

# TDA TODAY

A PUBLICATION OF THE TEXAS DENTAL ASSOCIATION

MARCH 2026

VOLUME 27, ISSUE 3

AVAILABLE ON TDA.ORG

## TDA Warns of Targeted Harassment



In an email on March 12, 2026, TDA brought awareness to a scam reaching membership. Several dental offices in the greater Houston area have reported receiving deeply disturbing messages through the U.S. mail. These messages contain harmful content about dentist suicide rates.

Any dentist who has received one of these messages should immediately contact local law enforcement. We also encourage you to let us know by contacting TDA's Interim Executive Director Lee Ann Johnson at [ljohnson@tda.org](mailto:ljohnson@tda.org).

The safety of you and your team is our priority. Please use extreme caution when dealing with any suspicious mail or packages. Brief your team members on this incident and potential threats. Report suspicious items immediately to local law enforcement.

If you or anyone on your team need immediate mental health support, please contact the Suicide & Crisis Lifeline by calling or texting 988. The 988 Lifeline is available 24/7 and your conversations are free and confidential: <https://988lifeline.org>. TDA has a compilation of mental health resources here: <https://www.tda.org/member-center/mental-health-resources>.

TDA is here to support you in dealing with this unusual and difficult situation. You and your team are important and valued, and we know you do incredible good for your patients and community. TDA is monitoring this situation closely and will update you with any developments. Our dental community is stronger together. 📧

## Medicaid Update

### MEDICAID DENTAL RATE HEARING HIGHLIGHTS NEED FOR SUSTAINABLE REIMBURSEMENT

On March 3, 2026, the Texas Health and Human Services Commission (HHSC) held a public rate hearing to consider proposed reimbursement rates affecting services in the Texas Medicaid program. The hearing provided an opportunity for stakeholders, including the Texas Dental Association (TDA), to present testimony regarding the impact of the proposed rates on access to dental care for Medicaid patients.

Dr Paul Kennedy III, a pediatric dentist from Corpus Christi, testified on behalf of TDA and urged HHSC to increase the proposed reimbursement rates for sedation and anesthesia services in the Medicaid dental program. He emphasized that these services are medically necessary for many children who cannot safely receive dental treatment without sedation due to age, trauma history, special health care needs, or the extent of dental disease.

TDA's testimony explained that reimbursement must reflect the clinical complexity, regulatory requirements,

staffing needs, equipment costs, and inflationary pressures associated with providing sedation and anesthesia in dental settings. TDA also noted that the costs of dental supplies, staffing, and compliance have increased significantly in recent years, while Medicaid reimbursement has not kept pace.

Despite these concerns, HHSC ultimately did not adopt the higher reimbursement levels that TDA and other stakeholders advocated for. TDA had urged HHSC to establish rates consistent with the agency's established fee-for-service methodology and benchmarking against comparable states.

TDA remains concerned that insufficient reimbursement could reduce the availability of these services and increase wait times for vulnerable patients who depend on them.

TDA will continue advocating for sustainable Medicaid reimbursement rates that allow dentists to participate in the Medicaid program while ensuring that Texas children and families maintain access to necessary dental care. TDA will remain engaged with HHSC and policymakers as future opportunities arise to revisit and improve Medicaid dental reimbursement.

TDA encourages members to stay informed about ongoing Medicaid policy developments and to share their experiences providing care to Medicaid patients, as these insights are critical to the association's advocacy efforts. 📧



## 2026 TDA Meeting

### Puppies!

*Dr Shelley Seidel, 2026 Exhibits Chair*



Did someone say puppies? By popular demand, the puppies will return to the exhibit hall at the Texas Dental Association Annual Meeting on Friday, May 8.

The Exhibit Hall at the TDA Meeting is not only like a candy shop for people who get excited about dental cement, composite bonding, and hydroxyapatite, but it is also the place to learn, connect, and get inspired. The Exhibit Hall promises to be the place to gather, learn, shop for a deal, make new friends, and celebrate all that is dentistry.

More than 150 exhibitors have been carefully curated to provide inspiration and access to the latest and greatest in the dental world. The exhibit hall opens at 10 AM on Thursday and Friday and will play host to the newest in technology, software, materials, and equipment on display.

After the CE courses have wrapped up on Thursday, the Exhibit Hall will transform into a tropical oasis for the **Tropical Tiki Party**. Come prepared for some island-inspired fun and plan to wear your tropical tiki best. Thank you to TDA Perks for sponsoring this event.



