SENATE BILL REPORT SHB 1411

As Passed Senate, April 4, 2017

Title: An act relating to dental licensure through completion of a residency program.

Brief Description: Concerning dental licensure through completion of a residency program.

Sponsors: House Committee on Health Care & Wellness (originally sponsored by Representatives Cody, DeBolt, Riccelli, Caldier, Jinkins and Appleton).

Brief History: Passed House: 2/27/17, 96-0.

Committee Activity: Health Care: 3/09/17, 3/20/17 [DP].

Floor Activity:

Passed Senate: 4/04/17, 49-0.

Brief Summary of Bill

• Changes requirements for dental residencies, which may be completed in lieu of examination for applicants for dental licensure.

SENATE COMMITTEE ON HEALTH CARE

Majority Report: Do pass.

Signed by Senators Rivers, Chair; Becker, Vice Chair; Cleveland, Ranking Minority Member; Kuderer, Assistant Ranking Minority Member; Bailey, Conway, Keiser, Miloscia, Mullet, O'Ban and Walsh.

Staff: Evan Klein (786-7483)

Background: <u>Dentist Licensure</u>. Dentists are licensed and disciplined by the Dental Quality Assurance Commission (DQAC). In order to be licensed, a dentist must:

- submit proof of graduation from a dental college, school, or dental department of an institution approved by the DQAC;
- submit a recent picture; and
- pass an examination.

<u>Dental Examination</u>. An applicant for licensure as a dentist may forego the examination requirement if the applicant completes a postdoctoral dental residency program accredited by

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the Commission on Dental Accreditation of the American Dental Association (Commission) and the DQAC. The residency must:

- last from one to three years;
- be located in a community health clinic that serves predominantly low-income patients or that is located in a dental care health professional shortage area; and
- include an outcome assessment evaluation that assesses the resident's competence to practice dentistry.

<u>Dental Residencies.</u> Washington's residency programs vary in size and location, ranging from hospital-based programs in Seattle to community health center-based programs in rural areas of the state. Residency programs typically last one year, from the beginning of July to the end of June, and are filled by recent dental school graduates. Residency training programs are also available in a variety of specialty areas, including Oral and Maxillofacial Surgery, Oral and Maxillofacial Radiology, Pediatric Dentistry and the General Practice Residency (GPR).

The DQAC must develop criteria, consistent with the standards of the Commission, for community clinics to use when sponsoring students in a residency program.

Summary of Bill: An applicant for licensure as a dentist may forego the examination requirement if the applicant completes a general practice, pediatric, or advanced education in general dentistry residency program in Washington, instead of a postdoctoral dental residency program. The requirement that the residency program be approved by the DQAC is eliminated.

The program must be at least one year long, instead of between one and three years long. The program must serve predominantly low-income patients, but no longer must be located in a community health clinic or a dental care health professional shortage area. The requirement that the program include an outcome assessment evaluation is eliminated. The requirement that the DQAC develop criteria for community clinics is eliminated.

Appropriation: None.

Fiscal Note: Available.

Creates Committee/Commission/Task Force that includes Legislative members: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony: PRO: Current statutes only allow an exemption for dental residents in community health centers but exclude residents at hospitals. Hospital based training is very advanced. This bill allows dentists to attain licensure who complete a dental residency program in any setting. Co-locating dentists with other medical practitioners in their training helps dentists round out their training. This bill would not undercut community clinic residencies, but may instead allow hospitals to collaborate with community health centers for more residency programs. There is a big movement in the American Student Dental Association to remove the exam entirely. If a dentist fails a practical board exam, then a patient may need but may not get follow-up treatment.

Residency training includes rigid competencies, and can hold dentists to a higher standard than those who merely pass an exam after dental school.

Persons Testifying: PRO: Dr. Amy Winston, Swedish Medical; Dr. Devin Sawyer, Providence Health and Services; Trent House, Providence Health & Services.

Persons Signed In To Testify But Not Testifying: No one.

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