March 15th, 2019

Office of the General Counsel

Department of Public Health

250 Washington Street

Boston, Massachusetts 02108

**VIA E-MAIL:** [**Reg.Testimony@state.ma.us**](mailto:Reg.Testimony@state.ma.us)

Dear Board of Registration in Dentistry,

This letter is sent on behalf of the American Association of Orthodontists (“AAO”) and its hundreds of Massachusetts members to provide feedback on the proposed revisions to Massachusetts’ 234 CMR 5.00, specifically 5.03 Dental Specialties (hereinafter referred to as “specialty laws”). We appreciate the opportunity to provide this feedback and make comments. As an initial matter, the AAO does not support the removal of language specifying that a dentist must be licensed “in the Commonwealth” (*e.g.* Sec. 5.02(2), (3)(a)) to the extent that removal means dentists under 234 CMR 5.00 do not need to be licensed in the Commonwealth. Likewise, the AAO does not support the removal of “licensed” from Section 5.12.

In addition, and as for the specialty laws, the AAO supports regulations that require those who are advertising as “specialists” to have successfully completed a post-doctoral program in a specialty area of dentistry consisting of at least two full-time years and which is accredited by an accreditation agency that is recognized by the U.S. Department of Education (i.e. CODA). CODA is currently the only nationally-recognized accrediting body for dentistry and its related dental fields, receiving its accreditation authority from the acceptance of all stakeholders within the dental community and recognition by the United States Department of Education (“U.S. DOE”). There are multiple states that have adopted this educational and accreditation requirement, and language used in Louisiana is below and highlighted as an example. The AAO believes that this type of language is in the best interests for the health and safety of Massachusetts patients.

**The AAO’s response to Proposed Rule 234 CMR 5.03.**

Although pleased with the Board’s requirement that a dentist may advertise as a specialist in a particular area of practice only if the dentist has completed a specialty education program approved by the ADA and the Commission on Dental Accreditation or the Commission on Dental Accreditation of Canada, the AAO believes the Board should not include provisions for accepting other specialty boards or organizations that are not recognized by the Commission on Dental Accreditation or the Commission on Dental Accreditation of Canada. A CODA accreditation standard, which is backed by the U.S. DOE, best assures Massachusetts citizens that a dentist who truthfully holds himself or herself out as a specialist has met high standards for education and training. Allowing a dentist to advertise as a "specialist" without completing a multi-year accredited program backed by the U.S. DOE, risks diluting Massachusetts’ specialty laws and allowing certain providers, who do not have years of supervised clinical and didactic training and/or who have not satisfied extensive criterion, to advertise on par with those providers who have long-term, comprehensive education and training through CODA accredited programs. Such dilution threatens the health and safety of Massachusetts patients by obscuring important distinctions between dental professionals as well as their respective educational and training backgrounds.

It is important to remember that out of the 13 groups most involved with this issue (the 9 ADA recognized specialties and 4 from the American Board of Dental Specialties (“ABDS”)), 12 have CODA accredited programs and would have members able to satisfy a CODA accreditation requirement. The only group whose members cannot currently satisfy a CODA accreditation standard are the implantologists. Revising the rule solely for the implantologists and allowing dentists who have graduated from non-CODA accredited programs to advertise as “specialists,” does not seem to be in the best interests of Massachusetts patients. The AAO is opposed to dentists with less education and training being able to advertise on the same level or in the same manner as those who have graduated from accredited programs that receive accreditation from an agency recognized by the U.S. DOE, as the AAO believes that is not in the best interest of patients’ health and safety. As such, the AAO believes the proposed Section (1)(b) should be stricken from the proposed changes to 234 CMR 5.03.

**Examples of States with Current Rules that are in Line with the AAO’s Proposed Language**

**Louisiana: §122 C (1)**.The board finds that terms implying that a dentist is a specialist in some field of dentistry are terms of art indicating that the dentist has completed an accredited post-doctoral educational program in that field of at least two years. Therefore, ***a licensed dentist seeking specialty recognition must have successfully completed a post-doctoral program in a specialty area of dentistry consisting of at least two full-time years and which is accredited by an accreditation agency that is recognized by the United States Department of Education.*** (emphasis added)

**North Carolina: 21 NCAC 16P .0105 (b)** It shall be false or misleading for a dentist to hold himself or herself out to the public as a specialist, or any variation of that term, in a practice area unless the dentist: (1) has completed a qualifying postdoctoral educational program in that area as set forth in Paragraph (c) of this Rule; or (2) holds a current certification by a qualifying specialty board or organization as set forth in Paragraph (d) of this Rule. (c) For purposes of this Rule, a "qualifying postdoctoral educational program" is a ***post-doctoral advanced dental educational program accredited by an agency recognized by the U.S. Department of Education (U.S. DOE)*** (emphasis added). ***(d)*** ***http://reports.oah.state.nc.us/ncac/title%2021%20-%20occupational%20licensing%20boards%20and%20commissions/chapter%2016%20-%20dental%20examiners/subchapter%20p/21%20ncac%2016p%20.0105.pdf***

Thank you for your work on this issue and your consideration of these comments.  Please do not hesitate to contact me at [smurphy@aaortho.org](mailto:smurphy@aaortho.org) or 314-292-6523 if you have any questions regarding this issue.

Sincerely,

*Sean*

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