



# California Oral Health Workforce Demographic Trends

HCAI | Office of Health Workforce Development  
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# Agenda

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- **Research Data Center (RDC) Overview**

- Who we are
- Why we collect data



- **Statewide demographics of Oral Health Practitioners**

- Race/Ethnicity
- Languages
- Gender



- **Future Plans for Oral Health**

- Key initiatives and next steps



- **Discussion & Questions**

A woman with glasses and a patterned shirt stands on the left, gesturing towards a group of people seated on the right. They are in a bright room with large windows overlooking a city. The scene is semi-transparent, with the text overlaid on top.

# HCAI Research Data Center Overview

# RDC Overview



## Assembly Bill 133 (2021) created the Research Data Center within the Office of Health Workforce Development

- Central source of health care workforce and education data in the state

## Health and Safety Code Section 128051 requires HCAI to collect, to the extent available, all of the following data:

- The current supply of health care workers, by specialty.
- The geographical distribution of health care workers, by specialty.
- The diversity of the health care workforce, by specialty, including, but not necessarily limited to, data on race, ethnicity, and languages spoken.
- The current and forecasted demand for health care workers, by specialty.
- The capacity of educational programs to train new healthcare workers, including details on slots, enrollment, attrition, and wait times.

# Data Sources

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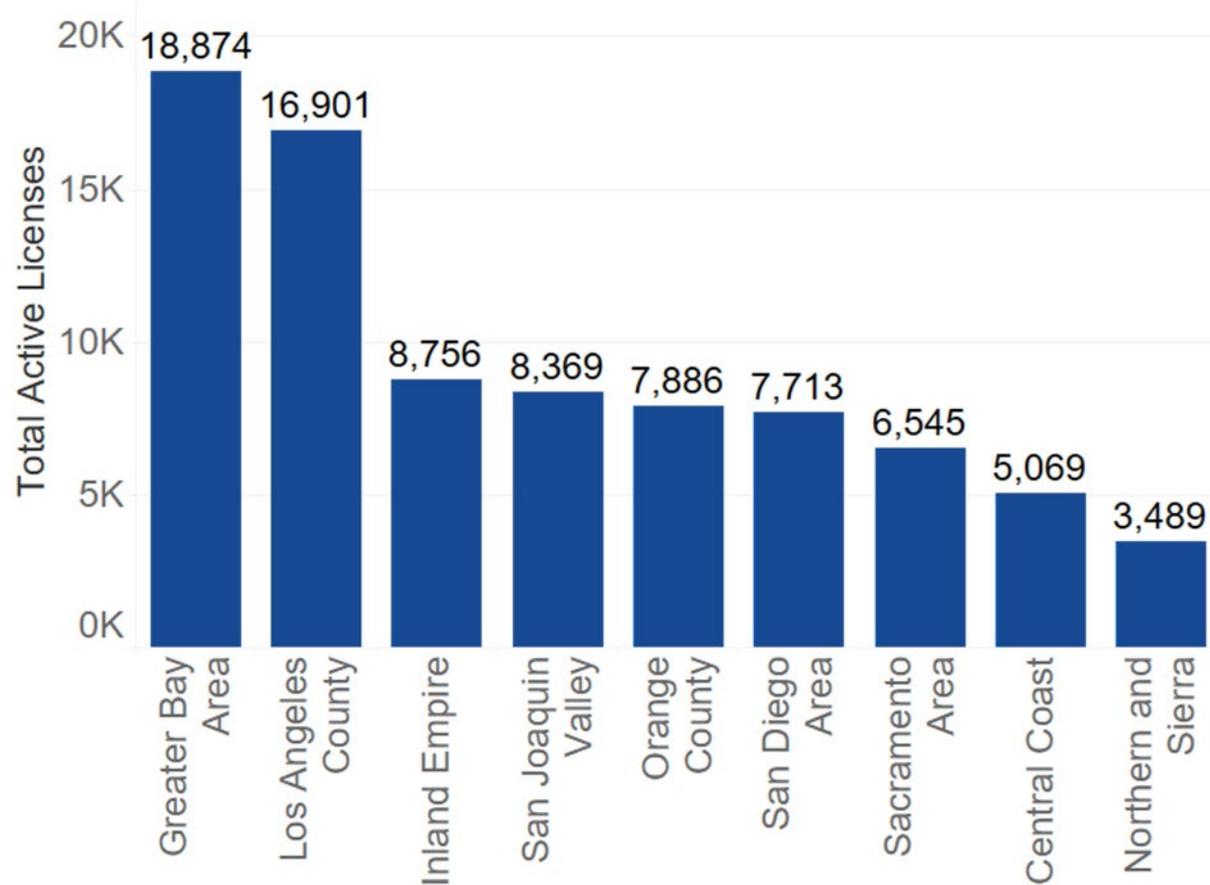
- **HCAI License Renewal Survey**  
(Collected upon online license renewal):
  - Demographic data
  - Activity hour estimates
  - Practice setting/location information
  - Primary area of practice





