

SENATE No. 2854

The Commonwealth of Massachusetts

—
In the One Hundred and Ninety-Fourth General Court
(2025-2026)
—

SENATE, January 15, 2026.

The committee on Public Health to whom was referred the petition (accompanied by bill, Senate, No. 1569) of Jason M. Lewis, Sal N. DiDomenico, James B. Eldridge and Bruce E. Tarr for legislation to improve oral health for all Massachusetts residents, report the accompanying bill (Senate, No. 2854).

For the committee,
William J. Driscoll, Jr.

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An Act to improve oral health for all Massachusetts residents.

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 71 of the General Laws is hereby amended by inserting after
2 Section 34H the following new section:-

3 Section 34I. A public school shall notify the parent or legal guardian of a pupil described
4 in the second paragraph of section 57 of chapter 71 concerning the importance of oral health
5 screenings. The department of public health, in consultation with the board of registration in
6 dentistry, shall develop a standard form of notice containing, at minimum, information on the
7 importance of primary teeth; information on the importance of oral health to overall health as it
8 relates to learning; contact information for local public health departments; and information
9 about programs and services to access affordable dental care.

10 SECTION 2. Paragraph 4 of subsection (d) of section 7 of chapter 94C of the General
11 Laws, is hereby amended by striking out the words "practical nurse or a licensed dental
12 hygienist" and inserting in place thereof the following words:- practical nurse; a licensed dental

therapist under the supervision of a practitioner as defined in section 1 for the purposes of administering analgesics, anti-inflammatories and antibiotics only; or a licensed dental hygienist.

SECTION 3. Subsection (a) of section 9 of said chapter 94C is hereby amended by adding the following paragraph:-

A practitioner, as defined in section 1, may cause controlled substances to be administered under the practitioner's direction by a licensed dental therapist, for the purposes of administering non-narcotic analgesics, anti-inflammatories and antibiotics only.

SECTION 4. Subsection (c) of said section 9 of said chapter 94C is hereby amended by adding the following paragraph:-

A licensed dental therapist who has obtained a controlled substance from a practitioner, as defined in section 1, for dispensing to an ultimate user pursuant to subsection (a) shall return to such practitioner any unused portion of the substance which is no longer required by the patient.

SECTION 5. Subsection (a) of section 40 of chapter 111 of the General Laws is hereby amended by adding the following paragraph:-

The dental director shall be responsible for recruiting, monitoring progress of, and supporting dental health providers. The dental director shall aim to increase the delivery of preventive dental services to underserved and vulnerable populations, including, but not limited to, those residing in dental health provider shortage communities and pediatric and geriatric patients.

SECTION 6. Paragraph (5) of subsection (b) of said section 40 of said chapter 111 is hereby amended by striking out the words “community water fluoridation programs” and inserting in place thereof the following words:- annual community water fluoridation programs.

SECTION 7. Section 43A of chapter 112 of the General Laws is hereby amended by inserting after the definition of "Appropriate supervision" the following definitions:-

"Board", the board of registration in dentistry or a committee or subcommittee thereof established in the department of public health pursuant to sections 9 and 19 of chapter 13, chapter 30A and sections 43 to 53, inclusive.

"Collaborative management agreement", a written agreement that complies with section 51B between a dental therapist and a supervising dentist, as defined in section 43A, who holds a valid license issued pursuant to section 45, who agrees to provide the appropriate level of communication and consultation with a licensed dental therapist to ensure patient health and safety.

SECTION 8. Said section 43A of said chapter 112 is hereby further amended by inserting after the definition of "Dental hygienist" the following definition:-

"Dental therapist", a person who has been licensed by the board to practice dental therapy under section 51B, and who has the appropriate training and works pursuant to a collaborative management agreement as provided in section 51B.

SECTION 9. Said section 43A of said chapter 112 is hereby further amended by adding the following definition:-

"Supervising dentist", a dentist licensed in Massachusetts who is a provider enrolled in the division of medical assistance, or who works for an entity that is a provider enrolled in division of medical assistance, who maintains an active patient list and routinely provides care, and who enters into a collaborative management agreement with a licensed dental therapist.

