



DENTAL BOARD OF CALIFORNIA
2005 Evergreen Street, Suite 1550, Sacramento, CA 95815
P (916) 263-2300 F (916) 263-2140 www.dbc.ca.gov

NOTICE OF PUBLIC MEETING – Notice is hereby given that a public meeting of the Dental Board of California will be held as follows:

Friday, August 17, 2012

Department of Consumer Affairs
2005 Evergreen Street, Hearing Room
Sacramento, CA 95815
916-263-2300

Public comments will be taken on agenda items at the time the specific item is raised. The Board may take action on any item listed on the agenda, unless listed as informational only. All times are approximate and subject to change. Agenda items may be taken out of order to accommodate speakers and to maintain a quorum. The meeting may be cancelled without notice. Time limitations for discussion and comment will be determined by the President. For verification of the meeting, call (916) 263-2300 or access the Board's Web Site at www.dbc.ca.gov. This Board meeting is open to the public and is accessible to the physically disabled. A person who needs a disability-related accommodation or modification in order to participate in the meeting may make a request by contacting Richard DeCuir, Executive Officer at 2005 Evergreen Street, Suite 1550, Sacramento, CA 95815, or by phone at (916) 263-2300. Providing your request at least five business days before the meeting will help to ensure availability of the requested accommodation

Friday, August 17, 2012

While the Board intends to webcast this meeting, it may not be possible to webcast the entire open meeting due to limitations on resources.

8:30 a.m. DENTAL BOARD OF CALIFORNIA – FULL BOARD

- ROLL CALL Establishment of a Quorum
- AGENDA ITEM 2 Approval of the Full Board Meeting Minutes from May 17-18, 2012.
- AGENDA ITEM 3 President's Report
- AGENDA ITEM 4 Executive Officer's Report
- AGENDA ITEM 5 Update from the Department of Consumer Affairs Executive Office
- AGENDA ITEM 6 Update on Dental Hygiene Committee of California (DHCC) Activities
- AGENDA ITEM 7 Budget Reports: Dental Fund & Dental Assisting Fund
- AGENDA ITEM 8 Discussion and Possible Action:
 - (A) To Consider Staff's Recommendation for Appropriate Fee Increase to Dentistry to Sustain Board Expenditures; and
 - (B) To Consider Initiation of a Rulemaking to Amend *California Code of Regulations, Title 16, § 1021* Relevant to Examination, Permit, and License Fees for Dentists

- AGENDA ITEM 9 Update Regarding the California Dental Association’s Request to Amend Regulations Pertaining to Mobile Dental Clinics (*California Code of Regulations, Title 16, §1049*)
- AGENDA ITEM 10 Update on Pending Regulatory Packages:
- A. Sponsored Free Health Care Events (*California Code of Regulations, Title 16, §§ 1023.15, 1023.16, 1023.17, 1023.18 and 1023.19*)
 - B. Notice to Consumers of Licensure by the Dental Board (*California Code of Regulations, Title 16, §1065*)
 - C. Abandonment of Applications (*California Code of Regulations, Title 16, § 1004*); and
 - D. Uniform Standards for Substance Abusing Licensees (*California Code of Regulations, Title 16, §§ 1018 and 1018.01*)
- AGENDA ITEM 11 Discussion and Possible Action Regarding Regulatory Priorities for the 2012/2013 Fiscal Year
- AGENDA ITEM 12 Update on Actions Taken to Implement the Patient Protection and Affordable Care Act
- AGENDA ITEM 13 Subcommittee Report on DBC Workforce Data Collection - Cultural and Linguistic Competency Survey (AB 269) and OSHPD Healthcare Workforce Clearinghouse Project (SB 139)
- AGENDA ITEM 14 Update Regarding Dental Board of California’s Strategic Plan
- AGENDA ITEM 15 Discussion and Possible Action Regarding 2013 Board Meeting Dates
- AGENDA ITEM 16 Report on the July 11, 2012 meeting of the Elective Facial Cosmetic Surgery Permit Credentialing Committee; and Discussion and Possible Action to Accept Committee Recommendations for Issuance of Permits
- AGENDA ITEM 17 Enforcement Committee Report
The Board may take action on any items listed on the attached Enforcement Committee agenda
- AGENDA ITEM 18 Joint Meeting of the Examination Committee and the Dental Assisting Council Report
The Board may take action on any items listed on the attached Joint Meeting of the Examination Committee and the Dental Assisting Council agenda
- AGENDA ITEM 19 Update on Portfolio Licensure Examination for Dentistry (*AB 1524, Stats 2010 ch 446*)
- AGENDA ITEM 20 Dental Assisting Council Report
The Board may take action on any items listed on the attached Dental Assisting Council agenda
- AGENDA ITEM 21 Legislative and Regulatory Committee Report
The Board may take action on any items listed on the attached Legislative and Regulatory Committee agenda

AGENDA ITEM 22 Licensing, Certification & Permits Committee Report

The Board may take action on any items listed on the attached Licensing, Certification & Permits Committee agenda and act on recommendations to the Board regarding issuance of new licenses to replace cancelled licenses

PUBLIC COMMENT

ADJOURNMENT

Public comments will be taken on agenda items at the time the specific item is raised. The Board may take action on any item listed on the agenda, unless listed as informational only. All times are approximate and subject to change. Agenda items may be taken out of order to accommodate speakers and to maintain a quorum. The meeting may be cancelled without notice. Time limitations for discussion and comment will be determined by the President. For verification of the meeting, call (916) 263-2300 or access the Board's web site at www.dbc.ca.gov. The meeting facilities are accessible to individuals with physical disabilities. Please make any request for accommodations to Richard DeCuir at 2005 Evergreen Street, Suite 1550, Sacramento, CA 95815, or by calling (916) 263-2300 no later than one week prior to the day of the meeting.



**Dental Board of California
Meeting Minutes
Thursday, May 17, 2012**
Embassy Suites SFO Airport Waterfront
150 Anza Blvd., Burlingame, CA 94010
DRAFT

Members Present:

Bruce Witcher, DDS President
Huong Le, DDS, Vice President
Fran Burton, Secretary
John Bettinger, DDS
Stephen Casagrande, DDS
Luis Dominicus, DDS
Rebecca Downing, Public Member
Judith Forsythe, RDA
Suzanne McCormick, DDS
Steven Morrow, DDS
Thomas Olinger, DDS

Members Absent:

Steve Afriat, Public Member

Staff Present:

Richard DeCuir, Executive Officer
Denise Johnson, Assistant Executive Officer
Kim Trefry, Enforcement Chief
Jocelyn Campos, Enforcement Coordinator
Sarah Wallace, Legislative and Regulatory Analyst
Karen Fischer, Associate Analyst
Linda Byers, Executive Assistant
Kristy Shellans, DCA Senior Staff Counsel
Greg Salute, Deputy Attorney General

Dr. Bruce Witcher, President called the meeting to order at 8:30 a.m. Fran Burton, Secretary called the roll and a quorum was established.

The Board immediately went into closed session to discuss disciplinary matters.

The Board returned to open session at 10:31 a.m.

Dr. Witcher welcomed Lori Hubble, Executive Officer of the Dental Hygiene Committee, Dr. Mary Jean McGrath Bernal, Dean of the dental school at the Universidad De La Salle, Dr. Charles Broadbent from the Western Regional Examination Board (WREB), Shelly Sorenson, President of the California Dental Assisting Association (CDAA), Lori Gagliardi, California Association of Dental Assisting Teachers (CADAT), Dr. Tom Stewart, past president of the California Dental Association (CDA), Dr. Alan Felsenfeld, Speaker of the House for CDA, and Dr. Nelson Artiga, accreditation team for Universidad De La Salle and Dean at UCSF.

AGENDA ITEM 1: Discussion, Review and Possible Acceptance of the Universidad De La Salle Site Team Report

Dr. Dominicus immediately recused himself and left the room. Dr. Morrow reported that a year ago Dr. Bettinger appointed him and Dr. Le as the subcommittee to review the application for renewal from the Universidad De La Salle. He thanked a number of people who contributed to the success of the site team evaluation and subsequent trip to Mexico including Dr. Le, Richard DeCuir, Dental Board staff, and especially Erica Cano who, as part of the site team that traveled to Mexico, took copious notes for the team. Dr. Artiga was instrumental as an ambassador in helping the team understand the cultural differences. Dr. Morrow outlined the purpose of the site visit which was to ascertain continued compliance with the requirements for approval of dental schools as set forth in chapter 2, article 1; § 1024.1 of Title 16 of the California Code of Regulations (CCR). The site visit was conducted under authority of § 1024.11 of Title 16 of the CCR, which states in pertinent part: "The Board may, in its discretion, conduct a site inspection to ascertain continued compliance with the requirements of these regulations." Section 1024.1 of the CCR identifies 12 Institutional Standards and 42 Sub-Standards that must be met to show continued compliance and to obtain renewal of the Board's approval. After the evaluation, the site team made four (4) recommendations. These recommendations are minor (in the Site Teams opinion) and do not reflect negatively the quality of the educational product that the school produces. These are suggestions on how the school might improve the overall quality of its education.

1. Institutional Standard (a): Institutional Mission, Purposes and Goals

The school is in compliance with this standard. While the University DeLaSalle Bajio School of Dentistry has an ongoing outcomes assessment program in place, it has been so recently implemented they did not have a representative sample of data, at the time of the site visit, for review. The site team recommends that, within a 2 year period from the re-approval date, the University DeLaSalle submit, to the Dental Board for review, a representative sample of data resulting from their outcomes assessment measures.

2. Educational Standard (b): Educational Program (Admissions Policy)

The school is in compliance with this standard. The site team recommends that the University DeLaSalle Bajio School of Dentistry consider a revision of its admissions policy to state that, following a review and evaluation of the applicant's pre-admission education, additional courses of instruction may be required to meet the minimum requirements for admission to the University DeLaSalle Bajio School of Dentistry's California Dental Program.

The recommendation came about after a meeting between the Site Team and only students in the California program. The students related that they were not aware that they might need additional pre-requisite courses before admission to the program. The California students can apply to De La Salle Dental Program upon graduation from high school having had only twelve (12) years of education. They may not be adequately prepared for the program. Students from Mexico are required to have completed 15 years of education. Five students per year are accepted into the California program.

3. Educational Standard (c): Educational Program (Curriculum)

The school is in compliance with this standard. The site team recommends that the school develop and maintain an ongoing process for collection and evaluation of data to support that their graduates are, in fact, competent in the clinical competencies identified in Educational Standard (c); (6); (A-N). The site visit team also recommends that the Board request submission of such data within a 2 year period following the re-approval date.

4. Institutional Standard (j): Catalog

The school is in compliance with this standard. The site team recommends that the catalog be revised to reflect the recommendation under § 1024.1, sub-section (b) Educational Program (Admissions Policy). The site team recommends that the University DeLaSalle Bajio School of Dentistry consider a revision of their admissions policy, as stated in the catalog, that following review and evaluation of the applicant's pre-admission education record, additional courses may be required to meet minimum requirements for admission to the University DeLaSalle Bajio California Dental Program.

There was additional discussion about the difference between the National, California, and International dental programs at Universidad De La Salle. Dr. Morrow indicated that the National program (available to Mexican students only) and the California program (available to legal citizens of the United States) are equivalent in education. The International program is a graduate program composed of students from dental schools, other than Mexico, who hold legal citizenship in the United States and who plan to return to the U.S. to practice. In Dr. Morrow's opinion, the De La Salle International program is equivalent to United States International dental programs.

There was some discussion about requirements for admission to the University DeLaSalle Bajio School of Dentistry's California Dental Program. Dr. Morrow stated that all graduates of the DeLaSalle California Dental Program are educationally eligible to take the WREB (Western Regional Examination Board). Dr. Nelson Artiga commented that any of the DeLaSalle National Program students who wish to take the WREB must complete 1 additional year of school (11 more subjects) to be educationally eligible.

Dr. Alan Felsenfeld, UCLA faculty member, speaking on behalf of himself commented that he has been a member of several site teams and as such pointed out the difference between a "recommendation" and a "suggestion". He stated that on his site visits if he gave a suggestion, the school could choose whether they would implement the suggestion or ignore it. However, if a recommendation was given, it must be implemented; the approval or accreditation is conditional upon implementation of the recommendation. In other words, a recommendation is mandatory, a suggestion is not. Dr. Felsenfeld asked if the four (4) recommendations for DeLaSalle are actually suggestions or are they mandatory. Dr. Morrow stated that he is also familiar with CODA's terminology but this was not a CODA assessment. The site team chose to use the term "recommendation" in the same way CODA uses the term "suggestion". He reiterated that he believes the recommendations are minor and do not have any negative effect on the educational product of the school. There was no further public comment. M/S/C (Bettinger/Burton) to accept the report. The motion passed with 1 recusal.

AGENDA ITEM 2(A): Discussion and Possible Action Regarding Acceptance of the Subcommittee Recommendations Regarding the Universidad De La Salle's Renewal Application;

Dr. Le thanked Dr. Morrow for his excellent report and stated that the Board is lucky to have such an expert on school standards as one of their own. Dr. Le stated that on behalf of the subcommittee she would like to report that after review of the completed renewal application submitted by the University De La Salle Bajio School of Dentistry requesting Board re-approval of the its dental education program, and following the review of the Onsite Inspection and Evaluation Team's report, the Subcommittee finds that the University De La Salle School of Dentistry has adequately demonstrated that the institution remains in compliance with the Institutional Standards identified in Chapter 2, Article 1, Section 1024.1, Title 16 of the California Code of Regulations that are required for Board approval, and re-approval, of dental schools.

The Subcommittee recommends that the Dental Board consider granting re-approval of the University De La Salle Bajio School of Dentistry.

Additionally, the Subcommittee suggests implementation of the four (4) recommendations of the Onsite Inspection and Evaluation Team Report as stated in the DBC Agenda Item 1. M/S/C (Burton/Downing) to accept the Subcommittee Report. The motion passed with 1 recusal.

AGENDA ITEM 2(B): Discussion and Possible Action Regarding A Decision on the Renewal Application for Universidad De La Salle

Dr. Le stated that the Subcommittee recommends that the Dental Board of California grant re-approval of the University De La Salle Bajio School of Dentistry in accordance with Business & Professions Code, Section 1636.4(g) for an additional seven years. In addition, the Subcommittee suggests implementation of the four (4) recommendations in the Onsite Inspection & Evaluation Team Report as outlined in Agenda Item 1.

Ms. Rebecca Downing, Board member, asked for clarification of what the Board will do with the sample data of the De La Salle's outcome assessment measures, requested in the Site Team's recommendation #2. Is this is a typical process that the Board conducts with other schools – periodic updates? Dr. Morrow responded with the suggestion that when the data is available, that he and Dr. Le review the data and report back to the full Board. He commented that statute allows for the Board to periodically assess schools. Kristy Shellans, legal counsel, commented that statute envisions that periodic assessments would be conducted by the Board on an ongoing basis. She commented that it is appropriate for the Board to periodically check in with schools. Dr. Suzanne McCormick, Board member, commented that it should be clarified whether or not the Board intends the Site Teams recommendations are a “must” statement or a “suggestion”; and as a secondary issue (separate from the re-approval of its renewal) continued evaluation/periodic assessment of the school.

Dr. Tom Olinger, Board member, commented that he finds the process of approval of this foreign dental school to be unfair relative to the other dental schools in the U.S. and Canada who utilize the CODA process and standards. He said his comments to not reflect poorly on the Board, the Site Team, or the University De La Salle, but he feels the Board is not qualified to evaluate foreign dental schools. He would like to see the Board make CODA the Board's agent. He asked legal counsel if a legislative change would need to be developed in order to utilize CODA. Richard DeCuir, Executive Officer, indicated that CODA did not have an international dental school evaluation process available for the Board to utilize for the University De La Salle evaluation. Kristy Shellans, legal counsel, commented that the Board's regulations allow the Board to accept the findings of an organization in lieu of its own, but that she understood that CODA was not yet up and running to evaluate the University De La Salle.

Dr. McGrath, Dean of the University De La Salle Dental School, commented that whether “recommendations” or “suggestions”, the school will work to comply. She indicated that one of the main purposes of the school is to be better and to work with international standards to train dentists to be qualified to work any place, including in the United States. Mr. DeCuir asked her if the University De La Salle Dental School would work to implement the four recommendations outlined in the Site Team report. She responded, yes – no problem.

M/S/C (Morrow/Bettinger) to accept the Subcommittee recommendation to grant re-approval of the University De La Salle Bajio School of Dentistry for an additional seven years. The motion passed with one abstention and one recusal. Enthusiastic congratulatory applause.

M/S/C (Burton/Bettinger) to accept the Subcommittee suggestion to notify the school (University De La Salle Bajio School of Dentistry) of the recommendations in the Onsite Inspection & Evaluation Team Report as outlined in Agenda Item 1 which include the following:

1. Institutional Standard (a): Institutional Mission, Purposes and Goals

2. Educational Standard (b): Educational Program (Admissions Policy)
3. Educational Standard (c): Educational Program (Curriculum)
4. Institutional Standard (j): Catalog

Dr. Suzanne McCormick expressed concern that the language of this motion is critically important. There needs to be a clean paper trail for future boards to reference that separates the decision to approve the schools renewal from the continued compliance issues. She emphasized that the two should not be married. She wanted to make clear for the record that the recommendations/suggestions are not deficiencies, rather are expectations that will be considered in ongoing compliance review. Kristy Shellans offered the suggestion that the Board could consider notifying the school of the additional minor issues that were raised during the site visit and bring attention to these issues as part of an ongoing approval of the program. The motion passed with one abstention and one recusal. There was no further public comment.

Mr. DeCuir mentioned that in his opinion too many years had lapsed between the initial approval and the recent site visit with regard to an ongoing compliance assessment. He asked the Board to consider as a future agenda item, discussion of whether or not to schedule another site visit in less than seven years. Dr. Olinger indicated that he preferred the Board get out of the business of evaluating any dental school. He asked that for a future agenda item, staff look into transferring the responsibility to another organization. Dr. Casagrande mentioned that when this legislation was developed, the intent was to bring Spanish speaking dentists into the Los Angeles area to treat Spanish speaking patients. He would like staff to track how many students from the University De La Salle three dental programs come into California to practice and are they serving the Spanish speaking community. He asked that this be brought back to a future meeting.

Dr. Mary Jean McGrath gave her closing comments about the process and thanked the Board, Site Team, and staff for their cooperation. Many thanks.

Agenda Items were taken out of order to accommodate speakers.

AGENDA ITEM 4: Presentation by the California Dental Association Regarding Possible Future Legislation to Require Dental Labs to Register with the Dental Board and Disclose Material Types and Place of Origin

Mr. Bill Lewis, California Dental Association (CDA) appeared before the Board to discuss issues relating to dental laboratories. He introduced Dr. Tom Stewart, former CDA President who has practiced general dentistry for 36 years; and who served as Chair of the CDA Dental Laboratory Task Force. Dr. Stewart explained that in response to incidents of lead-content appearing in crowns produced in China, the CDA House of Delegates, in 2008, approved a resolution that launched what became three years of evaluation and discussion focusing on the many issues affecting the dental laboratory industry in California. By its own account, and due in part to the fact that dental laboratories currently are not regulated in California, CDA focused on the implications of the state's inability to assure that dental patients have at least minimal information about the materials that are being placed in their mouths. At the conclusion of the evaluation, the House of Delegates called for CDA to pursue legislation requiring dental lab disclosure of materials and place of origin, and to consider pursuing legislation requiring dental labs to register with the Dental Board. CDA comes before the Board to discuss these concepts with key stakeholders with the goal of developing consensus legislation to introduce in 2013.

The basic proposal is to require dental labs doing business in California to register their name and address, similar to the current requirement for dental referral services. The proposal would further require dental labs disclosure of materials and place of origin.

