Policy on the Role of Pediatric Dentists as Both Primary and Specialty Dental Care Providers

Latest Revision

2023

How to Cite: American Academy of Pediatric Dentistry. Policy on the role of pediatric dentists as both primary and specialty dental care providers. *The Reference Manual of Pediatric Dentistry*. American Academy of Pediatric Dentistry; 2026:22-23.

Purpose

The American Academy of Pediatric Dentistry (**AAPD**) emphasizes that health care providers and interested third parties must recognize the dual role that pediatric dentists play in the provision of professional preventive and therapeutic oral health care, which includes both primary and specialty care services, to ensure oral health care is accessible.

Methods

This policy was developed by the Council on Clinical Affairs, adopted in 2003[1], and last revised in 2018[2]. This revision was based on a review of *Accreditation Standards for Advanced Specialty Training Programs in Pediatric Dentistry*[3] and the AAPD position paper[4] on the role of pediatric dentists as primary and specialty care providers. An electronic search was conducted using the terms: *pediatric dentist*, *pediatric specialist*, *primary care provider*, *dual care provider*, and *specialty care provider*.

Background

The Commission on Dental Accreditation defines pediatric dentistry as "an age-related specialty that provides both primary and comprehensive preventive and therapeutic oral health needs for infants and children through adolescence, including those with special health care needs."[3] The American Dental Association[3,5] and the American Academy of General Dentistry[6,7] recognize the pediatric dentist as both a primary care provider and specialty care provider. The dual role of pediatric dentists is like that of pediatricians, gynecologists, and internists in medicine. Within the medical profession, clinicians and third-party payors recognize these physicians in a dual role and have designed payment plans to accommodate this situation.

The AAPD respects the rights of employers to negotiate health care benefits for their employees. If third-party payors do not recognize pediatric dentists as primary care providers, access to pediatric dentists may be restricted. When oral health care is not accessible, the health implications, effects on quality of life, and societal costs are enormous.[8] For children who have reached a predetermined age and/or who may be best served by specialized oral health care providers, requiring a specialty referral to a pediatric dentist prior to evaluation may delay or prohibit the most beneficial and cost-effective care. Using National Health Interview Survey data, researchers "found that more people reported financial barriers to dental care than to any other health care, regardless of age, income level, or type of insurance."[9]

Policy statement

The AAPD recognizes that infants, children, adolescents, and individuals with special health care needs have the right to quality oral health care. The AAPD encourages third-party payors to recognize pediatric dentists as both primary and specialty oral health care providers and to refrain from age-related restrictions when a parent or referring clinician desires to utilize the services and expertise of a pediatric dentist to establish a dental home or for limited specialized care.

References

1. American Academy of Pediatric Dentistry. The role of pediatric dentists as both primary and specialty care providers. *Pediatr Dent.* 2003;25(7):48.
2. American Academy of Pediatric Dentistry. Policy on role of pediatric dentists as both primary and specialty care providers. *Pediatr Dent.* 2018;40(6):130.
3. Commission on Dental Accreditation. Accreditation standards for advanced specialty education programs in pediatric dentistry. Commission on Dental Accreditation; 2022. Accessed December 31, 2022. https://coda.ada.org/-/media/project/adaorganization/ada/coda/files/pediatricdentistrystandards.pdf?rev=50a8557ef6474199b75d531b22f05e60&hash=12EE1B109A4B6FD893950812B9CC2EC9
4. American Academy of Pediatric Dentistry, Council on Dental Benefits Programs. Position paper: The role of pediatric dentists as primary and specialty care providers. American Academy of Pediatric Dentistry; 2002.
5. American Dental Association. Primary dental care provider. In: *ADA Current Policies Adopted 1954-2021*. American Dental Association; 2022:74. Accessed January 11, 2023. https://www.ada.org/-/media/project/adaorganization/ada/adaorg/files/about/governance/current_policies.pdf?rev=2be52266eb75492897321d3dab234e81&hash=1E65B3A2597ED0983E3F7D35A43C7215

ABBREVIATION

AAPD: American Academy of Pediatric Dentistry.

6. Academy of General Dentistry. Optimal delivery of oral health services through primary care: A comprehensive workforce policy statement of the Academy of General Dentistry. Academy of General Dentistry; 2020. Accessed January 4, 2023. https://www.agd.org/docs/default-source/policies-and-white-papers/agd_primarycare_11-11-2020.pdf?sfvrsn=356745c8_0
7. Academy of General Dentistry. White paper on increasing access to and utilization of oral health care services. Academy of General Dentistry; 2008. Accessed January 4, 2023. https://www.agd.org/docs/default-source/advocacy-papers/agd-white-paper-increasing-access-to-and-utilization-of-oral-health-care-services.pdf?sfvrsn=2
8. National Institutes of Health. *Oral Health in America: Advances and Challenges*. US Dept of Health and Human Services, National Institutes of Health, National Institute of Dental and Craniofacial Research; 2021. Accessed January 3, 2023. https://www.nidcr.nih.gov/sites/default/files/2021-12/Oral-Health-in-America-Advances-and-Challenges.pdf
9. Vujicic M, Buchmueller T, Klein R. Dental care presents the highest level of financial barriers, compared to other types of health care services. *Health Aff (Millwood).* 2016; 35(12):2178. DOI: 10.1377/hlthaff.2016.0800