A new feature in the Exhibit Hall for 2026 will be the **Wellness Lounge**. Massages will be available, so plan to stop by to relax, connect, and recharge. If you prefer something more interactive, pick up a **Fiesta Bingo** card and play along by visiting participating exhibitors.

We cannot wait to **Learn, Connect, and Get Inspired** with you in the Exhibit Hall at the TDA Meeting where **Inspiration Awaits!** 📧



## The Texas Toothline

YOUR MONTHLY UPDATE FROM THE FRONT LINES OF TEXAS DENTAL ADVOCACY



Like us on Facebook



Follow us on X @theTDA



Connect with us on LinkedIn



Follow [texasdentalassociation](https://www.instagram.com/texasdentalassociation) on Instagram

# Texas Dental School News

## Texas A&M University College of Dentistry

### Clinical assistant professor receives \$40,000 grant to study orthodontic expanders

Dr Shivam Mehta, clinical assistant professor and program director at Texas A&M University College of Dentistry (TAMUCOD), recently received a \$40,000 grant to study jaw expander types and techniques in teens and young adults undergoing orthodontic treatment.

The American Association of Orthodontists Foundation grant will enable Dr Mehta to evaluate 2 standard mini-screw-assisted rapid palatal expander protocols for reshaping narrow jaws to determine which treatment design is most effective. Studying patients ages 15 to 25 in both TAMUCOD's clinic and in private practices in Dallas-Fort Worth, he will research bone-anchored MARPE against hybrid MARPE that anchor expanders to bone and teeth.

"Which one orthodontists use is often dependent on where they studied, continuing education they received and what they feel comfortable using," Mehta said.

He said bone-anchored MARPEs tend to lead to higher stress on palatal mini screws, while the hybrid technique puts higher stress on molars.

Part of the study will research how each treatment affects the jaw and jaw structures. Mehta, who joined TAMUCOD in 2024 from Marquette University School of Dentistry, said this could be among the first studies of MARPEs since their introduction in 2010.

Plans are to study 20 patients with bone-anchored expanders and 20 with hybrid expanders. Patients have not yet been selected, but the pool will include TAMUCOD patients and patients at both myKIDSdds in Dallas, owned by Dr Glenn Cohen, and Jolley Orthodontics in Trophy Club, owned by Dr Cameron Jolley. Drs Cohen and Jolley are part-time clinical faculty members at TAMUCOD. Dr Mehta's private practice isn't part of the study.

Screening at A&M Dentistry will likely begin in the spring, Dr Mehta said. Those chosen will be new patients who haven't had orthodontic treatment.

"I hope to have the first results by early next year," he said. "Potentially, a second study could look at the long-term outcomes—possibly as long as 2 years—and bring in some of the same patients."

### Texas A&M University College of Dentistry in Dallas to receive more than \$2.87 million to study TMD pain

TAMUCOD Professor and Head of Biomedical Sciences Dr John Neubert and his researchers will receive more than \$2.87 million over the next 5 years to study temporomandibular disorders.

Dr Neubert is TAMUCOD's principal investigator in the world's most extensive collaborative study of patients with TMDs. The \$17 million Collaborative for Research to Advance TMD Evidence, nicknamed CREATE, project will collect data on patients' chronic pain to identify ways to eventually manage TMDs more effectively.

Plans are to study 1,000 patients with TMDs and 300 pain-free individuals across 5 national sites, including TAMUCOD, collecting brain images, clinical data and more. CREATE is funded by the National Institute of Dental and Craniofacial Research at the National Institutes of Health, and it's led by the University of Pittsburgh School of Dental Medicine.

Other principal investigation sites include the University of Buffalo School of Dental Medicine and the University of Florida College of Dentistry, where Dr Neubert taught and first contributed to the project's planning before joining TAMUCOD in February 2025. Other partnering institutions are Missouri State University, UTHealth Houston School of Dentistry, Colorado State University, HealthPartners Institute and The TMJ Association, a patient advocacy organization.

Data collected will go to UF because it has the most experience managing clinical studies and data, Dr Neubert said. About 200 people will likely participate in TAMUCOD's study.

Dr Madhu Nair, professor and head of diagnostic sciences, is TAMUCOD's other co-investigator.

Dr Neubert will recruit other clinical faculty at TAMUCOD, a clinical manager, a clinical research assistant and support staff.

