



*California Dental Hygienists' Association*  
*The Voice of Dental Hygiene*

November 9, 2020

Dr. Mark Ghaly MD, MPH  
Secretary  
CA Health & Human Services Agency  
1600 Ninth Street, Room 460  
Sacramento, CA 95814

**RE: Master Plan on Aging**

Dear Secretary Ghaly,

The California Dental Hygienists' Association commends the sensitive, thoughtful, and thorough work of the stakeholders who created the September 2020 Advisory Report. We appreciate the opportunity to provide input prior to the implementation phase and kindly request consideration to be included in ongoing discussions during the implementation phase.

Comments and recommendation in several areas struck a resonant chord. Both Goal 1 Long Term Services and Support and Goal 3 Health and Well Being initiated much conversation, as we saw places where we might be of service to your objectives and contribute to your ambitious goals.

California Dental Hygiene has the licensed workforce category Registered Dental Hygienist in Alternative Practice (RDHAP). The intention of the law that created this category is meant to increase the availability of preventive services and some therapeutic services to the state's underserved population. As such, the workforce is specially trained to treat the frail, elderly, and disabled persons. RDHAPs are primarily portable, taking their services to the client.

Current law,

[http://leginfo.legislature.ca.gov/faces/codes\\_displayText.xhtml?lawCode=BPC&division=2.&title=&part=&chapter=4.&article=9](http://leginfo.legislature.ca.gov/faces/codes_displayText.xhtml?lawCode=BPC&division=2.&title=&part=&chapter=4.&article=9), will be updated by SB 653 (Chang), which goes into effect on in January 2021, allowing these practice locations.

Section 1926 will read:

- Residence of the homebound
- Residential facilities
- Outpatient medical settings

- Dental health professional shortage areas
- Schools
- Dental offices

In your efforts to promote Home and Community Based Services (HCBS) and to address oral care inequities, we would draw your attention to the ability of RDHAPs to deliver services to residents of the homebound and those in residential facilities.

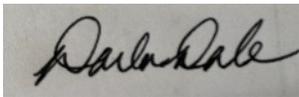
Further, we would like to stress the commitment and training that hygienists have in *prevention*. We can improve the current, tragic state of affairs by implementing a prevention and mitigation program with fluoride varnish and silver diamond fluoride applications. A dentist-RDHAP team could facilitate placement of interim therapeutic restorations through the Virtual Dental Home approach.

In addition, great strides can be made to reduce the number of persons and severity of inflammation for persons with gum disease linked to tooth loss and other morbidities. This can be accomplished by expanding the RDHAP's ability to treat without newer, unnecessary requirements required by payers. These barriers result in serious treatment delays and other treatment disincentives.

We recognize that there are policy and other structural changes that would be necessary to successfully activate this workforce. To that end, we request to see a public health dentist and an RDHAP included in your implementation discussions.

It would be our pleasure to be of assistance.

Sincerely,

A rectangular box containing a handwritten signature in black ink. The signature appears to read "Darla Dale" in a cursive script.

Darla Dale, BSDH, RDHAP  
President California Dental Hygienists Association