State of Vermont
Office of the Secretary of State

Office of Professional Regulation
89 Main Street, 3rd Floor
Montpelier, VT 05620-3402

[phone] 802-828-1505
[fax] 802-828-2465
www.sec.state.vt.us

James C. Condos, Secretary of State
Brian H. Leven, Deputy Secretary

Christopher D. Winters, Director

Dental Practitioners
Sunrise Application

Docket No. LDP01–0713

Preliminary Assessment on Request for Licensure

On July 1, 2013 the Oral Health Care for All Coalition filed an Application for Preliminary Sunrise Assessment for the profession of "Licensed Dental Practitioner." There are no dental practitioners in Vermont. Regulation of those who provide oral health care in Vermont at this time provides for licensure of dentists and dental hygienists and registration of dental assistants.

The proposal to introduce Dental Practitioners to Vermont came through H.273 during the 2013 legislative session. The Bill was read and referred to the House Government Operations Committee. There was no further action on the bill.

After receiving conflicting advice from legislators, Oral Health Care for All filed the Sunrise Review Application to ensure that its efforts to create this new profession for Vermont would not be procedurally barred. The proposal to introduce a new mid-level dental profession was made as a response to the lack of dental care resources for Vermonters. Impetus for the proposal comes from several sources, including the W.K. Kellogg Foundation

The profession of "dental practitioners" exists in only two United States jurisdictions. In Minnesota legislation permitted the creation of the profession. In Alaska dental practitioners are not a creation of state law; they exist as "Dental Health Aid Therapists" through the Alaska Native Tribal Health Consortium (ANTHC). They practice in isolated tribal regions. The education needed to practice is designed to meet the individual jurisdiction's licensing requirements and is available only in those two states.

This request differs from other Sunrise Reviews. This proposal is not submitted by members of a profession seeking regulation. Nor is it submitted by the legislature to aid in its decision of whether a profession should be subject to regulation by the State.

There is no existing profession of dental practitioners in Vermont or its neighboring jurisdictions. There are no national standards for dental practitioners education. There is no national examination to test the competency of dental practitioners. There is no national organization of dental practitioners seeking recognition in a new jurisdiction. There is no Vermont association or society of dental practitioners. There are no known "dental practitioners" qualified

to practice elsewhere who reside in Vermont.[1] Vermont has no educational program to train dental practitioners. Nor are there any national standards against which such a program can be measured.

Current Vermont law prohibits individuals not licensed as dentists or dental hygienists or registered as dental assistants from providing the services proposed for dental practitioners.[2] Whether the legislature should create a profession for others not currently licensed or registered and allow its members to provide dental services is a policy question. To determine the proper policy for the State to follow requires answering several questions. Among them are:

The nature of the problem:

Is there a problem of lack of access to dental care in Vermont?
What types of dental services are identified as being inaccessible? Specialized care, routine basic preventive services?
Which Vermonters are at risk from inadequate access to dental care?
How great is the problem?
Is lack of access based on geographical or other non-economic factors?
Is lack of access due to patient/family's inability to afford dental services?
How many existing dental practices accept Medicaid enrolled patients?
How many dental practices are there in the state?
Is lack of access due to an insufficient number of licensed dentists? If so, what accounts for the insufficient number of dentists? Demographics of the profession? The cost of a dental school education? Is this unique to dental practice or part of a larger problem with other primary care providers?
Is lack of access due to an insufficient number of dental practices?

The nature of the solution:

Can lack of access can be remedied without creating a new profession?
Can more comprehensive funding for dental care resolve the problem now and for the near or far future?
Can currently available dental human resources provided in a different manner meet access needs?
Can economic changes or incentives remedy the problem?
Is there a way to attract already trained professionals (dentists, dental hygienists) to provide access to needed dental services?
Are there other means, e.g. advanced dental hygiene practitioners to meet dental health needs?

---

[1] 26 V.S.A. § 3105(e)(1) permits OPR to decline to conduct an analysis and evaluation of the proposed regulation if it finds that "the proposed regulatory schemed would regulate fewer than 250 individuals."

[2] Use of the term "dental practitioner" in any statute may be problematic. The term "practitioner" refers to licensees practicing any number of professions. A similar term like "dental therapist" would avoid that confusion.

Can Community Dental Health Coordinators help patients navigate the dental health care system and find an appropriate provider? Can they themselves provide limited dental services?

If dental practitioners are seen as *a solution* to lack of access:

Can dental practitioners provide safe dental services meeting expected professional standards?

What kind of track record for safety do dental practitioners have in other U.S. or foreign jurisdictions?

