

# Dental Therapy 101

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Enabling Dental Therapy Practice to Improve Access to Oral  
Health Services

AcademyHealth Health Workforce Interest Group & the Health  
Workforce Technical Assistance Center



# Objectives

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- Review context and rationale for new oral health workforce models in the United States (US)
- Define dental therapy and how dental therapists (DTs) fit within the broader dental team
- Describe origins and evolution of dental therapy in the US
- Share current status of authorizing and implementing dental therapy in the states

# Key contextual points

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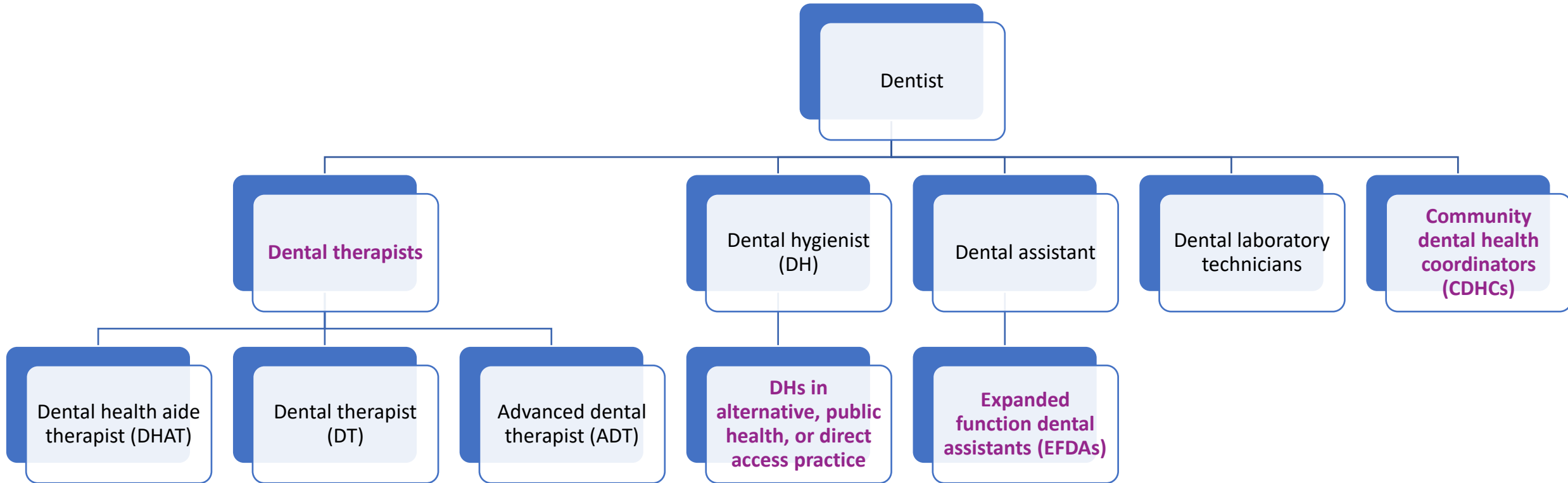
- 2000 US Surgeon General's (SG's) Report on Oral Health
  - Highlighted large gaps in access to care and "silent epidemic" of dental disease
  - 30% of US population has difficulty accessing care
  - 2003 Surgeon General's Call to Action: Increase workforce diversity, capacity and flexibility
- 2011 two IOM reports reiterated concerns of 2000 SG's report
- 2021 follow up to SG's report, *Oral Health in America: Advances and Challenges*, highlights current status and echoes similar Call to Action
  - Growth in dental graduates, but still vast deserts for care (over 60 million people live in shortage areas) and high debt burdens at graduation (nearly \$300k)
  - Workforce racial/ethnic diversity still underrepresented, though increasing modestly
  - Encourages delivery of care in new settings (where people live, work, and learn) and new professional models, including dental therapists, to address major access issues

# Further rationale for new models

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- Economic development
  - Opportunities for new health careers with lower barriers to entry
  - Lowers costs of care
  - Dental care has the highest level of cost barriers compared to other health care services
- Better care coordination
  - Improve practice productivity and efficiency
  - Improve patient outcomes and satisfaction
- Access to culturally competent/respectful care
  - 33.2% of US population are underrepresented minorities, yet only 10.6% of dentists
  - Demand exceeds supply (in certain locations, particularly rural and urban poor communities)

