

## Public Health Dental Hygienist Direct Access States and year(s) direct services were enacted.

1. **Alaska 2008** Sec. 08.32.115 Collaborative Agreement: Dental hygienist may provide services according to the terms of a collaborative agreement. The dentist's presence, diagnosis or treatment plan are not required unless specified by agreement. Care under the agreement can be provided in settings outside of the "usual place of practice" (i.e., private dental office).
2. **Arizona 2004/2015/ 2019** Sec. 32-1281, 32-1289 Affiliated Practice Agreement: Dental hygienist with a written affiliated practice agreement may perform dental hygiene services in specified settings outside the private dental office. The written agreement must be submitted to state board of dental examiners. The affiliated practice dental hygienist shall consult with the affiliated practice dentist before initiating further treatment on patients who have not been seen by a dentist within 12 months of the initial treatment by the dental hygienist.  
Arizona 2006 Sec. 32-1289 Dental hygienist employed by or working under contract or as a volunteer for a public health agency or institution or a public or private school authority before an examination by a dentist may screen patients and apply topical fluoride without entering into an affiliated practice relationship pursuant to this section
3. **Arkansas 2010** Sec. 17-82-7 Collaborative Agreement: Dental hygienist with a Collaborative Care permit I or II who has entered into a collaborative agreement may perform dental hygiene services on children, senior citizens age 65 and older, and persons with developmental disabilities in long-term care facilities, free clinics, hospitals, head start programs, residence of homebound patients, local health units, schools, community health centers, state and county correctional institutions. Dental hygienist must have written agreement with no more than one dentist.
4. **California 1998** Sec. 1922-1931 Registered Dental Hygienist in Alternative Practice (RDHAP): RDHAP may provide services to a patient without obtaining written verification that the patient has been examined by a dentist or physician. If the RDHAP provides services to a patient 18 months or more after the first date that he or she provides services, the RDHAP shall obtain written verification that the patient has been examined by a dentist or physician.
5. **Colorado 1987** Sec. 12-35-124 Unsupervised Practice: There is no requirement that a dentist must authorize or supervise most dental hygiene services. Dental hygienist may also own a dental hygiene practice.
6. **Connecticut 1999** Sec. 20-126l Public Health Dental Hygienist: Dental hygienist with 2 years of experience may practice without supervision in institutions, public health facilities, group homes and schools.
7. **Florida 2011** Sec. 466.003, 466.024 Dental hygienist may provide services without the physical presence, prior examination, or authorization of a dentist, provided that a dentist

or physician gives medical clearance prior to performance of a prophylaxis in “health access settings.” A dentist must examine a patient within 13 months following a prophylaxis and an exam must take place before additional oral services may be performed. Health access settings are: a program of the Department of Children and Family Services, the Department of Health, the Department of Juvenile Justice, a nonprofit community health center centers, a Head Start centers, a federally-qualified health Revised January 2020 [www.adha.org](http://www.adha.org) center, a school-based prevention program or a clinic operated by an accredited dental or dental hygiene program.

8. **Georgia 2017** Article 3 of Chapter 11 of Title 43 General Supervision The requirement of direct supervision shall not apply to the performance of licensed dental hygienists providing dental screenings in settings which include: schools, hospitals and clinics, state, county, local, and federal public health programs, federally qualified health centers, volunteer community health settings, senior centers, and family violence shelters.
9. **Idaho 2004** Sec. 54-903, 54-904 Extended Access Endorsement (EAE): Dental hygienist can provide services in hospitals, long term care facilities, public health facilities, health or migrant clinics or other board-approved settings, if the dentist affiliated with authorizes services.
10. **Indiana 2018** Sec. 1. IC 25-13-1-10 Access Practice Agreement: A dental hygienist may provide preventive dental hygiene services directly to a patient without a prior examination, presence, or authorization of a dentist. A dental hygienist may practice in any setting or facility that is documented in the dental hygienist's access practice agreement.
11. **Iowa 2004** Rule 650-10.5 (153) Public Health Dental Hygienist: Dental hygienist may administer care based on standing orders and a written agreement with a dentist. Services can be administered in schools, Head Start settings, nursing facilities, federally-qualified health centers, public health vans, free clinics, community centers and public health programs.
12. **Kansas 2003/2012** Sec. 65-1456 Extended Care Permit I, II & III (ECP): Dental hygienist may practice without the prior authorization of a dentist if the dental hygienist has an agreement with sponsoring dentist. Examples of settings are schools, Head Start programs, state correctional institutions, local health departments, indigent care clinics, and in adult care homes, hospital long term units, or at the home of homebound persons on medical assistance. The ECP I permit authorizes treatment on Revised January 2020 [www.adha.org](http://www.adha.org) children in various limited access categories, while the EPT II permit is for seniors and persons with developmental disabilities. ECP III permit authorizes dental hygienists to treat a wider range of patients, including underserved children, seniors and developmentally disabled adults and to provide more services than ECP I and II.
13. **Kentucky 2010** 201 KAR 8:562 Public Health Dental Hygienist: A public health dental hygienist shall perform dental hygiene services under the supervision of the governing board of health. Settings are limited to local health departments, public or private educational institutions with affiliation agreement, contracted mobile dental health programs, and public or private institutions under the jurisdiction of a federal, state, or local agency.
14. **Maine 2001** Rule 02 313 Chap. 2. Sec. 3 Public Health Dental Hygienist: Dental hygienist may provide services in a public or private school, hospital or other

