

**Commission to Expand Access to Oral Health Care by Studying Alternative Pathways
for Obtaining a License to Practice Dentistry**

Wednesday, November 5

10 AM – 1 PM

Room 209 (Health & Human Services Committee Room)

Cross State Office Building, Augusta, ME

Agenda: Meeting #3

10:00am Welcome

10:10am Oral health program initiatives, CDC

Ryan Denbow, Center for Disease Control & Prevention

10:30am Information request follow-ups

10:40am Committee discussion of recommendations

1:00 Adjourn

Maine CDC Oral Health Program

*Commission to Expand Access to Oral Health
Care by Studying Alternative Pathways for
Obtaining a License to Practice Dentistry*

Ryan Denbow, MPH
Oral Health Educator
November 5, 2025



Maine CDC State Oral Health Program



Vision

Maine people will have an improved quality of life through optimal oral health.

Mission

- Public leadership in assisting community initiatives to prevent, control and reduce oral diseases;
- Planning, implementing and evaluating programs for oral health promotion and disease prevention;
- Statewide coordination and integration of community based oral health services through increased access and removal of barriers.

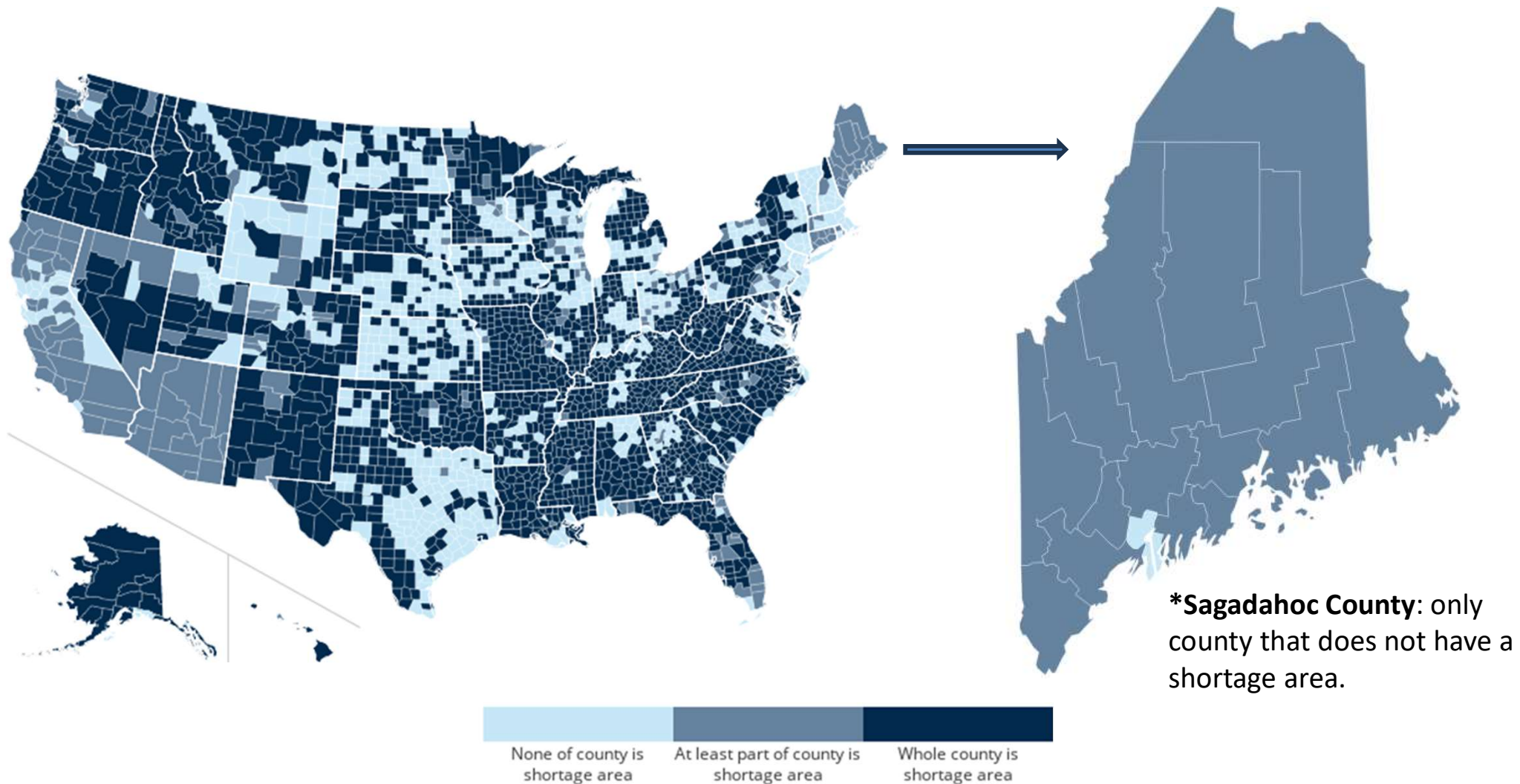
Oral Health Program Strategic Plan 2023-2026

