Oral Health Programs in North Dakota December 2018

Smiles For Life Fluoride Varnish Program

During the 2007 legislative session, HB 1293 was passed, which gave physicians, advanced practice registered nurses, physician assistants, registered nurses and licensed practical nurses the ability to apply fluoride varnish upon the completion of a fluoride varnish curriculum approved by the North Dakota Board of Dental Examiners. The North Dakota Board of Dental Examiners approved the Smiles for Life, Course 6, Caries Risk Assessment Fluoride Varnish & Counseling. The North Dakota Department of Health, Oral Health Program utilizes and continues to promote this course for health professionals in various locations like: Local Public Health Units, Long Term Care Facilities and medical clinics across the state. Since 2008, many local public health units and Head Start entities have applied fluoride varnish to children's teeth. Since 2014, outreach and training have been provided to medical clinics; as a result, 54 clinics and 256 health professionals have been trained in the application of fluoride varnish.

School-based Fluoride Varnish and Seal!ND (Sealant) Program

In 2009, HB 1176 was passed, which allowed licensed dental hygienists to perform procedures authorized in advance by a dentist. As a result of this legislation, the North Dakota Department of Health, Oral Health Program, implemented a school-based fluoride varnish and sealant program (Seal!ND). Services include an initial screening, sealant placement and fluoride varnish application. Schools with 40 percent or greater of their students on the free and reduced-fee school lunch program are given priority for the program. This criterion helps to reach underserved children who may otherwise be unable to receive dental screening and dental sealants to help prevent tooth decay. Since 2011, public health hygienists funded by the department have served about 5,500 students through this program. During the 2017-18 school year, the program provided services in 29 schools throughout the state. 899 students were screened, and 331 students received sealants. Funding for the Seal!ND Program is provided by Health Resources and Services Administration (HRSA) Grants to States to Support Oral Health Workforce Activities, the Centers for Disease Control and Prevention (CDC) Cooperative Agreement, North Dakota Dental Foundation grant funds, Otto Bremer, Delta Dental grant, and reimbursement from North Dakota Medicaid for services provided by the public health hygienists. Efforts to make school-based sealant programs sustainable have been very successful in that 112 schools now have sealant programs with 49 of them provided by private practice dental offices, 17 provided by FQHC nonprofits clinics, and 17 provided by the Ronald McDonald Care Mobile.

Donated Dental Services Program

Supported through state general funding and the **State Department of Health** (\$50,000 per biennium), the Donated Dental Services (DDS) program, a national project of the Dental Lifeline Network, provides free, comprehensive dental treatment to the most vulnerable people—those with disabilities or those who are elderly or medically fragile. Donated Dental Services, operates through a volunteer network of more than 15,000 dentists and 3,600 dental labs across the country. Since its inception in 1985, the DDS program has surpassed \$250 million in donated dental treatment, transforming the lives of more than 120,000 people.

Since the North Dakota DDS program began in 2001, 875 vulnerable individuals have received \$3,177,088 in donated dental treatment from some of the 126 dentists and 11 dental laboratories that volunteer statewide! Almost \$15 of care is donated for every \$1 spent. 38% of the dentists in North Dakota participate in DDS, which is the well above the 17% national average.

Give Kids A Smile Program

Dentists nationwide participate annually in the Give Kids A Smile Day(GKAS) event held in February. Dentists and dental teams provide donated screenings, cleanings, sealants, and other needed treatments to needy children through a variety of programs and venues. For many children, this is an opportunity to find a dental home. And for dentists, dental team members, and other volunteers, it's a great way to help the local community. Visit the American Dental Association's Give Kids A Smile website for more information about the program, or to donate to help needy children receive care.

North Dakota State School of Science in Wahpeton has participated in the GKAS program for many years. Services provided include basic restorative procedures, simple extractions and patient exams. NDSCS Allied Dental students perform cleanings, radiographs, sealants, fluoride applications and oral health education. Volunteer pediatric dentists perform needed treatment. More than \$17,000 worth of donated services was provided to local children in 2018.