Bennett Napier, representing the National Association of Dental Labs appeared along with Steven Simon, representing the California Dental Laboratory Association. Both organizations support this

endeavor. Mr. Napier explained that the American Dental Association is looking into the issue of dental laboratory registration. He mentioned that there are currently 10,000 domestic dental labs in the U.S. Three years ago there were 14,000. The business model for dental laboratories is changing and it is common to have a dental lab be a broker, rather than a trained technician. More dental laboratories are producing products off shore. He went on to say that nine states already have statutes relating to registration of dental labs and that there are six more states in the process of developing legislation. He feels the legislation is important because the off shore element of the production of crowns, dentures, bridges, etc. is increasing. In 2004-5 the US Food and Drug Administration indicated that 15% of the dental product market was off shore. This number has increased to 38%. He expressed concern that there exists no accountability mechanism to ensure the products are safe.

There was discussion about fees that would need to be charged in order to cover the costs of board staff processing registration applications. It was noted that registration goes hand-in-hand with enforcement and that registration of dental laboratories might increase the enforcement issues in a time of severe fiscal constraint in the State. Kristy Shellans, legal counsel, commented that some Boards have a requirement that licensees use "accredited" facilities. She cautioned that if the Board moved forward with considering dental laboratory registration, that the dental laboratories would be considered licensees of the Dental Board.

Dr. John Bettinger, Board member, asked if CDA had documented any public harm relating to dental labs in its three year evaluation. Dr. Stewart answered that the dentists surveyed did not have issues with their own labs, but they were aware of what was being reported.

Mr. Lewis, CDA, commented that CDA is very sensitive to the "resources" issues. He feels that creation of a dental lab registry by the Dental Board would not create a high enforcement burden. Dr. Luis Dominicus, Board member, indicated that he had worked as a dental technician for twelve years. He feels this proposal has merit; however the Board would need the resources to implement it. This discussion was concluded when Board President, Dr. Bruce Witcher appointed a subcommittee of Drs. Dominicus and Olinger to work with CDA, key stakeholders, and staff to determine the feasibility of this proposal.

AGENDA ITEM 5: Presentation by Dr. Paul Glassman Regarding Office of Statewide Health Planning and Development (OSHDP) Pilot Project (HWPP #172) Relating to Training Current Allied Dental Personnel for New Duties in Community Settings

Dr. Paul Glassman, Project Director for the Office of Statewide Health Planning and Development (OSHDP) Pilot Project (HWPP #172), gave a presentation outlining the training of current allied dental personnel for new duties in community settings. He stated that this Project is part of the Virtual Dental Home Project whose purpose is to develop new delivery models to bring care to the underserved. One of the methods being studied is the use of RDHAP's in community settings to collect digital records such as health history, x-rays (through a portable x-ray unit), charting and risk assessment transmitted to a dentist who is able to review those records and make a decision about what the best course of treatment is. Dr. Glassman stated that HWPP #172 is a study to determine the merits of adding 2 new specific duties; deciding which radiographs to take and placing interim fillings, thus enabling RDH's and RDHAP's to extend their ability, using the Virtual Dental Home, to provide care onsite to kids in schools and elders, possibly in nursing homes. At the present time there are nine different sites where this study is being conducted. Dr. Morrow stated that he has been involved in the 2 site visits that have been conducted so far and he is impressed with the enthusiasm and engagement of the auxiliaries and the school/clinic administrations. He went on to say that he was surprised by the small number of interim restorations being placed and impressed by the number of patients being referred to the collaborative dentist for treatment to be done. Trainees are staying well within the limits of what they could do in this program and still protect the patient.

AGENDA ITEM 3: Discussion and Possible Action Regarding the California Dental Association's Request to Amend Regulations Pertaining to Mobile Dental Clinics (Cal. Code of Regs., Title 16, §1049)

Bill Lewis, representing the California Dental Association (CDA), explained that his organization submitted a letter to the Board's Executive Officer seeking consideration to promulgate additional regulatory requirements relative to mobile dental clinics. He and his organization contend that there has been a shift in mobile dental clinic care from a not-for-profit model to a private sector for-profit model. He said that CDA has been looking at the issues surrounding mobile dental clinics for a number of years, particularly related to schools; and has worked with a coalition of public health groups to establish guidelines for schools to use to evaluate private mobile dental clinics and their services. As an extension of the work conducted with schools, CDA reviewed the Board's regulations governing mobile and portable dental providers and found the regulations lacking (in its opinion) appropriate measures to ensure accountability and public safety. Mr. Lewis indicated that some concerns include insufficient follow-up, clear documentation of a dentist of record, record keeping, clear information provided to the patient, emergency contact information, and referrals for additional care.

CDA is opening a dialog for the Board to put into place the same standard of care requirements for mobile dental clinics as are required of the traditional brick and mortar dental office. Mr. Lewis suggested that this be accomplished by revising the current regulatory language.

Kristy Shellans, Legal Counsel, commented that this proposal and language needs more work. She expressed concern regarding authority, clarity, and consistency with current law and pointed out that the proposed exemptions look overly broad. She cautioned the Board to take extra care in evaluating the proposal and to be mindful of Business & Professions Code, Section 1657 which states that the Board should not implement regulations that would limit competition.

Dr. Tom Olinger, Board member, agreed with CDA's concept and asked that staff evaluate CDA's proposal and present recommendations at the August meeting. Dr. John Bettinger, Board member, commented that Mobile Dental Clinic permits currently register a place of practice and practitioners are held to the same standard of care as office practitioners. He asked if there had been any complaints filed on this issue. Ms. Kim Trefry, Dental Board Enforcement Chief, answered that there have been no complaints. At this point in the discussion, Dr. Bruce Witcher, Board President, appointed a subcommittee of Drs. Bettinger and Le to work with staff to evaluate CDAs proposal and to bring recommendations back at the next opportunity.

Public Comment: Dr. Cal Kurtzman provided comments on his mobile dental practice. Dr. Kurtzman practiced dentistry in Santa Monica for 40 years. He was the first coordinator of the UCLA Mobile Dental Program in the 1970s. Currently he and his partner treat the elderly who can't leave home. He expressed concern about a shortage of care for adults who can't get to a dental office. Most of his patients are treated in bed. He asked the Board to be mindful of the small mobile dental practices when making changes to the regulations. Dr. Bettinger explained that he had asked Dr. Kurtzman to comment on this issue to give public Board members an opportunity to see another side of mobile dental practices. He believes there is a difference between mobile dentistry units and portable dentistry and does not want to restrict portable dentistry that is provided by practitioners like Dr. Kurtzman.

Katie Dawson, California Dental Hygiene Association and an RDHAP mentioned that she takes her equipment into all locations. She feels that RDHAPs provide an important service that improves the quality of life for many non-ambulatory people.

AGENDA ITEM 6: Presentation by Western Regional Examination Board (WREB) Representative Regarding WREB Activities and the Recently Completed Governance Restructuring Process

Dr. Charles Broadbent, Director of Examination Development for WREB, reported that WREB is a non-profit organization whose members consist of individuals from each of the 18 member states. Each member state has one vote on each of the Dental Exam Review Board (DERB) and Hygiene Exam Review Board (HERB), where exam content and administration is determined. Dr. Broadbent reported that the WREB Board of Directors role has changed under the new governance structure. The Board of Directors will now be responsible for Strategic Planning Oversight, Financial Oversight and the Legality of what WREB does. The leadership of WREB is elected by the 2 Boards, DERB and HERB. The WREB examination is developed in accordance with established guidelines: "The Standards" with cooperation from the American Psychological Association, the National Council on Measurement in Education, the American Educational Research Association and the American Association of Dental Boards. Dr. Broadbent stated that WREB holds 32 examinations per year testing approximately 2,500 Dentists and 1,400 hygienists of which about 30% are from California. Dr. Casagrande commented that for the number of candidates from California taking the WREB exam, California should be represented on the WREB Board. Dr. Sharon Golightly, Dental Hygiene Educator, commented that the nice thing about WREB is that it is accepted in 18 different states so a candidate has mobility between states.

Committee/Council Meetings Commenced at 3:16 p.m.

Dr. Richard Robert, representing the California Association of Oral and Maxillofacial Surgeons, commented that he would like to suggest constructive refinements to the current Dental Sedation Assistant program. He stated that he has been involved in training at his office for over 30 years. It took his assistants a year to go through the program that was intended to take 4-6 months. He reported that some of the courses that had recently been completed, such as Infection Control and Law and Ethics, were required to be taken again at a cost of about \$1,000.00 per person. CALOAMS requests that those courses that were taken within the last 2 years be accepted and not have to be re-taken. He stated that he reviewed the curriculum and was part of the team that put it together a few years ago yet his assistants told him that the examination was not based on that curriculum but just those duties included in the statutes. His assistants asked him why he made them study hundreds of pages of information when they probably could have read about 10 pages and passed the exam. He requested a study guide be provided for those preparing to take the examination. CALOAMS respectfully requests that the Board examine these issues.

The meeting recessed at 7:29 p.m. and was scheduled to resume at 8:30 a.m. on Friday May 18, 2012.



**Dental Board of California
Meeting Minutes
Friday, May 18, 2012**

Embassy Suites SFO Airport Waterfront
150 Anza Blvd., Burlingame, CA 94010

DRAFT

Members Present:

Bruce Whitcher, DDS President
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Fran Burton, Secretary
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Luis Dominicis, DDS
Rebecca Downing, Public Member
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Members Absent:

Steve Afriat, Public Member
Judith Forsythe, RDA

Staff Present:

Richard DeCuir, Executive Officer
Denise Johnson, Assistant Executive Officer
Kim Trefry, Enforcement Chief
Sarah Wallace, Legislative and Regulatory Analyst
Karen Fischer, Associate Analyst
Linda Byers, Executive Assistant
Kristy Shellans, DCA Senior Staff Counsel
Greg Salute, Deputy Attorney General

Dr. Bruce Whitcher, President called the meeting to order at 8:30 a.m. Fran Burton, Secretary called the roll and a quorum was established.

AGENDA ITEM 7: Approval of the Full Board Meeting Minutes from February 23-24, 2012, April 11, 2012 Teleconference Minutes, and Acceptance of the Dental Assisting Committee Minutes for February 23, 2012

M/S/C (Dominicis/McCormick) to approve the February 23-24, 2012 Dental Board meeting minutes. The motion passed unanimously. M/S/C (Morrow/Burton) to approve the April 11, 2012 Teleconference minutes. The motion passed unanimously. M/S/C (McCormick/Bettinger) to accept the February 23, 2012 Dental Assisting Committee minutes. The motion passed unanimously.

AGENDA ITEM 8: President's Report

Dr. Whitcher reported that he and Dr. Le attended the California Dental Association (CDA) Convention where they volunteered with the Dental Board staff from the Orange office manning the Dental Board's exhibit. Dr. Whitcher and Dr. McCormick attended the California Dental Society Anesthesia meeting and gave them an update on the Board's activities. Dr. Whitcher conducted a General Anesthesia Evaluator Calibration Course in Union City with Dr. Leighty from the Diversion

Evaluation Committee. He also attended a meeting of the California Association of Oral and Maxillofacial Surgeons (CALOAMS) in Westlake Village and had a conference with them regarding issues relating to the Board then traveled to Anaheim for another General Anesthesia Evaluator Training Course along with Dr. McCormick and Dr. Tracy from the Diversion Evaluation Committee where CDA was kind enough to provide a room where they conducted training concurrent with the CDA Convention. Dr. Witcher reported that many of the discussions regarding the CDA special session were centered on the workforce capacity and SB 694. He reported that the Clearinghouse of Healthcare Occupations annual report will be coming out in June. After the data is collected, there will be an annual report to the Legislature that will identify education and employment trends in healthcare professions and report on current supply and demand for healthcare workers in California. Dr. Witcher appointed a subcommittee of Rebecca Downing and himself to take stock of this information and how it might be useful.

AGENDA ITEM 9: Executive Officer's Report

Richard DeCuir, Executive Officer reported that the Enforcement Unit made some arrests of unlicensed practitioners in Ventura County and insurance fraud arrests in Beverly Hills. The Department eliminated all home storage permits which allowed the investigators to take their work vehicles directly from their residence to work in the field. There is a proposal on the table to reduce the Dental Board's vehicles from 18 to 11. Recently, the Board fought for the 11 vehicles from the originally proposed 4. As part of the budget deficit the board was advised that it will need to cut 2.5 positions. Mr. DeCuir reported that he attended his first Dental Assisting Practical Exam at UOP. He also attended a special meet and greet with the Agency Secretary, Anna Caballero, for all of the Executive Officers of the Department of Consumer Affairs along with staff from the Governor's Appointments Office. The Appointments Office encouraged the Executive Officers to engage with them regarding Board Appointments. The State and Consumer Services Agency will be setting up a program called Vets to Work, within the Department of Consumer Affairs to help veterans return to the workforce. Mr. DeCuir reported that the Registered Dental Assistant (RDA) application requirements will change; beginning August 1, 2012, all application requirements must be met prior to sitting for the examination. Michelle Callaghan, Carrington College asked if the fingerprinting requirement would apply as well. Mr. DeCuir replied that the application would be considered incomplete if the fingerprints weren't done. Dr. Witcher took a moment to thank Kristy Shellans, the Dental Board's Legal Counsel, for her hard work and dedication and to wish her well as this is her last meeting. Ms. Shellans commented that she is leaving us in the capable hands of Spencer Walker but she will be available.

AGENDA ITEM 10: Update on Dental Hygiene Committee of California (DHCC) Activities

Mr. Alex Calero, DHCC President, reported that at the April DHCC meeting the Committee voted to amend their existing retroactive fingerprint regulations to allow licensees who are on inactive status to avoid having to come to California to be LiveScan fingerprinted. The Committee also voted to make some changes to the Sponsored Healthcare Regulations. DHCC Staff is preparing to submit the proposed regulatory changes to their Disciplinary Guidelines. Mr. Calero reported that the Committee has begun discussions about accepting other regional licensing exams in addition to Western Regional Examination Board (WREB). Dr. Olinger asked how many hygienists the DHCC regulates. Lori Hubble, Executive Officer answered about 29,000. Dr. Olinger asked how many disciplinary actions they had had in the past year. Ms. Hubble answered less than 10. Dr. Olinger questioned why the number was so low. Greg Salute, Deputy District Attorney stated that the DHCC licensees are subject to the subsequent arrest reports the same as the Dental Board licensees, they are fingerprinted the same as the Dental Board licensees and they subscribe to the Department of Justice so they are notified of any arrests or convictions of licensees.

AGENDA ITEM 11: Budget Reports: Dental Fund & Dental Assisting Fund

Mr. DeCuir reported that the Boards budgets separated into two appropriation accounts: Dentistry \$11,227,000 and Dental Assisting \$1,673,000 for a total appropriation of \$12,900,000. According to the March 2012 CALSTARS report, as of March 31, 2012, the Dental Board had spent approximately 66% of its FY 2011-12 Dentistry budget appropriations (roughly \$7.4 million). Based

on these expenditures, the Board is projected to revert approximately \$663,000, or 5.6% at the end of this fiscal year (June 30, 2012). For Dental Assisting, the Board has spent approximately 71% of its FY 2011-12 Dental Assisting appropriations (roughly \$1.2 million). Based on these expenditures, the Board is projected to revert approximately \$74,000 or 4.4%. So, for the current fiscal year the Board expects a total reversion of \$737,000 or approximately 5%. Mr. DeCuir had the budget office prepare a report showing reversions by FY from 2006-07 to 2010-11.

AGENDA ITEM 12(A): Discussion and Possible Action Regarding Staff's Recommendation for Appropriate Fee Increases in Dentistry to Sustain Board Expenditures; and

Mr. DeCuir reported that at the February 2012 Board Meeting, discussions began regarding the necessity to propose licensure fee increases to fund the 12.5 new Consumer Protection Enforcement Initiative (CPEI) positions established in 2010. These positions came at a cost of approximately \$1.2 million. Initial licensure fee increases were projected by Mr. DeCuir to be increased to approximately \$405.00 biennially (a \$20.00 per year increase). Current biennial licensure fees are \$365 and were last increased in 1998. Mr. DeCuir reviewed different fee increase scenarios provided by the Department's Budget Office, depicting the Dental Board's projected fiscal solvency through FY 2015-16. Without fee increases, the Board is projected to begin operating in a deficit spending situation in FY 2015-16. Dr. Olinger commented that if the \$4.4 million outstanding loan is paid back; because it must be before fees are increased; and we increase fees, we will have a large surplus. Mr. DeCuir stated that the scenarios were constructed with the \$4.4 million repayment built-in in addition to the fee increases and they still show fiscal insolvency by FY 2015-16. M/S/C (Dominicis/Burton) to accept the staff report. The motion passed unanimously.

AGENDA ITEM 12(B): Discussion and Possible Action Regarding Initiation of a Rulemaking to Amend California Code of Regulations, Title 16, §1021 Relevant to Examination, Permit and Licensure Fees for Dentists

Ms. Wallace reported that staff had prepared proposed regulatory language for the Board's consideration. Mr. DeCuir commented that the proposed language contains provisions for a 23% fee increase and updates the regulatory fee schedule. Dr. Olinger asked if we have discretion on the proposed numbers. Ms. Shellans answered yes, but any fee established must be supported by data showing a workload analysis as to how much it is going to actually cost to process the applications. Dr. Whitcher commented that it would be easier to support this if workload analysis information were available for review. Ms. Shellans recommended that a workload analysis be done on each one of the increases to justify the maximum increase. She stated that the control agencies will scrutinize any proposed fee increases so there must be data to support it. Ms. Shellans suggested that analyses be prepared as it would be for a filing. M/S/C (Olinger/Le) to table the discussion on initiating a proposed rulemaking to increase the fees until the Board can review further data supporting the fee increases at a future Board meeting. Dr. Earl Johnson commented that the increase for a replacement license is outrageous. He further stated that some of the fee increases make sense but this one is just gouging the people who support the Board. Dr. Guy Atchison commented that in looking at the projections within the five scenarios it looks like a fee increase would be required every year to prevent insolvency. Mr. DeCuir stated that the reversions will prevent the need for increases every year. Bill Lewis, CDA, commented that they would support the motion to defer this to a future meeting until a more thorough workflow analysis can be completed. The motion passed unanimously.

AGENDA ITEM 13: Update on Pending Regulatory Packages:

Sarah Wallace, Legislative and Regulatory Analyst gave an update on the pending regulatory packages.

A. Sponsored Free Health Care Events (Cal. Code of Regs., Title 16, §1023.15, 1023.16, 1023.17, 1023.18 and 1023.19)

Ms. Wallace reported that during the February 2012 Board Meeting the Board considered comments received during the 45-day public comment period and had made modifications to the text. As staff

was preparing to notice the modified text for the 15-day public comment period, the Department of Consumer Affairs (Department) contacted all Healing Arts Boards that have proposed regulations relevant to sponsored free health care events, that they may need to further clarify the Department's role in receiving and registering sponsoring entities. The Board held a special Teleconference meeting in April 2012 where they adopted a Resolution to formally delegate authority to the Department to receive and process sponsored entity registration forms and to register sponsoring entities for sponsored free health care events that utilize the services of dentists. The Board directed staff to add the adopted Resolution to the Board's Sponsored Fee Health Care Events rulemaking file. Additionally, the Board voted to modify the text accordingly. That language went out for the 15-day public comment period, during which no comments received. Per the motion at the April Board meeting the Board had already adopted the rulemaking language. Staff is finalizing the rulemaking file and getting ready to submit it to DCA for approval before submission to the Office of Administrative Law (OAL).

B. Notice to Consumers of Licensure by the Dental Board (Cal. Code of Regs., Title 16, §1065)

Ms. Wallace reported that at the November 2011 meeting the Board directed staff to approve regulatory language to initiate a 45-day public comment period. During that comment period there were no comments received so the Board had adopted, through its motion in November that regulatory language. Board staff prepared the final rulemaking file and submitted it to the Department. In late April the Department notified the Executive Officer that they had some concerns with the clarity of what had been proposed in the modified text. Board staff worked with the Department and Legal Affairs to develop amended language which will be discussed in Agenda Item 17.

