



# INDIANA'S ORAL HEALTH WORKFORCE

## BRIEF

---

BOWEN CENTER FOR HEALTH WORKFORCE RESEARCH AND POLICY // APRIL 2019



**SCHOOL OF MEDICINE**

BOWEN CENTER FOR HEALTH  
WORKFORCE RESEARCH & POLICY

# INDIANA'S ORAL HEALTH WORKFORCE

## Fact Sheet

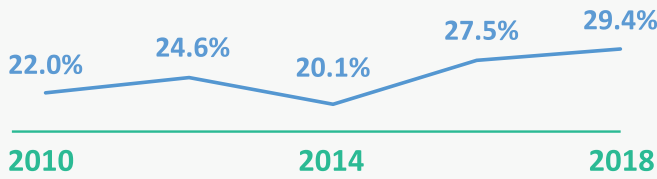


this report is based on the

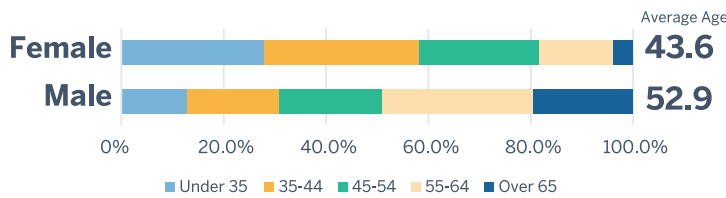
**2,697**  
**Dentists**

who hold an active license address in Indiana and responded to survey in 2018

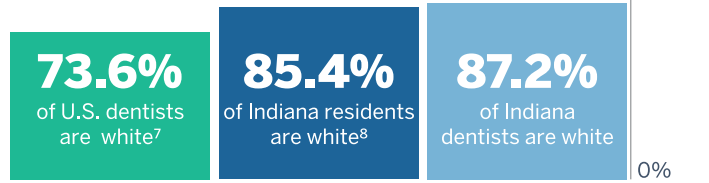
Percent of Women in the Indiana Dentist Workforce



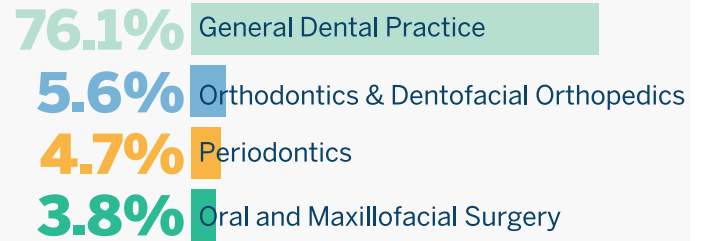
Indiana Dentist Workforce by Age and Gender



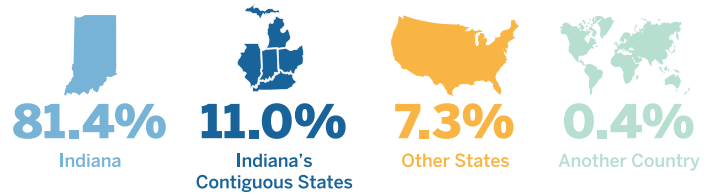
Racial Composition



What are the Top 4 Practice Specialties?



Where Did They Complete Their Education?



this report is based on the

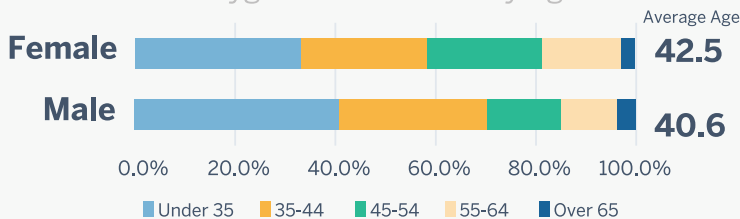
**3,521**  
**Dental Hygienists**

who hold an active license address in Indiana and responded to survey in 2018

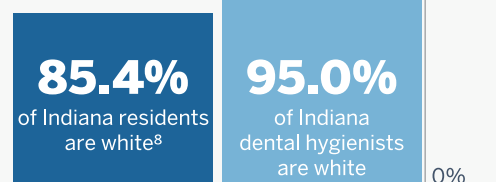
Percent of Male and Female Dental Hygienists



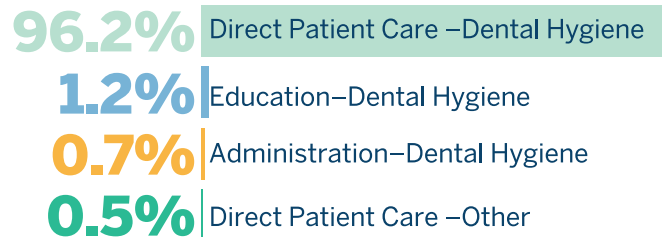
Indiana Dental Hygienist Workforce by Age and Gender



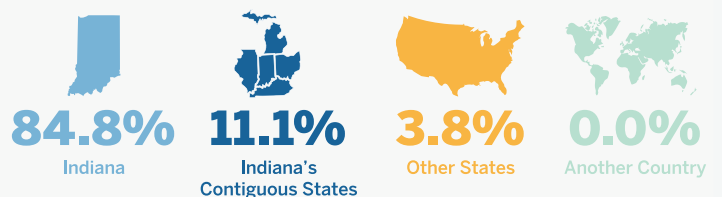
Racial Composition



What are the Top 4 Primary Fields?



Where Did They Complete Their Education?



