



**PA 19-72—sHB 7303**  
*Public Health Committee*

## **AN ACT CONCERNING DENTAL PRACTITIONERS**

**SUMMARY:** This act makes various changes in laws on dental professionals. Among other things, it:

1. establishes a one-year clinical residency as a standard requirement for dentist licensure;
2. for dentists completing a practical examination instead of a residency, eliminates examinations with human subjects by July 1, 2021;
3. allows out-of-state dentists meeting certain standards to become licensed here without examination if they have worked for at least one year before the application, rather than five years as was previously required;
4. specifies when the Department of Public Health (DPH) may take disciplinary action against dental therapists and makes it a class D felony to violate the laws on dental therapists;
5. allows dentists and dental hygienists to substitute eight hours of volunteer practice at temporary dental clinics for one hour of continuing education, within certain limits;
6. allows dental hygienists to take impressions of teeth for certain purposes under a dentist's indirect supervision;
7. requires the Public Health Committee chairpersons to convene a working group to advise the committee on DPH licensure of dental therapists; and
8. allows dentists to administer finger-stick diabetes tests to patients who have increased risk of diabetes, but who have not been diagnosed with diabetes.

The act also makes minor, technical, and conforming changes.

**EFFECTIVE DATE:** January 1, 2020, except July 1, 2019, for the dental therapist working group and diabetes testing provisions.

### **§§ 1-3 — DENTIST LICENSURE**

#### *Examination and Residency Requirements (§§ 1 & 2)*

The act changes the standard requirements for dentist licensure. Under prior law, in addition to education requirements (see below), applicants generally had to have passed written and practical (clinical) examinations meeting certain requirements or, instead of the practical examination, completed a one-year graduate residency.

The act retains the written examination requirement and establishes the one-year residency as a standard requirement. As under prior law, (1) the residency program must be accredited by the American Dental Association's Commission

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on Dental Accreditation (CODA) or its successor and (2) the State Dental Commission, with DPH's consent, may accept a clinical or practical examination instead of the residency.

Under the act, these clinical or practical examinations may not require the use of human subjects, starting by the earlier of (1) July 1, 2021, or (2) when the state Dental Commission approves examinations that do not require patient participation.

It also makes related minor and conforming changes.

### *Approved Schools (§ 1)*

The act specifically requires dentist licensure applicants to have graduated from a dental school accredited by CODA or its successor organization. Prior law allowed the state Dental Commission, with the consent of the DPH commissioner, to determine the approved schools.

### *Dentists Licensed in Other States (§ 3)*

Under specified conditions, the act allows DPH to issue a license without examination to a dentist licensed in another jurisdiction who has worked continuously as a licensed dentist in an academic or clinical setting outside of Connecticut for at least one year immediately before applying for licensure. Under prior law, this applied only if the dentist had been working for five years before applying here.

As under prior law, DPH may issue a license in this manner only if the dentist (1) holds a current license in good professional standing issued after examination by another state or territory with licensure standards commensurate with Connecticut's, except for the practical examination, and (2) is not the subject of a pending disciplinary action or unresolved complaint.

## §§ 4 & 5 — DENTAL THERAPIST DISCIPLINARY ACTION

PA 19-56 establishes a dental therapist designation for dental hygienists who meet certain certification, education, and clinical training requirements.

This act makes it a class D felony (see [Table on Penalties](#)) to violate any of the dental therapist provisions in PA 19-56. Under existing law, it is generally a class D felony to violate the dental hygienist statutes.

The act also allows DPH to take disciplinary action against a dental therapist who is convicted for such a violation. This is in addition to the existing grounds for DPH disciplinary action against hygienists (e.g., negligent or incompetent professional conduct). By law, disciplinary actions available to DPH include, among other things, (1) revoking or suspending a license, (2) issuing a letter of reprimand, (3) placing the person on probationary status, or (4) imposing a civil penalty (CGS § 19a-17).

The act provides that if an unlicensed hygienist violates the dental therapist provisions of PA 19-56 with the employer's knowledge, it is deemed a violation

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by the employer. This is already the case for violations of existing dental hygienist laws.