nontraditional practice setting under a public health supervision status granted by the Revised January 2020 [www.adha.org](http://www.adha.org) dental board on a case-by-case basis. The dental hygienist may perform services rendered under general supervision. The dentist should have specific standing orders and procedures to be carried out, although the dentist need not be present when the services have been provided. A written plan for referral or an agreement for follow-up shall be provided by the public health hygienist recording all conditions that should be called to the attention of the dentist. The supervising dentist shall review a summary report at the completion of the program or once a year

15. **Massachusetts 2009** Chap. 112, Sec. 51. Public Health Dental Hygienist: Dental hygienist may provide services without the supervision of a dentist in public health settings including, and not limited to, hospitals, medical facilities, schools and community clinics. Prior to providing services, a public health dental hygienist must have a written collaborative agreement with a local or state government agency or institution, or licensed dentist that states the level of communication with the dental hygienist to ensure patient health and safety. Public health dental hygienists shall provide patients with a written referral to a dentist and an assessment of further dental needs.
16. **Michigan 2005** Sec. 333.16625 PA 161 Dental Hygienist: Dental hygienist with grantee status can practice in a public or nonprofit entity, or a school or nursing home that administers a program of dental care to a dentally underserved population. Collaborating dentist need not be present for or authorize treatment, but dental hygienist must have continuous availability of direct communication with a dentist to establish emergency protocol and review patient records. Requirements: Dental hygienist must apply to the state department of community health for designation as grantee health agency.
17. **Minnesota 2001/2017** Sec. 150A. 10, Subd. 1a Collaborative Practice: A Collaborative practice dental hygienist may be employed or retained by a health care facility, program, or nonprofit organization to perform the dental hygiene services without the patient first being examined by a licensed dentist. Practice setting can be a hospital; nursing home; home health agency; group home serving the elderly, disabled, or juveniles; state-operated facility licensed by the commissioner of human services or the commissioner of corrections; and federal, state, or local public health facility, community clinic, tribal clinic, school authority, Head Start program, or nonprofit organization that serves individuals who are uninsured or who are Minnesota health care public program recipients.
18. **Missouri 2001** Sec. 332.311.2 Public Health Dental Hygienist: Dental hygienist may provide services without supervision in public health settings to Medicaid-eligible children and can be directly reimbursed.
19. **Montana 2003/2017** Sec. 37-4-405 Public Health Dental Hygienist/Limited Access Permit (LAP): Public Health Supervision means the provision of limited dental hygiene preventative services without the prior authorization or presence of a licensed dentist in a public health facility which includes: federally qualified health centers; federally funded community health centers, migrant health care centers, or programs for health services for the homeless; nursing homes; extended care facilities; home health agencies; group homes for the elderly, disabled, and youth; head start programs; migrant worker facilities; local public health clinics and facilities; public institutions under the department of public

health and human services; mobile public health clinics; and other public health facilities and programs identified by the Montana Dental Board.

