Alaska's YK Delta

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The Therapist Team



 Conan Murat, practicing since 2005



 Melanie Kerschner, certified 2014



-UNIVERSITY of WASHINGTON-

Dental Therapists and

Dental Utilization in Alaska's YK Delta

Chi D, Lenaker D, Mancl L, Dunbar M, Babb M

National Oral Health Conference

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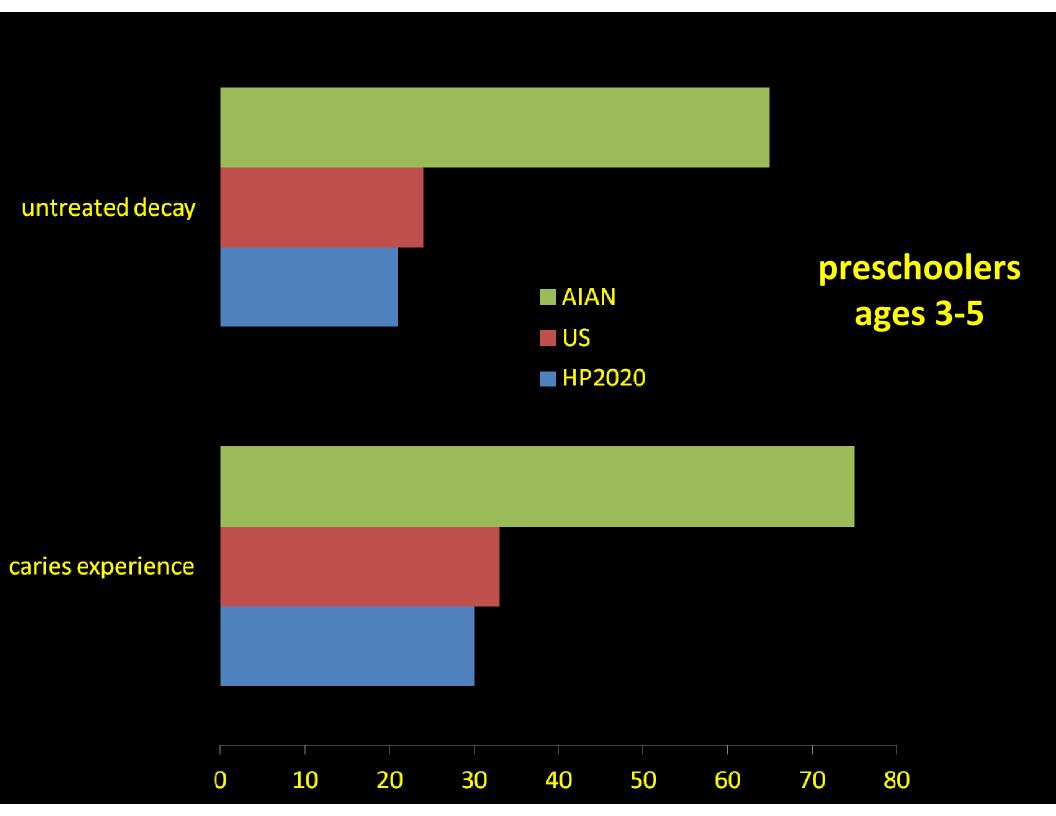
Alaska's care delivery context







dental disease





context

Tooth decay: a multifactorial disease

- High sugar diet
- Inadequate fluoride
- No dental care

Alaska Native history and context

- Settler colonialism: sugar, flour, fat, salt
- Permafrost
- Isolated communities and provider shortages

previous work

No difference in diagnosis or complications between dental therapists and general dentists (Bolin 2008)

Comparable preps and restorations (Bader et al. 2011)

Shorter wait times and high patient satisfaction (Kellogg Foundation 2010)

Gap: No long-term evaluation of dental therapists

questions

1. What is the relationship between dental therapists and use?

Rationale: General assessment

2. How large of a difference is possible with dental therapists?

Rationale: Clinical relevance

methods

Data (2006 to 2015)

YKHC dental EHR, N=28,191

Medicaid data, N=22,351

Community-level geocoding

Predictor: dental therapist treatment days (EHR)