# Emerging dental care providers



# What is a dental therapist?

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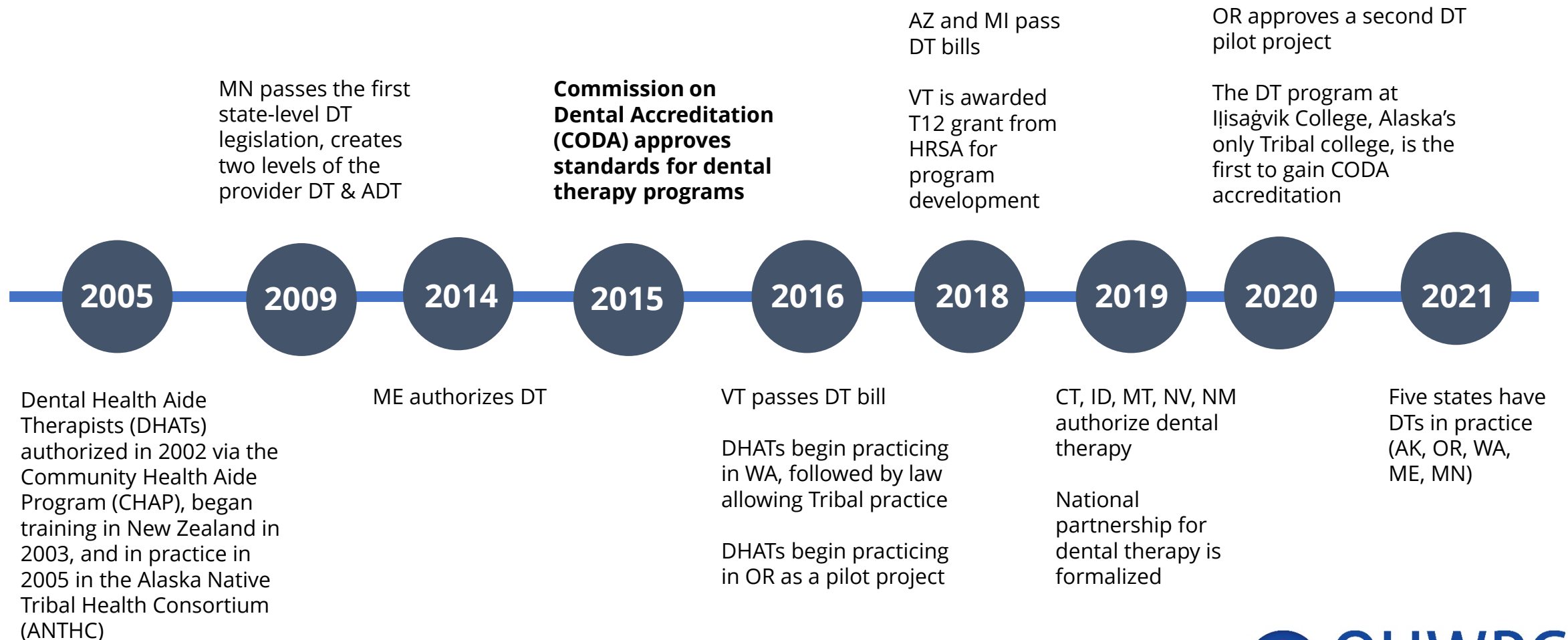
- Dental therapists (DTs), introduced in the US in 2005, are primary oral health care providers used globally in over 50 countries.
- DTs work as part of the dental care team to serve children and adults, and they provide clinical and therapeutic care including prevention (health education, prophylaxis, x-rays) and routine restorative care (filling cavities, placing temporary crowns, and extracting teeth).
- Global use of DTs and their safety and effectiveness have been demonstrated in various health systems and settings.

# Drivers of dental therapy adoption

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- Community engagement underpins the dental therapy movement
  - Tribal self-determination
  - Community health advocacy and equity
- Strong champions, sustained philanthropic investment, and support from many partners
- Huge documented need to improve access to oral health care
- Desire to build a more representative workforce and accessible career options

