MINUTES OF THE MEETING PUBLIC HEALTH, WELFARE AND SAFTETY COMMITTEE MONTANA STATE SENATE

March 9, 1981

The meeting of the Public Health, Welfare and Safety Committee was called to order by Vice Chairman, Matt Himsl on Monday, March 9, 1981 at 12:30 in Room 410 of the State Capitol Building.

<u>ROLL CALL</u>: All members were present with the exception of Senator Hager who was excused. Senator Norman arrived late. Kathleen Harrington, staff researcher, was also present.

Many visitors were in attendance. (See attachment.)

CONSIDERATION OF HOUSE BILL 437: Representative "Red" Menehan of District 90, sponsor of House Bill 437, gave a brief resume of the bill. This bill is an act to revise the responsibilities of the Alcoholism Center located at the Galen State Hospital and change its name.

Mike Murray from the Department of Institutions, the Drug and Alcohol Division, stated that the intent of this bill is to revise the content of the services provided at Galen State Hospital. The hospital will provide only care, evaluation, treatment, referral and rehabilitation to persons who are referred for treatment of alcoholism. The hospital will no longer be mandated to provide consulting, research or educational services. The name of the alcoholism services center is changed to reflect the change of its duties.

With no further proponents, Vice Chairman Himsl called on the opponents. Hearing none, the meeting was opened to a question and answer period from the Committee.

Senator Halligan asked Mr. Murray the reason for the stricken language in the bill. Mr. Murray stated that this is repet - itive as found in MCA,53-24-204.

Mr. Curt Chisolm of the Department of Institutions also stated that the bill would allow for the duties to be carried out by the department rather than Galen, the duties of consultation, research and education for the outpatients. PUBLIC HEALTH PAGE TWO MARCH 9, 1981

Mr. Murray read from the Codes for comparisons to the bill to further explain why so much language had been deleted from the bill.

Representative Menehan asked the Committee for a favorable recommendation in his closing remarks.

CONSIDERATION OF HOUSE BILL 420: Representative Steve Waldron of District 97 gave a brief resume of the bill. This bill is an act to generally clarify section 53-24-208, MCA; deleting the distinction between public and private alconhol treatment facilities with regard to required facility standards and revising required facility standards.

This bill clarifies that all alcohol treatment facilities must meet standards established by the Department of Institutions. Under this bill the standards are no longer limited to health or treatment standards. It also states that state approval will be revoked from facilities that fail to file requested information or who files fraudulent information.

Mr. Mike Murray of the Department of Institutions, the Drug and Alcohol Division, spoke on behalf of the bill. He stated that on Page 1, lines 17 through 19 this was stricken out of the original bill as a way of making sure that better treatment centers are operating and function in the best interest of all persons involved.

With no further proponents, Vice Chairman, Matt Himsl called on the opponents.

Senator Tom Keating spoke against taking out lines 17 through 19 on page one. He was speaking on behalf of the Rimrock Foundation in Billings. He felt that is was very necessary to leave the stated lines in the bill to cover independent treatment centers.

With no further opponents, the meeting was opened to a question and answer period from the Committee.

Seantor Norman asked Representative Waldron if he felt that this bill needed a Statement of Intent. Representative Waldron stated that he did not feel that the bill needed a Statement of Intent.

Senator Johnson asked about the funds which treatment centers receive.

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There is a cursory audit to see how the centers are handling their money.

Representative Waldron closed by asking the Committee for a favorable consideration on House Bill 420.

CONSIDERATION OF HOUSE BILL 439: Representative Waldron of District 97, sponsor of House Bill 439, gave a brief resume of the bill. This bill is an act concerning payment of fees for certain alcoholism related services and indicating how the Department will distribute funds generated by the tax on alcoholic beverages. This bill was introduced at the request of the Department of Institutions.

The bill provides that the state will pay fees for alcoholism services provided by state approved alcoholism programs and for detoxification services provided by licensed hospitals. Under the original statute the state pays for detoxification services provided by state approved alcoholism programs, certified alcoholism counselors and licensed physicians.

This bill also clarifies that the revenue from the alcohol tax that has not been spent and was returned by the counties to the department will be distributed by the department to approved programs the following fiscal year.

Mike Murray from the Department of Institutions, the Drug and Alcohol Division, stated that this bill addresses the excess earmarked funds. Mr. Murray stated that at present time this money is at present time going into a dark hole and can not be used. The would correct that problem and let the money be distributed to approved programs.

