

**PUBLIC HEALTH CODE (EXCERPT)**  
**Act 368 of 1978**

**333.16654 Dental therapist; scope of practice; within certain health settings.**

Sec. 16654.

A dental therapist may provide services described in section 16656 included within the scope of practice as a dental therapist and under the supervision of a dentist in any of the following health settings:

- (a) A hospital that is licensed under article 17.
- (b) A health facility or agency, other than a hospital, that is licensed under article 17 and is reimbursed as a federally qualified health center as defined in 42 USC 1395x(aa)(4) or that has been determined by the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services to meet the requirements for funding under section 330 of the public health service act, 42 USC 254b.
- (c) A federally qualified health center, as defined in 42 USC 1395x(aa)(4), that is licensed as a health facility or agency under article 17.
- (d) An outpatient health program or facility operated by a tribe or tribal organization under the Indian self-determination act, 25 USC 5321 to 5332, or by an urban Indian organization receiving funds under title V of the Indian health care improvement act, 25 USC 1651 to 1660h.
- (e) A correctional facility. As used in this subdivision, "correctional facility" means a facility or institution that houses a prisoner population under the jurisdiction of the department of corrections.
- (f) A health setting in a geographic area that is designated as a dental shortage area by the United States Department of Health and Human Services.
- (g) A school-based health center, as that term is defined in 42 USC 280h-5.
- (h) A local health department.
- (i) Any other clinic or practice setting, including a mobile dental unit, in which at least 50% of the annual total patient base of the dental therapist will consist of patients who meet any of the following:
  - (i) Are enrolled in a health care program administered by the department of health and human services.
  - (ii) Have a medical disability or chronic condition that creates a significant barrier to receiving dental care.
  - (iii) Do not have dental health coverage, either through a public health care program or private insurance, and have an annual gross family income equal to or less than 200% of the federal poverty level. As used in this subparagraph and subparagraph (iv), "federal poverty level" means the poverty guidelines published annually in the federal register by the United States Department of Health and Human Services under its authority to revise the poverty line under 42 USC 9902.
  - (iv) Do not have dental health coverage, either through a state public health care program or private insurance, and whose family gross income is equal to or less than 200% of the federal poverty level.

**History:** Add. 2018, Act 463, Eff. Mar. 27, 2019

**Popular Name:** Act 368