE STATISTICS

- CDS' therapists are highly productive members of staff, with production outcomes consistently at or above the average for staff dentists.
- CDS has found that average production among dentists has increased since integrating dental therapists into the clinical provider team.
- Minnesota's first credentialed ADT has spent 80% of the 2013-2014 academic year in school and community-based settings, including in rural Minnesota where access to care is even most limited.
- Since December of 2011, CDS' ADT has provided care to 5,577 patients. 80% of patients had public insurance and 13% were uninsured.

ACCESS TO DENTAL CARE IN MINNESOTA

Of the 87 counties in Minnesota 62, or more than 70% of the state, have been designated as dental Health Professional Shortage Areas. With the addition of Dental Therapists and Advanced Dental Therapist to the state oral health workforce, care is more widespread and easily accessible. According to the PEW Center on the States, a team approach to dentistry has been found to be the most effective and provide the most access to dental care:

*“In solo private dental practices—where most dentists work—adding new types of providers and dental hygienists produced gains in productivity and **increased earnings by a range of 17 to 54 percent.** Dentists who operate a practice by themselves can increase their pre-tax profits by six or seven percent by accepting more Medicaid-enrolled children and hiring either a DT or a hygienist-therapist.”*

Children's Dental Services' (CDS) initial production statistics integrating an ADT into its workforce are promising. Since January 2012 the ADT consistently ranks within the top half of providers in total production; the DTs also produce competitively, typically above average. All therapists contribute significantly to the overall workload of CDS, together serving over 5,000 patients per year. The chart to the right depicts one month of production from January 2014.



Advanced Dental Therapist Christy Jo Fogarty, pictured with patient, was the first credentialed ADT in Minnesota.

DDS Code	Total Production Charges	Total hours worked	Average Total Production (per hour)
DR52 - GA	17,200	14.15	\$1,215.55
DR11-Endo	5,361	8.15	\$657.79
DR43	14,294	24	\$595.58
DR45	13,858	26.48	\$523.34
DT07	10,067	23.45	\$429.30
DR04	846	2	\$423.00
ADT01	43,496	108.15	\$402.18
DR24	46,796	117.47	\$398.37
DR20	33,341	91.25	\$365.38
DT09	29,327	83.55	\$351.01
DR53	27,714	80	\$346.43
DR12	32,694	111.51	\$293.19
DR01	31,994	111	\$288.23
DR36	29,311	106.51	\$275.19
DR44	30,611	114	\$268.52
DR54	14,565	65.55	\$222.20