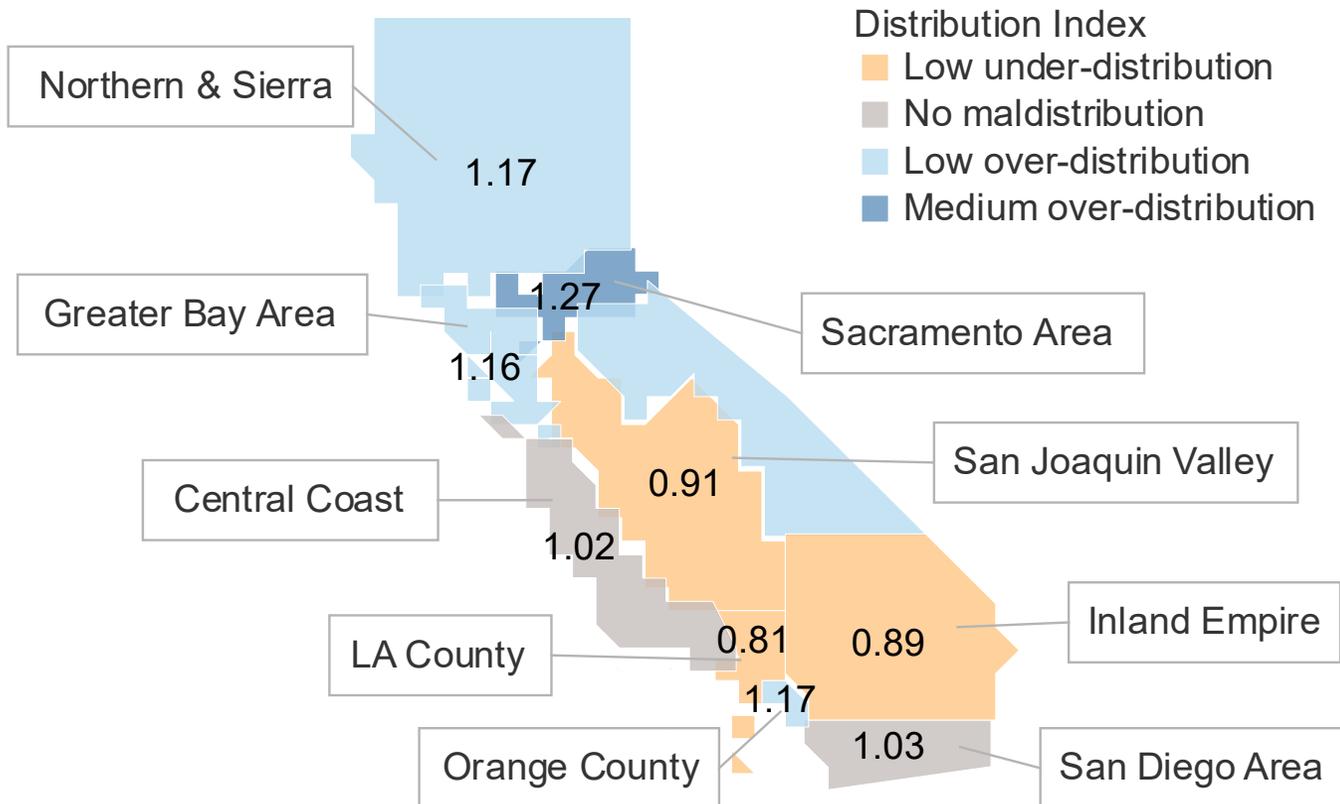
# Statewide Demographics of Oral Health Practitioners

