

**Presentation of Special Needs Petition for a
Dental Ambulatory Center in Wake County,
Proposed 2016 State Medical Facilities Plan**

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Presented by:

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Good afternoon, thank you. My name is Uday Reebye, DMD, MD. . I am a board certified oral and maxillofacial surgeon who has been in private practice in Durham over the past 8 years, and have held my dental license for the past 17 years. Over these years, I have noticed a growing and concerning trend that has affected our patients and our dental field.

Currently, North Carolina faces a complex problem for the treatment of the dental patients that is compounded due to access to care, availability of facilities, and training.

There are some important numbers that underscores our issues:

We rank 47th among 50 states in terms of the number of dentist per 10 000 people at about 4.3/10 000.

There are approximately 5000 dentists licensed in NC. The vast majority (4000) are general dentist and of the close to 1000 specialists, there are only about 195 Oral and Maxillofacial Surgeons (OMFS) and 176 pediatric dentists. These dentists are the only ones who are trained in a hospital setting and qualify for privileges at hospitals and surgical centers. These specialists represent only 7.4% of the practicing dentists. General dentists complete the vast majority of pediatric and oral surgery procedures.

Thus, we expect 93% of dental providers in NC to find an alternative for their patient care as it relates to access to anesthesia. The alternative for many providers is to bring the sedations and anesthesia services into their offices. Over the past 3 years, there has been a 23% increase in dental anesthesia licenses while the number of dentists have only increased by 7%. In this state, we are asking our dentists to perform anesthesia services, which are complex and stressful while trying to complete intricate dental services.

Although there is no official reporting guidelines. Here are some disturbing numbers: 46 pediatric deaths in the past 40 years, 31 of which have been in the last 15 years. Majority occurred with the dentist being both operator and anesthesiologist. In our state, we have had two (2) recent high profile deaths related to oral sedation. The current criteria for obtaining a license for moderate oral sedation permit requires 24 hours of instructive classroom training and documentation of 3 live patients' experience. In order to obtain an IV sedation license, a dentist requires 60 hours of classroom training and 20 patient cases.

The State Dental Board is in a very difficult position. If they increase the training and standards required for sedation in the dental office, this will drastically affect access of care to those who need it most. It is a tightrope-balancing act between patient safety and access.

Along with others, I have spoken a great deal about the problem that faces our patients, dental community and the state of NC. We have a pressure cooker that is about to explode; and as a committed group of dentists, physicians, and hospital department of anesthesia (Duke/PDC) we have come up with a relief valve.

The Ambulatory Dental Center (ADC) model in our petition, aims to address three main issues: access to care, safety and decrease in costs to the state.

The planned ADC in Wake county is a 35 000 square foot building located in the across from Crabtree mall with access from the 440 Beltline and Glenwood Avenue. The facility will be open and available to all dentists who meet the privileging requirements and each credentialed dentist would be allowed to practice only in his or her respective scope of expertise. We have formed a credentialing committee who comprise leading dentists and anesthesiologist from Duke.

Dentistry is a highly specialized field and requires an ever-growing investment in equipment as the technology and materials change. Currently, most hospitals in the state are only equipped to allow the dentist to provide very basic treatment. The ADC will be equipped only for the dental specialists and there are plans for 8 rooms, four pediatric rooms, 2 oral surgery implant rooms, and 2 rooms for the restorative specialist with endodontic microscopes. We need one operating room for the ambulatory surgery facility license.

The ADC is in partnership with the anesthesiologist of Duke/PDC led by Dr. Eddie Sanders. His department has worked with my private practice for the past 5 years. They have provided our patients with the highest level of care and safety. Their Department understands the nuances in the dental field and has already started forming criteria and workflow that would optimize patient care.

Although, Medicaid has low reimbursement for facility and anesthesia fees as it relates to dental procedures, allowing the ADC the ability to charge a facility fee will enable us to see Medicaid patients without limiting the number patients seen with Medicaid.

Forty percent of all children have dental caries by the time they start school, 48% of children under the age of 18 have required the extraction of a permanent tooth. In 2009, there were 69,000 visits to the emergency room, ranked as the 10th most common reason for a dental visit.

The issue at hand is not a block time issue. We have an access of care and safety issue. Ninety-three percent of the dentist in the state do not meet the criteria necessary to obtain hospital privileges, as their training was dental school based. They are now responsible for taking care of the majority of the state's dental needs, with the expectation of quality and safety, without the facilities and services accessible as compared to their medical colleagues.

I work in the City of Medicine, where we have the some of the brightest and most talented providers in the world. A foreign national can fly in have a knee replacement without delay, but a 6 year old citizen of the state living a 1 mile away from the hospital has very little chance to have access to those operating rooms and services.

We thank you for listening to our petition. I believe the collaborative efforts that we have made with our dental colleagues, and physicians and Duke PDC, will allow for an outlet of unsurpassed dental care that will soon be the model emulated by other counties and states.