Rural Oral Health Workforce

The issue

As the United States faces a dental workforce shortage, <u>rural populations will be impacted more than their urban counterparts</u>. Rural residents face a plethora of oral health disparities due to oral health workforce shortages. According to a <u>2015 report</u>, urban areas have 30 practicing dentists per 100,000 people while rural areas only have 22 dentists per 100,000 residents. Many of the dentists that currently work in rural communities are aging, and their eventual retirement may exacerbate current workforce shortages. A decreased dentist supply is associated with both lower dental care utilization and worse oral health outcomes. Finding solutions to disparate rural dental workforce shortages is imperative to <u>addressing rural oral health disparities</u>.

Barriers to access and solutions

In 2020, <u>HRSA</u> reported that 4,504 (68.67 percent) of the 6,559 dental health professional shortage areas (HPSAs) were in rural or partially rural locations. More than 31 million people are affected by the shortage of oral health professionals in rural areas. Around 5,500 dental practitioners are needed in these areas to remove the HPSA designations. Moreover, HRSA's <u>oral health workforce</u> <u>projections</u> predict that the national demand for generalist dentists, who account for almost all of the dentists in rural areas, will exceed supply by 2030.

These alarming numbers may be attributed to factors associated with rural practice that are unattractive to dental students and professionals, such as increased isolation, stressful caseloads, and lower reimbursement. Workforce shortages result in rural residents traveling farther to access dental care than their urban and suburban counterparts or forgoing care entirely. Rural adults are more likely to have all their teeth missing, while rural children are more likely to have unmet dental needs and least likely to have had a dental visit in the past year. Ensuring individuals in rural areas can access preventive services such as fluoride application and teeth cleanings and restorative services such as cavity fillings by bolstering the dental workforce is necessary to diminish health disparities and improve health outcomes.

Policy recommendations

While loan repayment programs and other strategies focusing on financial support have been shown to increase recruitment of dentists to rural areas, encouraging the enrollment of rural students to dental schools and increasing rural exposure in training might help with long-term retention. Further, dentists are not the only professionals who can provide safe and effective care. Employing dental therapists to provide treatment and expanding the scope of practice of dental hygienists have yielded positive results in improving oral rural health. The increasing shortage of rural dentists, hygienists, and expanded functions dental assistants is impacting the quality of care rural Americans can access. There is a need to implement and show support for strategies known to increase dental students' knowledge of rural practice while finding ways to retain those who are practicing in rural areas.

It is critical that state and national policymakers support and develop guidelines, innovation, and research aimed at improving the state of the rural dental health workforce. The absence of clear agenda-setting guidance inhibits opportunities for collective impact and strategic grant funding initiatives. The attached resources provide information about specific programs that are already in place and funding opportunities that may help improve the state of rural oral health.

Recommended action

As workforce shortages continue to wreak havoc on rural communities, the need for new funding streams and additional support is crucial. The following are a few ways to get involved and strengthen the rural oral health funding stream and workforce:

- Provide additional funding for National Health Service Corps, which provides loans and scholarships to eligible clinicians to work in qualifying dental HPSAs with the specific intent to recruit and retain dental students, dentists, and dental hygienists.
- The Department of Health and Human Services' <u>oral health strategic plan</u> expired in 2017. The development of the next iteration continues to be delayed. The absence of this agenda-setting guidance inhibits opportunities for collective impact and strategic grant funding initiatives. We encourage HHS to work on developing a new framework.
- Encourage Congress to pass the Dental Loan Repayment Assistance Act (<u>H.R. 1285/S.449</u>) that would allow full-time faculty members participating in the Dental Faculty Loan Repayment Program to exclude the loan forgiveness benefit from their federal income taxes.

Resources

- National Rural Health Association's <u>2020 Compendium of Rural Oral Health Best Practices</u>, which shares and highlights best practices, models, research, and policies from around the U.S. that can be built upon in rural communities.
- The Impact of Title VII Dental Workforce Programs on Dentists' Practice Location: A Difference-in-Differences Analysis is a research report that found graduates of institutions that received HRSA funding were significantly more likely to practice in rural areas than graduates of institutions that did not receive HRSA funding.
- Rural Health Information Hub describes workforce models that "focus on recruiting and retaining dental professionals in rural areas." RHI Hub provides resources to learn more about the workforce issue and offers guidance on how to implement successful and sustainable programs along with tools for evaluation.
- The Oral Health Workforce Research Center's report "How Evidence-based is U.S. Dental Workforce Policy for Rural Communities?" explores "how and where best practices are employed across U.S. states, the strength of the evidence on outcomes, and the policy factors that enable success in bringing access to oral health services for rural populations."
- The Department of Health and Human Services offers the National Health Service Corps Loan Repayment Program, which aims to increase the medical, dental, and mental health workforce in vulnerable areas by offering school loan repayment assistance. In exchange for assistance, dentists must agree to work in rural, urban, or frontier HPSAs for at least two years.
- The Health Resources and Services Administration created an interactive <u>quick map</u> that shows all of the dental health HPSAs and facilities in each state or county.
- The NCSL Scope of Practice Policy compares data and overviews of oral health in the following three policy areas: dental hygienists with direct access, states allowing dental therapy, and states allowing teledentistry.

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