



MISSOURI DEPARTMENT OF
**HEALTH &
SENIOR SERVICES**

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MISSOURI DEPARTMENT OF
**HEALTH &
SENIOR SERVICES**

Office of Dental Health

The State of Missouri's Oral Health

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Chief Dental Consultant

Objectives



1

Share Office of Dental Health general updates

2

Review Office of Dental Health five priority areas and give program status updates as it relates to Missouri's oral health landscape

3

Share the strategic direction of the Office of Dental Health

4

Review the Rural Health Transformation Program and discuss ways oral health will play a role in program initiatives



Office of Dental Health Updates

Office of Dental Health

Mission



To improve the oral health of all Missourians through access, education, prevention and leadership.

Office of Dental Health

Vision



Optimal oral health for all Missourians.

Office of Dental Health Values



Access

We deliver oral health services and education to Missourians in a manner that is sensitive to their individual and unique needs.



Collaboration

We engage and communicate openly with oral health partners in Missouri to improve oral health for all Missourians



Integrity

We maintain a high level of ethics and professionalism when serving Missourians and collaborating with oral health partners to help build and maintain public trust



Excellence

Empower team members to be thought leaders in oral health while continuously improving to exceed the needs of Missourians



Accountability

We value the responsibility to ensure all Missourians trust us as an oral health partner and source of reliable information



MISSOURI DEPARTMENT OF
**HEALTH &
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Department Structure

Office of Dental Health Placement

**Department Health and
Senior Services**

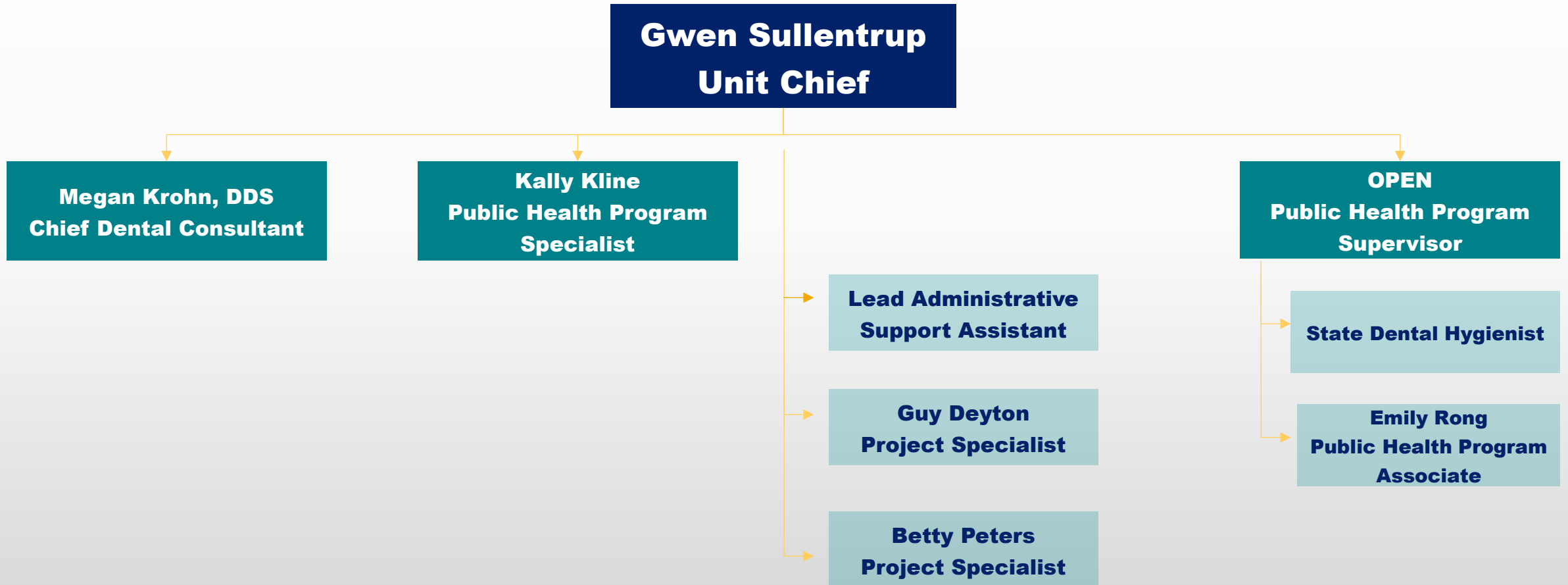


**Division of Community
and Public Health**



**Office of Dental
Health**

Office of Dental Health



Office of Dental Health Funding



- The office is grant funded
- All current grants and deliverables are on track
- Planning for fiscal year 2027
- Adjusting as we learn more about federal funding





Areas of Focus

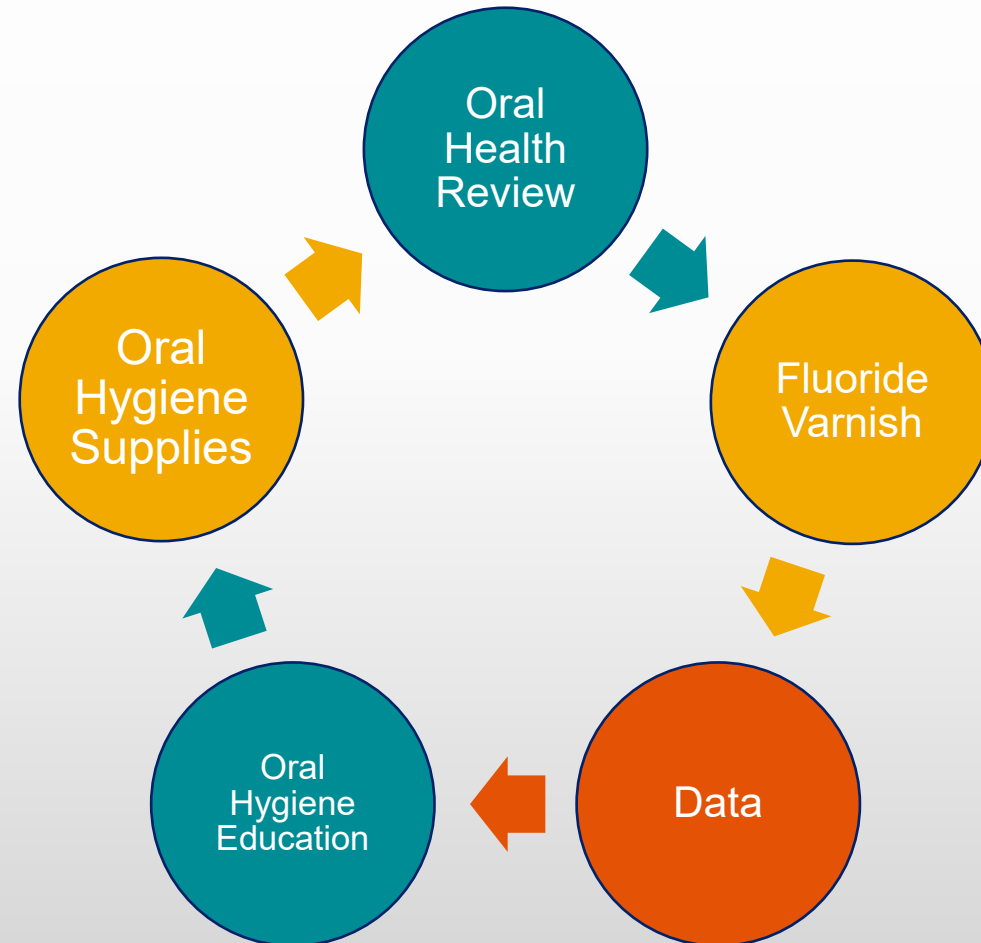
Access to Care



Prevention and Oral Health Education

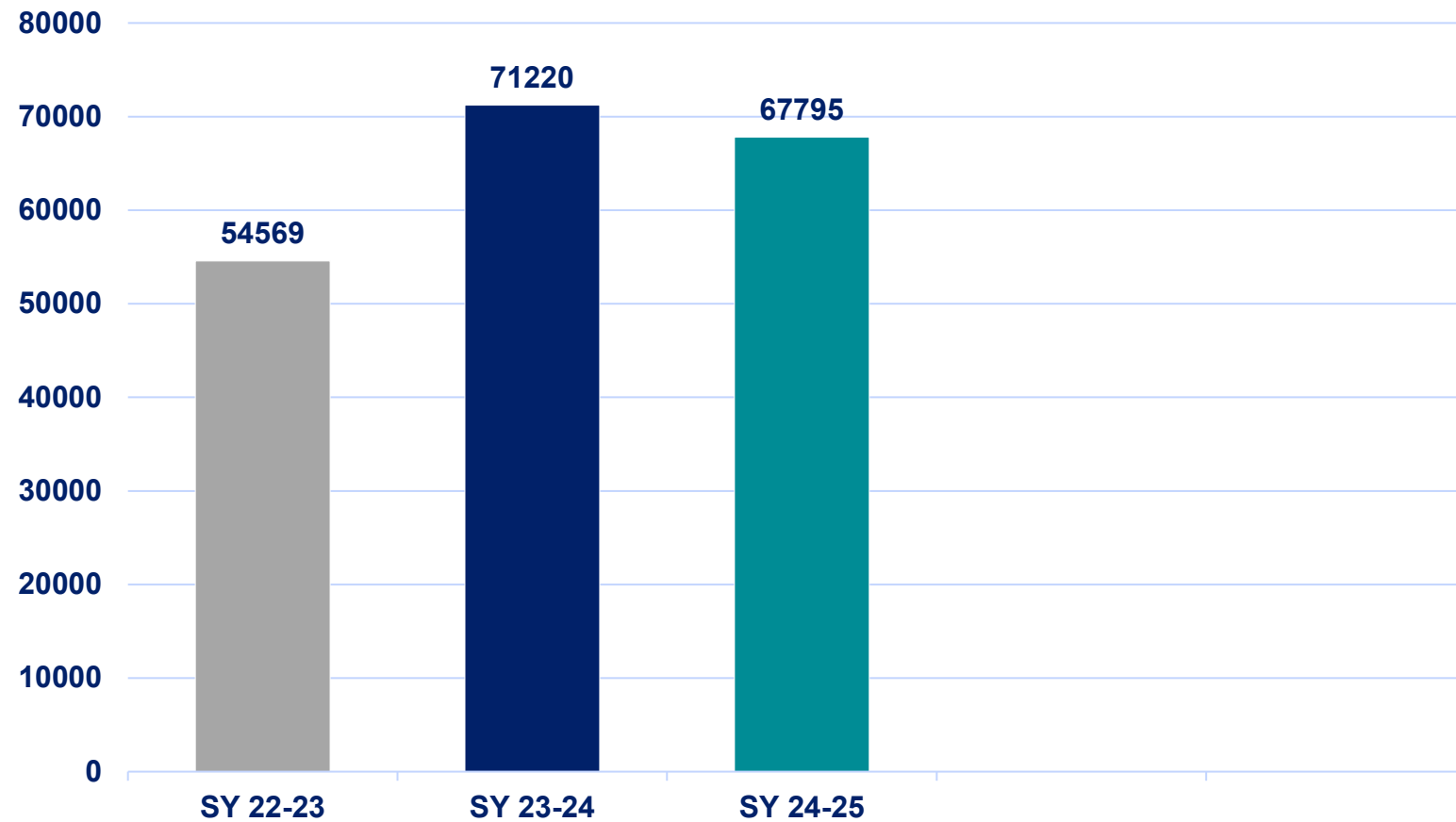
Preventive School Based Services (PSP)

