

**TESTIMONY OF THE MAINE MEDICAL ASSOCIATION**

**IN OPPOSITION TO**

**L.D. 13, AN ACT TO EXPAND THE DIAGNOSTIC FUNCTIONS OF INDEPENDENT  
PRACTICE DENTAL HYGIENISTS**

Joint Standing Committee on Business, Research & Economic Development  
Room 208, Cross State Office Building  
1:00 p.m., Tuesday, February 24, 2009

Good afternoon Senator Schneider, Representative Smith, and Members of the Joint Standing Committee on Business, Research & Economic Development. I am Gordon H. Smith, Executive Vice President of the Maine Medical Association (MMA), and I am speaking in opposition to L.D. 13, *An Act to Expand the Diagnostic Functions of Independent Practice Dental Hygienists*. The MMA is a professional organization representing more than 3000 physicians, residents, and medical students whose mission is “to support Maine physicians, advance the quality of medicine in Maine, and promote the health of all Maine citizens.”

The MMA appreciates the efforts of Representative Jones and the co-sponsors of this bill to improve oral health care in Maine. However, as you have heard from the Maine Dental Association, we believe that L.D. 13 presents a significant and inappropriate expansion of the scope of practice of Independent Practice Dental Hygienists (IPDHs) that would not ensure the quality of oral health care and patient safety Maine citizens deserve.

The 123<sup>rd</sup> Maine Legislature permitted IPDHs to perform only 15 discrete evidence-based dental tasks that do not require complex medical judgment within their scope of practice. In allowing IPDHs to own x-ray equipment and to “perform x-rays,” L.D. 13 would dramatically expand this limited scope of practice to include subjective medical decision-making for which these practitioners are not qualified by their education, training, and experience, such as making a diagnosis of the need for a radiologic examination and interpreting the results of the examination. I have attached for your reference the American College of Radiology’s *Practice Guideline for General Radiology* that includes the recommended qualifications and responsibilities of individuals with more substantial radiology training than IPDHs. See Section III. Should the Committee consider moving forward with L.D. 13, I believe that it proposes a “substantial expansion” of the scope of practice of IPDHs that would require sunrise review pursuant to 32 M.R.S.A. §60-J.

Thank you for considering the MMA’s concerns about L.D. 13 and I would be happy to respond to any questions you may have.