TAMUCOD will collect data for 3 years and spend the last 2 years bringing back some patients for additional studies. Researchers will conduct standardized pain tests, collect biological samples—such as saliva and blood—and complete neuroimaging of the brain and TMJ to collect data for "deep phenotyping" with the goal of investigating molecular mechanisms in the future for those with TMDs.

Dr Neubert, an internationally known expert in TMDs, said the collections will enable more grant-funded studies as science advances. 📌



Dr Shivam Mehta



Dr John Neubert



Dr Madhu Nair

## TDA Mourns the Passing of Past President



Dr Paul Glenn Swinney, 89, of Tyler died November 11, 2025. His celebration of life service and burial were in November 2025.

He was born July 24, 1936, in Jacksonville, Texas, and graduated from The University of Texas Dental Branch at Houston in 1960 with a Doctorate in Dental Surgery.

He practiced dentistry in Tyler for 42 years and was TDA president in 1994. He took great pride that his son and a grandson also entered the dental profession.<sup>1</sup>

He and his wife Carol met in high school and were the best dancers in any crowded dancehall; he devoted his life after retirement to caring for her through an extended battle with cancer, according to his obituary.<sup>1</sup>

Dr Swinney is survived by his son, Dr Chip Swinney and wife Kimberly of Tyler; daughter, Janna Swinney Walker and husband Rex of New Braunfels; grandchildren, Dr Trey Swinney and wife Melissa, Rex Swinney, Callie Walker Erk and husband Nathanael, Reynolds Walker, Charlotte Walker, and sister, Joyce Swinney Cook of Grand Cane, Louisiana. He lived to see 5 beautiful great-granddaughters added to the family: Farrah, Sutton, Scarlett, Shiloh, and Lily June.

He was preceded in death by his parents and his beloved wife, Carol Lewis Swinney.

Memorials may be made to Bethesda Health Clinic at [www.bethesdaclinic.org](http://www.bethesdaclinic.org) or Hospice of East Texas, 4111 University Blvd, Tyler, Texas, 75701.

Source: 1. <https://www.legacy.com/us/obituaries/name/paul-swinney-obituary?id=60016021#obituary> 📌



## Limited Oral Evaluations in Pediatric Dental Services

As the Texas Health and Human Services Office of Inspector General (OIG) works to prevent fraud, waste and abuse in Texas Medicaid, the following article is intended to assist providers in effective service delivery and compliance with Medicaid policy.

Oral evaluation codes are essential for documenting patient care, but misuse—especially of the limited oral evaluation code—is a growing concern. The OIG has found that pediatric dental providers frequently misapply this code, resulting in inappropriate billing and possible enforcement action.

### Texas Health Steps limited oral evaluations

Under the Texas Medicaid Provider Procedures Manual (TMPPM), Texas Health Steps (THSteps) oral evaluations and dental checkups allow for the early diagnosis and treatment of dental problems.

Among these evaluations, the limited oral evaluation (CDT Code D0140) plays a specific role: problem-focused assessments of a specific tooth or area of the mouth for acute dental pain, trauma, swelling, abscess or other urgent concerns requiring immediate diagnostic attention. The provider must indicate documentation of medical necessity on the claim.

According to the TMPPM, D0140 should not replace routine or comprehensive examinations. Instead, it is intended for situations in which the provider must assess an area of concern rapidly to determine appropriate intervention.

### Key features of limited oral evaluations

**Problem-focused:** A limited oral evaluation is used when there is a specific complaint or acute dental problem. Examples include:

- Facial or oral trauma.
- Localized pain or suspected infection.
- Dental injuries resulting from falls, sports or accidents.

The purpose of this evaluation is to identify the source and severity of the dental issue and determine the next steps for treatment. This may require additional diagnostic testing in order to determine the issue.

**Not intended for routine or comprehensive use:** The TMPPM distinguishes D0140 from comprehensive oral evaluation (D0150), which is for new patients or those with significant changes in health, and periodic oral evaluation (D0120), for routine checkups and ongoing assessment.

### TMPPM requirements for limited oral evaluations

The TMPPM outlines several requirements and limitations for using D0140.

1. Frequency: D0140 is typically limited to one service per day by the same provider, twice per day for any provider and may be limited annually unless medical necessity is well-documented. This is to ensure that problem-focused codes are not overused in place of routine evaluations.