Dedicated to
improving healthy
smiles for all of
Missouri's
children through
education and
preventive
services





Number of School Aged Children Served



Prevention and Oral Health Education

Evidence Based Preventive Dental Services (EBPDS)

- 6 contractors, 7 counties, 137 schools
- Number of sealants placed during 24-25 school year: **8,397**
- Supported through CDC grant funding

Workforce

Current Initiatives



Dental Assistant Pipeline

- Support for continuing programs at Pike-Lincoln, Lewis & Clark and Clinton Tech career centers
- New programs



Student Scholarships

- Scholarships for 3rd and 4th year dental students currently working with veterans



Dental Hygiene Retention

- Health Professional Loan Repayment Program for RDHs



Dental Hygiene Training Innovation

- Further innovative training models for dental hygiene

Loan Repayment for Dental Hygienists



HEALTH PROFESSIONAL LOAN REPAYMENT PROGRAM (HPLRP)

NOW INCLUDING DENTAL HYGIENISTS!

Supported with funding provided by Delta Dental of Missouri



HPLRP provides forgivable loans to health care, mental health, and public health professionals to repay existing qualifying educational debt in exchange for a 2-year service obligation in an underserved area.



Applications are accepted Sept. 1 to Nov. 1

For more information visit:

<https://health.mo.gov/living/families/primarycare/hplr>

Contact Us:



573-751-6441



DHSS.LoanRepayment@health.mo.gov



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Workforce



Pilot Projects Assessing Expansion of Workforce

Expanded Functions in Long Term Care Facilities

- Project administered by Office of Dental Health
- IRB approved
- Data gathering and final analysis within ODH
- Supported by HRSA grant funding from 2022-2026.

Oral Preventative Assistant Expanded Function

- Project administered by Missouri Dental Association
- IRB approved
- Independent primary data investigator
- Office of Dental Health gathers data and delivers to ADA HPI for independent analysis



Statue Change 332.325

332.325. Medically underserved populations, pilot project — requirements — rulemaking authority — expiration date. —

- Allows the MDB in collaboration with DHSS and ODH to approve pilot projects aimed at extending care to medically underserved populations
- The board may promulgate rules and regulations to implement the provisions of this section.
- Passed August 28, 2022
- Expiration date August 28, 2026
- Final report due to the MDB December 31, 2025



LTCF Pilot Project

20 CSR 2110-2.133 Telehealth Dental Pilot Project in Medically Underserved Populations

- Specific Populations: Residents in assisted living facilities, intermediate care facilities, residential care facilities, skilled nursing facilities and homebound special needs patients
- Rule offers waivers to chapter 332 which offers definitions for dental assistants and hygienists, including the supervision levels in which they must practice
- Telehealth mediated supervision level for EFDAs and RDH
- Includes placement of caries-arresting medicament, hygienist delivery of local anesthesia, periodontal therapy including SRP prior to examination, diagnosis and treatment planning

LTCF Pilot Project

Pilot Review



- Final Board Report: **December 2025**
- 3 contractors, serving residents in 6 nursing homes
- 334 residents enrolled with more than 1,661 procedures delivered
- Quality / Safety Assurance:
 - Implementation of a Modified Frail Questionnaire
- Outcomes:
 - No adverse events for patients reported
 - “Infection Control” focus for residents
- Barriers to Care:
 - Varies by contractor difference
 - Facility Support
 - Cost

LTCF Pilot Project

Oral Hygiene Assistance



- Colgate-Palmolive supported project
- Providing oral health training and education to the medical teams within LTCF
- Providing supplies and equipment to the facilities to support improved oral health care
- Supports these settings with the necessary skills to provide proper oral health care

Access to Care



- State funded
- Serves individuals w/ IDD



**Elks Mobile
Dental Program**

- Grant to support direct care delivery for veterans



**Veterans Oral
Health Care**

- State funded
- Serves individuals unable to access care



**Donated Dental
Services**

Quality

Oral Health Data



	Missouri	US	Target*
% of 3 rd grade children that have untreated tooth decay	29%	13.4%	10.2%
% of Medicaid eligible aged 1-20 years received preventive dental services	34.8%	78.8%	79.9%
% of Medicaid eligible pregnant women received preventive dental services	47.9%	46%	N/A
% of adults aged 65+ w/ all permanent teeth extracted due to decay or disease	19.9%	7.9%	N/A



Population Health

Water Fluoridation Data

Missouri has **388 water systems** that either have natural fluoride levels at 0.6 mg/L or higher or that participate in a local water fluoridation program where they adjust the level of fluoride.

130 naturally fluoridated water systems—have natural fluoride levels ranging from **0.61 to 3.81 mg/L**.

256 water systems adjust fluoride level or purchase water from a system that does.

4.2 million people or **76.8%** of Missourians served by fluoridated water systems.

Only 63.5% of the population receives **optimally fluoridated water**. (3.4 million people) have



Changes in Missouri's Fluoridation Status

Voted to continue fluoridation:

Rolla May 2025

Voted to stop fluoridation:

Hannibal June 2025

Crane June 2025

Cabool October 2025

90 day initiation to stop fluoridation:

Park Hills, MO June 2026





Missouri Oral Health Landscape

Health Professional Shortage Area Definitions

- HPSA: Health Professional Shortage Area
 - Geographic: Shortage of providers for an entire group of people within a defined geographic area
 - Population: Shortage of providers for a specific group of people within a defined geographic area.



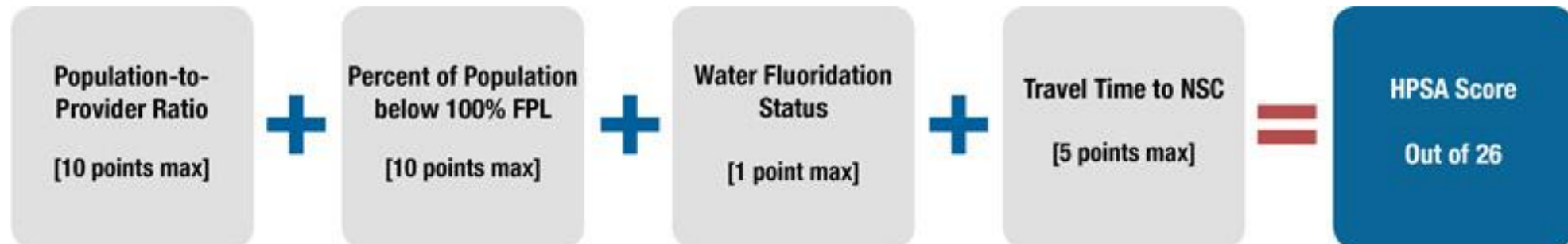
HPSA Scoring

Dental Health HPSA Scoring

Dental Health HPSAs can receive a score between 0-26.

What goes into the score?

- Population-to-Provider Ratio [10 points max]
- Percent of population below 100% Federal Poverty Level (FPL) [10 points max]
- Water fluoridation status [1 point max]
- Travel time to Nearest Source of Care (NSC) outside the HPSA designation area [5 points max]



Missouri Oral Health Workforce Shortage



- Missouri has 329 Dental HPSA's
- 97% of the counties in Missouri contain at least one shortage area
- Estimated only 20.87% of the need is being met
- **An additional 334 dentists are required to eliminate all HPSA areas**
 - **Missouri graduates approximately 180 new dentists per year**

Missouri Oral Health Workforce Shortage



- ADA HPI U.S. Dentist Workforce: 2025 Updates
 - [Dentist Workforce | American Dental Association](#)
- Overall takeaways:
 - Dentist workforce is growing and changing
 - There is a gap in supply of dentists in urban vs rural counties
 - Younger dentists are less likely to practice in rural areas
 - Dentist workforce is near the end of a retirement surge
 - Suggests 30% of Missouri dentists are >55 and older
 - Supply of dentists projected to increase through 2040 driven, in part, by the opening of new dental schools

Missouri Oral Health Workforce Shortage



- ADA HPI U.S. Dentist Workforce: 2025 Updates
 - [Dentist Workforce | American Dental Association](#)
- Overall takeaways:
 - Pediatric dental specialists have grown 121% since 2001
 - Rural supply of dentists is in a steady decline and is significantly lower than urban dentists
- Missouri Practice Types:
 - 25% are in solo practice
 - 12% in practices with 100 or more locations
 - 16% are affiliated with a DSO

