

**SENATE . . . . . No. 1118**

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**The Commonwealth of Massachusetts**

PRESENTED BY:

***Harriette L. Chandler***

*To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:*

The undersigned legislators and/or citizens respectfully petition for the adoption of the accompanying bill:

An Act establishing an advanced dental hygiene practitioner level of practice.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	
<i>Harriette L. Chandler</i>	<i>First Worcester</i>	
<i>Chris Walsh</i>	<i>6th Middlesex</i>	
<i>Bruce E. Tarr</i>	<i>First Essex and Middlesex</i>	
<i>Carmine L. Gentile</i>	<i>13th Middlesex</i>	
<i>Sal N. DiDomenico</i>	<i>Middlesex and Suffolk</i>	
<i>Gailanne M. Cariddi</i>	<i>1st Berkshire</i>	<i>9/25/2015</i>
<i>William N. Brownsberger</i>	<i>Second Suffolk and Middlesex</i>	<i>9/25/2015</i>
<i>Barbara A. L'Italien</i>	<i>Second Essex and Middlesex</i>	<i>9/25/2015</i>
<i>James J. O'Day</i>	<i>14th Worcester</i>	<i>9/25/2015</i>
<i>James B. Eldridge</i>	<i>Middlesex and Worcester</i>	<i>9/25/2015</i>
<i>John W. Scibak</i>	<i>2nd Hampshire</i>	<i>9/28/2015</i>
<i>Linda Dorcena Forry</i>	<i>First Suffolk</i>	<i>9/28/2015</i>
<i>Kay Khan</i>	<i>11th Middlesex</i>	<i>9/28/2015</i>
<i>Carlos Gonzalez</i>	<i>10th Hampden</i>	<i>10/8/2015</i>
<i>Steven Ultrino</i>	<i>33rd Middlesex</i>	<i>12/10/2015</i>

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By Ms. Chandler, a petition (accompanied by bill, Senate, No. 1118) of Harriette L. Chandler, Chris Walsh, Bruce E. Tarr, Carmine L. Gentile and others for legislation to establish an advanced dental hygiene practitioner level of practice. Public Health.

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[SIMILAR MATTER FILED IN PREVIOUS SESSION  
SEE SENATE, NO. 998 OF 2013-2014.]

**The Commonwealth of Massachusetts**

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**In the One Hundred and Eighty-Ninth General Court  
(2015-2016)**  
\_\_\_\_\_

An Act establishing an advanced dental hygiene practitioner level of practice.

*Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:*

1           SECTION 1. Chapter 112 of the Massachusetts General Laws, as appearing in the 2012  
2 Official Edition, is hereby amended in Section 43A by adding the following definition:-

3           “Advanced Dental Hygiene Practitioner,” a dental hygienist who is a graduate of a  
4 registered dental practitioner education program of not more than 18 months provided by an  
5 accredited post secondary institution, who has been certified by the Board to practice as an  
6 advanced dental hygiene practitioner pursuant to section 51B; and who provides oral health care  
7 services, including preventive, oral evaluation and assessment, educational, palliative,  
8 therapeutic, and restorative services as authorized under section 51B.

9           SECTION 2. Section 51 of Chapter 112 of The Massachusetts General Laws, as  
10 appearing in the 2012 Official Edition, is hereby amended by inserting after the final paragraph  
11 the following:-

12           Any licensed dental hygienist of good moral character, who is a graduate of a registered  
13 dental practitioner education program of 12-18 months that is provided by an accredited post  
14 secondary institution comprised of a curriculum approved by the state Department of Higher  
15 Education; pass a comprehensive, competency-based clinical examination that is approved by the  
16 Board and administered independently of an institution providing registered dental practitioner  
17 education; have practiced under direct supervision of a supervising dentist for at least 500 hours  
18 before practicing under general supervision; and obtain a policy of professional liability  
19 insurance and show proof of such insurance as required by rules and regulations, shall be  
20 registered as an advanced dental hygiene practitioner and be given a certificate allowing the  
21 hygienist to practice in this capacity.

22           Before performing a procedure or providing a service under this paragraph, an advanced  
23 dental hygiene practitioner shall enter into a written collaborative agreement with a local or state  
24 government agency or institution or with a licensed dentist who states that he shall be able to  
25 provide the appropriate level of communication and consultation with the advanced dental  
26 hygiene practitioner to ensure patient health and safety. The Board shall establish appropriate  
27 guidelines for this written collaborative agreement.