Continued on page 3

## COMPONENT CORNER

Each month, we aim to spotlight a state component society and the events happening in the area. For more information or to let us know what is happening in your TDA component society, please email Managing Editor Nicole Scott, [nscott@tda.org](mailto:nscott@tda.org).

## SPOTLIGHT: Greater Houston Dental Society

### Dozens Attend GHDS CE Event

The Greater Houston Dental Society (GHDS) held a CE event for its members on February 19 in Houston.

ZimVie sponsored the 1.5-hour CE event, Digital Dentistry for Predictable Anterior Esthetics, presented by Dr Sompop Bencharit. TDA President Dr Glen Hall attended the event, along with 65 GHDS members. 📌



TDA Past President Dr Duc "Duke" M. Ho and TDA President Dr Glen Hall.



Drs Ron Hill, Glen Hall, and Joel Vela.



# TSBDE Rule Update

This recurring section is designed to help TDA members keep up with important Texas State Board of Dental Examiners (TSBDE) rules, other regulations, and state law affecting their practices.

## Do Not Alter TSBDE-Issued Licenses, Certificates, or Registrations

The Texas Dental Association (TDA) has been made aware that the Texas State Board of Dental Examiners (TSBDE) has identified instances in which licensees and registrants may be altering the license certificates they print from the TSBDE website.

Modifying an official license, certificate, or registration issued by the TSBDE is strictly prohibited. Altering these documents may result in disciplinary action by the Dental Board, including possible revocation of a license, certification, or registration. Depending on the severity of the conduct, such actions could also constitute a criminal offense.

TDA encourages all members to ensure that any license, certificate, or registration displayed or provided is an accurate and unaltered version issued by the TSBDE.

### Update on Patient Notification Requirements When Leaving Practice

During its February committee meetings, the TSBDE discussed the process for notifying patients when a dentist leaves a practice or when a dental clinic closes. It has been noted that sending large volumes of certified letters—such as when a dentist departs a practice or a nonprofit clinic shuts down—can be administratively challenging.

The TSBDE discussed whether alternative methods, such as email, could be used in place of certified mail while still meeting legal and regulatory requirements set out in 22 Texas Administrative Code (TAC) §108.5. The primary concern is to ensure that both patients and dentists remain protected and that there is a reliable way to verify that patients received the required notification.

Following the discussion, TSBDE staff were directed to research possible alternative delivery methods. Dentists are reminded that the current regulation must be followed.

### How Dentists Can Comply with 22 TAC §108.5 When Leaving a Dental Practice

When a dentist leaves a dental practice, relocates, or stops treating patients, they must take steps to avoid patient abandonment. The following actions will help ensure compliance with 22 Texas Administrative Code §108.5.

#### 1. Provide at Least 30 Days' Written Notice

Give patients a **minimum of 30 days' written notice** before discontinuing treatment so they have time to obtain care from another dentist.

#### 2. Deliver the Notice Properly

The notice must be delivered in one of the following ways:

- **Hand-delivered to the patient, or**
- **Sent by certified mail, return receipt requested** to the patient's last known address.

#### 3. Keep Documentation in the Patient Record

Maintain documentation showing that notice was provided by:

- Keeping a **copy of the notice letter**, and
- Retaining **proof of delivery or service** in the patient's record.

#### 4. Include Required Information in the Notice

The written notice should include:

- **A brief description of the patient's current status**, including diagnosis and the current treatment plan.
- **A summary of the patient's present and future dental needs.**
- An explanation of the **potential consequences of not continuing treatment.**
- **A recommendation that the patient seek care from another dentist.**
- **A statement that the dentist will remain available for emergency care during the 30-day transition period.**

#### 5. Remain Available for Emergency Treatment

After sending notice, the dentist must remain reasonably available to provide emergency treatment for up to 30 days to prevent patient harm while the patient secures another provider.

### When Dental Hygienists May Use Lasers

A topic from the recent TSBDE meeting was when dental hygienists may use a laser in practice. This is governed by TSBDE rule 22 TAC §115.2(b)(1-4), Permitted Duties.

Under this rule, a dental hygienist may use a laser in the practice of dental hygiene only under the direct supervision of a dentist and only for procedures within the hygienist's scope of practice. Hygienists may not use lasers to perform irreversible procedures or intentionally cut soft or hard tissue.