C. Uniform Standards Relating to Substance Abusing Licensees and Disciplinary Guidelines (Cal. Code of Regs., Title 16, §1018 and 1020.5)

Ms. Wallace reported that the Board and staff has been working on this rulemaking file for the past year and received three legal opinions from different legal entities. At the last meeting the Board voted to let the current rulemaking expire until we could develop further regulatory language and seek further clarification from legal. Those legal opinions and additional proposed language will be reviewed in Agenda Item 14.

AGENDA ITEM 14(A): Discussion and Possible Action Regarding Legal Opinions Received Regarding Uniform Standards for Substance Abusing Healing Arts Licensees (SB 1441, Ridley-Thomas, Chapter 548, Statutes of 2008); and

Ms. Wallace reported that at the February Board meeting the Board voted to let the current rulemaking expire, which it did in March, until further clarification could be obtained from the Department of Consumer Affairs (Department) regarding the legal opinions that the Board had already received which included;

- Board's Legal Counsel's Interpretation
- Doreatha Johnson, Deputy Director of Legal Affairs for the Department
- Legislative Counsel
- Kathleen Lynch, Deputy Attorney General, Government Law Section.

Kristy Shellans, Board's Legal Counsel stated that the Board has options regarding implementing these standards, all of which come with differing consequences. The first option is to continue along, based on our Legal Counsel's opinion, with the Board's interpretation that it does retain discretion to alter the standards based upon the facts of any given case which is the way we currently operate. The Department made it clear that any Board's rulemaking package that does not conform, in the Departments opinion, to the Departments memo, which includes no discretion, will be disapproved. Another option is to accede to the Department's suggested Standards which cannot be altered if it is determined that someone is a substance abusing licensee. In this area the Department agrees that you do have the discretion to decide if a licensee is a substance abuser or not. Many of the Boards have struggled with how to implement that aspect of the legislation because there is no agreed upon definition of what constitutes a substance abuser.

AGENDA ITEM 14(B): Discussion and Possible Action Regarding Initiation of a Rulemaking to Amend California Code of Regulations, Title 16, §1018 and 1020.5 and to add a New Section Regarding Implementation of Uniform Standards for Substance Abusing Licensees

Several of the Boards have come up with different ways to implement the Departments suggested "Uniform Standards for Substance-Abusing Licensees" (Standards) with the understanding that you have the ability to define when a "trigger" occurs in other words when those Standards should be applied. Ms. Shellans stated that she drafted some options with the Dental Board in mind. She had them reviewed by Chief Counsel for the Department and all of the options are considered acceptable by the Department.

Option Number 1, the Presumption Trigger says that if the conduct involves drugs or alcohol the licensee would be presumed to be a substance abusing licensee. They would have the opportunity to rebut the presumption. If they don't rebut that presumption then the Standards would be placed in their probationary order. The positive side of this option is that it is easy to implement and there is not a lot of evaluation up front. The drawback is that it is overly broad. Ms. Downing asked how a licensee would rebut the presumption. Ms. Shellans answered that there would be a variety of ways including but not limited to their own sworn testimony, their therapist's testimony, test results from rehab etc. Dr. Olinger asked if a licensee who has never had any other problems but is caught once and given a DUI could use the fact that they have never been in trouble before to rebut the presumption that they are a substance abuser. Ms. Shellans answered yes. Dr. McCormick asked how the Standards versus our Guidelines mesh. Is there one that supersedes the other? Ms. Shellans answered that the Board has been directed to use the Standards developed by the Substance Abuse Coordination Committee however, the Board's Disciplinary Guidelines should still be used in formulating the penalty and in considering additional terms or conditions of probation.

Option Number 2, the Clinical Diagnostic Trigger would apply when there is evidence provided by an expert, usually a clinical diagnostic evaluator, that someone is a substance-abusing licensee. In other words if there is evidence presented at a hearing that the licensee is a substance abuser then the Standards would apply. If evidence is not presented at hearing, any case involving drugs and/or alcohol would mandate that the licensee be referred to a Clinical Diagnostic Evaluator. If the Clinical Diagnostic Evaluator determines that they are a substance abuser, the Standards would apply. The benefit of this trigger is that the expert opinion verifies the condition. The drawback is that the requirement for referral to the Clinical Diagnostic Evaluator includes a 30-day suspension during evaluation. There's no appeal of the 30-day suspension, it is required with the referral to the Clinical Evaluator. Dr. Bettinger asked if it was a suspension or a cease practice because there is a difference. Mr. DeCuir answered that a suspension does not mean that the entire operation must be shut down just that the individual licensee must cease practice. He also stated that a Clinical Diagnostic Evaluation itself can take anywhere from 2 hours to as much as 3 days. Ms. Shellans stated that the Standards use the term 'cease practice' not suspension. Ms. Downing asked who the Clinical Evaluators would be. Mr. DeCuir answered Psychiatrists or Psychologists. Ms. Downing asked if they have a professional standard that allows them to put this particular label on a person. Ms. Shellans stated that as she said before, the Boards of Psychology and Behavioral Sciences have no agreed upon industry standard or definition for what constitutes a substance abuser.

Option Number 3 states that if, after notice and a hearing, the Board finds that the evidence establishes an individual as a substance abuser then the Standards would be applied. This places the burden on the Executive Officer to decide which cases to plead as substance-abusing. The Executive Officer must provide affirmative evidence that the licensee is a substance abuser in order for the Standards to be triggered. Ms. Shellans stated that this trigger is more of a factual analysis up front but more legally defensible because of the burden of proof required to implement it. That way, the licensee is put on notice about what is about to happen, they can provide their own proof if they so choose and they have a chance to defend themselves before the label of drug abuser is put on them and the Standards are applied. Dr. Bettinger stated that just to clarify, with option number 3, if a person has one DUI, there's no cease practice until a hearing determines the facts and they

have the opportunity to defend themselves and provide evidence at the hearing before the Standards are implemented. Ms. Shellans agreed.

M/S/C (Burton/Bettinger) to accept the proposed regulatory language as outlined in option 3 relevant to the Uniform Standards for Substance-Abusing Licensees and direct staff to take all steps necessary to initiate the formal rulemaking process including noticing proposed language for 45-day public comment, setting proposed language for public hearing and authorizing the Executive Officer to make any non-substantive changes to the rulemaking package. If, after the close of the 45-day public comment period and public regulatory hearing, no adverse comments are received, authorize the Executive Officer to make any non-substantive changes to the proposed regulations before completing the rulemaking process and adopt the proposed amendments to California Code of Regulations, Title 16, § 1018 and 1018.01.

Dr. Morrow stated that his understanding is that using Option Number 3 would leave the determination of who is and who is not a substance abuser to the Board by way of the Executive Officer rather than having an outside determination. Ms. Shellans answered that there must be a factual analysis which may require Clinical Evaluations as part of the Executive Officer's determination. The Executive Officer has the authority to require a licensee to undergo a Clinical Evaluation. Dr. Morrow commented that it appears that this option allows the Board to continue in the manner that most closely resembles current operations. Ms. Shellans stated that with this option you still preserve the ability to decide how to prosecute your cases. Dr. Morrow asked if Option 3 will be acceptable to the Department. Ms. Shellans answered that she ran it by the whole legal office including the Chief Legal Counsel who will be reviewing these for the Department and she was told that all three of these options would be amenable to the Department. Mr. DeCuir asked what the Pharmacy Board did about this at its last meeting. Ms. Shellans stated that the Pharmacy Board withdrew their current package which would have been deemed non-compliant by the Department and asked her, as their Legal Counsel, to bring something back for them at the next meeting. At that time, she stated, she had not yet had a chance to put together these options for discussion. The Pharmacy Board was also concerned about the legal defensibility of the statute so they asked their Executive Officer to seek a formal Attorney General's opinion. Bill Lewis California Dental Association (CDA) asked regarding option 3, at what point, in the evidence gathering process, could a Clinical Evaluation potentially come into play, which would then generate the suspension of practice? Ms. Shellans answered that the suspension only occurs after the evidence presented at the hearing has proven that someone is a substance-abusing licensee. Mr. Lewis then asked if the Standards, in their entirety, were incorporated by reference into the Guidelines. Ms. Shellans stated no, she created her own document titled "Uniform Standards Related to Substance-Abusing Licensees with Standard Language for Probationary Orders" incorporating only those SACC standards that needed to be in regulation for probationary orders. Mr. Lewis asked how the implementation of these standards would affect a self-reporting Diversion candidate. Ms. Shellans stated that they are working on that portion with Richard, staff and other legal counsel. Ms. Downing asked if there is a tool to accommodate stipulated settlements. Ms. Shellans stated that will be something that Mr. DeCuir must decide on a case by case basis as it is not something that needs to be in regulation. Dr. Morrow asked if Ms. Shellans thought that a licensee could self report to the Diversion Program but not be labeled a substance abuser. Ms. Shellans stated that has yet to be determined as the Diversion element of this package is still being worked on. Dr. Olinger asked if a licensee goes to a private rehabilitation Center would they be protected from action by the Dental Board. Ms. Shellans said no, that might lower the testing frequency. If someone were to report them to the Board, the same standards, including the 30 day cease practice, would apply. Dr. Casagrande asked if the Board itself has discretion to direct the Executive Officer as to what they consider a substance abuser. Ms. Shellans said no it does not because there is no definitive definition of a substance abuser. The motion passed unanimously.

AGENDA ITEM 15(A): Discussion and Possible Action Regarding Comments Received During the 15-Day Public Comment Period for the Board's Proposed Rulemaking to Add Title 16, CCR, §1023.15, 1023.16, 1023.17, 1023.18, and 1023.19 Relevant to Licensure Exemption for Out of State Licensed Practitioners to Provide Healthcare Services at Sponsored Free Health Care Events

Ms. Wallace reported that there is no Board action required on this item. It was placed on the Agenda in the event that any adverse comments were received during the 15-day public comment period however, none were received. Since no comments were received, as of the April 2012 meeting the Board had adopted all amendments in the modified text. The Board will be moving forward with the final rulemaking process.

AGENDA ITEM 15(B): Discussion and Possible Action Regarding Adoption of Proposed Additions to Title 16, CCR, §1023.15, 1023.16, 1023.17, 1023.18, and 1023.19 Relevant to Licensure Exemption for Out of State Licensed Practitioners to Provide Healthcare Services at Sponsored Free Health Care Events

No action necessary.

AGENDA ITEM 16: Discussion and Possible Action to Consider Initiation of a Rulemaking to Amend California Code of Regulations, Title 16, §1004 Regarding Abandonment of Applications

Ms. Wallace reported that Board staff and legal counsel worked together to develop proposed regulatory language relevant to abandonment of applications. At previous meetings, the Board had discussed the Dental Assisting Forum's recommendation to split the existing Registered Dental Assistant in Extended Functions (RDAEF) examination into two separate components. Board staff and Legal Counsel have developed proposed regulatory language to clearly specify that any applicant for a license who fails to complete application requirements within a specified amount of time shall be deemed abandoned and will be required to file a new application. In addition, due to the exorbitant number of incomplete or deficient applications, Board staff and Board legal Counsel have developed proposed language to clearly specify that any deficient application will be deemed to be abandoned if the applicant has not responded within one year of the date of notice of deficiency and will be required to file a new application and meet all of the requirements which are in effect at the time of reapplication. This proposal would apply to any application for a license issued by the Board. M/S/C (McCormick/Morrow) to accept the proposed regulatory language relevant to the abandonment of applications, and direct staff to take all steps necessary to initiate the formal rulemaking process, including noticing the proposed language for 45-day public comment, setting the proposed language for a public hearing, and authorize the Executive Officer to make any non-substantive changes to the rulemaking package. If after the close of the 45-day public comment period and public regulatory hearing, no adverse comments are received, authorize the Executive Officer to make any non-substantive changes to the proposed regulations before completing the rulemaking process, and adopt the proposed amendments to California Code of Regulations, Title 16, §1004 as noticed in the proposed text. The motion passed unanimously.

AGENDA ITEM 17(A): Discussion and Possible Action to Consider Recommendations from the Department of Consumer Affairs to Modify the Board's Proposed Rulemaking to Add California Code of Regulations, Title 16, §1065 Regarding Requirements for Posting Notice to Consumers of Licensure by the Dental Board:

Ms. Wallace reported that, after the November 2011 meeting, staff noticed the Notice to Consumers regulatory package for 45-days and held a public regulatory hearing to accept comments. The Board did not receive comments in response to the proposed regulation. Since there were no adverse comments received in response to the proposed text, the Board adopted the final text as noticed in the proposed text at its November 7, 2011 meeting.

Staff submitted the final rulemaking package to the Department of Consumer Affairs (DCA) on March 12, 2012 to begin the review process. On April 26, 2012, DCA notified Board staff of concerns that the proposed language was not legally consistent with Business and Professions Code Section 1611.3. Board staff worked with Legal Counsel and DCA to develop proposed modified text to address DCA's concerns. Business and Professions Code Section 1611.3 provides that the Board shall require the notice to be posted in a conspicuous location accessible to public view; therefore, staff recommended that subdivisions (b)(2) and (b)(3) should be stricken because providing notice in the patient's record or on a statement on letterhead, discharge instructions, or

other document may not be accessible to public view.

M/S/C (Dominicis/Bettinger) to accept staff's recommendation to modify the text as proposed. Dr. Morrow asked if it was necessary to list each faculty member if they are supervising students who are providing care. Ms. Shellans stated that she thought that yes this would apply to them as well. Ms. Shellans commented that no names are required just the notice itself that states that Dentists are licensed and regulated by the Dental Board of California with the phone number and email address in at least 48-point type font. The motion passed unanimously.

AGENDA ITEM 17(B): Discussion and Possible Action to Consider Adoption of Proposed Amendments to California Code of Regulations, Title 16, §1065 Regarding Requirements for Posting Notice to Consumers of Licensure by the Dental Board

M/S/C (Le/McCormick) to modify the text in response to the Department's concerns and direct staff to take all steps necessary to complete the rulemaking process, including preparing the modified text for a 15-day public comment period, which includes the amendments accepted by the Board at this meeting. If after the 15-day public comment period, no adverse comments are received, authorize the Executive Officer to make any non-substantive changes to the proposed regulations before completing the rulemaking process, and adopt the proposed amendments to California Code of Regulations, Title 16, §1065, as noticed in the modified text, relevant to requirements for posting notice to consumers of licensure by the Dental Board. The motion passed unanimously.

AGENDA ITEM 18: Dental Assisting Council Report

Denise Romero, newly elected Vice-Chair of the Dental Assisting Counsel (DAC) reported that the new Council members were introduced and took the Oath of Office. A quorum was established and an election was held where Judith Forsythe was elected Chair and Denise Romero was elected Vice-Chair of the Dental Assisting Council. There was an overview of the rules and responsibilities of a Dental Assisting Council member. An update on the status of Dental Assisting Courses and Programs was given. Dental Assisting Program examination statistics were discussed and it was decided that at the next Board Meeting the Dental Assisting Committee would meet jointly with the Examination Committee to discuss these statistics. There was a public request for the examination statistics to be separated by on the job trained candidates versus candidates trained in an approved program. There was also a public request that the statistics on the website be updated more frequently. M/S/C (Casagrande/Dominicis) to accept the Dental Assisting Council report. The motion passed unanimously.

AGENDA ITEM 19: Examination Committee Report

Dr. Casagrande, Examination Committee Chair, reported that a quorum was established and the minutes of the February 23, 2012 meeting were approved. Dr. Casagrande reported that the committee discussed the low pass rate on the RDA exam and agreed to meet jointly with the DAC at the next Board meeting. Dr. Casagrande referred to the letter from Tracy Montez PhD., with Applied Measurement Services who created the new RDA examination stating that he disagrees with her assessment that a 75% pass rate for first time test takers is a "reasonable pass rate given the multiple pathways to licensure". Dr. Casagrande reported that there is no need for concern regarding the Integrated National Board Dental Examination (INBDE) until 2017. He stated that the Board will need to make some minor statute changes to reflect the integration of the two tests into one. Dr. Morrow asked that the Dental Board take a more active role in the American Association of Dental Boards (AADB) as they select 6 of the 12 members of the Joint Commission on National Dental Examinations (JCNDE) who are developing the Integrated Examination. Dr. Casagrande reported that the Examination Committee agreed to meet jointly with the Dental Assisting Council at the next Board meeting to discuss the Dental Assisting Program examination statistics. M/S/C (Burton/McCormick) to accept the Examination Committee report. The motion passed unanimously.

AGENDA ITEM 20: Update on Portfolio Licensure Examination for Dentistry (AB 1524, Stats 2010 ch 446)

Dr. Casagrande reported that a consensus was reached by the schools and psychometricians regarding the scoring process. He stated that it is a very complete, comprehensive way to score the exams. They have moved on to the calibration portion. All of the schools will have a standardized calibration course that they will give to their examiners. The Board will be auditing the Portfolio process on a regularly scheduled basis. Dr. Casagrande stated that they would like to put this item on the August agenda to begin the regulatory process. Ms. Wallace stated that she, Dr. Whitcher and Mr. DeCuir will need to contact the contractor to see where they are in the process. Ms. Shellans stated that this is a very ambitious regulation package and due to its complexity we might want to hold a Full Meeting Workshop with the stakeholders before we start the regulatory process. Dr. Whitcher commented that we all want to see this move forward so Dr. Casagrande should stay in touch with him and when it's ready we will move forward.

AGENDA ITEM 21: Examination Appeals Committee Report

There were no exam appeals.

AGENDA ITEM 22: Licensing, Certification & Permits Committee Report

Dr. Olinger, LCP Committee Chair, reported that the LCP Committee met in Closed Session to consider 1 candidate for a license to replace cancelled license. The LCP Committee recommends approval of the issuance of a new license to replace cancelled license for candidate KC. M/S/C (Dominicis/Bettinger) to accept the Examination Committee's recommendation to issue a new license to replace cancelled license for candidate KC. The motion passed unanimously.

Dr. Olinger reported that the Committee met in open session, a quorum was established and the minutes from the February 7, 2012 meeting were approved. Dr. Olinger stated that statistics were reviewed and there was a discussion surrounding the difficulty in obtaining Examiners for the General Anesthesia/Conscious Sedation Permit. There was discussion regarding the trends in licensing and the utilization of licenses. M/S/C (Burton/Bettinger) to accept the LCP Committee report. The motion passed unanimously.

AGENDA ITEM 23: Legislative and Regulatory Committee Report

Ms. Burton, Legislative and Regulatory Committee Chair, reported that a quorum was established and the minutes from the February 23, 2012 meeting were approved. Ms. Burton reported that there were 36 bills relating to the Dental Board. There were 7 of the most important bills discussed in Committee with recommendations to the Full Board.

The Legislative and Regulatory Committee recommended support of AB 1588 (Atkins) Professions and Vocations: Reservist Licensees. M/S/C (Downing/Casagrande) to accept the committee's recommendation. The motion passed unanimously.

The Legislative and Regulatory Committee recommended a watch position on AB 1932 (Cook) U.S. Armed Services: Healing Arts Boards. M/S/C (Dominicis/Morrow) to accept the Committee's recommendation. The motion passed unanimously.

The Legislative and Regulatory Committee recommended a watch position on AB 1976 (Logue) Licensure and Certification: Military Experience. M/S/C (Bettinger/Morrow) to accept the committee's recommendation. The motion passed unanimously.

The Legislative and Regulatory Committee recommended continuing with the previously adopted watch position on SB 694 (Padilla) Dental Care. There was discussion about whether there was a need to develop a new provider when the current workforce isn't being fully utilized. Dr. Le commented that 30 other states have Dental Directors and she thinks it is a good idea to have a leader to coordinate this study and the efforts of all the different organizations. Dr. Sun Costigan,

California Academy of General Dentists President, added her support to using the workforce that we already have. She stated that as an instructor, many of her graduate students are moving out of state because they can't find work here. M/S/C (Morrow/Olinger) to accept the committee's recommendation. The motion passed unanimously.

