Dental Safety Net in Iowa (DSNI)
Webinar #2

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Project update:
Dentist Survey, Background Report & Next Steps

February 28, 2013

Support provided by Dentaquest Foundation and
The Commonwealth Fund
Steering Committee

Pete Damiano (PI)
Ray Kuthy (Co-investigator)
Susan McKernan (Co-investigator)
Elham Kateeb (Co-investigator UI OSU)
Julie Reynolds (Grad Research Asst.)
Nancy Adrianse (Iowa PCA)
Sarah Dixon Gale (Iowa PCA)
## Today’s National Advisory Committee Webinar Participants

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<tr>
<td>Cathy Coppes</td>
<td>Wayne Cottam</td>
<td>Jim Crall</td>
<td>Isabel Garcia</td>
<td>DaShawn Groves</td>
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<td>Larry Hill</td>
<td>Jaime Hirschfeld</td>
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<td>Mike Kanellis</td>
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<td>Janice Kupiec</td>
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<td>Mary Mariani</td>
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<td>Michael McCunniff</td>
<td>Beth Mertz</td>
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<td>Pamela Riley</td>
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<td>Maria Rosa Watson</td>
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<td><strong>DentaQuest reps</strong></td>
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<td>Matthew Bond</td>
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<td>Andrea Forsht</td>
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<td>Mike Monopoli</td>
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Today’s Topics

- Progress Update
- Background Report
  - Overview
  - Discussion
- Next steps
Project Phases

1. Establish a National Oral Health **Advisory Committee**
   - Done

2. **Survey private dentists** about Medicaid participation and attitudes
   - In the field

3. Compile a **background inventory report** on oral health in Iowa, especially as it relates to vulnerable populations
   - Draft completed
Project Phases

4. Conduct **conjoint analysis** to determine factors affecting dentist participation in Medicaid
   - Follows dentist survey

5. Assess the **capacity of FQHC** dental clinics in Iowa
   - Concurrent with similar study of medical care capacity as part of CMWF project

6. Develop **policy recommendations** to improve the safety net and increase public/private collaborations
   - After data are collected
Dentist Medicaid Survey

• Draft reviewed at last webinar
• Mailed out **Feb 19**
• Modifications:
  • Mailed to **all** dentists (not just primary care)
  • Added questions about use of expanded function dental assistants (EFDAs)
• Responses will be linked with demographic data from the Iowa Dentist Tracking System
New: Use of expanded function dental assistants

Finally, we would like to ask you some questions about Expanded Function Dental Auxiliaries (EFDAs).

The Iowa Dental Board has convened a task force to look at the possibility of increasing the number of procedures that EFDAs (Dental Assistants and Dental Hygienists) can perform under the supervision of a dentist. Auxiliaries would be required to receive additional education and demonstrate competency in order to provide each procedure. The following questions are intended to explore Iowa dentists’ attitudes about additional expanded functions.

21. The state of Iowa currently allows EFDAs to perform the following duties. Do you ever delegate any of these duties to an EFDA in your practice? (Circle yes or no.)

<table>
<thead>
<tr>
<th>Category</th>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>a. Remove temporary crowns</td>
<td>Yes</td>
<td>No</td>
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<tr>
<td>b. Take final impressions</td>
<td>Yes</td>
<td>No</td>
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<tr>
<td>c. Fabricate temporary crowns</td>
<td>Yes</td>
<td>No</td>
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<tr>
<td>d. Apply cavity liners, bases, desensitizing agents, or bonding systems</td>
<td>Yes</td>
<td>No</td>
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<tr>
<td>e. Test pulp vitality</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>f. Take occlusal registrations</td>
<td>Yes</td>
<td>No</td>
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<tr>
<td>g. Placement and removal of gingival retraction</td>
<td>Yes</td>
<td>No</td>
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Survey Domains

**New:** Use of expanded function dental assistants

22. If the practice act was changed, would you ever consider having a trained and tested expanded function dental auxiliary (EFDA) provide any of the following services in your practice? (Circle yes or no.)

<table>
<thead>
<tr>
<th>Service</th>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>a. Removal of cement/adhesives following permanent cmentation of crowns/bridges</td>
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<tr>
<td>b. Place and shape amalgam restorations following preparation of a tooth by a dentist</td>
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<td>c. Place and shape composite restorations following preparation of a tooth by a dentist</td>
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<tr>
<td>d. Fit and cement stainless steel crowns on primary teeth</td>
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<td>e. Take final impressions and records for the fabrication of dentures and partial dentures</td>
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<tr>
<td>f. Cement final restorations (crowns, fixed partial dentures)</td>
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23. How seriously would you consider covering the costs to send one of your own dental auxiliaries, with multiple years of experience, to a course where they could become certified to provide the services listed in Question 22?