Program Goals

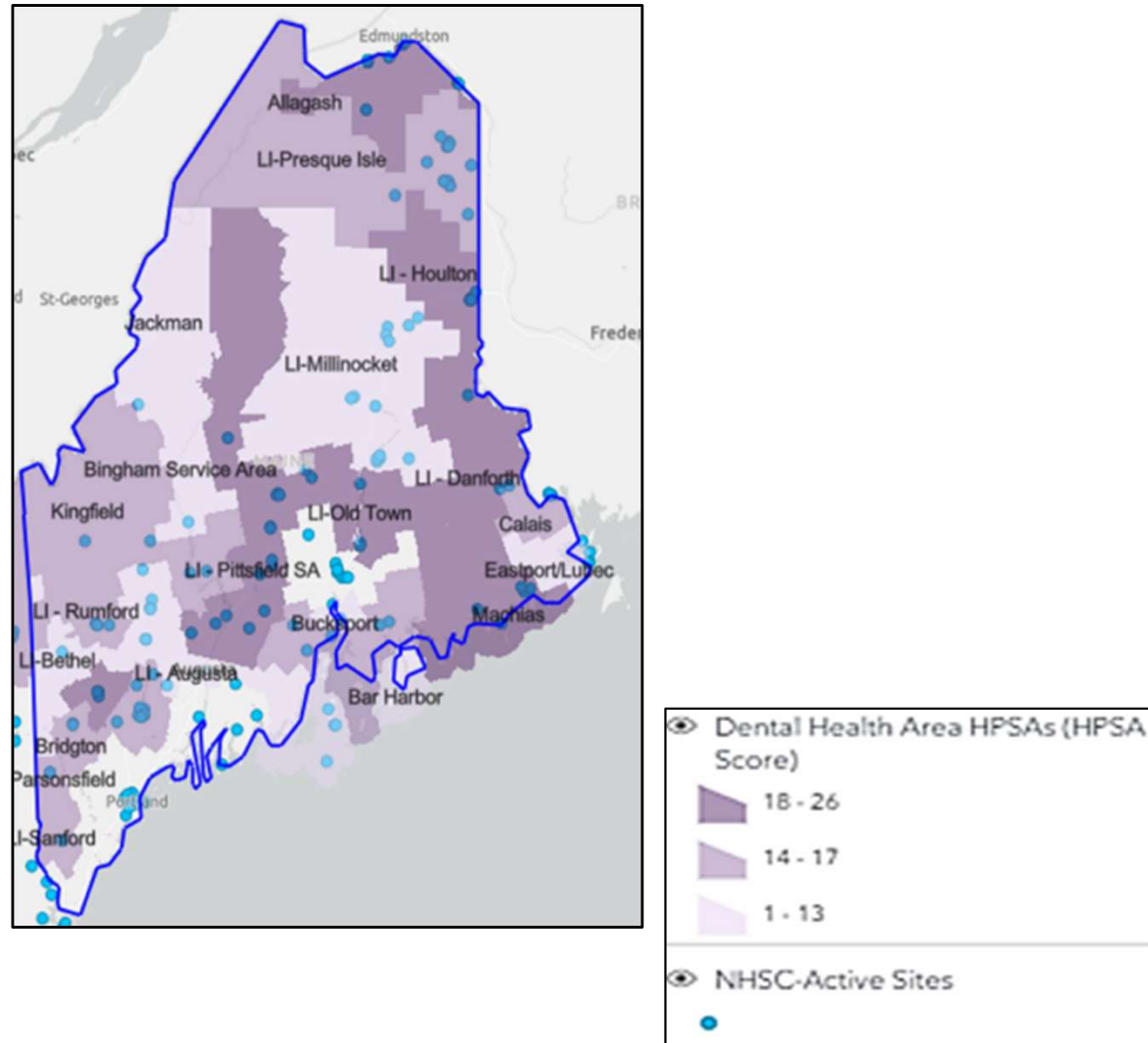
1. Expand Maine CDC's School Oral Health Program
2. Expand and Promote the Dental Public Health Workforce
3. Increase Medical Dental Integration
4. Promote and Expand Preventative Oral Health Education, Awareness, and Community Outreach
5. Support and Promote Quality Improvement Initiatives

Health Professional Shortage Areas: Dental Care, by County

July 2025



Health Professional Shortage Areas Dental Care



Dental Care Providers by State

Number of general dentists and advanced practice dental therapists per 100,000 population

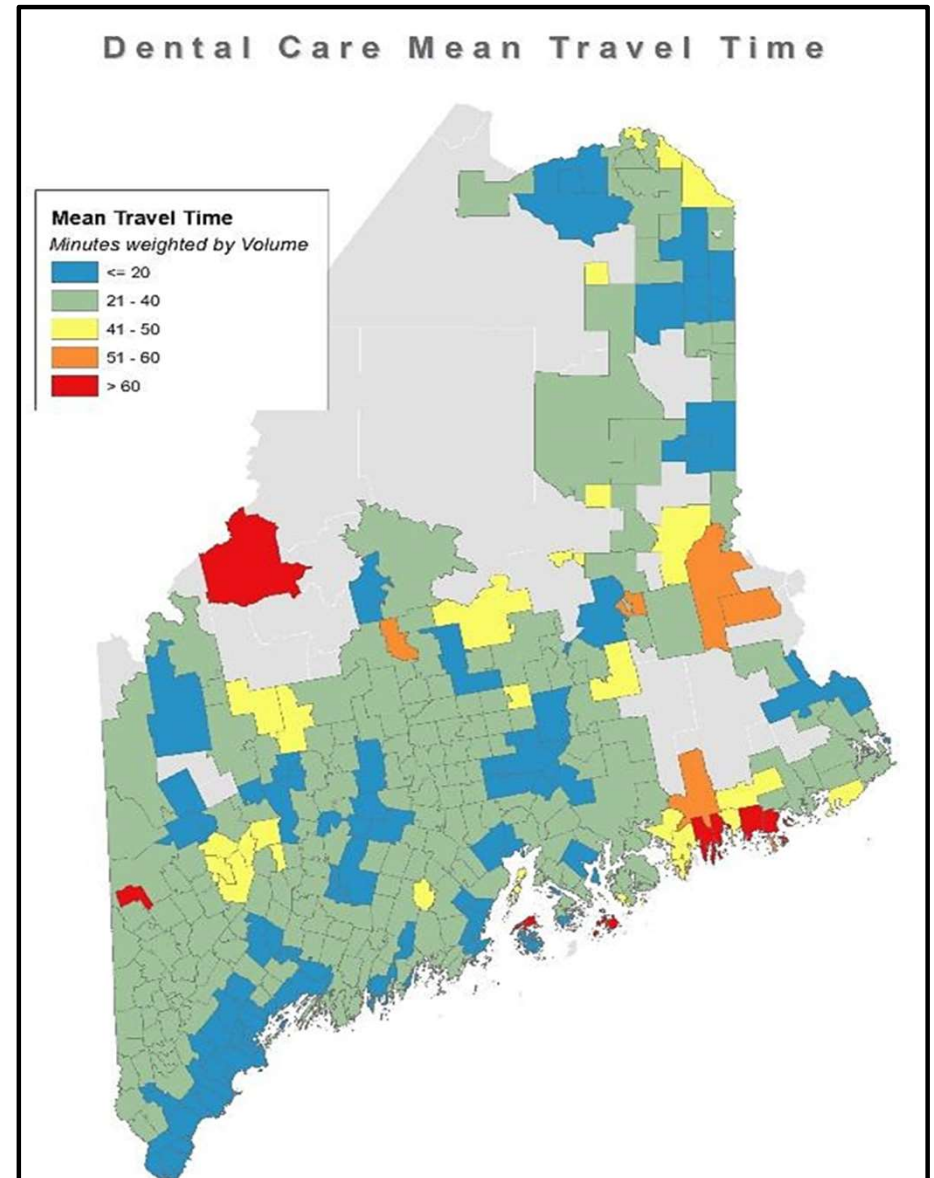
Top States		Rank	Value
★	Alaska >	1	97.5
	Massachusetts >	2	93.7
	California >	3	83.8
Your State		Rank	Value
★	Virginia > , Vermont >	20	66.1
	Maine >	22	63.9
	New Mexico >	23	63.7
Bottom States		Rank	Value
	Arkansas >	48	45.3
	Alabama >	49	43.3
	Delaware >	50	42.5