# INDIANA'S ORAL HEALTH WORKFORCE

## Policy Report

### SENATE ENROLLED ACT 223 (2018)

#### DATA SOURCES

1. **License:** collected at time of initial license application and updated at renewal

**Data points include:**

License status, license address, demographic characteristics (selected, varies by profession), initial license data, license expiration date

2. **Survey:** collected during online license renewal

**Data points include:**

Demographic characteristics, educational characteristics, practice characteristics

#### KEY INFORMATION

Until 2019, license renewal surveys were voluntary (meaning key information has not been/is not available for non-respondents).<sup>3</sup>

Beginning in 2019, Senate Enrolled Act 223 (2018) will be implemented in Indiana and licensees will be required to provide certain information on the online renewal survey (meaning Indiana will have more comprehensive, high-quality data on the licensed health workforce than was previously available).<sup>4</sup>

DENTISTS

DENTAL HYGIENISTS

Exclusion/Inclusion Criteria

License renewals in Indiana<sup>1,2</sup>

4,001

4,996

Hold an active license

3,996

4,985

Responded to survey

3,688

4,805

Reported actively practicing

3,422

4,154

Have a license address in Indiana<sup>2,3</sup>

2,878

3,781

Had a confirmed Indiana license address

2,697

3,521

Data in this report is based on the 2,697 Dentists and 3,521 Dental hygienists that responded to the survey and had a confirmed license address in 2018.

# DEMOGRAPHIC & EDUCATIONAL CHARACTERISTICS

## WORKFORCE DEMOGRAPHICS

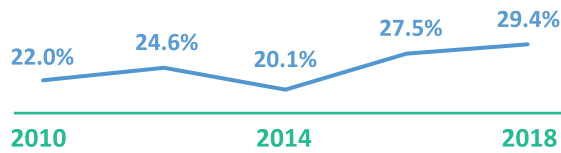
Understanding the current diversity among Indiana dentists will assist in implementing policies that move the needle to create a workforce poised to meet the needs of our diverse community. Data on Indiana's dentist workforce suggest that racial characteristics and average age of dentists has remained consistent in recent years. However, the workforce is increasingly comprised of women.

## AVERAGE AGE

The mean age of Indiana's dentists has remained steady over the last decade (50.2 years old in 2018). This could indicate workforce stability, or a balance in workforce pipeline and retirement.



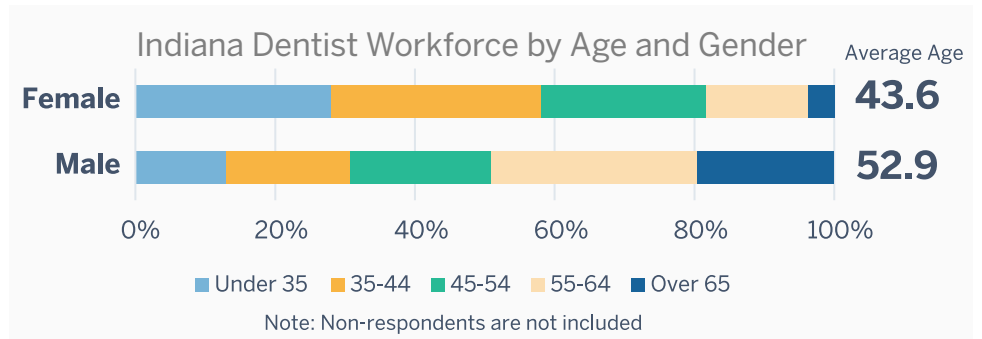
Percent of Women in the Indiana Dentist Workforce



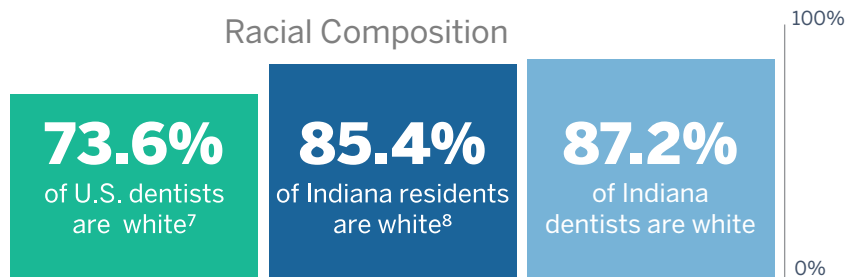
### What's on the Horizon?



Among the IU School of Dentistry's most recent matriculating class (2022), 57.1% are females.<sup>5</sup>



Racial Composition



## WORKFORCE EDUCATION/TRAINING

### DID YOU KNOW?

Indiana University School of Dentistry is the only dentistry program in Indiana.<sup>6</sup>

Residency Programs



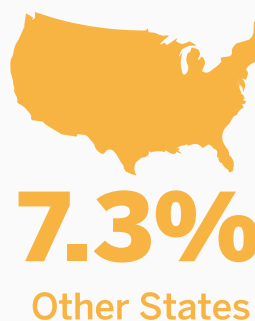
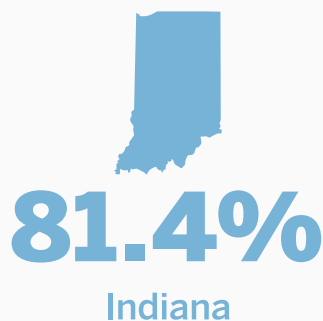
**31.3%**

of dentists report completing a dental residency program. Of these...

**6.9%**

completed a General Practice Residency.

Where Indiana Dentists Completed Dental School



# PROFESSIONAL AND PRACTICE CHARACTERISTICS

How Many Hours Do They Work Per Week?



