Department of Legislative Services

Maryland General Assembly 2013 Session

FISCAL AND POLICY NOTE Revised

Senate Bill 459 (Senators Conway and Middleton)

Education, Health, and Environmental Affairs Health and Government Operations

Health Occupations - Dental Hygienists - Provision of Services at a Community-Based Health Fair

This bill authorizes a licensed dental hygienist, without the supervision of a dentist, to provide without compensation the following services at a community-based health fair: (1) a preliminary dental examination, including charting cavities, restorations, or missing teeth; (2) oral health education; (3) taking blood pressure, pulse rate, respiration rate, height, and weight; and (3) referrals to a dental home, including providing a patient with a list of clinical public health facilities. The State Board of Dental Examiners, in consultation with the Office of Oral Health, must develop a standard form to be used by a dental hygienist who performs such services. A dental hygienist who performs such services must fill out the form for each patient who received services from the dental hygienist and submit the completed form to the office.

Fiscal Summary

State Effect: The bill does not materially affect State finances.

Local Effect: None.

Small Business Effect: None.

Analysis

Bill Summary: "Community-based health fair" means a health service event that offers primary health care services to an individual for free or using a sliding fee schedule that is sponsored by the federal, the State, or a local government; a tax-exempt nonprofit organization; or a nonprofit community organization that has the stated purpose of providing health services to the disadvantaged.

Current Law: A licensed dental hygienist is authorized to perform a preliminary dental exam; perform a complete prophylaxis, including the removal of any deposit, accretion, or stain from the tooth surface or restoration; polish a tooth or restoration; chart cavities, restorations, missing teeth, periodontal conditions, and other features observed; apply a medicinal agent to a tooth for prophylactic purpose; take a dental X-ray; or perform any other intraoral function authorized by the State Board of Dental Examiners. A dental hygienist who meets additional education and other requirements may also perform a manual curettage in conjunction with scaling and root planing, administer local anesthesia, and monitor a patient to whom nitrous oxide is administered.

Historically, a dental hygienist has practiced under the indirect supervision of a dentist, which means the dentist authorizes the procedure and remains in the office while it is being performed. To more efficiently serve patients and promote proper preventive oral health care, dentistry practices in Maryland have trended toward permitting hygienists to work under less restrictive supervisory requirements.

The State Board of Dental Examiners may waive, on a case-by-case basis only, supervision requirements for a dental facility owned and operated by the federal government, the State, or a local government; a health facility licensed by the Department of Health and Mental Hygiene; a facility providing medical care to the poor, elderly, or handicapped that is owned and operated by the State, a local government, or a bona fide charitable organization; or any other setting authorized under regulations adopted by the board.

Chapters 164 and 165 of 2007 (SB 568/HB 751) authorized a dental hygienist who is authorized to practice under a licensed dentist's general supervision in a government-owned and -operated facility or public health department to apply fluoride, mouth rinse, or varnish. Chapter 316 of 2008 (HB 1280) authorized a dental hygienist who is a permanent or contractual employee of the federal government, a State or local government, or a federally qualified health center and who is working in specified facilities to apply fluoride and sealants under the general supervision of a licensed dentist. Chapter 316 also expanded the types of facilities in which a dental hygienist may practice under general supervision, specified that such facilities are not required to obtain a general supervision waiver, and repealed the requirement that a dentist or physician evaluate or diagnose a patient before a dental hygienist can treat the patient in these facilities. Chapter 733 of 2010 (HB 1302) authorized a licensed dental hygienist to practice in a long-term care facility under the general supervision of a dentist.

Background: According to the American Dental Hygienists' Association, 35 states allow for some form of "direct access," which means that a dental hygienist may initiate treatment based on his or her assessment of a patient's needs without the specific

authorization of a dentist and may treat the patient without the presence of a dentist. However, the level of direct access varies a great deal from state to state.

There are 2,783 licensed dental hygienists in the State.

Additional Information

Prior Introductions: None.

Cross File: HB 1121 (Delegate Kipke, *et al.*) – Health and Government Operations.

Information Source(s): American Dental Hygienists' Association, Department of

Health and Mental Hygiene, Department of Legislative Services

Fiscal Note History: First Reader - February 18, 2013

mlm/ljm Revised - Senate Third Reader - March 25, 2013

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