



ADVOCACY TOOLKIT

# Teledentistry Regulation and Policy Guidance

**A Toolkit for Dental Boards, Policymakers, Providers, and Oral Health Care Advocates for Promoting Access and Quality Care Through Teledentistry**

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# Introduction

## Teledentistry offers immense potential benefits for the creation and maintenance of oral health and the provision of oral health care.

It can help providers of dental care expand the reach of their services to populations of people who face barriers receiving dental care in traditional office and clinic-based delivery systems. It can enhance provider-to-provider communication and collaboration, reduce time and transportation expenses for providers and patients, facilitate monitoring of chronic or pre- or post-care conditions, and lower the overall cost of providing dental care. It can also facilitate reaching certain groups of people early in the disease process, therefore enhancing prevention and early intervention strategies and lowering the cost of neglected dental disease.

Teledentistry has been used in its various forms for almost a century.<sup>1</sup> However, recent advances in technology, dental materials and methods, and delivery systems have created new opportunities to use teledentistry and realize its benefits.<sup>2</sup>

Teledentistry adoption has continued to expand across the country in developing systems that are reaching groups that traditionally face barriers to having good oral health.<sup>3</sup>

At the same time that awareness about teledentistry technology and use is increasing, there are also increasing efforts to adopt policies related to teledentistry. The current

**Recent advances in technology, dental materials and methods, and delivery systems have created new opportunities to use teledentistry and realize its benefits.**

1 Sharat Chandra Pani, "The Role of Teledentistry in Improving Access to Care for Patients with Special Health-Care Needs," *Saudi Journal of Oral Sciences* 9, no. 1 (Jan–Apr 2022): 1–2, DOI: 10.4103/sjoralsci.sjoralsci\_16\_22.

2 "Policy on Teledentistry," American Dental Association, <https://www.ada.org/about/governance/current-policies/ada-policy-on-teledentistry>, accessed May 26, 2023.

3 Lampe A, Djalilova S, Glassman P, Phillips V. Improving Oral Health Using Teledentistry and Virtual Dental Homes: Concepts and Progress. *CDA Journal*. 2023 V51(1):2256035. <https://doi.org/10.1080/19424396.2023.2256035>.



national policy environment is evolving but is highly variable in the extent to which teledentistry is addressed and the specific rules that are being adopted.

This document identifies primary considerations for regulators and policymakers when considering legislation and promulgating rules and regulations regarding teledentistry — chiefly technology and scope-of-practice issues and/or payment concerns. Additionally, it contains a set of model rules

## Background

In September 2023 the American Dental Association's Committee on Dental Informatics (SCDI), which develops standards and reports to assist the dental profession with hardware and software selection; digital imaging, including radiography and photography; interoperability; electronic data storage; data security, etc., published the [American Dental Association Technical Report No. 1112:2023 on Teledentistry](#).<sup>4</sup> The report offers information on the developing field of teledentistry and oral health care systems that leverage these

based on existing rules that have been adopted in various states intended to define, regulate, or explain the use of telehealth technologies in the provision of dental care. As used in this document, "rules" refer to laws, regulations, and formal and informal guidance, provider manuals, and other communications about the use of teledentistry. This toolkit is intended as a general guide for states or regulatory agencies contemplating or promulgating rules and regulations on teledentistry.

technologies, and includes a guide for helping providers choose the right components, set goals, and build functional systems. This includes information on topics such as definitions, coding and billing, uses of teledentistry in various locations, "use cases," data storage and exchange, components, and legal and regulatory issues. More importantly, it serves as a foundation for the suggested model teledentistry rules provided in this document and as a basis for discussions on how to improve the regulatory climate for teledentistry moving forward.

# A Note for Policymakers

Typically, multiple groups and agencies have roles in creating, interpreting, or disseminating rules or information that impact the use of telehealth technologies in the provision of dental care. The overall regulatory environment is enhanced when these groups and agencies communicate and work cooperatively with other administrative agencies in determining the full policy environment related to teledentistry.