20. **Nebraska 2007** Sec. 38-1130 Public Health Dental Hygienist: The Department of Health may authorize an unsupervised dental hygienist to provide services in a public health setting or a health care or related facility.
  21. **New Hampshire 1993** Rule 302.02(d), 402.01(d) Public Health Supervision: Dental hygienist may treat patients in a school, hospital, institution or residence of a homebound patient. Supervising dentist must authorize dental hygienist to provide services but need not be present for care.
  22. **New Hampshire 2012** Sec. 317-A:21-e Certified Public Health Dental Hygienist: Dental hygienist may practice in a school, hospital, or other institution, or for a homebound person without the dentist having to be present, provided the dentist has reviewed the records once in a 12-month period. Dental Hygienists may perform any procedure that is within the scope of practice that has been authorized under public health supervision.
  23. **New Mexico 1999/2011** Sec. 16.5.17 Collaborative Practice: Revised January 2020 [www.adha.org](http://www.adha.org) Dental hygienist can practice in any setting with collaborative agreement and can own or manage a collaborative dental hygiene practice. Dental hygienist must enter into a written agreement with one or more collaborative dentist(s) which must contain protocols for care. Dental hygienist must refer patients for annual dental exam
  24. **New York 2013** Sec. 6606 Collaborative Practice: A collaborative arrangement is an agreement between a registered dental hygienist working for a hospital and a licensed and registered dentist who has a formal relationship with the same hospital.
  25. **Nevada 1998** Sec. 631.287 Public Health Dental Hygienist: Dental hygienist may obtain approval to work as public health dental hygienists in schools, community centers, hospitals, nursing homes and such other locations as the state dental health officer deems appropriate without supervision.
  26. **Ohio 2010/2014/2017** Sec. 4715.363 Oral Health Access Supervision Permit Program: Dental hygienist who possess an oral health access supervision permit may provide dental hygiene services through a written agreement with a dentist in public health settings including, and not limited to a health care facility, state correctional institution, residential facility, school, shelter for victims of domestic abuse or runaways, foster home, non-profit clinic, dispensary or mobile dental clinic. Prior to providing services, a dental hygienist with an oral health access supervision permit must have a written agreement with a dentist, who possesses an oral health supervision permit, that states the dentist has evaluated the dental hygienist's skills and the dentist has reviewed and evaluated the patient's health history. The dentist need not be present or examine the patient before the dental hygienist may provide care. The collaborating dentist must perform a clinical evaluation of the patient before the dental hygienist may provide subsequent care. The evaluation may be done using electronic communication.
- Oregon 1997 Sec. 680.200, Rule 818-035-0065 Limited Access Permit (LAP): Dental hygienists who have obtained a limited access permit (LAP) may initiate unsupervised services for patients in a variety of limited access settings such as extended care facilities, facilities for the mentally ill or disabled, correctional facilities, schools and pre-schools, medical offices or offices operated or staffed by a nurse practitioner midwives or

physicians assistants, and job training centers. Dental hygienist must refer the patient annually to a licensed dentist available to treat the patient. Sec. 680.205 Expanded Practice Dental Hygienist (EPDH) Replaces Limited Access Permit. Adds services to patients below federal poverty level and other settings approved by the board to EPDH practice settings. Adds limited prescriptive authority, local anesthesia, temporary restorations and dental assessments to unsupervised EPDH scope if EPDH has agreement with a dentist. Requires insurance reimbursement of EPDHs.

27. **Oregon 1997** Sec. 680.200, Rule 818-035-0065 Limited Access Permit (LAP): Dental hygienists who have obtained a limited access permit (LAP) may initiate unsupervised services for patients in a variety of limited access settings such as extended care facilities, facilities for the mentally ill or disabled, correctional facilities, schools and pre-schools, medical offices or offices operated or staffed by a nurse practitioner midwives or physicians assistants, and job training centers. Dental hygienist must refer the patient annually to a licensed dentist available to treat the patient.
28. **Pennsylvania 2007** Sec. 2 (Definitions), Sec. 11.9 Public Health Dental Hygiene Practitioner: Dental hygienists who are certified as public health dental hygiene practitioners may provide care in a variety of public health settings without the supervision or prior authorization of a dentist.
29. **Rhode Island 2015** Sec. 5-31.1-39 Public Health Hygienists: Any public health dental hygienist may perform dental hygiene procedures in a public health setting, without the immediate or direct supervision or direction of a dentist. Public health settings includes, but are not limited to, residences of the homebound, schools, nursing home and long-term care facilities, clinics, hospitals, medical facilities or community health centers.
30. **South Dakota 2011** Rules 20:43:10 Dental hygienist may provide preventive and therapeutic services under collaborative supervision of a dentist in a school, nursing facility, Head Start program, non-profit mobile dental clinic, community health center or government program.
31. **Tennessee 2013** Sec. 63-5-109 Dental hygienist may apply dental sealants or topical fluoride to the teeth of individuals in a setting under the direction of a state or local health department, without requiring an evaluation by a dentist prior to such application, under a protocol established by the state or a metropolitan health department.
32. **Utah 2015** Sec. 58-69-801 Public Health Dental Hygienist: A dental hygienist may treat patients in specified public health settings pursuant to a written agreement with a dentist. The settings include a homebound patient's residence, a school, a nursing home, an assisted living facility, a community health center, a federally qualified health center and a mobile dental health program that employees a dentist
33. **Vermont 2008/2019** § 582 & 624 Public-Health Hygienists: Dental hygienist may provide services in out-of-office settings under general supervision agreement with a dentist, including residences, schools, nursing home and long-term care facilities, clinics, hospitals, medical facilities, community health centers licensed or approved by the Department of Health, Head Start programs, and other locations deemed appropriate. The agreement authorizes the dental hygienist to provide services, agreed to between the dentist and the dental hygienist. The agreement does not require physical presence of the dentist, but it stipulates that the supervising dentist review all patient records