## HOT TOPICS

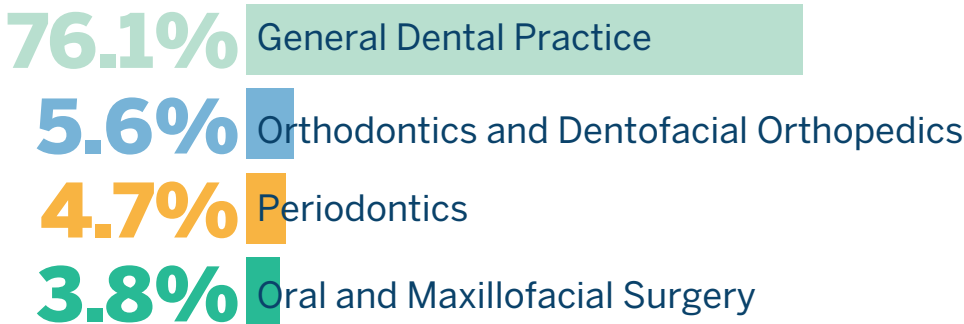
### IMPACTS ON PRACTICE: USING INSPECT & OPIOID-RELATED CONTINUING EDUCATION

Per 2018's Senate Enrolled Act 221, starting January 1, 2020, all prescribers will be required to obtain information about a patient from Indiana's Prescription Drug Monitoring Program, INSPECT, before prescribing an opioid or benzodiazepine. (This can be accomplished either directly or through a delegate on a practitioner's behalf).<sup>9</sup>

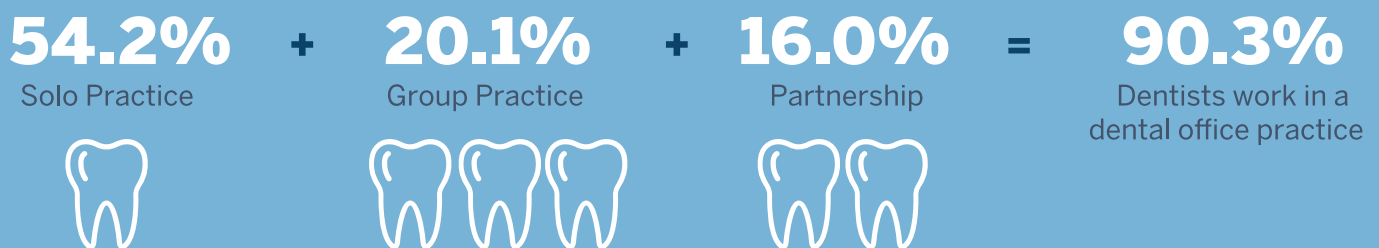
Per 2018's Senate Enrolled Act 225, providers who hold a Controlled Substance Registration in Indiana (including dentists) will be required to complete two hours of continuing education on opioid prescribing and abuse.<sup>10</sup>



What are the Top 4 Practice Specialties?



## In What Types of Settings Are They Practicing?



## DEFINING SHORTAGE AND SUFFICIENT DENTIST CAPACITY

According to the Health Services and Resources Administration, sufficient dental workforce capacity is achieved with a population to provider ratio of **5,000:1** (5,000 population to 1 full-time equivalent (FTE) dentist). Population-to-provider ratios are one important component used to determine whether a region is considered a Dental Health Professional Shortage Area (DHPSA).

Other contributing measures to DHPSAs include the poverty level of the population, water fluoridation status, and travel time to receive care.

## HOW DOES INDIANA SCORE?

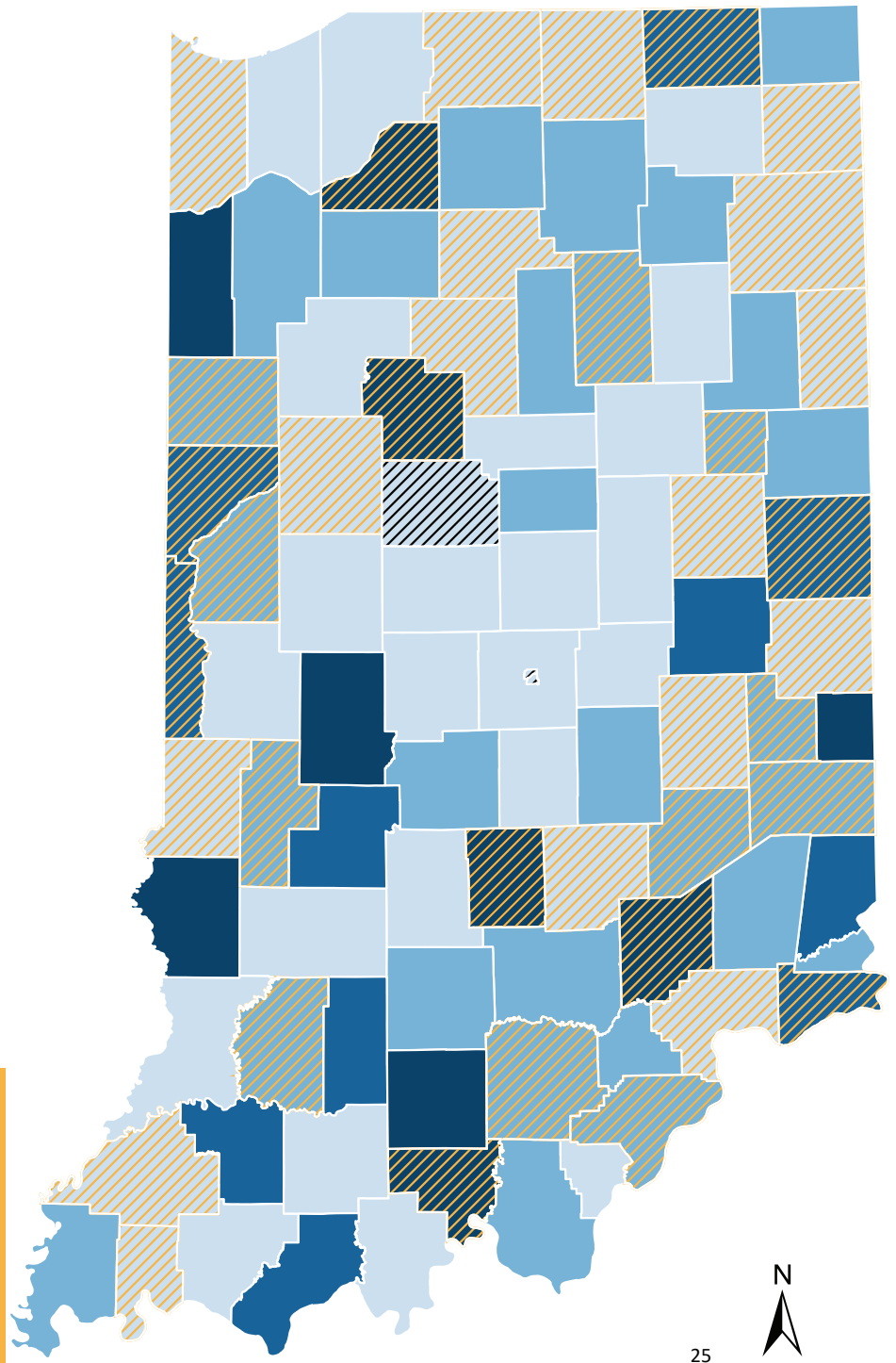
Ten of Indiana's 92 counties have less than 1 full-time dentist each week. 35 of Indiana's counties are a designated DHPSA.

