

# Dental Hygiene Licensure: Practice and Portability

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# Dental Hygiene– Fast Facts

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- Dental hygienists are professionally licensed.
- Nationally, there are more than 300 dental hygiene education programs with an average of 84 credit hours or about three years in length.
- 49 states require continuing education credits for licensure renewal.

# Direct Access

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- The ability of a dental hygienist to initiate treatment based on their assessment of a patient's needs without the specific authorization a dentist, treat the patient without the presence of a dentist, and maintain a provider-patient relationship.

# Colorado

## *Unsupervised Dental Hygiene Practice*

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- No requirement that a dentist must authorize or supervise most dental hygiene services.
- Dental hygienist may own a dental hygiene practice.
- Dental hygienist can provide dental hygiene diagnosis, radiographs, remove deposits, accretions, and stains, perform incidental curettage, apply fluorides and other recognized preventive agents, topical anesthetic, oral inspection and charting. May prescribe low-dose sodium fluoride supplements, lozenges and drops, topical fluorides and topical anti-infectives. Local anesthesia requires general supervision.

# Florida

## *Health Access Dental Hygiene*

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- May practice in health access settings
- Must maintain liability insurance
- All licensed dental hygienists may participate
- Services include: prophylaxis, dental charting, take vital signs, record history, apply sealants and fluoride varnish

### Settings:

- Program or an institution of the Department of Children and Families, the Department of Health, the Department of Juvenile Justice
- Nonprofit community health center
- Head Start center
- Federally qualified health center or look-alike as defined by federal law
- School-based prevention program
- Clinic operated by an accredited college of dentistry, or an accredited dental hygiene program

# Rhode Island

## *Public Health Dental Hygienist*

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- May practice in public health settings
- Performs dental hygiene procedures without the immediate or direct supervision or direction of a dentist, any procedure or service that is within the dental hygiene scope of practice
- Must enter into a written collaborative agreement with a local or state government agency or institution or with a licensed dentist

### **Settings:**

- Residences of the homebound
- Schools
- Nursing homes
- Long-term care facilities
- Clinics
- Hospitals
- Medical facilities
- Community health centers

# Illinois

## *Public Health Dental Hygienist*

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- May practice in public health settings
- Provides prophylactic cleanings, application of fluoride, placement of sealants, and take radiographs. Additional services may be prescribed by the Illinois Department of Financial and Professional Regulation
- Must have 2 years of full-time clinical experience or an equivalent of 4,000 hours of clinical experience and have completed at least 42 clock hours of additional structured courses in dental education approved by rule in advanced areas specific to public health dentistry
- The dental hygienist must also practice pursuant to a written public health supervision agreement with a dentist

### **Settings:**

- Federally qualified health center
- Federal, state, or local public health facility
- Head Start program
- supplemental nutrition program for Women, Infants, and Children facility
- Certified school-based health center
- School-based oral health program

# Arizona

## *Affiliated Practice Dental Hygienist*

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- May practice, pursuant to a written affiliated practice agreement with a dentist, in public health settings
- The full dental hygiene scope is permitted with the exception of root planing, nitrous oxide and the use of local anesthesia unless under specified circumstances
- Must be licensed for 5 years and be engaged in dental hygiene practice for at least 500 in each of the last 2 years. Alternatively, a holder of a bachelor's degree in dental hygiene, an active license for 3 years and at least 500 hours of practice each year in the last 2 years
- Must successfully complete 12 hours of continuing education and a CPR certificate

### **Settings:**

- Health care organization or facility
- Long-term care facility
- Public health agency or institution
- Public or private school authority
- Government-sponsored program
- Private nonprofit or charitable organization
- social service organization or program

# Missouri

## *Public Health Dental Hygienist*

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- May provide services without supervision in public health settings to Medicaid-eligible children and can be directly reimbursed
- May provide prophylactic cleanings, application of fluoride and placement of sealants
- Dental hygienist must have 3 years of experience
- In 2016, new legislation introduced use of telehealth for dentist and dental hygienists

