ADA American Dental Association®

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February 24, 2026

The Honorable Donna Bailey
The Honorable Kristi Mathieson
Chairs, Committee on Health Coverage, Insurance, and Financial Services
Cross Building, Room 220
Augusta, ME 04333

RE: Opposition to LD 2206

Dear Chairs Bailey and Mathieson:

As the leading authority on oral health in the United States, the American Dental Association (ADA) is committed to increasing access to care for all Americans. This mission requires creative thinking and a willingness to consider new ideas while holding fast to our commitment to patient safety and providing high quality care. Unfortunately, while well -intentioned, LD 2206 fails to meet those high standards.

Dental education in the United States takes place at schools accredited by the Commission on Dental Accreditation (CODA). Accreditation ensures that the programs abide by the highest standards of educational quality and patient safety. Recent suggestions during debate on this bill that CODA accreditation is somehow unimportant, or that dentistry should not require a doctorate, are irresponsible and suggest that patients should settle for providers whose education has not been fully vetted. The ADA cannot support such a position.

Of particular concern is that LD 2206 does not require an internationally trained dentist to provide any proof of equivalency of their education, nor must they have been in practice for a defined amount of time. Simply accepting a dental diploma from a non-CODA accredited school, or not requiring graduation from a CODA-accredited advanced standing program, means that Maine patients face the real possibility of being treated by a dentist whose education does not meet standards acceptable in the United States.

Dental degrees awarded outside of North America are often bachelor's degree programs, meaning that an undergraduate education followed by a one-year preceptorship is sufficient in those countries. In contrast, CODA standards require a bachelor's degree, followed by a doctorate from an accredited dental school. While approximately 80%[1] of dentists are general practitioners, the remainder go on to specialize in areas like orthodontia, oral surgery, or pediatrics. This additional education can range from two to four years beyond dental school.

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[1] ADA Health Policy Institute, August 2025. *The U.S. Dentist Workforce.* https://www.ada.org/-/media/project/ada-organization/ada/ada-org/files/resources/research/hpi/us_dentist_workforce_2025.pdf?rev=d8d9c124b2534e5da1b2bb606668459b&hash=75217545D9329C466E0DBDD330553958

Beyond the lack of educational standards, LD 2206 uses terminology that could unintentionally cause confusion among patients and providers alike. An associate dentist is a term already in common usage, referring to a dentist who is an employee of a practice and is not the owner. Creating a separate “associate dentist” license could lead to significant misunderstanding for the public and among members of the dental team. The term should be adjusted to reflect the license’s temporary status.

The ADA Comprehensive Policy on Dental Licensure does support pathways for dentists trained outside the United States to become licensed but requires that those dentists undergo additional education before being allowed to take board and clinical exams. This can include graduation from a CODA-accredited advanced standing program leading to a DDS or DMD degree, or graduation from a CODA-accredited advanced dental education program of at least two years. A new policy adopted by the ADA House of Delegates in 2024 does support states allowing for dentists trained outside the United States to be licensed to practice hygiene, subject to state licensing board requirements. Several states, including Massachusetts, Connecticut, and Vermont, have enacted such policies within the last year. We encourage the Maine Legislature to consider such an option in their deliberations.

While we respect and appreciate the work of the Commission to Expand Access to Oral Health Care by Studying Alternative Pathways for Obtaining a License to Practice Dentistry, the bill as introduced by the committee creates real concerns for provider quality and patient safety, and as such, we oppose the adoption of LD 2206 as introduced.

Sincerely,

Richard J. Rosato, D.M.D.
President, American Dental Association

Thomas M. Paumier, D.D.S.
President-elect, American Dental Association

Elizabeth A. Shapiro, D.D.S., J.D.
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