

Alaska	Dental Health Aide Therapist	Minnesota	Dental Therapist/Advanced Dental Therapist	Maine	Dental Hygiene Therapist	Vermont	Dental Therapist
Date passed	Started practice in 2004	Date passed	2009	Date passed	2014	Date passed	2016
Educational Requirements	Associate degree (or 2-year DHAT Education Program)	Statutory Educational Requirements	DT must complete bachelor's or master's level DT program. ADT must complete master's DT program	Statutory Educational Requirements	Bachelor's degree (must also have a Bachelor's degree in dental hygiene)	Statutory Educational Requirements	Graduate from CODA-accredited institution in dental therapy
Licensing requirement	DHATs are certified by the Alaska Native Tribal Health Consortium, part of the federally-sanctioned AK tribal health system	Licensing requirement	DTs must be licensed. ADTs must first be licensed as DTs then certified as ADTs after 2,000 hours	Licensing requirement	Must be a licensed dental hygienist	Licensing requirement	Must be a licensed Vermont dental hygienist
Education location(s)	Ilisagvik College, ANTHC Training Center	Education location(s)	University of Minnesota; Metropolitan State University in partnership with Normandale Community College (both offer combined bachelors in DT and masters in ADT)	Education location(s)	TBD	Education location(s)	Vermont Technical College
# hours before practice	After graduation, 3 months or 400 hours, whichever is longer	# hours before practice	None for DT. 2,000 hours for ADT certification	# hours before practice	2,000	# hours before practice	1,000
# of DTs a dentist can supervise	no limit	# of DTs a dentist can supervise	5 or fewer	# of DTs a dentist can supervise	no limit	# of DTs a dentist can supervise	2
Supervision level	General supervision*	Supervision level	ADTs: general. DTs: restorations under indirect.*	Supervision level	Direct for restorative procedures. General for certain preventive procedures as outlined by the state for hygienists.*	Supervision level	General *
Scope of practice	Consistent with CODA, plus pulpotomies on primary teeth, and extractions and pulpal therapy of permanent teeth. Collaborative management agreement specifies any restrictions on scope set by supervising dentist	Scope of practice	Consistent with CODA, plus pulpotomies on primary teeth; nonsurgical extractions of permanent teeth (just ADTs). For DTs & ADTs, collaborative management agreement specifies any restrictions on scope set by supervising dentist	Scope of practice	CODA plus nonsurgical adult extractions. Collaborative management agreement(CMA) specifies any restrictions on scope of practice called for by supervising dentist	Scope of practice	Consistent with CODA, plus pulpotomies on primary teeth, extractions of certain permanent teeth. Collaborative management agreement specifies any restrictions on scope of practice called for by supervising dentist
Prescribing authority	Dispense antibiotics, anti-inflammatories	Prescribing authority	Dispense antibiotics, anti-inflammatories; <i>No opioids</i>	Prescribing authority	Dispense antibiotics, anti-inflammatories, antimicrobials	Prescribing authority	Dispense antibiotics, anti-inflammatories, analgesics; <i>No opioids</i>
Extractions of permanent teeth	Yes, nonsurgical removal	Extractions of permanent teeth	Yes, nonsurgical removal; only for ADTs	Extractions of permanent teeth	Yes, nonsurgical removal	Extractions of permanent teeth	Yes, nonsurgical removal
Restrictions on patient pop	Serve only Alaska Native communities	Restrictions on patient pop	Dental shortage areas, FQHC, medical/assisted living, public health clinics; or 50% on Medicaid/CHIP/underserved (i.e. uninsured/low-income, disability, chronic condition, military, veterans hospitals)	Restrictions on patient pop	Dental shortage areas, hospitals, public schools, FQHCs and other public health and underserved areas; or 50% of the patients are on Medicaid or are underserved adults	Restrictions on patient pop	None. After two years, recommendations will be made as to the geographic distribution of dental therapists
Reciprocity for DTs trained in other states	No	Reciprocity for DTs trained in other states	No	Reciprocity for DTs trained in other states	Yes, if meet certain criteria	Reciprocity for DTs trained in other states	Yes, if meet certain criteria
	<i>* General supervision: Supervising dentist authorizes standing orders for DHAT to practice in a location away from the dentist. Dentist consults through phone and telehealth technology.</i>		<i>*General supervision: dentist does not have to be on location. Indirect supervision: dentist is in office, authorizes procedures</i>		<i>*Direct supervision: Supervising dentist must be physically present when DT is practicing. General supervision: Supervising dentist does not need to be present when DT is practicing.</i>		<i>*General supervision: dentist does not need to be on site when DT is practicing.</i>

Arizona	Dental Therapist
Date passed	2018
Educational Requirements	Graduate from a CODA accredited dental therapy program, no degree requirements/program length specified in statute
Licensing requirement	Must be a licensed dental hygienist—not required to be licensed in Arizona
Education location(s)	TBD—Possible Maricopa & Pima Community Colleges; Northern Arizona University
# hours before practice	1,000 hours for CPA; no preceptorship for DTs working under direct supervision
# of DTs a dentist can supervise	Unlimited under direct supervision—no more than 4 CPAs per licensed dentist
Supervision level	Under CPA, supervising dentist does not need to be present. Dentist authorizes standing orders for DT to practice in a location away from the dentist.
Scope of practice	CODA plus full hygiene scope, limited extraction of permanent teeth (CPA requires direct supervision), suturing, spacers and athletic mouthguards. CPA specifies any further scope restrictions.
Prescribing authority	Dispensing authority—antibiotics and anti-inflammatory medications, analgesics. No opioids.
Extractions of permanent teeth	Yes, non-surgical removal
Restrictions on patient pop	No restrictions on patient populations, only on treatment settings: IHS, Urban Indian Health Programs, Tribal 638's, FQHCs, CHCs, non-profits, private practice dental offices that treat CHC patients of record.
Reciprocity for DTs trained in other states	Yes, for only those trained in a CODA accredited dental therapy program. Reciprocity for hygiene license.