
A BILL FOR AN ACT

RELATING TO DENTAL HYGIENISTS.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1 SECTION 1. The legislature finds that most states are not
2 doing enough to prevent tooth decay, unnecessarily driving up
3 health care costs for families and taxpayers. The Centers for
4 Disease Control and Prevention (CDC) and American Dental
5 Association (ADA) cite sealants as the most effective
6 preventative strategy in tooth decay. According to the Hawaii
7 Smiles 2015 report, more than sixty per cent of children in
8 Hawaii do not have protective sealants, which are clear plastic
9 coatings applied to the chewing surfaces of molars. The report
10 also recommends prevention programs such as school-based oral
11 health programs. A 2013 report by the Pew Center on the States,
12 "Falling Short: Most States Lag on Dental Sealants", graded all
13 fifty states on their efforts to prevent tooth decay by
14 improving access for low-income children to sealants. In the
15 report, states were graded based on four indicators: having
16 sealant programs in high-need schools; allowing hygienists to
17 place sealants in school-based programs without requiring a



1 dentist's exam; collecting data regularly about the dental
2 health of school children and submitting it to the National Oral
3 Health Surveillance System; and meeting a national objective on
4 sealants set by the federal government's Healthy People 2030
5 goals.

6 Hawaii was one of only five states to receive a grade of
7 "F" in the Pew report, with a total of one out of eleven
8 possible points. An "F" grade indicates a state is lagging in
9 prevention efforts and could be doing more to reduce the pain
10 and costs associated with dental problems. Recent reports
11 indicate that some states have initiated changes and are now in
12 compliance. In a follow-up report by Pew in 2015, some states
13 made improvements to their oral health programs. Hawaii did not
14 and became one of three states to still receive an "F" grade.
15 Research shows that providing dental sealants through school-
16 based programs is a cost-effective way to reach low-income
17 children, who are at greater risk of tooth decay.

18 The legislature further finds that school-based dental
19 sealant programs provide sealants to children least likely to
20 receive them otherwise. Studies have shown that tooth decay of
21 molars dropped an average of sixty per cent up to five years



1 after sealant application in a school program. Sealants also
2 prevent decay at one-third the expense of filling a cavity.
3 States wishing to establish a school-based sealant program must
4 also explore potential funding avenues. Some states with
5 school-based dental sealant programs, such as Ohio, receive
6 funding through the federal Maternal and Child Health Block
7 Grant. Other funding possibilities may also be available,
8 including program-generated revenue through collections from
9 medicaid. The legislature notes that medicaid currently covers
10 sealants for eligible recipients in Hawaii.

11 The legislature additionally finds that the Pew reports
12 noted Hawaii was one of eight states with the most restrictions
13 on dental hygienists, the primary practitioners who apply
14 sealants in school-based programs. Removing unnecessary
15 restrictions on dental hygienists will eliminate expensive and
16 unnecessary barriers to serving children in school-based sealant
17 programs.

18 The legislature therefore finds that the State must take
19 proactive steps to implement measures to strengthen school-based
20 oral health and sealant programs, which will support the
21 prevention of tooth decay amongst Hawaii's children.



1 Accordingly, the purpose of this Act is to permit licensed
2 dental hygienists to perform preventive dental sealant
3 screenings and apply preventive dental sealants, in conjunction
4 with a licensed dentist in a school-based dental program.

5 SECTION 2. Section 447-3, Hawaii Revised Statutes, is
6 amended to read as follows:

7 "**§447-3 Employment of and practice by dental hygienists.**

8 (a) Any licensed dentist, legally incorporated eleemosynary
9 dental dispensary or infirmary, private school, welfare center,
10 hospital, nursing home, adult day care center or assisted living
11 facility, mental institution, nonprofit health clinic, or the
12 State or any county, may employ licensed dental hygienists.

