North Dakota Oral Health Status

Dental Services Network Team Meeting
Community HealthCare Association of the Dakotas
July 14, 2016

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Assistant Professor, Research
Center for Rural Health
Center for Rural Health

- Established in 1980, at The University of North Dakota (UND) School of Medicine and Health Sciences in Grand Forks, ND
- One of the country’s most experienced state rural health offices
- UND Center of Excellence in Research, Scholarship, and Creative Activity
- Home to seven national programs
- Recipient of the UND Award for Departmental Excellence in Research

Focus on
- Educating and Informing
- Policy
- Research and Evaluation
- Working with Communities
- American Indians
- Health Workforce
- Hospitals and Facilities

ruralhealth.und.edu
State Oral Health Legislation

• Senate Bill 2205
  • State loan repayment programs for DDS
  • Incentives for rural
• Senate Concurrent Resolution no. 4004
  • Continued study of dental services
  • Case management
  • Mid-level providers
North Dakota Oral Health Assessment

- Pew Charitable Trusts
- Complete Report & Executive Summary
  - State oral health status
  - Demographic variations
  - Need
  - Current programs
  - Stakeholder recommendations

https://ruralhealth.und.edu/projects/nd-oral-health-assessment
North Dakota Oral Health Assessment

- Pew Charitable Trusts
- ND Department of Health Oral Health Program
  - DentaQuest: Long Term Care Oral Health Services
  - CDC: Assessment of Pediatric Varnish Application
Oral Health

The Center for Rural Health works in a variety of ways to address oral health issues in North Dakota. We support North Dakota rural communities in addressing oral health issues by:

- Evaluating unmet needs and existing workforce capacity for oral health care statewide
- Examining the impact of efforts to improve access to dental services
- Analyzing oral health data and oral health status in the state
- Collaborating to provide resources for best practices and proposed models of oral health care
- Assessing oral health services among long term care facilities
- Researching knowledge of pediatric oral health preventative measures among clinic providers

The Center for Rural Health’s Rural Health Information Hub lists additional oral health information and resources.

Key Contact
Shawnda Schroeder, PhD - Research Assistant Professor

For recent publications and past presentations, visit the CRH Oral Health webpage at: https://ruralhealth.und.edu/what-we-do/oral-health
New Oral Health Products

• Oral Health Workforce Factsheet
• FQHC Policy Brief
• Varnish Application Factsheet
• Varnish Application Chartbook
• Long Term Care Oral Health Chartbook
• Long Term Care Oral Health Program Post Assessment
• Long Term Care Oral Health Services Factsheet
Oral Health Products in Development

• Pediatric Oral Health Factsheets
  • Oral Health Status
  • Oral Health Social Factors
• Dental Hygiene Workforce Survey Factsheet
• Dental Workforce Survey Factsheet
Community Health Centers: Oral Health

- 5 Federally funded CHCs at 18 sites in North Dakota
- Oral health services are provided directly by 3 CHCs in a total of 6 satellite locations

<table>
<thead>
<tr>
<th>Location</th>
<th>Health Center</th>
</tr>
</thead>
<tbody>
<tr>
<td>Turtle Lake</td>
<td>Northland Health Centers</td>
</tr>
<tr>
<td>Rolette</td>
<td>Northland Health Centers</td>
</tr>
<tr>
<td>Minot</td>
<td>Northland Health Centers</td>
</tr>
<tr>
<td>Fargo</td>
<td>Family Healthcare Center</td>
</tr>
<tr>
<td>Moorhead, Minnesota</td>
<td>Family Healthcare Center</td>
</tr>
<tr>
<td>Grand Forks</td>
<td>Valley Community Health Centers</td>
</tr>
</tbody>
</table>
Who do CHCs Serve in North Dakota?

<table>
<thead>
<tr>
<th></th>
<th>ND CHC Population</th>
<th>ND Population</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Health Insurance</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Uninsured</td>
<td>34%</td>
<td>9%</td>
</tr>
<tr>
<td>Medicaid</td>
<td>23%</td>
<td>9%</td>
</tr>
<tr>
<td>Medicare</td>
<td>10%</td>
<td>13%</td>
</tr>
<tr>
<td><strong>Race/Ethnicity</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hispanic</td>
<td>6%</td>
<td>3%</td>
</tr>
<tr>
<td>African American</td>
<td>10%</td>
<td>2%</td>
</tr>
<tr>
<td>Asian/Pacific Islander</td>
<td>5%</td>
<td>1%</td>
</tr>
<tr>
<td>American Indian/Alaska Native</td>
<td>7%</td>
<td>5%</td>
</tr>
<tr>
<td>White</td>
<td>73%</td>
<td>89%</td>
</tr>
<tr>
<td><strong>Income Status</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>≤100% FPL</td>
<td>61%</td>
<td>10%</td>
</tr>
<tr>
<td>&lt;200% FPL</td>
<td>91%</td>
<td>24%</td>
</tr>
</tbody>
</table>