Hearing no further proponents, Vice Chairman Himsl called on the opponents. Hearing none, the meeting was opened to a question and answer period from the Committee.

Senator Norman asked if this money would have to be reported to the Legislature. Mr. Murray replied that being as the money is already earmarked, that he did not feel that it would have to be reported. PUBLIC HEALTH PAGE FOUR MARCH 9, 1981

CONSIDERATION OF HOUSE BILL 632: Representative Bob Sivertsen of district 7, sponsor of House Bill 632,gave a brief resume of the bill. This bill is an act to require formulation of a county alcohol treatment and prevention plan annually.

This bill would require counties to annually submit a comprehensive county-wide plan for treatment, rehabilitation and prevention of alcoholism. The county would be ineligible to receive money until the plan was submitted and approved.

Mr. Mike Murray of the Department of Institutions, the Drug and Alcohol Division, stood in support of the bill.

Hearing no further proponent, Vice Chairman Himsl called on the opponents. Hearing none, the meeting was opened to a question and answer period from the Committee.

Senator Himsl asked if the county must change their complete plan and was told no that this is not the case.

Representative Sivertsen closed by asking for favorable consideration from the Committee.

CONSIDERATION OF HOUSE BILL 717: Representative Calvin Winslow of District 65, sponsor of the bill, gave a brief resume. This bill is an act to generally revise and clarify the licensing laws for dentist and dental hygenists.

The Board emergency fund is eliminated in Section 1. In Section 2, the provisions for attendance at national association meeting is broadened and the compensation is increased. Section 3 provides rulemaking authority.

Section 4 makes an oral interview an optional feature of the dental licensing exam. It requires the applicant provide copies of other state licenses and the names and addresses of dental societies of which he is a member. It also eliminates the licensing examination for dental students.

Section 5 eliminates the requirement for the registration of the dentalcertificate in the county where the dentist is engaged in the practice of dentistry and changes the fee for the replacement of a certificate. PUBLIC HEALTH PAGE FIVE MARCH 9, 1981

Section 6 provides for an annual renewal fee. There are seperate requirements and fees for active and inactive status. It also provides for the revocation of a license for nonpayment of fees.

Section 7 allows the denial of a license for 2 years as a disciplinary sanction against a dentist. Section 8 makes an oral interview an optional feature of a dental hygenist's license examination.

Section 9 provides for an active and inactive status for dental hygenists and sets the limits and requirements for the fees to be charged the hygenist. Section 10 makes the Boards rulemaking authority for auxiliary personnel optional rather than mandatory.

Dr. William Thomas, repsenting the Board of Dentistry, stated that the Board of Dentistry is against any amendments which may be submitted by the Montana Dental Association. He then handed out written statement by the Board of Dentistry and read from the same. (See attachments.)

Jeannette Buchanan, also representing the Board of Dentistry, did a comparison of the three dentistry bills, which this Committee has heard so far this session. Senate Bill 463, changes the per diem. Senate Bill 412 addresses the renewal costs. And Senate Bill 717 which addresses the number of delegates and also the active and inactive catagories. Each bill compliments the other.

Dr. Douglas Wood, representing the Board of Dentistry, stated that he is opposed to the Montana Dental Amendments to Section 37-4-401 of the Dental Practice Act.

The Board of Dentistry by rule establishes standards for and promotes the safe and qualified practice of dentistry. The proposed change removes the rule making power of the Board to regulate the duties of licensed dental hygenists. The question of what constitutes sufficient training, education, and skill for performance of specific functions should remain with the Board for professional decisions. The public hearing allows further input into the rule making process. The proposed amendment by the Montana Dental Association is unnecessarily restrictive in granting dental hygienists authority to perform functions that they are now trained to do. These duties are allowed in most other western states. PUBLIC HEALTH PAGE SIX MARCH 9, 1981

Roger Tippy from the Montana Dental Association introduced members of his group as they each spoke.