Dentists in Missouri

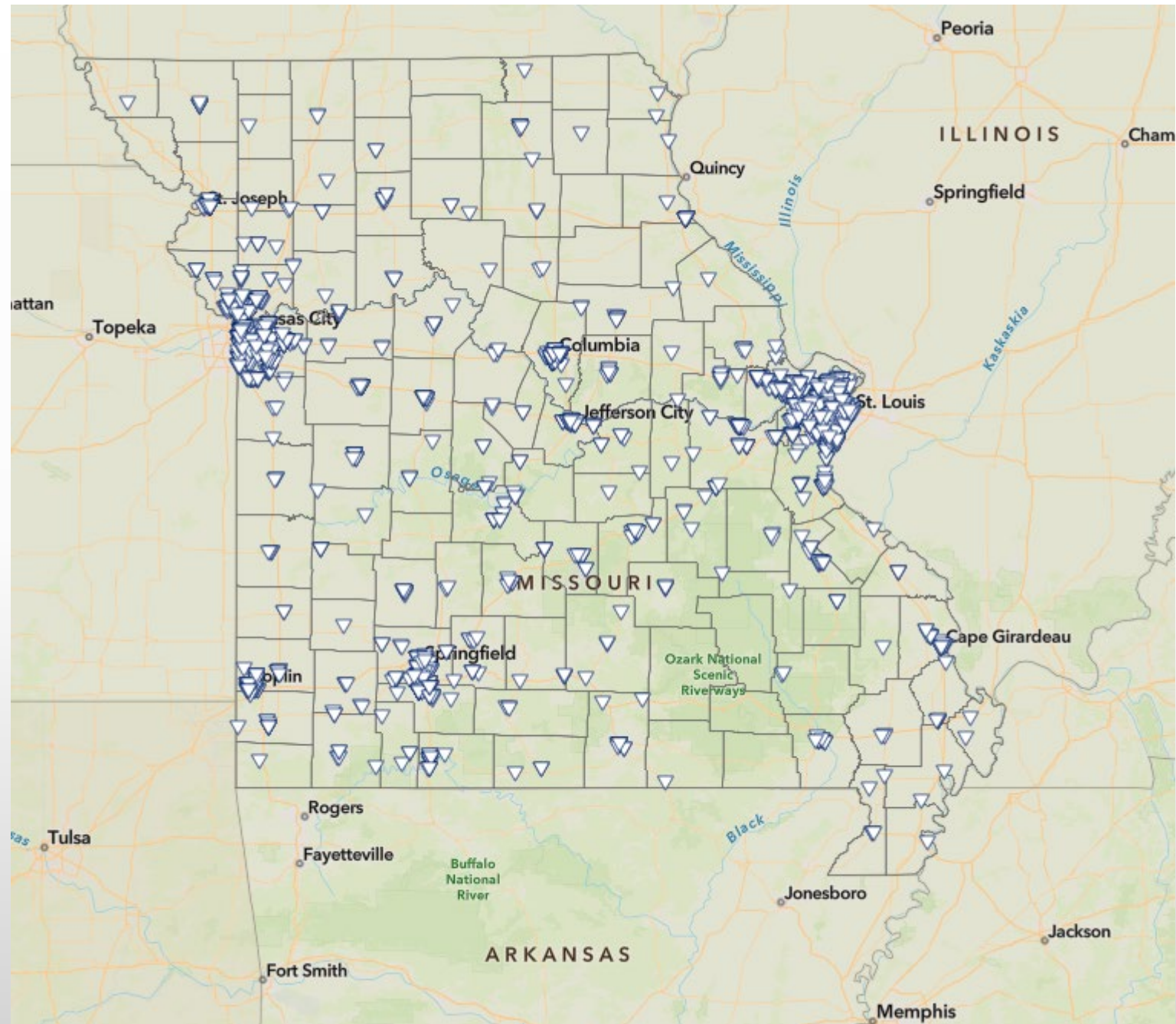
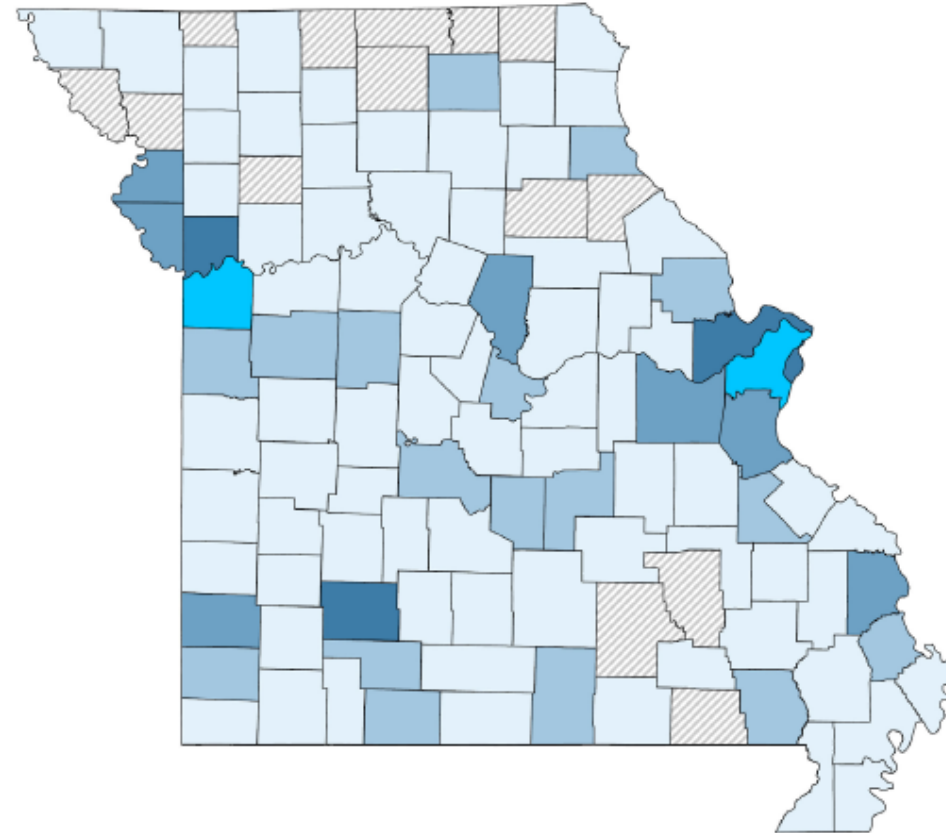




Figure 1. County-Level Distribution of Primary Practice Locations of Dentists in Missouri

Dentists in Missouri



Dentist Primary Practice
(N=3,544)

1 - 13	242 - 836
14 - 47	None
48 - 138	
139 - 241	

Missouri Oral Health Workforce Shortage



- ADHA 2022 Dental Workforce Shortages Reports
 - [Dental workforce shortages: Data to Navigate Today's Labor Market](#)
- **Overall takeaways:**
 - Numbers of RDH and DA graduating from allied education programs **may not be enough** to compensate for loss of team members who permanently left during the pandemic
 - Competitive benefits are driving force in employment choice for RDH and DAs
 - DSOs are better positioned to offer benefits (satisfier) however most RDH and DAs working in these environments report dissatisfaction

Missouri Oral Health Workforce Shortage

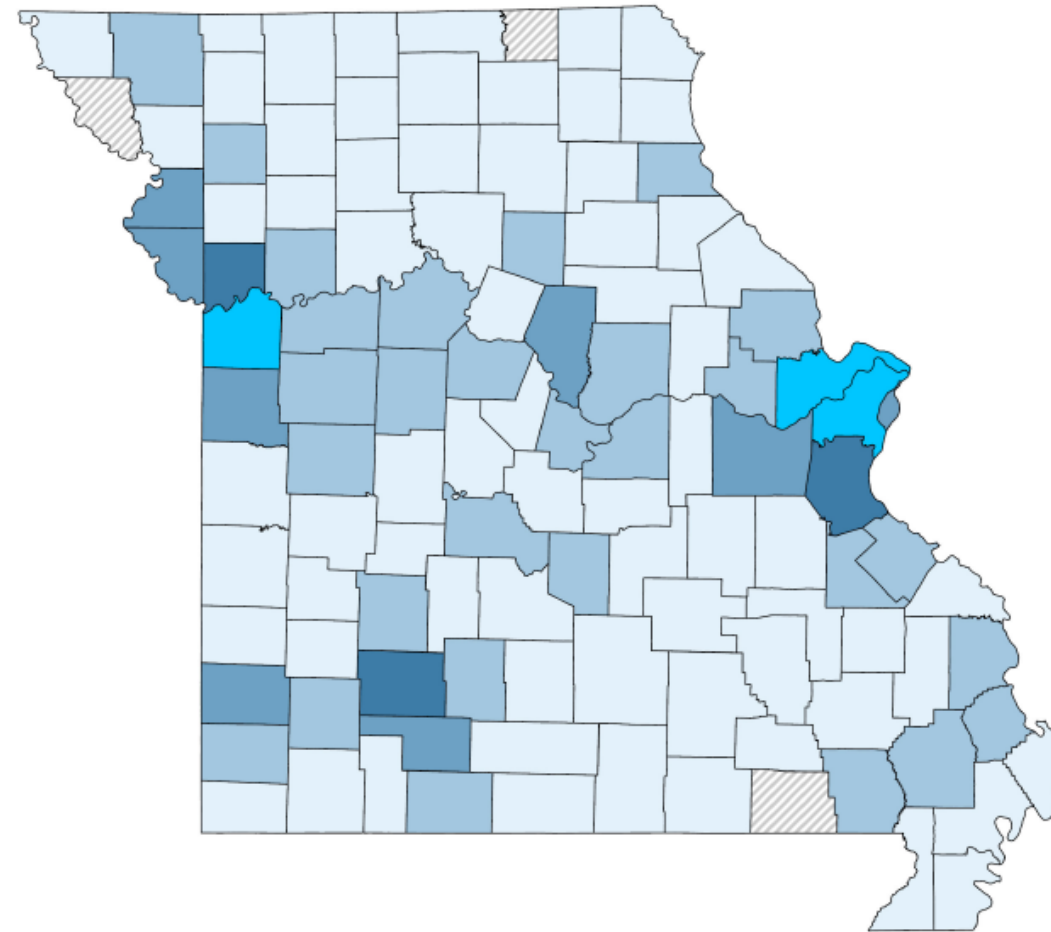


- Missouri Dental Hygiene Association 2022 Survey Report
- **Overall takeaways:**
 - Health issues, burnout and the feeling of inadequate time for quality care were reported as the main reasons for reducing clinical care hours
 - Burnout, personal life focus, and non-clinical roles reported as reasons for not practicing in a clinical setting
 - Most survey respondents reported working between 33-40 hours per week