SECTION 10. Said chapter 112 is hereby amended by inserting after section 51A the following section:-

Section 51B. (a) Any person of good moral character, who: (i) is a graduate of a master's level dental therapist education program, or its equivalent, approved by the Commission on Dental Accreditation; (ii) passes a comprehensive, competency-based clinical examination that is approved by the board and administered by a recognized national or regional dental testing service that administers testing for dentists and other dental professionals or equivalent examination administered by another entity approved by the board; and (iii) obtains a policy of professional liability insurance and shows proof of such insurance as required by rules and regulations shall, upon payment of a fee to be determined annually by the commissioner of administration under the provision of section 3B of chapter 7, be licensed as a dental therapist and be given a certificate to practice in this capacity. A licensed dental therapist shall have practiced under the direct supervision of a supervising dentist for a minimum of 1,000 hours before practicing under general supervision pursuant to a collaborative management agreement.

For the purposes of this section, "general supervision" shall mean supervision of procedures and services based on a written collaborative management agreement between a licensed dentist and a licensed dental therapist but not requiring a prior exam or diagnosis by a supervising dentist or the physical presence of a supervising dentist during the performance of

those procedures and services unless required by the supervising dentist in the collaborative management agreement.

(b) An applicant for licensure as a dental therapist in the commonwealth must graduate from a master's level dental therapist education program, or its equivalent, approved by the Commission on Dental Accreditation. All dental therapy educational programs in the commonwealth must include at least one licensed dentist as an instructor. The board shall provide guidance for any educational entity or institution that may operate all or some portion of a dental therapy program, or may collaborate with other educational entities, including but not limited to universities, colleges, community colleges, and technical colleges, to operate all or some portion of a dental therapy program. The board shall provide guidance to develop mechanisms to award advanced standing to students who have completed coursework at other educational programs accredited by the Commission on Dental Accreditation. All education programs must prepare students to perform all procedures and services within the dental therapy scope of practice as set forth in this section. As determined by the board and established through regulations, dental therapists may be authorized to perform additional procedures through continuing education courses approved by the board.

The educational curriculum for a dental therapist educated in the commonwealth shall include training on serving patients with special needs including, but not limited to, people with developmental disabilities including autism spectrum disorders, mental illness, cognitive impairment, complex medical problems, significant physical limitations and the vulnerable elderly.

Not later than January 1, 2027, the board shall approve a comprehensive, competency-based clinical dental therapy examination that includes assessment of technical competency in performing the procedures and services within the scope of practice as set forth in this section, to be administered by a recognized national or regional dental testing service that administers testing for dentists and other dental professionals. The examination shall be comparable to the examination given to applicants for a dental license but only for the limited scope of dental services in the dental therapy scope of practice as set forth in this section.

(c) The board shall grant a dental therapy license by examination to an applicant, upon payment of a fee as determined annually by the secretary of administration and finance under section 3B of chapter 7, provided the applicant is of good moral character and has: (i) met the eligibility requirements as defined by the board; (ii) submitted documentation to the board of a passing score on a comprehensive, competency-based clinical examination, or combination of examinations, that assesses competency in dental therapy and is approved by the board and administered by a recognized national or regional dental testing service that administers testing for dentists and other dental professionals; and (iii) submitted to the board documentation of a passing score on the Massachusetts Dental Ethics and Jurisprudence Examination or any other successor examination. An applicant failing to pass the examination shall be entitled to re-examination pursuant to the rules and guidelines established by the Commission on Dental Competency Assessments, for which the applicant shall pay a fee as determined annually by the secretary of administration and finance under section 3B of chapter 7.

The board shall require as a condition of granting or renewing a license under this section, that the dental therapist apply to participate in the medical assistance program administered by the secretary of health and human services in accordance with chapter 118E and

119 Title XIX of the Social Security Act and any federal demonstration or waiver relating to such
120 medical assistance program for the limited purposes of ordering and referring services covered
121 under such program, provided that regulations governing such limited participation are
122 promulgated under said chapter 118E. A dental therapist practicing in a dental therapist role who
123 chooses to participate in such medical assistance program as a provider of services shall be
124 deemed to have fulfilled this requirement.