Will the number of dental practitioners decrease without assured funding? See, "On the Pediatric Oral Health Therapist: Lessons from Canada, J. Public Health, Winter 2008.

Will there be a two tiered expectations of standards of practice; one for dentists, the other for dental practitioners?

Is the scope of practice for dental practitioners sufficiently defined? Is it too narrow or too broad for the access needs identified?

Does the scope of practice include a realistic mix of skills?

What education is needed to properly train an individual to become a dental practitioner?

Which institution, existing or one to be created, is best able to house and provide the necessary administration, faculty / staff, and facilities for dental practitioner education?

Is the education suggested in the proposal sufficient to permit dental practitioners to perform all the functions specified in the proposal (400 hours to competently perform 30 plus different procedures)?

How will an education program determine how many clinical hours of training are needed for each of the various procedures taught.

Who is qualified to provide dental therapist education?

Does the training program have a properly qualified administration?

Do didactic faculty have necessary teaching credentials? Are they properly qualified to teach? How is that determination made, and by whom? See, for example, Administrative Rules of the Vermont Board of Nursing for criteria by which it approves nursing education programs in Vermont.

Do clinical faculty have the necessary clinical and teaching experience? How is that determination made, and by whom?

Who is qualified to accredit the dental practitioner training program? Will it be the Council on Dental Accreditation? If not, who determines which accrediting body is proper? How is that determination made?

Where will dental practitioners practice? WIC offices, Head Start Programs, Schools, Churches, nursing homes, FQHC's, private dental practices, other locations?

How many dental practitioners will be needed?

How will dental practitioners fit in with current dental practices?

Will private dental practices lure dental practitioners from providing public services in needed areas?

Will dental practitioners in remote areas receive adequate supervision when there is no dentist nearby?

Who will treat patients with emergency conditions arising during treatment?

Financial Considerations:

Where will dental practitioners practice? New dental practices or facilities? Existing dental practices?

What are the economic realities to an existing practice of adding a dental practitioner to the dental team?

Who will bear the cost of building/renting and furnishing dental practitioner practice facilities?

What will be the cost of creating a dental practitioner educational program including faculty salaries? Is a "Vermont only" training program viable? Would a Vermont based regional training program achieve economies of scale beneficial to Vermont and other states?

Who will bear that cost?

Would such a program and the growing number of dental practitioners available make obtaining a traditional dental education undesirable?

Would creating dental practitioners as a regulated profession further reduce the number of dentists in Vermont?

Who will bear the cost of regulating the profession, adopting rules, etc. when there are no current members of the profession to pay for their own regulation? Current Vermont law requires that each OPR profession bear the costs of its own regulation.

What will be the cost of training and setting up a practice per dental practitioner?

Can that cost or a lesser amount be spent in other ways to more efficiently address the access problem?

What impact will this new profession and all its attendant costs have on amount spent to assure Vermonters have adequate access to dental care?

Resources available to answer the questions above:

Petitioners submitted a six page list (attached) of resource materials and studies which provide information on a national basis (not answers) regarding some of the questions above. In Vermont, the Green Mountain Care Board is preparing a study on Oral Health in Vermont and the Vermont dental landscape. That report is due in January, 2014. There is also currently in place an advisory board to assist in that study. The advisory board is currently reviewing different mid-level work force models including dental therapists. On the national level the Pew Foundation is leading several case studies on the use of dental therapists in various settings. A Community Catalyst[3] study is being conducted to look at costs of dental care and how dental therapists may reduce costs to the system. There is also an independent panel reviewing dental therapy educational standards. The petitioners report that there are, no doubt, other studies in progress of which they are unaware.

Sunrise Review must address the criteria set out in 26 V.S.A. § 3105. The statute provides:

---

[3] http://www.communitycatalyst.org/about_us?id=0002

Criteria and standards

(a) A profession or occupation shall be regulated by the state only when:

(1) it can be demonstrated that the unregulated practice of the profession or occupation can clearly harm or endanger the health, safety, or welfare of the public, and the potential for the harm is recognizable and not remote or speculative;

(2) the public can reasonably be expected to benefit from an assurance of initial and continuing professional ability; and

(3) the public cannot be effectively protected by other means...."

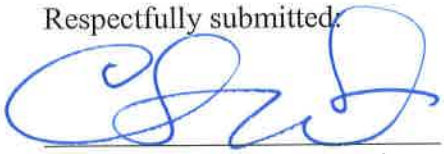
As with dentists and dental hygienists, unregulated practice of dental practitioners can clearly harm or endanger the health, safety, or welfare of the public. Persons improperly providing the variety of dental services contemplated in the proposed statute can cause serious bodily injury or death. The harm is recognizable, not remote or speculative. As with dentists and dental hygienists, the public would absolutely be expected to benefit from an assurance of initial and continuing professional ability. Proper training before attempting the most "basic" dental procedures is essential. Continuing education is necessary for continued competency is an area of practice with fast evolving techniques and equipment. Finally, means other than regulation would be insufficient to reduce or eliminate harm from incompetent practice. Regulatory accountability for dental practitioners, if that profession is to exist in Vermont, will be a must.