Figure 2. County-Level Distribution of Primary Practice Locations of Dental Hygienist in Missouri



Dental Hygienists in Missouri



Dental Hygienist Primary Practice

(N=3,768)

1 - 14

15 - 43

44 - 137

138 - 219

220 - 574

None



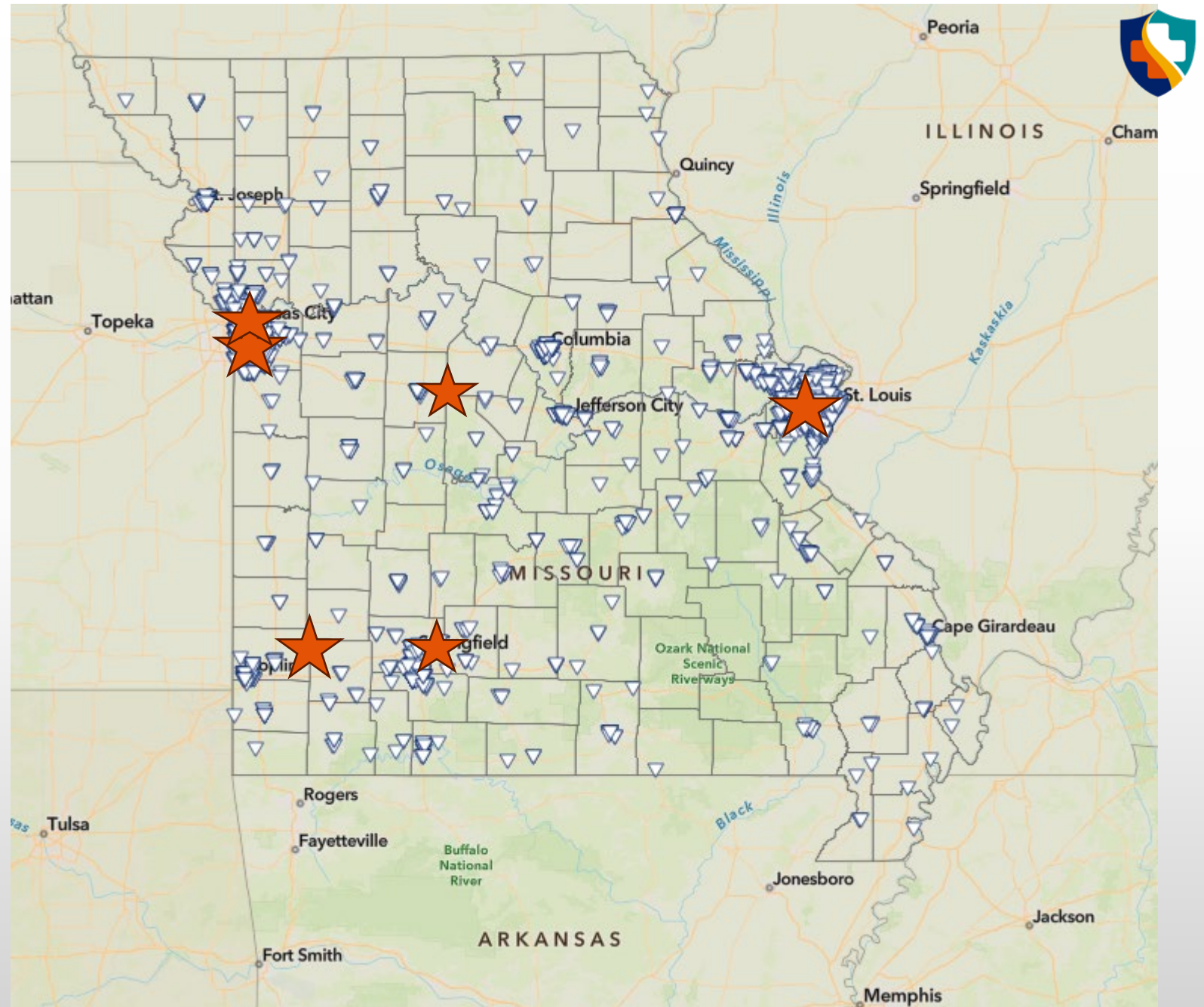
Center for Health Policy
University of Missouri

Dental Hygiene Training Programs



- 6 programs in Missouri
 - Associate and bachelor degrees
- Missouri is graduating approximately 150* dental hygienists per year

Dental Hygiene Programs in Missouri



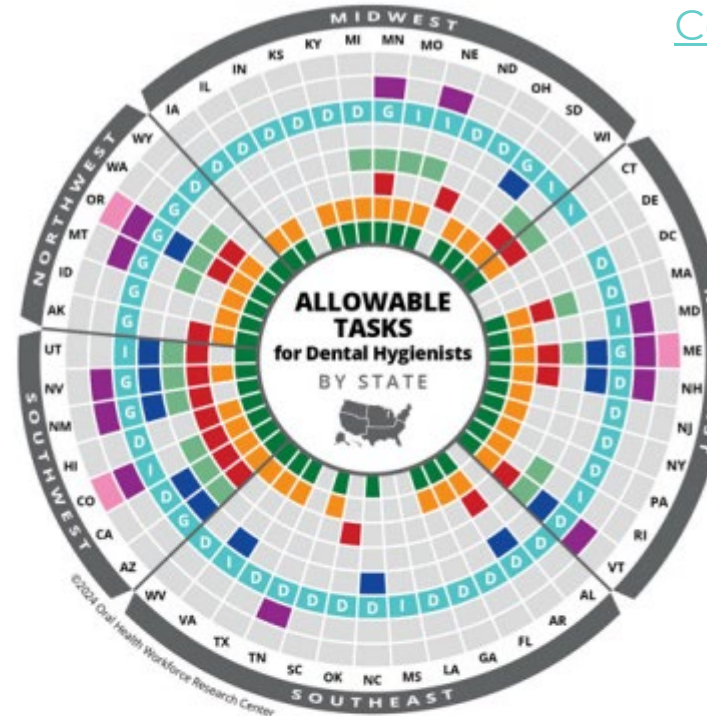
Dental Hygiene Scope of Practice

Oral Health Workforce Research Center



The purpose of this graphic is to help planners, policymakers, and others understand differences in legal scope of practice across states, particularly in public health settings.

Research has shown that a broader scope of practice for dental hygienists is positively and significantly associated with improved oral health outcomes in a state's population.^{1,2}



- Dental Hygiene Diagnosis
- Prescriptive Authority
- Local Anesthesia
 - D Direct I Indirect G General
- Supervision of Dental Assistants
- Direct Medicaid Reimbursement
- Dental Hygiene Treatment Planning
- Provision of Sealants
- Direct Access to Prophylaxis
- Not Allowed / No Law

■ Dental Hygiene Diagnosis

The identification of oral conditions for which treatment falls within the dental hygiene scope of practice, as part of a dental hygiene treatment plan.

■ Prescriptive Authority

The ability to prescribe, administer, and dispense fluoride, topical medications, and chlorhexidine.*

■ Local Anesthesia

The administration of local anesthesia.

LEVEL OF SUPERVISION

- D **Direct:** The dentist is required to be physically present during the administration of local anesthesia by the dental hygienist.
- I **Indirect:** The dentist is required to be on the premises during the administration of local anesthesia by the dental hygienist.[†]
- G **General:** The dentist is required to authorize the administration of local anesthesia by the dental hygienist but is not required to be on the premises during the procedure.

■ Supervision of Dental Assistants

The ability to supervise dental assistants when performing tasks within the dental hygiene scope of practice.

■ Direct Medicaid Reimbursement

The direct Medicaid reimbursement of dental hygiene services to the dental hygienist.

■ Dental Hygiene Treatment Planning

The ability of a dental hygienist to assess oral conditions and formulate treatment plans for services within the dental hygiene scope of practice.*

■ Provision of Sealants Without Prior Examination

The ability of a dental hygienist working in a public health setting to provide sealants without prior examination by a dentist.[‡]

■ Direct Access to Prophylaxis from a Dental Hygienist

The ability of a dental hygienist working in a public health setting to provide prophylaxis without prior examination by a dentist.

