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**Minutes of the Michigan Dental Association
Committee on Governmental and Insurance Affairs
March 19, 2021 – 9:00 a.m.
Zoom Video Conference**

Attended

Connie Verhagen, DDS, MS, chair
Gabe Holdwick, DDS, member
Elizabeth Ralstrom, DDS, member
James Cantwil, DDS, member
Irene Tseng, DDS, member
Jason Mashni, DDS, member
Debra Peters, DDS, member
Sarah Tomaka, DDS, member
Chris Smiley, DDS, MDA board liaison
Mark Johnston, DDS, ADA liaison
Michael Maihoffer, DDS, MDA president-elect (for a portion)
Bill Sullivan, JD, MDA vice president of advocacy and professional relations
Josh Kluzak, MDA manager of government and insurance affairs
Kesha Dixon, MDA government and insurance affairs/access assistant
Lynn Aronoff, MDA grassroots coordinator
Peter Ruddell, JD, consultant
Mark Burton, guest

Absent

Malika Malik, student member
William Mathers, student member

Call to order and roll call

The meeting was called to order at 9:03 a.m. A quorum was present.

Approval of the agenda

The CGIA unanimously approved the agenda.

House Bill 4355 – telehealth providers

MDA staff updated the CGIA on House Bill 4355, sponsored by State Rep. Ann Bollin (R-Brighton Twp.). The bill would allow healthcare providers licensed in other states, including dentists, to provide telehealth services in Michigan without a Michigan license. Current MDA policy states that a health provider who provides teledentistry services to an individual located within the state of Michigan shall be licensed and practicing in the state of Michigan. Therefore, the MDA is opposing the bill.

House Bill 4355 passed the House Health Policy Committee on March 18 and is now on the House floor. The MDA submitted written testimony to the House Health Policy Committee opposing the bill.

49 House Bills 4224 and 4225 – PPE tax credits

50 The CGIA was provided an update on House Bills 4224 and 4225, sponsored by State
51 Reps. Jim Lilly (R-Park Twp.) and Sarah Anthony (D-Lansing) respectively. These bills
52 would create sales and use tax credits for personal protective equipment and supplies
53 purchased between March 10, 2020 and December 31, 2021. In order to qualify,
54 employers must have a COVID-19 safety protocol plan in place.

55

56 The MDA Board of Trustees adopted the following policy on September 12, 2020:

57

58 Resolved, that the MDA supports tax relief for purchases and costs related to
59 government mandates.

60

61 Therefore, the MDA is supporting House Bills 4224 and 4225.

62

63 House Bill 4359 – CRNA scope of practice

64 House Bill 4359, sponsored by State Rep. Mary Whiteford (R-Casco Twp.), would expand
65 the scope of practice of Certified Registered Nurse Anesthetists (CRNAs) to allow them
66 to perform certain procedures independently of a supervising physician.

67

68 Current MDA policy opposes similar legislation that was introduced in 2016. However,
69 last August, the CGIA decided to rescind the policy because the bill died:

70

71 Resolved, that the Michigan Dental Association opposes Senate Bill 1019
72 regarding Certified Nurse Anesthetist.

73

74 This policy, along with all of the policies the CGIA recommended to rescind last August,
75 will be reviewed by the MDA Board of Trustees in June. In 2016, when this CRNA policy
76 was adopted, the MDAs position on midlevel providers, particularly dental therapists,
77 played a role in the MDA opposing the CRNA legislation.

78

79 The CGIA considered whether or not the MDA should take a position on allowing
80 CRNAs to practice independently. While access to anesthesia services is important issue
81 impacting dental patients, the CGIA felt the legislation does not impact dentistry
82 enough to warrant a position on the bill. Therefore, the CGIA decided to remain neutral
83 and to reconsider the legislation at their next meeting.

84

85 Senate Bills 157 and 158 – license reciprocity for armed forces

86 Senate Bills 157 and 158, sponsored by State Senators John Bizon (R-Battle Creek) and
87 Adam Hollier (D-Detroit) respectively, would allow certain licensing exemptions for
88 members of the armed forces and their dependents.

89

90 Specifically, Senate Bill 157 would waive the initial licensing fees and waive initial
91 licensing examination requirements for applicants who are a member of the armed
92 forces on active duty, a veteran, or a dependent, and the applicant holds a current
93 license or registration in good standing in another State or country for the health
94 profession.

95
96 The current pathways to Michigan licensure for applicants with a license in another
97 state are as follows:

- 98 • If you have been licensed and practicing for a minimum of five years in another
99 state immediately preceding your application for licensure in Michigan, you
100 must arrange for the official report of your regional or state examination
101 scores to be sent directly to this office from the examination agency. Scores
102 can be emailed to bpldata@michigan.gov or mailed to the Bureau of
103 Professional Licensing, PO Box 30670, Lansing, MI 48909.
- 104 • If you have been licensed less than five years in another state, you must
105 complete the requirements for licensure by examination.

106
107 The CGIA decided that it is not necessary for the MDA to take a position on the
108 legislation because the bill would not have a big impact on the current licensing
109 process as outlined above.

110 111 **RDH prescription authority**

112 A state legislator recently inquired with the MDA regarding a legislative proposal from
113 the Michigan Dental Hygienists Association (MDHA). The proposal would give Registered
114 Dental Hygienists (RDHs) limited prescription authority under certain circumstances. A
115 hand-out distributed by the MDHA describing the proposal states:

- 116 • Prescriptive authority only for the following as part of the delivery of preventative
117 care:
 - 118 ○ fluoride supplements (tablets, lozenges, drops, etc.)
 - 119 ○ topical sodium fluoride or stannous fluoride anti-caries (cavities) treatment
120 (toothpaste, gel, rinse, varnish, etc.)
 - 121 ○ topical or subgingival anti-infective
- 122 • Explicitly prohibit any controlled substances.
- 123 • Require the assignment by a dentist to do so.

124
125 The CGIA reviewed the proposal and recommended that the MDA oppose prescription
126 authority for RDHs. The primary reason for the CGIA's recommendation is because in
127 order to prescribe, a provider must be able to make a diagnosis, and the CGIA believes
128 RDHs are not qualified to diagnosis patients. The CGIA also raised concerns about
129 liability, and could not identify any problems with the current workflow of prescribing
130 medications.

131
132 Therefore, the CGIA recommends the MDA Board of Trustees adopt the following
133 policy:

134
135 **Resolved, that the MDA oppose prescription authority for Registered Dental**
136 **Hygienists.**

137 138 **Legislative and insurance update**

139 **Administering vaccines** – The federal government has authorized dentists,
140 among other healthcare providers, the ability to administer the COVID-19
141 vaccine with limited immunity as long as certain conditions are met.

142

143 **House Bill 4067** – MDA supported legislation to license five additional dental
144 specialties in Michigan passed the House of Representatives and is now in the
145 Senate Committee on Healthy Policy.

146
147 **Access to hospital dentistry** – MDA members and staff have been discussing the
148 lack of access to hospital dentistry with legislators.

149
150 **Access to Care Committee update**

151 No update was provided.

152
153 **ADA liaison reports**

154 The ADA Council on Dental Benefits is looking into codes for dentist who administer the
155 COVID-19 vaccine. In addition, the Council on Dental Benefits is making progress on a
156 universal dental benefit portal where offices can check patient's benefit eligibility.

157
158 **Dental student reports**

159 Both dental school representatives were absent from the meeting.

160
161 **Adjournment**

162 The meeting was adjourned by the chair at 11:04 a.m.