## STATE OF KANSAS

DEPARTMENT OF HEALTH AND ENVIRONMENT CURTIS STATE OFFICE BUILDING 1000 SW JACKSON ST., SUITE 540 TOPEKA, KS 66612-1368



PHONE: (785) 296-1500 FAX: (785) 559-4269 WWW.KDHEKS.GOV

Testimony on Senate Bill 312
Licensure of Dental Therapists
Presented to
Committee on Health and Human Services
By
Cathleen Taylor-Osborne, DDS, MA
State Dental Director
Kansas Department of Health and Environment

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Chair Representative Hawkins, Vice Chair Concannon and members of the committee. I am Dr. Cathleen Taylor-Osborne, State Dental Director, Kansas Department of Health and Environment. Thank you for this opportunity to provide testimony in support of SB 312 regarding the practice of dental therapy.

This bill affords the ability of a registered dental hygienist a broad scope of practice after graduating from an accredited program approved for the study of dental therapy and fulfilling licensing requirements. The current discussion surrounding this bill that has led to this hearing is that there are many irreversible procedures that are listed as performed under direct supervision of a dentist. This is a change and compromise that has allowed the KDA and the KDHA to support any draft of legislation regarding dental therapists. This is both significant and remarkable. Dentistry in KS has evolved and continues to adapt to changing times and demands. This is evident in the expanded practices of the Extended Care Permit level III dental hygienist. It is evident in that the only regional school of dentistry that accepts Kansas residents as "in state" is UMKC School of Dentistry's acceptance of 20-22 per year as opposed to 10 per year when I attended in the 1990's. The discussions and future of the use of teledentistry is certainly in the forefront of changing diagnosis and treatment planning practices. There are many factors driving the initiative to add another level of licensure in dentistry, not the least of which is the career choices that are being made by graduating dental students because of huge debt, costs of practice, levels of Medicaid reimbursement to name a few. I was a dental hygienist for 15 years before entering dental school and obtaining my dental degree. There is a steep curve of didactic and clinical training that must be accomplished to successfully practice as a general dentist and even more so as a specialist. The path of allowing a dental hygienist to receive additional training and education to practice as a dental therapist under direct supervision for irreversible treatment is both appropriate and desirable to address the access to care issues as well as fulfill the responsibilities that our self-regulated profession has to the public health, welfare and safety.

Additionally, KDHE stands ready to conduct the required data collection, analysis and surveillance as stated, from July 2020-2030.

Thank you for your consideration of Senate Bill 312.