Byron J. Greany of Anaconda, the president-elect of the Montana Dental Association, stated that this past year there has been much confusion in the interpretation of the dental law, requests for ruling, rulings passed and rescinded, inability of the Board of Dentistry legal staff to interpret, requests for the attorney general's opinion and statements by private attorney for the school of dental Two years of sunset review did not address this hygiene. problem. The only purpose of the Dental Practice Act is to protect the health, safety, and welfare of the patient. In so doing, it should describe in definite terms those duties which require skill, knowledge and education of a dentist and to permit delegation of those duties, reversible in nature or of such inconsequential irreversible nature as to not jeopordize the health, welfare and safety of the patient. It was with this background and intention that the Montana Dental Association would like to amend Section then went through some written 37-4-401. Dr. Greany testimony as to the intention and proposed changes that the MDA would like to see in the bill. (See attachments.)

Senator Norman at this point asked that someone draft a complete set of amendments so that the Committee can see how the actual bill would read. Senator Himsl then requested that Mr. Roger Tippy draft some amendments for the Committee.

Gary Mihelish, 1st vice president of the Montana Dental Association, stated that he supports the amendment proposed by the Montana Dental Association. It has been said by the opponents to this amendment that it tightens the law too Dr. Mihelish stated that this is just what he feels much. needs to be done. The changes allow for easier interpretation of the statute. The Board of Dentistry made a ruling last spring not to allow the administration of local anesthesia by dental hygienists. In addition to this, some dentists are requiring their auxiliaries to administer nitrous oxide analgensia to their patients, which is not an approved duty. These procedures have been proposed for the convenience of the dentists and not the protection of the patients that they treat. There is no proven need for dental auxiliaries to perform these procedures in the practice of dentistry and any physician or dentist realizes the seriousness of the administration of nitrous oxide analgesia and of local anesthetics. Dr. Mihelish asked the Committee to adopted the proposed amendments and then support the bill. (See attachments.)

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Dr. Jerry LaValley, a dentist from Livingston for the past 24 years, spoke in favor of the proposed amendments to House Bill 717. It is believed the inducing of any loss of senses or awareness by a substance (RE: liquid or gas) as in local anesthesia or nitrous oxide analgesia should be done by the most capable person in that office setting. Last summer at a public hearing on a rule change on one of these issues, one of the Board of Dentistry members admitted that he may have been influenced by his own desires in proposing the rule change. The present Board of Dentistry apparently is unable or unwilling to deal with this on a permanent basis. The purpose of the amendment is to clarify the issue which the Board of Dentistry seem to semi-annually have to contend with. There is some inconvenience, but a closer personal contact in this procedure is for the health and welfare of the patient. (See attachment.)

Debra Kehr of Helena, stood in support of the amendment and more especially Section 4 of the bill. As a med tech with 5 years training and more experience, she recognizes the severity and danger of the injection of local anesthesia and does not feel that anyone should be permitted to perform such injections without a great deal of specialized training such as physicians, dentist, and anestheologist. There is no need to risk the patients well being as sufficient qualified dentists reside in Montana.

Judy Harbrecht, representing the Montana Dental Hygienists Association, stood in support of the bill, but stated that she strongly opposes the amendment to Section 37-4-401 of the Dental Practice Act as proposed by the Montana Dental Association.

MDHA is concerned with any suggested change which would alter the basic intent of the Dental Practice Act. The law or statutes should establish minimum criteria for dentist and dental hygienists to practice in Montana. The Board of Dentistry should establish the standards for safe and qualified delivery of dental services. MDHA is also concerned that the amendment proposed by the MDA is unnecessarily restrictive in granting dental hygienists authority to perform certain function relevant to the delivery of preventative dental health services to the public. PUBLIC HEALTH PAGE EIGHT MARCH 9, 1981

Peggy Quinn, speaking as a representative of the Montana Dental Hygienists Association, stated that she is in favor of House Bill 717 and is in opposition to the proposed amendments regarding Section 37-4-401. In the proposed amendment, Subsections 2, 3, and 4 list specific functions which a dental auxiliary cannot perform. The list includes some expanded duty functions which are now being provided by dental auxiliaries in other areas of the country. This would indicate interpretations can be made in the delegation The original intest of HB 717, was to estabof functions. lish control of the indiscriminant delegation of duties by dentists. The Board of Dentistry would then, through rules and regulations, make the necessary professional judgements regarding the delegation of specific functions as the need indicates. (See attachment.)

Roger Tippy, representing the Montana Dental Association, stated then his group felt that the rules and regulations should be spelled out for easier interpretation of the statutes. The legislative delegation to executive branch agencies is one of the central issues in administrative law. Constitutional issues aside, a major consideration is whether or not the legislature has the details of a regulatory program. When the technical details are available, why not put them into the statue instead of delegating the task of phrasing those details to the agency. He then stated that he was in the process of drafting some amendments to the bill for the Committees' consideration and will turn them in as soon as possible.

