POLICY FORUM
Access to Dental Care

Introduction
Gordon H. DeFriese, PhD, and Kristie Weisner Thompson, MA

Issue Brief: Assuring the Accessibility of Basic Dental Care Services: Issues of Workforce Supply, Insurance Coverage and Organization of Care
Kristen L. Dubay, MPP, M. Alec Parker, DMD, and Gordon H. DeFriese, PhD

COMMENTARIES
Defining the Need for Dental Care in North Carolina: Contributions of Public Health Surveillance of Dental Diseases and Conditions
R. Gary Rozier, DDS, MPH, and Rebecca S. King, DDS, MPH

The Dentist Workforce in North Carolina 2005: A Commentary
John W. Stamm, DDS

Access to Dental Care for Young Children in North Carolina: History and Current Status of Workforce Issues
Michael W. Roberts, DDS, MScD, and William F. Vann, Jr., DMD, MS, PhD

Dentist Participation in Medicaid: Key to Assuring Access for North Carolina’s Most Underserved
Mahyar Mofidi, DMD, MPH

Special Care Dentistry Delivers a Formula for Change: A Model Has Been Developed but Must Be Implemented Statewide
William E. Milner, DDS, MPH

Public Health Dentistry and Dental Education Services: Meeting the Needs of the Underserved through Community and School-Based Programs
Rebecca S. King, DDS, MPH

The Role of Free Dental Programs in Care Provision for the Underserved
Steven D. Slott, DDS

Improving Access to Dental Care Remains a Priority of One of North Carolina’s Largest Philanthropies
John H. Frank

Access to Primary Dental Care: A Commentary on the Economics of Dental Practice and Thoughts on Solutions to Improve Access to Primary Dental Care
John N. Williams, DMD, MBA

Improving Oral Health in North Carolina: Exploring the Potential of a New School of Dentistry at East Carolina University
Michael J. Lewis, MD, PhD, D. Gregory Chadwick, DDS, MS, and F. Terri Workman, JD

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INTRODUCTION

Policy Forum:
Access to Dental Care

Since 2002, when the North Carolina Institute of Medicine began publishing the North Carolina Medical Journal as a statewide journal of health policy analysis and debate for all the healthcare professions, key policy makers/shapers, and the interested lay public, we have wanted to highlight the problems of assuring access to primary dental care services in our state. This year, we are fortunate to have a new relationship with the North Carolina Dental Society as an organizational co-sponsor of the Journal. This relationship and the 2005 North Carolina Oral Health Summit, convened by the Oral Health Section of the North Carolina Department of Health and Human Services, were catalysts for the production of this Journal issue. In this issue of the Journal, we summarize the principal themes of these discussions concerning the state of oral health in North Carolina, along with a number of policy options for addressing the shortages of dental workforce supply.

North Carolina, like a number of other states, is facing a significant shortage of practicing dentists. Moreover, problems accessing primary dental care are even more severe in certain rural areas of the state, for those with low incomes or dependence on coverage from the state's Medicaid program, and for persons with special needs, such as persons with disabilities. Few disagree that the number of dentists in our state needs to increase rapidly, and concerted efforts should be made to attract additional dental practitioners to serve underserved areas and populations.

On a positive note, North Carolina is one of the nation's leading states with regard to preventive dental care programs for children, which are primarily offered through the public schools. In addition, community water fluoridation efforts statewide have extended access to this valuable preventive oral health technology to more than 80% of our state's population. Since the 1960s, the prevalence of dental caries in the permanent teeth of 12-17 year olds has declined by more than 80% for whites and 65% for African Americans. Despite these impressive 40-year trends, reported by Drs. Gary Rozier and Rebecca King, serious problems remain. As many as 20-30% of North Carolinians report that they have been unable to access basic dental care services when needed, and one out of three school-age children have untreated dental decay.

While this issue of the North Carolina Medical Journal provides an overview of the challenges many people in North Carolina face when trying to access dental care, there are a number of challenges that are not discussed in any detail. For example, we have not provided a detailed discussion of the national faculty shortages for dental schools or community colleges that are preparing needed dental professionals. In addition, we do not discuss some of the highly sensitive issues regarding the expanded use of dental hygienists, which are being utilized in other states. These are issues that may warrant attention, but were beyond the scope of this publication.

Like a number of the health and healthcare policy issues previously addressed in Journal, opinions differ about how best to meet the oral health needs of our population. Short-term and longer-term options are considered, each with costs and likely benefits. We hope that the articles presented here will help explain our state's oral health challenges as policies and programs are developed to meet these important health needs.

Gordon H. DeFriese, PhD
Editor-in-Chief

Kristie Weisner Thompson, MA
Managing Editor