34. **Virginia 2009/2016/2017/2019** Sec. 54.1-2722 Remote Supervision: Remote Supervision means that a supervising dentist is accessible and available for communication and consultation with a dental hygienist during the delivery of dental hygiene services, but such dentist may not have conducted an initial examination of the patients who are to be seen and treated by the dental hygienist and may not be present with the dental hygienist when dental hygiene services are being provided.
35. **Washington 1984/2009** Sec. 18.29.056 Unsupervised and Off-Site Supervision: Dental hygienist may be employed, retained or contracted by health care facilities to perform authorized dental hygiene services without supervision, provided the dental hygienist refers patient to a dentist for dental planning and treatment. Health care facilities are limited to hospitals; nursing homes; home health agencies; group homes serving the elderly, individuals with disabilities and juveniles; state-operated institutions under the jurisdiction of the department of social and health services or the department of corrections; and federal, state, and local public health facilities, state or federally funded community and migrant health centers and tribal clinics. Specifically in senior centers, dental hygienist may provide limited dental hygiene services with under the “off-site supervision” of a dentist.
36. **West Virginia 2008** Sec. 5-1-8.5 Public Health Dental Hygienist: Dental hygienist may provide care in hospitals, schools, correctional facilities, jails, community clinics, long-term care facilities, nursing homes, home health agencies, group homes, state institutions under the Department of Health and Human Resources, public health facilities, homebound settings and accredited dental hygiene education programs. Dentist must authorize dental hygienist to provide care but need not be present or have previously seen patient.
37. **Wisconsin 2007/2017** Sec. 447.06 In settings other than a dental office, the authorization and presence of a licensed dentist is not required for the practice of dental hygiene. Under prior law, the authorization and presence of a licensed dentist was required in most cases. In addition to a dental office setting, a dental hygienist may practice dental hygiene in any of the following settings, in accordance with conditions specified in the statutes: • Federal, state, county, or municipal correctional or detention facilities and facilities established to provide care for terminally ill patients; • Charitable institutions open to the general public or members of a religious sect or order; • Nonprofit home health care agencies; • Nonprofit dental care programs serving primarily indigent, economically disadvantaged, or migrant worker populations; • Nursing homes, community-based residential facilities, and hospitals. • Facilities that are primarily operated for the purpose of providing outpatient medical services; • Adult family homes; • Adult day care centers; and • Community rehabilitation programs. Community rehabilitation program is defined to mean a nonprofit entity or governmental agency providing vocational rehabilitation services to disabled individuals to maximize the employment opportunities of such individuals.
38. **Wyoming 2017** Rules Chapter 7, Section 5(c) Public Health Dental Hygienist The Wyoming Dental Board adopted regulations allowing the public to directly access limited dental hygiene services from a Public Health Dental Hygienist. A public health dental hygienist may provide public health services at facilities to include, but not limited to: • federally funded health centers and clinics • nursing homes • extended care facilities •

## Direct Access to Care from DH

home health agencies • group homes for the elderly, disabled and youth • public health offices • Women, Infants, and Children (WIC) • Head Start programs • child development programs • early intervention programs • migrant work facilities • free clinics • health fairs • public and private schools • state and county correctional institutions • community school-based prevention programs • public health vans

### Resources:

[https://www.adha.org/resources-docs/7513\\_Direct\\_Access\\_to\\_Care\\_from\\_DH.pdf](https://www.adha.org/resources-docs/7513_Direct_Access_to_Care_from_DH.pdf)