Dr. Jim Quinn, stood in support of the bill without the amendments.

With no further proponents, Vice Chairman Himsl called on the opponents. Hearing none, the meeting was opened to a question and answer period from the Committee.

Senator Berg asked Representative Winslow if he had seen Senate Bill 391, as it also deals with the dentistry profession.

Representative Winslow closed stating that this is the first time he had to ever consider taking novacaine to present a bill. Everyone seems to be in agreement and support of House Bill 717, however, not everyone is in favor of the proposed amendments. He asked the Committee for a favorable consideration of this bill. PUBLIC HEALTH PAGE NINE MARCH 9, 1981

ANNOUNCEMENTS: The next meeting of the Public Health, Welfare and Safety Committee will be held on Wednesday, March 11, 1981 at 12:30, in Room 410 of the State Capitol Building.

ADJOURN: With no further business the meeting was adjourned.

VICE CHAIRMAN, MATT HIMSI

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ROLL CALL

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PUBLIC HEALTH, WELFARE & SAFETY COMMITTEE

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47th LEGISLATIVE SESSION - - 1981 Date Than 9

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NAME	PRESENT	ABSENT	EXCUSE
Tom Hager	for the		
Matt Himsl			
S. A. Olson			
Jan Johnson			
Dr. Bill Norman	1.5		
Harry K. Berg			
Michael Halligan			
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Each day attach to minutes.

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COMMITTEE ON

VISITORS' REGISTER					
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(Ploase leave propared statement with Secretary)

NAME: Michael Murray	DATE	3/9
ADDRESS:		
PHONE: 449-2827		
REPRESENTING WHOM? Dept. of In	st. Alcoholi	Dørugs
APPEARING ON WHICH PROPOSAL: <u>HB</u>	437	
DO YOU: SUPPORT?	AMEND?	OPPOSE?
COMMENTS:		
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HB 420

Introduced by Steve Waldron

This bill clarifies that all alcohol treatment facilities must meet standards established by the Department of Institutions. Under this bill the standards are no longer limited to health or treatment standards. It also states that state approval will be revoked from facilities that fail to file requested information or who files fraudulent information.

NAME:	Michae	2/	Murray	•	DATE:	3/9/81	
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PHONE:	449-0	282	7				
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APPEAR	ING ON WHICH	PROPOSA	L: <u>HB4</u>	20		•	
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HB 439

Introduced by Steve Waldron

This bill provides that the state will pay fees for alcoholism services provided by state-approved alcoholism programs and for detoxification services provided by licensed hospitals. Under the original statute the state pays for detoxification services provided by state-approved alcholism programs, certified alcoholism counselors and licensed physicians.

The bill also clarifies that the revenue from the alcohol tax that has not been spent and was returned by the counties to the department will be distributed by the department to approved programs the following fiscal year.

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NAME:	Micha	el Mari	ay	DATE:}	/9
ADDRESS:					
PHONE:	4497-	2827			
REPRESENT	ING WHOM? _	Dept. of	Inst. 1	Alcohol 5D	rug s
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HB 632

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Introduced by Rep. Sivertsen

This bill would require counties to annually submit a comprehensive county-wide plan for treatment, rehabilitation, and prevention of alcoholism. The county would be ineligible to receive money until the plan was submitted and approved.

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NAME:	Michael Marray		DATE: 3/2
ADDRESS:	- ,	<u></u>	
PHONE:	449-2827		
REPRESENTI	ING WHOM? Dept. of I	rst. Flee	hels prugs
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HB 717

Introduced by Rep. Winslow

This bill is a general revision of the licensing laws for dentists and dental hygenists.

The Board emergency fund is eliminated in Section 1.

In Section 2 the provisions for attendance at national association meetings is broadened and the compensation is increased.

Section 3 provides rulemaking authority.

Section 4 makes an oral interview an optional feature of the dental licensing exam. It requires the applicant provide copies of other state licenses and the names and addresses of dental societies of which he is a member. It also eliminates the licensing examination for dental students.

Section 5 eliminates the requirement for the registration of the dental artificate in the county where the dentist is engaged in the practice of dentistry and changes the fee for the replacement of a certificate.