Mission of Mercy Events

The North Dakota Dental Association partnered with the Minnesota Dental Association in a "Dental Mission of Mercy" held July 22-23, 2016 at Concordia College in Moorhead, MN. A 100-chair portable clinic was set up and 600 dental professionals volunteered their services to patients that faced barriers to care. 1173 patients were seen and \$997,785 of free dentistry was provided by 841

total volunteers. 40% of the patients were from North Dakota and 75 of the 150 volunteer dentists were from North Dakota. Only 9.5% of the patients were eligible for government assistance.

North Dakota's first "solo" Mission of Mercy (NDMOM) was held on September 28-29, 2018 at the Bismarck Event Center, Bismarck, ND, with a goal of providing donated dental care to 600 patients in need. 50 dental chairs were set up in the Bismarck Event Center. The North Dakota Dental Association and the North Dakota Dental Foundation organized the event, recruited the workforce, and raised funds to make the event a success. Over 120 individuals, organizations, and businesses provided cash and in-kind contributions to support the event.

916 patients received care, with 35 of them able to return for a second visit for additional treatment. 14% of the patients were 17 years old and under, 23% were 18-29 years old, and 62% were 30 or older. 38% of the patients had visited a dentist in the last 2 years, however nearly 4% had never been to a dentist.

110 dentists, 48 hygienists, 105 dental assistants, and 4 lab techs provided urgently needed dental care. Dental Assisting and Dental Hygiene students from Minnesota State - Moorhead and North Dakota State College of Science (NDSCS) in Wahpeton rotated through the various departments of the clinic. A total of 570 volunteers registered for the event. The majority of volunteers were lay people who escorted patients, served meals and snacks to volunteers, registered patients, helped set-up and tear-down the clinic, and provided language translation, among other duties.

Treatment provided included 961 extractions, 358 composite fillings, 72 amalgam fillings, 48 root canals, 203 cleanings, 56 sealants, and almost 60 appliances to replace missing front teeth. The estimated dollar value of the donated treatment provided was \$564,964.

The patients came from 33 different counties in North Dakota. Only 6 patients were from our neighboring states. 67% of patients traveled less than 30 minutes to receive care at the event.

About 43% of the patients stated they had dental pain and 20% reported they had sought dental care in the past at an emergency room/emergency clinic. Interestingly, 73% of the patients reported they had no insurance to pay for their dental care, but 32% said they had a place to go for dental care after the event. Of note, only 7% of the patients indicated they were eligible for government assistance/Medicaid. 14% said they were covered by dental insurance and 0.5% listed Indian Health Service as an option for dental coverage. Cost was mentioned most frequently as a reason the patient had not received needed dental care, with fear/anxiety of seeing a dentist a distant second. 71% of the

patients were Caucasian/White, 9% were Native American/Alaska Native, 6% were Hispanic/Latino, 5% were Black/African American, and 1% were Asian.

While the Mission of Mercy is not a long-term solution to reduce barriers to care in North Dakota, it made a difference in the lives of 916 patients. The event also provided needed oral health education and raised awareness of the importance of oral health in the community and for policymakers. It was a true statewide community event that energized the dental community to continue to look for collaborative solutions to reduce barriers to care. Thank you to the amazing volunteers and contributor partners that made this event a success!

Expansion of Duties for Registered Dental Hygienists and Assistants

Rules changes were passed by the North Dakota State Board of Dental Examiners in 2014, which allow registered dental assistants and dental hygienists with additional training to do expanded, reversible, restorative functions under a dentist's supervision. These functions include filling cavities after a dentist prepares them. When we expand the services these trained professionals can provide, it increases efficiency and productivity. It also extends dentists' capacity and, by extension, increases access to care. Maximizing the capacity of the existing dental team is the best route to providing more care to more patients.

The Oral Health Coalition led a Task Force of interested professionals and **affirmed** collaborative practice by hygienists under the general supervision (dentist not on-site) in outreach settings. These collaborative practice rules were established by the State Board of Dental Examiners in 2009. The outreach settings would include schools and long-term care facilities. Efforts must continue to expand this practice and to make case management a part of the process.

