



Our Oral Health Care Crisis: **And What Lawmakers Can Do**

Oral disease is painful, dangerous, and costly. It is also almost entirely preventable.

Yet across Washington State, thousands of children, adults, seniors, people with disabilities, and people in rural and Tribal communities can't get preventive and routine dental care—either because they can't afford it, or because there aren't enough dentists in the places where they live.

- Dental complaints are the number-one reason why uninsured Washingtonians seek emergency room care.
- Three out of four dentists in Washington do not accept Medicaid, which covers 1.2 million of our state's residents.
- Nearly one-quarter of seniors in Washington with annual incomes of less than \$25,000 have not seen a dentist in five years or more. Medicare does not cover dental care.
- Homeless veterans in Washington say that oral health care is their top unmet need.
- In a recent 18-month period, 54,000 emergency room visits for dental problems by Washingtonians cost taxpayers more than \$35 million.

The Solution: Mid-Level Providers

Mid-level providers are to dental care what nurse practitioners and physician assistants are to medical care. Adding them to the dental team will make high-quality, everyday dental care more available to more Washingtonians.

- **They free up dentists** to do the complex procedures for which they're trained. Mid-level providers can work away from supervising dentists, communicating by phone, fax and Internet.
- **They are safe.** In a review of more than 1,100 studies and reports on mid-level dental providers all over the world, not one single negative report was found.
- **They increase access.** A Minnesota clinic that recently hired its first dental therapist has substantially increased the number of Medicaid patients it treats. In Alaska, mid-level providers have brought care to 40,000 people in remote and Tribal communities.
- **They spur innovation** by clinics and dentists. With mid-level providers on staff, clinics could extend their hours to evenings and weekends, set up mobile clinics, and send mid-level providers into schools or nursing homes.

Washington's oral health care crisis can be solved. Mid-level providers would create new access to everyday dental care.