Washington State House of Representatives Office of Program Research

BILL ANALYSIS

Community Development, Housing & Tribal Affairs Committee

HB 2466

Brief Description: Concerning Indian tribes and dental health aide therapy services.

Sponsors: Representatives Appleton, Sawyer, Tharinger, Cody and Santos.

Brief Summary of Bill

- Authorizes tribes, tribal organizations, or certain federal programs to certify, train, and employ dental health aides to serve tribal populations.
- Authorizes a dental health aide to practice in a setting operated by an Indian health program or tribal non-profit organization.
- Requires the Health Care Authority to coordinate Medicaid funding for dental health aide services.

Hearing Date: 1/23/14

Staff: Sean Flynn (786-7124).

Background:

Dentistry Practice in Washington.

The state requires a license for any person to practice dentistry in the state. The Dental Quality Assurance Commission administers the dentistry licensing program. Licensing requirements include graduation from an approved dental school and passing an examination approved by Commission. The Commission also regulates the practice of licensed dentists. The unlawful practice of dentistry generally is a gross misdemeanor offense.

The state also requires a license or certification for a variety of providers who assist licensed dentists, including for example: dental hygienists, dental assistants, expanded function dental auxiliaries, and dental anesthesia assistants. These providers perform a variety of functions

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regulated by a professional commission or the Department of Health (DOH). Each practice requires certain specific education and competency requirements.

Community Health Aide Program.

The Indian Health Service (IHS) is a federal agency responsible for providing federal health services to American Indians and Alaska Natives. The IHS is authorized under the Indian Health Care Improvement Act (IHCIA) to develop and operate a Community Health Aide Program (CHAP) in Alaska that serves rural native communities. The CHAP establishes a certification process for community health aides who provide health care, health promotion and disease prevention in rural Alaska Native communities.

Dental Health Aide Program.

In 2001, the IHS established the Dental Health Aide Program (DHAP) as part of the CHAP to address the shortage of licensed dentists in the remote locations where rural Native Alaska communities are located. The DHAP involves training and certification for dental health aides in four categories: primary dental health aides; expanded function dental health aides; dental health aide hygienists; and dental health aide therapists (DHAT).

DHATs are certified through the DHAP to practice without the direct supervision of a licensed dentist for procedures such as oral exams, preventative dental services, simple restorations, stainless steel crowns, and x-rays. DHATs may perform extractions and root canals only after consultation with a licensed dentist who determines the procedure is a medical emergency. DHAT certification requires a high school diploma, graduation from a two-year educational program and a 400-hour clinical preceptorship under the supervision of a dentist.

DHAT and State Licensing.

The DHAP is a federal certification program, which authorizes DHATs to practice only within the rural Native Alaska communities served through the CHAP. The state of Alaska does not have a DHAT license

Under the IHCIA, the IHS is authorized to establish a national CHAP. Such an expansion expressly excludes DHAT from services covered under a program unless DHAT services are authorized under state law to provide such services in accordance with state law.

Washington does not have a license for a DHAT. State law does exempt dentistry licensing requirements for the practice of dentistry in the discharge of official duties of dentists in the United States federal services on federal reservations, including the Armed Forces, Coast Guard, Public Health Service, Veterans' Bureau, or Bureau of Indian Affairs.

Medicaid participation.

The state medical assistance program, which provides health care for eligible low-income residents, is managed by the Health Care Authority (Authority) in coordination with the federal Medicaid program. The Authority determines eligibility and care provided in compliance with federal Medicaid standards.

Medical costs reimbursable through Medicaid must be provided by a licensed practitioner. The Authority may attempt to amend the state medical program or seek a waiver from a federal requirement with approval from the Centers for Medicare and Medicaid Services (CMS).

Summary of Bill:

A federally recognized tribe, tribal organization or urban Indian organization is authorized to train, employ or contract with a Dental Health Aide, including a DHAT (collectively DHA), who is certified by a federal community health aide certification board (CHACB) or an Indian tribe. In order to certify, a tribe must adopt standards equivalent or higher than a CHACB regarding curriculum, training, scope of practice, continuing education and supervision requirements.

A federally recognized Indian tribe, tribal organization or urban Indian organization is authorized to supervise a DHA who is trained, employed or contracted to perform services. A dental health aide or DHAT may only perform procedures permitted by standards adopted by a CHACB or Indian tribe that has equivalent or higher standards than a CHACB. A DHA is subject to limitations under the IHCIA or any standing orders written by a supervising dentist.

A DHA may only perform services in a setting operated by an Indian health program, funded by a tribe or the IHS, or an urban Indian organization, managed as a non-profit corporation.

The Authority is directed to work with CMS to ensure dental health aide services are eligible for maximum federal funding up to 100 percent.

Appropriation: None.

Fiscal Note: Requested on 1/17/14.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.