- 1. Not at all seriously
- 2. Slightly seriously
- 3. Moderately seriously
- 4. Extremely seriously
- 5. Not sure
Oral Health Background Report

Topics:
1. Population demographics
2. Oral health objectives
3. Oral health safety net
4. Financing of oral health care
5. Access & utilization
6. Oral health status
7. State oral health programs

Data Sources:
1. State and national health departments and agencies
2. Non-profit think tanks (eg, KFF, CDHP, Pew)
3. Peer-reviewed journal articles
4. Professional organizations (eg, ADA, ADHA, ASTDD, NACCHO)
Population Demographics

- Total population (2010): 3,074,186
- Less racial ethnic diversity compared to national average (see figure)
- 15% of the population is over age 64
  - Compared to 13% nationally
  - 5th highest proportion among all states

Racial/ethnic composition of Iowa versus the U.S. (2010)

Background report: page 4
Oral Health Objectives

• Water fluoridation efforts
• School-based oral health preventive services
• State oral health coalition
Oral Health Safety Net

Private dentists

- 1,366 private practitioners in 2010 (see figure)
- 53% of dentists in Iowa were over age 50 in 2011
- 1,131 dentists submitted claims to Medicaid in 2011
  - 40% were considered “active Medicaid providers”, with
    >$10,000 in paid claims in 2011

Background report: page 5
Oral Health Safety Net

FQHCs

14 FQHCs in Iowa
- Employ 34 FTE dentists, 22 FTE hygienists, and 82 FTE assistants
- 12 provide dental services
- Served 58,000 patients in 2011

Patient characteristics:
- 94% under 200% of the FPL
- 35% uninsured
- 38% are Medicaid enrollees
- 54% live in rural areas

Background report: page 9
Oral Health Safety Net

University of Iowa College of Dentistry

- Graduates approximately 80 dentists per year
- 76% of dentists in Iowa educated here
- Treated over 46,000 patients in 2012

Background report: page 13
Oral Health Safety Net

Dental Hygienists and Assistants

- 2,146 RDHs in Iowa (2012)
- 5 dental hygiene programs in the state
  - Graduate approximately 100 RDHs per year
- Dental assistants can be trained on-the-job or through a formal program, offered at 9 community colleges in Iowa
- Not good data for either workforce
- Perceived excess of hygienists due to growth in training programs

Background report: page 15
Oral Health
Safety Net

Other sources of care

- **Donated care & free dental programs**
  - Iowa Mission of Mercy events
  - Free dental clinics
  - Iowa Donated Dental Services (DDS) program

- **Emergency Departments (EDs)**
  - Approximately 18,000 visits to EDs in Iowa for dental conditions (excluding trauma) in 2009

- **Local health departments**
  - 102 LHDs in Iowa
  - Approximately 25% provide oral health services directly

Background report: pages 12-18
Oral Health Safety Net

Other sources of care

- **Long-term care facilities**
  - Approximately half of surveyed Iowa nursing home directors in 2007 reported that some dental services are provided on-site

- **School-based health centers (SBHCs)**
  - 16 SBHCs in Iowa (2009)
  - None of the 12 SBHCs responding to a 2008 survey provided dental services
State Oral Health Programs

- Head Start
- Fluoride varnish programs
- I-Smile Dental Home Project
  - Operates through 22 Title V agencies
  - 24 dental hygienists serve as regional coordinators (see figure)
  - 54% increase in number of kids receiving a dental service from a dentist since inception
  - Over 41,000 clients served in 2008
- WIC clinics

Background report: page 37
State Oral Health Programs

School-based sealant programs

- IDPH contracts with 7 local Title V agencies in 21 counties
- Additional sealant programs administered by other agencies
- Must serve 2nd & 3rd graders – may also serve 4th-8th graders
- Sealed 3,858 kids in 2010-2011

Legend
- Middle Schools - 50
- Elementary Schools - 234

Background report: page 39
State Oral Health Programs

Community Water Fluoridation

- 83% of the state population receives optimally fluoridated water (see figure)
- 92% of Iowans on community water systems (CWS’s) in 2010 receive optimally fluoridated water
  - 10th highest proportion of state residents in the nation

Background report: page 41
Financing

• Dental accounted for 4.5% of health care expenditures in Iowa in 2009
  • Compare to 4.9% nationally
  • Approximately $932 million spent in Iowa on dental
• Medicaid program spent $66.2 million on dental services in 2012
• 54% of Iowans had a dental expense in 2007
  • 47% paid out of pocket
  • Compare to 20% out of pocket for total health costs

