

3228

Ms. Ariel O'Malley, Counsel
State Board of Dentistry
Department of State
PO Box 69523
Harrisburg, PA 17106-9523



May 14, 2019

Attorney Ariel O'Malley, Esquire

Dear Attorney,

I'm a dentist with clinical experience 35 years in periodontics and prosthodontics, and teaching dental and graduate students in my specialties at an American university. The last 17 years in private practice, I do not employ any hygienists. Over the years, I've worked with scores of assistants at different levels of training.

I am writing this letter to express my strong opposition to Public Health Dental Hygiene Practitioners' (PHDHPs) expansion of site locations in accordance with Act 60 of 2015.

If the PHDH setting is a medical office the public may wrongly assume that PHDH's are similar to the likes of a "nurse practitioner" - not close in education, accountability or experience. The public is not being served without a comprehensive oral evaluation and diagnosis by a licensed dentist. Why should an unsuspecting dental patient visit a dentist, if an untrained eye misses oral disease and continues to reassure that patient year after year? The annual physical in-person evaluation of the patient by a licensed dentist must not be ignored.

Approving the PHDH's proposal for expansion of practice locations will create a statewide workforce conflict similar to the medical practitioners.

- The proposal sets the stage for two workforce groups to fight for reimbursement from the same pool of resources instead of seamlessly working together in the same direction. That was never the role or intent of the PHDHP.
- The dental community and existing dental hygiene community will view the PHDHPs in a medical office as fee-for-service competitors and will resist progress and change without better dialogue and careful modification to focus on vulnerable populations and to protect the comprehensive care model and dental home.

Early detection and treatment is usually the crucial factor in healthcare. Is such an omission negligence? Moreover, the many medical doctor's MD's, I've worked with will readily admit their scant education of dental conditions. On the other hand, a licensed dentist is accountable for all dental patients under their care and are legally compelled to abide by the dental code and the code of ethics. The state Board can avoid personal jeopardy for those most in need, those patients who have avoided the dental office far too long. It's an imprudent plan that the sickest patients will be not treated by the most qualified personnel.

Instead I ask the board to look a possible alternative:

Pennsylvania's "Expanded Function Dental Assistants" EFDAs, do have sufficient training and accountability to the "dentist of record", to ensure proper patient evaluation and care. EFTA's have proven highly effective, but some say EFTA's are greatly underutilized. Here may be part of the answer to the perceived "barrier to dental care" for the many in need.

Please protect the public and ensure hands that the practice of PHDH on patients at risk be at a minimum of an annual evaluation by a dentist licensed in Pennsylvania.

Thank you,

Matthew A. Zale, dmd
Lic. #DS 024492 L
241 Main St., ste 203
Dickson City, PA 18519