### DATA & POLICY INTERSECTION

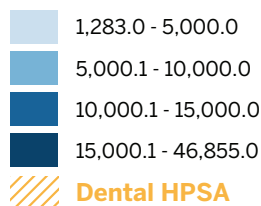
#### WHAT ARE HEALTH PROFESSIONAL SHORTAGE AREA (HPSA) DESIGNATIONS?

The Bowen Center partners with the Indiana State Department of Health Office of Primary Care to prepare HPSA applications and facilitate the designation process for communities that need additional support.

Any questions on HPSAs can be directed to [bowenctr@iu.edu](mailto:bowenctr@iu.edu)



#### Population Per One Dentist



### DENTISTS CHARITABLE CARE VS. SLIDING FEE DISCOUNT PROGRAM

#### A DIFFERENCE IN RHETORIC?

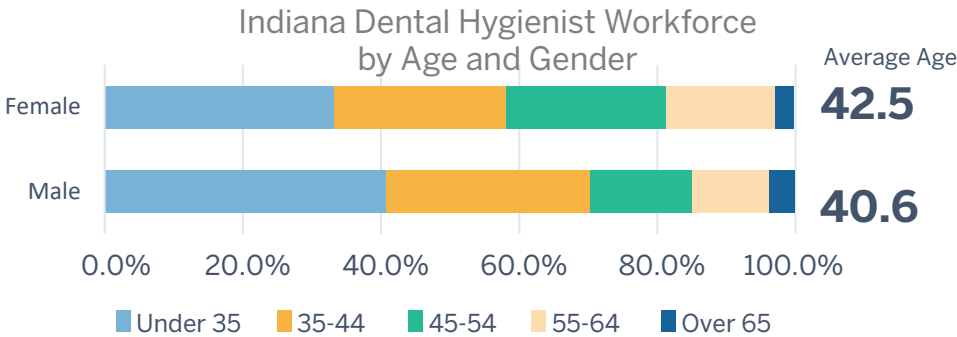
The Health Resources and Services Administration outlines a technical process for what is considered a workforce shortage area, or a Health Professional Shortage Area (HPSA). States must collect information on providers' practice characteristics from licensed providers in their state in order to demonstrate a region's qualification for HPSA-status. In order for a practice site to qualify for National Health Service Corps, or incentives related to HPSA-designation status, a practice site must implement a Sliding Fee Discount Program.<sup>15</sup> This Program has federally-defined criteria in order for a discount payment schedule to be considered a "sliding fee discount program." Information on whether a provider implements this type of payment schedule is collected from providers.

In order to support the HPSA process, information is collected from Indiana dentists at time of license renewal. At that time, dentists are asked whether they offer a sliding fee payment schedule, and what proportion of their patient panel the sliding fee patients account for. In the 2018 renewal period, 10.9% of dentists reported offering the sliding fee payment schedule to patients, and 9.0% of dentists reported that a portion of their panel was comprised of patients on this payment schedule.<sup>16</sup>

It is important to note that while this question may be used to identify providers who provide care to underserved communities, because of the question's specificity (i.e. federal "sliding fee discount program"), it is not comprehensive of all providers who provide discount services. It is likely that many providers offer discount or charitable care, either as a standard practice or on a case-by-case basis, but do not follow the specific guidelines of the Sliding Fee Discount Program. These providers would not be accounted for in the response. Therefore, the frequencies noted in the data report likely underestimate the true proportion of dentists providing any type of charitable care to underserved populations.