# Regional Active License Counts, 2024



- The Greater Bay Area has highest total count (23%) of statewide licenses.
- The Greater Bay Area and Los Angeles County together account for 43% of statewide licenses

# Regional Distribution, 2024



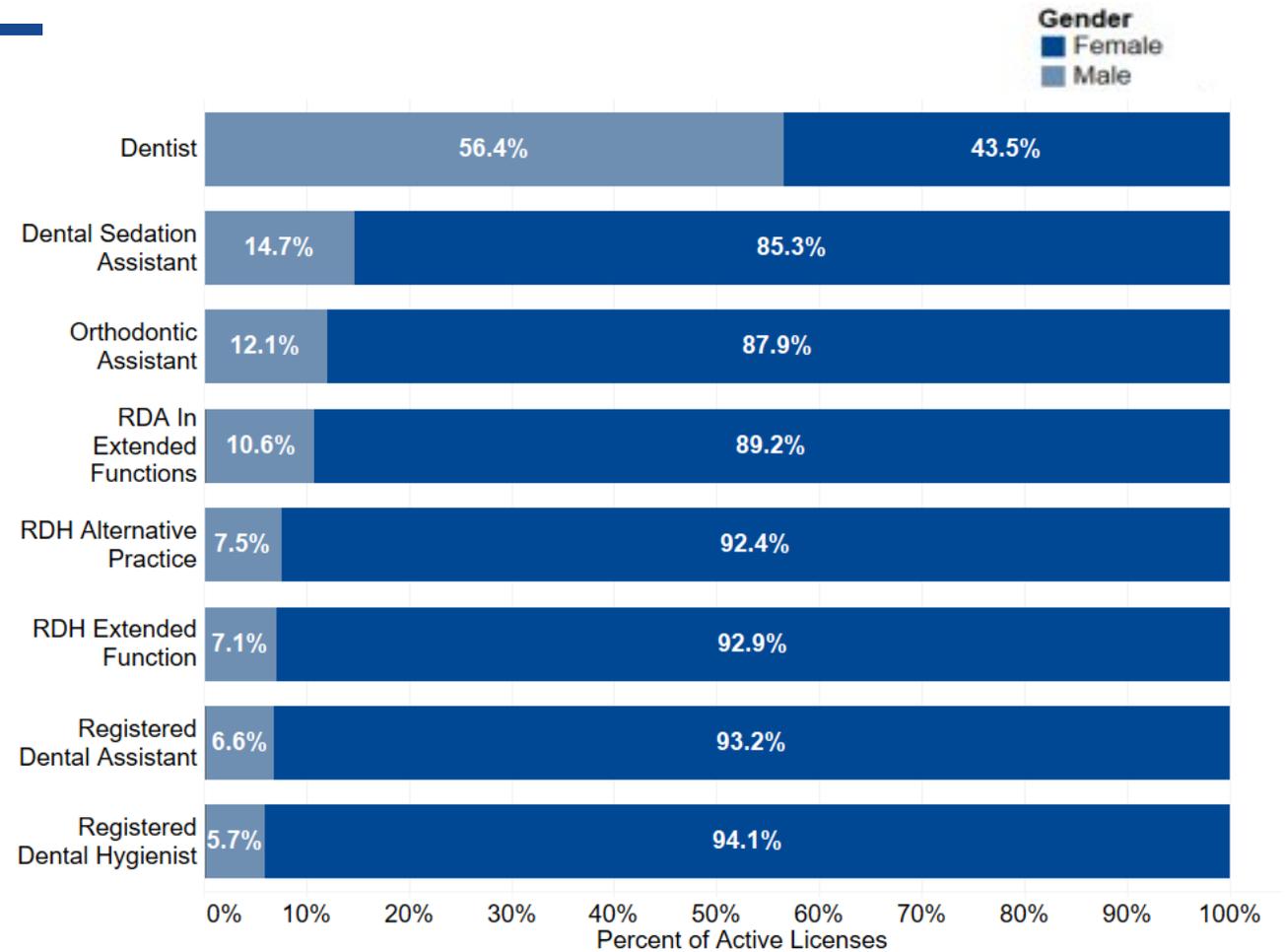
The Sacramento Area has the highest distribution of active licenses compared to the population and LA County has the lowest distribution