125 The board shall grant a license by credentials, without further professional examination,
126 to a dental therapist licensed in another jurisdiction, upon payment of a fee as determined
127 annually by the secretary of administration and finance under section 3B of chapter 7, provided
128 the applicant is of good moral character and has: (i) met the eligibility requirements as defined
129 by the board; (ii) furnished the board with satisfactory proof of graduation from an education
130 program, or combination of education programs, providing dental therapy education that meets
131 the standards of the Commission on Dental Accreditation, provided, however, that an applicant
132 who graduated from a dental therapy education program established before the Commission on
133 Dental Accreditation established a dental therapy accreditation program is eligible
134 notwithstanding the lack of accreditation of the program at the time the education was received;
135 (iii) submitted documentation of a passing score on a dental therapy examination administered
136 by another state or testing agency that is substantially equivalent to the board-approved dental
137 therapy examination for dental therapists as defined in this section; (iv) submitted documentation
138 of a passing score on the Massachusetts Dental Ethics and Jurisprudence Examination or any
139 other successor examination; and (v) submitted documentation of completion of 1,000 hours of
140 practice. If such practice requirement is not met, a dental therapist shall be required to complete

the remaining hours or years, whichever is longer, under direct supervision in the Commonwealth prior to practicing under general supervision.

(d) Pursuant to a collaborative management agreement, a dental therapist licensed by the board may perform all acts in the Commission on Dental Accreditation's dental therapy standards. Dental therapists shall have the authority to perform an oral evaluation and assessment of dental disease and formulate an individualized treatment plan as authorized by the supervising dentist in the collaborative management agreement. A dental therapist may dispense and administer the following medications within the parameters of the collaborative management agreement and with the authorization of the supervising dentist: non-narcotic analgesics, anti-inflammatories and antibiotics. The authority to dispense and administer shall extend only to the categories of drugs identified in this paragraph and may be further limited by the collaborative management agreement. A dental therapist is prohibited from dispensing or administering narcotic analgesics. A dental therapist may oversee not more than 2 dental assistants, but shall not oversee public health dental hygienists.

After entering into their first collaborative management agreement with a supervising dentist, dental therapists shall practice under direct supervision for not less than 1,000 hours. After completing at least 1,000 hours of practice under direct supervision, dental therapists are authorized to perform all procedures and services listed in the Commission on Dental Accreditation's dental therapy standards, as set forth in regulations by the board, under general supervision if authorized by a supervising dentist pursuant to a written collaborative agreement.

Pursuant to a collaborative management agreement, a dental therapist may provide procedures and services permitted under general supervision when the supervising dentist is not

on-site and has not previously examined or diagnosed the patient provided the supervising dentist is available for consultation and supervision if needed through telemedicine or by other means of communication. If the supervising dentist will not be available, arrangements shall be made for another licensed dentist to be available to provide timely consultation and supervision.

A dental therapist may not operate independently of, and may not practice or treat any patients without, a supervising dentist. A dental therapist is prohibited from practicing without entering into a collaborative management agreement with a supervising dentist.

(e) The board shall establish appropriate guidelines for a written collaborative management agreement. A collaborative management agreement shall be signed and maintained by the supervising dentist and the dental therapist and shall be submitted annually to the board.

The agreement may be updated as necessary. The agreement shall serve as standing orders from the supervising dentist and shall address: (i) practice settings; (ii) any limitation on services established by the supervising dentist; (iii) the level of supervision required for various services or treatment settings; (iv) patient populations that may be served; (v) practice protocols; (vi) record keeping; (vii) managing medical emergencies; (viii) quality assurance; (ix) administering and dispensing medications; (x) geographic distance limitations; (xi) oversight of dental assistants; and (xii) referrals for services outside of the dental therapy scope of practice.

The collaborative management agreement shall include specific protocols to govern situations in which the dental therapist encounters a patient who requires treatment that exceeds the authorized scope of practice of the dental therapist. The supervising dentist is responsible for directly providing, or arranging for another dentist or specialist within an accessible geographic distance to provide, any necessary additional services outside of the dental therapy scope of

practice needed by the patient. A supervising dentist may have a collaborative management agreement with not more than 3 dental therapists at the same time. A practice or organization with more than 1 practice location listed under the same business name may not employ more than 6 dental therapists, provided, however, that this requirement shall not apply if such an organization or practice is a federally qualified health center or look-alike, a community health center, a non-profit practice or organization, public health setting as defined by 234 CMR 2.02, or as otherwise permitted by the board.

(f) No medical malpractice insurer shall refuse primary medical malpractice insurance coverage to a licensed dentist on the basis of whether they entered into a collaborative management agreement with a dental therapist. A dental therapist may not bill separately for services rendered; the services of the dental therapist are the services of the supervising dentist and shall be billed as such.

