Indiana Dentist Health Workforce Brief

Bowen Center for Health Workforce Research and Policy // March 2021
2020 DENTIST WORKFORCE

Indiana is fortunate to have a robust mechanism to identify, quantify, and describe dentists and dental hygienists throughout the state. In Indiana, dentists and dental hygienists are licensed and regulated by the Indiana State Board of Dentistry at the Indiana Professional Licensing Agency (PLA), which is responsible for administering numerous Indiana State health professions licenses. For the past few decades, Indiana dentists and dental hygienists have voluntarily provided information on their demographic, education, and practice characteristics through a series of supplemental question embedded in the electronic license renewal process. In 2018, a law was enacted that requires Indiana dentist and dental hygienist (and other selected health professions) completing the biennial license renewal online to provide key information necessary to inform Indiana State policy and planning (Senate Enrolled Act/SEA 223-2018). This law went into effect for dentists and dental hygienists for their 2020 license renewals.

The figure below depicts the trends in total Indiana dentist licenses, respondents to the supplemental questions, and the licensees that were included in the reporting sample (self-identified as actively practicing in Indiana) from 2016 to 2020. As evidenced by the trends, SEA 223-2018 resulted in a significant increase in the number of licensed professionals that were respondents and included in the reporting sample. Many of these individuals were non-respondents when the survey was voluntary.

NOTE: Dentists and dental hygienists completing their renewal manually (on paper) do not receive the supplemental survey questions.

In 2020, 4,020 dentists renewed their Indiana license. Of those renewals, 3,863 (96.1%) were active licenses that were renewed electronically. The remaining 3.6% (145) of renewals were either inactive licenses or were renewed manually (paper application) and did not have supplemental questions administered. SEA 223-2018 has resulted in complete information being available on 96.1% of all licensed dentists in Indiana.

**WHO IS INCLUDED IN THE REPORTING SAMPLE?**
- Active dentists who renewed their license online
- Practicing in dentistry
- Serving Hoosiers (in-person or through teledentistry for dentists)
- The reporting sample is referred to as the “Indiana Dentist Workforce”

**WHO IS NOT INCLUDED IN THE REPORTING SAMPLE?**
- Dentists (3.6%) who renewed their licenses offline (paper renewals)
- Inactive providers
- Dentists who are located out-of-state and do not report serving Hoosiers

**AGE DISTRIBUTION**

Dentists over the age of 65 represent 14.1% of the Indiana’s current dentist workforce. Recruiting and retaining students from Indiana’s dentist pipeline will be critical in the coming years to offset retirements that may occur within this group.

*Workforce Indicator: How does the average age of the 2020 dentist workforce compare to previous years?*

The age distribution in 2020 is similar to that of previous years but has shifted slightly towards younger dentists.

**RACIAL DIVERSITY IN THE INDIANA DENTIST WORKFORCE**

Implementation of SEA 223-2018 has enabled a greater ability to assess diversity in Indiana’s dentist workforce. In 2016, only 10.8% of the workforce reported as a race other than white. In 2020, the number of dentists reporting a race other than white increased to 15.1%.

*Note: There were reporting variations in how racial information was captured throughout the years. These variations are reflected in the racial categories for the charts above. Full details can be found in historical data reports.*

Indiana’s female dentists are more racial diversity than their male counterparts.
WHERE DO INDIANA DENTISTS COMPLETE THEIR DENTAL TRAINING

The majority of Indiana dentists reported completing dental school in Indiana. A comparison of historical data on Indiana dentists’ self-reported educational characteristics, demonstrates that the number of dentists reporting completing their education out-of-state (in contiguous states or other U.S. states) has been increasing.

HOW MANY INDIANA DENTISTS PURSUED RESIDENCY TRAINING AFTER DENTAL SCHOOL?

Just under one-third (31.5%) of Indiana dentists report completing a residency after dental school. The top 5 residencies are General Practice Residency (6.3%), Orthodontics and Dentofacial Orthopedics (5.6%), Pediatric Dentistry (4.7%), Oral and Maxillofacial Surgery (4.5%), and Advanced Education in General Dentistry Programs (2.9%).

A RECENT INITIATIVE IN DENTAL EDUCATION: COMMUNITY-BASED EDUCATION

The Health Resources and Services Administration administers grant programs focused on strengthening the dental safety-net by supporting dental workforce development for underserved communities and populations. In 2018, the Indiana University School of Dentistry received a five year-award from HRSA to support the formalization of a community-based dental education (CBDE) program for dental students which seeks to 1) enhance the dental workforce in community-based settings and 2) to provide dental students with training and experience working in a community-based setting.

