

**SENATE . . . . . No. 2076**

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**The Commonwealth of Massachusetts**

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**In the One Hundred and Eighty-Ninth General Court**  
**(2015-2016)**  
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SENATE, Monday, December 14, 2015

The committee on Public Health to whom was referred the petitions (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; and (accompanied by bill, House, No. 249) of William Smitty Pignatelli and others relative to the occupation of advanced dental hygiene practitioner,- reports the accompanying bill (Senate, No. 2076).

For the committee,  
Jason M. Lewis

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## The Commonwealth of Massachusetts

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

An Act establishing a 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 General Laws, as appearing in the 2014 Official Edition,  
2 is hereby amended in Section 43A by adding the following definitions:-

3           “Dental hygiene practitioner,” a dental hygienist who is a graduate of a dental therapist  
4 education program accredited by the Commission on Dental Accreditation provided by a post-  
5 secondary institution accredited by the New England Association of Schools and Colleges, who  
6 has been licensed by the board to practice as hygiene dental hygiene practitioner pursuant to  
7 section 51B; and who provides oral health care services, including preventive, oral evaluation  
8 and assessment, educational, palliative, therapeutic, and restorative services as authorized under  
9 section 51B.

10           “Board,” the board of registration in dentistry or any committee or subcommittee thereof  
11 established in the department of public health pursuant to the provisions of sections 9 and 19 of  
12 chapter 13, chapter 30A, and sections 43 through 53, inclusive, of chapter 112.

13           “Collaborative Management Agreement,” a written agreement between a local, state, or  
14 federal government agency or institution or a licensed dentist and a dental hygiene practitioner  
15 outlining the procedures, services, responsibilities, and limitations of the practitioner.

16           “Supervising Dentist,” a local, state, or federal government agency or institution or a  
17 licensed dentist or group of licensed dentists acting collectively, who enter into a collaborative  
18 management agreement with a dental hygiene practitioner.

19           SECTION 2. Section 51 of chapter 112 of the General Laws, as so appearing, is hereby  
20 amended by adding after the final paragraph the following:-

21           Any licensed dental hygienist of good moral character, who is a graduate of a dental  
22 practitioner education program accredited by the Commission on Dental Accreditation provided  
23 by a post-secondary institution accredited by the New England Association of Schools and  
24 Colleges; passes a comprehensive, competency-based clinical examination that is approved by  
25 the board and administered independently of an institution providing registered dental  
26 practitioner education; and obtains a policy of professional liability insurance and shows proof of  
27 such insurance as required by rules and regulations, shall be registered as a dental hygiene  
28 practitioner and be given a certificate allowing the therapist to practice in this capacity. A dental  
29 hygiene practitioner must have practiced under the direct supervision of a supervising dentist for  
30 at least 500 hours or completed 1 year of residency before practicing under general supervision.

31           Before performing a procedure or providing a service under this paragraph, a dental  
32 hygiene practitioner shall enter into a written collaborative agreement with a local, state, or  
33 federal government agency or institution or with a licensed dentist. The agreement must address:  
34 practice settings, any limitation on services established by the supervising dentist, the level of

35 supervision required for various services or treatment settings, patient populations that may be  
36 served, practice protocols, record keeping, managing medical emergencies, quality assurance,  
37 administering and dispensing medications, and supervision of dental assistants and dental  
38 hygienists. A dental hygiene practitioner may provide the services authorized in practice settings  
39 where the supervising dentist is not on-site and has not previously examined the patient, to the  
40 extent authorized by the supervising dentist in the collaborative management agreement and  
41 provided the supervising dentist is available for consultation and supervision by telephone or  
42 other means of electronic communication.

43         The collaborative management agreement must include specific written protocols to  
44 govern situations in which the dental hygiene practitioner encounters a patient who requires  
45 treatment that exceeds the authorized scope of practice of the dental hygiene practitioner.

46         Collaborative management agreements must be signed and maintained by the supervising  
47 dentist and the dental hygiene practitioner and shall be submitted upon request by the board. The  
48 board shall establish appropriate guidelines for this written collaborative management  
49 agreement. This agreement may be updated from time to time.

50         A supervising dentist may have a collaborative management agreement with no more  
51 than four dental hygiene practitioners at the same time. The board shall establish appropriate  
52 guidelines for this written collaborative agreement.

53         A dental hygiene practitioner licensed by the board may perform all acts of a public  
54 health dental hygienist, all acts provided for in Commission on Dental Accreditation's dental  
55 therapy standards, as well as the following services and procedures pursuant to the written  
56 collaborative management agreement without the supervision or direction of a dentist:

57 interpreting radiographs; the placement of space maintainers; pulpotomies on primary teeth; an  
58 oral evaluation and assessment of dental disease and the formulation of an individualized  
59 treatment plan authorized by the collaborating dentist; and nonsurgical extractions of permanent  
60 teeth as limited in the following paragraph.

61           A dental hygiene practitioner shall not perform any service or procedure described in this  
62 section except as authorized by the collaborating dentist. A dental hygiene practitioner may  
63 perform nonsurgical extractions of periodontally diseased permanent teeth with tooth mobility of  
64 +3 to +4 under general supervision if authorized in advance by the collaborating dentist. The  
65 dental hygiene practitioner shall not extract a tooth for any patient if the tooth is unerupted,  
66 impacted, fractured, or needs to be sectioned for removal. The collaborating dentist is  
67 responsible for directly providing or arranging for another dentist or specialist to provide any  
68 necessary advanced services needed by the patient. A dental hygiene practitioner in accordance  
69 with the written collaborative agreement must refer patients to another qualified dental or health  
70 care professional to receive any needed services that exceed the scope of practice of the dental  
71 hygiene practitioner. The collaborating dentist must ensure that a dentist is available to the  
72 dental hygiene practitioner for timely consultation during treatment if needed and must either  
73 provide or arrange with another dentist or specialist to provide the necessary treatment to any  
74 patient who requires more treatment than the dental hygiene practitioner is authorized to provide.  
75 A dental hygiene practitioner may dispense and administer the following medications within the  
76 parameters of the written collaborative agreement, within the scope of practice of the dental  
77 hygiene practitioner, and with the authorization of the collaborating dentist: analgesics, anti-  
78 inflammatories, and antibiotics. The authority to dispense and administer shall extend only to  
79 the categories of drugs identified in this subdivision, and may be further limited by the written

80 collaborative agreement. The authority to dispense includes the authority to dispense sample  
81 drugs within the categories identified in this paragraph if dispensing is permitted by the written  
82 collaborative agreement. A dental hygiene practitioner is prohibited from dispensing or  
83 administering a narcotic drug.

84 Dental hygiene practitioners shall be reimbursed for services covered by Medicaid.. A  
85 dental hygiene practitioner shall not operate independently of a dentist, except for a dental  
86 hygiene practitioner working for a local, state, or federal government agency or institution or  
87 practicing in a mobile or portable prevention program licensed or certified by the department of  
88 public health as permitted by law.

89 A licensed dental hygiene practitioner may supervise dental assistants to the extent  
90 permitted in the collaborative management agreement and according to section 51 ½ of chapter  
91 112. The board, in consultation with the executive office of health and human services, shall  
92 develop an evaluation process that focuses on assessing the impact of dental hygiene  
93 practitioners in terms of patient safety, cost-effectiveness, and access to dental services. The  
94 process shall focus on the following outcome measures: (1) number of new patients served; (2)  
95 reduction in waiting times for needed services; (3) decreased travel time for patients; (4) impact  
96 on emergency room usage for dental care; and (5) costs to the public health care system. The  
97 evaluation shall be completed within 7 years of this law taking effect.