The Texas Dental Association (TDA) is your constant advocate—standing up for Texas dentists every single day. Year-round, we work side by side with lawmakers, state agencies, and decision-makers to protect your profession and the patients you serve. But when the Legislative Session comes around every two years, TDA has its biggest opportunity to make your voice heard and influence the laws that shape dentistry in Texas.

Below, you'll discover how key legislative issues affect you as a TDA member—and how our advocacy is making a difference for your practice, your patients, and your profession.

Protecting Dental Licenses

HB 11 simplifies professional license recognition through the Texas Department of Licensing and Regulation (TDLR) for certain out-of-state professions. Early on, TDA raised concerns that the measure might extend to all state licensing agencies, including the Dental and Medical Boards. Thanks to TDA's advocacy, Representative Phelan's office confirmed that dentists are not affected, since dentistry is not listed under TDLR's occupational licenses. This clarification protects dental licensing standards—a clear win for Texas dentists.

Preserving Texas Licensure Standards

SB 716 would have allowed dentists, hygienists, and assistants licensed in another state for only one year to apply for Texas licensure. Current TSBDE rules require three of the last five years in practice or five years of faculty service at a CODA-accredited institution. TDA opposed SB 716, viewing it as an attempt to weaken Texas' long-standing licensure standards.

Cost-Free CE Tracking

SB 912 requires a continuing education (CE) tracking system for all licensed health professionals, including dentists, by September 1, 2026. The law specifies that implementation cannot create new costs for agencies or licensees unless an existing contract allows it. This bill takes effect September 1, 2025.

Ensuring Fair Insurance Practices

With TDA's backing, **SB 815** requires transparency when Artificial Intelligence (AI) is used in health plan reviews. It prohibits utilization review agents from relying solely on AI to make adverse coverage decisions. Only qualified individuals may issue denials, though AI may assist in fraud detection. These protections extend to dental HMOs and Medicaid dental maintenance organizations (DentaQuest, MCNA, and United Healthcare Dental).

Reducing Red Tape in Medicaid Oversight

HB 142 allows the Office of Inspector General (OIG) to hire expert witnesses without competitive bidding and to share information with authorized agencies to strengthen oversight. It also bars the OIG from requiring fingerprint background checks for licensed Medicaid providers in good standing unless tied to a fraud investigation. In addition, the Texas Health and Human Services Commission (HHSC) must publicize fraud case outcomes and maintain its fraud-reporting system.

Fighting Against Office of Inspector General (OIG) Overreach

SB 1038 expanded OIG authority. TDA fought hard against this bill, highlighting the risk to honest providers and patient access. Although the bill passed, TDA remains vigilant in defending fair treatment for dentists.

The law updates penalties, modifies administrative remedies, and expands OIG's authority. TDA—along with the Texas Hospital Association, Texas Medical Association, and others—strongly opposed the bill. Its broad definition of Medicaid violations risks penalizing providers for minor administrative errors, such as clerical or billing mistakes, rather than intentional fraud. Given Medicaid's complexity, harsher penalties for unintentional errors could discourage provider participation and reduce patient access to care. TDA also warned that the bill lacks adequate due process protection, exposing providers to serious consequences before they can defend themselves. Despite widespread opposition, SB 1038 passed, was signed by Governor Abbott, and took effect September 1, 2025.

Streamlining Medicaid Enrollment and Credentialing

With TDA's support, **SB 1266** reduces administrative burdens by creating a dedicated support team to assist providers through Medicaid enrollment and credentialing. Additionally, the Health and Human Services Commission may not disenroll a Medicaid provider without sending a 30-day electronic and mailed notice to the provider. This gives an affected provider time to address any deficiencies in the provider's application for revalidation of enrollment before the date the provider will be disenrolled.

Protecting Dentistry's Unique Scope of Practice

HB 923 ensures the Texas Medical Disclosure Panel cannot make decisions that alter the scope of practice for dentistry or other health professions.

The law expands the Texas Medical Disclosure Panel from 9 to 13 members, increasing Texas-licensed physicians from 6 to 7 and adding 3 public representatives. The bill requires that official actions cannot be taken unless a majority of physician members are present. The panel is also prohibited from making decisions that alter the scope of practice for physicians or other providers.

Stopping Out-of-State Teledentistry Threats

HB 997/SB 471 would have allowed out-of-state providers to practice teledentistry in Texas without a Texas license. TDA stopped these bills, protecting patient safety and licensure standards.

Expanding Teledentistry Options for Texas Dentists

HB 1052, supported by TDA, requires insurers to cover teledentistry services provided by Texas-licensed dentists, even when practicing temporarily from another state.

Strengthening Teledentistry Consent Rules

HB 1700 directs the Texas State Board of Dental Examiners (TSBDE) to set clear, standardized requirements for documenting patient consent in teledentistry, promoting consistency and transparency.

The TSBDE's rules must specify the documentation required while allowing consent to be captured through audio-only methods when appropriate. This ensures consistent, transparent consent procedures that protect patients and providers.

Addressing Workforce Distribution Concerns

HB 3800 creates local health care workforce advisory boards to address training needs and shortages. TDA is working to secure a dentist's voice on the advisory board.

The new Texas Workforce Commission (TWC) 13-member advisory board will address health care workforce challenges, including training, shortages, and heavy workloads. The board will include representatives from higher education, workforce boards, hospitals, health care professionals, and community health centers.

For dentistry, this could shape how workforce shortages and training needs are addressed locally, potentially improving access to dental professionals and strengthening partnerships with dental education programs. The guide created by the advisory board is due to the Legislature by November 1, 2026, and the board will dissolve on September 1, 2027. The law takes effect September 1, 2025. TDA is advocating for a dentist to serve on the advisory board.

Securing Dentistry's Seat at the Table

HB 3801 reorganizes statewide workforce planning but ensures TDA maintains a voice in shaping health workforce initiatives.

The law eliminates the Statewide Health Coordinating Council and establishes the Health Professions Workforce Coordinating Council to better align workforce initiatives across Texas health professions.

Safeguarding Patient Records and Privacy

Starting September 1, 2025, **SB 1188** sets new regulations for dental electronic health records (EHRs). The law does not require dentists to have EHRs. Dentists must store all patient data in the US by January 1, 2026, add a "biological sex (as observed at birth)" field with limited edits, and give parents full access to minors' records. The law bans inclusion of credit scores or voter registration data, restricts EHR access to treatment, payment, or operations, and requires dentists to disclose and review any AI use in diagnosis. Violations may lead to fines up to \$250,000 and professional discipline.

Covenants Not to Compete

SB 1318 establishes new limits on non-compete covenants: they must include a buyout provision, may not exceed one year in duration, and may not extend beyond a five-mile radius. These requirements apply to dentists.

It is unclear whether SB 1318 applies only to employment contracts or also to practice sales. The law ties the required buyout to a dentist's salary at termination, which fits employment relationships better than sales. However, past court cases and industry practice suggest these rules could extend to practice sales as well.

Until courts provide clarity, dentists should assume that any non-compete in a practice sale must also meet SB 1318's requirements: a buyout option, a maximum one-year term, and a five-mile limit. The law takes effect September 1, 2025, and applies only to agreements signed or renewed after that date.