



**Maine**  
DENTAL HYGIENISTS'  
ASSOCIATION

Senator Bailey, Representative Matheson, and Members of the Joint Health Coverage, Insurance, and Financial Services Committee,

My name is Traci Dempsey, and I am the President of the Maine Dental Hygienists' Association. I am testifying in opposition to LD 1615 on behalf of the Maine Dental Hygienists' Association.

Thank you for the opportunity to submit testimony regarding the proposal to allow internationally trained dentists to obtain licensure in Maine without completing education accredited by the Commission on Dental Accreditation (CODA). I respectfully urge you to oppose this bill for the following reasons:

CODA accreditation ensures that all dentists practicing in the United States meet rigorous, standardized training criteria essential for patient safety. Dentistry is a highly technical and invasive field where even small errors can lead to serious consequences, including infection, permanent damage, or misdiagnosis. Allowing individuals who have not been trained under CODA accreditation standards could jeopardize the quality of care patients receive.

Dental education and practice standards vary widely across countries. While some internationally trained dentists may have strong credentials, others may have completed programs that lack the clinical hours, technology exposure, or evidence-based curriculum expected in the U.S. system. Without CODA oversight, there is no reliable way to ensure consistency in training and competency.

There are already established pathways for internationally trained dentists to become licensed in Maine, including completing advanced standing programs at CODA-accredited institutions. These programs are designed to ensure that all dentists—regardless of where they were originally trained—meet a common standard before practicing. Bypassing this process is not only unfair to those who have followed the established route, but it also dilutes the value of dental licensure in Maine.

Maine patients trust that all licensed dentists have met a nationally recognized standard of education and clinical competency. Lowering licensure standards risks eroding that trust and could open the door to increased malpractice, legal liabilities, and public skepticism about the professionalism of our dental workforce.

If the goal is to address workforce shortages in rural or underserved areas, there are better ways to do so—such as expanding loan repayment programs, incentivizing in-state dental education, or tax incentives to attract providers to Maine—without compromising educational standards.



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In conclusion, while we recognize the need for a robust and diverse dental workforce, this must not come at the expense of quality, safety, and public confidence. We strongly urge you to maintain the requirement that all dentists licensed in Maine graduate from CODA-accredited programs or complete appropriate equivalency training that ensures they meet U.S. standards of care.

Thank you for your time and consideration.

Respectfully,

Traci Dempsey

President

Maine Dental Hygienists' Association

Bath, Maine