■ Not Allowed / No Law



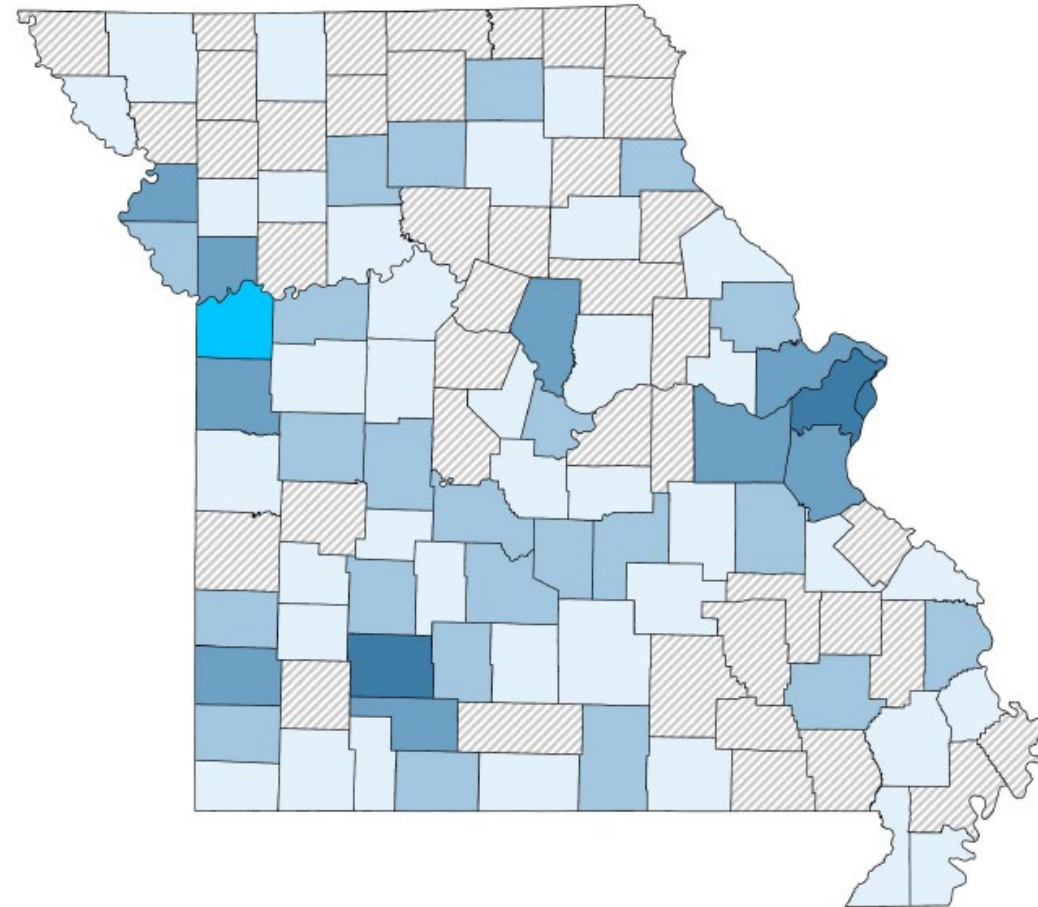
Missouri Dental Assistants

- Difficult to measure shortage due to limited licensure
- Missouri has five expanded function certifications for dental assistants
 - Expanded functions must be utilized under direct supervision
- Training programs vary in location, length and experience

Figure 3. County-Level Distribution of Medicaid-Enrolled Dentists in Missouri



Medicaid Enrolled Dentists in Missouri



Dentists Medicaid
Enrollment

(N=949)

1 - 5

6 - 17

18 - 47

48 - 94

95 - 162

None



Center for Health Policy
University of Missouri

Access to Care



Dental Care Utilization Among Child Medicaid and CHIP Beneficiaries

(Published December 2025)

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State	Percentage of Children (Ages 1–20) Who Visited a Dentist in the Past 12 Months and Were Continuously Enrolled in Medicaid or CHIP for at Least 90 Days								
	2016	2017	2018	2019	2020	2021	2022	2023	2024
Missouri	38%	36%	36%	41%	36%	37%	37%	38%	40%



Access to Care

Dental Care Utilization Among Children Covered by Private Insurance

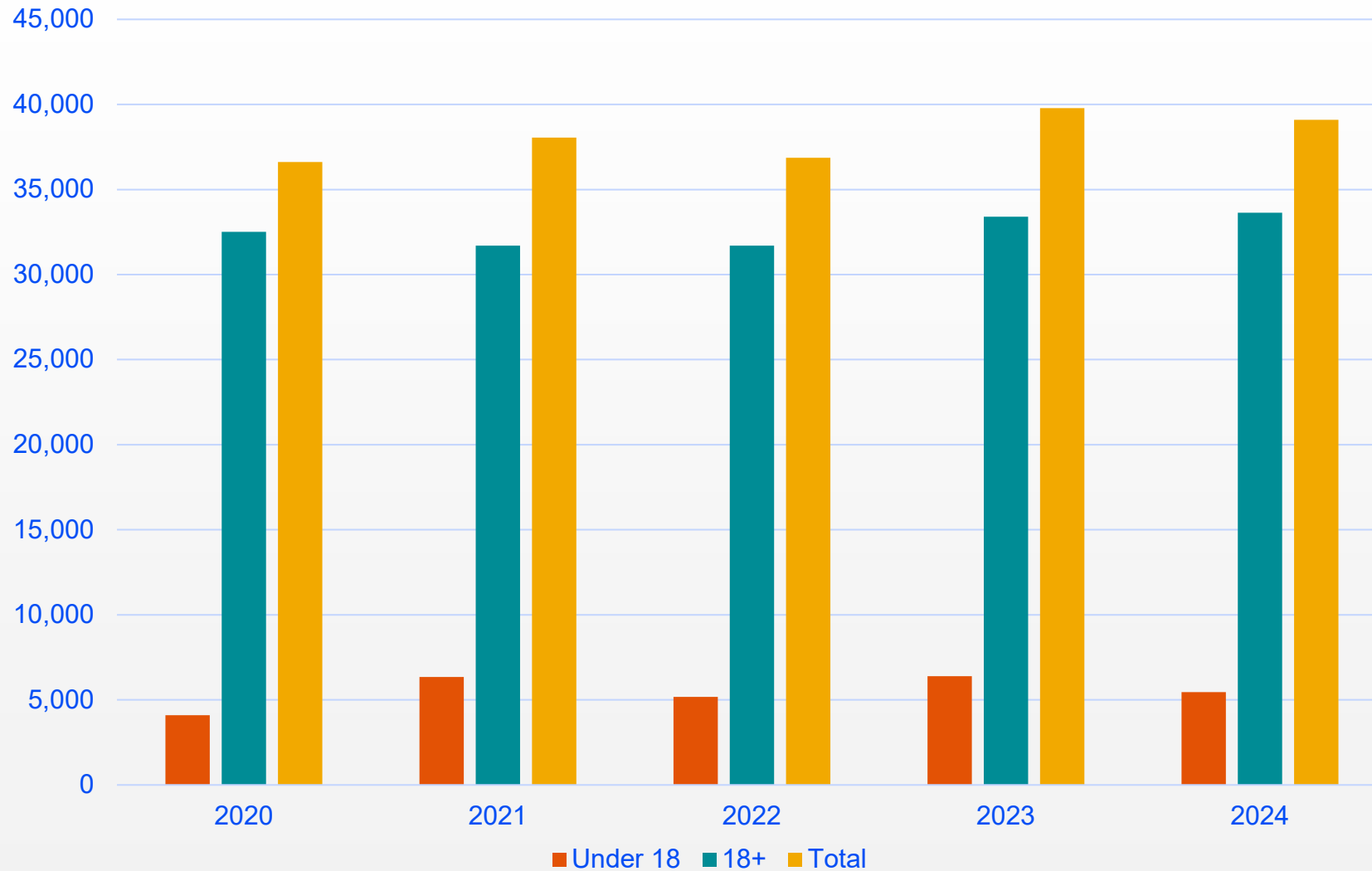
(Published December 2025)

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State	Percentage of Children (Ages 1–20) Who Visited a Dentist in the Past 12 Months and Were Continuously Enrolled in Insurance for at Least 90 Days							
	2016	2017	2018	2019	2020	2021	2022	2023
Missouri	65%	66%	66%	64%	59%	63%	61%	62%



Non-Traumatic Dental Complaint Emergency Room Visits





Access to Care

Non-traumatic dental complaints in emergency room setting summary points:

- Trend was flat from 2020-2022 with a slight increase in 2023-2024
- Visits are highest in 18+ age group over under 18 group
- 2023 and 2024: Individuals (adults and children) with Medicaid were the highest utilization group when looking at data broken out by pay source (not shown in graph)
 - Doing further analysis for trending by pay source over time



Access to Care

High needs subpopulations experiencing significant barriers to care:

1. Individuals with special health care needs
2. Veterans
3. Rural citizens
4. Aging individuals
5. Patients requiring anesthesia or hospital level oversight for their dental care

Workforce Solutions



Training

Retention

**Care
Delivery**

Innovation in Dental Hygiene Training



- **Purpose:** Explore partnership opportunities between dental hygiene programs and clinical settings to expand training capacity
- **Outcome:** By training dental hygienists in an underserved setting, the chance of employment in these settings is increased

Innovation in Dental Hygiene Training



Goals:

1. Increase the number of dental hygienists in the workforce
2. Diversify the setting in which dental hygienists are trained
3. Expand patient experiences for dental hygiene students



Oral Health Workforce Benefits

- Students train in underserved settings are more likely to remain in underserved settings
- Access to care creation during educational period
- Increases the number of dental hygienists entering the workforce



Provider Retention

- Loan Repayment
 - NHSC → Federal
 - SLRP, HPLRP → State
- Other suggested solutions
 - Linkage program for rural providers
 - Support for financial burden of practice owner or partnership
 - Support for necessities such as childcare and home purchasing



Summary

- Dentist workforce - Expected to grow, increase by 80 in 2027
- Dental Hygiene workforce – Expected to grow, based on projected programs expansions
- Dental Assistants workforce – Strategies in place but need to continue breaking down barriers for specific geographic locations
- Training, Retention and Scope are necessary for lasting solutions



Summary

- Access to care based on geographic regions –a concern, but new resources emerging
- Access to care based on specific subpopulations – a concern and will require capacity and systems building with likely policy changes to support meaningful change
- Although Medicaid providers has increased, utilization by individuals with Medicaid coverage has not