13 (b) Clinical dental hygiene may be practiced by a licensed
14 dental hygienist. The practice of clinical dental hygiene is
15 defined as the removal of hard and soft deposits and stains from
16 the portion of the crown and root surfaces to the depth of the
17 gingival sulcus, polishing natural and restored surfaces of
18 teeth, the application of preventive chemical agents to the
19 coronal surfaces of teeth, which chemical agents have been
20 approved by the board of dentistry, and the use of mouth washes
21 approved by the board, but shall not include the performing of



1 any repair work or the preparation thereof, or any other
2 operation on the teeth or tissues of the mouth; provided that
3 nothing in this subsection shall prohibit a dental hygienist
4 from using or applying topically any chemical agent which has
5 been approved in writing by the department of health for any of
6 the purposes set forth in part V of chapter 321, and other
7 procedures delegated by a dentist in accordance with the rules
8 of the board of dentistry.

9 In addition, a licensed dental hygienist may administer
10 intra-oral infiltration local anesthesia and intra-oral block
11 anesthesia under the supervision of a licensed dentist as
12 provided in section 447-1(f) after being certified by the board,
13 and for those categories of intra-oral infiltration local
14 anesthesia and intra-oral block anesthesia for which the
15 licensed dental hygienist has been certified through a course of
16 study meeting the requirements of this chapter.

17 (c) A licensed dental hygienist may operate in the office
18 of any licensed dentist, or legally incorporated eleemosynary
19 dental dispensary or infirmary, private school, welfare center,
20 hospital, nursing home, adult day care center or assisted living
21 facility, mental institution, nonprofit health clinic, or in any



1 building owned or occupied by the State or any county, but only
2 under the aforesaid employment and under the direct or general
3 supervision of a licensed dentist as provided in section
4 447-1(f). No dental hygienist may establish or operate any
5 separate care facility which exclusively renders dental hygiene
6 services.

7 (d) Notwithstanding section 447-1(f), a licensed dental
8 hygienist may operate under the supervision of any licensed
9 dentist providing dental services in a public health setting.
10 General supervision is permitted in a public health setting;
11 provided that the supervising licensed dentist is available for
12 consultation; provided further that a licensed dental hygienist
13 shall not perform any irreversible procedure or administer any
14 intra-oral block anesthesia under general supervision. In a
15 public health setting, the supervising licensed dentist shall be
16 responsible for all delegated acts and procedures performed by a
17 licensed dental hygienist. Notwithstanding section 447-1(f), a
18 licensed dental hygienist under the general supervision of a
19 licensed dentist employed in a public health setting may perform
20 dental education, dental screenings, teeth cleanings, intra-oral
21 or extra-oral photographs, x-rays if indicated, and fluoride



1 applications on individuals who are not yet patients of record,
2 have not yet been examined by a licensed dentist, or do not have
3 a treatment plan. Other permissible duties shall be pre-
4 screened and authorized by a supervising licensed dentist,
5 subject to the dentist's determination that the equipment and
6 facilities are appropriate and satisfactory to carry out the
7 recommended treatment plan. A licensed dental hygienist shall
8 refer individuals not currently under the care of a dentist and
9 who are seen in a public health setting to a dental facility for
10 further dental care. No direct reimbursements shall be provided
11 to licensed dental hygienists.

12 As used in this subsection, "public health setting"
13 includes but is not limited to dental services in a legally
14 incorporated eleemosynary dental dispensary or infirmary,
15 private or public school, welfare center, community center,
16 public housing, hospital, nursing home, adult day care center or
17 assisted living facility, mental institution, nonprofit health
18 clinic or facility, or the State or any county.

19 (e) Notwithstanding section 447-1(f), a licensed dental
20 hygienist under the general supervision of a licensed dentist
21 may perform preventive dental sealant screenings and apply



1 preventive dental sealants in a school-based oral health program

2 on individuals who:

3 (1) May or may not be a patient of record;

4 (2) Have not been previously examined by a licensed

5 dentist; or

6 (3) Do not have a treatment plan prescribed by a licensed

7 dentist."

8 SECTION 3. New statutory material is underscored.

9 SECTION 4. This Act shall take effect on July 1, 2024.

10

INTRODUCED BY: Nadine K. Nahm

JAN 18 2024



H.B. NO. 1777

Report Title:

Dental Hygienists; Preventive Dental Sealants; Dental Sealant Screenings; School-based Oral Health Programs

Description:

Authorizes dental hygienists who are under the direct supervision of a licensed dentist to perform preventive dental sealant screenings and apply dental sealants on certain individuals in a school-based oral health program.

The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.

