SUBJECT: Defining oral and maxillofacial surgery in Dental Practice Act

COMMITTEE: Public Health — favorable, without amendment

VOTE: 6 ayes — Berlanga, Hirschi, Glaze, Janek, Maxey, Rodriguez

0 nays

3 absent — Coleman, Delisi, McDonald

WITNESSES: For — R. Lynn White, DDS, Texas Society of Oral and Maxillofacial

Surgeons; Sally Hanners, Texas Dental Association

Against — None

DIGEST: HB 856 would define in the Dental Practice Act the dental specialty of oral

and maxillofacial surgery. The specialty would include the diagnosis, treatment and surgery of the diseases, injuries and functional and aesthetic

defects of the mouth, face and jaw.

SUPPORTERS

SAY:

A statutory definition of the dental specialty of oral and maxillofacial surgery would safeguard the authority of the Texas Board of Dental Examiners to regulate this specialty and would clearly recognize the specialty as within the scope of dentistry.

The dental board had already recognized the specialty by rule, using the definition developed by the American Dental Association (ADA) Commission on Dental Accreditation. However, when the Legislature allowed the board to "sunset" for part of 1994, the rules also lapsed during that time. This jeopardized the legal status of oral surgeons on hospital staffs. HB 856 would simply place into law a definition developed by the American Dental Association and adopted by the dental board.

Some insurers are reluctant to pay for, or fully reimburse, oral or maxillofacial surgical services not rendered by a physician. Also, some physicians are reluctant to recognize the training and background of dentists who are oral and maxillofacial surgeons. A statutory definition would clarify the state's approval of qualified dental specialists performing oral

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and maxillofacial services and might improve health and dental insurance benefits for those services when they are performed by a dentist.

Surgical services performed by dentist specialists should be covered by insurance and managed care plans to the same extent as those by physician specialists. Oral surgeons are well trained by nationally recognized programs. A dentist must successfully complete a four-to-six year ADA-accredited residency program in order to perform oral surgery. These programs also include rotations in medical areas such as internal medicine and general surgery, giving dentists an appreciation of complex medical problems requiring physician assistance.

The ADA Commission on Accreditation is an approved accrediting body of the U.S. Department of Education. The national organization that accredits hospitals, the Joint Commission on Accreditation of Health Care Organizations, defines a qualified oral surgeon as an individual who has successfully completed a postgraduate program in that specialty.

Public health and safety is also protected by other processes in the health care system. Hospitals carefully scrutinize the competency and credentials of dentists seeking staff privileges. Malpractice insurance carriers only offer insurance to competent providers. ADA rules prohibit dentists from announcing themselves as specialists if they have not successfully completed an approved training program.

## OPPONENTS SAY:

Dentists who perform oral surgery cannot be presumed to be as competent or qualified as physician specialists, such as plastic surgeons and ear, nose and throat specialists, in surgery on the mouth, jaw and face. Placing the proposed definition into the Dental Practice Act would unduly expand dentists' authorized scope of practice.

Without some requirements for special training in the law, public safety could be jeopardized. The definition alone does not require any special training, certification, examination or other standard to verify the competency and qualifications of a dentist who wants to perform surgery on the face, jaw and mouth.

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Many oral surgeons also have a medical degree, clearly indicating qualified training and competency in this surgical area. Dentists who want to perform oral surgery and to get more health insurance reimbursement and recognition of their qualifications should also have a medical degree.

OTHER OPPONENTS SAY: Putting the definition of oral and maxillofacial surgery in the Dental Practice Act may lend more credibility to the competence of dentists working as oral surgeons, but by itself would not specifically allow health insurance to cover dental services. A statutory definition would only provide the foundation for other statutory changes that would be needed to expand requirements for insurance coverage to include surgical procedures performed by dentists.