The Legislative and Regulatory Committee recommended support of SB 1186 (Steinberg/Dutton) Disability Access: Liability. M/S/C (Casagrande/Olinger) to accept the committee's recommendation. The motion passed unanimously.

The Legislative and Regulatory Committee recommended a watch position on SB 1202 (Leno) Dental Hygienists. M/S/C (Le/Morrow) to accept the committee's recommendation. The motion passed unanimously.

The Legislative and Regulatory Committee recommended taking an oppose unless amended position on SB 1575 (Sen. BP& ED) Professions and Vocations. Ms. Burton reported that some of the provisions in this bill directly relate to the Dental Board. She stated that some clean-up language was suggested to clarify that the Board is responsible for collecting licensing data for Dentists and Dental Assistants. There was further discussion relating to B & P Code §1950.5 Unprofessional Conduct. Ms. Burton reported that after a lot of discussion it was decided not to oppose the entire bill because there are some other important provisions in it. Ms. Wallace stated that the Board will seek clarification with the authors' office regarding licensure data clean-up language in §1715.5 as it applies to the Board and also seek clarification regarding infection control regulations as it relates to the Board and the Dental Hygiene Committee. M/S/C (Olinger/Morrow) to accept the committee's recommendation. The motion passed unanimously.

Ms. Burton reported that the final issue for the committee was the CDA Legislative Proposal to clarify that a dentist who received his/her initial dental degree from a foreign dental school but who completed a Commission on Dental Accreditation (CODA) approved advanced residency program is eligible to obtain a special permit to practice as a California dental school faculty member in the permit category that is not numerically capped. After lengthy discussion the Legislative and Regulatory Committee recommended a position of support for this proposal. M/S/C (Olinger/Morrow) to accept the committee's recommendation. The motion passed unanimously. M/S/C (Dominicis/McCormick) to accept the Legislative and Regulatory Committee report. The motion passed unanimously.

AGENDA ITEM 24: Enforcement Committee Report

Ms. Downing, Enforcement Committee Chair, reported that a quorum was established and the minutes from the February 23, 2012 meeting were approved. She stated that Ms. Trefry reported on the key projects and improvements within the Enforcement Unit including implementation of a new process to issue probationary licenses which is projected to save a lot of time and money for both the Dental Board and the Attorney General's office. Ms. Downing reported that the Diversion Evaluation Committee held interviews to fill the public member vacancy in Southern California. The committee recommended Janis Thibault be appointed to the Southern California Diversion Evaluation Committee. Ms. Burton commented that she would request that we clean-up the language regarding those individuals that stipulate to a probationary license. Ms. Trefry stated that they will be working on that. M/S/C (Burton/Olinger) to accept the Enforcement Committee report. The motion passed unanimously. M/S/C (Morrow/Casagrande) to accept the Enforcement Committee's recommendation to appoint Janis Thibault to fill the public member position on the Southern California Diversion Evaluation Committee. The motion passed unanimously.

PUBLIC COMMENT

There was no further public comment.

The meeting adjourned at 1:47 p.m.



MEMORANDUM

DATE	July 30, 2012
TO	Dental Board of California
FROM	Linda Byers, Administrative Assistant Dental Board of California
SUBJECT	Agenda Item 3: President's Report

Dr. Bruce Witcher, Board President, will give a verbal report.



MEMORANDUM

DATE	July 30, 2012
TO	Dental Board of California
FROM	Linda Byers, Administrative Assistant Dental Board of California
SUBJECT	Agenda Item 4: Executive Officer's Report

Richard DeCuir, Executive Officer, will give a verbal report.



MEMORANDUM

DATE	July 30, 2012
TO	Dental Board of California
FROM	Linda Byers, Administrative Assistant Dental Board of California
SUBJECT	Agenda Item 5: Update from the Department of Consumer Affairs Executive Office

A Representative from the Department of Consumer Affairs Executive Office will provide a verbal report.



MEMORANDUM

DATE	July 30, 2012
TO	Dental Board of California
FROM	Linda Byers, Administrative Assistant Dental Board of California
SUBJECT	Agenda Item 6: Dental Hygiene Committee of California (DHCC) Activities Update

Representatives from the Dental Hygiene Committee of California will provide a verbal report.



MEMORANDUM

DATE	July 30, 2012
TO	Board Members
FROM	Genie Albertsen, Budget Analyst
SUBJECT	Agenda Item 7: Budget Report: Dentistry Expenditures & Dental Assisting Program Expenditures

On June 30, 2012 fiscal year 2011-12 officially came to a close and on July 1, 2012 our new fiscal year 2012-13 began. The following documents are intended to provide you with an expenditure summary of the last fiscal year for the the Dentistry and Dental Assisting funds. In addition, I have enclosed documents that we call Fund Conditions, which give projections of the Board's fiscal solvency of each fund for our current fiscal year and future fiscal years.

The first two attachments are copies of the budget expenditures from the fiscal year 2011-12 and are based upon the year-end CALSTARS report that came out in July 2012.

The Board's budget is broken into two separate appropriation accounts; our Dentistry appropriation which was set at \$11,250,000; and Dental Assisting appropriation which was set at \$1,706,000 for a combined total appropriation of \$12,956,000.

According to the closing CALSTARS report, the Dental Board has spent roughly \$10.3 million of its fiscal year 2011-12 Dentistry budget appropriation. Approximately \$5.1 million of the expenditures is Personnel Services, and \$5.2 million of the expenditures is Operating Expense & Equipment. Based on these expenditures, the Board is projected to revert back to the Dentistry Fund approximately \$1.3 million. Despite the fact that the Board is reverting back \$1.3 million, the Board spent \$10.3 million which is \$2.3 million more than it received in revenue.

For Dental Assisting, the Board spent \$1.5 million of last year's Dental Assisting appropriation. Approximately \$478,000 of the expenditures is Personnel Services, and roughly \$1 million of the expenditures is Operating Expense & Equipment. For Dental Assisting, based on these expenditures, the Board is projected to revert approximately \$209,245 back to the Dental Assisting Fund. The Board's expenditures were \$1.5 million while the Board's revenue totaled \$1.6 million. The Board spent \$100,000 less than it received in revenue with a reserve of \$2.4 million.

Also attached are three fund conditions; two for Dentistry and one for Dental Assisting. In the Dentistry Fund Condition you will note that at the end of fiscal year 2011-12, on June 30, 2012, the Board was repaid \$1.7 million of the \$4.4 million outstanding loan. The first Fund Condition reflects the Board's fiscal solvency **without** repayment of the remaining \$2.7 million, while the second Fund Condition reflects the Board's fiscal solvency **with** the remaining loan repayment made in budget year 2013-14.

Based on the fund condition analysis of budget year 2013-14 Governor's Budget **without** the remaining \$2.7 million loan repayment, the Dental Board will end fiscal year 2013-14 with a **negative balance** of \$2,205,000, and end fiscal year 2014-15 with a **negative balance** of \$6,383,000.

By comparison, the fund condition **with** the remaining \$2.7 million loan repayment included, the Dental Board will end the fiscal year 2013-14 with \$495,000 in reserve, and end fiscal year 2014-15 with a **negative balance** of \$3,683,000.

In conclusion, without a fee increase to generate additional revenue, the Dental Board will be out of money by the end of fiscal year 2013-14 if the additional loan repayment of \$2.7 million is **not received**; and out of money in fiscal year 2014-15 if the Board **does receive** the remaining \$2.7 million in fiscal year 2013-14.

I will be available to answer any questions at the board meeting.

**DENTAL BOARD - 0741
BUDGET REPORT
FY 2011-12 EXPENDITURE PROJECTION**

June 30, 2012

OBJECT DESCRIPTION	FY 2010-11		FY 2011-12				
	ACTUAL	PRIOR YEAR	BUDGET	CURRENT YEAR	PERCENT	PROJECTIONS	UNENCUMBERED
	EXPENDITURES	EXPENDITURES	STONE	EXPENDITURES	SPENT	TO YEAR END	BALANCE
	(MONTH 13)		2011-12	FM 13			
PERSONNEL SERVICES							
Salary & Wages (Staff)	2,644,935		3,449,160	3,270,234	95%	3,270,234	178,926
Statutory Exempt (EO)	96,829		101,852	102,012	100%	102,012	(160)
Temp Help (Expert Examiners)			40,000	0	0%		40,000
Physical Fitness Incentive	4,653			5,330		5,330	(5,330)
Temp Help Reg (907)	289,747		222,403	185,150	83%	185,150	37,253
Temp Help (Exam Proctors)	269		45,447	0	0%	0	45,447
Board Member Per Diem (901, 920)	19,300		45,950	16,500	36%	16,500	29,450
Committee Members (911)	4,500		58,686	4,300	7%	4,300	54,386
Overtime	6,544		25,208	34,558	137%	34,558	(9,350)
Staff Benefits	1,266,469		1,691,980	1,443,263	85%	1,443,263	248,717
Salary Savings	0		(135,439)	0	0%	0	(135,439)
TOTALS, PERSONNEL SVC	4,333,246	0	5,545,247	5,061,347	91%	5,061,347	483,900
OPERATING EXPENSE AND EQUIPMENT							
General Expense	135,143		31,219	123,774	396%	123,774	(92,555)
Fingerprint Reports	9,581		25,777	24,978	97%	24,978	799
Minor Equipment	43,155		18,300	64,450	352%	64,450	(46,150)
Printing	67,714		43,502	40,384	93%	40,384	3,118
Communication	59,163		34,670	41,558	120%	41,558	(6,888)
Postage	60,265		61,791	69,066	112%	69,066	(7,275)
Insurance	2,016		6,972	2,027	29%	2,027	4,945
Travel In State	128,627		123,755	110,677	89%	110,677	13,078
Training	6,515		25,148	6,434	26%	6,434	18,714
Facilities Operations	456,578		360,656	385,214	107%	385,214	(24,558)
C & P Services - Interdept.	45,988		134,917	50,623	38%	50,623	84,294
C & P Services - External	217,708		282,274	233,510	83%	233,510	48,764
DEPARTMENTAL SERVICES:							
OIS Pro Rata	376,575		439,539	436,830	99%	436,830	2,709
Admin/Exec	531,097		550,366	537,230	98%	537,230	13,136
Interagency Services			881	0	0%	0	881
DOI-ProRata Internal	16,823		22,354	18,178	81%	18,178	4,176
Public Affairs Office	35,881		37,949	36,306	96%	36,306	1,643
CCED	23,374		40,544	39,178	97%	39,178	1,366
INTERAGENCY SERVICES:							
Consolidated Data Center	42,420		16,722	26,960	161%	26,960	(10,238)
DP Maintenance & Supply	18,843		12,366	32,846	266%	32,846	(20,480)
Central Admin Svc-ProRata	373,091		413,261	413,261	100%	413,261	0
EXAMS EXPENSES:							
Exam Supplies	0		43,589	0	0%	0	43,589
Exam Freight	0		166	0	0%	0	166
Exam Site Rental	1,020		467,586	0	0%	0	467,586
C/P Svcs-External Expert Administration	125,078		6,709	231,504	3451%	231,504	(224,795)
C/P Svcs-External Expert Examiners	0		238,248	0	0%	0	238,248
C/P Svcs-External Subject Matter				76		76	
OTHER ITEMS OF EXPENSE:	14,746		661	10,511	1590%	10,511	(9,850)
Awarded Attorney Fee	675,000						
ENFORCEMENT:							
Attorney General	1,401,277		1,778,310	1,380,916	78%	1,380,916	397,394
Office Admin. Hearings	190,395		406,720	297,050	73%	297,050	109,670
Court Reporters	21,684			23,256		23,256	(23,256)
Evidence/Witness Fees	592,115		243,959	513,135	210%	513,135	(269,176)
Vehicle Operations	53,936		9,055	54,331	600%	54,331	(45,276)
Major Equipment	0		110,000	8,493	8%	8,493	101,507
TOTALS, OE&E	5,725,808	0	5,987,966	5,212,756	87%	5,212,756	775,286
TOTAL EXPENSE	10,059,054	0	11,533,213	10,274,103	178%	10,274,103	1,259,186
Sched. Reimb. - Fingerprints	(8,670)		(53,000)	(24,483)	46%	(53,000)	0
Sched. Reimb. - Other	(16,095)		(230,000)	(12,255)	5%	(230,000)	0
Unsched. Reimb. - External/Private	(36,094)			(40,207)			0
Probation Monitoring Fee - Variable	(47,632)			(89,868)			0
Invest Cost Recover FTB Collection				(50)			0
Unsched. Reimb. - Other	(218,469)			(240,470)			0
NET APPROPRIATION	9,732,094	0	11,250,213	9,866,770	88%	9,991,103	1,259,186
SURPLUS/(DEFICIT):							11.2%

**DENTAL ASSISTING PROGRAM - 3142
BUDGET REPORT
FY 2011-12 EXPENDITURE PROJECTION**

June 30, 2012

OBJECT DESCRIPTION	FY 2010-11		FY 2011-12				
	ACTUAL	PRIOR YEAR	BUDGET	CURRENT YEAR	PERCENT	PROJECTIONS	UNENCUMBERED
	EXPENDITURES	EXPENDITURES	STONE	EXPENDITURES			
(MONTH 13)		2011-12	FM 13	SPENT	TO YEAR END	BALANCE	
PERSONNEL SERVICES							
Salary & Wages (Staff)	326,795		377,193	286,169	76%	286,169	91,024
Statutory Exempt (EO)			0			0	0
Temp Help (Expert Examiners)							0
Temp Help (Consultants)			158		0%		158
Physical Fitness Incentive	889			0		0	0
Temp Help Reg (907)							0
Temp Help (Exam Proctors)	1,794			196		196	(196)
Board Member Per Diem (901, 920)	700			1,500		1,500	(1,500)
Overtime	9,872			37,524		37,524	(37,524)
Staff Benefits	161,472		187,214	152,711	82%	152,711	34,503
Salary Savings	0		(11,340)	0	0%	0	(11,340)
TOTALS, PERSONNEL SVC	501,522	0	553,225	478,100	86%	478,100	75,125
OPERATING EXPENSE AND EQUIPMENT							
General Expense	3,114		27,058	5,438	20%	5,438	21,620
Fingerprint Reports	254		7,780	0	0%	0	7,780
Minor Equipment			0			0	0
Printing	7,058		28,518	23,470	82%	23,470	5,048
Communication	66		9,500	95	1%	95	9,405
Postage	18,742		35,991	21,004	58%	21,004	14,987
Insurance			0			0	0
Travel In State	33,944		39,802	52,494	132%	52,494	(12,692)
Training	0		4,119	0	0%	0	4,119
Facilities Operations	44,064		63,950	35,866	56%	35,866	28,084
C & P Services - Interdept.	0		316,755	0	0%	0	316,755
C & P Services - External	8,100		532	0	0%	0	532
DEPARTMENTAL SERVICES:							
OIS Pro Rata	154,459		173,815	165,801	95%	165,801	8,014
Admin/Exec	77,906		75,935	74,232	98%	74,232	1,703
Interagency Services	0		72,554	0	0%	0	72,554
IA w/ OER	34,388			29,408		29,408	(29,408)
DOI-ProRata Internal	2,693		3,074	2,500	81%	2,500	574
Public Affairs Office	5,726		5,221	4,993	96%	4,993	228
CCED	3,721		5,352	5,172	97%	5,172	180
INTERAGENCY SERVICES:							
Consolidated Data Center	0		1,576	0	0%	0	1,576
DP Maintenance & Supply	0		1,369	0	0%	0	1,369
Central Admin Svc-ProRata	66,754		73,015	73,015	100%	73,015	0
EXAMS EXPENSES:							
Exam Supplies	8,074		3,946	9,853	250%	9,853	(5,907)
Exam Site Rental - State Owned	17,125			26,010		26,010	(26,010)
Exam Site Rental - Non State Owned	38,894		69,939	46,495	66%	46,495	23,444
C/P Svcs-External Expert Administration	1,127		30,877	10,860	35%	10,860	20,017
C/P Svcs-External Expert Examiners	0		47,476	0	0%	0	47,476
C/P Svcs-External Subject Matter	86,192			177,084		177,084	(177,084)
OTHER ITEMS OF EXPENSE:	0		285	0	0%	0	285
ENFORCEMENT:							
Attorney General	175,588		67,536	257,788	382%	257,788	(190,252)
Office Admin. Hearings	0		2,740	0	0%	0	2,740
Court Reporters						0	0
Evidence/Witness Fees	0		87	0	0%	0	87
Vehicle Operations						0	0
Major Equipment	0					0	0
TOTALS, OE&E	787,989	0	1,168,802	1,021,578	87%	1,021,578	147,225
TOTAL EXPENSE	1,289,511	0	1,722,027	1,499,678	174%	1,499,678	222,350
Sched. Reimb. - Fingerprints	(51)		(13,000)	(1,690)	13%	(1,690)	(11,310)
Sched. Reimb. - Other	(490)		(3,000)	(1,205)	40%	(1,205)	(1,795)
NET APPROPRIATION	1,288,970	0	1,706,027	1,496,783	88%	1,496,783	209,245
SURPLUS/(DEFICIT):							12.3%

0741 - Dental Board of California

Analysis of Fund Condition

Prepared 8/6/2012

(Dollars in Thousands)

NOTE: \$2.7 Million General Fund Repayment Outstanding

2012-13 Governor's Budget

	GOVERNOR'S BUDGET			
	Actual 2011-12	CY 2012-13	BY 2013-14	BY+1 2014-15
BEGINNING BALANCE	\$ 6,087	\$ 5,481	\$ 1,737	\$ -2,205
Prior Year Adjustment	\$ -	\$ -	\$ -	\$ -
Adjusted Beginning Balance	\$ 6,087	\$ 5,481	\$ 1,737	\$ -2,205
REVENUES AND TRANSFERS				
Revenues:				
125600 Other regulatory fees	\$ 25	\$ 27	\$ 27	\$ 27
125700 Other regulatory licenses and permits	\$ 709	\$ 767	\$ 767	\$ 767
125800 Renewal fees	\$ 7,180	\$ 6,964	\$ 6,964	\$ 6,964
125900 Delinquent fees	\$ 74	\$ 72	\$ 72	\$ 72
131700 Misc. Revenue from Local Agencies				
141200 Sales of documents	\$ -	\$ -		\$ -
142500 Miscellaneous services to the public	\$ -	\$ -	\$ -	\$ -
150300 Income from surplus money investments	\$ 21	\$ -	\$ -	\$ -
150500 Interest Income From Interfund Loans	\$ -	\$ -	\$ -	\$ -
160400 Sale of fixed assets	\$ -	\$ -	\$ -	\$ -
161000 Escheat of unclaimed checks and warrants	\$ 4	\$ 4	\$ 4	\$ 4
161400 Miscellaneous revenues	\$ 2	\$ 2	\$ 2	\$ 2
164300 Penalty Assessments	\$ -	\$ -	\$ -	\$ -
Totals, Revenues	\$ 8,015	\$ 7,836	\$ 7,836	\$ 7,836
Transfers from Other Funds				
F00001 Repayment Per Item 1250-011-0741, Budget Act of 2003	\$ 1,700	\$ -	\$ -	\$ -
F00683 Teale Data Center (CS 15.00, Bud Act of 2005)				
Transfers to Other Funds				
T00001 GF loan per Item 1250-011-0741, BA of 2002	\$ -	\$ -	\$ -	\$ -
T00001 GF loan per Item 1250-011-0741, BA of 2003	\$ -	\$ -	\$ -	\$ -
T03039 Transfer to Dentally Underserved Account				
Totals, Revenues and Transfers	\$ 9,715	\$ 7,836	\$ 7,836	\$ 7,836
Totals, Resources	\$ 15,802	\$ 13,317	\$ 9,573	\$ 5,631
EXPENDITURES				
Disbursements:				
0840 State Controller (State Operations)	\$ 12	\$ 11		
8880 Financial Information System of California (State Operations)	\$ 35	\$ 22		
1110 Program Expenditures (State Operations)	\$ 10,274	\$ 11,547	\$ 11,778	\$ 12,014
Total Disbursements	\$ 10,321	\$ 11,580	\$ 11,778	\$ 12,014
FUND BALANCE				
Reserve for economic uncertainties	\$ 5,481	\$ 1,737	\$ -2,205	\$ -6,383
Months in Reserve	5.7	1.8	-2.2	-6.3

NOTES:

- A. ASSUMES WORKLOAD AND REVENUE PROJECTIONS ARE REALIZED
- B. ASSUMES INTEREST RATE AT 1%.
- C. ASSUMES APPROPRIATION GROWTH OF 2% PER YEAR.