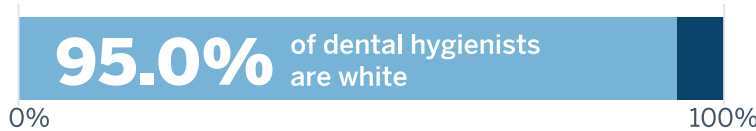
# DEMOGRAPHIC & EDUCATIONAL CHARACTERISTICS

## WORKFORCE DEMOGRAPHICS



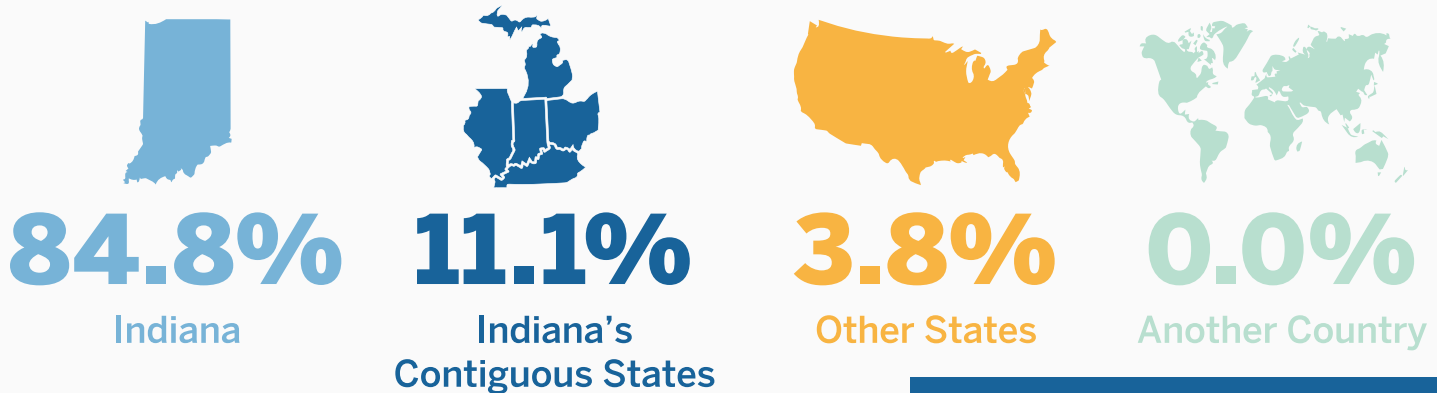
♀ **98.1%**  
FEMALE

♂ **1.9%**  
MALE

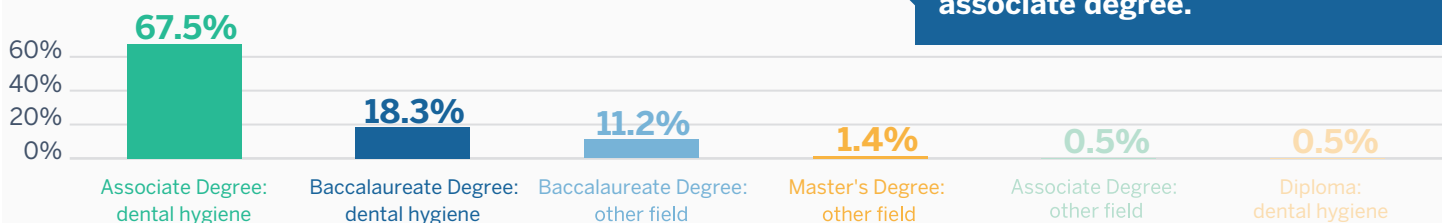


## WORKFORCE EDUCATION/TRAINING

Where Indiana Dental Hygienists Completed Their Education



Highest Education Among Indiana Dental Hygienists



Almost **90%** of dental hygienists **qualified** for their license with an **associate degree**.

## DID YOU KNOW?

Current trends in dental hygiene education are shifting toward baccalaureate-trained dental hygienists.<sup>11</sup> The proportion of Indiana's dental hygienists who reported their highest education as a baccalaureate degree or higher increased slightly in recent years, from 27.6% (2016) to 31.3% (2018).<sup>12</sup>



# PROFESSIONAL & PRACTICE CHARACTERISTICS

What are the Top 4 Primary Fields?