Background report: page 19
Access & Utilization

Dental insurance

• 43% of Iowans lacked dental insurance in 2011
  • Compare to 36% nationally

• Higher rates of insurance coverage for children through Medicaid and CHIP
  • 82% of children in Iowa had some form of dental insurance in 2010

• Approximately 30% of American children with private medical insurance lacked dental coverage in 2009

Background report: page 21
Access & Utilization

Medicaid Enrollment

• 431,000 Iowans enrolled as of June 2011, of which:
  • 49% are children
  • 23% are adults
  • 28% are aged or disabled
  • 14% of the state’s population
Access & Utilization

Medicaid and CHIP enrollment for kids

Medicaid

- 18% of children in Iowa receive dental coverage through Medicaid
- In 2012, 234,000 children were enrolled in Medicaid for at least 1 month

hawk-i (Iowa’s CHIP)

- 3.5% of children in Iowa receive dental coverage through hawk-i (2010)
- 36,595 children enrolled in hawk-i (2011)
  - Including approximately 3,500 enrolled in the dental-only program

Background report: pages 23-24
Access & Utilization

Medicaid and IowaCare enrollment for adults

**Medicaid**
- Relatively comprehensive dental coverage for adult Medicaid enrollees

**IowaCare**
- 57,472 adults enrolled for at least 1 month in 2010
- Covers adults 19-64 years old with incomes <200% of the FPL who are not categorically eligible for Medicaid without other health insurance
- Limited dental services available at 2 locations:
  - Broadlawns Medical Clinic in Des Moines (limited restorative services & extractions)
  - University of Iowa Hospitals and Clinics in Iowa City (extractions only)

*Background report: pages 23-24*
Access & Utilization

Shortage Areas

• Overall state population-to-dentist ratio is 2,033:1
• 118 dental HPSAs in the state, including:
  • Approximately 14% of the state population resides in a dental HPSA
• Iowa has the 13th highest number of dental HPSAs in the nation
• In order to remove all shortage designations, Iowa would need to recruit an additional 55 FTE dentists

Background report: page 25
Access & Utilization

Utilization rates: Children

- 54% of Medicaid-enrolled children received a dental service in 2011 (see figure)
- Nationally: 40% of Medicaid enrolled children with a dental service in 2010

2010 Survey of 3rd graders:
- 81% of privately insured children in Iowa had a dental visit in the past 6 months
- 58% of self-pay children

Background report: page 29
Access & Utilization

Utilization rates: Adults

- 76% of all adults received a dental in the past year (2010) (see figure)

Medicaid

- 13% of MediPASS-enrolled adults reported unmet need for dental care in 2011

IowaCare

- 9% received dental services in the past 6 months
- 59% of those patients had a tooth extracted

Background report: page 31
Oral Health Status

Children & Adolescents

Open-mouth survey of 3rd graders (2012)
• Half of the children had prior caries experience
• 14% with untreated tooth decay

School dental screenings (2010-2011)
• 85% of kindergarteners and 9th graders had no obvious dental problems
• 13.5% required dental care
• 2% required urgent dental care

Parent-reported child oral health compared to physical health status (2011)

Background report: page 34
Oral Health Status

Adults & Elderly

Tooth loss (2010)
- 38% of adults have had a permanent tooth extracted
- 17% of adults age 65+ have had all of their natural teeth extracted
  - Compare to 25% nationally

Oral health status (2011)
- 61% of IowaCare enrollees perceived their oral health status to be poor versus 37% of adult Medicaid enrollees

Self-reported oral health compared to physical health status (2011)

Background report: page 36
ACA Implication: Iowa’s Medicaid Expansion

• Gov. Branstad recently confirmed his rejection of Medicaid expansion
• Has requested a waiver to continue IowaCare program (set to expire later this year)
• IowaCare population is a proxy for the uninsured in many other states and the Medicaid expansion population in Iowa
• Most chronically ill, high dental need
Discussion

1. Missing data/concepts?
2. Are there any gaps that we should highlight?
3. Important issues for ACA implementation and other oral health policy decisions?
4. How does this information compare with other sources you may be familiar with?
5. Any suggested changes to the structure/organization of this report?
## Timeline

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<th>Phase 1</th>
<th>Establish a National Advisory Committee</th>
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<td>Phase 2</td>
<td>Dentist Medicaid survey</td>
<td>February 2013</td>
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<tr>
<td>Phase 3</td>
<td>Compile inventory report</td>
<td>Draft completed</td>
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<td>Phase 4</td>
<td>Conjoint analysis dentist survey</td>
<td>May-June 2013</td>
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<td>Phase 5</td>
<td>Assess CHC capacity</td>
<td>Spring 2013</td>
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<td>Phase 6</td>
<td>Policy development</td>
<td>Summer 2013</td>
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