Source: U.S. Department of Health and Human Services, Centers for Medicare & Medicaid Services, National Plan and Provider Enumeration System, September 2024

Dental Access in Maine

Dental Care Mean Travel Time

- Created via insurance claims
- Does not include MaineCare new adult dental benefit or self-pay patients



Maine CDC's School Oral Health Program

Our **MISSION** is to partner with schools and providers to offer **preventive oral health services** and **empowerment through education** to bridge the gap between the oral health care system and Maine's students.

Our **VISION** is *equitable access to oral well-being*.



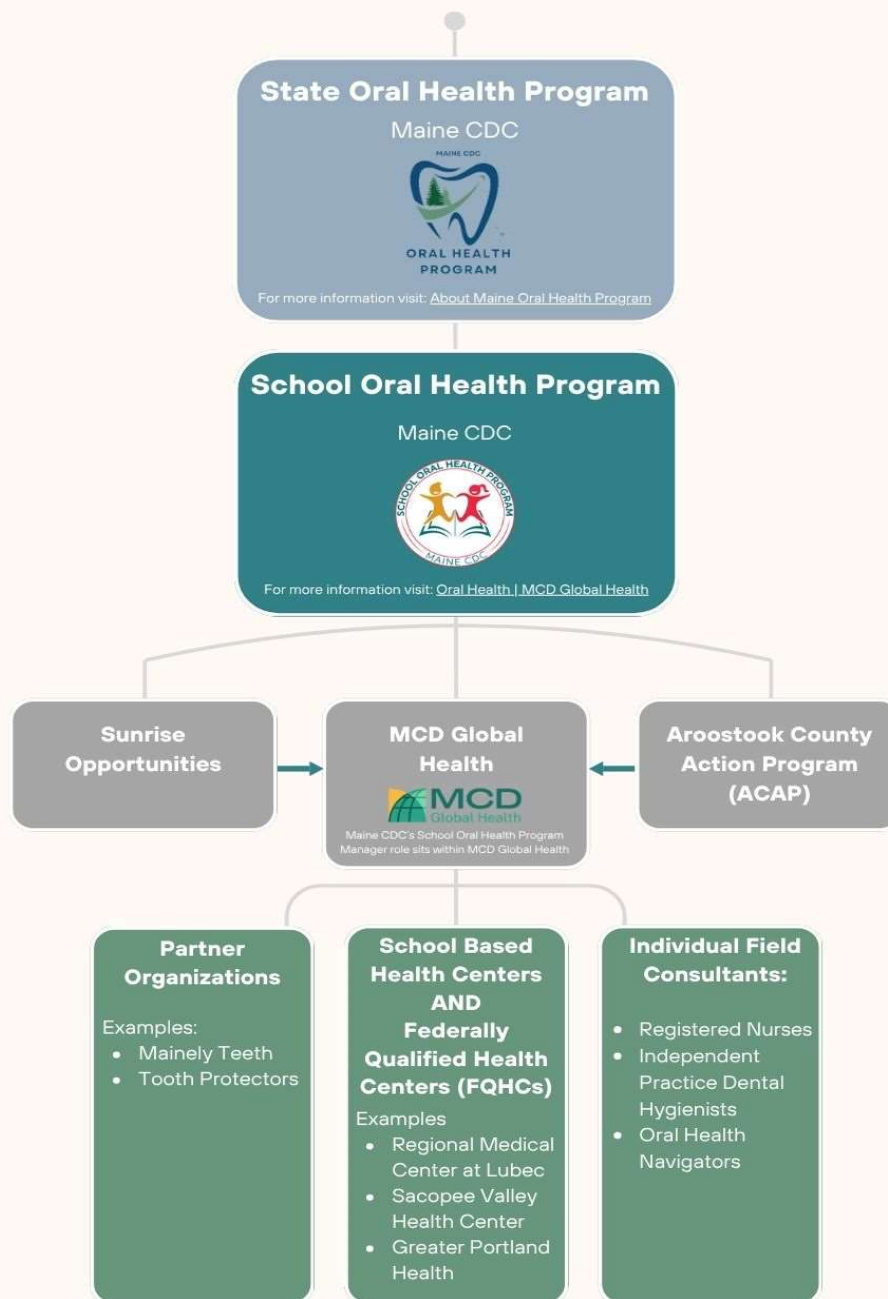
<https://www.MaineSOHP.org->

****All SOHP services are free of charge and provided at no cost to Maine students.****



MAINE CDC'S SCHOOL ORAL HEALTH PROGRAM

ORGANIZATIONAL CHART



NOTE:

Not all school oral health providers are partnered with the Maine CDC School Oral Health Program (SOHP). Be sure to ask your provider if they partner with the SOHP. If they do not partner with us, we would like to change that. Please contact the SOHP.

