

House Bill No. 1426—Authorizing Dental Therapists

HB 1426, bipartisan legislation to authorize midlevel dental providers, was introduced by Representatives Bill Devlin, Dick Anderson, Gretchen Dobervich, Daniel Johnston, Karen Rohr and Mary Schneider, and Senators Dick Dever, Joan Heckaman, Oley Larsen, Judy Lee and Donald Schaible.

Here are the key provisions:

Dental therapists will only be allowed to practice in the following settings or locations:

- Federally Qualified Health Centers (FQHCs) and FQHC Look-Alike clinics. Look-Alike clinics are federally designated community health centers that serve low-income and underserved populations and meet the requirements of FQHCs but do not receive federal funding.
- Tribal facilities, programs, or organizations including Urban Indian Health Centers, Tribal operated (638) health facilities, and those operated through the Indian Health Service
- Non-profit or government dental practices or organizations that provide dental care to low income and underserved individuals, including those that provide services in community settings like schools or nursing homes.

Education and licensure:

- Dental therapists must be trained in board-approved dental therapy programs, including programs that are accredited by the American Dental Associations' Commission on Dental Accreditation (CODA).
- Dental therapists must pass a board-approved examination to demonstrate clinical competency in dental therapy and an examination on the laws and rules governing the practice of dentistry in North Dakota.
- Dental therapists must complete 500 hours of clinical practice under direct or indirect supervision of a dentist.

Scope of Practice:

- Dental therapists will be able to perform the full scope of practice listed in the CODA standards. In addition, dental therapists can: process x-rays, fabricate soft occlusal guards (night guards), administer nitrous oxide, perform nonsurgical extractions of badly diseased permanent teeth, perform pulpotomies on primary teeth, perform suturing, place space maintainers, and perform all functions of a dental assistant.

Supervision:

- Dental therapists can may only practice under the supervision of a dentist and pursuant to a written collaborative management agreement (CMA) with a supervising dentist.
- Dental therapists may practice under general supervision to the extent authorized by the supervising dentist and CMA, which means they can evaluate and assess oral health conditions, formulate a treatment plan and perform services in settings where the

supervising dentist is not onsite and for patients who have not been previously examined or diagnosed.

- The supervising dentist must be available for consultation by telephone or other forms of electronic communication.

Collaborative Management Agreement:

- The CMA between the dentist and dental therapist must address: any limitations on services and/or supervision of services, treatment settings, practice protocols, recordkeeping, managing medical emergencies, quality assurance, administering and dispensing medications, and supervision of dental assistants.
- The CMA must be submitted to the board upon request.