

Overview of Enrolled House Bill 2528: Licensing Dental Therapists in Oregon

History

A bill to license dental therapists was first brought to Oregon Legislature in 2011, which resulted in the creation of dental therapy pilot projects. Funding to administer the pilot projects was included in state budget in 2015. Two dental therapy pilot projects were approved in 2016 and 2020.

[Project #100](#) educates and employs dental therapists in tribal communities. [Project #300](#) provides additional education in the dental therapy scope of practice for dental hygienists.

Based on the success of the pilot projects, a bill was introduced by Sen. Monnes Anderson and did not pass in the short 2020 legislative session. The bill was then examined by a multi-stakeholder workgroup and the resulting HB 2528 was sponsored by Rep. Tawna Sanchez in the 2021 session.

[HB 2528](#) passed with bipartisan support in the Senate 20-9 and House 45-11, and signed into law by Governor Kate Brown on July 19, 2021.

What does the bill do?

Licensing

Oregon Board of Dentistry (OBD) shall issue a license to practice dental therapy to qualified applicants:

- Before 2025, must graduate from an education program, a CODA accredited out-of-state education program, and sufficiency of programs will be determined by the OBD.*
- After 2025 education programs must be CODA accredited, but grandfathers in applicants that are or were participants of a dental pilot project.
- Passes a written, laboratory or clinical examination to test the professional knowledge and skills of the applicant
- No preceptorship required for licensure
- Allows federally certified dental health aide therapist or tribally authorized dental therapist in a clinic operated by the Indian Health Service to practice without a state license.

Collaborative Agreements

Requires collaborative agreement with supervising dentist(s) that is specific to supervision for each procedure, any limits on scope, consultation on irreversible procedures for patients with severe systemic disease. Supervising dentists can supervise up to 3 dental therapists.

* This section may need further interpretation in rules process

Practice settings

A dental therapist shall dedicate at least 51 percent of the dental therapist's practice to patients who represent underserved populations, as defined by the Oregon Health Authority (OHA) by rule, or patients located in dental care health professional shortage areas, as determined by OHA.

Scope and Supervision

Most services allowed in the dental therapy scope of practice are under general supervision, with the following services under indirect (dentist must be in building):

- Placement of temporary restorations
- Fabrication of soft occlusal guards
- Tissue reconditioning and soft relines
- Tooth reimplantation and stabilization
- Recementing of permanent crowns
- Pulpotomies on primary teeth
- Simple extractions of: (A) Erupted posterior primary teeth; and (B) Permanent teeth that have horizontal movement of greater than two millimeters or vertical movement and that have at least 50 percent periodontal bone loss
- Brush biopsies
- Direct pulp capping on permanent teeth

Procedures not in scope:

- Use of nitrous oxide
- Placement of space maintainers
- Direct pulp capping on primary teeth

Next Steps

- Oregon Board of Dentistry will convene a committee to promulgate rules to implement the law. OBD is expected to determine next steps at August 20 board meeting
- While OBD is required to consult with dental therapists and organizations representing dental therapists, they have discretion on how that happens.
- Members of the [Oregon Dental Access Campaign](#) are requesting a formal Rules Advisory Committee be formed, with representation from diverse stakeholders.

For more information:

Pam Johnson, Northwest Portland Area Indian Health Board

pjohnson@npaihb.org, 206-755-4309