Section 6 provides for an annual renewal fee. There are separate requirements and fees for active and inactive status. It also provides for the revocation of a license for nonpayment of fees.

Section 7 allows the denial of a license for 2 years as a disciplinary sanction against a dentist.

Section 8 makes an oral interview an optional feature of a dental hygenist's license examination.

Section 9 provides for an active and inactive status for dental hygenists and sets the limits and requirements for the fees to be charged the hygenist.

Section 10 makes the Boards rulemaking authority for auxiliary personnel optional rather than mandatory.

NAME: An Milling	the Manie	DA	TE: March 9, 1981
Address: <u>/537</u>	FAR. D	Billings.	TE: <u>March 9, 1981</u> Martan, 59102
PHONE: 348-7,	/ 7/		
REPRESENTING WHOM?	1 Xadate	Dintisty	
APPEARING ON WHICH PRO	DPOSAL:	3717	
DO YOU: SUPPORT?		AMEND?	OPPOSE?
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NAME: Douglas	E. Wood .	PD5	DATE: 9MARC	H81
ADDRESS: 10 Thurs	Mile Dri	ve, Kalisp	nell, MT 5	9901
PHONE: 755 789	0			
REPRESENTING WHOM?	Board of I	Dentistry		
APPEARING ON WHICH PR	OPOSAL: 7/	7		
DO YOU: SUPPORT?		AMEND?	OPPOSE?	<u></u>
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PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY

Douglas E. Wood, D.D.S. 10 Three Mile Drive Kalispell, Montana 59901

March 9, 1981

Ref: Montana Dental Association Proposed amendment to change section 37-4-401 of the Dental Practice Act.

Senate Public Health Committee:

I am opposed to the MDA amendment to Section 37-4-401 of the Dental Practice Act.

The Board of Dentistry by rule establishes standards for and promotes the safe and qualified practice of dentistry. The proposed change removes the rule making power of the Board to regulate the duties of licensed dental hygienists. The question of what constitutes sufficient training, education, and skill for performance of specific functions should remain with the Board for professional decisions. The public hearing allows further input into the rule making process.

The proposed amendment by the Montana Dental Association is unnecessarily restrictive in granting dental hygienists authority to perform functions that they are now tranined to do..These duties are allowed in most other western states.

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NAME:	Byron J. Greany	DATE: 3-9-81
ADDRESS:	115 W. Comm. Anaconda, Most.	
PHONE:	563-7802	
REPRESENT	ING WHOM? Mont. Dart. Assoc.	
APPEARING	on which proposal: $HB7/7$	
DO YOU:	SUPPORT? AMEND?	OPPOSE?
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	B. Mont Dent Assoc has suppo	
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	The Amendment of 717 as gre	sented.
	a) stalute will prevent prod	lems of interpetation
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Montana Dental Association

P. O. Box 513 Butte, Montana 59701 Phone (406) 792-9333

Constituent: AMERICAN DENTAL ASSOCIATION

MONTANA DENTAL ASSOCIATION AMENDMENTS TO HB717 WITH PROPOSED STATEMENT OF INTENT

This past year has seen much confusion in the interpretation of the dental law, requests for rulings, rulings passed and rescinded, inability of the Board of Dentistry legal staff to interpret, requests of the attorney general for interpretations, and statements by private attorneys for the school of dental hygiene.

Two years of "Sunset Review" did not address this problem at all, except to inadvertently do so by its deletions of present statute 37-4-405 to permit the practice of dental hygiene when the dentist is not "on the premises" as requested by present law. The Board of Dentistry bill also did not address this problem. It was therefore decided January 16, 1981 by the Montana Dental Association Executive Committee that it must introduce some revisions in order to carry out the direction of policies voted by the Montana Dental Association Board of Directors.

The only purpose of the Dental Practice Act is to protect the health, safety and welfare of the patient. In doing so, it should describe in definite terms those duties which require the skill, knowledge and education of a dentist and to permit delegation of those duties, reversible in nature or of such inconsequential irreversible nature as to not jeopordize the health, safety and welfare of the patient. It was with this background and intention that the following revisions to section 37-4-401 are presented.