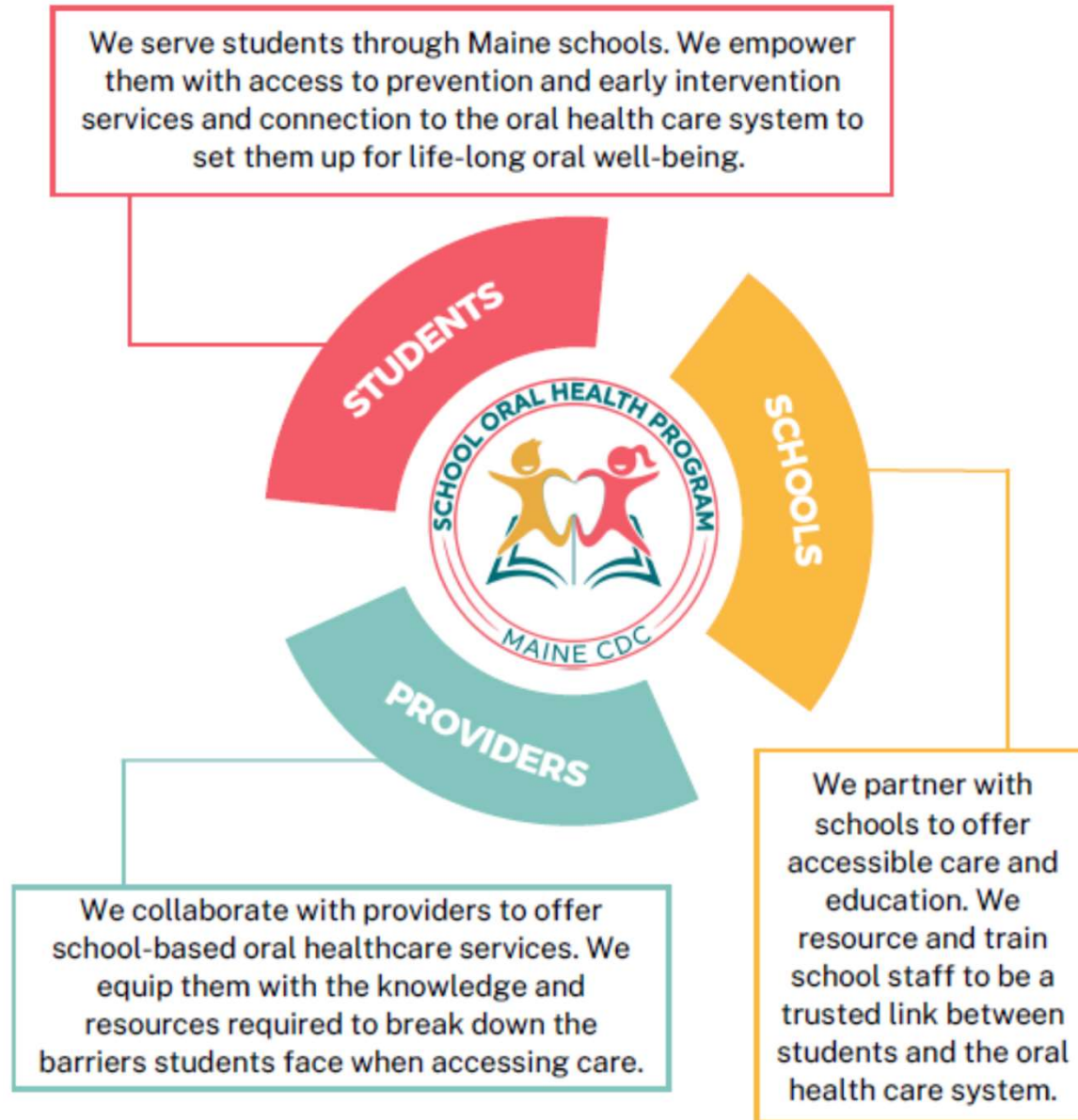
SOHP Contact Information:

Email:

SOHP@mcd.org

Stakeholders

Maine CDC School Oral Health Program



Strategies

Maine CDC School Oral Health Program

60% PREVENTION

We support preventive services including oral health screenings, fluoride varnish, sealants, and silver diamine fluoride (SDF). We train and support dental hygienists, school nurses, and other health providers to offer these services in the school setting.

20% EDUCATION

We empower students, families, and school staff through knowledge and understanding of oral health as a key part of overall health.

20% ASSESSMENT

Outcomes data collected on who we serve informs programmatic decisions and advancement for oral health efforts in Maine.



Programmatic Goals

Maine CDC's School Oral Health Program

These programmatic goals stem from our three strategies.

	PREVENTION	EDUCATION	ASSESSMENT
Focus Areas	Year 1	Year 2	Year 3
Define Enrollment Tiers	Build out tiers	Pilot tiers	Evaluate
Increasing School Enrollment	Define enrollment metrics Build communications, outreach & onboarding protocol	Refine communication, outreach & onboarding protocol	Evaluate enrollment metrics
Educational Materials	Hire contractor Plan phases & budget Develop phase 1	Pilot phase 1 Fund phase 2	Evaluate & update Phase 1 Develop phase 2
Refine & Improve Data Collection	Retreats to design & build	Evaluate & update expansion	Evaluate
Training	Develop and rollout	Refine and expand training programs	Evaluate Training

School-Based Oral Health Service Tiers



TIER 1

Oral Health Screening
Fluoride Varnish

TIER 2

Oral Health Screening
Fluoride Varnish
Advanced Prevention
Early Intervention

TIER 3

Oral Health Screening
Fluoride Varnish
Advanced Prevention
Early Intervention
Dentist Examination