0741 - Dental Board of California

Analysis of Fund Condition

Prepared 8/6/2012

(Dollars in Thousands)

2012-13 Governor's Budget

	GOVERNOR'S BUDGET			
	Actual 2011-12	CY 2012-13	BY 2013-14	BY+1 2014-15
BEGINNING BALANCE	\$ 6,087	\$ 5,481	\$ 1,737	\$ 495
Prior Year Adjustment	\$ -	\$ -	\$ -	\$ -
Adjusted Beginning Balance	\$ 6,087	\$ 5,481	\$ 1,737	\$ 495
REVENUES AND TRANSFERS				
Revenues:				
125600 Other regulatory fees	\$ 25	\$ 27	\$ 27	\$ 27
125700 Other regulatory licenses and permits	\$ 709	\$ 767	\$ 767	\$ 767
125800 Renewal fees	\$ 7,180	\$ 6,964	\$ 6,964	\$ 6,964
125900 Delinquent fees	\$ 74	\$ 72	\$ 72	\$ 72
131700 Misc. Revenue from Local Agencies				
141200 Sales of documents	\$ -	\$ -		\$ -
142500 Miscellaneous services to the public	\$ -	\$ -	\$ -	\$ -
150300 Income from surplus money investments	\$ 21	\$ -	\$ -	\$ -
150500 Interest Income From Interfund Loans	\$ -	\$ -	\$ -	\$ -
160400 Sale of fixed assets	\$ -	\$ -	\$ -	\$ -
161000 Escheat of unclaimed checks and warrants	\$ 4	\$ 4	\$ 4	\$ 4
161400 Miscellaneous revenues	\$ 2	\$ 2	\$ 2	\$ 2
164300 Penalty Assessments	\$ -	\$ -	\$ -	\$ -
Totals, Revenues	\$ 8,015	\$ 7,836	\$ 7,836	\$ 7,836
Transfers from Other Funds				
F00001 Repayment Per Item 1250-011-0741, Budget Act of 2003	\$ 1,700	\$ -	\$ -	\$ -
F00683 Teale Data Center (CS 15.00, Bud Act of 2005)				
Loan Repayment			\$ 2,700	
Transfers to Other Funds				
T00001 GF loan per Item 1250-011-0741, BA of 2002	\$ -	\$ -	\$ -	\$ -
T00001 GF loan per Item 1250-011-0741, BA of 2003	\$ -	\$ -	\$ -	\$ -
T03039 Transfer to Dentally Underserved Account				
Totals, Revenues and Transfers	\$ 9,715	\$ 7,836	\$ 10,536	\$ 7,836
Totals, Resources	\$ 15,802	\$ 13,317	\$ 12,273	\$ 8,331
EXPENDITURES				
Disbursements:				
0840 State Controller (State Operations)	\$ 12	\$ 11		
8880 Financial Information System of California (State Operations)	\$ 35	\$ 22		
1110 Program Expenditures (State Operations)	\$ 10,274	\$ 11,547	\$ 11,778	\$ 12,014
Total Disbursements	\$ 10,321	\$ 11,580	\$ 11,778	\$ 12,014
FUND BALANCE				
Reserve for economic uncertainties	\$ 5,481	\$ 1,737	\$ 495	\$ -3,683
Months in Reserve	5.7	1.8	0.5	-3.6

NOTES:

- A. ASSUMES WORKLOAD AND REVENUE PROJECTIONS ARE REALIZED
- B. ASSUMES INTEREST RATE AT 1%.
- C. ASSUMES APPROPRIATION GROWTH OF 2% PER YEAR.

3142 - Dental Assistant Program Analysis of Fund Condition

Prepared 8/6/12

(Dollars in Thousands)

2012-13 Governor's Budget

GOVERNOR'S BUDGET

	Actual 2011-12	CY 2012-13	BY 2013-14	BY+1 2014-15
BEGINNING BALANCE	\$ 2,263	\$ 2,395	\$ 2,311	\$ 2,215
Prior Year Adjustment	\$ -	\$ -	\$ -	\$ -
Adjusted Beginning Balance	\$ 2,263	\$ 2,395	\$ 2,311	\$ 2,215
REVENUES AND TRANSFERS				
Revenues:				
125600 Other regulatory fees	\$ 16	\$ 16	\$ 16	\$ 16
125700 Other regulatory licenses and permits	\$ 306	\$ 355	\$ 355	\$ 355
125800 Renewal fees	\$ 1,224	\$ 1,221	\$ 1,221	\$ 1,221
125900 Delinquent fees	\$ 73	\$ 64	\$ 64	\$ 64
141200 Sales of documents	\$ -	\$ -	\$ -	\$ -
142500 Miscellaneous services to the public	\$ -	\$ -	\$ -	\$ -
150300 Income from surplus money investments	\$ 10	\$ 1	\$ 22	\$ 21
160400 Sale of fixed assets	\$ -	\$ -	\$ -	\$ -
161000 Escheat of unclaimed checks and warrants	\$ 1	\$ 1	\$ 1	\$ 1
161400 Miscellaneous revenues	\$ 4	\$ 4	\$ 4	\$ 4
164300 Penalty Assessments	\$ -	\$ -	\$ -	\$ -
Totals, Revenues	\$ 1,634	\$ 1,662	\$ 1,683	\$ 1,682
Totals, Revenues and Transfers	\$ 1,634	\$ 1,662	\$ 1,683	\$ 1,682
Totals, Resources	\$ 3,897	\$ 4,057	\$ 3,994	\$ 3,897
EXPENDITURES				
Disbursements:				
0840 State Controller (State Operations)	\$ 2	\$ 2	\$ -	\$ -
8880 Financial Information System for CA (State Operations)	\$ 1,500	\$ 1,744	\$ 1,779	\$ 1,814
1110 Program Expenditures (State Operations)	\$ -	\$ -	\$ -	\$ -
Total Disbursements	\$ 1,502	\$ 1,746	\$ 1,779	\$ 1,814
FUND BALANCE				
Reserve for economic uncertainties	\$ 2,395	\$ 2,311	\$ 2,215	\$ 2,083
Months in Reserve	16.5	15.6	14.6	13.5

NOTES:

- A. ASSUMES WORKLOAD AND REVENUE PROJECTIONS ARE REALIZED
- B. ASSUMES INTEREST RATE AT 1%.
- C. ASSUMES APPROPRIATION GROWTH OF 2% PER YEAR.



MEMORANDUM

DATE	August 2, 2012
TO	Dental Board Members
FROM	Richard DeCuir, Executive Officer Dental Board of California
SUBJECT	Agenda Item 8(A): Discussion and Possible Action to Consider Staff's Recommendation for Appropriate Fee Increase to Dentistry to Sustain Board Expenditures

At the last Board meeting I presented to the Board a fee increase proposal to keep the Board financially solvent through FY 2015-16. Included in that proposal were fund scenarios that proposed fee increases of 5%, 10%, 15%, 20% and 23% (the statutory cap for licensing renewals). The scenarios will be made available for those who wish to review them again.

Two specific issues arose during the meeting: (1) the \$4.4 million outstanding loan to the General fund that has yet to be repaid and (2) the request for further data supporting the need for a fee increase. Attachment #1 is the General Fund Loan Repayment document showing a partial loan reimbursement of \$1.7 million effective June 30, 2012. It was also mentioned the licensure renewal fees should be primarily directed toward supporting the Board's Enforcement program.

The intent of placing this on the agenda a second time is to provide the Board with delineated costs for the last year exclusively dedicated to the Board's Enforcement program. Please note the Examination, Licensure, and Permit programs are predominantly supported by their own fees (i.e. Licensure by Credential, Special Permits, General Anesthesia & Conscious Sedation permits, fictitious names etc). License renewals are predominantly used to support the Board's Enforcement programs and the Administrative overhead costs.

In order to provide the Board and stakeholders with a more detailed workload analysis specifically related to the Enforcement program, I have attached a number of documents. Attachment #2 lists every Board position that is directly tied to, and part of the Enforcement program. Of the Board's 72.8 authorized positions, 44 permanent positions, 6 retired annuitant positions, and 50-60% of the 6 administrative staff positions that are dedicated to the Enforcement Program were included. Each of the permanent positions has 5 pay-grade steps so a mid-range salary was utilized. The combined salaries paid directly to Enforcement personnel last year totaled approximately **\$3,003,226**; benefits tied to these positions are estimated at **\$1,265,697**; resulting in **\$4,268,923** paid out in total Enforcement salaries. When we add in miscellaneous personal service costs such as Board Member

costs, overtime etc., the total personal services expenditures are approximately **\$4,384,399** or 79% of the Board's total Personal Services budget.

Next, I reviewed each of the Board's Operating Expense & Equipment (OE & E) line items. For those general expense line items (such as printing, general expenses, DCA, pro-rata, etc.), I used the same 79% as calculated in the personal services line items. However, please note, I excluded those line items that **were not** Enforcement related (examination costs, external contracts, etc.). Additionally, I **added** in 100% of the OE & E authorizations that were exclusively Enforcement (i.e. Attorney General costs, Evidence and Witness fees, vehicle operation costs, Office of Administrative Hearing costs, etc.). The numbers revealed a total of **\$4,406,117** or 74% of the total Operating Expense & Equipment costs were going to the Board's Enforcement program.

Attachment #3 is the line item Expenditure Report and Percentages which reveals that for Board's FY 2011-12 authorized budget; approximately **\$8,790,516** was earmarked to be spent on the Board's Enforcement program.

For license renewals, as noted on Attachment #4, there are currently 39,790 active and inactive licensed dentists paying biennial renewal fees resulting in approximately 19,895 licensed dentists renewing each year. Dividing the Enforcement budget by the number of dentists renewing each year will calculate the renewal fee necessary to support only the Board's Enforcement Activities as follows:

Annual Enforcement Budget (FY 2011-12).....	\$8,790,516
Divided by:	
Annual License Renewals.....	19,895
Equals=	
Fee necessary to support Enforcement Activities	\$442.00

Taking this one step further and factoring in the Board's Administrative Unit, which includes half of the Executive Officer's time, half of the Assistant Executive Officer's time, 40% of the Budget and Contract Analyst's time, 40% of the Legislative and Regulatory Analyst's time, and 40% of the Personnel Analyst's time (Attachment #5). Using the same calculation formulas, the Board's total expenditures are approximately **\$505,130** per year (Attachment #6). This does **NOT** include the Administrative support to the Board and staff by the Executive Assistant and Special Assistant to the Executive Officer. These expenditures, when added to the Enforcement Expenditures of **\$8,790,516** per year, total a combined expenditure of **\$9,295,646**. Dividing that total expenditure by the **19,895** dentists who renew their licenses each year brings us to a required renewal fee of **\$467.00** as follows:

Annual Enforcement Budget (FY 2011-12).....	\$9,295,646
Divided by:	
Annual License Renewals.....	19,895
Equals=	
Fee necessary to support Enforcement Activities	\$467.00

After more than 14 years with no fee increases (1998), a biennial fee increase to **\$442.00** represents an annual increase of **\$38.50**. A biennial fee increase to **\$467.00** represents an increase of **\$51.00** per year.

CSTARQ1 110 (DEST: A1 CAL2) 13,C,6,5,4,0,
 FISCAL MONTH: 13 PY: 2011 6(INDEX) 5(PCA) 4(AGYOBJ) 0(NOFUND) FUND(ALL) GL(ALL)
 DEPT OF CONSUMER AFFAIRS - REGULATORY BOARDS
 EXPENDITURES BY PROGRAM, ORGANIZATION, AND OBJECT
 AS OF 06/30/12

***** RUN:07/27/12 ME:06.00

***** PAGE 202

FFY : 2011
 PROGRAM : 95 TRANSFER
 ELEMENT : 00
 COMPONENT : 000
 TASK : 000
 PCA NO : P0741 LOAN PAYMENT FROM GF 0001 TO DENTAL 0741

-ORGANIZATION-

S -SS-U -SU-SSU INDX INDEX TITLE

--OBJECT---		EXPENDITURES			ENCUMBRANCES/	AVAILABLE	
C-OB-DTL-AO	OBJ DTL/AO TITLE	BUDGET PLAN	CURRENT MONTH	YEAR-TO-DATE	ALLOC ENC/OBLG	BALANCE	PCT
95-00-00-00-00	L741 TRANSFER						
4-52-626-00	LOANS, TRANSF & OT	1,700,000.00	0.00	1,700,000.00	0.00	0.00	100.0
*TOTAL CAT	4	1,700,000.00	0.00	1,700,000.00	0.00	0.00	100.0
*TOTAL INDEX	L741	1,700,000.00	0.00	1,700,000.00	0.00	0.00	100.0
*TOTAL SEC	95	1,700,000.00	0.00	1,700,000.00	0.00	0.00	100.0
*TOTAL PCA	P0741	1,700,000.00	0.00	1,700,000.00	0.00	0.00	100.0

ENFORCEMENT - PERSONAL SERVICES/FISCAL SUMMARY

ADMIN		Salary	Benefits	Total
624-110-8840-001 (.5)		\$49,854	\$19,035	\$68,889
624-110-4802-001 (.5)		\$42,759	\$17,021	\$59,780
624-110-1312-001 (.6)		\$41,512	\$17,643	\$59,155
624-110-5393-008 (.6)		\$35,093	\$15,821	\$50,914
624-110-5393-801 (.6)		\$35,093	\$15,821	\$50,914
624-110-5393-802 (.6)		\$35,093	\$15,821	\$50,914
ENFORCEMENT (to include RA's)				
624-110-8597-003		\$82,422	\$33,163	\$115,585
624-110-7843-002		\$122,238	\$44,468	\$166,706
624-110-7843-003		\$122,238	\$44,468	\$166,706
624-110-1139-805		\$35,700	\$19,897	\$55,597
624-110-4800-001		\$67,236	\$28,851	\$96,087
624-110-5393-007		\$58,488	\$26,367	\$84,855
624-110-5393-805		\$58,488	\$26,367	\$84,855
624-110-5393-806		\$58,488	\$26,367	\$84,855
624-110-5157-001 (.5)		\$21,789	\$11,067	\$32,856
624-110-5157-009		\$43,578	\$22,133	\$65,711
624-110-5157-012		\$43,578	\$22,133	\$65,711
624-110-1139-010		\$35,700	\$19,897	\$55,597
624-110-1139-012		\$35,700	\$19,897	\$55,597
624-110-5157-907 RA 960hrs	\$25.65/hr	\$24,624		\$24,624
624-110-5157-907 RA 960hrs	\$25.65/hr	\$24,624		\$24,624
624-110-5157-907 RA 960hrs	\$25.65/hr	\$24,624		\$24,624
624-110-4800-003		\$67,236	\$28,851	\$96,087
624-110-8612-006		\$58,806	\$26,458	\$85,264
624-110-8612-008		\$58,806	\$26,458	\$85,264
624-110-5393-808		\$58,488	\$26,367	\$84,855
624-110-5393-809		\$58,488	\$26,367	\$84,855
624-110-5393-810		\$58,488	\$26,367	\$84,855
624-110-5157-015		\$43,578	\$22,133	\$65,711
624-110-5393-907 RA 960hrs	\$30.85/hr	\$29,616		\$29,616
624-110-5393-907 RA 960 hrs	\$30.85/hr	\$29,616		\$29,616
624-110-8596-004		\$73,026	\$30,495	\$103,521
624-110-8610-002		\$60,576	\$26,960	\$87,536
624-110-8610-010		\$60,576	\$26,960	\$87,536
624-110-8610-011		\$60,576	\$26,960	\$87,536
624-110-8610-012		\$60,576	\$26,960	\$87,536
624-110-8610-015		\$60,576	\$26,960	\$87,536
624-110-8833-007		\$43,200	\$22,026	\$65,226
624-110-5393-804		\$58,488	\$26,367	\$84,855
624-110-5393-600		\$58,488	\$26,367	\$84,855
624-110-5393-601 (.5)		\$29,244	\$13,183	\$42,427
624-110-5157-907 RA 960hrs	\$25.65/hr	\$24,624		\$24,624
624-110-8596-003		\$73,026	\$30,495	\$103,521
624-110-8610-003		\$60,576	\$26,960	\$87,536
624-110-8610-004		\$60,576	\$26,960	\$87,536
624-110-8610-005		\$60,576	\$26,960	\$87,536
624-110-8610-007		\$60,576	\$26,960	\$87,536
624-110-8610-013		\$60,576	\$26,960	\$87,536
624-110-8612-003		\$58,806	\$26,458	\$85,264
624-110-1139-001		\$35,700	\$19,897	\$55,597
624-110-8596-005		\$36,513	\$15,247	\$51,760
624-110-8610-001		\$60,576	\$26,960	\$87,536
624-110-8610-008		\$60,576	\$26,960	\$87,536
624-110-8610-009		\$60,576	\$26,960	\$87,536
624-110-8610-014		\$60,576	\$26,960	\$87,536
624-110-8612-007		\$58,806	\$26,458	\$85,264
624-110-8833-002		\$43,200	\$22,026	\$65,226
TOTALS		\$3,003,226	\$1,265,697	\$4,268,923

DENTAL BOARD - 0741
BUDGET REPORT
FY 2011-12 EXPENDITURE PROJECTION

OBJECT DESCRIPTION	FY 2010-11		FY 2011-12		
	ACTUAL	PRIOR YEAR	AUTHORIZED	ENFORCEMENT	PERCENT
	EXPENDITURES	EXPENDITURES	EXPENDITURES	AUTHORIZED	
(MONTH 13)	1/31/2011	2011-12	EXPENDITURES	SPENT	
PERSONNEL SERVICES					
Salary & Wages (Staff)	2,644,935	1,448,592	3,449,160	2,795,644	81%
Statutory Exempt (EO)	96,829	55,654	101,852	49,854	49%
Temp Help (Expert Examiners)			40,000	0	0%
Physical Fitness Incentive	4,653	1,040		0	
Temp Help Reg (907)	289,747	153,573	222,403	222,403	100%
Temp Help (Exam Proctors)	269		45,447	0	0%
Board Member Per Diem (901, 920)	19,300	8,500	45,950	13,785	30%
Committee Members (911)	4,500	3,000	58,686	17,606	30%
Overtime	6,544	785	25,208	19,410	77%
Staff Benefits	1,266,469	699,794	1,691,980	1,265,697	75%
Salary Savings	0		(135,439)		0%
TOTALS, PERSONNEL SVC	4,333,246	2,370,938	5,545,247	4,384,399	79%
OPERATING EXPENSE AND EQUIPMENT					
General Expense	135,143	46,674	31,219	24,663	79%
Fingerprint Reports	9,581	4,670	25,777	0	0%
Minor Equipment	43,155	5,409	18,300	14,457	79%
Printing	67,714	4,866	43,502	34,367	79%
Communication	59,163	38,156	34,670	27,389	79%
Postage	60,265	25,769	61,791	48,815	79%
Insurance	2,016	2,016	6,972	5,508	79%
Travel In State	128,627	55,021	123,755	97,766	79%
Training	6,515	3,428	25,148	19,867	79%
Facilities Operations	456,578	270,430	360,656	284,918	79%
C & P Services - Interdept.	45,988	11,426	134,917	106,584	79%
C & P Services - External	217,708	77,830	282,274		0%
DEPARTMENTAL SERVICES:					
Departmental Pro Rata	376,575	309,524	414,433	327,402	79%
Admin/Exec	531,097	224,125	550,366	434,789	79%
Interagency Services			881	696	79%
DOI-ProRata Internal	16,823	10,962	22,354	17,660	79%
Public Affairs Office	35,881	22,362	37,949	29,980	79%
CCED	23,374	13,627	40,544	32,030	79%
INTERAGENCY SERVICES:					
Consolidated Data Center	42,420	19,490	18,907	14,937	79%
DP Maintenance & Supply	18,843		12,366	9,769	79%
Central Admin Svc-ProRata	373,091	186,546	413,261	326,476	79%
EXAMS EXPENSES:					
Exam Supplies	0	0	43,589	0	0%
Exam Freight	0	0	166	0	0%
Exam Site Rental	1,020	0	467,586	0	0%
C/P Svcs-External Expert Administration	125,078	66,838	6,709	0	0%
C/P Svcs-External Expert Examiners	0	0	238,248	0	0%
OTHER ITEMS OF EXPENSE:					
Awarded Attorney Fee	14,746	0	661	0	0%
ENFORCEMENT:					
Attorney General	1,401,277	686,551	1,778,310	1,778,310	100%
Office Admin. Hearings	190,395	58,090	406,720	406,720	100%
Court Reporters	21,684	5,213			
Evidence/Witness Fees	592,115	234,144	243,959	243,959	100%
Vehicle Operations	53,936	21,540	9,055	9,055	100%
Major Equipment	0		110,000	110,000	100%
TOTALS, OE&E	5,725,808	2,404,707	5,965,045	4,406,117	74%
TOTAL EXPENSE	10,059,054	4,775,645	11,510,292	8,790,516	76%
Sched. Reimb. - Fingerprints	(8,670)	4,590	0	8,007	#DIV/0!
Sched. Reimb. - Other	(16,095)	9,355	(230,000)	705	0%
Unsched. Reimb. - External/Private	(36,094)	21,178		23,085	
Probation Monitoring Fee - Variable	(47,632)	21,098		43,607	
Unsched. Reimb. - Other	(218,469)	92,661		113,249	
NET APPROPRIATION	9,732,094	4,924,526	11,280,292	8,979,169	80%
SURPLUS/(DEFICIT):					10%



MEMORANDUM

DATE	August 1, 2012
TO	Richard DeCuir, Executive Officer
FROM	Dawn Dill, Manager, Licensing and Examination Unit
SUBJECT	Dental Licensees as of July 1, 2012

Richard,

Per your request below is a table of our current dental licensee population.

