



CHILDREN'S ALLIANCE

A Voice for Washington's Children, Youth & Families

Why is there Broad Support for Mid-level Dental Providers in Washington State?

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Mid-level dental providers are proven to safely increase access to high quality dental care

Mid-level dental providers (MLPs) successfully practice in more than 50 countries and have a 90-year history. These professionals are as common and accepted as nurse practitioners.

Also known as dental therapists, MLPs have safely and successfully been extending care to kids and adults in Alaska for seven years. Policymakers in Minnesota added mid-level dental providers to the dental workforce in 2009.

Due to these changes, dentists in both states successfully utilize MLPs to reduce costs and increase access while maintaining high quality care.

Mid-level dental providers are highly trained professionals who work as part of the dental team

MLPs are trained by licensed dentists that teach at accredited dental schools. They receive an education of equal quality, within their limited scope of practice, to that of a dentist.

They do not work without a dentist and are trained to quickly recognize when a situation needs referral or consultation with a supervising dentist. MLPs free up dentists to provide more complex care.

Highly trained professionals, they only do a limited set of procedures. In fact, studies show the care they provide is equal to – and at times better than – their supervising dentist.

Mid-level dental providers are an evidence-based solution, increasing access to needed oral health care

Dentists have successfully used the innovation of off-site supervision of these professionals to extend dental care and health education to adults and kids in rural Alaska for seven years.

The Practice Plan Contract allows the supervising dentist to limit all the procedures and settings of MLPs. This gives clinics and dental practices the local control needed to increase access to care.

Due to dentists' ability to employ this innovative provider, 35,000 people in rural Alaska now have regular access to needed preventive oral health care, treatment and education.

Mid-level providers will work for Washington's communities

Dentists and clinic leaders will determine how the new team member fits into their practice – for example, by extending clinic hours and opening weekends for working families, using mobile vans or sending care into community settings such as schools or nursing homes.

Leaders in Minnesota have used federal grants to build needed oral health care infrastructure.

Backed by decades of research, this evidence-based solution can free Washington's dentists to meet the needs of Washington's children and families.

See back for research

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Research on Mid-level Dental Providers

In 2012, an extensive review of the 1,100 documents from over 52 countries found that mid-level dental providers (MLP) provide safe, effective dental care. In fact none of the 1,100 documents found any evidence of compromises to safety or quality of care. This, in combination with Alaska's seven years' of success, shows that dental therapists are a viable solution for Washington. The following is a list of the major research organized by areas of proven outcomes:

MLPs provide dental care as safely and effectively as dentists.

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- Fiset, L. A Report on Quality Assessment of Primary Care Provided by Dental Therapists to Alaska Natives (Seattle, WA: University of Washington School of Dentistry, 2005).
- Hammons PE, Jamison HC, Wilson LL. "Quality of service provided by dental therapists in an experimental program at the University of Alabama." Journal of the American Dental Association. 1971; 82:1060-1066
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- Nash DA, Friedman JW, Kardos TB, Kardos RL, Schwarz E, Satur J, Berg DG, Nasruddin J, Davenport EG, Nagel RJ. "Dental therapists: a global perspective." International Dental Journal. 2008; 58:61-70.
- Wetterhall, S., Bader, JD., Burrus, BB., Lee, JY., Shugars, DA. "Evaluation of the Dental Health Aide Therapist Workforce Model in Alaska." RTI International. 2010. RTI Project Number 0211727.000.001.

Where MLPs have practiced for decades, there is a sharp decline in permanent tooth loss.

- Mertz E, Anderson G, Grumbach K, O'Neil E. "Evaluation Strategies to Recruit Oral Health Care Providers to Underserved Areas of California." (San Francisco, CA: Center for California Health Workforce Studies, 2004).
- Miller CE. "Access to care for people with special needs: Role of alternative providers and practice settings." Journal of the California Dental Association. 2005; 33, no.9:715-721.
- Nash DA, Friedman JW, Kardos TB, Kardos RL, Schwarz E, Satur J, Berg DG, Nasruddin J, Davenport EG, Nagel RJ. "Dental therapists: a global perspective." International Dental Journal. 2008; 58:61-70.
- Nash DA, Nagel RJ. "Confronting oral health disparities among American Indian/Alaska Native children: The pediatric oral health therapist." American Journal of Public Health. 2005; 95, no.8: 1325-1329.

MLPs, like dental therapists, can reduce costs and increase net income for a dentist's practice.

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- American Dental Association "An Economic Study of Expanded Function Dental Auxiliaries in Colorado." (2009).
- Lobene R, Kerr A. The Forsyth Experiment: An Alternative System for Dental Care (Cambridge, MA: Harvard University Press, 1979).
- Pew Center on the States. "It Takes a Team: How New Dental Providers Can Benefit Patients and Practices," http://www.pewtrusts.org/uploadedFiles/wwwpewtrustsorg/Reports/State_policy/Report_It_Takes_a_Team_final.pdf (December, 2010).
- Pew Center on the States. "Expanding the Dental Safety Net: A First Look at How Dental Therapists Can Help". http://www.pewstates.org/uploadedFiles/PCS_Assets/2012/Pew_Expanding_the_Dental_Safety_Net.pdf. (July, 2012).

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