March 15, 2019

Carolyn Wehler, RDH, MPH

115 North Shore Dr.

Stow, MA 01775

To whom it may concern;

I am writing to comment on BORID 234 CMR 5.00, the proposal to require all Public Health Dental Hygienists (PHDH) to carry a Permit M in order to practice. I hold my master’s degree in public health and have been a registered dental hygienist for over 30 years. Although the Department of Public Health (DPH) and Board of Registration in Dentistry (BORID) are well-intentioned in proposing this requirement, the results will be deeply problematic.

My public health training makes me believe that one of the main goals for this requirement is to know more about the PHDHs practicing in Massachusetts: how many are practicing, where are they practicing, in what settings are they practicing, etc. These goals are good, but requiring all PHDHs to carry a Permit M is the wrong way to go about it. There are several reasons for this.

Many PHDHs do not own their own businesses. There are companies in our state that employ dozens of PHDHs and most of them work part time, perhaps even on a temporary basis. Thus, the PHDHs working for these companies don’t own their own mobile equipment. They might work in one location one week with one set of equipment and an entirely different location the next week with different equipment. In these cases, the Permit M should stay with the equipment, not the individual. If the PHDH is purely an employee of a larger company, it is unreasonable and impractical for them to obtain a Permit M for every different piece of equipment their employer might ask them to use.

Additionally, even if a PHDH working for a larger company does use one set of mobile equipment regularly, that PHDH should not be the one to hold the permit. The permit should be held by the larger company, the owner of the equipment. That company is the entity responsible for maintaining the equipment; they should also be the entity responsible for obtaining all the necessary permits. The permit application is lengthy and requires up to 14 attachments with details about the equipment in question. It is unreasonable for the individual PHDH to complete such lengthy and detailed forms to obtain a permit for equipment for which they are not ultimately responsible. This is overly cumbersome.

I would also like to point out the cost. At $180, Permit M is expensive. The idea behind the creation of the PHDH designation in Massachusetts was to increase access to care. Dental hygienists who may wish to extend their outreach in small ways will be discouraged from doing so because of the high cost of this permit. Some may want to attend a few health fairs over the course of a year or perform oral health screenings once or twice. A PHDH should be able to work as much or as little as they want, contributing to the greater good in even small ways. And yet, paying $180 for a Permit M is cost prohibitive in order, for example, to attend two health fairs in a year. This discourages the spirit behind the PHDH designation and does nothing to help the oral health problems in our state.

If DPH and BORID indeed want to be able to track PHDHs more closely, there are much simpler ways to do so. Requiring a Permit M for each PHDH is not necessary. I would recommend that a registry be created. Require that any dental hygienist wishing to practice as a PHDH be listed in that registry. This could easily encompass PHDHs who work 1-2 days per year, more regularly on a part-time basis, or even full time. It will cover PHDHs who work for themselves or for a larger company. This allows the state to track the individual, not the equipment. And it helps maintain the spirit of the PHDH legislation, which has the goal to expand access to oral health care.

Thank you for your attention.

Sincerely,

Carolyn J. Wehler, RDH, MPH