

February 15, 2025

To: Delegate Joseline Pena-Melnyk, Chair - Health and Governmental Operations Comm
Room 241 – Taylor House Office Building
6 Bladen Street
Annapolis, MD 21401

Re: HB0534 protects citizens and enables licensure portability

Dear Honorable Delegate Pena-Melnyk,

I am writing to you today regarding an issue of public safety in our state. SB538/HB0534, also known as the Interstate Dental and Dental Hygiene Licensure Compact **supports workforce stability** by maintaining high standards while facilitating mobility for qualified professionals, addressing shortages without compromising care quality.

I support HB0534 because:

- States can join the AADB IDDHL Compact at no cost, promoting workforce mobility without burdening taxpayers.
- By requiring hand-skills examinations and accredited education, the AADB Compact maintains high standards to protect public safety.
- With clear, uniform standards, the AADB Compact enhances regulatory consistency across member states while respecting Maryland laws.

I was the first dental hygienist to be President of MSBDE's. I have spent 30 of my 42 years of practice, as an examiner working to uphold the profession of Dental Hygiene's high standards. I support SB538 and HB0534 because the legislative language is precise, clearly stating an applicant's qualifying credentials. Educational programs curriculum are standardized by the Council On Dental Accreditation, (CODA). The American Dental Examination, (ADEX), is a national, psychometrically sound examination, validating psychomotor hand skills and critical thinking. I am concerned about diminished educational standards and diluted validation of clinical skill needed to deliver comprehensive quality preventive therapy needed to address patients oral and systemic health. SB538 and HB534 will keep Maryland's "Gold standards" and licensing credentials, ensuring today's high standard of care for Maryland citizens in the future. Not validating a practitioners hand skills in a profession that demands accuracy to protect patients is irresponsible.

DDH Compact bills, HB0045, will open pandora's box with vague, unvalidated and undefined terms. Future programs approved by the US Department of Education could be mentored "preceptorship" training or practitioners trained in International schools with unknown standards of care. A critical area of concern for me as a dental hygienist is; will preceptorship programs or Internationally trained individuals develop therapeutic skills to deliver competent preventive oral health care.

US Dental Hygiene graduates are well trained co-therapists. I believe the ADEX examination confirms competency. How will a "clinical assessment" be defined? Will it have a hand skills component? What validation will there be of someone's training and ability? General dentistry has areas designated as "Specialties," Endodontists, Oral surgeons, Prosthodontists and Periodontists! That is because there is so much to learn in each respective disciplines' and scope of practice. Auxiliary dental hygiene therapy and the expertise to assess oral and systemic disease, is not an in-depth aspect of a dental students dental education in the United States. How much knowledge and training is included in an International dental school curriculum?

I ask legislators to please take a stand to preserve our current standards for the profession of dentistry and support HB0534.

Very truly yours,
Betty Howard, BSDH, RDH
Potomac, MD 20854 District 15