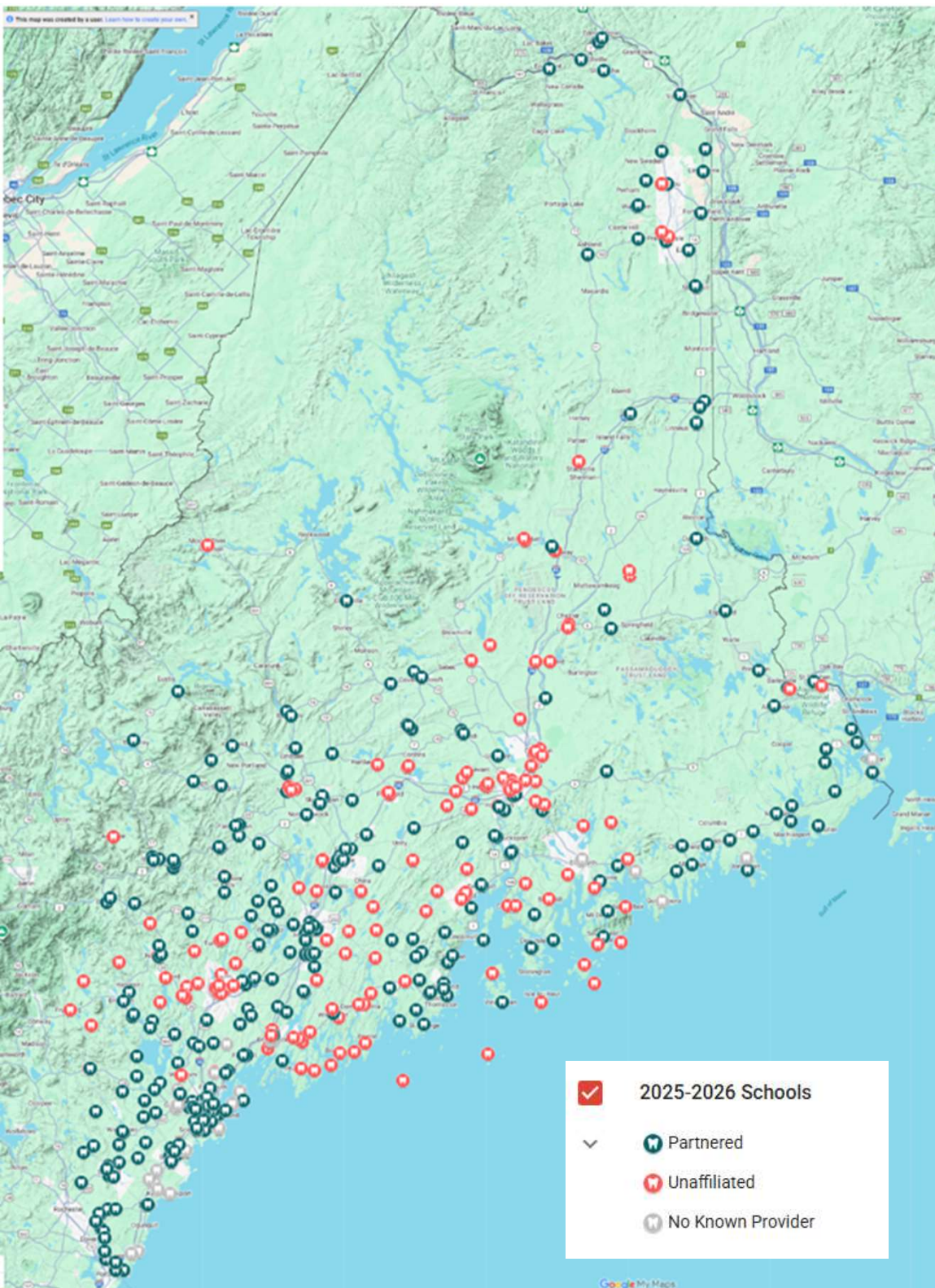
***Foundational Services:** Oral Health Screening, Fluoride Varnish

***Advanced Prevention:** Cleanings, Sealants

***Early Intervention:** Caries Arrest, Silver Diamine Fluoride (SDF)

***Dentist Examination:** In-person or Teledentistry, X-rays, Treatment Planning

***Subject to availability**



Maine CDC School Oral Health Program Enrollment Mapping

[School Oral Health Program Enrollment Map 2025-2026 SY](#)

