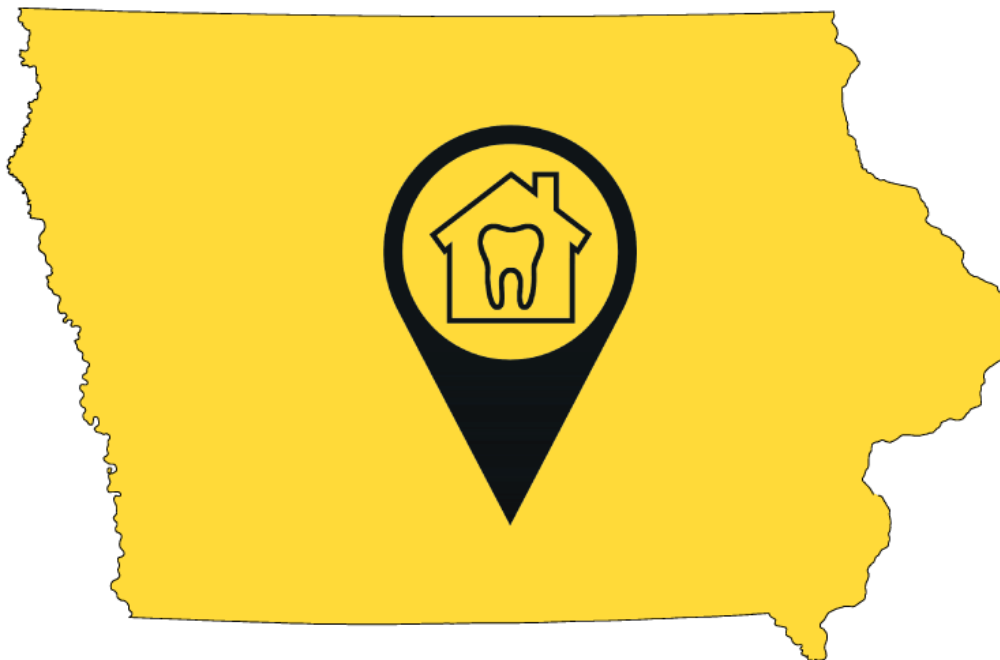


## Chapter 6: Iowa Dental Health Professional Shortage Areas



**Iowa Dentist Workforce Atlas, 1997-2016:  
20 Years of the Iowa Dentist Tracking System**



## Dental Health Professional Shortage Areas

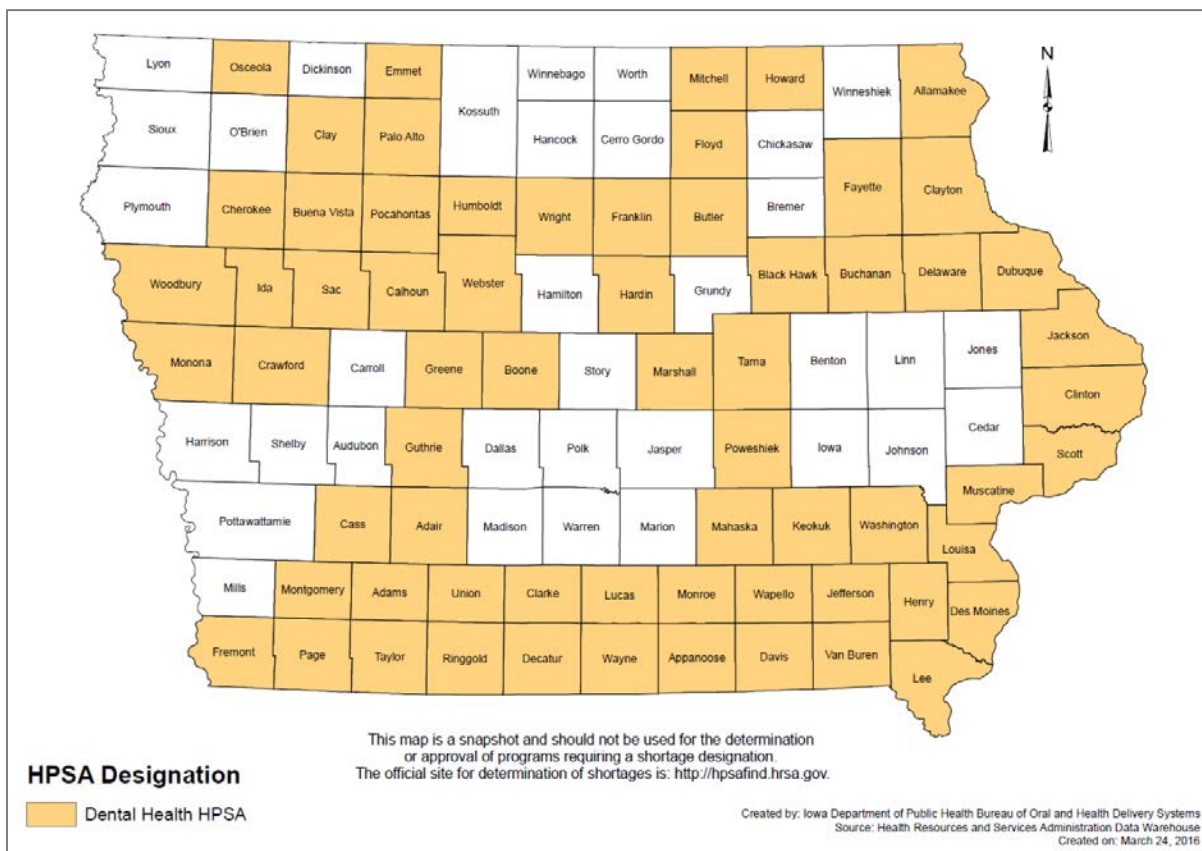


Figure 12929. Iowa Dental Health Professional Shortage Areas, 2016

During the past 20 years there have been major shifts in the number of Iowa counties that qualify as Dental Health Professional Shortage Areas (HPSAs). Please note that the map above is not intended for use as a static feature. As demonstrated in Tables 8 through 10, HPSA designations change.

For IDTS year 1997, 2006, and 2016, 26 Iowa counties had greater than 3,000:1 population-to-dentist ratios. They are: Adair, Appanoose, Benton, Boone, Buchanan, Butler, Calhoun, Chickasaw, Dallas, Fremont, Greene, Grundy, Guthrie, Keokuk, Louisa, Lucas, Madison, Mahaska, Monroe, Osceola, Palo Alto, Ringgold, Tama, Van Buren, Wayne, and Worth. With the exception of Boone (0.7% gain), Buchanan (1.2%), Dallas (31.9%), Madison (2.1%), and Wayne (2.7%) Counties, each of the aforementioned counties lost population since 2000.

Counties with a greater than 5,000:1 population-to-dentist ratio qualify for federal Dental Health Professional Shortage Area designation based on geographic area criterion. There also are designations for counties where there are insufficient dentists to treat lower-income families and Medicaid enrollees.

Each qualifying Dental HPSA area also receives a score (up to 26 points) that takes into account a combination of population-to-dentist ratio (10 points maximum), percent of the population below 100% of the federal poverty level (10 points maximum), water fluoridation status (1 point maximum), and travel time to the nearest source of care (5 points maximum). The higher the score, the greater the need for dentist services. Following is a table that lists the Iowa counties that have been designated as Dental HPSAs, along with information about their original designation year and HPSA score as of fall 2017.