License Status	Number of Licenses	Renewal Fee Paid
Active	36,154	\$365.00
Inactive	3,636	\$365.00
Retired	1,775	\$182.50
Disabled	109	\$182.50 or \$365.00*

*Fee is dependant on the age of the licensee.

Total Active/Inactive 39,790.

ADMINISTRATION - PERSONAL SERVICES/FISCAL SUMMARY

ADMIN	Salary	Benefits	Total
624-110-8840-001 (.5)	\$49,854	\$19,035	\$68,889
624-110-4802-001 (.5)	\$42,759	\$17,021	\$59,780
624-110-1312-001 (.4)	\$27,674	\$11,762	\$39,436
624-110-5393-008 (.4)	\$23,395	\$10,547	\$33,942
624-110-5393-801 (.4)	\$23,395	\$10,547	\$33,942
624-110-5393-802 (.4)	\$23,395	\$10,547	\$33,942
TOTALS	\$190,472	\$79,459	\$269,931

DENTAL BOARD - 0741
BUDGET REPORT
FY 2011-12 EXPENDITURE PROJECTION

OBJECT DESCRIPTION	FY 2010-11		FY 2011-12		
	ACTUAL	PRIOR YEAR	AUTHORIZED	ENFORCEMENT	PERCENT
	EXPENDITURES	EXPENDITURES	EXPENDITURES	AUTHORIZED	
(MONTH 13)	1/31/2011	2011-12	EXPENDITURES	SPENT	
PERSONNEL SERVICES					
Salary & Wages (Staff)	2,644,935	1,448,592	3,449,160	140,618	4%
Statutory Exempt (EO)	96,829	55,654	101,852	49,854	49%
Temp Help (Expert Examiners)			40,000	0	0%
Physical Fitness Incentive	4,653	1,040		0	
Temp Help Reg (907)	289,747	153,573	222,403	0	0%
Temp Help (Exam Proctors)	269		45,447	0	0%
Board Member Per Diem (901, 920)	19,300	8,500	45,950	0	0%
Committee Members (911)	4,500	3,000	58,686	0	0%
Overtime	6,544	785	25,208	0	0%
Staff Benefits	1,266,469	699,794	1,691,980	79,459	5%
Salary Savings	0		(135,439)		0%
TOTALS, PERSONNEL SVC	4,333,246	2,370,938	5,545,247	269,931	5%
OPERATING EXPENSE AND EQUIPMENT					
General Expense	135,143	46,674	31,219	1,561	5%
Fingerprint Reports	9,581	4,670	25,777	0	0%
Minor Equipment	43,155	5,409	18,300	915	5%
Printing	67,714	4,866	43,502	2,175	5%
Communication	59,163	38,156	34,670	1,734	5%
Postage	60,265	25,769	61,791	3,090	5%
Insurance	2,016	2,016	6,972	349	5%
Travel In State	128,627	55,021	123,755	6,188	5%
Training	6,515	3,428	25,148	1,257	5%
Facilities Operations	456,578	270,430	360,656	18,033	5%
C & P Services - Interdept.	45,988	11,426	134,917	6,746	5%
C & P Services - External	217,708	77,830	282,274		0%
DEPARTMENTAL SERVICES:					
Departmental Pro Rata	376,575	309,524	414,433	20,722	5%
Admin/Exec	531,097	224,125	550,366	27,518	5%
Interagency Services			881	44	5%
DOI-ProRata Internal	16,823	10,962	22,354	1,118	5%
Public Affairs Office	35,881	22,362	37,949	1,897	5%
CCED	23,374	13,627	40,544	2,027	5%
INTERAGENCY SERVICES:					
Consolidated Data Center	42,420	19,490	18,907	945	5%
DP Maintenance & Supply	18,843		12,366	618	5%
Central Admin Svc-ProRata	373,091	186,546	413,261	20,663	5%
EXAMS EXPENSES:					
Exam Supplies	0	0	43,589	0	0%
Exam Freight	0	0	166	0	0%
Exam Site Rental	1,020	0	467,586	0	0%
C/P Svcs-External Expert Administration	125,078	66,838	6,709	0	0%
C/P Svcs-External Expert Examiners	0	0	238,248	0	0%
OTHER ITEMS OF EXPENSE:					
Awarded Attorney Fee	14,746	0	661	0	0%
ENFORCEMENT:					
Attorney General	1,401,277	686,551	1,778,310	0	0%
Office Admin. Hearings	190,395	58,090	406,720	0	0%
Court Reporters	21,684	5,213			
Evidence/Witness Fees	592,115	234,144	243,959	0	0%
Vehicle Operations	53,936	21,540	9,055	0	0%
Major Equipment	0		110,000	0	0%
TOTALS, OE&E	5,725,808	2,404,707	5,965,045	117,600	2%
TOTAL EXPENSE	10,059,054	4,775,645	11,510,292	387,531	3%
Sched. Reimb. - Fingerprints	(8,670)	4,590	0	0	0%
Sched. Reimb. - Other	(16,095)	9,355	(230,000)	0	0%
Unsched. Reimb. - External/Private	(36,094)	21,178		0	
Probation Monitoring Fee - Variable	(47,632)	21,098		0	
Unsched. Reimb. - Other	(218,469)	92,661		0	
NET APPROPRIATION	9,732,094	4,924,526	11,280,292	505,130	4%
SURPLUS/(DEFICIT):					0%



MEMORANDUM

DATE	August 2, 2012
TO	Dental Board of California
FROM	Richard DeCuir, Executive Officer Dental Board of California
SUBJECT	Agenda Item 8(B): Discussion and Possible Action Regarding Initiation of a Rulemaking to Amend California Code of Regulations, Title 16, §1021 Relevant to Examination, Permit and Licensure Fees for Dentists

Background:

Following the Board's discussion regarding staff's recommendation for appropriate fee increases in dentistry to sustain Board expenditures, the Board may take action to initiate a rulemaking to amend California Code of Regulations, Title 16, §1021 relevant to examination, permit, and licensure fees for dentists.

Proposed regulatory language is enclosed for the Board's consideration.

Action Requested:

Consider and possibly accept the proposed regulatory language relevant to examination, permit, and licensure fees for dentists, and direct staff to take all steps necessary to initiate the formal rulemaking process, including noticing the proposed language for 45-day public comment, setting the proposed language for a public hearing, and authorize the Executive Officer to make any non-substantive changes to the rulemaking package. If after the close of the 45-day public comment period and public regulatory hearing, no adverse comments are received, authorize the Executive Officer to make any non-substantive changes to the proposed regulations before completing the rulemaking process, and adopt the proposed amendments to California Code of Regulations, Title 16, §1021 as noticed in the proposed text.

**TITLE 16. DENTAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS**

PROPOSED LANGUAGE

Amend Section 1021 of Division 10 of Title 16 of the California Code of Regulations, to read as follows:

§ 1021. Examination, Permit and License Fees for Dentists.

The following fees are set for dentist examination and licensure by the board:

(a) Initial application for the board clinical and written examination pursuant to Section 1632(c)(1) of the code, initial application for those applicants qualifying pursuant to Section 1632(c)(2) and those applicants qualifying pursuant to Section 1634.1	\$ <u>100</u> <u>125</u>
(b) Initial application for restorative technique examination	\$250
(c) Applications for reexamination	\$75
(d) Board clinical and written examination or reexamination pursuant to Section 1632(c)(1) of the code	\$450
(e) Restorative technique examination or reexamination	\$250
(f)(b) Fee for application for licensure by credential	\$ <u>283</u> <u>350</u>
(c) <u>Fee for application for licensure by residency</u>	<u>\$350</u>
(g)(d) Initial license	\$ <u>365</u> <u>450</u> *
(h)(e) Biennial license renewal fee	\$ <u>365</u> <u>450</u> .
(i)(f) Biennial license renewal fee for those qualifying pursuant to Section 1716.1 of the eCode shall be one half of the renewal fee prescribed by subsection (h <u>e</u>).	
(j)(g) Delinquency f <u>Fee</u> - l <u>icense</u> r <u>enewal</u> - The delinquency fee for license renewal shall be the amount prescribed by section 163.5 of the eCode.	
(k)(h) Substitute certificate	\$ <u>50</u> <u>75</u>
(l)(i) Application for an additional office permit	\$ <u>100</u> <u>125</u>

(m) (j) Biennial renewal of additional office permit	\$100
<u>(k) Delinquency Fee – Additional Office Permit – The delinquency fee for an additional office permit renewal shall be the amount prescribed by section 163.5 of the Code.</u>	
(n) (l) Late change of practice registration	\$50 <u>75</u>
(o) (m) Fictitious name permit shall be the amount The fee prescribed by Section 1724.5 of the Code	
(p) (n) Fictitious name <u>permit</u> renewal	\$150 <u>225</u>
(q) (o) Delinquency f Fee - f Fictitious n Name <u>Permit</u> r Renewal - The delinquency fee for fictitious name permits shall be one-half of the fictitious name permit renewal fee.	
(r) (p) Continuing education registered provider <u>application and renewal</u> fee	\$250
(s) (q) <u>Application for G</u> general anesthesia or conscious sedation permit or adult or minor oral conscious sedation certificate	\$200 <u>250</u>
<u>(r) General anesthesia or conscious sedation permit renewal</u>	<u>\$250</u>
<u>(s) General anesthesia or conscious sedation on-site inspection and evaluation</u>	<u>\$310</u>
<u>(t) Application for adult or minor oral conscious sedation certificate</u>	<u>\$250</u>
<u>(u) Adult or minor o</u> Oral <u>c</u> Conscious <u>s</u> Sedation <u>c</u> Certificate <u>r</u> Renewal	<u>\$75<u>95</u></u>
(u) General anesthesia or conscious sedation permit renewal fee	\$200
(v) General anesthesia or conscious sedation on-site inspection and evaluation fee	\$250
<u>(v) Application for law and ethics examination</u>	<u>\$25</u>
<u>(w) License certification</u>	<u>\$20</u>
<u>(x) Application for special permit</u>	<u>\$300</u>
<u>(y) Renewal of special permit</u>	<u>\$100</u>
<u>(z) Delinquency Fee – Special Permit – The delinquency fee for a special</u>	

permit shall be the amount prescribed by section 163.5 of the Code.

(aa) Application for referral service permit \$25

(ab) Renewal of referral service permit \$25

(ac) Application for an extramural facility permit \$25

(ad) Renewal of an extramural facility permit \$25

*Fee pro-rated based on applicant's birth date.

Note: Authority cited: Sections 1614, 1635.5, 1634.2(c), 1724 and 1724.5, Business and Professions Code. Reference: Sections 1632, 1634.1, 1646.6, 1647.8, 1647.12, 1647.15, 1715, 1716.1, 1718.3, 1724 and 1724.5, Business and Professions Code.



MEMORANDUM

DATE	August 2, 2012
TO	Dental Board Members
FROM	Sarah Wallace, Legislative & Regulatory Analyst Dental Board of California
SUBJECT	Agenda Item 9: Update Regarding the California Dental Associations Request to Amend Regulations Pertaining to Mobile Dental Clinics (<i>California Code of Regulations, Title 16, §1049</i>)

Background:

In May 2010, the California Dental Association (CDA) submitted a letter to the Board's Executive Officer, Richard DeCuir, seeking consideration of the Board to promulgate additional regulatory requirements relative to mobile dental clinics. The CDA had reviewed the Board's regulations governing mobile and portable dental providers and found the regulations lacking appropriate measures to ensure accountability and public safety. The CDA requested the issue of amending the Board's mobile dental clinic regulations be placed on the agenda for a future meeting.

At its May 2012 meeting, the Board reviewed the CDA's proposed amendments to the California Code of Regulations, Title 16, Section 1049 relative to mobile dental clinics. Board Legal Counsel, Kristy Shellans, commented that the proposed language would need some more work and expressed concern regarding authority, clarity, and consistency with current law and noted that the proposed exemptions look overly broad. Dr. Witcher, Board President, appointed a subcommittee to work with staff to evaluate the CDA's proposed amendments and bring recommendations back to the Board.

Update:

The Subcommittee worked with Legal Counsel to review the CDA's proposed amendments. The Office of Administrative Law (OAL) approves regulatory packages that interpret, implement or make specific existing statutes and meet the following standards as established in the Administrative Procedure Act (APA): (1) Necessity, (2) Authority, (3) Clarity, (4) Consistency, (5) Reference, (6) Nonduplication. If the Board's proposed regulations do not meet these standards, then the package could face disapproval.

The Subcommittee and Legal Counsel found that the language proposed by the CDA would not meet the approval standards of OAL. Many of the proposed amendments are not authorized by statute and would not meet the necessity and clarity standards of the APA and such proposed regulatory language would not gain the approval of the OAL. The Subcommittee and Board Legal Counsel will be provide further comment on this item during the meeting.



MEMORANDUM

DATE	July 30, 2012
TO	Dental Board of California
FROM	Sarah Wallace, Legislative & Regulatory Analyst Dental Board of California
SUBJECT	Agenda Item 10: Update on Pending Regulatory Packages:

A. Sponsored Free Health Care Events (California Code of Regulations, Title 16, §§ 1023.15, 1023.16, 1023.17, 1023.18, and 1023.19):

At its February 25, 2011 meeting, the Dental Board of California (Board) discussed and approved proposed regulatory language relative to sponsored free health care events. The Board directed staff to initiate a rulemaking. The proposed action was published by the Office of Administrative Law (OAL) on October 7, 2011 and was noticed on the Board's web site and mailed to interested parties. The 45-day public comment period began on October 7, 2011 and ended on November 21, 2011. A regulatory hearing was held on November 22, 2011 in Sacramento, and the Board received comments from the California Association of Oral and Maxillofacial Surgeons, the California Dental Association, and the California Academy of General Dentists.

At its February 23, 2012 meeting, the Board considered comments received during the 45-day public comment period. The Board voted to modify the text in response to the comments received and directed staff to notice the modified text for 15-day public comment. Prior to staff noticing the Board's modified text for 15-day public comment, the Department of Consumer Affairs (Department) contacted all healing arts boards that have proposed regulations relevant to sponsored free health care events, advising that boards may need to further clarify the Department's role in receiving and registering sponsoring entities. The Medical Board of California (MBC), Board of Occupational Therapy (BOT), and the Board of Vocational Nursing and Psychiatric Technicians (BVNPT) had all submitted their final rulemaking files to OAL. On March 13, 2012, OAL issued a Decision of Disapproval of MBC's proposed regulations due to failure to comply with clarity and necessity standards, as well as procedural issues.

The Office of Administrative Law's primary clarity concern related to the specific content of MBC's Form 901-A in relation to the content of similar forms proposed by other healing arts boards within the Department. The BVNPT and BOT used similar forms incorporated by reference, and each form contained language similar to MBC's form indicating that only one registration form per event should be completed and submitted

to the Department. The Office of Administrative Law was concerned that there was not one common form with a uniform set of regulatory requirements which would, with certainty, allow for the filing of a "single, common form" that meets the regulatory requirements of the three agencies. The Office of Administrative Law could not easily understand how the "only one form per event" provision on each of the individual board's forms would work in practice. The differing forms from each board could create the potential for confusion and uncertainty among sponsoring entities legally required to comply with the regulations.

At its April 11, 2012 teleconference meeting, the Board adopted a Resolution to formally delegate authority to the Department to receive and process sponsored entity registration forms and to register sponsoring entities for sponsored free health care events that utilize the services of dentists. The Board directed staff to add the adopted Resolution to the Board's Sponsored Fee Health Care Events rulemaking file. Additionally, the Board voted to modify the text accordingly and directed staff to complete the rulemaking process, including preparing the modified text for a 15-day public comment period.

Board staff noticed the modified text and documents added to the rulemaking file for 15-day public comment on April 25, 2012. The 15-day public comment period began on April 26, 2012 and ended on May 10, 2012. The Board did not receive comments in response to the modified text or documents added to the file. Since there were no adverse comments received in response to the modified text, the Board adopted the final text as noticed in the modified text at its April 11, 2012 teleconference meeting.

Staff submitted the final rulemaking file to the Department of Consumer Affairs (Department) on June 6, 2012. The final rulemaking file is required to be approved by the Director of the Department, the Secretary of the State and Consumer Services Agency (Agency), and the Director of the Department of Finance (Finance). Once approval signatures are obtained, the final rulemaking file will be submitted to the Office of Administrative Law. The Office of Administrative Law will have thirty (30) working days to review the file. Once approved, the rulemaking will be filed with the Secretary of State and will become effective thirty (30) days later. The deadline to submit the final rulemaking file to the Office of Administrative Law is October 6, 2012.

B. Notice to Consumers of Licensure by the Dental Board (California Code of Regulations, Title 16, § 1065):

At its November 7, 2011 meeting, the Board directed staff to initiate a rulemaking to implement, interpret, and make specific the provisions of Business and Professions Code Sections 138 and 1611.3 relative to providing conspicuous notification to consumers that dentists are licensed and regulated by the Board, require that the notice include a statement to that effect, and contain the Board's toll-free telephone number and its web site address.

