

**Department of Legislative Services**  
Maryland General Assembly  
2016 Session

**FISCAL AND POLICY NOTE**  
**First Reader**

House Bill 830 (Delegate Kipke, *et al.*)  
Health and Government Operations

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**Dental Hygienists - Scope of Practice - Authority to Practice Under General Supervision of Licensed Dentists (Oral Health Access for Underserved Marylanders Act)**

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This bill expands the facilities in which a dental hygienist may practice under the general supervision of a licensed dentist to include a school or any other facility with a population that lacks direct access to dental care. The bill specifies additional requirements for dental hygienists who practice in these facilities.

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**Fiscal Summary**

**State Effect:** The bill does not materially affect State finances or operations.

**Local Effect:** The bill does not materially affect local government finances or operations.

**Small Business Effect:** Minimal.

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**Analysis**

**Bill Summary:** Before a dental hygienist may practice in a specified facility, a dental hygienist must submit to the Department of Health and Mental Hygiene (DHMH) (1) an overview of the population to be served and the method by which services are to be provided; (2) the name of the facility; and (3) the specified required written agreement.

A dental hygienist practicing in a specified facility must also ensure that the supervising dentist is available on a regularly scheduled basis to (1) review the dental hygienist's practice; (2) provide consultation; (3) review patient records; and (4) provide additional education to the dental hygienist in the performance of the dental hygienist's duties.

A dental hygienist need not ensure that a specified facility has adequate equipment if the dental hygienist is providing the equipment.

Dental hygiene preventive tasks and procedures are limited to those authorized under the dental hygienist's scope of practice. Dental hygienists must also critically evaluate the need to refer a patient to a dentist or dental care facility based on the patient's overall oral health status.

The bill authorizes dental hygienists to perform subsequent authorized dental hygiene services in specified facilities without the supervising dentist on the premises, rather than only under specified circumstances.

The bill repeals the prohibition against construing existing law as prohibiting a dental hygienist, without the supervision of a dentist, from performing a preliminary dental examination with subsequent referral to a dentist.

**Current Law:** A dental hygienist may practice under the general supervision of a licensed dentist in a long-term care facility. "Long-term care facility" means a nursing home or an assisted living program. Before a dental hygienist may practice in such a facility, the dental hygienist must ensure that the facility has a written medical emergency plan and adequate equipment and safeguards. The dental hygienist must also consult with the supervising dentist or treating physician before proceeding with initial treatment if there is a change in a recall patient's medical history. Dental hygiene procedures are limited to specific tasks and procedures, unless otherwise delegated by the supervising dentist. A dental hygienist may perform subsequent authorized dental hygiene services without the supervising dentist on the premises only under specified circumstances.

Additionally, a dental hygienist may practice under the general supervision of a licensed dentist in (1) a dental facility owned and operated by the government; (2) a State or county public health department or public school; (3) a facility in which a DHMH-licensed program operates; (4) a facility owned and operated by the Department of Juvenile Services; (5) a facility owned and operated by the State or a local government that provides medical care to the poor, elderly, or handicapped; (6) a facility in which a federally qualified health center (FQHC) or FQHC look-alike is located; or (7) a facility in which a State-licensed Head Start or Early Head Start Program operates.

Pursuant to Chapters 271 and 272 of 2013, dental hygienists may perform the following procedures and activities without the supervision of a dentist, but without compensation, at a community-based health fair sponsored by the government or a nonprofit organization: (1) preliminary dental examination; (2) oral health education; (3) blood pressure, pulse, respiration, and height and weight measurements; and (4) referrals to dental homes. Dental

hygienists must submit a specified form for each patient served at a community-based health fair to DHMH's Office of Oral Health.

**Background:** A licensed dental hygienist has long been 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 a prophylactic purpose; take a dental X-ray; or perform any other intraoral function authorized by the State Board of Dental Examiners.

Historically, a dental hygienist in Maryland 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. For example:

- Chapters 164 and 165 of 2007 allowed 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 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 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 these 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.
- Chapters 565 and 566 of 2009 expanded the scope of practice for a dental hygienist by allowing a dental hygienist to perform manual curettage in conjunction with scaling and root planing and to administer local anesthesia.
- Chapter 733 of 2010 authorized a dental hygienist to practice in a long-term care facility under the general supervision of a dentist. Chapter 381 of 2014 made these provisions permanent.
- Chapters 271 and 272 of 2011 allowed a dental hygienist to monitor a patient to whom nitrous oxide is being administered. Chapter 382 of 2014 made these provisions permanent.
- Chapter 220 of 2012 allowed dental hygienists to administer local anesthesia by inferior alveolar nerve block.

- Chapters 271 and 272 of 2013 authorized dental hygienists to perform specified procedures and activities without the supervision of a dentist, but without compensation, at a community-based health fair sponsored by the government or a nonprofit organization.

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### **Additional Information**

**Prior Introductions:** None.

**Cross File:** Although designated as a cross file, SB 538 (Senator Conway – Education, Health, and Environmental Affairs) is not identical.

**Information Source(s):** Department of Health and Mental Hygiene, Maryland Association of County Health Officers, Maryland State Department of Education, Department of Legislative Services

**Fiscal Note History:** First Reader - February 16, 2016  
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Analysis by: Sasika Subramaniam

Direct Inquiries to:  
(410) 946-5510  
(301) 970-5510