

1275 S. Cedar Crest Blvd Ste. 3B Allentown, Pa 18103 (610) 395-6965 Fax-(610) 841-9971 www.risleydental.com

Dr. Jack Erhard, Chair Pennsylvania State Board of Dentistry P.O. Box 2649 Harrisburg, PA 17105-2649



Dr. Erhard,

I write to you with serious concerns about Draft Proposed Regulation 49 Pa. Code @ 33.205b. It is my understanding that the SBOD will discuss this at its upcoming July meeting. I feel that the expansion of PHDHP independent practice to the sites addressed in the draft proposed regulation jeopardizes patient safety while perpetuating a tiered system of care that provides limited additional access to address unmet dental needs.

My name is Jennifer Risley and I am a general dentist in Allentown, Pa. I graduated from Temple University's School of Dentistry in 2006. I attended a General Practice Residency at the Lehigh Valley Health Network in Allentown after dental school. During my residency I was able to treat many patients with low to no income. I took over my father's practice in 2008 and now employ 6 people. Our practice is growing and I plan to hire another employee soon.

I have always felt a need to give back to my community and decided to volunteer my time as an attending Dentist where I completed my residency. Once a month I work at the dental clinic. Here I can make sure our underserved population are receiving comprehensive dental care. I this situation we can provide outstanding care for little to no cost for the patient.

I have fears about the Proposed Regulation 49 Pa. Code @33.205b. My husband who is a board-certified emergency medicine physician received less than 6 weeks in medical school on oral health. He is not qualified to perform a dental exam to the extent that I can, nor is he able to appropriately diagnose and treat patients with dental disease. I am concerned that with this Draft only partial dental care will be provided by unsupervised hygienists in physician's offices and that leads to inappropriate care.

Please take the following considerations in your discussions:

- Expanding practice to physicians' offices does not necessarily provide additional access to care. Physicians can locate their practice where they see fit, including high-access or affluent areas of the state.
- In-home treatment, especially for the medically compromised with health complications, is inherently risky. It should not be attempted by someone without emergency care training, Basic Life Support certification, and portable life-saving equipment.

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• There is no consideration or statement of who will be held civilly liable for malpractice or if the standard of care is not met for services provided by a PHDHP in a physician's office or child-care setting. Additionally, there is no statement regarding the supervisory responsibilities for physicians.

I recommend the State Board of Dentistry take the opportunity to amend these regulations with the goal of ensuring patient safety while fulfilling the original goal of PHDHP treatment, which is getting more people into a dental home.

Thank you,

Jennifer K. Risley DMD