#### Distribution Index Description:

- Shows the magnitude of difference between a region's share of licenses and its share of the state's population.
- A value of 1 = the region has an equal share of the licenses and population (e.g., 10% of licenses, 10% of population)
- A value below 1 = smaller share of licenses than pop
- A value above 1 = larger share of licenses than pop

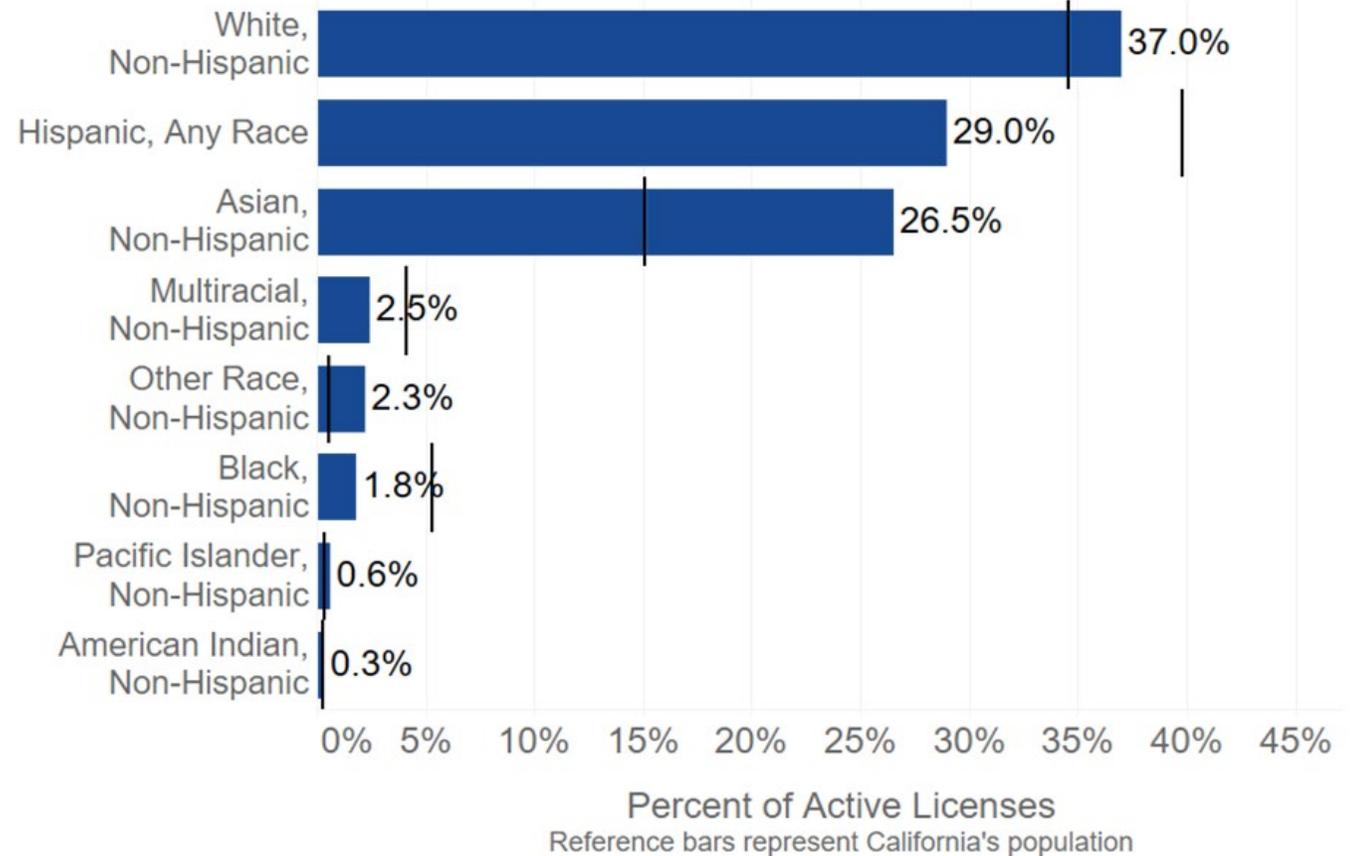
# Statewide Gender, 2024

- The percentage of Oral Health licensees identifying as male is higher than the overall licensed health workforce average, driven primarily by dentists.
- 85% or more of all other Oral Health license types identify as female.