### **Settings:**

- No specific restrictions, however delivery of services must be sponsored by a government health entity

# Oregon *Pilot Project*

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## Training Dental Hygienists to Place Interim Therapeutic Restorations

- Educate Expanded Practice Dental Hygienists and demonstrate that they can successfully place Interim Therapeutic Restorations
- Project will also demonstrate the effectiveness and potential of the telehealth connected dental team model
- Pilot testing will occur in several sites in the Polk County Center School District

# Oregon *Pilot Project*

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## Oregon Tribes Dental Health Aide (DHAT) Therapist Pilot Project

- Develop a new category of dental professional in Oregon
- Will train 5-7 DHATs
- DHATs will provide treatment in two tribal dental clinics

# Oregon

## *Anticipated Pilot Project*

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### **Introducing Dental Therapy**

- Another pilot project is in a study phase from Lane Community College focused on dental therapy
- Plans include a dual track program, an accelerated program for dental hygienists and an extended option for high school graduates
- Recently received a \$100,000 grant from the Kellogg Foundation

# Oregon

## *Expanded Practice Dental Hygienist*

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- In 2012, the state of Oregon created the Expanded Practice Permit to enable dental hygienists to provide a variety of dental hygiene services, without the supervision of a dentist, for limited-access regions or populations.
- No collaborative agreement required.
- Work in a variety of settings, such as nursing homes and schools, and many are employed as private business owners.

## Regulatory Barriers Facing Dental Hygienists

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- Inconsistent acceptance of regional exams
- Lack of license portability
- Restrictive scopes of practice

# Licensure Restrictions

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“This study [Dental Hygiene Regulation and Access to Oral Healthcare: Assessing the Variation across the US States] suggests that by increasing the number of DHs working in a state through expanding educational opportunities, facilitating in-migration of DHs from other states, and implementing less stringent scope of practice regulations, states can significantly improve access to oral healthcare and reduce many of the disparities that exist.” (Wanchek, 2010)

**References:** Wanchek, T. (2010). *Dental Hygiene Regulation and Access to Oral Healthcare: Assessing the Variation across the US States*. *British Journal of Industrial Relations*, 706-725.

# Occupational Licensing: A Framework for Policymakers

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- “Licensing requirements vary substantially by State, creating barriers to workers moving across State lines and inefficiencies for businesses and the economy as a whole.”
- Regulations that place excessively stringent restrictions on practitioners’ scope of practice... can limit the supply of labor, restrict competition, increase wages for incumbent practitioners but restrict access for others and increase the overall cost of services.

  


OCCUPATIONAL LICENSING:  
A FRAMEWORK FOR POLICYMAKERS

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# Occupational Licensing: A Framework for Policymakers

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- “Many workers may choose their occupation with the understanding that it requires a state license, but life events can intervene to change their expectations about the need to make a cross-state move. For example, military spouses may have entered their field before marriage.”
- “If States don’t offer a temporary license to practice (while applying), then the financial barriers of licensing are even more significant.”

# Occupational Licensing: A Framework for Policymakers

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- “Within groups of States, harmonizing regulatory requirements as much as possible, and where appropriate entering into inter-State compacts that recognize the licenses from other State to increase the mobility of skilled workers.”
- “Allowing practitioners to offer services to the full extent of their current competency, to ensure that all qualified workers are able to offer services.”

# Occupational Licensing: A Framework for Policymakers

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## **Streamlining Licensing for Service Members, Veterans and Military Families**

- The Obama Administration has partnered with States to streamline State occupational licensing for service members, veterans, and their spouses.
- Through collaboration with State legislators and regulators, the Department of Defense has worked towards State adoption of best practices that can expedite the transfer of military spouse licenses that are in good standing and are substantially equivalent.

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**For more information, please contact  
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