Safety Net Public Health Dental Clinics

We're proud to support safety net nonprofit dental clinics in North Dakota. These clinics help provide the necessary dental care to many North Dakota residents who too often go without. There are currently six:

- Bridging the Dental Gap (Bismarck)
- Family HealthCare (FQHC)(Fargo) Additionally provides follow-up care for dental patients that are referred from Sanford Health ER.
- Northland Community Health Center Dental Clinic (FQHC) (Turtle Lake, Rolette, and Minot)
- Valley Community Health Centers Dental Clinic (FQHC) (Grand Forks)
- Red River Valley Dental Access Project (RRVDAP)(Fargo, ND-Moorhead, Minn.) Since 2002, 45 dentists have provided walk-in humanitarian relief of pain at Family Health Care Center on Tuesday evenings on a rotating basis. About 10,000 patients without a dental home have received treatment since the clinic's inception. Local dentists led the development

of the RRVDAP and the walk-in clinic.

We want to expand these public health clinics, where there are unique needs requiring specialized solutions to reduce barriers to care. These facilities can develop innovative ways to target high-risk patients and connect them to dental homes, where regular preventive treatment can prevent painful and costly disease. North Dakota's dental loan repayment program is especially critical for these programs to maintain their workforce.

Hospital Emergency Room Dental Diversion Programs

Currently, dental patients that show up in the Sanford ER's in Fargo for dental pain are seen the next day at the Family Health Care Dental Clinic (non-profit FQHC) for definitive dental treatment, and if the patients cannot be seen there for any reason they are referred to the Red River Valley Dental Urgent Care Clinic on Tuesday nights. This clinic is staffed on a rotating basis by 50 volunteer Fargo-Moorhead community dentists and oral surgeons.

A similar ER diversion program is operational in Bismarck utilizing the non-profit clinic, Bridging the Dental Gap(BDG). BDG staff see dental referrals from the Bismarck ER's and is backed up on a rotating schedule by a network of 10-15 local dental practices.

Ronald McDonald Care Mobile of North Dakota & RMHC School-Based Sealant Program

The Ronald McDonald Care Mobile (RMCM) is a 40-foot-long, state-of-the-art mobile dental clinic staffed by a dentist, dental hygienist, and dental assistant. It delivers urgently needed care to underserved children through age 21 in their own neighborhoods in western North Dakota. The priority areas for service include schools with 40 percent or greater of their student population on the free and reduced-fee school lunch program, Head Start and Early Head Start, American Indian Reservation areas, and community health centers without dental services. The RMCM began operation in 2012 and serves the western half of ND. In 2017, the Care Mobile served 1,001 children with 1,994 patient appointments, providing 7,521 dental services for a total value of \$572,868. In the 3rd year of our RMHC School-Based Sealant Program, we treated an additional 930 children with 2,003 services and a value of \$73,592. This brings the total number of children served in 2017 to 1,931. The Care Mobile is currently booking into 2019. The Ronald McDonald Care Mobile is owned and operated by Ronald McDonald House Charities of Bismarck. Bridging the Dental Gap, Inc. of Bismarck, a nonprofit dental clinic, is the clinical manager of the Ronald

McDonald Care Mobile Program.

Older Adult Programs

The State Department of Health, Oral Health Program, partners with Bridging the Dental Gap (BDG), a safety-net dental clinic in Bismarck, to provide services to older adults living in long-term care facilities. The Mission of BDG is "To Provide Access to Dental Care for Underserved Populations in North Dakota." BDG provides services in several long-term care centers in the Bismarck/Mandan area. Funding for this program is provided through the HRSA Oral Health Workforce Grant.

Northland Community Health Center implemented an older adult program in June 2014 at three facilities: Benedictine Living Center in Garrison; the Garrison Memorial Hospital (swing bed facility with long term beds available); and the Community Memorial Hospital in Turtle Lake (swing bed facility with long term beds available). Grant funding provides support for these programs.

North Dakota Dental Medicaid

Recognizing that private practice dental offices deliver most of the care in North Dakota for low-income patients, it's imperative to maintain adequate funding for dental care for Medicaid-eligible patients. Currently, the fees that Medicaid pays dentists are *less than the cost of providing care*, but North Dakota dentists continue to look for ways to reduce barriers to care.