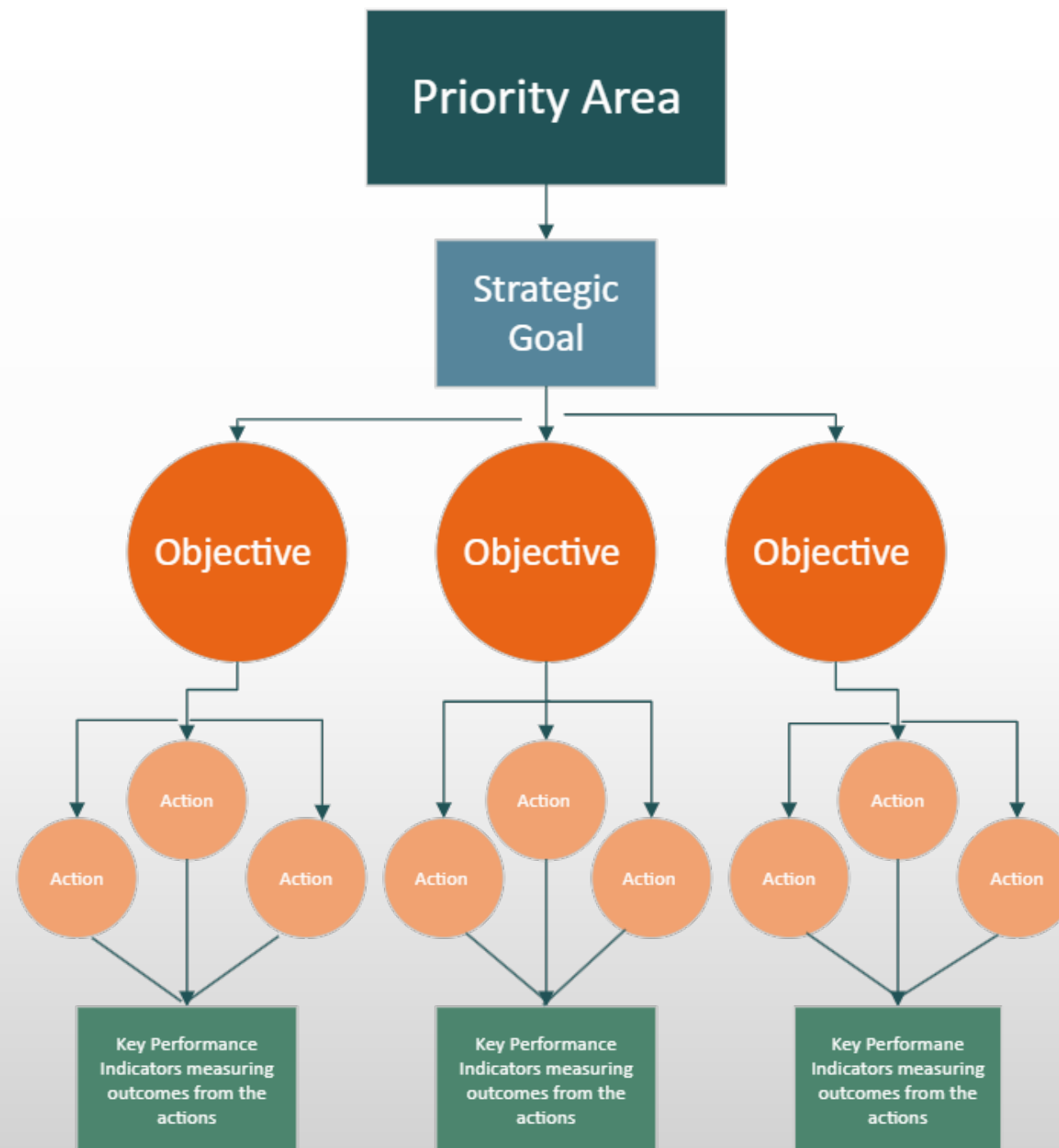




Office of Dental Health

Strategic Plan

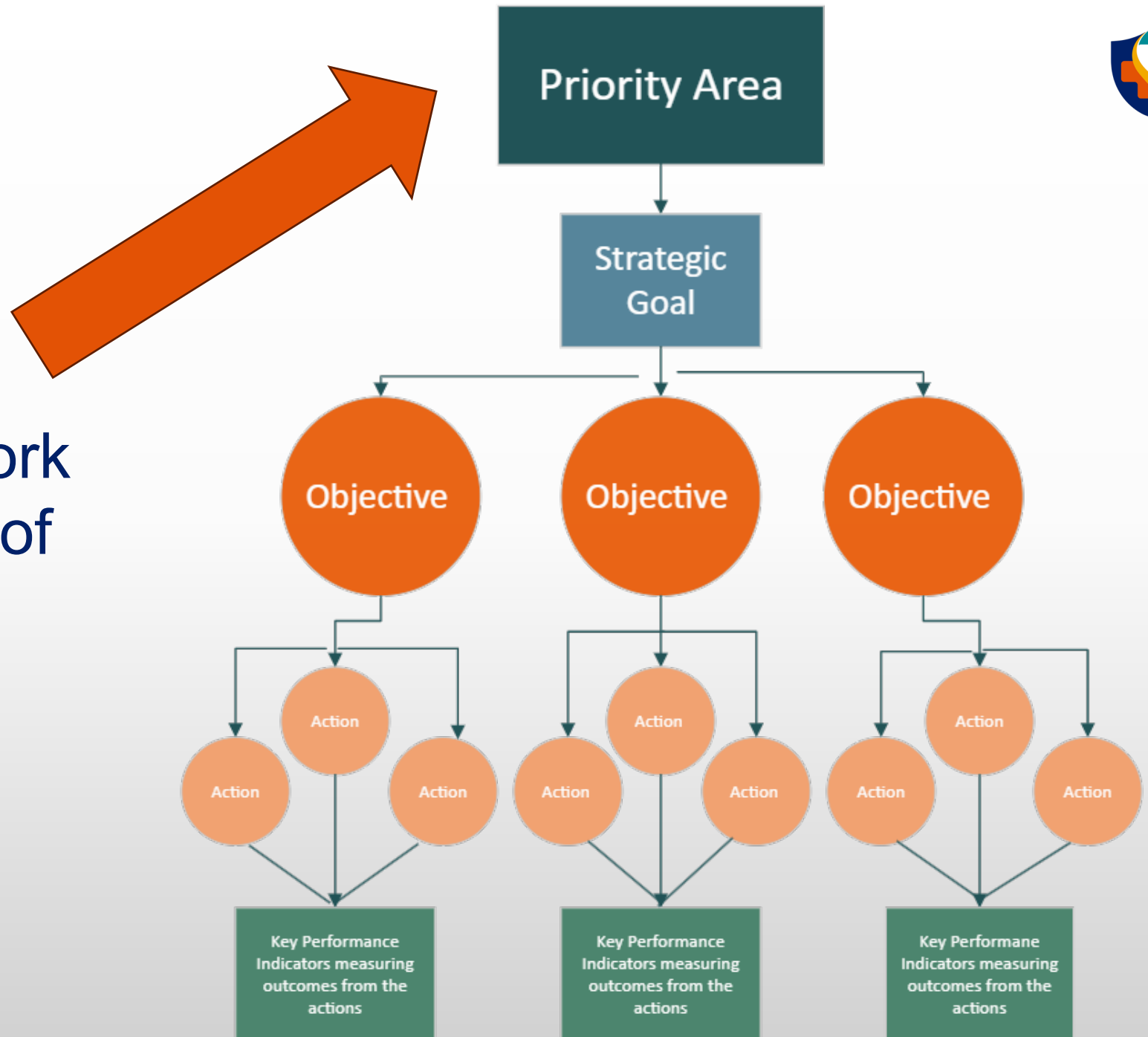
- Transition from a siloed office to a team set on building systems that increase the capacity to improve oral health across Missouri
- Ensure ODH work and resulting outcomes are measurable
- Align work with our focus areas, broader department strategy and meet the oral health needs of Missourians
- Value people impact above all else





Priority Area:

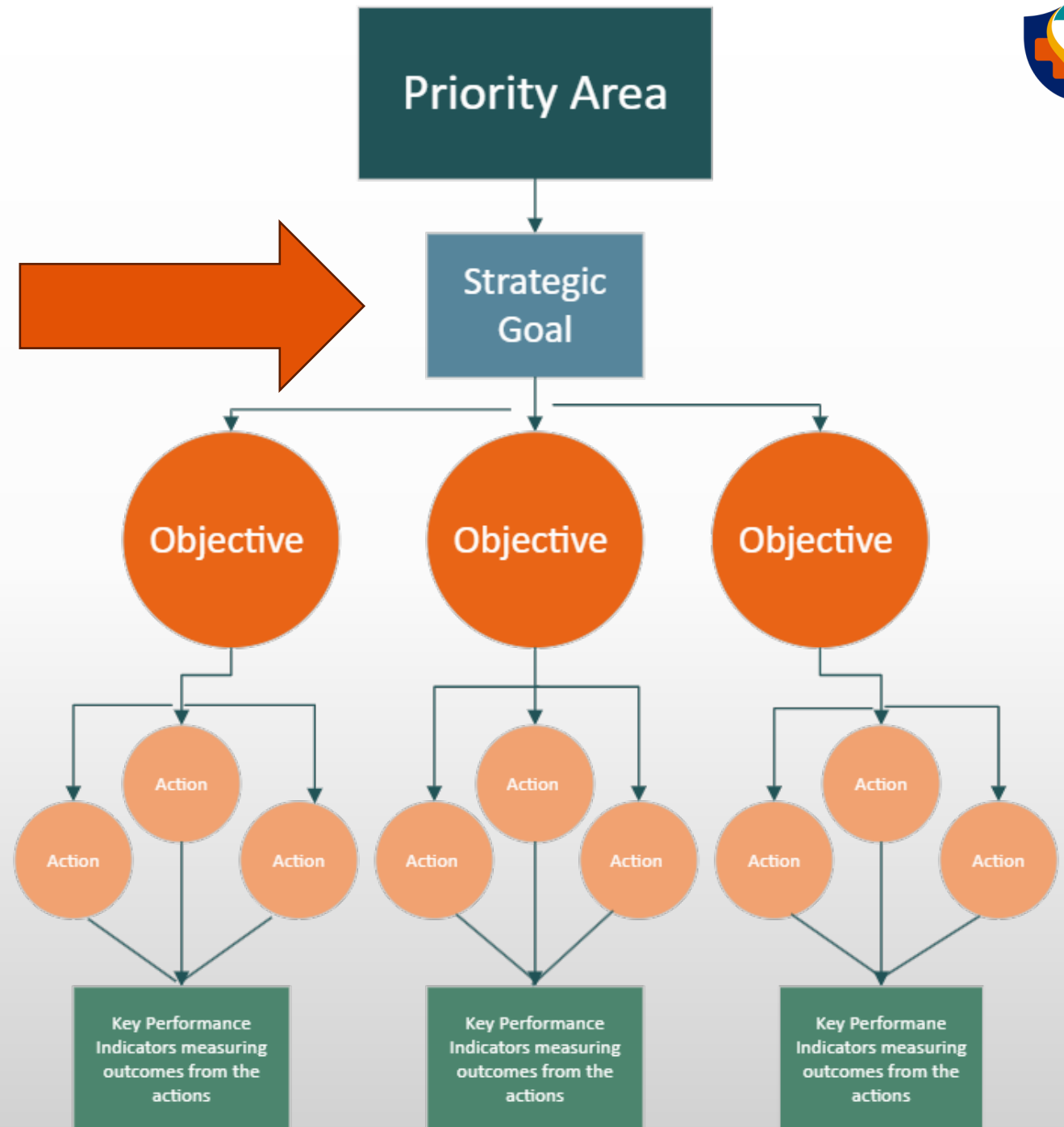
Areas of focus for work completed by Office of Dental Health.