Table 8. Iowa's Dental HPSA counties, fall 2017

County	Designation type	Original Designation Year	HPSA score
Adams	Low income	2001	7
Allamakee	Low income	2001	11
Appanoose	Low income	2001	14
Boone	Low income	2001	10
Buchanan	Medicaid-eligible	2001	11
Buena Vista	Low income	2001	14
Calhoun	Low income	2001	13
Cass	Low income	2001	11
Clarke	Low income	2017*	17
Clay	Medicaid-eligible	2001	6
Clayton	Low income	2001	14
Crawford	Low income	2001	13
Davis	Low income	2001	19
Decatur	Geographic	2010	17
Des Moines	Low income	2001	16
Emmet	Low income	2001	10
Fayette	Low income	2001	5
Floyd	Low income	2006	10
Franklin	Low income	2001	12
Freemont	Medicaid-eligible	2006	16
Greene	Low income	2001	11
Guthrie	Low income	2017*	15
Howard	Low income	2010	11
Ida	Low income	2001	11
Jackson	Low income	2001	10
Jefferson	Low income	2001	15
Keokuk	Geographic	2006	7
Lee	Low income	2001	17
Louisa	Low income	2017*	4
Lucas	Low income	2017*	7
Mahaska	Low income	2001	11
Marshall	Low income	2009	12

<b>County</b>	<b>Designation type</b>	<b>Original Designation Year</b>	<b>HPSA score</b>
Mitchell	Low income	2006	12
Monana	Low income	2001	12
Monroe	Geographic	2013	7
Montgomery	Low income	2001	14
Muscatine	Medicaid-eligible	2009	9
Page	Low income	2001	10
Palo Alto	Geographic	2006	7
Pocahontas	Low income	2001	16
Ringgold	Geographic	2010	15
Sac	Geographic	2017*	10
Tama	Low income	2001	12
Union	Low income	2001	12
Van Buren	Low income	2014	15
Wapello	Low income	2001	15
Washington	Medicaid-eligible	2001	15
Wayne	Geographic	1978	13
Webster	Low income	2001	13
Wright	Low income	2001	11

\* County’s original HPSA designation year occurred after the 20-year period of this review (1997-2016).

As of this publication, the number of Iowa Dental HPSA counties, by designation type, include:

- Geographic--8
- Low-income population--37
- Medicaid-eligible population--5

Thirty-three counties had been designated as Dental HPSAs on or before 2001. Oftentimes, counties that consistently maintain their designations are referred to as “persistent” HPSAs.

Since Table 8 was developed from fall 2017 DHHS, HRSA, Bureau of Health Professions information, there have been changes to some county designations. For instance, Table 9 shows 9 counties that had their HPSA designations withdrawn and Table 10 displays 6 counties in which the designation status changed.

Table 9. Iowa counties that had their Dental HPSA designation withdrawn

<b>County</b>	<b>Designation type</b>	<b>Year Withdrawn</b>
Adair	Geographic	2018
Butler	Low income	2018
Cherokee	Low income	2018
Delaware	Low income	2018
Dubuque	Low income	2018
Hardin	Low income	2018
Osceola	Low income	2017
Poweshiek	Medicaid-eligible	2018
Scott	Medicaid-eligible	2018

Table 10. Iowa counties that had their Dental HPSA designation reclassified

<b>County</b>	<b>New Designation Category</b>	<b>Year reclassified</b>	<b>HPSA score</b>
Black Hawk	Low income	2018	17
Clinton	Low income	2018	15
Henry	Low income	2018	9
Humboldt	Low income	2018	15
Taylor	Low income	2018	11
Woodbury	Low income	2018	9