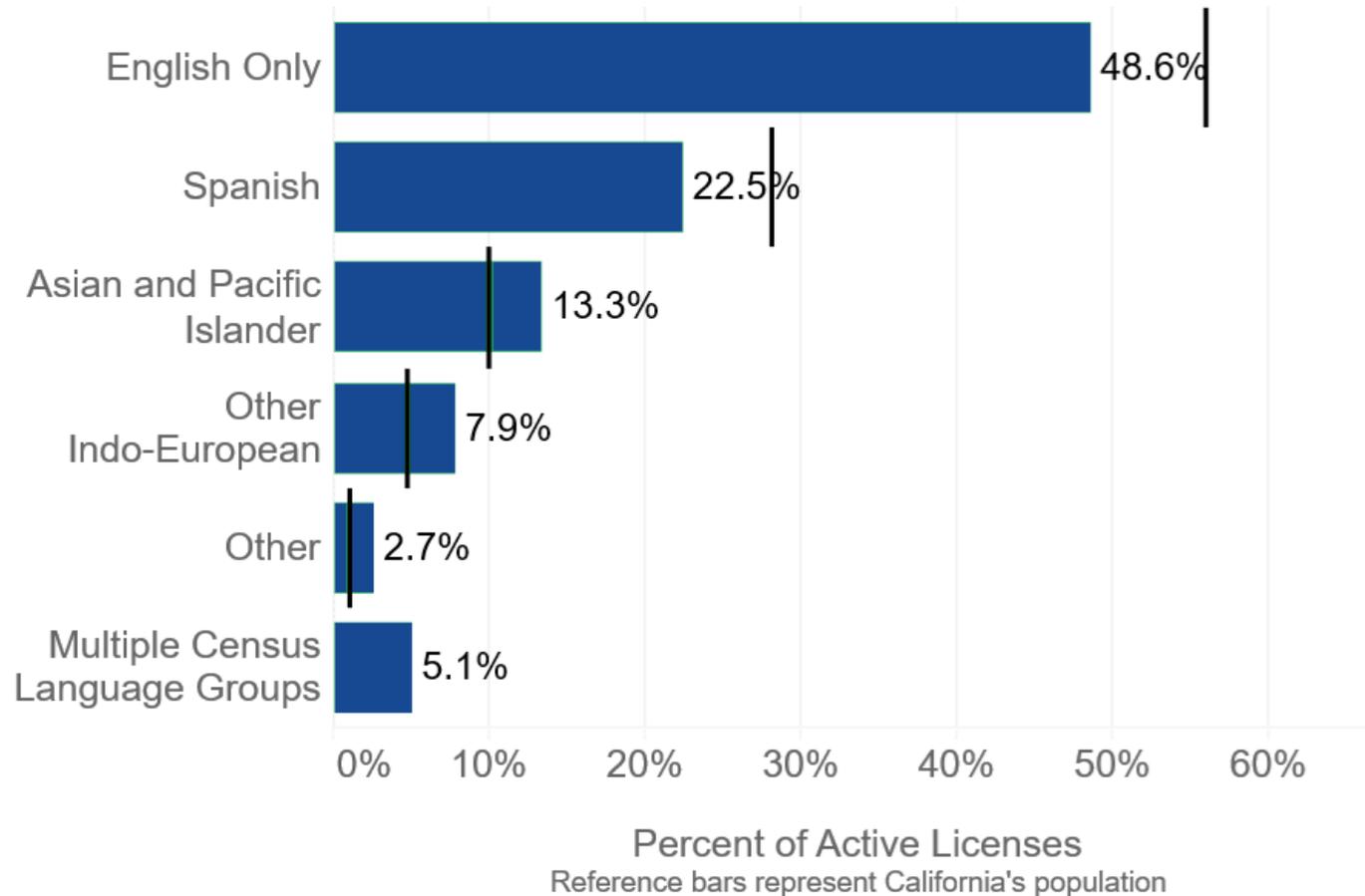


# Statewide Race/Ethnicity, 2024

Across our Health Workforce Groups, Oral Health has the highest representation of Hispanic licensees (29%) and the lowest of Black, Non-Hispanic licensees (1.8%).



# Statewide Languages, 2024



- Oral Health is the most linguistically diverse workforce group and has the highest percentage of Spanish-speaking licensees.
- Spanish remains underrepresented at the state level.

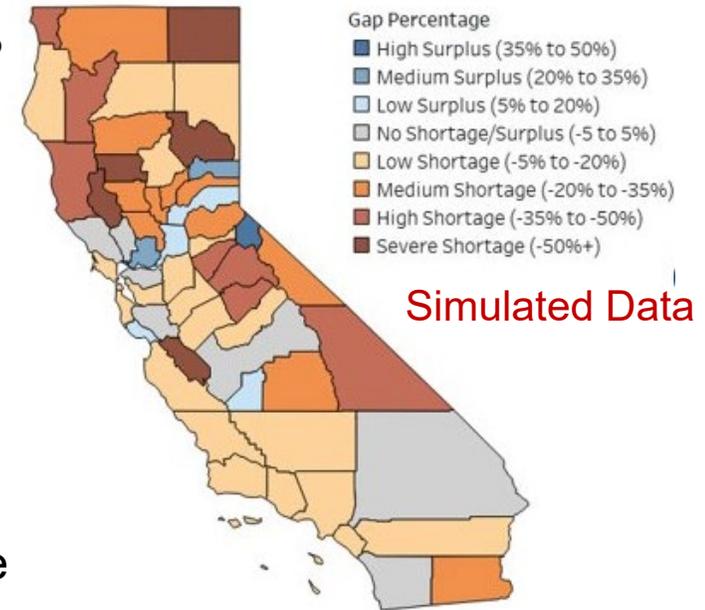


# Future Plans for Oral Health

# Future Plans for Oral Health: Supply and Demand Model, Q1'26

The Oral Health Supply/Demand model can be used to answer questions such as:

- How many Dentists, RDHs, and RDAs are currently available in each region?
- How are these providers distributed geographically (by county and other regions)?
- Where are the areas of low dental care supply relative to high population demand or oral health needs?
- Where are access issues occurring for oral health services?
- What is the estimated service capacity (dental visits, procedures) of each provider type per year?
- What is the annual attrition rate (retirements, career changes) for each provider type (anticipating reductions in workforce)?
- How many new dental professionals (Dentists, RDHs, RDAs) enter the workforce annually from California training programs?
- What will the oral health provider supply, demand, and gaps look like over the next five or more years, by county and other regions?



# Future Plans for Oral Health: Supply and Demand Dashboard, 2026

## A Comprehensive Workforce Planning Tool

- Provides role- and geography-specific analysis of the current and future workforce.
- Identifies anticipated gaps and available supply to proactively address shortages and inequities.
- Supports data-driven decision-making by highlighting key workforce challenges and priorities.

