

May 10, 2022



Sen. Jim Abeler	Rep. Tina Liebling
Sen. Paul Utke	Rep. Jennifer Schultz
Sen. Michelle Benson	Rep. Dave Pinto
Sen. Mark Koran	Rep. Aisha Gomez
Sen. John Hoffman	Rep. Tony Albright

Dear HHS Conferees:

As leaders within the Minnesota Dental Hygienists' Association (MnDHA), we want to request support for a dental hygiene proposal included in the Senate HHS bill that will increase access to dental care within Minnesota Health Care Programs (MHCP). HF3847/SF3963 authored by Rep. Liz Reyer and Sen. Dave Senjem makes small changes to the collaborative dental hygiene practice (CDHP) program which is highly underutilized here in Minnesota. **Nothing in the proposal changes the scope of practice for a collaborative practice hygienist but rather seeks to remove administrative barriers and improve data collection and evaluation. The Board of Dentistry is supportive of removing these administrative barriers as well and has notified the Chairs that there is no scope of practice change in the legislation.**

CDHP was established in Minnesota Statute in 2001, enabling licensed dental hygienists to deliver dental care outside of clinics and in community settings without the presence of a dentist, but under a written agreement with a Minnesota licensed dentist. Unfortunately, because of the administrative barriers to this program, it is underutilized but when instituted within a community, has a dramatic impact on the oral health of our communities, specifically kids. Recent articles in the Star Tribune and MinnPost prove the impact it can have in underserved populations by having dental hygienists provide health education, preventive, educational, and therapeutic services. A hygienist can then triage patients to restorative procedures when needed and link the patient to a provider willing to see MHCP enrollees.

In May 2021, a report by the Minnesota Department of Health, Office of Rural Health and Primary Care, and the Oral Health Program through funding from the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) cited CDHP as a solution for rural Minnesota. A 2019 report by The Network for Public Health Law validated local stakeholders' view that collaborative dental hygiene practice is

still relatively unknown and misunderstood as an under-leveraged workforce model for opening access to dental care in Minnesota communities.

These proposed changes would provide needed access to care for patients outside of bricks and mortar health dental clinics. Our profession looks at oral healthcare through a public health lens. Offering prevention and education in community settings within MHCP programs under a collaborative agreement with a dentist is essential to reducing the disproportionate disease burden in publicly insured populations.

We respectfully request your support for the changes to CDHP and ask that the House accept the Senate position. Please reach out to us if we can provide further information. Also, below are two hyperlinks to recent articles about the successes of CDHP in Minnesota communities.

1. [School-based dental clinics brings smiles to hundreds of kids in southeastern MN](#)
2. [MinnPost March 4, 2022](#)

Sincerely,

Carol Dahlke, LDH – President, MnDHA

Colleen Brickle, LDH – Dean of Health Sciences, Normandale Community College

Jeanne Anderson, LDH– MnDHA Advocacy Council Chair

Deb Jacobi, LDH – Apple Tree Dental

Clare Larkin, LDH – Normandale Community College and member of MN Dental Home advisory work group

Cc:

Erin Bailey, Executive Director of the Minnesota Children’s Cabinet

Prasida Khanal, MPH, BDS – State Oral Health Director MDH

Commissioner Jodi Harpstead – DHS

Dr. Sheila Riggs, U of M School of Dentistry

Rep. Liz Reyer

Sen. Dave Senjem