Each state's relevant regulatory bodies expect and require that services delivered using telehealth technologies adhere to all existing laws and regulations related to the provision of oral health services including those related to supervision of allied oral health personnel, protection of patient confidentiality and privacy, and infection control procedures. In addition, agencies expect that the documentation requirements and the same standards of care apply to services delivered in person as to those delivered using telehealth technologies. Regulatory bodies should minimize repetition of these rules when adopting laws, regulations, and guidance related to teledentistry and simply refer to those existing rules.

### Dental Boards

Dental boards may have jurisdiction over some areas covered in this document, but likely not all. Dental boards typically

have a role in creating, interpreting, or disseminating rules or information that impact the scope of practice of oral health personnel as well as the structure and function of oral health practices and delivery systems. Since the technology used in teledentistry-supported systems is changing rapidly, it is recommended that dental boards do not outline in detail specific technologies or how they are supported. The optimum policy environment specifies that the records, documentation, decision-making, and care practices follow the same standards whether performed in an in-person environment or using teledentistry technologies.

### Payers

There may be multiple public and private entities that pay for oral health services. These entities include Medicaid and other administrative agencies as well as commercial dental plans. They all have a role in creating, interpreting, or disseminating rules or information related to payment systems and policies that impact the provision of oral health services. The regulatory environment is enhanced when these payment systems support practice systems regulated by other agencies such as dental boards. The principle of "payment parity" specifies that if a procedure is a covered benefit in a payment system, it will be paid for without regard to the technologies used to perform the procedure.

<sup>4</sup> American Dental Association Technical Report No. 1112:2023. Teledentistry. <https://store.ada.org/catalog/ada-technical-repot-no-1112-teledentistry-e-book-126274>

# Primary Issues for Consideration

## Technology and Practice

Teledentistry is a general term that describes communication technologies that support oral health care services and management. These technologies can be used in a variety of ways, sometimes categorized as “modalities” and “use cases.” Modalities includes both real-time, synchronous, and store-and-forward, asynchronous, interactions. Use cases can vary from short problem-focused interactions to full-service community-based systems of care. Definitions of these and other terms used in teledentistry are included in the appendix to this document. More details about these categories are available in the American Dental Association’s Technical Report on Teledentistry.

Teledentistry has emerged as a promising solution for providing oral health services to patients who face significant barriers to accessing care. However, the implementation of teledentistry requires careful consideration of key issues that affect its efficacy and sustainability. One of the primary concerns that must be addressed is the policy environment related to practice and scope of practice.

To fully optimize oral health systems, the regulatory environment should support the use of teledentistry through practice and scope-of-practice rules. Restricting the type of teledentistry modality or use case may reduce the ability of providers, patients, and payers to create and realize the benefits of effective teledentistry-supported systems of care.

It is important to note that all of the relevant laws applicable to in-person care should pertain to teledentistry, and the teledentistry rules should not create statutory or regulatory restrictions based on modality or use case alone. The list of specific rules described below contains a number of recommendations related to practice and scope of practice.

## Payment

Once the rules about practice and scope of practice for using teledentistry systems have been established, it is important to ensure that available payment mechanisms support providers delivering services in those systems. Public and private entities that pay for health services must pay for covered oral health services irrespective of whether they are provided using teledentistry methodologies or in-person encounters. Failure to provide payment parity can lead to arbitrary restrictions on the use of teledentistry, which can limit access to care. Additionally, payment should not be restricted based on the modality used in teledentistry encounters. Several of the model rules describes below relate to payment and reimbursement.

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# Model Rules for Teledentistry

- 1. Public and private entities that pay for health services must pay for covered oral health services irrespective of whether they are provided using teledentistry methodologies or in-person encounters.**

**Authors' Comment:** While in-person care has been the predominant mode of dental care delivery in the past, advances in telehealth and teledentistry have created opportunities to enhance delivery systems and improve oral health outcomes. The decision about which approach to use in a specific circumstance should be made based on provider judgment about the approach that produces the best outcomes at the lowest cost in that situation and not because one approach is dictated or favored by practice or payment policy.