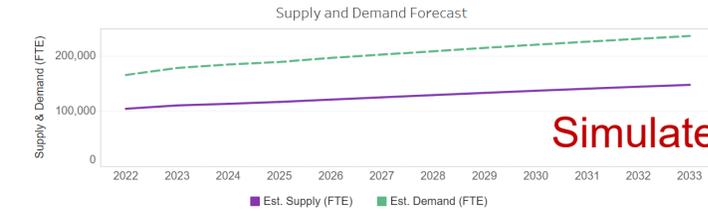
## Key Benefits of the Dashboard

- Guides resource allocation by identifying the greatest gaps by role and region, enabling informed funding and programmatic efforts.
- Promotes equity by tracking progress toward state goals, such as improving racial and linguistic representation and reducing disparities.
- Enhances transparency by offering public access to interactive dashboards, data files, and methodology documentation, supporting informed decision-making.

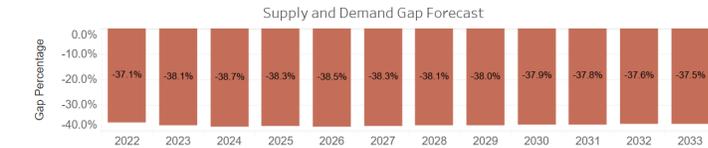
### Supply and Demand of California's Oral Health Workforce

County Data | Regional Data | Trends | Forecast Comparisons

Role/Group: (All) | Region Type: CRRS Region | Region: (All) | County: (All)



Simulated Data



County Data | Regional Data | Trends | Forecast Comparisons

Year: 2022 | Role/Group: (All) | Region Type: CRRS Region | Region: (All) | County: (All)

County	Est. Supply (FTE)	Est. Demand (FTE)	Supply-Demand Gap	Gap per 100k Pop	Gap %
Alameda	6,259.0	9,048.6	-2,789.6	-169.7	-30.8%
Alpine	2.0	3.1	-1.1	-89.0	-34.6%
Amador	70.0	135.5	-65.5	-163.8	-48.4%
Butte	585.0	1,011.5	-426.5	-206.8	-42.2%
Calaveras	87.0	149.2	-62.2	-138.2	-41.7%
Colusa	20.0	85.2	-65.2	-300.3	-76.5%
Contra Costa	3,042.0	4,886.7	-1,844.7	-160.4	-37.7%
Del Norte	53.0	95.1	-42.1	-156.1	-44.9%
El Dorado	413.0	1,047.1	-634.1	-335.0	-60.6%
Fresno	2,038.0	3,534.6	-1,496.6	-148.2	-42.3%
Glenn	38.0	113.2	-75.2	-261.2	-66.4%
Humboldt	479.0	675.1	-196.1	-146.2	-29.1%
Imperial	208.0	589.1	-381.1	-211.3	-64.7%
Inyo	36.0	61.2	-25.2	-133.1	-41.2%
Kern	1,205.0	2,441.4	-1,236.4	-159.2	-44.9%
Kings	193.0	560.4	-367.4	-242.2	-65.6%
Lake	82.0	275.5	-193.5	-286.2	-70.2%
Lassen	36.0	100.4	-64.4	-216.0	-64.1%
Los Angeles	30,151.0	45,564.1	-15,413.1	-156.3	-33.8%
Madera	196.0	524.7	-328.7	-209.3	-62.6%
Marin	1,722.0	2,117.1	-395.1	-154.7	-18.7%
Mariposa	30.0	56.2	-26.2	-154.0	-46.6%
Mendocino	247.0	493.7	-246.7	-273.4	-50.0%

Legend:

- Low Shortage (-5% to -20%)
- Medium Shortage (-20% to -35%)
- High Shortage (-35% to -50%)
- Severe Shortage (-50% or more)
- No Shortage/Surplus (-5% to 5%)
- Low Surplus (5% to 20%)
- Medium Surplus (20% to 35%)
- High Surplus (35% to 50%)
- Severe Surplus (50% or more)

# Questions?



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<https://hcai.ca.gov/mailling-list/>

## Contact Us!

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