← Lubec Consolidated School →

School Name
Lubec Consolidated School

County
Washington

SAU
RSU 85/MSAD 19

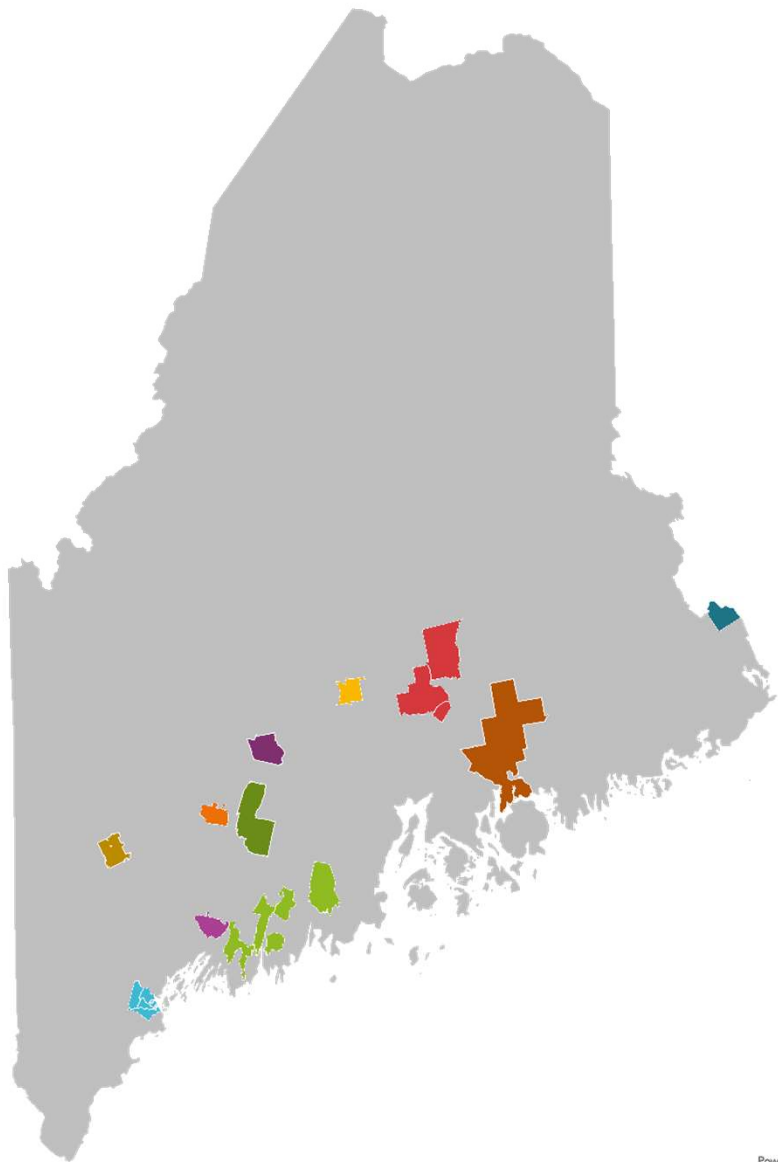
Address
41 Main Street, Lubec, ME 04652

Provider
RMCL

Status
Partnered

All School Based Health Centers in Maine

2024-2025 School Year



Greater Portland Health	Casco Bay High School Deering High School King Middle School Portland High School South Portland High School Westbrook High School <i>South Portland Middle School</i>
Hometown Health	Nokomis Regional High School
Lincoln Health	Boothbay High School Medomak Valley High School Lincoln Academy Morse High School <i>Wiscasset Middle High School</i>
RSU #38	Maranacook Community Schools
MSAD #75	Mt. Ararat High School
Penobscot Community Health Center	Brewer Community School Brewer High School Bangor High School James F. Doughty Middle School William S. Cohen Middle School Leonard Middle School* Old Town Elementary School Old Town High School*
Calais School Department	Calais Middle and High School
Western Maine Pediatrics	Oxford Hills Comprehensive High School Oxford Hills Middle School
Augusta School District	Cony High School
Bucksport Regional Health	Ellsworth High School
HealthReach	Lawrence High School

Non-state funded schools shown in grey italics

**Indicates school provides mental health services only with medical services referred to Old Town Elementary School*

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Maine Center for Disease Control and Prevention

All School Based Health Centers in Maine

2024-2025 School Year

ALL SBHC'S IN MAINE 2024-2025 CALENDAR YEAR		
Health Center	School	Also served by the SOHP
Greater Portland Health	Casco Bay High School	YES
	Deering High School	YES
	King Middle School	YES
	Portland High School	YES
	South Portland High School	YES
	Westbrook High School	YES
	South Portland Middle School	YES
Hometown Health	Nokomis Regional High School	NO
Lincoln Health	Boothbay High School	YES
	Medomak Valley High School	YES
	Lincoln Academy	YES
	Morse High School	YES
	Wiscasset Middle High School	YES
RSU #38	Maranacook Community Schools	YES
MSAD #75	Mt. Ararat High School	YES
PCHC	Brewer Community School	YES
	Brewer High School	YES
	Bangor High School	NO
	James F. Doughty Middle School	NO
	William S. Cohen Middle School	NO
	Leonard Middle School*	NO
	Old Town Elementary School	NO
	Old Town High School*	NO
Calais School Department	Calais Middle and High School	NO
Western Maine Pediatrics	Oxford Hills Comprehensive High School	YES
	Oxford Hills Middle School	YES
Augusta School District	Cony High School	YES
Bucksport Regional Health	Ellsworth High School	NO
HealthReach	Lawrence High School	YES