**96.2%** Direct Patient Care –Dental Hygiene

**1.2%** Education–Dental Hygiene

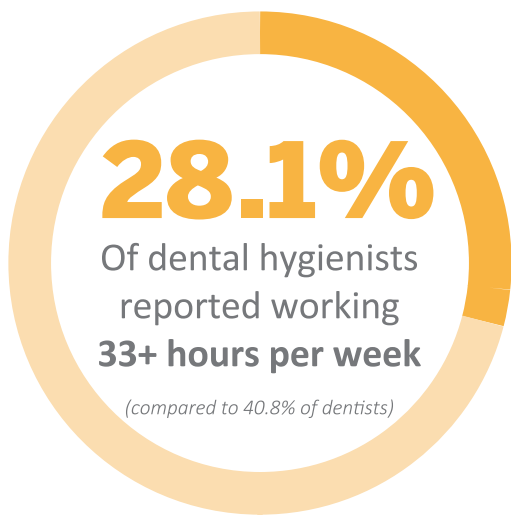
**0.7%** Administration–Dental Hygiene

**0.5%** Direct Patient Care –Other

## DID YOU KNOW?

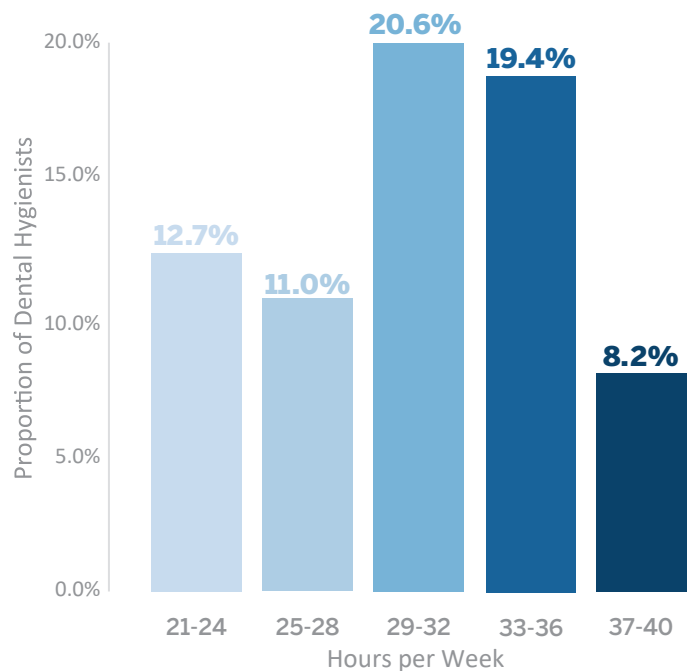
Only **0.3%** of Dental Hygienists plan to **retire** in the next 12 months.

How Much Do They Work per Week?

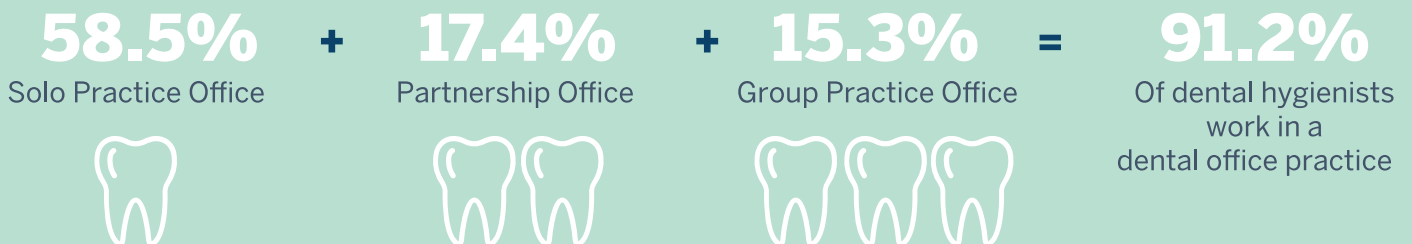


Approximately **10%** of dental hygienists reported wanting to work **more hours per week**

Average Hours per week in Patient Care



## In What Types of Dental Practices Are They Working?

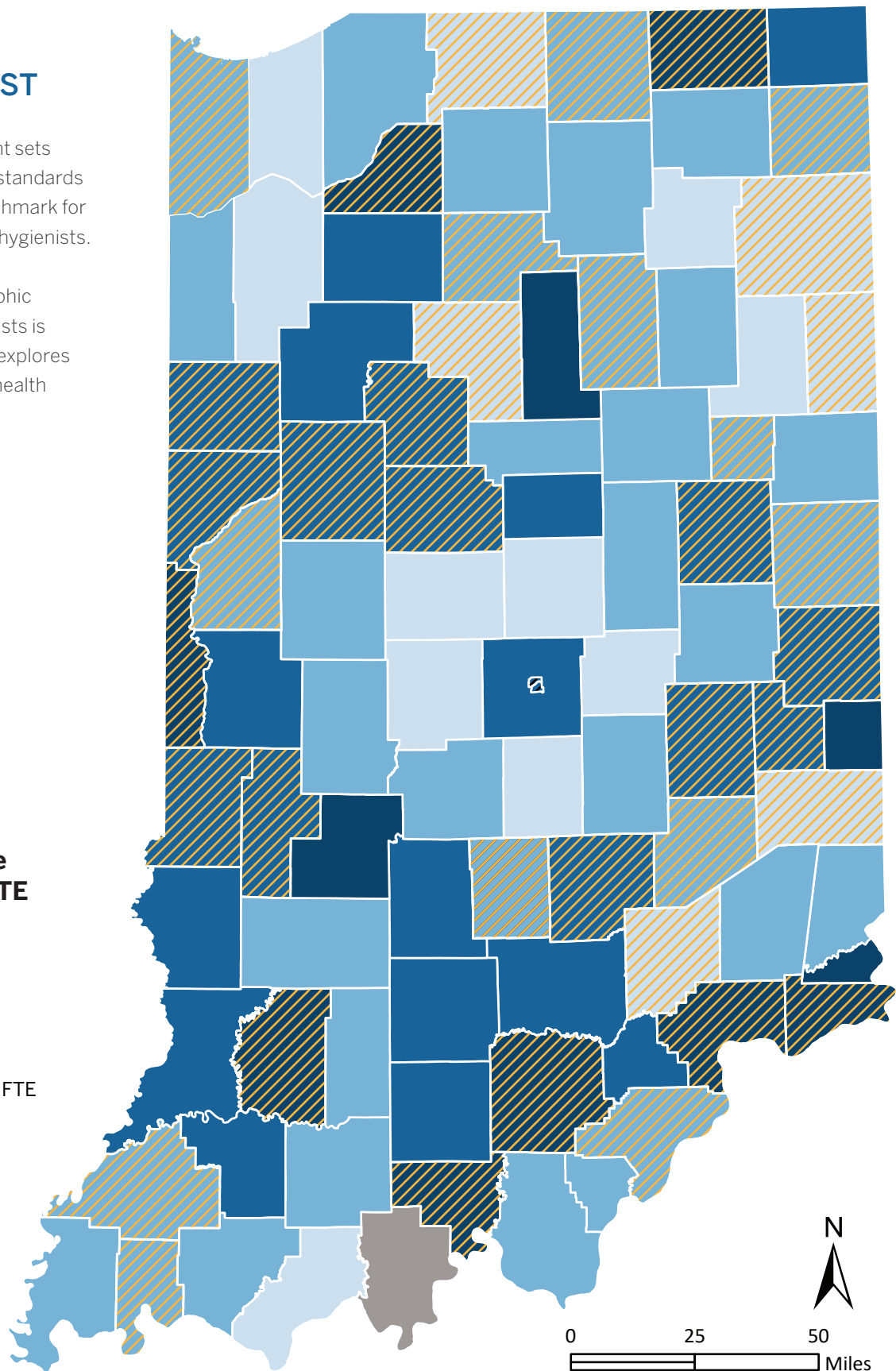
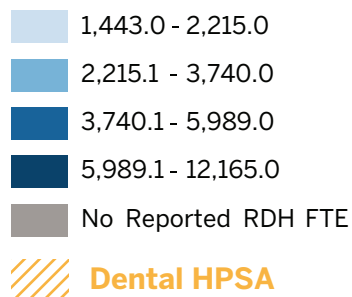


