National Indian Health Board

Resolution 11-07

Approval and Support for Federal or State Policies to Make Oral Health Care Services More Accessible through the Development of the Dental Therapist Provider Model Pioneered by the Alaska Dental Health Aide Therapist Program

WHEREAS, the National Indian Health Board (NIHB), established in 1972, serves all Federally recognized American Indian/Alaska Native (AI/AN) Tribal governments by advocating for the improvement of health care delivery to AI/ANs and for the fulfillment of the Federal government’s trust responsibility to AI/AN Tribal governments; and

WHEREAS, AI/AN people have a higher prevalence of dental caries and untreated tooth decay in all age groups compared to the general United States population, with many AI/AN children experiencing dental caries before the age of two; and

WHEREAS, there are few dental caries prevention programs that target AI/AN children, and other oral health issues persist for the AI/AN population such as:

- Seventy-nine percent of AI/AN children aged 2-4 years have dental caries;
- Majority of AI/AN children have tooth decay with 78 percent of the 6-14 year olds and 91 percent of the 15-19 year olds had a history of decay;
- Despite a trend toward a reduction in tooth loss in the U.S. population, older data indicate 25 percent of AI/AN people aged 35 to 44 years have fewer than 20 natural teeth;
- Among all persons aged 55 years and older, nearly 75 percent have fewer than 20 natural teeth;
- Fifty-nine percent of AI/AN adults have periodontal (gum) disease;
- Seventy-eight percent AI/AN adults 35-44 years and 98 percent of elders (55 or older) have at least one tooth removed because of decay, trauma, or gum disease; and

WHEREAS, these disparities are directly attributed to a lack of dental health professionals in the Indian health system in which IHS dental providers have a patient load of 2,800 patients per provider, while general population providers have approximately 1,500 patients per provider and the IHS experiences a very high dental provider vacancy rate, with estimates that 26 percent of the dental positions within the IHS are vacant, which contributes to the lack of access to dental health services; and
WHEREAS, the NIHB endorses and supports the self-determination of Alaska Natives who have chosen to improve the oral health of their children and families by offering an effective, safe and competent workforce solution in their community known as the Dental Health Aide Therapist; and

WHEREAS, NIHB understands that 52 countries and two states now train and support mid-level providers working in partnership with dentists to increase access to care similar to the way nurse practitioners and physician assistants work with medical doctors; and

WHEREAS, the State of Oregon under Chapter 716 (2011 Laws) adopted by the Governor on August 2, 2011 allows the Oregon Health Authority to approve pilot projects to encourage the development of innovative practices in oral health care delivery systems with a focus on providing care to populations that have the highest disease rates and the least access to dental care, including among facilities, Tribal Federally Qualified Health Centers; and

WHEREAS, NIHB recognizes that Tribes and the Indian Health Service would be eligible in 2011 for $4 million Federal grant funding for the training and employment of dental therapists who practice in rural, Tribal and underserved communities; and

WHEREAS, NIHB recognizes that Federal law outside of Alaska does not allow Tribes to act independently and train or hire dental therapists for their communities and in order for Tribes to have a dental therapist in their community, state law must be changed to include dental therapists.

NOW THEREFORE BE IT RESOLVED, that NIHB does hereby support Washington House Bill 1310 and New Mexico House Bill 495 and any other substitutes supported by the child health advocates known as the Children’s Alliance in Washington State or Health Action New Mexico; and

THEREFORE BE IT FURTHER RESOLVED, that NIHB working in close cooperation with its network of Area Health Boards and the Indian Health Service, as well as other agencies within the Department of Health and Human Services, will provide support to change Federal or state policies to make oral health care services more accessible through the development of the dental therapist provider closely modeled by the Alaska Dental Health Aide Therapists for the benefit of their member communities.

CERTIFICATION
The foregoing resolution was adopted by the Board, with quorum present, on the 25th day of September, 2011.

Chairperson, Cathy Abramson

ATTEST:

Secretary, H. Sally Smith