Total Schools	29
Enrolled in SOHP	20
Not Enrolled	9

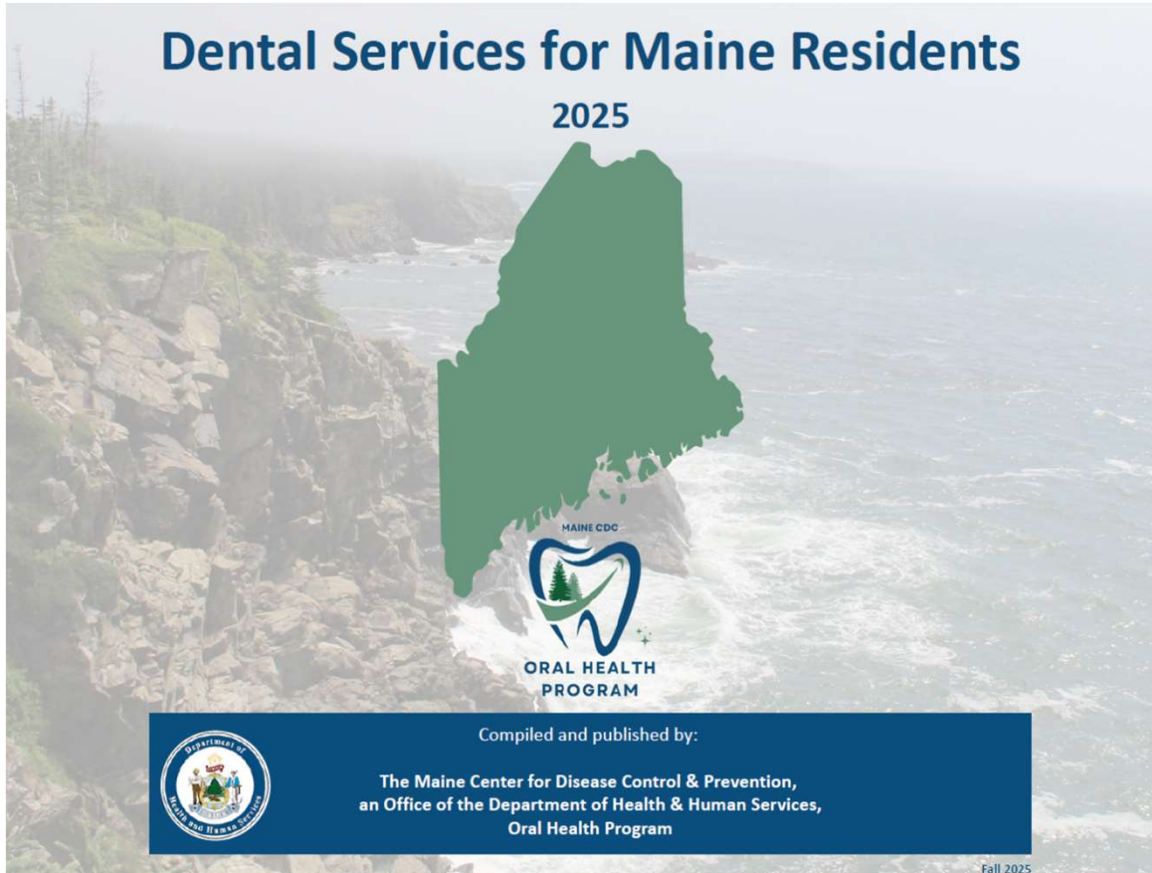
Maine CDC School Oral Health Program

The following table shows data collected on the students seen through the Maine CDC School Oral Health Program.

	Fall 2019	Spring 2020	Fall 2020	Spring 2021	Fall 2021	Spring 2022	Fall 2022	Spring 2023	2023-2024 School Year	2024-2025 School Year
Schools Visited	183	24	96	118	129	152	160	158	229	365
Screening Completed	11,323	1,836	5,345	5,877	7,042	9,522	9,555	8,863	13,287	19,532
Untreated Decay	20.25%	16.95%	19.78%	19.81%	24.41%	20.67%	22.61%	24.81%	33.03%	30.63%
Urgency: Early	11.87%	15.14%	12.70%	11.57%	15.32%	15.20%	16.43%	19.07%	26.59%	26.39%
Urgency: Immediate	2.91%	2.78%	3.70%	3.66%	5.69%	4.74%	6.20%	5.74%	6.49%	3.52%



State of Maine Dental Directory



STATE OF MAINE DENTAL DIRECTORY



SCAN HERE



This directory serves as a resource for both consumers and health and social service providers who are assisting clients without a regular dentist in accessing the dental care they need.

State of Maine Dental Directory

Dental Centers and Clinics

County	Name, Address, Phone Number, Website	Hours of Operation	Services Offered	Population Served	Insurance Accepted
All Counties (Mobile)	Mainly Teeth 117 Auburn St, Portland, ME (207) 808-9498	Mon – Thu: 8 AM – 5 PM	Preventive Restorative Emergency Specialty	All populations Portland = All Ages Windham = Children	MaineCare Private Insurance
Androscoggin	Community Dental - Lewiston 177 Main St, Lewiston, ME (207) 777-7442	Mon – Fri: 7 AM – 5:30 PM	Preventive Restorative Emergency	All populations	MaineCare Private Insurance Sliding Fee
Androscoggin	UMA – Lewiston 51 Westminster St, Suite 162, Lewiston, ME (207) 753-6600	Mon – Fri: 8 AM – 4 PM Sept – May	Preventive Restorative	All populations	None Services are affordable
Androscoggin	DFD Russell Medical Centers 180 Church Hill Rd, Leeds, ME (207) 524-3501	1 Friday per month	Preventive	All populations DFD primary care patients only	MaineCare
Androscoggin	DFD Russell Medical Centers 7 Main St, Turner, ME (207) 524-3501	1 Friday per month	Preventive	All populations DFD primary care patients only	MaineCare
Aroostook	Fish River Rural Health - Eagle Lake Health 10 Carter St, Eagle Lake, ME (207) 444-3012	Mon – Thu: 7 AM – 5:30 PM	Preventive Restorative	All populations	MaineCare Medicare Private Insurance Sliding Fee
Aroostook	Fish River Rural Health – Madawaska 309 Saint Thomas St,	Mon, Tue, Thu, Fri: 7 AM – 5:30 PM	Preventive Restorative	All populations	MaineCare Medicare

EXAMPLE

MaineCare Provider Directory

[Link](#)



The above link and QR code will take you to the MaineCare Provider Directory search. This directory provides information for not only dental providers who accept MaineCare, but other health providers who accept MaineCare as well. You can filter by specialty, city, county, and zip code. Please note that sometimes search results take a few minutes to load.

Collaboration with MaineCare

- MaineCare Dental Subcommittee
- Medicaid Oral Health Workforce Implementation project partner
- 2025 Dental Directory Update
- School Oral Health Program
 - Provides support for providers and schools
 - Care coordination (*when available*)
 - Resources

Opportunities to Support Access to Dental Services

- Expand school-based oral health services
- Mobile programming
- Expand Minimally Invasive Care models
 - Primary care
 - Interdisciplinary approach
 - Empowerment of oral health knowledge
- Teledentistry
- Support for highest scope of practice
 - Registered Dental Hygienist to Independent Practice Dental Hygienist (IPDH)
- Multigenerational re-educational approach



Contact Us

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Additional Resources

- [Map of Health Professional Shortage Areas: Dental Care, by County, July 2025 - Rural Health Information Hub](#)
- [ADADental Workforce Shortages Labor Market.pdf - Google Drive](#)
- [The Financial and Policy Impacts of the COVID-19 Pandemic on U.S. Dental Care Workers - AIDPH - The American Institute of Dental Public Health](#)
- [Minimally Invasive Care | CareQuest Institute for Oral Health](#)
- [Oral Health in Schools](#)
- <https://data.hrsa.gov/topics/health-workforce/program/field-strength>