We must continue to advocate for adequate Medicaid funding and streamlined administration so that there continues to be an adequate network of dentists to care for Medicaid patients. Through the "Take Five More" initiative, 75 North Dakota dentists agreed to increase the number of patients eligible for Medicaid that they see in their practices.

North Dakota Dental Loan Repayment Programs

Most new graduates of dental schools now have an average of \$250,000 in education debt. The North Dakota dental loan repayment programs provide state and federally financed programs with a variety of eligibilities and benefits to encourage new dentists to practice in three areas of need: serving low-income patients, working in safety-net nonprofit clinics, and practicing in rural or underserved areas. Our safety-net non-profit clinics absolutely depend on these programs to help recruit their dentists. The North Dakota Dental Association and the State Department of Health, Oral Health Department, were instrumental in starting these programs and modifying them over the years to make them effective in meeting the goals. Since inception, most of the recipients have completed their commitment to stay in their community for the length of their contract and about half have remained in those communities beyond that commitment ("ND Health Professionals Assistance Programs" 2016, ND State Dept of Health"). Currently, North Dakota is licensing between 20 and 30 new dentists a year, and the growth in new dentist numbers is greater than the population increase. Loan repayment programs also are a great way to market North Dakota to new dentists. The NDDA supported legislation that was passed

in the 2015 session, which greatly simplified the dental loan repayment programs in North Dakota and potentially made them available to more new dentists in the state. Loan repayment programs have contributed greatly to why North Dakota led the nation in in-migration of dentists since 2010.

Native American Collaboration

Our Native American citizens have higher rates of dental disease and more barriers to care. One of the frequent barriers expressed by Indian Health Service dental staff is the inability to get the kids with the most extensive treatment needs to pediatric dentists in nearby cities to complete treatment.

In 2011 at Spirit Lake and in 2013 at Standing Rock, the dental community in North Dakota built a collaborative partnership that created a volunteer network of 20 pediatric dental specialists and some 75 dental team members to provide restorative treatment to the these high-need children. At these events, 600 children received treatment with an estimated donated value of \$260,000. It is important to continue to find ways to engage Native American communities with local dentists so immediate community resources can augment IHS dental staff.

In the summer of 2016, the NDDA helped recruit 5 dentists on a temporary basis to help provide care at Spirit Lake Reservation in Ft Totten while they searched and secured a permanent workforce. Since 2017, Spirit Lake has hired a new full-time dentist and several of the temporary dentists have continued on a part-time basis.

Maintaining an adequate workforce within Indian Health Service clinics has always been a barrier to care. The arduous credentialing requirements of Indian Health Service dental professionals has been identified as a barrier for not only IHS dentists that are assigned to the Great Plains Area, but also to local dentists that wish to volunteer or contract their services with a tribe. Engagement with the local dental community continues to be critical to provide adequate dental care in our tribal communities.

The NDDA, in coordination with North Dakota's congressional delegation in Washington, had input into federal legislation known as the Helping Ensure Accountability, Leadership, and Trust in Tribal Healthcare (HEALTTH) Act, which addressed funding, accountability, credentialing, and employee recruitment and retention within the Great Plains region of the IHS.

North Dakota Foundation

The North Dakota Dental Foundation, a North Dakota charity for almost 30 years, was boosted in 2015 with an endowment of \$6.3 million of remainder funds from dissolution of Dental Services Corporation, a nonprofit dental plan for North Dakota residents that was also founded by North Dakota dentists.

The Foundation receives management services from Dakota Medical Foundation so that its leaders can focus on a North Dakota where dental care to all citizens is second to none, rather than managing paperwork. DMF also provides guidance to the Dental Foundation for reaching its vision. DMF has a long history of guiding this type of strategic funding, with \$80 million-plus invested in programs improving health since its modern history of grant-making and leading initiatives began in 1996.

North Dakota Dental Foundation exists, in the broadest sense, to remove barriers to dental care for North Dakotans, provide prevention and education, and to assure an adequate supply of skilled, well-trained dentists, hygienists & assistants so people across the state can receive dental care that allows them to be healthy and lead better lives.