## DENTAL HYGIENIST DISTRIBUTION

While the federal government sets population to provider ratio standards for dentists, there is no benchmark for sufficient capacity of dental hygienists.

However, examining geographic distribution of dental hygienists is still meaningful as the state explores workforce capacity for oral health services.

### Population Per One Dental Hygienist FTE



# UPDATES IN ORAL HEALTH WORKFORCE POLICY

## DENTAL HYGIENISTS

### DENTAL HYGIENIST SCOPE OF PRACTICE

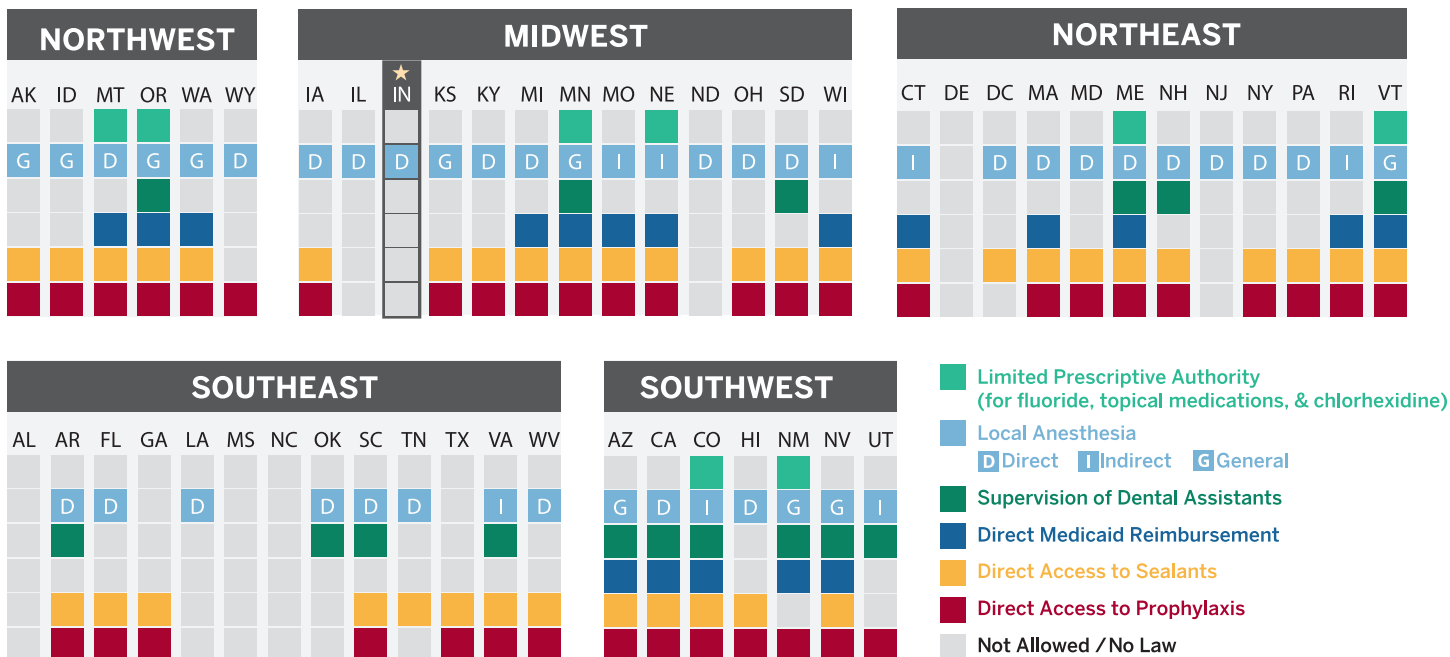
States define the scope of practice and professional supervision requirements for occupations they regulate. Wide variations exist between states on what providers can or cannot do under certain levels of supervision within their state license.

The Oral Health Workforce Research Center (OHWRC) is a federally funded health workforce research center that provides research to assist in workforce planning. In 2016, they published a report examining regulation of dental hygienists across the 50 states and DC.<sup>13</sup> The report highlighted variations between states.