- PRESENT "not allow the Board or a licensed dentist to delegate any of the following duties: (1) diagnosis, treatment planning, and prescriptions; (4) prescription for drugs, medications, or work authorizations."
- PROPOSED (1) diagnosis, treatment planning, and prescription for drugs, medications, or work authorizations;
- INTENTION (1) and (4) were combined to simplify and clarify.
- PRESENT "(2) surgical procedures on hard and soft tissues;" Present rules prohibits surgical procedures on hard and soft tissues with exception - ARM 40.14.602 (2) (b) except for root planing and curettage.
- PROPOSED (2) surgical procedures, including suture placement and cutting or removing on hard and or soft tissues except for root planing and gingival curettage; There is no change intended by this, above exception still applies. Perhaps exception could be added or i.e., removal of acretions, stains, plaque above the epithelial attachment.
- INTENTION to preclude periodontal surgery procedures requiring flap entry and closure with placement, a duty requiring the skill and training of a dentist.
- PRESENT "(3) restorative, prosthetic, orthodontic, and other procedures which require the knowledge and skill of a dentist;"

Officers-1980-1981 President Donald R. Erickson, D.D.S. 537 Avenue D

President-Elect Byron J. Greany, D.D.S. 115 W. Commercial Ave. lst Vice-President Gary L. Mihelish. D.M.D. 907 Helena Ave. 2nd Vice-President Stephen L. Black, D.D.S. 115 W. Kagy Blvd. Secretary-Treasurer John W. Lohman, D.D.S. P. O Box 513

- PROPOSED (3) restorative, prosthetic, orthodontic, and other procedures which require the knowledge and skill of a dentist, placement, adjustment or intraoral carving of restorations except for removal of overhangs; impressions for permanent fixed or removable prosthesis or tooth restoration; final jaw registrations; activating orthodontic appliances; or adjusting fixed or removable prosthesis;
- INTENTION Much emphasis today is placed on the importance of supporting structures to teeth and Tempero Mandibular Joint (jaw joint) as related to the biting surfaces (cusps, fossa and inclined planes) of the tooth. We all are aware of the complaints of a "high filling". The intention of the change is to prevent auxiliaries from doing those procedures which alter the occlusal table and require the knowledge and skill of a dentist. Such change can result in irreversible, or at best difficult to reverse, physiological changes of the teeth, supporting structures or Tempero Mandibular Joint. There is NO INTENT to prohibit those traditional dental auxiliary duties of polishing fillings or teeth, or removing overhangs which would be allowable duties.
- PRESENT "(4) prescription for drugs, medications, or work authorizations."
- PROPOSED (4) administration of local anesthesia or induction of Nitrous Oxide Analgesia.
- INTENTION The Montana Dental Association understood this was the intent of the Board of Dentistry following the July '80 ruling prohibiting dental hygienists from administering local anesthesia and in an "interim opion" that neither dental hygienists nor dental assistants could induce Nitrous Oxide Analgesia, but both could monitor the procedure. "Induce"was described as administering Nitrous Oxide Analgesia to attain the proper level of consciousness. "Monitor ing" was described as observing that level of consciousness, under direct supervision, of the patient and equipment, to adjust this equipment only to increase the level of consciousness or oxygenation of the patient but not to decrease the level of consciousness or oxygenation of the patient.

The Montana Dental Association hopes that the above clarifies the reason for and intentions of introducing these amendments to HB717.

NAME: GARY L. MiHEISH	DATE:	3-9-81
ADDRESS: Hama		·
PHONE: 958-9738		
REPRESENTING WHOM? MON-	Starman ATTACHUS	
APPEARING ON WHICH PROPOSAL:	717	
DO YOU: SUPPORT?	AMEND? Suprom	OPPOSE?
COMMENTS:		

March 9, 1981

Testimony before the Senate Public Health Committee HB 717 Dr. Gary Mihelish

I support the amendment proposed by the Montana Dental Association. It has been said by the opponents to this amendment that it "tightens" the law too much. I feel that this should be done. The changes do, however, allow for easier interpretation of the statute.

In the past, the opinions and tenor of the Board of Dentistry seems to vacillate yearly with each new appointment to the Board. No consistency in rulings has been established and this has been disconcerting to all factions of the dental profession.

A majority of three votes is all that is necessary to change an opinion or ruling on the Board of Dentistry. These rules, although they can be changed, do in fact, govern the practice of dentistry in Montana. The rulings of the Board of Dentistry always seem to be controversial. The majority of the members of the Montana Dental Association feel that it is better for the legislature to determine definite statutes. In this way the Board of Dentistry can more easily and consistently perform its duties.

