

SD747/HD111

AN ACT TO IMPROVE ORAL HEALTH FOR ALL MASSACHUSETTS RESIDENTS

This legislation would create a **midlevel oral health practitioner called a "dental therapist"** in Massachusetts and address the **continued gap in oral healthcare access across the state.**

As we reassess the consequences of inaccessible healthcare, there is no better time to address this critical issue. The creation of the public health dental hygienist in 2008 established a model for the expansion of oral healthcare to thousands of children and adults without undergoing a costly visit to a dentist.

Dental Therapy is a natural extension of this successful model of care. Like other midlevel healthcare practitioners, the proposed DT would require significantly more education and training than traditional dental hygienists.

The need for an oral healthcare solution for underserved populations continues to rise:

- Only **4 out of 10 dentists** practicing in the state serve residents on MassHealth, leaving **almost 50% of cities and towns with no dentist willing to accept any MassHealth eligible patients.**
- In 2014, only **35% of Massachusetts dentists treated a MassHealth patient**, and only **26% of dentists were active MassHealth Providers**, defined as providers who billed more than **\$10,000 a year for treatment.**
- **61 Massachusetts towns and cities** are designated as Dental Health Professional Shortage Areas (DHPSAs) and the dental needs of an estimated **244,000 people** in those areas were not being met as of 2014.
- **47% of all eligible MassHealth children** received no dental services in 2014.
- A 2010 survey found that **74% of seniors in long-term care facilities had gingivitis**, and **34% had major to urgent untreated dental needs.**

THE CREATION OF A DENTAL THERAPIST WOULD IMPROVE PREVENTIVE CARE AND SAVE THE COMMONWEALTH THOUSANDS OF DOLLARS



- **Without adequate care**, residents end up in emergency rooms and hospitals with **traumatic oral health emergencies** that could have easily been prevented with basic care.
- According to the Division of Health Care Finance and Policy, **31,000 emergency room visits** in Massachusetts in 2011 alone were due to potentially preventable dental problems. In addition, **ERs are not adequately equipped** to treat many dental emergencies.
- Research has shown that **untreated dental issues** can lead to **heart and lung disease, diabetes, premature, low-birth weight babies**, and a number of **other systemic diseases.**
- It is not only **socially responsible** but **fiscally prudent**, to increase access to preventive services.

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SPONSORED BY REP. WILLIAM PIGNATELLI
AND SENATOR ADAM GOMEZ

The proposed Dental Therapist would be a professionally licensed dental hygienist who has completed a master's-level program of 12-18 months provided at an accredited post-secondary institution, passed a clinical examination, practiced under the direct supervision of a supervising dentist for at least 500 hours, and established a collaborative agreement with a licensed dentist.

Dental Therapists would provide both preventive and basic restorative services to meet identified patient needs. They would bring an increasing number of patients into the oral healthcare pipeline and make necessary referrals to dentists and other medical professionals, strengthening the crucial link between community, oral health, and medical networks.



The legislation would create a midlevel Dental Therapist (DT), following the "nurse practitioner model" of healthcare delivery. This model would provide comprehensive, accessible, and affordable oral healthcare to thousands of Massachusetts residents currently unable to access necessary care from a dentist or dental hygienist. Care would be provided in a variety of public health settings - schools, clinics, and long-term care facilities, among others.

Critics of creating a DT would say that we should not create two standards of care. **There already are two standards of care: those who can find a dentist willing to treat them and those who can't!**



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