Strategic Goal:

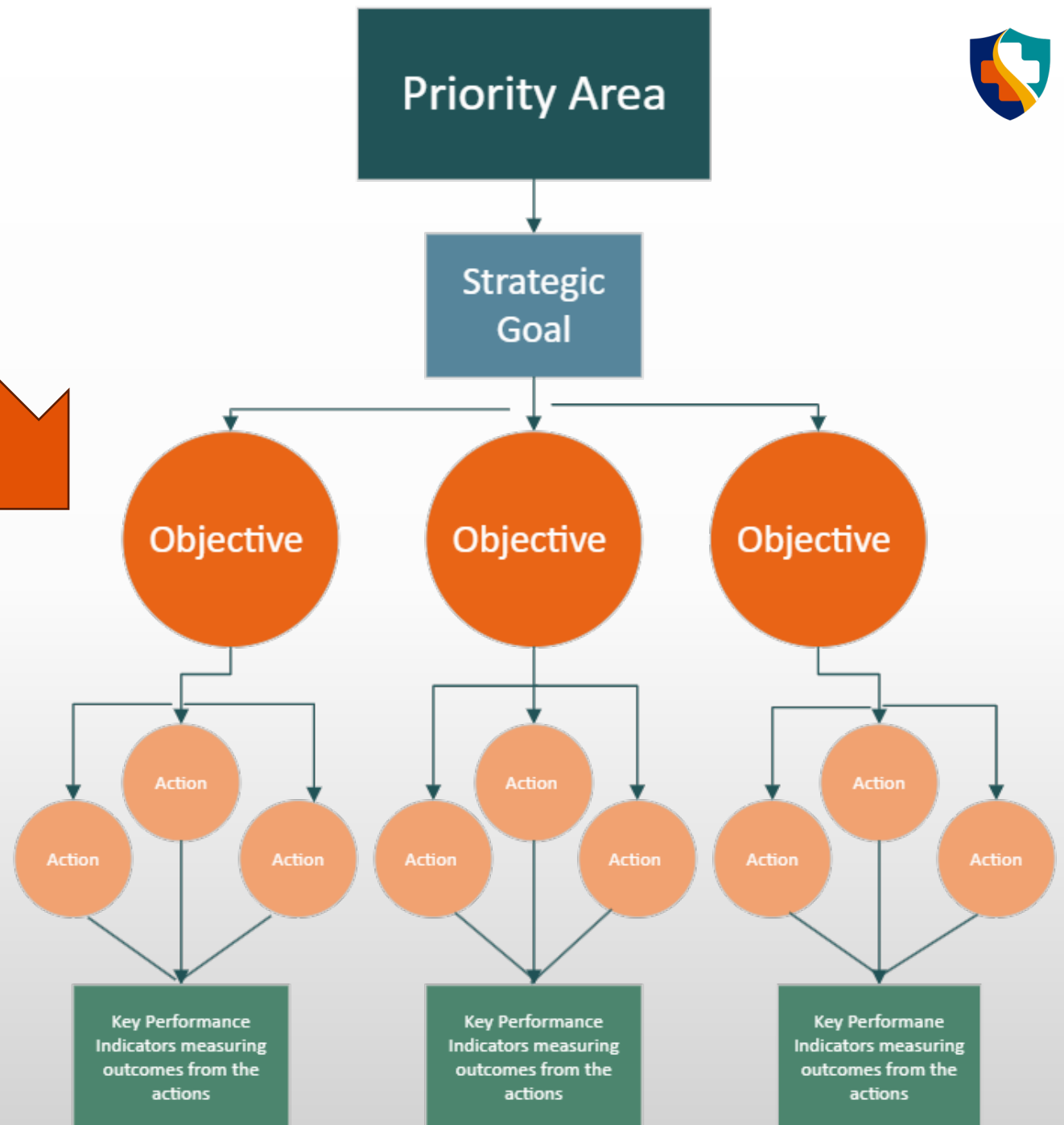
The big picture goal for each focus area. Answers the “why” question that each priority area aims to achieve.





Objectives:

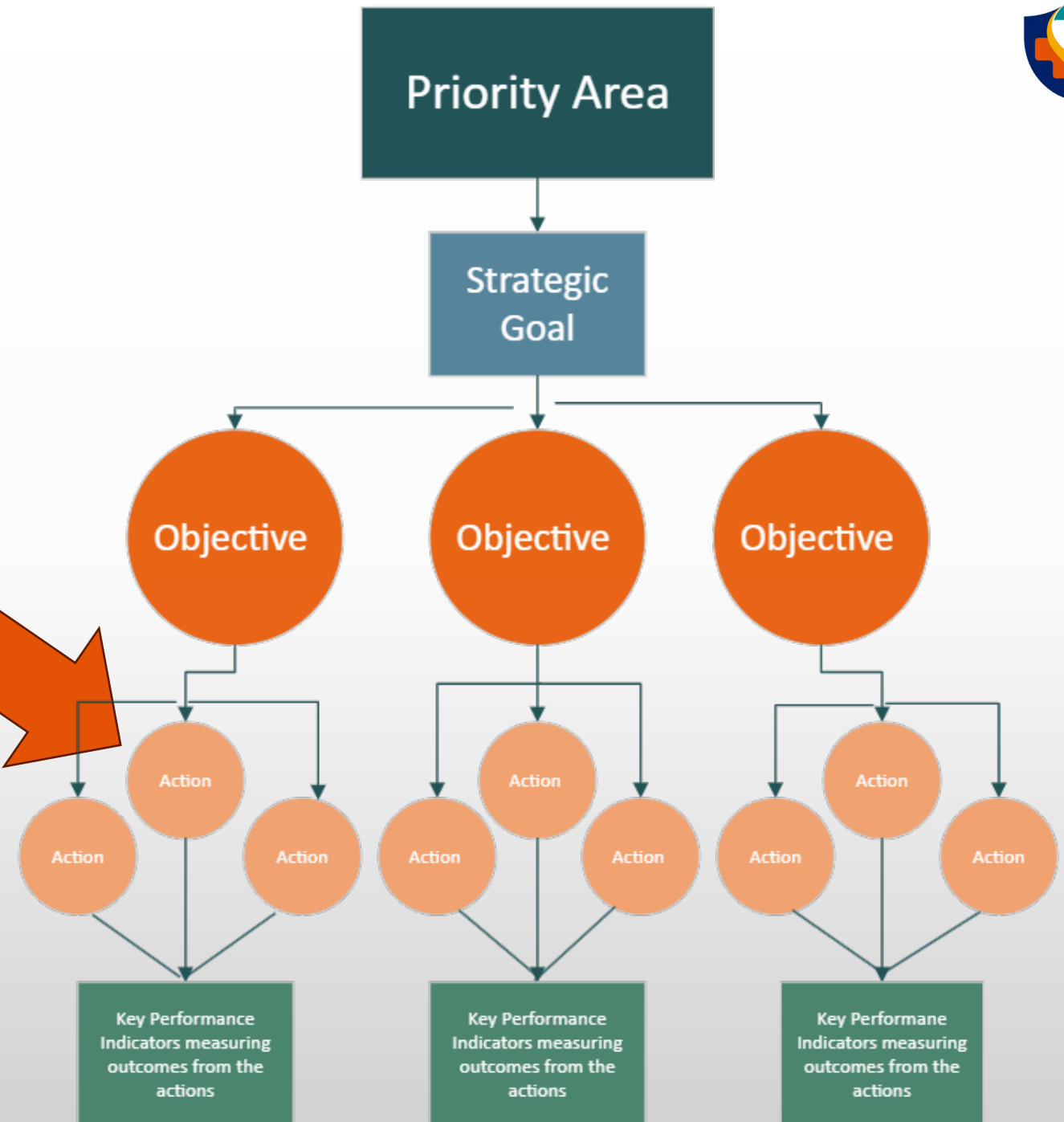
Broad approaches and initiatives necessary to drive the strategic goals forward. Answers the “what” question for each strategic goal. Long term work that require multiple action items to measure the final outcomes. 5 or more years.