### § 6 — DENTISTS' CONTINUING EDUCATION

The act allows dentists to substitute eight hours of volunteer practice at a temporary dental clinic for one contact hour of continuing education, up to a maximum of 10 hours in a two-year period. Under the act, a “temporary dental clinic” provides dental care services at no cost to uninsured or underinsured persons and operates for no more than 72 consecutive hours.

Existing law similarly allows dentists to substitute eight hours of volunteer practice at other public health facilities for one contact hour of continuing education, up to the same maximum. By law, dentists generally must complete 25 contact hours of continuing education every two years, starting with their second license renewal.

### §§ 7-9 — DENTAL HYGIENISTS

#### *Scope of Practice (§ 7)*

The act allows dental hygienists to take alginate impressions of teeth, under a dentist's indirect supervision, for use in study models, orthodontic appliances, whitening trays, mouth guards, and fabrication of temporary crowns.

#### *Practice at Temporary Clinics (§ 7)*

The act permits dental hygienists with two years of experience to practice without a dentist's general supervision at a temporary dental clinic (see CGS § 20-126l (b)). It does so by adding these clinics to the definition of “public health facility” for this purpose.

As is already the case for such practice at other public health facilities, hygienists practicing at temporary clinics must refer to a dentist any patients with needs outside of the hygienist's scope of practice (CGS § 20-126l (f)).

#### *Continuing Education (§ 8)*

Under existing law, a dental hygienist may substitute eight hours of volunteer practice at a public health facility for one contact hour of continuing education, up to a maximum of five hours in a two-year period. The act extends this to volunteer practice at temporary clinics.

The act also removes prior law's four-hour limit on the number of contact hours of continuing education that hygienists may earn through online or distance learning programs.

#### *Dental Hygienist Students (§ 9)*

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The act specifies that the dental hygienist statutes do not prohibit students in dental hygiene programs from performing dental hygiene work as a required component of the program. This applies as long as the work is unpaid and the student (1) performs the work under the direct supervision of a dentist or dental hygienist and (2) does not hold himself or herself out as a licensed hygienist.

### § 10 — DENTAL THERAPIST WORKING GROUP

The act requires the Public Health Committee chairpersons to convene a working group to advise the committee on DPH licensure of dental therapists. The group's membership must include:

1. the committee chairpersons or their designees;
2. the DPH commissioner or her designee;
3. representatives of the Connecticut State Dental Association, including at least one dentist and one dental hygienist;
4. a dental therapist certified in another state; and
5. the president of the Board of Regents for Higher Education, or the president's designee.

The group also must include one representative each from:

1. CODA;
2. the Joint Commission on National Dental Examinations;
3. the Community Health Center Association of Connecticut;
4. the Connecticut Oral Health Initiative;
5. the Connecticut Association of School Based Health Centers;
6. the Connecticut Public Health Association;
7. the Connecticut Dental Health Partnership; and
8. the Community Health Center, Inc.

The working group may also include other members of the Public Health Committee.

The act specifically allows the Public Health Committee chairpersons to convene the working group without the participation of any required group member listed above.

Under the act, the group must evaluate and make recommendations on dental therapists' scope of practice and the educational and training requirements needed to become licensed as a dental therapist. The group must report its findings and recommendations to the committee by January 1, 2020.

### § 11 — DENTISTS TESTING FOR DIABETES

Under certain conditions, the act allows dentists, during an office visit or before a procedure, to administer an in-office point-of-service test to measure a patient's HbA1c percentage with a finger-stick measurement tool. "HbA1c percentage" measures the patient's average blood sugar level over the previous two- to three-month period.

Under the act, a dentist may administer this test for patients who are at increased risk of diabetes, but who are not already diagnosed with it. The dentist

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may do so only with the patient's consent.

The act specifies that it does not violate the standard of care for a dentist to not administer such a test. It allows the DPH commissioner to adopt implementing regulations.

### BACKGROUND

#### *Related Act*

PA 19-56, §§ 13 & 14, (1) establishes a dental therapist designation for dental hygienists who meet certain requirements; (2) gives dental assistants more time to pass an infection control examination and provides an alternate way to meet the requirement; and (3) adds to the list of procedures that dentists may delegate to expanded function dental assistants.