

Dear Colleagues,

Did you see the article in which two of our Public Health Dental Hygienists members (PHDHs) were quoted? Found in Kaiser Health Network? Or in the Chicago Tribune? Or Sun-Times?

"Hygienists Brace for Pitched Battles with Dentists in Fights Over Practice Laws."

"In a battle reflecting turf wars around the country, Illinois dentists help defeat bills that would have allowed hygienists to practice in nursing homes and prisons."

"<u>Dental Hygienists in Illinois face a road block from dentist lobby as they push to do</u> more."

We're excited about these articles!

While these articles shined a bright light on our positive progress, comments from ISDS were disparaging, insulting, and inaccurate. In a subsequent correspondence to their members, ISDS continued with their negative rhetoric and inaccurate information. Here's a quick summary with factual information in response to their statements. The link to the ISDS letter can be found at the bottom of this page.

IDHA's RESPONSE:

Are PHDHs educated beyond a basic clinical level of education?

Yes, in addition to holding a state license to practice dental hygiene, nearly half of all PHDHs hold higher educational degrees including master's and doctoral degrees

What is the intent of the PHDH certification?

The intent is to increase access to care for the underserved citizens of Illinois.

Why did it take 5 years to design and implement the educational program for the PHDH?

The PHDH curriculum, including **42 continuing education credit hours**, was stalled in legislative committees for this extended period of time. In 2019, HB 2676 finally passed with an outline for the PHDH structured courses. In 2020 the IDHA curriculum was implemented complying with the statute.

Does the PHDH receive formal education?

Yes, the PHDH statute mandates coursework in: emergency procedures for medically compromised patients, geriatric dentistry, pharmacology, pathology, pediatric dentistry, medical record keeping, teledentistry, nutritional needs of geriatric population, cultural competency, and professional ethics. The program also includes an 8-hour review and requires the successful completion of a written proficiency exam. Finally, in order to maintain this certification, the PHDH must complete 4 CEUs annually in addition to state CEU requirements.

Can a PHDH work independently?

No! All PHDHs must hold a collaborative agreement with a licensed Illinois dentist, who will conduct an exam shortly after the first PHDH preventive treatment appointment. Also, PHDHs are ineligible for direct reimbursement of services rendered.

Is general supervision the same as the PHDH certification? No, it is not.

- General supervision requires an exam by the dentist prior to the RDH delivering preventive services.
- Conversely, the PHDH model provides direct preventive care to the patient prior to a dental exam.

The PHDH model mirrors the other 41 states that have been allowing this expansion of access to care for decades. Unfortunately, Illinois limits practice settings for the PHDH, thus, leaving Illinois residents of skilled nursing facilities unable to access care. Interestingly, a requirement to hold a PHDH certification mandates advanced education in geriatric care.

Are Illinois licensed dental hygienists qualified to provide the highest level of care?

Yes, all patients treated by dental hygienists, both with and without the PHDH certification, receive identical safe, patient-centered, and evidence-based care.

How has the PHDH positively impacted the underserved population in Illinois?

- PHDHs have been instrumental in closing the gap for health care disparities, preventing an overload in emergency rooms. Since the program began in March 2020, over 100 dental hygienists have earned their PHDH certificates, which has improved access to care.
- Patient survey feedback indicated that most of these patients would have gone without care if the services of the PHDH were unavailable.
- One example of a positive impact comes from an ongoing study tracking diabetic patients. This recent data collected indicates 45% decrease in gingival inflammation and 15% decrease in HbA1C level since April 2020

To conclude, our PHDH model is not an attempt to pursue an independent practice model, rather an effort to address the unmet needs of the

underserved citizens of Illinois. We remain committed to provide preventive oral care and education by volunteering across the state to address patient disparities.

Be assured that your IDHA leadership is supporting you, and we need your support. We respect the knowledge you bring to our profession and to patient care. Check our website for membership information.

ISDS LETTER