The Board of Dentistry made a ruling last spring not to allow the administration of local anesthesia by dental hygienists. In addition to this, some dentists are requiring their auxiliaries to administer nitrous oxide analgesia to their patients, which is not an approved duty. These procedures have been proposed for the convenience of the dentists and not the protection of the patients that they treat. There is no proven need for dental auxiliaries to perform these procedures in the practice of dentistry.and any physician or dentist realizes the seriousness of the administration of nitrous oxide analgesia and of local anesthetics.

For these reasons, the Montana Dental Association feels that it is important that the proposed amendment be adopted by the legislature.

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PHONE:		222	1431			
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I am Dr. Jerry LaValley and I have been in practice in Livingston for 24 years. I am the Immediate Past President of the MDA. A very substantial majority of the over 400 Dentists in the State of Montana favor the amendment our Association is proposing.

We believe the inducing of any loss of senses or awareness by a substance (re: liquid or gas) as in local anesthesia or nitrous oxide analgesia should be done by the most capable person in that office setting.

Last summer at a public hearing on a rule change on one of these issues, one of the Board of Dentistry members admitted that he may have been influenced by his own desires in proposing a rule change. I commend him for his admission. The present Board of Dentistry apparently is unable or unwillingly to deal with this on a permanent basis. Therefore, we are reluctantly forced to amend HB 717.

The purpose of our amendment is to clarify this issue which the Board of Dentistry seems to semi-annually have to contend with.

We realize that there is some inconvenience but feel strongly a closer personal contact in this procedure is for the health and welfare of the patient.

The present day pres dence of drug abuse prompte and propose putting

NAME: DEBRA M. KEHR DATE: 3-9-81
ADDRESS: 736 N BENTON, HECENA
PHONE: 442-8083
REPRESENTING WHOM? <u>Aelf</u> .
APPEARING ON WHICH PROPOSAL: <u>HB717</u>
DO YOU: SUPPORT?X AMEND? OPPOSE?
COMMENTS: <u>Support the amendment t</u>
more esp. section 4. As a Mid Sech.
with Syrs training + more
experience, I recognize the security
+ danger of the inj. of local anes. & do
totanger of the inj. of local anes. I do not feel that anyone should be
permitted to perform such ingections
Wout a great deal of specialized training
ie physicians, dentists & here anes. There
is no need to risk the patients well being
as sufficient qualified dentists reside in Montana

NAME: Judy Plandert	DATE: March 9,1981
NAME: Judy Hachelt ADDRESS: 114 Brondicing - Deline	
PHONE: 442-4187	
REPRESENTING WHOM? Mintere Mitch	Deguesto amatini
APPEARING ON WHICH PROPOSAL: <u>717</u>	
DO YOU: SUPPORT? AMEN	D? OPPOSE?
COMMENTS:	
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Montana Dental Hygienist's Association

March 9, 1981

TESTIMONY PRESENTED BEFORE THE SENATE PUBLIC HEALTH COMMITTEE

RE: House Bill #717

MDHA supports HB #717, but strongly opposes the amendment to Section 37-4-401 of the Dental Practice Act as proposed by the Montana Dental Association.

MDHA is concerned with any suggested change which would alter the basic intent of the Dental Practice Act. It is our understanding that the law, or statues, should establish minimum criteria for dentists and dental hygienists to practice in Montana. The Board of Dentistry, through the rules and regulations, should establish the standards for the safe and qualified delivery of dental services. As explained to me by Mr. Carney, Director of the Department of Professional and Occupational Licensing, the statues are meant to serve as the skeleton of the Dental Practice Act, while the rules and regulations are it's flesh and blood. Certainly, the Board of Dentistry, with its professional majority, should make the changes which require professional discretions and knowledge in regards to dentistry and its auxiliary occupations. It seems logical that the Board of Dentistry is in a better position than legislature to make decisions which adjust the scopes of practice of dentists and auxiliary occupations. The question of what constitutes sufficient training, education, and skill for performance of certain functions should be a professional decision, and the Board of Dentistry should be the professional judge. We must seriously question why we would consider removing this decision making authority from the Board of Dentistry.

MDHA is also concerned that the amendment as proposed by MDA is unnecessarily restrictive in granting dental hygienists authority to perform certain functions relevant to the delivery of preventative dental health services to the public.