Clearly, if the Vermont legislature creates a new category of dental health care providers qualified to provide the services listed in the proposed legislation, sunrise criteria will call for their regulation by licensure.

Conclusion

Current studies are being conducted by the Green Mountain Care Board and other entities. They possess the expertise and resources best suited to answer the policy questions regarding introduction of dental practitioners to Vermont. If the legislature determines that dental practitioners are to become part of the Vermont dental landscape, the Office of Professional Regulation, applying sunrise criteria, recommends that members of that profession be licensed. If the policy of the State of Vermont is to include dental practitioners, the Office will fully participate and assist in the process toward regulation.

Respectfully submitted:



Christopher D. Winters, Director
Office of Professional Regulation

10/7/13
(Date)

Resource Materials

Date	Document Title	Category	Description
5/2003	Oral Health Risk Assessment Timing and Establishment of the Dental Home	Dental care	American Academy of Pediatrics policy statement on dental homes as a way to improve to oral health care
3/2009	Increasing Access to Dental Care in Medicaid	Access	report prepared for National Academy for State Health Policy
2/2005	Cost Effectiveness of Preventitive Dental Services	Midlevels	Children's Dental Health Project policy brief
5/2009	Help Wanted: A Policy Makers Guide to New Dental Providers	Midlevels	conducted by PEW & gives info on proposed & current oral health care providers
11/2009	Adding Dental Therapists to the Health Care Team to Improve Access to Oral Health Care for Children	Midlevels	Article published in Academic Pediatrics supporting Dental therapists
11/2009	Addressing Children's Oral Health in the New Millennuim Trends in the Dental Workforce	Access and Midlevels	Article published in Academic Pediatrics regarding issues of access & workforce trends
	Learning from the International Experience: Dental & Oral Health Therapists in Australia	Midlevels	gives history of dental therapist
4/2003	The Profession of Dental Therapy	Midlevels	describes dental therapists and their history and future
5/2007	Dental Therapists: A Global Perspective	Midlevels	description of dental therapists around the world
10/2008	Potential for DHAT Expansion	Access and Midlevels	report by National Congress of American Indians (NCAI) on DHAT expansion in AK
12/2009	Executive Summary: Training New Dental Health Providers in the US	Midlevels	good summary of dental therapists (all aspects)

Resource Materials

Date	Document Title	Category	Description
12/2009	Full Report: Training New Dental Health Providers in the US	Midlevels and Training	detailed and comprehensive look at midlevel professionals, including, education, scope, comparison to other dental providers, success, etc
12/2009	Policy Brief: Training New Dental Health Providers in the US	Midlevels and Training	describes policy issues around a new midlevel professional
3/2010	ADA Glossary of Dental Terms	Definitions	Gives definition of technical dental terms
10/2009	VT Ronald McDonald Care Mobile (a dental van)	Oral health Initiatives	VSDS memo to members on dental van initiative in VT
2008	Minnesota Legislation for OHP	Legislation	legislation introduced in MN on new oral health practitioner (OHP)
7/2008	What are you smiling at?	News Articles	article in Reason Magazine on ADA opposition to health care reform
1/2007	Rural Dental Training Program Opens in AK	News Articles	Anchorage News article on dental therapist program and opposition
2/2010	VSDS 2010 Access to Oral Health and Oral Health Care Position Statement	Opposition Information	includes info on nutrition, access, medicaid, dental workforce, etc.
	ADA Position on Dental Health Aide Program in AK	Opposition Information	position against DHATs ability to perform irreversable procedures
12/2009	ADA Responds to Kellogg Foundation report on workforce innovations	Opposition Information	position on opposition to surgical procedures by those other than dentists
11/2009	VT DOH Tooth Tutor Program	Oral Health Initiatives	description of tooth tutor program in VT conducted by dental hygienists & goes into schools
	Summary of the Minnesota Dental Therapy Bill	Legislation	explains bill in MN that establishes a dental therapists
10/2009	Improving Access through mid-level oral health practitioners	Oral Health Initiatives	MN presentation at DC Conference about the history of the dental therapy campaign that unfolded there

