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# IdeateLABs Announces New UCLA Study Results on Teledentistry and the Impacts on Latinos

# New UCLA Study Finds Accessibility and Affordability Critical for Latinos

**LOS ANGELES, CA –** Today IdeateLABs and the University of California Los Angeles Center for the Study of Latino Health and Culture announced the findings of their study on teledentistry and tele-orthodontics in the Latino community. The study finds that teledentistry options provide critical access and affordable oral care that is currently lacking for many in the Latino community.

The study was led by Dr. David Hayes-Bautista, a distinguished Professor of Medicine and Director of the Center for the Study of Latino Health and Culture at UCLA, and was commissioned by Los Angeles-based IdeateLABs.

"Lack of Latino dentists, lack of insurance, high costs makes dentistry inaccessible to Latino Communities. Teledentisty may provide access and affordable options for underserved communities," Dr. Hayes-Bautista said.

**View Full Report:** Lessons from Telemedicine for Teledentistry and Tele-Orthodontics: Increasing Access and Affordability While Improving Quality and Safety

Watch: Dr. Hayes-Bautista presents the summary findings of the teledentistry study.

## **UCLA Teledentistry & Tele-Orthodontics Latino Study Highlights**

Many Latino young adults face the "Latino-Ortho Dilemma" when it comes to accessing dental and/or orthodontic care:

- Latinos are 80% less likely to have access to a dentist in their local area.
- Latino dentist shortage means there are few Latino providers available to choose from.
- Latinos face a lack of dental insurance.
- Low household income compounded by high costs of orthodontic care are a major restriction to access.

#### Lack of Adequate, Affordable Dental/Orthodontics Insurance for Latinos

- Latinos are still 2 times more likely to not have health insurance compared to non-Hispanic whites.
- Latinos are even less likely to have access to dental insurance.
- Private dental insurance is difficult to obtain, as few employers offer this as a benefit.
- Public dental insurance (Denti-Cal) is available only to certain categories of beneficiaries. The vast majority of the 18-34 age group is too old to even apply for this benefit.

## Latino Low Household Income and High Cost of Oral Care

- Latino young adults are far less likely to live in high-income households: Less than a quarter live in households earning over \$52,256.
- The out-of-pocket costs for orthodontic work in California can typically be as much as \$12,000, which can make the cost prohibitive for young adults in lowincome households.
- And should that household afford dental insurance, they would still need to pay an out-of-pocket cost of around \$10,000.

#### **Telemedicine, Teledentistry and Tele-Orthodontics**

- In view of the Latino Dental Dilemma and the Latino-Ortho Dilemma, the use of teledentistry and tele-orthodontics should be explored as potential means of increasing both the access to and affordability for underserved Latino communities.
- Further, given that Latinos form the labor force backbone of the state's agricultural economy, teledentistry and tele-orthodontics are likely to be most beneficial in rural and underserved areas.
- In short, it is a method of delivery that has the ability to extend care to patient populations with limited access or no access to dental care.

#### **UCLA Recommendation to Solve the "Latino-Ortho Dilemma"**

- Increase access to dental services. While a long-term goal should be to have
  dental schools increase Latino enrollments to address the Latino dentist
  shortage, the multiplier effects of teledentistry and tele-orthodontics should be
  explored as one way of bringing services to underserved areas caused by the
  Latino dentist shortage.
- Maintain affordability and promote innovation: Cost-barriers continue to prevent underserved and low-income communities from having straight teeth.
- Expand insurance coverage to include teledentistry. One of the barriers to greater use of telemedicine was that many insurers, such as private insurers and

public programs including Medi-Cal, did not adequately reimburse for telehealth services. The COVID-19 pandemic brought some temporary, emergency relief to this issue, however it is not clear whether this relief is temporary or permanent.

- Teledentistry patients should use platforms that have oversight by a licensed California dentist. This cannot be overstated.
- Ensure providers track data disaggregated by ethnicity and race. While we have small data sets showing increased access in rural and underserved communities, more robust data sets are needed to meaningfully track utilization.

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