# US dental therapy timeline

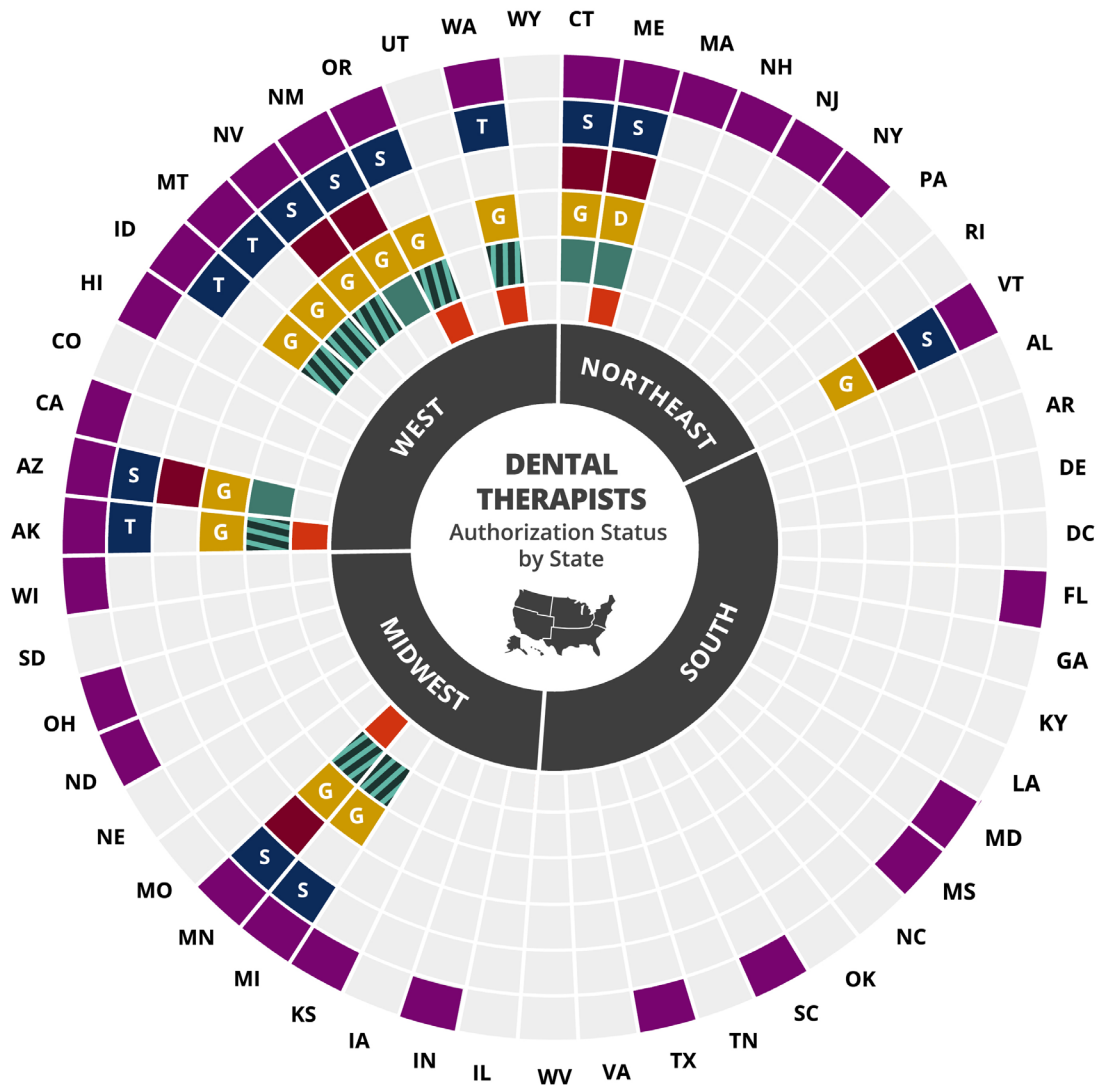




State	Year Authorized	Type of Authorization	CODA Required	Dental Hygiene Prerequisite	Degree Required*	Settings/ Population Restricted	Therapists Currently Practicing in State	Education Program
Alaska	2005	Tribal only (CHAP)	No	No	No	Yes/Yes	Yes	Yes, CODA
Minnesota	2009	State	No	No	Yes (ADT/MS)	Yes/Yes	Yes	Yes (3)
Maine	2014	State	Yes	Yes	Yes (MS)	Yes/No	Yes	No
Washington	2015	Tribal only	No	No	No	Yes/Yes	Yes	Being developed
<b>Commission on Dental Educational Accreditation (CODA) Education Standards Passed (2015)</b>								
Oregon (a)	2016	Tribal Pilot †	No (pilot)	No	No	Yes/Yes	Yes	Train in AK
Vermont	2016	State	Yes	Yes	No	No/No	No	Being developed
Arizona	2018	State/Tribal	Yes	Yes	No	Yes/No	No	No
Michigan	2018	State	Yes	No	No	Yes/Yes	No	No
Connecticut	2019	State	Yes	Yes	No	Yes/No	No	No
Idaho	2019	Tribal only	Yes	No	No	Yes/Yes	No	No
Montana	2019	Tribal only (CHAP)	Yes	No	No	Yes/Yes	No	No
Nevada	2019	State	Yes	Yes	No	Yes/Yes	No	No
New Mexico	2019	State/Tribal	Yes	Yes	No	Yes/No	No	No
Oregon (b)	2020	Hygiene pilot †	No (pilot)	Yes	No	Yes/Yes	No	Yes, pilot

\*May change following completion of each state's rule-making process.

† Oregon has two approved dental therapy pilot projects <https://www.oregon.gov/oha/ph/PreventionWellness/oralhealth/dentalpilotprojects/Pages/index.aspx>  
 CODA: Commission on Dental Accreditation; CHAP: Community Health Aide Program; ADT: advanced dental therapist; MS: master's degree



**Campaign for Dental Therapy in the State (Active or Prior)**

**Authorization of Dental Therapy**

T Tribal Dental Therapy      S Statewide

**Mandated Dual Dental Hygiene and/or Degree Requirement in State Statute**

**Dental Therapist Supervision Level by Dentist**

D Direct      I Indirect      G General

**Population/Setting Restrictions on DT Practice**

Setting Only      Population Only      Both

**Dental Therapists Practicing in the State**

# Future of team-based care

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# Questions?

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- For more information, please email: [Elizabeth.Mertz@ucsf.edu](mailto:Elizabeth.Mertz@ucsf.edu)

- Visit us at:  @OHWRC

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