To their credit, the dental profession created the dental hygiene profession to meet dentistrys' and publics need for a dental prevention specialist. A rigorous dental hygiene curricula was developed to meet the dentists' and publics need in the practice setting. The dental profession promoted dental hygiene licensure to establish professional and uniformity in the performance of dental hygienists.

By virtue of graduation from an accredited dental hygiene program, successful completion of a National Board Examination, licensure and a defined scope of practice, the dental hygienist is responsible for the patients oral health care as it relates to the practice of dental hygiene.

No one cares more about dental hygiene than the dental hygienist. At this time, I'd like to introduce Peggy Quinn, also representing MDHA, who will address our specific concerns about the amendment.

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NAME: Degy Quin ADDRESS: PO. Box 5652 Alelena	_DATE: <u>3-9-81</u>
ADDRESS: PO. Box 5652 Alelena	, MJ. 59604
PHONE: 443-0471	
REPRESENTING WHOM? Montana Denta Higg	ieniste Accountion
APPEARING ON WHICH PROPOSAL: H& 717	
DO YOU: SUPPORT? AMEND?	OPPOSE?
COMMENTS:	
Appare the amendment	proposed by
the Montane Dental as	instin
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Montana Dental Hygienist's Association

March 9, 1981

My name is Peggy Quinn, speaking as a representative of the Montana Dental Hygienists' Association. I speak in favor of HB 717 and in opposition to the proposed amendment regarding Section 37-4-401.

In the proposed amendment, Subsections 2, 3, and 4 list specific functions which a dental auxiliary cannot perform. The list includes some expanded duty functions which are now being provided by dental auxiliaries in other areas of the country. This would indicate interpertations can be made in the delegation of functions.

In the spring of 1980, each of the State Boards of Dentistry received a questionnaire from the Division of Educational Measurement of the American Dental Association regarding the legal provision operative in each specific licensing jurisidiction concerning expanded functions which may be delegated to auxiliaries.

The results of the survey published in September by the American Dental Association indicated that " in 1980 no licensing jurisdiction has a Practice Act which permits dentists to delegate at their discretion the performance of any and all expanded functions to dental assistants and/or dental hygienists. Of the 51 jurisdictions surveyed, 47 reported that the Practice Act gives the Board of Dentistry authority to establish rules and regulations for delegating expanded functions to the dental auxiliaries."

Four similiar reports have been published by the ADA beginning in 1972. Over the past 9 years the number of states which permit the dentist to delegate expanded functions to the dental hygienist has increased significantly in regards to certain functions, whereas in other functions the number has remained stable. In view that changes occur, is it within the best use of our Legislators time to have them deal with each and every specific change when a Board of Dentistry is set up for that purpose? Laws are to provide rigidity, rules and regulations are to provide flexibility.

In keeping with the original intent of HB 717, the law would be established to control the indiscriminant delegation of duties by dentists. The Board of Dentistry would then, through rules and regulations, make the necessary professional judgements regarding delegation of specific functions as the need indicates.

Thank you.

NAME: TOGER JIPPY DATE: 3/9/81
ADDRESS: 36 S. LAST CHANCE MALL, HELENA
PHONE: 442-4451
REPRESENTING WHOM? 1. JONTANA DENTAL ASSOCIATION
APPEARING ON WHICH PROPOSAL: $HR 7/7$
DO YOU: SUPPORT? AMEND? X OPPOSE?
COMMENTS: 1. LEGISLATIVE DELEGATION TO EXECUTIVE
BRANCH AGENCIES IS ONE OF THE CENTRAL
ISSUES IN ADMINISTRATIVE LAW.
2. CONSTRUCTIONNE ISSUES ASIDE, A MAJOR
CONSIDERATION IS WHETHER THE LEGISLATURE
HAS AVAILABLE TO IT, THE DETAILS OF A
REGULATORY PROGRAM, IF THE TECHNICAL DETAILS
ARE AVALABLE, WHY NOT FUT THEM INTO THE
STATUTE INSTEAD OF DELEGATING THE TASK OF
PHRASING THOSE DETAILS TO THE AGENCY?
3. AWALDGIES WILDERNESS ACT OF 1964
(FOREST SEILUICE REGULATIONS FUT INTO STATUTE); BILLS
PENDING ON MONTANY CLEAN AIR ACT.