Potential list of recommendations

MaineCare

- The staff at the Office of MaineCare has done an incredible job trying to support dental providers over the past 18 months. However, significant reform in the enrollment process, claims process, and reimbursement rates, as well as a robust recruitment effort must occur within MaineCare to support an adequate framework of providers, both existing and future, with special attention paid to specialists. (Cahill)
- State Dental licensing fees should either be subject to a surcharge for failure to enroll in Mainecare, or a discount for enrolling in Mainecare. The surcharge may be waived if the dentist commits to practice in an under served area. (Bailey)
- The reimbursement rate for dentistry has consistently been inadequate to cover the costs associated with care, which is the underlying cause of this dilemma. It is unreasonable to expect or demand that dental providers in Maine treat patients at a financial loss. Any newly licensed provider who treats a substantial number of MaineCare patients will encounter significant challenges in maintaining their financial solvency with the current reimbursement rate. Therefore, increasing the number of providers with an alternate pathway for licensure will not address the care shortage in Maine. We must also prioritize the reimbursement rate discrepancy. (Daigle)
- Take a closer look at MaineCare's enrollment process and reimbursement structure to help entities remain competitive in attracting highly qualified professionals. Improved MaineCare reimbursement rates would allow for higher wages, which in turn could draw from a larger pool of skilled providers. While this is certainly a complex issue, our discussions consistently returned to the same point: MaineCare, in its current form, is not working effectively for providers or patients in Maine (Dempsey)

Limited license (similar to MA)

- Passage of [LD 1615](#) as originally printed and referred to the Joint Standing Committee on Health Coverage, Insurance and Financial Services on April 11, 2025 *with* modifications. Modifications include naming and defining a “limited dentist” (rather than adjunct), remove “board-approved setting” requirement. (Loring and Adeloye)
- If the Commission recommends a limited license modeled on the Massachusetts model, the limited license should provide for a clear pathway to full licensure, substituting supervised practice for educational requirements. (Bailey)
- *Note* that Dempsey and Cahill recs specifically oppose a limited license.

Licensing (current system):

- Strengthen efforts to enhance awareness and understanding of the current educational equivalent licensure pathway. The MDA stands ready to promote this within all publications and our website. Perhaps this is also something the MBDP can do as well. (Cahill)

- Increased collaboration opportunities between Maine Board of Dental Practice and applicants. Includes preliminary review for best pathway, challenges or concerns, answer questions, include potential employer or representative. (Loring and Adeloye)
- Amend the requirements for licensure by endorsement. (Daigle)

Dental Board administration:

- Request that the Board of Dental Practice Board adopt by rulemaking clarification on how it evaluates “educational equivalent of a doctoral degree in dentistry” to reflect the Board’s current process of consideration of third-party educational evaluation reports, additional academic dental degrees earned and postgraduate clinical dental training obtained. (Vaillancourt)
- The legislature should pass a resolve for the Maine Board of Dental Practice to promulgate rules for licensure by endorsement pursuant to 10 MRS section 8003-H within 6 months, initial rules being major substantive. As part of the rules, the Board should establish and maintain a public list of States that have met the criteria for substantially equivalent licenses and thereby qualify for Licensure by endorsement pursuant to this section. (Bailey)

Workforce data:

- Request that the Board of Dental Practice be identified as a pilot project in the collection of workforce data at the time of renewal for both dentists and dental hygienists licensure categories. Part of the request would be to explore grant funding and/or funding for an FTE dedicated to data analytics to assist the Board. The collection of workforce data is authorized pursuant to 32 M.R.S. § 18341(1) which provides: “An applicant seeking an initial or a renewal license must submit an application with the fee established by rule adopted by the director and any other materials required by the board. (Vaillancourt)

UNE Advanced Standard Track:

- Encouragement of more slots be dedicated to the advanced degree for internationally trained dentists at the University of New England (Cahill)

Additional recommendations (Dr. Badamia):

- 1) Create a Pathway for Foreign Trained dentist with CODA Accrediated US dental specialty Education to expand the access of oral health.
- 2) Create a pathway for licensure by credentialing - for foreign-trained dentist with CODA-accredited Dental Speciality - US education.
- 3) Create a limited license dentist pathway for those foreign trained dentists who does not have US CODA accredited education (Speciality or DDS/DMD)

To: The Commission to Expand Access to Oral Health Care by Studying Alternative Pathways for Obtaining a License to Practice Dentistry

As non-profit dental practices, we have been closely following the discussion regarding potential changes to dental licensure, as we share the goal of expanding access to oral health services in Maine. However, our organizations have concerns about moving forward with the creation of an additional license type.

We recognize that current licensure pathways for internationally trained dentists are generally consistent with those in most other states. We are encouraged that UNE College of Dental Medicine offers an advanced standing program and that existing licensure types and educational partnerships are being utilized to help address Maine's provider shortage. Our practices currently employ a diverse mix of providers—including Expanded Function Dental Assistants, Independent Practice Dental Hygienists, Dental Therapists, UNE Dental Externs, and Tufts University Residents—to deliver high-quality care in our communities.

A significant concern regarding the proposed new license type is the supervision and training requirement. Adding a new provider type may increase the burden on our already strained clinical staff, who would be responsible for providing both clinical and didactic oversight. Many of our offices are already operating at or near full capacity and may not have the staff or infrastructure to accommodate additional trainees. In addition, many of our newer or younger dentists may not yet be qualified to serve in a supervisory role.

Over the past several years, our organizations have focused on improving access to care by maximizing each provider's scope of practice and by developing innovative care delivery models tailored to community needs. These ongoing efforts may provide more sustainable solutions than adding a new, untested license pathway.

Speaking personally, as a general dentist and clinical director, I have seen that the cases we encounter in public health settings are often medically and dentally complex—even for seasoned clinicians. I believe that maintaining rigorous, standardized pathways to licensure is essential to ensure that all providers meet a high minimum standard of professional training.

We appreciate your time and consideration of our perspectives on this important matter.

Sincerely,

Kailee Jorgenson, DMD — Clinical Director, *Mainely Teeth*

Amber Lombardi, IPDH — Chief Executive Officer, *Mainely Teeth*

Melissa Watson — Executive Director, *Community Dental*

Barbara Covey — Board President, *Waterville Community Dental Center*

Bonnie Vaughn — Executive Director, *Kennebec Valley Family Dentistry*