Resource Materials

Date	Document Title	Category	Description
	Midlevels Compared:WSDA Dental Therapist Proposal v. Advanced Dental Hygienist Practitioner	Other Midlevel models	chart comparison of Washington State Dental Associations therapist and hygienist models
11/2009	ADA Launches Community Dental Health Coordinator Pilot Program at Temple University	other oral health professions	press release from American Dental Association on their version of a midlevel professional
2/2009	Center for Technology, Essex Graduates Seven from Advanced Training Dental Assisting Program	other oral health professions	press release on EFDA program
	Standards for Clinical Dental Hygiene Practice	other oral health professions	describes in detail the practice of dental hygiene, from education and scope to standards of care
3/2008	Competencies for the Advanced Dental Hygiene Practitioner	other oral health professions	American Dental Hygienist Association report on their proposed version of a midlevel professional
2009	Dental Hygiene Practice Act Overview:Permitted Functions & Supervision Levels by State	other oral health professions	chart comparison of hygienist responsibilities by state
1/2010	VT Board of Dental Examiners Administrative Rules	other oral health professions	VT state rules regulating oral health professionals
2010	Vermont Statute on Dentists & Dental Hygienists	other oral health professions	defines professions, who regulates them, etc.
2009	VT Expanded Function Dental Assistants (EFDAs) Requirments	other oral health professions	by Dental Assisting National Board, Inc. describes scope of practice
12/2009	ADHA Press Release in Support of Dental Therapists	Other Org Positions	press release that applauds Kellogg's report supporting DHAT & DT-H providers
10/2009	Analysis & Policy Recommendations Concerning Mid-level Dental Providers	Other Org Positions	American Academy of Pediatric Dentistry opposition to midlevels

Resource Materials

Date	Document Title	Category	Description
11/2009	Connecticut State Dental Association Resolution on Dental Therapist Pilot Program	Other Org Positions	establishes a 2 year pilot program in CT
	Research Literature Review on Mid-level Oral Health Practitioners	research-based evidence	lit review on various research based papers that describe the effectiveness of dental therapists
	A Quality Evaluation of Specific Dental Services Provided by Canadian Dental Therapists	research-based evidence	quantitative analysis on the effectiveness of dental therapists
	A Quality Evaluation of Specific Dental Services Provided by the Saskatchewan Dental Plan	research-based evidence	quantitative analysis on the effectiveness of dental therapists
3/2010	FQHC Sites with Dental	Statistics/Info on Dentists	describes who the FQHC sites with dental care are and the sliding scale
3/2010	The Cost of Delay: State Dental Policies Fail 1 in 5 Children	Vermont Reports/Data	PEW Report: grades VT on addressing oral health care needs
1/2010	FQHC Sites in VT	Vermont Reports/Data	Fact sheet on VT FQHC locations
3/2008	The Health Status of Vermonters	Vermont Reports/Data	VT DOH brings together data from various sources to present picture of the health of Vters
3/2010	2008 VT Health care expenditure analysis & forcast	Vermont Reports/Data	report by BISHCA for VT General Assembly
1/2010	2009 VT Household health insurance survey	Vermont Reports/Data	BISCHA report for health committees in House & Senate, includes dental statistics
2012	2012 VT Household health insurance survey	Vermont Reports/Data	VHHIS report for health committees in House and Senate, includes dental statistics
10/2004	Case Study: VT's Campaign to Improve Children's Oral Health	Vermont Reports/Data	Center for Health Care Strategies funded report pointing out disparities in oral health care
2002-2003	Keep Smiling Vermont: Oral Health Survey	Vermont Reports/Data	identifies health priorities & measures where VT is and where we want to be

Resource Materials

Date	Document Title	Category	Description
2005	Vermont Oral Health Plan	Vermont Reports/Data	gives history and current (meaning 2005) data on oral health in VT and describles goals & strategies
	No. 35. An act relating to the regulation of professions and occupations	Vermont Reports/Data	describes regulation of dentists and hygienists in VT
2007	Dentist Survey Summary Report	Vermont Reports/Data	gives overview, key findings, survey question analysis and comparison w/ previous surveys in graph form on dentists in VT
2009	Dentist Survey Summary Report	Vermont Reports/Data	gives overview, key findings, survey question analysis and comparison w/ previous surveys in graph form on dentists in VT
2011	Dentist Survey Summary Report	Vermont Reports/Data	gives overview, key findings, survey question analysis and comparison w/ previous surveys in graph form on dentists in VT
01/2007	Dental Dozen Initiative	Vermont Reports/Data	description of program (no longer funded)
2005	The National Survey of Children's Health: Vermont	Vermont Reports/Data	stats on Vermont preventive visit and teeth conditions for kids
2007	VT DOH 2007 Dentist Survey: Statistical Report	Vermont Reports/Data	detailed description of landscape of Vermont dentists
3/2010	Scope of Practice terms	Voices Materials	developed as notes by voices on different scopes of practice for oral health providers
	HHS Agency Gives Alaskan Dental Health Aide Program High Marks	News Articles	HHS completed a survey and concluded that DHATs are effective and of high quality
2008	Assessment of Treatment Provided by DHATs in AK: A Pilot Study	research-based evidence	The author conducted this pilot study to determine if treatments provided by DHATs differ significantly from those provided by dentists, and found it was not