Before using a laser for any non-diagnostic purpose, a dental hygienist must complete at least

*Continued on page 4*

## TDA Perks Program Signature Sponsors Help Bring a Tropical Tiki Party to TDA Meeting



Join TDA and TDA Perks Program for a tropical-island theme party, Thurs., May 7, from 4:30–6 pm in the Exhibit Hall! Enjoy a performance by hula dancers, complimentary appetizers, and a free drink with the ticket that's on your badge. Costumes are encouraged!

A very special thanks goes to TDA Perks Program's 2026 Signature Sponsors for helping make this party possible. Please stop by their booths and say "hello!" You'll find them in the TDA Perks Program Aisle (200):

**DentalHQ (Aisle 200)** lets you create, manage, and grow your in-house membership plan program—all within the leading platform for successful membership plans.

**OSHA Review, Inc. (Booth 211)** enables you to test your sterilizer weekly for \$169/year with its Spore Check System. Its SUV Ultra 5's powerful and cost-effective formula lets you clean and disinfect operatories.

**Sedation Resource (Booth 200)** is customer-focused and carries an extensive line of sedation equipment and supplies to make sedation in your office simple, safe, and effective.

**TDA Financial Services Insurance Program (Booth 208)** is now TDA-member owned! Get health, business, and personal, home and auto coverage with help from experienced, knowledgeable staff.

We hope you come away with us and escape to the tropics with your dental tribe! 🌴



### Limited Oral Evaluations, continued from page 2

- Documentation: Documentation supporting medical necessity must be maintained by the provider in the client's medical record and include:
  - The client's complaint supporting medical necessity for the examination.
  - The specific area of the mouth that was examined or the tooth involved.
  - A description of what was done during the visit.
  - Supporting documentation.

### Common coding errors

It is important for providers to be mindful of how and when they code for limited oral evaluations. Some providers mistakenly use limited oral evaluation codes to expedite appointments or accommodate scheduling gaps. This practice is inconsistent with THSteps policy and may result in claim denials, requests for supporting documentation or potential compliance reviews.

Providers may also fail to justify the necessity of a D0140 evaluation, especially when the symptoms are mild or unclear. Thorough documentation is required to validate the coded service.

The TMPPM restricts certain combinations of evaluation codes on the same date of service. For example, there are combination restrictions placed on D0140 for the following, which cannot be billed on the same date of service for the same provider:

- D0160, which is used for a problem-focused, detailed and extensive oral evaluation.
- D0170, which is used for re-evaluation of a previously existing, problem-focused, non-postoperative condition in a pre-existing patient.
- D0180, which is used for periodontal evaluations where the patient shows symptoms or is at risk of periodontal disease.

Refer to TMPPM, 3.2.3.7, "Diagnostic Services," effective December 2025, for a full explanation of procedure code limitations for clinical oral evaluations.

### Stay informed to protect your practice

Compliance with TMPPM rules and your dental maintenance organization's policy is essential for program integrity and patient care. Correct code usage prevents improper claims and ensures Medicaid resources are used appropriately.

Staying current with Medicaid billing requirements and promptly addressing errors helps safeguard your organization and maintain compliance. If you identify a mistake, self-disclosure is the best way to resolve issues proactively, avoiding lengthy investigations and costly litigation.

For case updates, agency news and guidance, follow the Texas OIG online or on social media: <https://www.reporttexasfraud.com> | Facebook: @TxOIG | LinkedIn: Company/TxHHS-OIG | X: @TexasOIG 📌

**DIFFERENT  
CAREER  
PATHS.  
ONE HOME.**



**Don't Let Your Benefits Expire!**  
(Deadline: March 31)

[tda.org/join-renew](https://tda.org/join-renew)