What does Indiana’s dental safety-net look like now? In 2020, 83 dentists reported practicing in a community-based dental practice setting (defined as: health center, school health service, other public health setting, local health department, mobile unit, or home health setting) and 1,642 dentists reported accepting Medicaid and/or serving patients covered by Indiana Medicaid.

Dentist workforce data is critical to evaluating the impact of the CBDE program on Indiana’s underserved communities. Stay tuned for more information about this program and its impact on Indiana!

1. Information on Health Resources & Services Administration and their grants to states to support oral health workforce activities is available at: https://www.hrsa.gov/grants/find-funding/HRSA-18-014
INDIANA DENTISTS PRACTICE CHARACTERISTICS
The majority of Indiana dentists (93.6%) report practicing in a dental office setting, which is defined as either a solo, group, or partnership practice. The remaining dentists reported practicing at health centers (1.7%), hospitals/Clinics (1.5%), or other settings (see data report for full breakdown of practice settings).

What are the characteristics of office-based dentists?
There has been a small but consistent decrease in the frequency of dentists reporting working in solo practices from 2016 to 2020 (57.7% to 51.2%) and a rise in the frequency of group practice settings (19.5% to 25.5%).

Indiana’s older dentists more frequently report practicing in a solo setting as compared to their younger counterparts, who more frequently report practicing in a group setting.

Populations Served and Services provided by Dentists

Are these age categories sufficient?
The age categories for the “populations served” mirror those reported by the American Community Survey. A number of important oral health initiatives target children under the age of 5, but the ACS population categorization for children does not enable assessment for this group. A new population categorization strategy is needed to parse out Indiana’s dental workforce capacity for children under 5 years of age.
INDIANA DENTISTS GEOGRAPHIC DISTRIBUTION

Population to One Dentist FTE
- No Reported Dentist FTE
- Less than 5,000
- 5,000 - 9,999
- 10,000 - 14,999
- 15,000 or Greater
- Dental HPSA

Data Sources: 2020 Indiana Dentist License and Supplemental Survey Data; Annual Estimates of the Resident Population for Counties in Indiana: April 1, 2010 to July 1, 2019 (CO-EST2019-ANNRES-18); Health Resources and Services Administration, Health Professional Shortage Area Data Warehouse, 2021

Notes: Population to provider FTE ratios cannot be calculated for counties with no reported dentist FTE
INDIANA ORAL HEALTH WORKFORCE
POLICY CONNECTIONS
What recent policies may impact the workforce?

MODIFICATIONS TO DENTISTS’ PRACTICE
House Bill 1079 (2021)¹ would amend the definition of the practice of dentistry, including permitting dentists to order and administer immunizations recommended by the Centers for Disease Control and Prevention Advisory Committee on Immunization Practices for individuals older than 11 years old. The bill outlines requirements a dentist must complete in order to administer vaccines (CPR certified, completed an immunization training, and following related protocol and procedures). Dentists would not be required to administer vaccines or required to complete immunization training if they do not desire to administer vaccines. This bill would also establish rules for virtual claim payments.

COVID-19 AND THE ORAL HEALTH WORKFORCE
During the public health emergency prompted by COVID-19, Governor Holcomb issued an Executive Order² which shut down all non-essential businesses. At that time, dental offices were specifically outlined as an essential business under “Healthcare and Public Health Operations.” However, as the epidemic worsened and limited personal protective equipment (PPE) was available, a few weeks later Governor Holcomb released a follow-up executive order³ which directed dental offices to cancel or postpone elective or non-urgent procedures that could be delayed without undue risk to the current or future health of the patient. This directive had a direct and substantial impact to dentistry.

In compliance with state orders and in an effort to support the state and national response to COVID-19 by conserving PPE, many dental offices shut down for a period of approximately 4 weeks, until non-urgent and elective procedures were permitted to continue on April 24th if PPE could be secured and policies and procedures were in place to ensure the health and safety of personnel and patients.⁴

The full impact of COVID-19 on the oral health workforce is not yet known. It is anticipated that there may have been significant economic fallout for dentists who were small business owners, as they may not have recovered after the shutdown. Future studies will examine the impact of COVID-19 on the oral health workforce in communities, particularly those communities that had insufficient dental workforce capacity prior to the pandemic. If House Bill 1079-2021 is enacted into law, dentists would be able to support the COVID-19 response through administration of vaccines.

¹ Information on HB 1079 can be found at: [http://iga.in.gov/legislative/2021/bills/house/1079](http://iga.in.gov/legislative/2021/bills/house/1079)
² [https://www.in.gov/gov/files/Executive_Order_20-08_Stay_at_Home.pdf](https://www.in.gov/gov/files/Executive_Order_20-08_Stay_at_Home.pdf)
⁴ [https://www.in.gov/gov/files/20200424155508620.pdf](https://www.in.gov/gov/files/20200424155508620.pdf)
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