Resource Materials

Date	Document Title	Category	Description
	The U.S. Experience: Developing Dental Midlevel Providers	Midlevels	history of attempts to get dental therapists in U.S.
2008	On the Pediatric Oral Health Therapist: Lessons from Canada	Midlevels	reviews the development of dental therapy in Canada
4/28/08	Dental Clinics, Meeting a Need with No Dentist	News Articles	NY Times articles on AK dental therapists
10/2009	Patient satisfaction with care by dental therapists	research-based evidence	gives evidence of a difference in patient satisfaction with care given by DT, compared to Dentists & finds patients prefer care given by DTs
2011	VT FQHC/clinic Map	Voices Materials	a map of where the FQHCs and free clinics with dental programs are in VT
2011	Oral health in VT	Voices Materials	PPT on oral health status in VT
2011	Institute of Medicine Oral health report	Dental care	report on importance of oral health to overall health
2011	VT Story Collection	Voices Materials	analysis of the 200 stories collected from Vters on dental care
2011	Oral health fact sheet	Voices Materials	fact sheet on oral health status in VT
2003-2009	VT ER data	Vermont Reports/Data	ER use for dental care in VT hospitals
2008	Voices of the VT Healthcare Crisis	Vermont Reports/Data	report on health care in VT, including dental
2010	Use of ER for conditions related to poor oral health	Vermont Reports/Data	study done on VT to look at ER use for dental care
2010	Health Disparaties Report	Vermont Reports/Data	data on access to dental care in VT
2005	National Survey of Children's Health (VT)	Vermont Reports/Data	data on preventive visits and teeth condition for VT children
2000	Surgeon General's Report on oral health in America	Dental care	report on importance of oral health to overall health
2003	National Call to Action	Dental care	recommended steps to improving oral health in the U.S.

Resource Materials

Date	Document Title	Category	Description
2010	Evaluation of the DHAT Program in AK	Midlevels	evaluation of the program in AK that has dental therapists
2013	U.S. Senate Committee on Finance – Joint Staff Report on the Corporate Practice of Dentistry in the Medicaid Program	Access and Midlevels	focuses on dental management companies organized as a corporation or limited liability company that works with dentists in multiple state and reccommends dental therapists be reimbursed by Medicaid and used to improve access
2013	Economic Viability of Dental Therapists	Midlevels	assesses the work of dental therapists in AK and MN and details the percentage of time spent on different categories of procedures, the characteristics of the population base they serve, and the overall cost to the practice of employing dental therapists.
2012	Expanding the Dental Safety Net: A First Look at How Dental Therapists Can Help	Access and Midlevels	a report on access and how dental therapists can help in FQHC settings
2012	A Costly Dental Destination	Access and Midlevels	a look at ER costs and how dental therapists can help
2013	A Review of the Global Literature on Dental Therapists	Access and Midlevels	a review of the research on how dental therapists provide quality care and improve access
2010	Oral Health: Efforts Under Way to Improve Children's Access to Dental Services	Access and Midlevels	GAO report on access to dental care for children and how midlevels can be used
2011	Accreditation of Emerging Oral Health Professions: Options for dental therapy education programs	Midlevels and Training	explores options for accreditation of educational programs for dental therapists

Resource Materials

Date	Document Title	Category	Description
2013	Can Midlevel Dental Providers Be a Benefit to the American Public?	Access and Midlevels	reviews midlevels and concludes dental therapists suggest potential practice and public health benefits
2011	The principles, competencies, and curriculum for educating dental therapists: a report of the American Association of Public Health Dentistry Panel	Midlevels and Training	reviews accreditation for midlevel providers
2011	Dentists Provide Effective supervision of Alaska's dental health aide therapists in a variety of settings	Midlevels and Training	This article profiles three DHATs and their supervising dentists, and offers observations on how dentists supervise and work in a team format with DHATs.
2013	Proposed CODA requirements for Dental Therapy Standards	Midlevels and Training	CODA's proposed standards for dental therapy. The document is a draft and is open for public review.