Based on data reported by the OHWRC, Indiana was one of the most restrictive states. However, since the creation of their report, Indiana passed 2018 House Enrolled Act 1116 which permits dental hygienists to practice without direct supervision (under an access practice agreement with a dentist).<sup>14</sup>

Upon implementation of recent legislation, the below changes below will likely be made to the infographic:

- Direct Access to Prophylaxis – Patients in an agreed upon setting/facility may now have direct access to a dental hygienist under an access practice agreement (IC 25-13-3-13)
- Supervision of Dental Assistants – Dental hygienists may now use or supervise a dental assistant under an access practice agreement (Of note, “dental assistants may not provide direct clinical services to a patient” IC 25-13-3-7)
- Provision of Sealants without Prior Examination – Dental hygienists may perform dental hygiene services directly to a patient under an access practice agreement. (IC 25-13-1-11, IC 25-13-3-2)



## REFERENCES

- <sup>1</sup>See Data Report: 2018 Dental Hygienist Re-Licensure Survey for full inclusion/exclusion criteria and survey methodology. <https://scholarworks.iupui.edu/bitstream/handle/1805/16613/2017%20Dental%20Hygienist%20Survey%20Instrument.pdf?sequence=1&isAllowed=y>
- <sup>2</sup>See Data Report: 2018 Dentist Re-Licensure Survey Instrument for full inclusion/exclusion criteria and survey methodology. <https://scholarworks.iupui.edu/bitstream/handle/1805/16614/2017%20Dentists%20Survey%20Instrument.pdf?sequence=1&isAllowed=y>
- <sup>3</sup>What does this mean for this report? The information contained in this fact sheet is representative of the sample of dental hygienists and dentists that renewed their Indiana Oral Health License in 2018 and responded to the voluntary survey that they were actively working in dentistry. Future reports will contain a more complete picture of the oral health workforce.
- <sup>4</sup>Senate Enrolled Act 223 (2018) <http://iga.in.gov/static-documents/b/0/6/0/b0603ddf/SB0223.06.ENRH.pdf>
- <sup>5</sup>Data reports available at: 2010: [https://scholarworks.iupui.edu/bitstream/handle/1805/5998/2010\\_Indiana\\_Dentist\\_Re-licensure\\_Survey\\_Report.pdf?sequence=1&isAllowed=y](https://scholarworks.iupui.edu/bitstream/handle/1805/5998/2010_Indiana_Dentist_Re-licensure_Survey_Report.pdf?sequence=1&isAllowed=y); 2012: [https://scholarworks.iupui.edu/bitstream/handle/1805/5996/2012\\_Dentist\\_Licensure\\_Survey\\_Report.pdf?sequence=1&isAllowed=y](https://scholarworks.iupui.edu/bitstream/handle/1805/5996/2012_Dentist_Licensure_Survey_Report.pdf?sequence=1&isAllowed=y); 2014: <https://scholarworks.iupui.edu/bitstream/handle/1805/6435/DataReport2014IndianaDentistWorkforce.pdf?sequence=1&isAllowed=y>; 2016: <https://scholarworks.iupui.edu/bitstream/handle/1805/11242/Oral%20Health%20Data%20Report?sequence=5&isAllowed=y>; 2018: <https://scholarworks.iupui.edu/bitstream/handle/1805/17554/2018%20Indiana%20Oral%20Health%20Licensure%20Survey%20Data%20Report.pdf?sequence=4&isAllowed=y>
- <sup>6</sup>Indiana University School of Dentistry. Available at: <https://www.dentistry.iu.edu/index.php?cid=1093>
- <sup>7</sup>American Dental Association. Available at: <https://www.ada.org/en/science-research/health-policy-institute/data-center/supply-and-profile-of-dentists>
- <sup>8</sup>United States Census Bureau. Available at: <https://www.census.gov/quickfacts/fact/table/in/PST045217>
- <sup>9</sup>Senate Enrolled Act 225 (2018) <http://iga.in.gov/static-documents/6/0/3/d/603d7f81/SB0225.04.ENRH.pdf>
- <sup>10</sup>Senate Enrolled Act 221 (2018). Available at <http://iga.in.gov/legislative/2018/bills/senate/221#digest-heading>
- <sup>11</sup>See Data Report: 2018 Indiana Oral Health Licensure Survey for overview of oral health workforce. <https://scholarworks.iupui.edu/bitstream/handle/1805/17554/2018%20Indiana%20Oral%20Health%20Licensure%20Survey%20Data%20Report.pdf?sequence=4&isAllowed=y>
- <sup>12</sup>See Data Report: 2016 Indiana Oral Health Licensure Survey. <https://scholarworks.iupui.edu/bitstream/handle/1805/11242/Oral%20Health%20Data%20Report?sequence=5&isAllowed=y>
- <sup>13</sup>Oral Health Workforce Research (2019). *Variation in Dental Hygiene Scope of Practice by State*. Available at: <http://www.oralhealthworkforce.org/resources/variation-in-dental-hygiene-scope-of-practice-by-state/>
- <sup>14</sup>House Bill 1116 (2018). Available at: <http://iga.in.gov/legislative/2018/bills/house/1116>
- <sup>15</sup>NHSC Sliding Fee Discount Program Information Package. 2018. Available at: <https://nhsc.hrsa.gov/downloads/nhsc-sites/nhsc-sliding-fee-discount-program.pdf>
- <sup>16</sup>See Data Report: 2018 Indiana Oral Health Licensure Survey for full table of dentist panel characteristics (e.g. Indiana Medicaid, sliding fee scale) <https://scholarworks.iupui.edu/bitstream/handle/1805/11242/Oral%20Health%20Data%20Report?sequence=5&isAllowed=y>

## QUESTIONS?

For inquiries or feedback on this report, please email the Bowen Center for Health Workforce Research and Policy at [bowenctr@iu.edu](mailto:bowenctr@iu.edu)

### AUTHORED BY:

Hannah L. Maxey, Director  
Courtney Randolph, Health Policy Analyst

### WITH CONTRIBUTIONS BY:

Brittany Puran  
Sierra Vaughn, Health Services Research Analyst

### DESIGNED BY:

Devan Gannon