28           An advanced dental hygiene practitioner certified by the Boar may perform all acts of a  
29 public health dental hygienist, as well as the following services and procedures pursuant to the  
30 written collaborative management agreement without the supervision or direction of a dentist:

31 oral health instruction and disease prevention education, including nutritional counseling and  
32 dietary analysis; charting of the oral cavity; exposing and interpreting radiographs; mechanical  
33 polishing; application of topical preventive or prophylactic agents, including fluoride varnishes  
34 and pit and fissure sealants; pulp vitality testing; application of desensitizing medication or resin;  
35 fabrication of athletic mouthguards; placement of temporary restorations; fabrication of soft  
36 occlusal guards; tissue conditioning and soft reline; atraumatic restorative therapy; dressing  
37 changes; tooth reimplantation; administration of local anesthetic; emergency palliative treatment  
38 of dental pain; the placement and removal of space maintainers; cavity preparation; restoration of  
39 primary and permanent teeth; placement of temporary crowns; preparation and placement of  
40 preformed crowns; and pulpotomies on primary teeth; indirect and direct pulp capping on  
41 primary and permanent teeth; stabilization of reimplanted teeth; extractions of primary teeth;  
42 suture removal; brush biopsies; repair of defective prosthetic devices; recementation of  
43 permanent crowns; an oral evaluation and assessment of dental disease and the formulation of an  
44 individualized treatment plan authorized by the collaborating dentist; and; nonsurgical  
45 extractions of permanent teeth as limited in the following paragraph.

46 An advanced dental hygiene practitioner shall not perform any service or procedure  
47 described in this section except as authorized by the collaborating dentist. An advanced dental  
48 hygiene practitioner may perform nonsurgical extractions of periodontally diseased permanent  
49 teeth with tooth mobility of +3 to +4 under general supervision if authorized in advance by the  
50 collaborating dentist. The advanced dental hygiene practitioner shall not extract a tooth for any  
51 patient if the tooth is unerupted, impacted, fractured, or needs to be sectioned for removal. The  
52 collaborating dentist is responsible for directly providing or arranging for another dentist or  
53 specialist to provide any necessary advanced services needed by the patient. An advanced dental

54 hygiene practitioner in accordance with the written collaborative agreement must refer patients to  
55 another qualified dental or health care professional to receive any needed services that exceed the  
56 scope of practice of the advanced dental hygiene practitioner. A written collaborative agreement  
57 entered into with an advanced dental hygiene practitioner must include specific written protocols  
58 to govern situations in which the advanced dental hygiene practitioner encounters a patient who  
59 requires treatment that exceeds the authorized scope of practice of the advanced dental hygiene  
60 practitioner. The collaborating dentist must ensure that a dentist is available to the advanced  
61 dental hygiene practitioner for timely consultation during treatment if needed and must either  
62 provide or arrange with another dentist or specialist to provide the necessary treatment to any  
63 patient who requires more treatment than the advanced dental hygiene practitioner is authorized  
64 to provide. An advanced dental hygiene practitioner may provide, dispense, and administer the  
65 following medications within the parameters of the written collaborative agreement, within the  
66 scope of practice of the advanced dental hygiene practitioner, and with the authorization of the  
67 collaborating dentist: analgesics, anti-inflammatories, and antibiotics. The authority to provide,  
68 dispense, and administer shall extend only to the categories of drugs identified in this  
69 subdivision, and may be further limited by the written collaborative agreement. The authority to  
70 dispense includes the authority to dispense sample drugs within the categories identified in this  
71 paragraph if dispensing is permitted by the written collaborative agreement. An advanced dental  
72 hygiene practitioner is prohibited from providing, dispensing, or administering a narcotic drug.

73           Advanced dental hygiene practitioners shall be directly reimbursed for services covered  
74 by Medicaid or the commonwealth care health insurance program. An advanced dental hygiene  
75 practitioner shall not operate independently of a dentist, except for an advanced dental hygiene

76 practitioner working for a local or state government agency or institution or practicing in a  
77 mobile or portable prevention program licensed or certified by the department of public health.

78           A licensed advanced dental hygiene practitioner may supervise dental assistants to the  
79 extent permitted in the collaborative management agreement and according to section 51 ½. The  
80 Board of Registration in Dentistry, in consultation with the Executive Office of Health and  
81 Human Services, shall develop an evaluation process that focuses on assessing the impact of  
82 advanced dental hygiene practitioners in terms of patient safety, cost-effectiveness, and access to  
83 dental services. The process shall focus on the following outcome measures: (1) number of new  
84 patients served; (2) reduction in waiting times for needed services; (3) decreased travel time for  
85 patients; (4) impact on emergency room usage for dental care; and (5) costs to the public health  
86 care system.