(g) Not less than 50 per cent of the patient panel of a dental therapist, as determined in each calendar year, shall consist of patients who are MassHealth members or are considered underserved; provided, however, that this requirement shall not apply if the dental therapist is operating in a federally qualified health center or look-alike, community-health center, non-profit practice or organization, or other public health setting as defined by 234 CMR 2.02, or as otherwise permitted by the board. As used in this section, "underserved" means individuals who:

- (i) receive, or are eligible to receive, benefits through the division of medical assistance; (ii) receive, or are eligible to receive, social security disability benefits, supplemental security income, or a Massachusetts state supplement program; (iii) live in a dental health professional shortage area as designated by the federal department of health and human services; (iv) reside in a long-term care facility licensed under section 71 of chapter 111; (v) receive dental services at a

public health setting as defined by 234 CMR 2.02; (vi) receive benefits, or are eligible to receive subsidized insurance through the commonwealth health insurance connector authority; (viii) receive benefits, or are eligible to receive benefits, through the Indian Health Service, tribal or urban Indian organizations, or through the contract health service program; (ix) receive benefits, or are eligible to receive benefits, through the federal department of veterans affairs or other organization serving veterans; (x) are elderly and have trouble accessing dental care due to mobility or transportation challenges; (xi) meet the Commission on Dental Accreditation's definition of people with special needs; (xii) are uninsured and have an annual income at or below 305% of the federal poverty level; or (xiii) as otherwise defined by the board.

An employer of a dental therapist shall submit annual reports to the board that provide information concerning the makeup of the dental therapist's patient panel, including the percentage of underserved in the patient panel. No later than January 1, 2027, the secretary of health and human services may establish by regulation penalties for employers who fail to meet the requirements pertaining to the percentage of underserved in the dental therapist's patient panel.

(j) Not later than January 1, 2028, the board, in consultation with the department shall establish regulations to implement the provisions of this section for the practice of dental therapy to protect the public health, safety and welfare, including, but not limited to: requirements for approval of educational programs; guidelines for collaborative management agreements, continuing education requirements, license renewal, standards of conduct, and the investigation of complaints, conduct of disciplinary proceedings and grounds for discipline.

SECTION 11. The definition of "Core competencies" in section 259 of chapter 112 of the General Laws is hereby amended by inserting after clause (i) the following clause:-

(j) Oral health education;

SECTION 12. The second paragraph of section 260 of chapter 112 of the General Laws is hereby amended by adding the following sentence:- As a condition for licensure or renewal of licensure, the board shall require community health workers to receive education or training in oral health.

SECTION 13. The definition of "health care provider" in subsection (a) of section 79L of chapter 233 of the General Laws is hereby amended by inserting after the word "dentist," the following words:- dental therapist,.

SECTION 14. The department of public health, in consultation with the executive office of health and human services, shall perform a 5-year evaluation of the impact of dental therapists, as established under section 51B of chapter 112 of the General Laws, on patient safety, cost-effectiveness and access to dental services. The department may enter into an inter-agency agreement with the health policy commission, established under chapter 6D of the General Laws, to provide assistance to the department in conducting such evaluation, as it deems necessary. The department shall ensure effective measurements of the following outcomes and file a report of its findings, which shall include the:

(i) number of dental therapists in the commonwealth each year;

(ii) number of licensed dental therapists in the commonwealth each year;

(iii) number of new and total patients served each year;

- 250 (iv) impact on wait times for needed services;
- 251 (v) impact on travel time for patients;
- 252 (vi) impact on emergency room usage for dental care; and
- 253 (vii) costs to the public health care system.

254 The report shall be submitted not later than 5 years after the date of graduation of the first
255 graduating class of dental therapists educated in the commonwealth to the joint committee on
256 public health, the joint committee on health care financing and the senate and house committees
257 on ways and means.

258 The center for health information and analysis shall, by the first day of January of each
259 year, submit a report on dental therapists, including information on:

- 260 (i) number of dental therapists in the commonwealth;
- 261 (ii) number of licensed dental therapists practicing in the commonwealth;
- 262 (iii) number of new and total patients served;
- 263 (iv) number of new and total pediatric patients served, including geographic location and
264 insurance type;
- 265 (v) practice settings; and
- 266 (vi) commonly performed procedures and services.

267 Not later than 3 years after the date of graduation of the first graduating class of dental
268 therapists educated in the commonwealth, the first annual report shall be submitted to the joint

269 committee on public health, the joint committee on health care financing and the senate and
270 house committees on ways and means.