**EDITORIAL STAFF**

Jacqueline M. Plemons, DDS, Editor

Nicole Scott, Managing Editor

Lee Ann Johnson, CAE, Director of Member Services

Barb Donovan, Art Director

**2025-2026 TDA BOARD OF DIRECTORS**

PRESIDENT—Glen D. Hall, DDS

PRESIDENT-ELECT—Elizabeth Goldman, DDS

PAST PRESIDENT—Georganne P. McCandless, DDS

VICE PRESIDENT, SOUTHEAST—Matthew J. Heck, DDS

VICE PRESIDENT, SOUTHWEST—Melissa Uriegas, DDS

VICE PRESIDENT, NORTHWEST—Adam S. Awtrey, DDS

VICE PRESIDENT, NORTHEAST—Drew M. Vanderbrook, DDS

SENIOR DIRECTOR, SOUTHEAST—Ron Hill, DDS

SENIOR DIRECTOR, SOUTHWEST—Austin Lee, DDS

SENIOR DIRECTOR, NORTHWEST—Annie C. Wilson, DDS

SENIOR DIRECTOR, NORTHEAST—Shane A. Ricci, DDS

DIRECTOR, SOUTHEAST—Jennifer Hathaway, DDS

DIRECTOR, SOUTHWEST—Kenneth Gonzales, DDS

DIRECTOR, NORTHWEST—Kevin Altieri, DDS

DIRECTOR, NORTHEAST—Celeste Latham, DDS

SECRETARY-TREASURER\*—Oshmi Dutta, DDS

SPEAKER OF THE HOUSE\*—Gregory W. Rashall, DDS

PARLIAMENTARIAN\*\*—Jodi Danna, DDS

EDITOR\*\*—Jacqueline M. Plemons, DDS, MS

LEGAL COUNSEL\*\*—Carl R. Galant

INTERIM EXECUTIVE DIRECTOR\*\*—Lee Ann Johnson

\*Non-voting member \*\*Non-voting

*TDA Today* (USPS 022-007) is published monthly except for December by the Texas Dental Association, 8701 W Hwy 71, Ste 201-M Austin, TX 78735, 512-443-3675. (C) 2026 Texas Dental Association. All rights reserved. Annual subscriptions: Texas Dental Association (TDA) members, \$5. In-state American Dental Association (ADA) affiliated, \$15 + tax. Out-of-state ADA affiliated, \$15. In-state non-ADA affiliated, \$30 + tax. Out-of-state non-ADA affiliated, \$30. Single issue price: TDA members \$1. In-state ADA affiliated, \$3 + tax. Out-of-state ADA affiliated, \$3. In-state non-ADA affiliated, \$6 + tax. Out-of-state non-ADA affiliated, \$6. Contributions: Manuscripts and news items of interest to the membership of the Association are solicited. Manuscripts should be type-written, double spaced, and the original copy should be submitted. Please refer to Instructions for Contributors in the annual September Directory of the *Texas Dental Journal* for more information. The Information for Contributors is available at tda.org. All statements of opinion and of supposed facts are published on authority of the writer under whose name they appear and are not to be regarded as the views of the Texas Dental Association, unless such statements have been adopted by the Association. Articles are accepted with the understanding that they have not been published previously. Authors must disclose any financial or other interests they may have in products or services described in their articles. Advertisements: Publication of advertisements in this publication does not constitute a guarantee or endorsement by the Association of the quality of value of such product or of the claims made of it by its manufacturer. Advertisements: Publication of advertisements in this journal does not constitute a guarantee or endorsement by the Association of the quality of value of such product or of the claims made.



12 hours of in-person continuing education in laser use related to the procedures they will perform. This training must include at least three hours of clinical simulation and must be provided by a TSBDE-recognized course provider. Hygienists must keep documentation showing they have completed the required training.

Laser use must always meet the minimum standard of care and remain within the hygienist’s authorized scope of practice.

The supervising dentist must also have sufficient laser training to properly supervise the hygienist, which, at a minimum, must include the same training required of the dental hygienist. Under the Dental Practice Act, the delegating dentist remains responsible for the procedures performed by the hygienist, including laser use.

Dental hygienists must follow all Dental Practice Act and Board rules when using lasers and may face disciplinary action for violations as well as the supervising dentist.

**Dental Assistants Cannot Use Lasers**

The TSBDE has received inquiries from dental practices regarding claims by certain laser equipment companies that dental assistants may operate lasers, including devices used for “red-light therapy.” Dentists are reminded that, under Texas law, dental assistants may only perform duties that are reversible when delegated by a dentist.

A reversible act or procedure can be reversed or corrected and does not involve irreversible treatment. Because dental assistants are prohibited from performing irreversible procedures, they cannot operate a laser (22 TAC §114.1, Permitted Duties).

**Dental Assistants Cannot Perform Curodont Repair**

Additionally, when discussing dental assistant duties, the TSBDE clarified that dental assistants may not perform Curodont Repair. Curodont Repair is a non-invasive, pain-free treatment designed to reverse early-stage cavities (white spot lesions) by stimulating enamel regeneration without drilling or fillings.

Current Curodont application techniques require the tooth to be cleaned—often with pumice or prophylactic paste—to remove plaque and the salivary pellicle. The tooth is then etched with 35% phosphoric acid gel to remove the mineral layer and allow the product to penetrate the lesion. These steps fall outside the scope of practice for dental assistants.