The initial rulemaking file was submitted to OAL on January 10, 2012. The proposed action was published on January 20, 2012 and was noticed on the Board's web site and mailed to interested parties. The 45-day public comment period began on January 20, 2012 and ended on March 5, 2012. A regulatory hearing was held on March 5, 2012 in Sacramento. The Board did not receive comments in response to the proposed

regulation. Since there were no adverse comments received in response to the proposed text, the Board adopted the final text as noticed in the proposed text at its November 7, 2011 meeting.

Staff submitted the final rulemaking file to the Department on June 11, 2012. The final rulemaking file is required to be approved by the Director of the Department, the Secretary of Agency, and the Director of Finance. Once approval signatures are obtained, the final rulemaking file will be submitted to the Office of Administrative Law. The Office of Administrative Law will have thirty (30) working days to review the file. Once approved, the rulemaking will be filed with the Secretary of State and will become effective thirty (30) days later. The deadline to submit the final rulemaking file to the Office of Administrative Law is January 19, 2013.

C. Abandonment of Applications (California Code of Regulations, Title 16, §1004):

At its May 18, 2012 meeting, the Board discussed and approved proposed regulatory language relative to the abandonment of applications. The Board directed staff to initiate a rulemaking. Staff is currently drafting the initial rulemaking documents and will be filing the proposed language with the Office of Administrative Law in the near future.

D. Uniform Standards for Substance Abusing Licensees (California Code of Regulations, Title 16, §§ 1018 and 1018.01):

At its May 18, 2012 meeting, the Board discussed and approved new proposed regulatory language relative to uniform standards for substance abusing licensees. The Board directed staff to initiate a rulemaking. Staff is currently drafting the initial rulemaking documents and will be filing the proposed language with the Office of Administrative Law in the near future.

Action Requested:

No action necessary.



MEMORANDUM

DATE	July 30, 2012
TO	Dental Board of California
FROM	Sarah Wallace, Legislative & Regulatory Analyst Dental Board of California
SUBJECT	Agenda Item 11: Discussion and Possible Action Regarding Regulatory Priorities for the 2012/2013 Fiscal Year

Background:

During the November 2010 meeting, the Board reviewed pending regulatory files that had been initiated and were moving through the formal rulemaking process. Those regulatory files included:

- (1) Disciplinary Guidelines (Status: Complete),
- (2) Retroactive Fingerprinting Requirements (Status: Complete),
- (3) Dental Assisting Educational Programs and Courses (Status: Pending Department of Finance review), and
- (4) Minimum Standards for Infection Control (Status: Complete).

At that meeting the Board discussed setting priorities for new rulemakings during 2011. In addition to the four packages listed above, the Board voted to establish the following priority order to initiate rulemakings during 2011:

- (5) Consumer Protection Enforcement Initiative (Status: Pending Department of Finance review),
- (6) Portfolio Examination Requirements (Status: Pending contractor's findings),
- (7) Uniform Standards for Substance-Abusing Licensees (Status: Pending Board review of comments received during the 45-day public comment period), and
- (8) Revise current Regulations for Use of Conscious Sedation, Use of Oral Conscious Sedation for Pediatric Patients, and Use of Oral Conscious Sedation for Adult Patients (Status: Pending establishment of a task force to develop recommendations).

At its August 2011 meeting, the Board again reviewed pending regulatory packages and set priorities for the 2011/2012 fiscal year. At that meeting, the Board set the following priorities for the 2011/2012 fiscal year in addition to wrapping up any pending regulatory packages that hadn't been completed by August 2011:

- (1) Sponsored Free Health Care Events,

- (2) Citation and Fine Records Purge Requirements, and
- (3) Directives in Senate Bill 540

Over the last year the Board and staff have been working diligently to ensure that the regulatory files move forward to maintain maximum public protection. The regulatory packages staff has been working on over the last year are as follows:

- (1) Dental Assisting Educational Programs and Courses
- (2) Consumer Protection Enforcement Initiative (CCR, Title 16, §§ 1018.05 and 1020):
- (3) Sponsored Free Healthcare Events (CCR, Title 16, §§ 1023.15, 1023.16, 1023.17, 1023.18, and 1023.19)
- (4) Notice to Consumers (CCR, Title 16, § 1065)
- (5) Uniform Standards Relating to Substance Abusing Licensees and Disciplinary Guidelines (CCR, Title 16, §§ 1018 and 1020.5)
- (6) Uniform Standards for Substance Abusing Licensees (CCR, Title 16, §§ 1018 and 1018.01)
- (7) Abandonment of Applications (California Code of Regulations, Title 16, §1004)

A status report regarding the above regulatory packaged can be found in Attachment 1.

Since the August 2011 meeting, the Board and Board staff have identified several regulations that need to be added or require updating. Below is list of twenty (20) needed regulations for the Board to consider prioritizing for FY 2012-2013. A complete listing, including summaries, can be found in Attachment 2.

- Dental Assisting Program Application and Examination Requirements (CCR, Title 16, §§ 1076 – 1081.1, and 1083)
- Pit & Fissure Sealant Course Requirements (CCR, Title 16, § 1070.3)
- Radiation Safety Course Requirements (CCR, Title 16, §§ 1014-1014.1)
- Coronal Polishing Course Requirements (CCR, Title 16, § 1070.4)
- Ultrasonic Scaling Course Requirements (CCR, Title 16, § 1070.5)
- Dental Assistant Duties and Settings (CCR, Title 16, § 1085)
- Registered Dental Assistant Duties and Settings (CCR, Title 16, § 1086)
- Registered Dental Assistant in Extended Functions Duties and Settings (CCR, Title 16, § 1087)
- Equivalency Standards for CPR Courses (New Regulation)
- Teaching Methodology Requirements (New Regulation)
- Establish Minimum Criteria for Non-Board Approved Programs for RDA Application Qualification Per Business and Professions Code Section 1752.1(c)
- Foreign Dental School Requirements (CCR, Title 16, §§ 1024.3-1024.12)
- Mobile Dental Clinics (CCR, Title 16, § 1049)
- Oral Conscious Sedation Forms (CCR, Title 16, §§ 1044.1, 1044.3(c), and 1044.4(a))
- Change of Address Requirements (New Regulation)
- Elective Facial Cosmetic Surgery Permit Requirements (New Regulation)
- Retention of Inactive Patient Dental Records (New Regulation)

- Examination, Permit, and License Fees for Dentists (CCR, Title 16, § 1021)

Action Requested:

Staff requests the Board review the list of issues that require rulemakings, and establish a priority list to assist staff with determining workload for FY 2012/2013.

ATTACHMENT 1

The following provides an update of the status of: (1) the regulatory files that were pending in August 2011, and (2) the rulemakings that were deemed to be priority in for the 2011/2012 fiscal year. :

Dental Assisting Educational Programs and Courses (CCR, Title 16, §§ 1070, 1070.1, 1070.2, 1070.6, 1070.7, 1070.8, and 1071): The Board's Dental Assisting Educational Programs and Courses regulatory file was approved by the Office of Administrative Law and filed with the Secretary of State on October 12, 2011. The regulation became effective on November 11, 2011. . **Status: Complete.**

Consumer Protection Enforcement Initiative (CCR, Title 16, §§ 1018.05 and 1020): The Board's Consumer Protection Enforcement Initiative regulatory file was approved by the Office of Administrative Law and filed with the Secretary of State on February 8, 2012. The regulation became effective on March 9, 2012. . **Status: Complete.**

Sponsored Free Healthcare Events (CCR, Title 16, §§ 1023.15, 1023.16, 1023.17, 1023.18, and 1023.19): The Board's Sponsored Free Health Care Events final rulemaking file was submitted to the Department of Consumer Affairs (Department) on June 6, 2012. The final rulemaking file is required to be approved by the Director of the Department, the Secretary of the State and Consumer Services Agency (Agency), and the Director of the Department of Finance (Finance). Once approval signatures are obtained, the final rulemaking file will be submitted to the Office of Administrative Law. The Office of Administrative Law will have thirty (30) working days to review the file. Once approved, the rulemaking will be filed with the Secretary of State and will become effective thirty (30) days later. The deadline to submit the final rulemaking file to the Office of Administrative Law is October 6, 2012. **Status: Pending Agency Review.**

Notice to Consumers (CCR, Title 16, § 1065): The Board's Notice to Consumers final rulemaking file was submitted to the Department on June 11, 2012. The final rulemaking file is required to be approved by the Director of the Department, the Secretary of Agency, and the Director of Finance. Once approval signatures are obtained, the final rulemaking file will be submitted to the Office of Administrative Law. The Office of Administrative Law will have thirty (30) working days to review the file. Once approved, the rulemaking will be filed with the Secretary of State and will become effective thirty (30) days later. The deadline to submit the final rulemaking file to the Office of Administrative Law is January 19, 2013. **Status: Pending Department of Finance Review.**

Uniform Standards Relating to Substance Abusing Licensees and Disciplinary Guidelines (CCR, Title 16, §§ 1018 and 1020.5): The Board initiated the rulemaking and held a regulatory hearing in which it received comments concerning the Board's discretion with the proposed amendments. The Board discussed this regulatory package over the course of several meetings and received several differing legal opinions regarding the Board's discretion. At its February 2012 meeting, the Board voted to allow the rulemaking expire and begin the process again once the Department could provide the Board with further clarity on the direction it should take with the proposed regulation. **Status: Rulemaking Expired.**

Uniform Standards for Substance Abusing Licensees (CCR, Title 16, §§ 1018 and 1018.01): At its May 18, 2012 meeting, the Board received further information from the Department and approved new proposed regulatory language relative to uniform standards for substance abusing licensees. The Board directed staff to initiate a rulemaking. Staff is currently drafting the initial rulemaking documents and will be filing the proposed language with the Office of Administrative Law in the near future. **Status: Staff is in the process of drafting initial rulemaking documents.**

Abandonment of Applications (California Code of Regulations, Title 16, §1004): At its May 18, 2012 meeting, the Board discussed and approved proposed regulatory language relative to the abandonment of applications and the splitting of the RDAEF exam for re-examination candidates. The Board directed staff to initiate a rulemaking. Staff is currently drafting the initial rulemaking documents and will be filing the proposed language with the Office of Administrative Law in the near future. **Status: Staff is in the process of drafting initial rulemaking documents.**

Portfolio Examination Requirements: The Board worked with stakeholders to draft the initial framework for the proposed regulatory language while AB 1524 (Chapter 446, Statutes of 2010) was moving through the legislative process. Since the bill was enacted, the Board has contracted with COMIRA to evaluate and determine the testing components of the examination to ensure it is psychometrically sound. Once COMIRA completes their work, staff will finalize proposed language to present to the Board to initiate a rulemaking. **Status: Pending contractor's findings.**

Citation and Fine Records Purge Requirements (New Regulation) - Currently, the Board's enforcement program is limited to two methods to address violations of the Dental Practice Act; issuance of a citation and administrative filings with the Office of the Attorney General. One of the current methods available is the issuance of an administrative citation. This method is used to address minor violations that do not warrant more severe disciplinary measures. However, because a citation remains on the licensee's record indefinitely, and the information is available to the public via the Internet, licensee's routinely request an informal hearing to challenge the merits of the allegation. In most cases, the licensee questions the fairness of a permanent mark against their license for a minor violation of the Dental Practice Act. The amount of time devoted to the informal hearing process limits the efficiency of the citation as an intermediate disciplinary tool. By comparison, citations issued by other Boards have a statute of limitations placed on the length of time posted for public disclosure (i.e. Medical Board of California, 5 years; Board of Registered Nursing, 3 years). **Status: Pending development of proposed language for Board consideration.**

Revise Conscious Sedation Requirements: Dr. Witcher and Dr. Le, the two-member subcommittee charged with the task of reviewing the ADA "Guidelines for the Use of Sedation and General Anesthesia by Dentists" and the current statutes and regulations governing the use of conscious sedation and oral conscious sedation, gave a comprehensive report to the Board in November 2010. The subcommittee recommended revising the Dental Practice Act sections related to general anesthesia and conscious sedation to improve clarity and, where possible, consistency with nationally recognized guidelines such as the ADA Guidelines. They recommended it will require both statutory and regulatory amendments. The subcommittee recommended

engaging communities of interest in the development of proposed regulatory language and recommended that the Board form a task force to allow participation by stakeholders. The Board accepted the subcommittee's recommendation. **Status: Pending establishment of a task force to develop recommendations.**

ATTACHMENT 2

Board staff has identified several regulations that need to be added or require updating. Staff requests the Board review the following subject matters that require rulemakings, and establish a priority list to assist staff with determining workload for FY 2012/2013:

Regulations Relative to the Dental Assisting Program:

- **Dental Assisting Program Application and Examination Requirements (CCR, Title 16, §§ 1076 – 1081.1, and 1083)** – In November 2009, the Board reviewed and approved two proposals for regulatory changes relative to dental assisting. The first proposal implemented the requirements for Dental Assisting Educational Programs and Courses to maintain consistency with the provision contained in AB 2637 (Chapter 499, Statutes of 2008). The second proposal made necessary amendments to the Dental Assisting Program Application and Examination Requirements to ensure compliance with AB 2637 (Chapter 499, Statutes of 2008). The Board promulgated the Dental Assisting Educational Programs and Courses regulations, with the understanding that once they were effective, the Board would then promulgate the regulations relating to the Dental Assisting Program Application and Examination Requirements. The Dental Assisting Educational Programs and Courses regulatory file is nearing the final review stages and the Board may wish to consider revising the Dental Assisting Program Application and Examination Requirements in the near future.
- **Pit & Fissure Sealant Course Requirements (CCR, Title 16, § 1070.3)** – These requirements need to be revised to ensure compliance with AB 2637 (Chapter 499, Statutes of 2008).
- **Radiation Safety Course Requirements (CCR, Title 16, §§ 1014-1014.1)** – These requirements need to be revised to ensure compliance with AB 2637 (Chapter 499, Statutes of 2008).
- **Coronal Polishing Course Requirements (CCR, Title 16, § 1070.4)** – These requirements need to be revised to ensure compliance with AB 2637 (Chapter 499, Statutes of 2008).
- **Ultrasonic Scaling Course Requirements (CCR, Title 16, § 1070.5)** – These requirements need to be revised to ensure compliance with AB 2637 (Chapter 499, Statutes of 2008).
- **Dental Assistant Duties and Settings (CCR, Title 16, § 1085)** – These requirements need to be revised to ensure compliance with AB 2637 (Chapter 499, Statutes of 2008).
- **Registered Dental Assistant Duties and Settings (CCR, Title 16, § 1086)** – These requirements need to be revised to ensure compliance with AB 2637 (Chapter 499, Statutes of 2008).

- **Registered Dental Assistant in Extended Functions Duties and Settings (CCR, Title 16, § 1087)** – These requirements need to be revised to ensure compliance with AB 2637 (Chapter 499, Statutes of 2008).
- **Equivalency Standards for CPR Courses (New Regulation)** – During the formal rulemaking process for the Dental Assisting Educational Programs and Courses regulatory file, the Board and stakeholders identified a need to specify the equivalency standards for CPR courses relative to dental assisting programs and courses.
- **Teaching Methodology Requirements (New Regulation)** – During the formal rulemaking process for the Dental Assisting Educational Programs and Courses regulatory file, the Board and stakeholders identified a need to specify the teaching methodology requirements relative to dental assisting programs and courses.
- **Establish Minimum Criteria for Non-Board Approved Programs for RDA Application Qualification Per Business and Professions Code Section 1752.1(c)** – Business and Professions Code Section 1752.1(c) states: “The board shall give credit toward the work experience referred to in this section to persons who have graduated from a dental assisting program in postsecondary institution approved by the Department of Education or in a secondary institution, regional occupational center, or regional occupational program, that are not, however, approved by the board pursuant to subdivision (a). The credit shall equal the total weeks spent in classroom training and internship on a week-for-week basis. The board, in cooperation with the Superintendent of Public Instruction, shall establish the minimum criteria for the curriculum of nonboard-approved programs. Additionally, the board shall notify those programs only if the program's curriculum does not meet established minimum criteria, as established for board-approved registered dental assistant programs, except any requirement that the program be given in a postsecondary institution. Graduates of programs not meeting established minimum criteria shall not qualify for satisfactory work experience as defined by this section.”

Other Needed Regulations:

- **Foreign Dental School Requirements (CCR, Title 16, §§ 1024.3-1024.12)** – The Board may wish to review these requirements to ensure consistency with Board’s California dental school approval process and licensing requirements to ensure public safety.
- **Mobile Dental Clinics (CCR, Title 16, § 1049)** – The California Dental Association would like to work with the Board to promulgate additional regulations in order to better protect and serve the citizens of California. Dr’s. Olinger and Le volunteered to serve on a subcommittee to work with CDA to begin looking at the issues.

- **Oral Conscious Sedation Forms (CCR, Title 16, §§ 1044.1, 1044.3(c), and 1044.4(a))** – Several of the OCS program’s forms need minor updating and corrections.
- **Change of Address Requirements (New Regulation)** – The Board may wish to consider a new regulation to incorporate the Dental Board’s Address Change form and require notarization of address changes, at least for dentists, per the suggestion of the Board’s Enforcement Unit Investigators and Enforcement Chief. Legal counsel advised staff to not accept change of address requests by phone, but only accept it in writing. In order to require the licensees to use a specific form or notarize it, it has to be in regulation to make it legally enforceable. This may, also, be an opportunity to mirror the Dental Hygiene Committee of California’s statute, Business and Professions Code Section 1934 requiring that “A licensee who changes his or her address of record shall notify the committee within 30 days of the change.”
- **Elective Facial Cosmetic Surgery Permit Requirements (New Regulation)** – Regulations are necessary to interpret and specify the provisions contained in Business and Professions Code Section 1638.1 relating to the application and approval process requirements for the issuance of an Elective Facial Cosmetic Surgery permit.
- **Retention of Inactive Patient Dental Records (New Regulation)** – At the May 2011 meeting, Dr. Morrow and Dr. Olinger, appointed subcommittee, recommended the Board complete a rulemaking to institute a requirement that inactive patient records be retained for at least seven years from the date of an adult patient’s last visit and that dental records of an un-emancipated minor must be maintained for at least one year after the minor has reached age seventeen but not less than seven years from the date of the patient’s last visit.
- **Examination, Permit, and License Fees for Dentists (CCR, Title 16, § 1021)** – The Board’s Executive Officer recommends the Board review appropriate fee increases in dentistry to sustain Board expenditures.



MEMORANDUM

DATE	July 31, 2012
TO	Dental Board of California
FROM	Sarah Wallace, Legislative & Regulatory Analyst Dental Board of California
SUBJECT	Agenda Item 12: Update on Actions Taken to Implement the Patient Protection and Affordable Healthcare Act

The impact of the Patient Protection and Affordable Health Care Act (PPACA) upon the Dental Board licensees is unknown at this time. However, the ability of Californians to access dental care should not be directly impacted by this law.

The California Health Benefit Exchange (Exchange) is an independent public entity within California state government and is comprised of five members who have been appointed by the Governor and the Legislature. The Exchange is charged with creating a new insurance marketplace in which individuals and small businesses will be able to purchase competitively priced health plans using federal tax subsidies and credits beginning in 2014. In preparation for the Supreme Court's decision regarding the PPACA, the Exchange produced the attached Frequently Asked Question sheet to provide more information about its impact on California. Staff has included this document for informational purposes.

Staff will continue to monitor the PPACA and provide reports to the Board of its potential impact on dentistry once further information is obtained.



California Health Benefit Exchange

Board Members

Diana S. Dooley, Chair
Kimberly Belshé Paul Fearer
Susan Kennedy Robert Ross, MD

Executive Director

Peter V. Lee

Key Questions and Answers on the Impact of Potential Supreme Court Decision on California

June 26, 2012

1. How many Californians will benefit from expanded coverage under the Affordable Care Act when it is fully implemented in 2019?