- 2. Public and private entities that pay for health services must pay for covered oral health services provided using teledentistry through whatever payment system the provider of those services participates in.**

**Authors' Comment:** While there are a number of reimbursement systems in use for paying providers of oral health services, practice and payment policy should fully support the use of teledentistry in all these systems. Patients should be able to experience the benefits of teledentistry-supported systems regardless of which type of payment system they are enrolled in.

- 3. Teledentistry modalities include both real-time, synchronous, and store-and-forward, asynchronous, interactions, and payment policies should not change based on a difference in modality.**

**Authors' Comment:** As described earlier in this document, there are a number of teledentistry methods and modalities that can be used to support and enhance oral health care. The decision about which approach to use in a specific circumstance should be made based on provider judgment about the approach that produces the best outcomes in that situation and not because one method is dictated or favored by practice or payment policy.

- 4. Teledentistry can be used to establish patients as a patient of the provider as well as to deliver oral health services using both synchronous and asynchronous teledentistry modalities.**

**Authors' Comment:** Teledentistry-supported systems have the ability to reach the large number of people who do not receive oral health care in the traditional dental office and clinic system. This means that providers may be able to reach people in community settings using telehealth technologies and care systems who have not previously established a patient-provider relationship. The regulatory environment must allow providers to reach people using various teledentistry modalities and establish those people

as patients in their practice or care system and provide oral health services without regard to whether the patient receives services in person or using telehealth-supported systems or which teledentistry modality is used.

- 5. Currently, in many states, a provider of dental services using teledentistry methodologies to deliver dental care is required to be licensed in the state where the patient is located at the time of the interaction. In some states, exceptions are made for consultation activities for patients who are temporarily in a different state or circumstances where the dental provider is temporarily out of the state where their practice is located, or instances where states have agreed to honor credentials from another states. States and jurisdiction are encouraged to consider flexibility in the rules in this area in such a way as to continue to expand access to care.**

**Authors' Comment:** With increasing population mobility and the capacity of teledentistry-supported systems to allow communication at a distance, there are situations where providers can interact with their patients and provide effective advice and consultation across state lines. Recognizing and allowing these types of interactions enhance the ability of providers and care systems to deliver effective oral health services..

- 6. Patients receiving dental care using teledentistry methodologies must be informed of and provide verbal or written consent to teledentistry being used in the provision of care. The patient's consent must be documented in the patient's health record.**

**Authors' Comment:** One difference between oral health services provided in an in-person environment versus using teledentistry-supported systems is that the patient may not meet or directly interact with all the oral health providers involved in their care. Therefore, it is reasonable to require that the patient be informed about their ability to seek care in an in-person environment and consent to their care, or aspects of it, being provided using a teledentistry-supported system.

- 7. Patients must be informed about their right to receive interactive communication with the dentist at the distant site upon request and receive the name and contact information for the dentist who will be participating in their care.**

**Authors' Comment:** In some teledentistry-supported systems, the patient may not have real-time communication with all providers involved in their care. It is reasonable to require that the patient be informed about which providers are going to be involved in their care, the contact information for those providers, and their ability to have a real-time interaction with those providers if they want this type of interaction.

- 8. Dentists must be allowed to perform and be paid for comprehensive or periodic examinations using telehealth technologies.**

**Authors' Comment:** Clarifying that dentists can perform and be paid for comprehensive or periodic examinations using telehealth technologies allows many people to receive oral health care and maintain their health through community sites without needing to make a trip to a dental office or clinic. This is a significant advance in the ability to reach people who do not regularly visit dental offices or clinics, provide oral health services early in the disease process, and lower the costs and consequences of oral health problems.

As explained in the American Dental Association's Policy on Teledentistry, dentists can perform comprehensive or periodic examinations using telehealth technologies.<sup>2</sup> As explained in that policy, just as it is the case with in-person examinations, the dentist may delegate the collection of records and data including radiographic and photographic images, charting of oral health findings, collection of demographic and health history information, and patient consent. However, it is the dentist's responsibility to ensure that the information needed to perform a comprehensive or periodic examination is available, determine if additional information is needed, and evaluate that information and develop a diagnosis and treatment plan.

