Report From Agency

STATE OF WISCONSIN DENTISTRY EXAMINING BOARD

IN THE MATTER OF RULEMAKING : REPORT TO THE LEGISLATURE

PROCEEDINGS BEFORE THE : CR 24-094

DENTISTRY EXAMINING BOARD :

I. THE PROPOSED RULE:

The proposed rule, including the analysis and text, is attached.

II. REFERENCE TO APPLICABLE FORMS:

N/A

III. FISCAL ESTIMATE AND EIA:

The Fiscal Estimate and EIA is attached.

IV. DETAILED STATEMENT EXPLAINING THE BASIS AND PURPOSE OF THE PROPOSED RULE, INCLUDING HOW THE PROPOSED RULE ADVANCES RELEVANT STATUTORY GOALS OR PURPOSES:

The objective of the proposed rule is to implement the statutory changes from 2023 Wisconsin Act 87, providing for the licensure and regulation of dental therapists in Wisconsin. The rule integrates dental therapists into the current code chapters DE 1 to 16 and creates chapter DE 17. The rule sets the licensure application requirements and continuing education requirements for dental therapists. It clarifies and specifies their scope of practice. It clarifies and specifies the regulations for supervision from a supervising dentist, and the ability of a dental therapist to supervise other staff.

V. SUMMARY OF PUBLIC COMMENTS AND THE BOARD'S RESPONSES, EXPLANATION OF MODIFICATIONS TO PROPOSED RULES PROMPTED BY PUBLIC COMMENTS:

The Dentistry Examining Board held a public hearing on January 8, 2025. The Board received the following comments:

From Matt Crespin, MPH, RDH, FADHA, Executive Director of Children's Health Alliance of Wisconsin:

Good morning Chair and members of the Wisconsin Dentistry Examining Board. I am excited to be here with you today to provide comments regarding the proposed final rule drafts for DE 1 to 17 relating to dental therapists. My name is Matt Crespin and I have the privilege of serving as the executive director for Children's Health Alliance of Wisconsin. For nearly a decade our organization has been leading efforts to advance

dental therapy in Wisconsin and we are excited to see the final rule draft and more excited to begin seeing the implementation of dental therapy in our state. We appreciate the additional clarity given to DE 17.03 (5) regarding the definition of "active practice in this state" as a result of testimony provided at the past hearing on the emergency rule.

The Alliance has long supported workforce models such as dental therapy that has mountains of evidence to support their implementation with no patient safety related concerns. Dental therapists are licensed, highly educated and graduate from CODA accredited institutions. While increasing access to care is not the direct charge of the Dentistry Examining Board, this workforce model also has been proven to increase access to care and lower the burden of preventable dental related emergencies in hospital emergency departments. The Alliance applauds the dental board for focusing on the issues of patient safety through the assurance of accredited education, evidence-based models and those that increase access to safe and quality dental care.

An area of the rules that I'd like to call your attention to is in DE 7.06 (2) (b) regarding a dentist needing to remain on the premise if local anesthetic is administered by a dental hygienist after that procedure was delegated to a dental therapist. Removing these criteria would eliminate an unnecessary barrier to providing ongoing and comprehensive care and does not create any additional risk of safety to the public. This same amendment could be made in DE 15 as it pertains to nitrous oxide administration as this too falls in the scope of a dental therapist. This would require the addition of the term "dental therapist" to DE 7.05 and DE 16.06

Under the current proposed rule DE 17 a dental therapist is able to administer local anesthetic and nitrous oxide under general supervision when a dentist is both on or off premise, if 2,000 clinical hours have been obtained and is part of the collaborative agreement. A dental therapist is also able to supervise a dental hygienist and delegate procedures they have the authority to perform which includes administering local anesthetic and nitrous oxide. If the dental therapist can administer local anesthetic or nitrous when under general supervision and when the dentist is not on the premise it does not seem justified that a dentist needs to be on the premise if the local anesthetic is administered by a dental hygienist that's been delegated this by a dental therapist. Furthermore, as a work around in this example the dental therapist could simply administer the local anesthetic or nitrous for the dental hygienist, but this creates an inefficiency and doesn't change the level of safety provided to the patient.

It is our hope that we can continue to work collaboratively to remove barriers to providing safe and quality care to patients using evidence-based models. While we are excited to see this final rule put into place, we wanted to bring this small but important item to your attention for consideration as to not put up any unintended barriers to providing care. Thank you and I'm happy to answer any questions and can be reached at mcrespin@childrenswi.org or (414) 337- 4562 with any additional follow up questions on this matter.

Response: The Board appreciates the support and collaboration but is unable to make any changes in response to this comment. Section 447.06 (2) (e), Stats., allows for the delegation of the administration of local anesthesia and nitrous oxide to a dental hygienist, but only if the dentist remains on the premises.

Section 447.065 (2), Stats., allows a dental therapist to delegate the administration of local anesthesia and nitrous oxide to a dental hygienist, but only subject to the requirements under s. 447.06 (2) (e). The rule was written in accordance with these statutory requirements.

From Richelle Andrae, Associate Director of Government Relations for Wisconsin Primary Health Care Association:

Chair Bistan and members of the Dentistry Examining Board,

On behalf of Wisconsin's Community Health Centers, thank you for the opportunity to provide feedback on the emergency rules governing Dental Therapy in Wisconsin. Community Health Centers served about 300,000 patients in 2023, including providing 382,000 dental visits for about 163,000 patients in Wisconsin. Improving oral health in under-resourced communities is a primary mission for many Community Health Centers. All Community Health Centers are non-profits and offer services to low-income underand un-insured patients according to a sliding fee scale based on household income, and bill insurance including Medicaid and commercial payers.

We appreciate the DEB's swift action to move the Dental Therapy rules forward and your ongoing dedication to improving the oral health of Wisconsin, balancing safety, access, and quality. WPHCA has already hosted conversations for Community Health Centers interested in integrating Dental Therapists on their teams and made connections with Dental Therapists who are eager to practice in Wisconsin. We support the permanent rule and look forward to continued engagement with the DEB to share success stories and lessons learned as implementation moves forward. Thank you for your continued work to improve safe, high-quality oral health care in Wisconsin. Please reach out to Richelle Andrae, randrae@wphca.org, with any questions.

Response: The Board appreciates the WPHCA's support for the rule and looks forward to working together in the future.

VI. RESPONSE TO LEGISLATIVE COUNCIL STAFF RECOMMENDATIONS:

All Legislative Council comments except comment 2m. have been accepted and incorporated into the proposed rules.

Comment: 2m. In Section 53 of the proposed rule, consider removing the definition in s. DE 17.04 (3) (a) (note). The term is already defined in proposed s. DE 17.01 (1).

Response: The board rejects this comment because the board's desire is to make it clear to the reader that "dental health shortage area" is a defined term, and to make it easier to look up the statutory definition which contains a link with more information.

VII. REPORT FROM THE SBRRB AND FINAL REGULATORY FLEXIBILITY ANALYSIS:

N/A