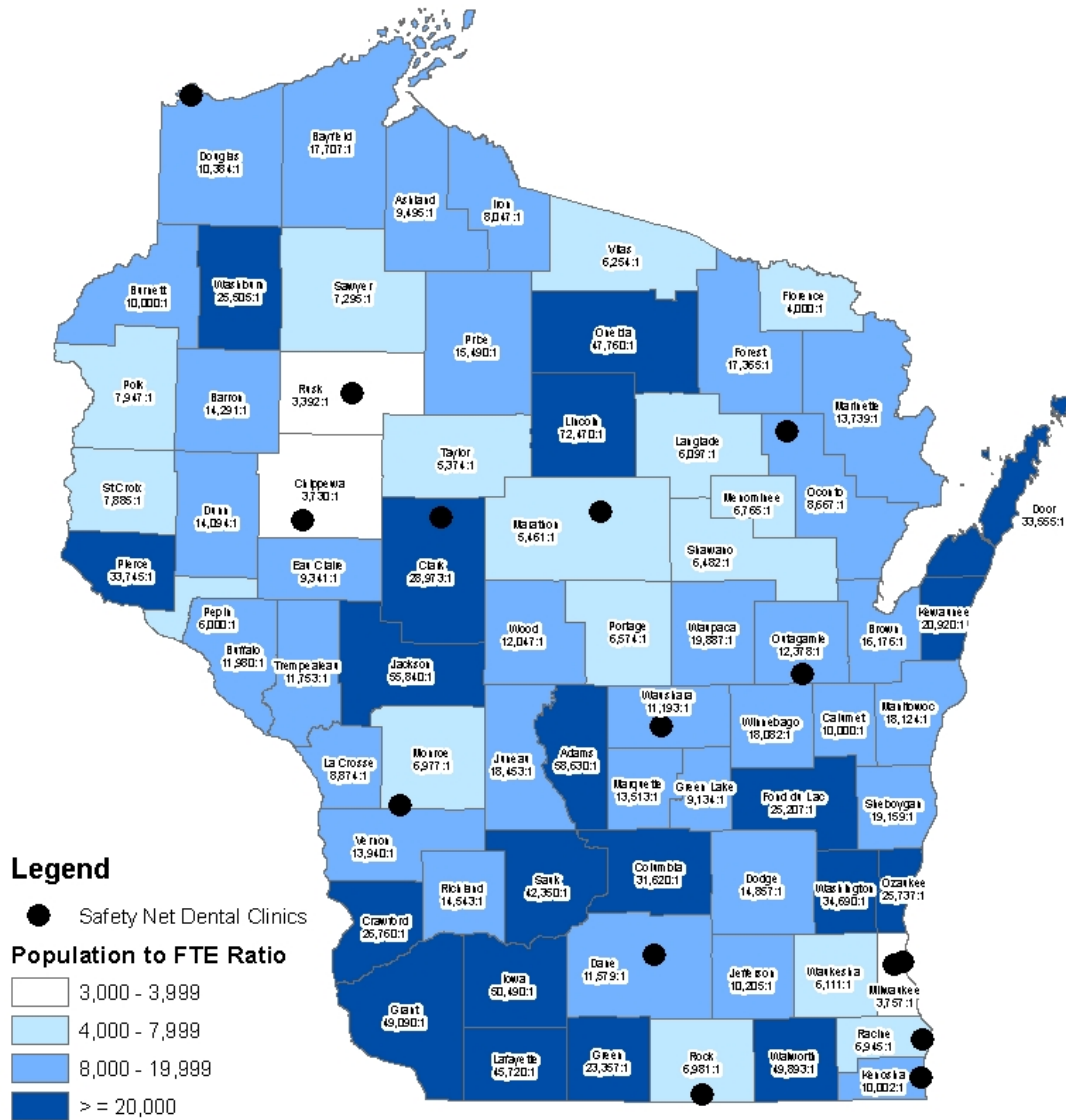


## Map of Dentist Shortages for Low-Income Populations - Wisconsin 2007



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## Map of Dentist Shortages for Low-Income Populations – Wisconsin 2007

### Map Notes:

- These data help describe the shortage of dentist care for low-income populations around the state, by using a population to provider ratio - comparing the size of the low-income population to the number of full-time equivalent dentists who provided Medicaid dental services in calendar year 2007. The higher the ratio, the more serious the shortage of dentists.
- No Wisconsin counties met the minimum federally recommended number of dentists per low-income population in calendar year 2007 (3,000 low-income population per 1.0 FTE dentist), based on the number of Medicaid paid claims for covered dentist services.
- 69 of 72 counties had “serious” shortages of dentists who provided general dental care to low-income populations. These counties had a population to dentist ratio that was greater than the federal threshold for designating dental shortage areas (4,000 low-income population to 1.0 dentist FTE).
- 3 counties had no dentists with paid Medicaid claims in CY 2007 (Burnett, Florence, Taylor)
- These data do not describe the total state dental workforce or dental access for the entire state population, but do contribute to the larger analysis of access to dental care in Wisconsin.
- For more information and the data used to calculate the population to provider ratios, see “Dentist Shortages for Low-Income Populations in Wisconsin” available on the web link below.  
<http://dhs.wisconsin.gov/health/primarycare/ShortageDesignation.htm>

### Data Sources:

- Population below 200% of the federal poverty level from the U.S. Census - 2000 (American FactFinder) [http://factfinder.census.gov/home/saff/main.html?\\_lang=en](http://factfinder.census.gov/home/saff/main.html?_lang=en)
- Number of Paid Medicaid claims in calendar year 2007 for Medicaid-covered general dental services provided by general and pediatric dentists. Includes both fee-for-service and HMO claims, and excludes claims for specialty dental care (data provided by Wisconsin Medicaid Program in 10/09). Claims are reported based on the place/location of service delivery not the patient’s address.

### Data Definitions:

#### Dentist FTEs:

The dentist full-time equivalent for low-income populations is calculated by dividing the total number of paid Medicaid claims by 4,000 and then rounding the dentist FTE to one decimal point. This method is used by HRSA’s Office of Shortage Designation for the designation of dental shortage areas (Health Professional Shortage Areas – HPSAs) and has been used for over 20 years.

#### Population to provider ratio:

- The population to provider ratio is a nationally standardized measure used by HRSA’s Office of Shortage Designation to describe and compare the relative shortage of primary care physicians, dentists, and psychiatrists for a population in a defined service area, and this measure has been used for more than 30 years.
- The low-income population to dentist FTE ratio is calculated by dividing the low-income population by the dentist FTE (rounded to one decimal point). This ratio can be compared to the federal threshold for designation of dental health professional shortage areas (4,000 to 1.0 FTE dentist) where the larger the population the more serious the shortage of dentists.
- For the six counties with “0” FTE dentists for the low-income population (Burnett, Calumet, Florence, Pepin, Taylor and Vilas), a population to provider ratio was assigned based on the size of the low-income population and a formula used by HRSA’s Office of Shortage Designation.

#### Safety Net Dental Clinics:

These are clinics that were providing dental services in 2007 for people covered by Medicaid/BadgerCare or using a sliding schedule of fees for uninsured people with incomes less than 200% of the federal poverty level (13 federally qualified health centers and 1 private non-profit clinic).