CHCs located in rural areas also served 58% of the total CHC patient population in North Dakota.
Dental Health Professional Shortage Designations: Single Counties, April 2016

https://datawarehouse.hrsa.gov/Tools/MapToolQuick.aspx?mapName=HPSADC#
2016 State Oral Health Workforce

Number of Providers with an Active License & Practicing in ND, March 2016

Dentists: 438 Licensed in ND, 405 Employed in ND
Dental Hygienists: 776 Licensed in ND, 644 Employed in ND
Dental Assistants: 682 Licensed in ND, 590 Employed in ND

Data provided by the North Dakota Board of Dental Examiners, March 2016
The red line (–) indicates the percent of the state population within that geographic category.

Data provided by the North Dakota Board of Dental Examiners, March 2016
Oral Health Access for Medicaid Enrollees

• In 2013, 249 dental practices billed for at least one Medicaid patient in the calendar year
  • 65 (26%) of those practices saw more than 100 Medicaid patients

• 58% of Providers seeing Medicaid patients only accounted for 11% of Medicaid patients seen
  • 8% of the dental practices billing Medicaid in 2013 provided care to 52% of the Medicaid enrollees accessing dental services

Data provided by the North Dakota Department of Health & Human Services, State Medicaid
Percent of Facilities with List of Dental Providers for Referral by Rural-Urban Status \((n = 42)\)

<table>
<thead>
<tr>
<th>Status</th>
<th>Rural</th>
<th>Urban</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>80%</td>
<td>59%</td>
</tr>
<tr>
<td>No</td>
<td>20%</td>
<td>35%</td>
</tr>
<tr>
<td>Do Not Know</td>
<td>6%</td>
<td></td>
</tr>
</tbody>
</table>

Active List of Dental Providers for Resident Referral

Data provided by the North Dakota Center for Rural Health, LTC Survey 2015
Provider Responsible for Initial Oral Health Exam of New LTC Residents

Oral health was a high or essential priority for 72% of LTC facilities. However:
• Only 50% had a written plan of care for dental needs
• A dental professional reviewed/assisted with the written plan of care among only 3 facilities
• Only 6% of facilities indicated the initial oral health exam was completed by a dental professional

Data provided by the North Dakota Center for Rural Health, LTC Survey 2015
Varnish Application in Clinical Settings

Percent of Practices where Providers Conduct Oral Health Risk Assessments

Data provided by the North Dakota Center for Rural Health, Varnish Survey 2015
Primary Care Varnish Application

• A majority of pediatricians (60%) and family practice physicians (82%) replied that no one within the clinic provided varnish.
• Only 31% believed that other physicians were aware that it was a reimbursable service.
• 90% of pediatricians and 82% of family practice physicians either agreed or strongly agreed that fluoride varnish was an effective preventative oral health care measure.
• Providers agreed/strongly agreed that well-child visits were an appropriate time for both varnish application (60%) and the oral health risk assessment (86%).
• If required as part of the well-child checklist, many also believed they would be done.

Data provided by the North Dakota Center for Rural Health, Varnish Survey 2015
North Dakota Third Grade Students

Oral Health Status of North Dakota Third Grade Students: Racial Disparities

Percent of 3rd Grade Students

Data provided by the North Dakota Department of Health, Basic Screening Survey of Third Grade Students
Oral Health Status of North Dakota Third Grade Students: Income Disparities

Data provided by the North Dakota Department of Health, Basic Screening Survey of Third Grade Students
Barriers to Growing Oral Health Workforce in North Dakota

• No School of Dentistry
• Cost of out-of-state education
  • Loan repayment programs
• Cost of developing a new practice
  • Loan repayment programs
• Limited opportunities for student residencies
  • Heightened concern for rural and tribal communities
Case Management: Senate Concurrent Resolution 4004

- Case Management Outreach (CMO) to target high-risk patients in community settings utilizing current workforce
- Services provided by dental assistants and hygienists and reimbursed through collaborative dental offices to link high-risk patients to dental homes
- Need to create service reimbursement: Medicaid
Dental Therapy

- CODA Accreditation
- State Participation
  - Alaska
  - Minnesota
  - Maine
  - Vermont
  - Kansas
  - New Mexico
  - Washington
Types of New Provider Types

- Dental Health Aide Therapist (DHATs)
- Advanced Dental Therapist
- Dental Therapists

How do we incentivize practice in rural communities and in our CHCs?
Contact us for more information!

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