- 9. Continuity of care requirements, including availability for emergency services, accessibility of records, and availability for ongoing services, must meet the same standards and requirements for services provided using telehealth technologies as for services provided using in-person visits.**

**Authors' Comment:** Consistent with other recommendations in this document, dental services and care delivered using teledentistry technologies must meet the same standard-of-care requirements that would be expected to be available in an in-person system of care. These include the ability to be able to receive services if an emergency situation should arise and the ability to access or transfer records.

- 10. Dental providers using teledentistry must ensure that their systems and operational protocols protect the confidentiality of the patient's health information as required by the Health Insurance Portability and Accountability Act, or HIPAA, and other applicable laws.**

**Authors' Comment:** Teledentistry-supported oral health care systems, like all other health care systems, must protect patients' information. Although most of the processes needed to do this are the same as those that are used in traditional office and clinic environment,





there are some extra steps that might need to be put into practice when the patient is outside the office. However, as described above, it is recommended that policymakers include rules about confidentiality and privacy of patients' information by reference rather than repeat these requirements in rules related to teledentistry.

**11. Dental providers using teledentistry must ensure that their systems and operational protocols can establish and verify the identity of the patient being served.**

**Authors' Comment:** As is the case with in-person care, it is important to establish the identity of any individual receiving oral health services. There may be some additional procedural steps or systems that need to be put into place when the patient is outside the office. However, as described above, it is recommended that policymakers include rules about establishing patient identity by reference rather than repeat these requirements in rules related to teledentistry.

## Additional Considerations

### Allowable Duties

The ability to reach groups of people who face barriers to accessing oral health services in traditional office or clinic-based practices is enhanced when allied personnel are allowed to engage patients in community sites, collect records as described above, and make those records available for a dentist to review prior to the patient having an established relationship with the dentist.

Also, the ability to lower the incidence and severity of dental disease for groups of people seen in community sites is enhanced when allied personnel in those sites are able to provide preventive and early intervention services in the community sites including, but not limited to, fluoride varnish, dental sealants, silver diamine fluoride, and interim therapeutic restorations, and when these are reimbursable services when delivered by allied oral health personnel in community settings.

### Follow-Up Requirements

Additionally, if requirements exist for patients seen by allied personnel in community or public health sites to have periodic examinations by dentists, the ability to provide continuous and ongoing oral health services is enhanced when this requirement can be satisfied through a teledentistry examination by the dentist using synchronous or asynchronous teledentistry modalities.

### Concerns about Fraud, Waste, and Abuse

There is no reason to expect, and there is no evidence to support, concern that fraud, waste, and abuse would be any more prevalent when oral health services are supported by teledentistry than when such services are delivered in person. Just as payment policies should adhere to the principle of "payment parity," practice policies should be based on "practice parity." This means that the same mechanisms used to monitor care systems and ensure that standards of practice are being followed should be used whether care is provided in person or supported by teledentistry.

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## Appendix: Definitions

**Asynchronous store-and-forward:** The transmission of a patient's health information from an originating site to the health care provider at a distant site without the presence of the patient.

**Distant site:** A site where a health care provider is located while providing health care services via a telecommunications system that is separate from the site where the patient is located.

**Originating site:** A site where a patient is located at the time health care services are provided via a telecommunications system or where the asynchronous store-and-forward service originates.

**Synchronous interaction:** A real-time interaction between a patient and a health care provider located at a distant site.

**Telehealth:** The mode of delivering health care services and public health via information and communication technologies to facilitate the diagnosis, consultation, treatment, education, care management, and self-management of a patient's health care while the patient is at the originating site and the health care provider is at a distant site. Telehealth facilitates patient self-management and caregiver support for patients and includes synchronous interactions and asynchronous store-and-forward transfers. Telehealth includes teledentistry.

**Teledentistry:** The use of telehealth technologies or methodologies in the delivery of oral health services.

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