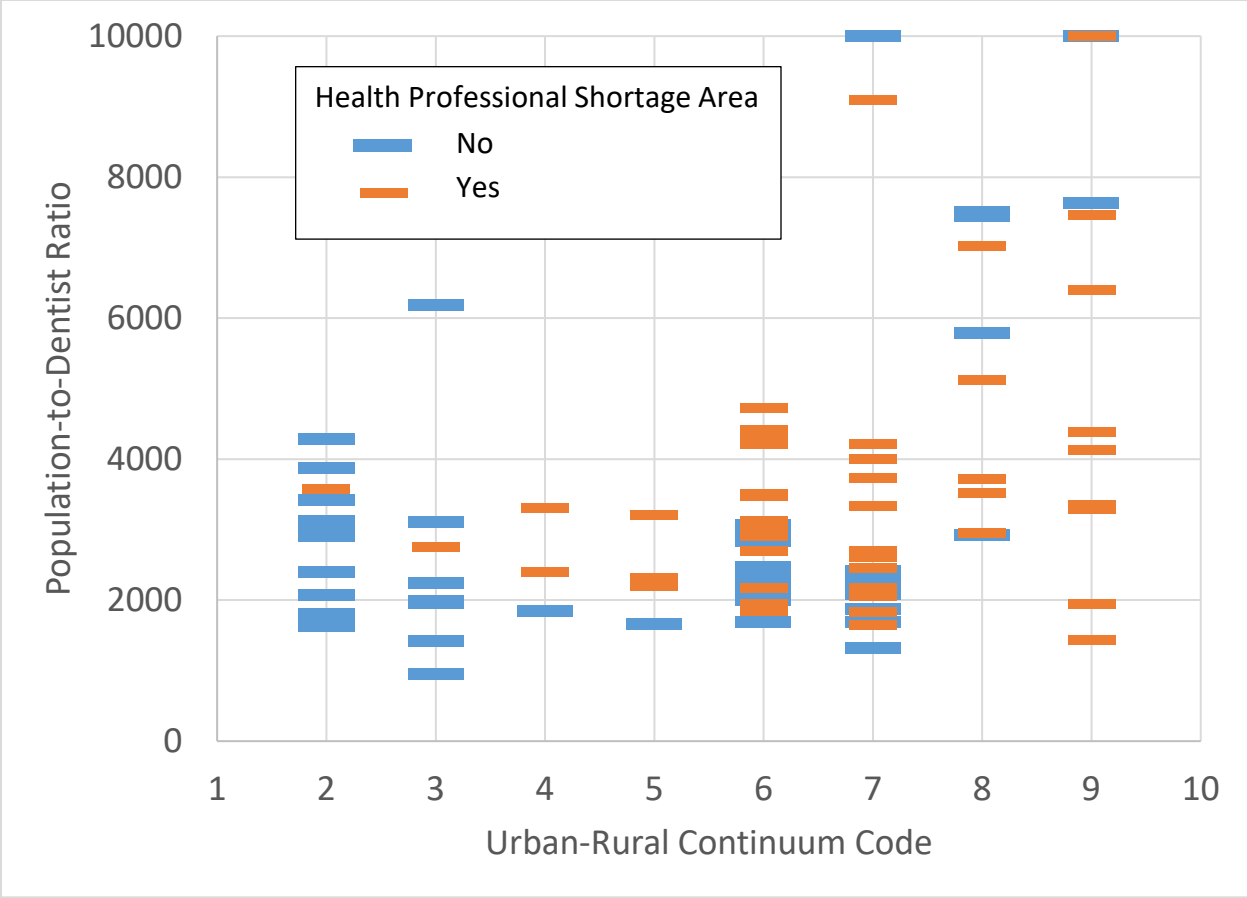


Figure 1300. Population-to-dentist ratio and Rural-Urban Continuum Code, by Dental HPSA status for each Iowa county, 2017

For this graph each county is represented as either a federally designated Dental Health Professional Shortage Area (HPSA) (orange line) or not (blue line) as of fall 2017. The population-to-dentist ratio is based on calculations from 2016. Full-time equivalents were not used in the dentist component of this ratio.

Although the frequency of dental HPSAs increases in rural areas of the state (i.e., codes 4-9) because of a greater likelihood to have a large population-to-dentist ratio, there are some urban and rural counties that have been named as shortage areas because of a paucity of dentists willing to serve some traditionally underserved populations (i.e., Medicaid enrollees, low-income). Conversely, there are several rural counties that were not Dental HPSAs yet exceed the minimum requirements for geographic designation. In part, this may be due to the county’s population in relative close proximity to a contiguous county with adequate dentists.

Three counties (Osceola, Ringgold, and Taylor) were scored as a population-to-dentist ratio of 10,000: 1 because there were no dentists.