Action Items:

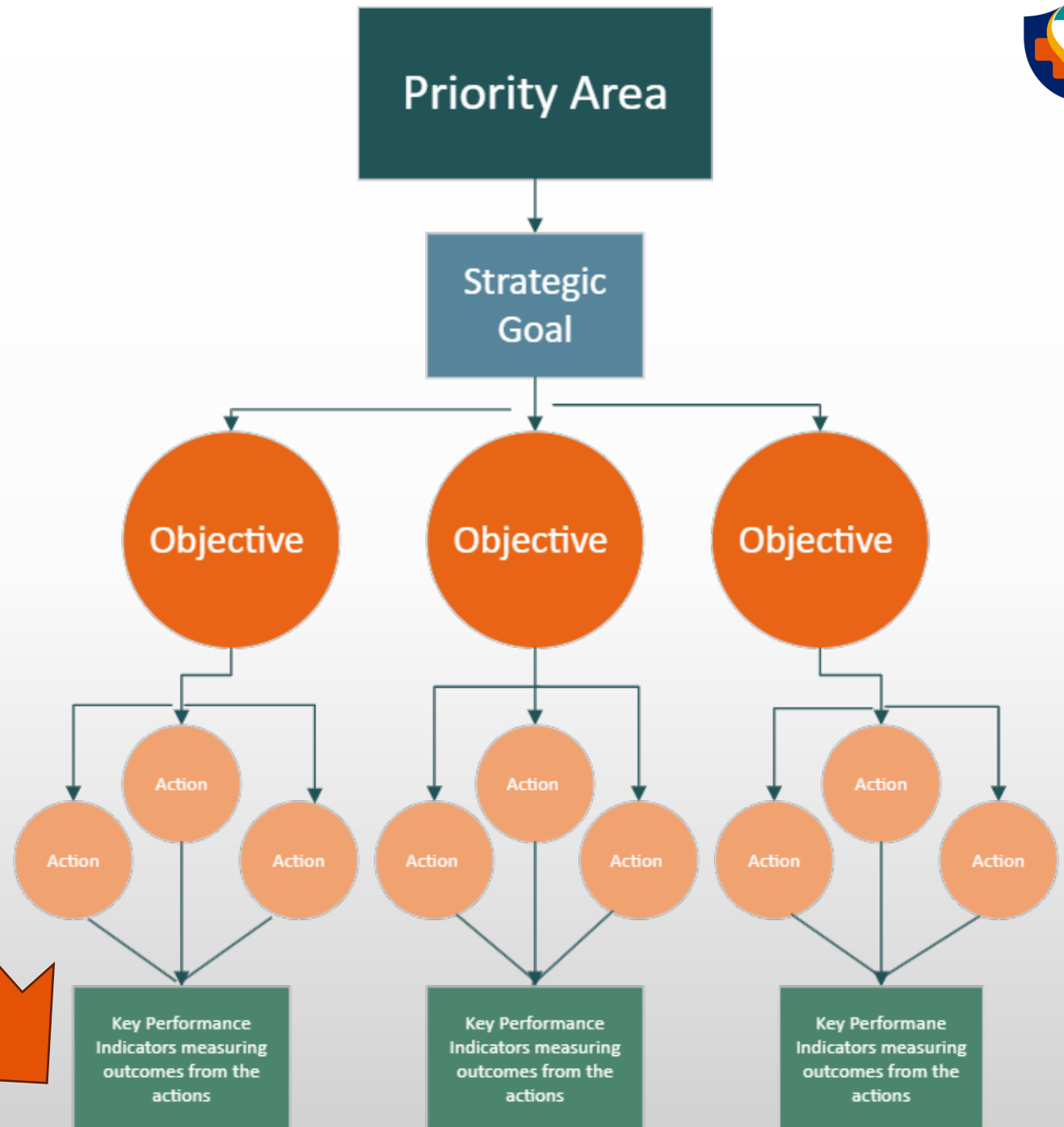
Detailed and defined work that can be measured in small increments. Answers the “how” question for each objective. Action items are determined in 1-2 year time frames and allow for work to remain responsive to landscape changes and need.

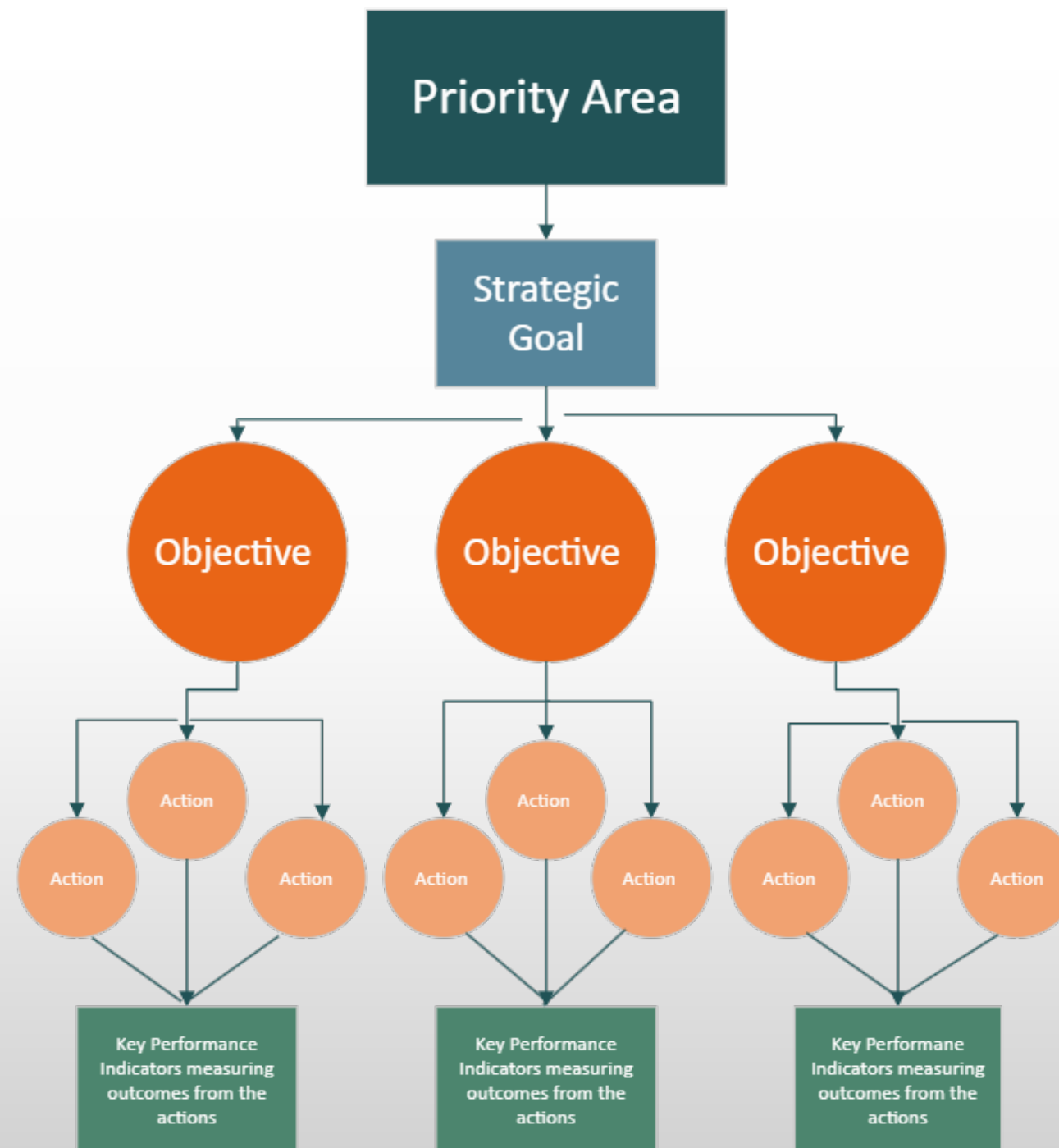




Key Performance Indicators:

Utilized as small measurement guides to ensure action level work stays focused and the objectives are driven forward. Allows for constant evaluation of work.







Strategic Plan

Definitions

- Priority Areas: Areas of focus for work completed by Office of Dental Health.
- Strategic Goals: The big picture goal for each focus area. Answers the “why” question that each priority area aims to achieve.
- Objectives: Broad approaches and initiatives necessary to drive the strategic goals forward. Answers the “what” question for each strategic goal. Long term work that require multiple action items to measure the final outcomes. 5 or more years.
- Action Items: Detailed and defined work that can be measured in small increments. Answers the “how” question for each objective. Action items are determined in 1-2 year time frames and allow for work to remain responsive to landscape changes and need.
- Key Performance Indicators: Utilized as small measurement guides to ensure action level work stays focused and the objectives are driven forward. Allows for constant evaluation of work.



Access to Care



Increase the number
of Missourians who
have access to oral
health care



Population Health



Ensure all
Missourians have
access to fluoridated
drinking water



Quality



Ensure whole
person health
includes oral
health



Workforce



Create an oral health
workforce that meets
the needs of all
Missourians



Prevention and Education



To a recognized
thought leader for
oral health education
in Missouri



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QUESTIONS?



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Rural Health Transformation Program



RHTP Summary Points

- Five overarching Initiatives
 1. Regional Coordinating Networks and Hub Activation
 2. Alternative Payment Models
 3. Digital Backbone
 - 4. Rural Health Workforce Programs**
 5. Provider Transformation

RHTP Summary Points



- 104 out of 114 counties in Missouri were defined as rural for the application purposes
 - 99 by state definition
 - 5 recognized as regional anchors
- Health Outcomes

Health Outcomes ⁷		
% diabetes prevalence	7.1%	10.0%
% hypertension prevalence	17.0%	23.5%
% obesity	36.9%	40.0%
% low birth weight	11.0%	8.4%
% depression	6.7%	8.5%

RHTP Summary Points

- ToRCH Care
 - Medicaid Transformation Office ToRCH Pilot
 - Statewide healthcare hubs
- Local level is greatest opportunity for oral health
- Regional level representation still being discussed
 - Opportunity for systems and capacity building that could be replicated to other regions
- Policy Considerations



Local
Level



Regional
Level



State
Level



RHTP Oral Health Involvement



- Team of five individuals represented DHSS for application preparation
- Department leadership was key champion for oral health involvement
- ODH was able to engage in many discussions throughout the application process to support need for oral health inclusion and workforce development



Current RHTP

- Missouri awarded 218 million for fiscal year one
- Addressing infrastructure first
- More information to come on workforce initiative leadership



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PROMOTING HEALTH AND SAFETY

References

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- [U.S. Dentist Workforce - 2025 update](#)
- [Rural Health Transformation Program | mydss.mo.gov](#)
- [Rural Health Transformation Program Application Summary Presentation | mydss.mo.gov](#)
- [Scoring Shortage Designations | Bureau of Health Workforce](#)
- [Missouri Rural Health Report 2024-2025](#)