Q1 – Continuous variable

Q2 – None vs. high

methods

5 dental utilization measures (EHR and Medicaid)

- (a) Children with preventive care (exam, cleaning, or fluoride)
- (b) Children <3y with D-E-F-G extraction
- (c) Children <6y with treatment under general anesthesia
- (d) Adults with preventive care
- (e) Adults with extraction

methods

Q1: Spearman partial correlation coefficients

- adjusted for

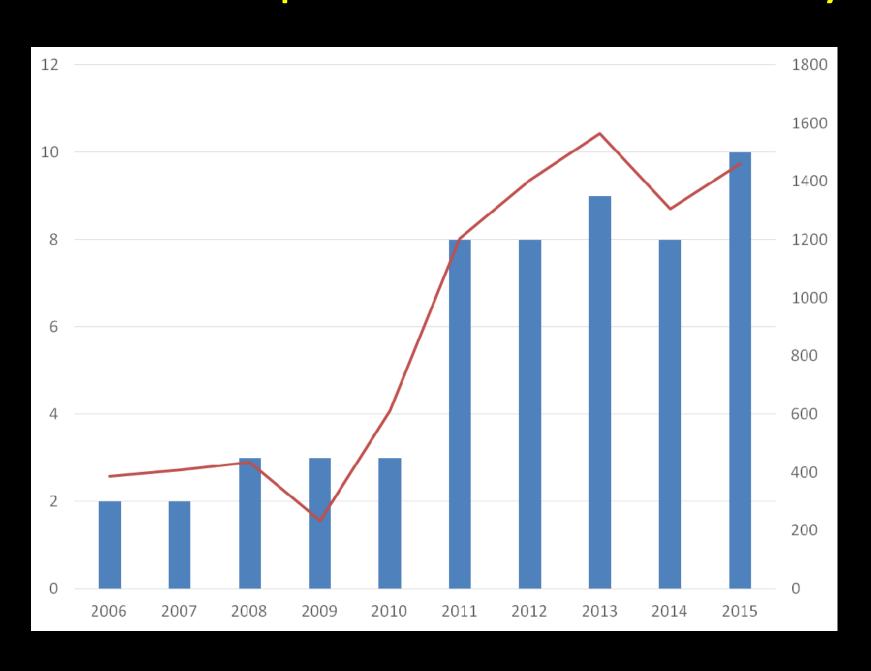
year

dentist treatment days

baseline poverty

Q2: comparisons of proportions

dental therapists and treatment days



utilization rates

Outcome	10-year mean (EHR)	10-year mean (Medicaid)
Child preventive care	31.8%	15.4%
D-E-F-G extraction	14.0%	3.1%
General anesthesia	5.7%	5.4%
Adult preventive care	18.7%	3.8%
Adult extraction	32.9%	7.8%

Spearman partial correlation coefficients*

Outcome	Coefficient (EHR)	P-value	Coefficient (Medicaid)	P-value
Child preventive care	+0.26	<.0001	+0.23	<.001
D-E-F-G extraction	-0.28	<.0001	-0.17	0.03
General anesthesia	-0.27	<.0001	+0.05	0.45
Adult preventive care	+0.30	<.0001	+0.20	<.001
Adult extraction	-0.46	<.0001	-0.16	0.02

Children: 2006-2015*

Preventive care

D-E-F-G extractions

None: 15.5%

High: 24.8%

None: 7.3%

High: 1.9%

60% difference

284% difference

General Anesthesia

None: 7.9%

High: 5.5%

44% difference

Adults: 2006-2015*

Preventive care Extractions

None: 3.2% None: 9.6%

High: 5.6% High: 7.1%

75% difference 26% difference

clinical significance

- 2,695 Medicaid-enrolled children <3y
- D-E-F-G extraction

 lowering to 1.9% reduces to 52 from 114 the number of children with extractions

limitations

observational, claims data study (≠causation)

mechanisms – qualitative study

- dental therapists are part of the solution
 - Sugared fruit drinks

main findings

- dental therapists
 - positively associated with preventive care
 - negatively associated with extractions
 - not associated with general anesthesia
- high dental therapist communities utilization patterns consistent with ideal outcomes
 - more preventive care
 - fewer extractions
 - less general anesthesia

thank you

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