

Client name Vanessa Mc Neill
Form Montana Licensing Reform Task Force
Matter Vanessa McNeill - Rules
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Montana Licensing Reform Task Force

This Task Force was created pursuant to Executive Order 1-2026 on January 29, 2026.

Purpose of the Licensing Reform Task Force

The Task Force shall provide the Governor with recommendations and strategies for the State of Montana to reform the professional occupational licensing system for the purposes of:

- identifying and removing burdens and barriers faced by licensees that are not necessary to protect the public; and
- improving access to and availability of professional services for citizens across Montana, including rural communities.

In developing recommendations and strategies, the Task Force shall seek input from Montana citizens, legislators, Montana associations whose members are licensed occupational professionals, professional licensing boards, relevant state agencies, advisory groups and researchers focused on occupational licensing, and other appropriate stakeholders as determined by the Task Force.

Public Record

Please note that all information received through this form is public record.

Which committee would you like to receive your comment?

Full Task Force
Health Care Subcommittee
Construction Subcommittee
Barriers Subcommittee
Sunset Review Subcommittee

We want to hear from you!

We would like to receive any comments you would like the Task Force, or one of its subcommittees, to review. In addition, we are specifically looking for feedback for:

1. Specific topics a committee or the task force should consider, and
2. Specific people or organizations you think the task force should hear from.

Do you have a general comment or a specific person or topic for the Task Force to hear from?

What are your comments?

Dear Task Force,

I'm writing to you on behalf of MSWs, LACs, and SWLCs who are currently finding difficulty with getting full licensing. My business contracts regularly with LACs and experienced SWLCs to provide trainings to MT BBH licensees across the state. From my experience, these individuals have decades of wisdom and knowledge of Suicide Prevention. One particular trainer, I can attest to, has educated 1000s of people over the past eight years, working with me.

Many of these individuals are juggling careers, parenting, training development and presentation, current mental health work, as well as trying to become fully licensed Social Workers. I've witnessed one of my trainers taking the licensing exam multiple times and getting within 4 points of a passing grade.

I've got specific accounts of SWLCs having documented and demonstrated test anxiety, a legitimate affliction and diagnosis. As a Psychology Instructor, I've provided special allowances for any student with this affliction. "Test anxiety, relates to how much fear, worry, uneasiness, panic, restlessness, and tension students feel when just thinking about upcoming examinations or tests. Another way to think of anxiety is as a result of uncertainty about impending things (Craig, 1995). Test anxiety is the term for the emotional reactions or feeling of uneasiness that develops prior to exams and lasts during the exam period (Sepehrian, 2013). Anxiety is frequently linked to self-efficacy pressures, assessments of the severity of the situation, and responses to a source of stress (Pappamihel, 2002)."

I implore you to consider providing alternatives to basic exams that better capture an individuals skills and abilities. Montana's need for providers is dire and this is one major bottleneck that I believe could be removed and open doors for critical patients in need of care.

Thank you for your time and consideration in this matter.

Best to you,

Vanessa McNeill, Owner & CE Director



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May 1, 2026

Representative Jodee Etchart, Tony King & members of the RHTP Healthcare Subcommittee
Subject: MDHA Recommendations on Dental Hygienist Initiatives in the RHTP

Dear Chair Etchart, Mr. King & members of the RHTP Healthcare Subcommittee,

On behalf of the Montana Dental Hygienists' Association (MDHA), we write to express our concern that MDHA has not been consulted during the development of proposed initiatives affecting dental hygienists within the Rural Health Transformation Program (RHTP). As the professional organization representing dental hygienists across Montana, we were disappointed that stakeholder input appears to have been gathered from the Montana Dental Association (MDA) without corresponding engagement of MDHA. MDHA has contacted all parties involved and asked to be included in future meetings, but we continue to be excluded from discussions.

Inclusion of dental hygienists' perspectives is essential to ensuring that policies impacting our profession are effective, equitable, and reflective of current practice. We appreciate the opportunity to now provide input and respectfully offer the following recommendations.

We understand that three areas related to dental hygienists are under consideration within the RHTP: diagnosis, treatment planning, and supervision of dental assistants. Below are our recommendations, prioritized based on their impact on access to care, workforce utilization, and patient outcomes.

1. Dental Hygiene Diagnosis (Highest Priority)

MDHA strongly supports prioritizing initiatives that recognize and expand the role of dental hygienists in assessment and diagnostic capacity. Dental hygienists are highly trained in identifying oral disease, risk factors, and preventive needs. Expanding this function would significantly improve early detection of dental conditions, particularly in rural and underserved communities where access to dentists is limited.

Allowing hygienists to contribute more fully in this capacity would improve patient triage, reduce delays in care, and ensure that individuals with urgent or complex needs are identified sooner. Recognizing diagnostic contributions aligns with evidence-based care models and maximizes the existing workforce.

2. Treatment Planning of Dental Disease

As a second priority, MDHA recommends initiatives that support dental hygienists' involvement in treatment planning. Hygienists play a critical role in developing preventive and maintenance strategies tailored to individual patient needs. Their ongoing patient relationships uniquely position them to contribute meaningful insights into care planning, compliance, and long-term oral health outcomes.



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Supporting participation in treatment planning promotes a collaborative, team-based care model and helps ensure continuity. It also enhances patient education and engagement, both key drivers of successful treatment outcomes.

3. Supervision of Dental Assistants

While this function can improve clinic efficiency and workflow, MDHA views it as a lower priority compared to diagnosis and treatment planning in terms of direct patient impact. As a compromise, MDHA would accept this initiative as we understand that it is necessary to meet it to secure RHTP funding. However, we do not believe it meaningfully advances our role in increasing access to care for Montana's rural populations.

That said, enabling hygienists to take on supervisory responsibilities may support team optimization in settings facing workforce shortages. Any initiatives in this area should be carefully structured to ensure they complement – rather than detract from- patient care responsibilities.

Conclusion

MDHA recommends prioritizing these areas as follows: (1) dental hygiene diagnosis, (2) treatment planning, and (3) supervision of dental assistants. This approach best supports improved access to care, efficient workforce utilization, and high-quality patient outcomes across Montana.

We appreciate your consideration of these recommendations and welcome the opportunity for continued collaboration in strengthening oral health systems within the RHTP. We also respectfully request that MDHA be included as a key stakeholder in future discussions impacting dental hygienists.

Sincerely,
Montana Dental Hygienists' Association (MDHA)