The TSBDE publicly confirmed that dental assistants cannot apply Curodont under current protocols. However, the Dental Board also noted that application techniques continue to evolve, and dental assistants may be permitted to apply Curodont in the future.

**Recent TSBDE Rule Adoptions**

The following rules are adopted by the TSBDE with an effective date of March 12, 2026.

**22 Texas Administrative Code §101.2, Licensure by Examination (Dentist)**

**22 Texas Administrative Code §103.2, Licensure by Examination (Dental Hygiene)**

The adopted rule reflects that CDCA-WREB-CITA (a dental exam administrator), and the American Board of Dental Examiners (developer of the ADEX licensure exams) have combined under a single entity: the American Board of Dental Examiners.

**22 Texas Administrative Code §101.6, Dental Licensing for Military Service Members, Military Veterans, and Military Spouses**

**22 Texas Administrative Code §101.14, Exemption from Licensure for Certain Military Service Members and Military Spouses**

**22 Texas Administrative Code §103.10, Exemption from Licensure for Certain Military Service Members and Military Spouses**

**22 Texas Administrative Code §114.7, Exemption from Registration for Certain Military Service Members and Military Spouses**

The adopted rule implements House Bill 5629 and Senate Bill 1818, 89th Legislature, Regular Session (2025), which amended Texas Occupations Code Chapter 55, Licensing of Military Service Members, Military Veterans, and Military Spouses, with the following changes:

- (1) defines good standing;
- (2) allows for alternative licensing if the applicant holds a current license issued by another state that is similar in scope of practice to the license in this state and is in good standing with that state’s licensing authority;
- (3) requires the Board to issue a provisional license to the applicant while the Board processes the application or issue the license for which the applicant applied;
- (4) requires the Board to process an alternative licensing application within 10 business days; and
- (5) waives all fees. The adoption also corrects clerical errors.

**22 Texas Administrative Code §104.1, Continuing Education Requirements**

The adopted rule reflects that CDCA-WREB-CITA (a dental exam administrator), and the American Board of Dental Examiners (developer of the ADEX licensure exams) have combined under a single entity: the American Board of Dental Examiners.

**22 Texas Administrative Code §104.2, Continuing Education Providers**

The adopted rule reflects that CDCA-WREB-CITA (a dental exam administrator), and the American Board of Dental Examiners (developer of the ADEX licensure exams) have combined under a single entity: the American Board of Dental Examiners.

**22 Texas Administrative Code §114.2, Registration of Dental Assistants**

The adopted amendment: (1) specifies that applications for registration or for renewal of registration must be submitted online; (2) specifies that dental assistants can obtain a duplicate registration from their online account; (3) removes language pertaining to the Dental Assistant Advisory Committee because the committee no longer exists; (4) updates the language to reflect that a student who takes a dental assistant radiology course should be able to demonstrate concepts for both film and digital x-rays; and (5) updates the language to reflect that technology has replaced film x-rays with digital x-rays, although the Board notes that film x-rays are still being used in the dental profession.

**22 Texas Administrative Code §114.3, Pit and Fissure Sealants**

This rule was recently reviewed in accordance with the TSBDE’s rule review plan. As a result of the review, the Dental Board made changes to correct punctuation and typo errors.

**22 Texas Administrative Code §115.4, Placement of Site-Specific Subgingival Medicaments**

The adopted rule updates the applicable section of the Texas Occupations Code pertaining to the practice of dental hygiene and a hygienist being able to topically apply drugs.

For more information on the TSBDE, please contact TDA Senior Policy Manager Diane Rhodes at 512-443-3675 ext. 122, drhodes@tda.org.

**2026 Required Course: Controlled Substances**

Stay compliant with this virtual 4-hour course covering the opioid epidemic, ethical prescribing, PDMP use, pain management, and patient communication. This course meets all controlled substance CE requirements for dentists, including DEA permit holders (RULE §111.1(b)) and direct patient care (RULE §104.1(2)(B)).

Complete your required CE early and start 2026 on track!

**Dental Concierge**

**UPCOMING CONTROLLED-SUBSTANCES COURSE**

✓ Friday, June 5, 2026  
9:00 AM

Seats fill fast – secure your spot and start 2026 on track.

**REGISTER NOW!**

tdadentalconcierge.com