When fully implemented, the law will expand affordable coverage to nearly 5 million Californians:¹

- 3.1 million Californians will be eligible for subsidized coverage through the Exchange.
- 1.5 million Californians will be newly eligible for expanded Medicaid coverage (Medi-Cal in California).

Millions more will be guaranteed the ability to purchase coverage without subsidies in the individual market.

Of those eligible, estimates show that nearly 4 million Californians will enroll in subsidized coverage through the Exchange or in Medi-Cal once the law is fully implemented:²

- Between 1.8 and 2.1 million Californians will obtain subsidized coverage through the Exchange.
- Between 1.2 and 1.6 million Californians will be newly covered under Medi-Cal.

An additional 2.1 million Californians are expected to purchase guaranteed issue coverage without subsidies through the Exchange or in the individual market.

2. What are the subsidies under the Affordable Care Act?

The first form of subsidy under the Affordable Care Act is the expansion of Medicaid (Med-Cal in California). Under the Affordable Care Act, ALL eligible Californians who make less than 138% of the federal poverty level (FPL) (\$15,415 for an individual, \$31,810 for a family of four) would be eligible to have fully-paid coverage in Medi-Cal.

The Affordable Care Act also provides “sliding scale” subsidies based on income for individuals and families earning between 138 and 400 percent of the federal poverty level and are designed to make health coverage more affordable. These subsidies will be provided in the form of tax credits that can be advanced and applied toward premiums for qualified health plans purchased through the Exchange, as well as subsidies to help cover cost-sharing of plans in the Exchange. The subsidies help individuals comply with the Affordable Care Act’s individual mandate by making coverage more accessible and affordable. Under the Affordable Care Act, the subsidies are only available through the Exchange.

The size of the subsidy depends on both the income and family size of eligible individuals. Table 1 provides an illustration of the value of the tax subsidies for families of four at several income levels for a 45-year-old policyholder based on 2014 projected incomes, assuming the family buys a “silver” plan which has a 70% actuarial value.³

Table 1. Tax Subsidy Modeling							
Federal Subsidies for a California Family of Four at Different Income Levels							
Percent of FPL	Annual Income	Unsubsidized Annual Premium	Annual Tax Credit	Annual Premium after Credit	Unsubsidized Monthly Premium	Monthly Premium Credit	Monthly Premium after credit
150%	\$35,137	\$14,245	\$12,840	\$1,405	\$1,187	\$1,070	\$117
200%	\$46,850	\$14,245	\$11,294	\$2,952	\$1,187	\$941	\$246
300%	\$70,275	\$14,245	\$7,569	\$6,676	\$1,187	\$631	\$556
399%	\$93,700	\$14,245	\$5,344	\$8,901	\$1,187	\$445	\$742

Note: this modeling does not include the value of subsidies related to cost-sharing which the Affordable Care Act also provides. “FPL” is Federal Poverty Level.

3. What has the Exchange been doing to prepare to enroll millions of Californians in 2014?

Following the enactment by California of its authorizing legislation in 2010, the Exchange became operational in January 2011. It has been working actively to design and develop the infrastructure necessary to implement the new health coverage marketplace that will support the enrollment of millions of Californians. In August 2011, the California Exchange received a \$39 million federal establishment grant to continue in the initial planning phases for this effort. Since then:

- The Exchange has hired 36 permanent staff.
- The Exchange, in collaboration with the Department of Health Care Services and the Managed Risk Medical Insurance Board, is creating a web-based eligibility and enrollment portal that will help consumers shop for insurance online with tools to compare plan benefits and cost starting with open enrollment in October 2013 (see announcement of contract award [here](#)).
- A marketing, outreach, and public education program is being planned that will launch in 2013 to raise awareness about coverage expansion that will begin in 2014 (see final work plans for the Exchange’s [Marketing & Outreach](#) and [Assisters Program](#)).
- The Exchange is developing a process to select qualified health plans to be offered to individuals and small businesses through the Exchange starting in 2014.
- An application to the federal government is now being finalized for its next cycle of federal funding which will support continued start-up work between August 2012 and June 2013.

4. How have Californians already benefited from the Affordable Care Act?

The Affordable Care Act's insurance market reforms and subsidy program expansions have reduced the number of medically uninsured Californians by extending coverage to:

- More than 10,000 Californians unable to obtain coverage in the individual market due to their health status enrolled in the Pre-Existing Condition Insurance Plan (PCIP) administered by the Managed Risk Medical Insurance Board.⁴
- More than 400,000 low-income Californians who would otherwise be ineligible for Medi-Cal under current rules and now have coverage through the early county-based expansion and will be transitioned to Medi-Cal coverage in 2014.⁵
- As of June 2011, more than 350,000 young adults who would have aged off their parents' health coverage were able to remain on their parents' policy under the law's expansion of dependent coverage through age 26.⁶
- More than 350,000 seniors who can better afford prescription drugs and who previously lacked coverage for medications due to Medicaid's "donut hole."⁷

5. What are the penalties for not maintaining minimum essential coverage (complying with the "individual mandate")?

The Affordable Care Act sought first to address the fact that individuals and families want to buy health insurance. Too often, however, it is financially out of reach which is why subsidies are a critical part of expanding coverage. The Affordable Care Act also requires United States citizens and legal residents to have health coverage. Those who do not fulfill this obligation will be required to pay a penalty. Individuals who are uninsured for less than three months and those who would have to pay more their 8% of their household incomes for premiums are exempt from the penalty. The size of the penalty will start lower in 2014, increasing in 2015 and 2016.

The penalty will be phased-in according to the following schedule: \$95 annual penalty per family member not covered in 2014 (or \$47.50 for dependents under 18); \$325 annual per family member in 2015 (or \$162.50 for dependents under 18); and \$695 annual per family member in 2016 (or \$347.50 for dependents under 18). For all of these penalties there is a ceiling of 300% of the individual penalty regardless of family size.

For higher income households, the penalty would be a percentage of household income, starting at 1.0% of taxable income in 2014; increasing to 2.0% of taxable income in 2015; and then 2.5% of taxable income in 2016. After 2016, the penalty will be increased annually by the cost-of-living adjustment.⁸

6. If the court rules against the individual mandate, what is the likely impact on premiums and coverage in California without the individual mandate?

While some eligible individuals would choose not to obtain coverage, 2.5 million Californians are still likely to enroll in subsidized coverage in Medi-Cal and the Exchange without the individual mandate. These estimates are based on economic

simulations conducted by the University of California, Los Angeles and University of California, Berkeley (UCLA and UCB) at a “base” level of enrollment.⁹ Enrollment could be substantially higher if outreach and enrollment efforts are successful or if other policies are put in place to promote enrollment. Enrollment could be lower if the premium increases that would result from not having as many insured raise costs above what has been modeled. (See Table 2.) Estimates on the impact on the premiums for the entire individual market that would result from fewer individuals being covered range dramatically – from an increase of 3% to over 20% in premium – with the size of the increase depending on a range of factors.¹⁰

Table 2. Estimated Enrollment in 2019 with and without a Mandate in California (Based on UCLA/UCB CalSIM1.7, “Base” Enrollment Estimates)			
	Base Enrollment Assumption	Enrollment without Mandate	Percent Decrease
Medi-Cal coverage	1.2 million	1.1 million	2% ¹¹
Exchange with Subsidies	1.8 million	1.4 million	23%
Individual Market without Subsidies	2.1 million	1.6 million	25%

California was the first state to create a Health Benefit Exchange following the passage of federal health care reform. It is charged with creating a new insurance marketplace in which individuals and small businesses will be able to purchase competitively priced health plans using federal tax subsidies and credits beginning in 2014.

For more information on the Exchange, go to www.healthexchange.ca.gov, and if you are member of the press seeking comment or an interview call (916) 205-8403.

Sources and Background Material

¹ *Health Insurance Coverage in California under the Affordable Care Act*, California Simulation of Insurance Models (CalSIM) Version 1.7, June 2012. Accessed at: http://laborcenter.berkeley.edu/healthcare/aca_chartpack.pdf. For additional eligibility and enrollment estimates including projected enrollment by region of the state, see: http://laborcenter.berkeley.edu/healthcare/aca_implemented.shtml

² *Health Insurance Coverage in California under the Affordable Care Act*, California Simulation of Insurance Models (CalSIM) Version 1.7, June 2012. Accessed at: http://laborcenter.berkeley.edu/healthcare/aca_chartpack.pdf. Range reflects base and enhanced enrollment projections as described on page 6.

³ *Kaiser Family Foundation Subsidy calculator*. Calculated for a family of four assuming a “medium” regional cost factor. Accessed at: <http://healthreform.kff.org/SubsidyCalculator.aspx>

⁴ *Pre-Existing Condition Insurance Plan (PCIP) May 2012 Summary*. Managed Risk Medical Insurance Board. Accessed at: http://www.mrmib.ca.gov/MRMIB/Agenda_Minutes_062012/Agenda_Item_8_a_PCIP_Enrollment_Report_for_May_2012_final.pdf

⁵ *LIHP Enrollment Data Demonstration Year 7 Quarter 3*. Department of Health Care Services. Accessed at: <http://www.dhcs.ca.gov/provgovpart/Documents/LIHP/Reports/DY7Q3LIHPEnrollmtReprt.pdf>

⁶ *Two Years Later: The Benefits of the Affordable Care Act for California*. United States Department of Health and Human Services. Accessed at: <http://www.healthcare.gov/law/resources/ca.html>

⁷ *Two Years Later: The Benefits of the Affordable Care Act for California*. United States Department of Health and Human Services. Accessed at: <http://www.healthcare.gov/law/resources/ca.html>

⁸ *Individual Mandate and Related Information Requirements under PPACA*, Congressional Research Service, 2011. Accessed at: <http://healthreformgps.org/wp-content/uploads/CRSreportonPPACAUG2011.pdf>

⁹ *Newly Insured Californians Would Fall by More than 1 Million under the Affordable Care Act without the Requirement to Purchase Insurance*. UCLA Center for Health Policy Research, January 2012. Accessed at: <http://www.healthpolicy.ucla.edu/pubs/Publication.aspx?pubID=536>. Numbers cited above reflect unpublished updated estimates based on the updated CalSIM 1.7 model.

¹⁰ *Private Health Insurance Coverage: Expert Views on Approaches to Encourage Voluntary Enrollment*, General Accounting Office, February 25, 2011. Accessed at: <http://www.gao.gov/new.items/d11392r.pdf>

How Would Eliminating the Individual Mandate Affect Health Coverage and Premium Costs? RAND Health, 2012. Accessed at: http://www.rand.org/content/dam/rand/pubs/research_briefs/2012/RAND_RB9646.pdf

¹¹ Percent change in table may appear inaccurate due to rounding. Medi-Cal base enrollment number is 1,154,000, base enrollment without mandate is 1,136,000, and the decrease in enrollment is 2%.



MEMORANDUM

DATE	July 31, 2012
TO	Dental Board of California
FROM	Dental Board of California - Workforce Subcommittee Bruce Witcher, DDS and Rebecca Downing, Public Member
SUBJECT	Agenda Item 13: Subcommittee Report on the Dental Board of California (DBC) Workforce Data Collection – Cultural and Linguistic Competency Survey (AB 269) and Office of Statewide Health Planning and Development (OSHPD) Healthcare Workforce Clearinghouse Project (SB 139)

Project: The Dental Board (DBC) may have a role in assisting the Legislature or other entities to determine the capacity of the dental workforce to deliver care to Californians, especially those who will become eligible for Medi-Cal under the Affordable Care Act which will expand coverage up to 133% of the poverty line in 2014. In this context, the Subcommittee was tasked to investigate the DBC’s activities with respect to collecting and reporting work force data.

Background: In the DBC’s Sunset Review Background Paper, the Senate Business & Professions Committee indicated that the DBC should be looking at workforce issues and possibly be acting as an information source for the Committee and the Legislature on dental work force issues. In addition, the DBC’s strategic plan includes a reference to addressing access to care, although the DBC has not adopted a goal or objective in the present strategic plan.

Scope of this Project:

- Review DBC efforts to gather workforce data; and
- Bring a recommendation to the DBC.

DBC’s Workforce Data Activities

The DBC has been collecting workforce data pursuant AB 269 (Eng) since January 1, 2009. The purpose of the survey is to determine the number of dentists and licensed or registered dental auxiliaries, and their cultural and linguistic competencies. See Appendix 1 for a summary of the data collected. Appendix 1 includes a comparison to

the demographic surveys utilized by the Board of Registered Nursing as a reference point. This DBC workforce survey project is ongoing.

In addition, DBC is a participant in the California Office of Statewide Health Planning and Development (OSHPD) project to create a health care workforce clearinghouse in accordance with SB 139. The clearinghouse will be responsible for the collection, analysis, and distribution of information on the educational and employment trends for health care occupations in California. The status of this project is that the DBC, along with six other DCA healing arts boards, is participating in the Clearinghouse Database design phase of the project (data collection). An MOU was entered into between the DBC and OSHPD in December 2011 and data is being collected.

The data included in the OSHPD project is fairly comprehensive and will allow OSHPD to deliver a report to the Legislature that addresses employment trends, supply and demand for health care workers, gaps in the educational pipeline, and recommendations for state policy needed producing workers in specific occupations and geographic areas to address issues of workforce shortage and distribution.

Attached as Appendix 2 to this report is a summary of the data to be collected and the annual report OSHPD will provide to the Legislature.

Recommendation: Given the SB 269 survey that is ongoing for new and renewing licentiates, and the DBC's participation in the of the OSHPD clearinghouse project, the Subcommittee does not believe it would be beneficial to institute any new data collection activities at this time. Given the breadth of the OSHPD project in particular, and its very specific goal of providing workforce data to the Legislature, any new surveys or other data collections by the DBC may be redundant and not cost-effective. The Subcommittee recommends that the Board receive regular updates on the OSHPD project at future meetings.

Acknowledgment: Most of the information for this report was provided by Karen Fischer of the DBC staff.

Appendix 1 to Subcommittee on Workforce Report – Comparison of BRN and DBC Workforce Surveys

	School Report	Survey of Licentiates
Board of Registered Nursing	Annual School Report (# of programs, admission spaces, applications and acceptance rates, enrollment, student completion, retention and attrition, faculty census	Demographics, education, employment (including job titles, work settings, earnings, benefits, job satisfaction), future plans of working licensees, licensees residing outside CA or not practicing
Dental Board (AB 269)	DBC does not presently survey dental schools	Employment Status (including full/part time, hours, retired, etc), primary and secondary practice location (by zip code and number of hours worked at that location), postgraduate training, specialty practice and certifications, ethnicity and non-english language fluency

Appendix 2 to Subcommittee on Workforce Report – Summary of OSHPD Clearinghouse Data Collection and Legislative Report *

OSHPD will be working with the Employment Development Department's Labor Market Information Division, state licensing boards, and state higher education entities to collect data related to the healthcare professions.

OSHPD posts interactive reports on their web site, however these do not include dental data. OSHPD reports should ultimately provide the following information related to dental practice:

- Number of healthcare providers by county/statewide
- Number of healthcare providers by gender
- Number of healthcare providers by race/ethnicity
- Number of healthcare providers by age distribution
- Number of healthcare providers by language spoken

Demand for healthcare providers will be assessed through the following surveys:

- California Occupational Employment Projections
- Demand for Health Occupations by Industry

Education Information on Healthcare Providers that will be available:

- Colleges and Universities that are providing health education programs in CA
- Number of students enrolled in health education programs
- Number of students graduated from health educational program

OSHPD has developed Fact Sheets on Physicians and Surgeons (MDs) and Registered Nurses. These will become available for other health occupations as part of future releases.

After the data is collected, OSHPD will prepare an annual report to the Legislature that does all of the following:

- Identifies education and employment trends in the health care profession.
- Reports on the current supply and demand for health care workers in California and gaps in the educational pipeline producing workers in specific occupations and geographic areas.
- Recommends state policy needed to address issues of workforce shortage and distribution.

* Information provided by Alex Chin, OSHPD Workforce Clearinghouse Project



MEMORANDUM

DATE	August 6, 2012
TO	Dental Board of California
FROM	Bruce Witcher, DDS, Board President Dental Board of California
SUBJECT	Agenda Item 14: Update Regarding Dental Board of California's Strategic Plan

The end of 2012 is quickly approaching, which means that it is time to review and revise the Board's two-year Strategic Plan (Plan). The Board's current Plan was developed in 2010 in preparation for the Legislature's sunset review process. The Department's SOLID Training staff facilitated a four hour session over the course of two Board meetings. The current Board members participated in the process, except for Mr. Afriat and Dr. Morrow who had not yet been appointed to Board.

Dr. Witcher and staff have been reviewing options on how to proceed with updating the Plan. The DBC managers and SOLID's manager have participated in the discussions, and there is agreement that using a facilitator is beneficial to developing Board goals and objectives for the future. The Department's SOLID Training staff has changed since the Board's last plan development. The new group is more experienced in strategic plan development and eager to assist us.

Staff recommends that the Board hold a one day workshop in Sacramento to develop its Plan. The workshop participants would be Board and Council members along with DBC managers, and would be a public meeting that could be webcast if scheduling permits.

The managers acknowledge that they did not actively participate in the prior strategic planning session. Therefore they have requested that SOLID provide training to them about the strategic planning process, prior to the one day workshop to develop a revised plan. The purpose of this training would be to provide the managers with a better understanding of how goals and objectives are developed during strategic planning; this would provide staff with the opportunity to participate in the Board workshop fully prepared and ready to provide recommended goals and objectives for the future.

Additional information may be provided at the meeting.



MEMORANDUM

DATE	July 24, 2012
TO	Dental Board of California
FROM	Linda Byers, Administrative Assistant Dental Board of California
SUBJECT	Agenda Item 15: Future Board Meeting Dates

The Dental Board will need to set the 2013 meeting schedule in order for staff to negotiate contracts for future meeting space locations. A 2013 calendar is attached for your reference.

Pursuant to Business and Professions Code, Section 1607, the Board shall meet regularly once each year in San Francisco and Los Angeles and at such other times and places as the Board may designate, for the purpose of transacting its business.

Following are possible dates in 2013 to consider:

San Diego:

Feb 21-22
Feb 28-Mar 1

San Francisco:

May 9-10
May 16-17

Sacramento:

Aug 8-9
Aug 15-16
Aug 22-23

Los Angeles:

Nov 7-8
Nov 14-15

January

Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21 M L King Day	22	23	24	25	26
27	28	29	30	31		

March

Sun	Mon	Tue	Wed	Thu	Fri	Sat
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16 ADEA → Seattle
17 ADEA → Seattle	18	19	20	21	22	23
24	25	26	27	28	29	30
31 Easter						

February

Sun	Mon	Tue	Wed	Thu	Fri	Sat
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18 President Day	19	20	21	22	23
24	25	26	27	28		

April

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1	2	3	4	5	6
7	8	9	10	11 CDA → Anaheim	12	13
14	15	16	17	18	19	20
21 AADB → Chicago	22	23	24	25	26	27
28	29	30				

2013

May

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
5	6	7	8	9	10	11
12 Mothers Day	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27 Memorial Day	28	29	30	31	

July

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

2013

June

Sun	Mon	Tue	Wed	Thu	Fri	Sat
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16 Father's Day	17	18	19	20	21	22
23	24	25	26	27	28	29
30						

August

Sun	Mon	Tue	Wed	Thu	Fri	Sat
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

2013

September

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2 Labor Day	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

November

Sun	Mon	Tue	Wed	Thu	Fri	Sat
					1 ADA → Delegate →	2
3 ADA →	4	5	6	7	8	9
10	11 Veterans Day	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28 Thanks-giving	29	30

2013

October

Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31 ADA → New Orleans		

December

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25 Christmas	26	27	28
29	30	31				

2013



MEMORANDUM

DATE	July 31, 2012
TO	Dental Board of California
FROM	Nellie Forgét, Program Coordinator Elective Facial Cosmetic Surgery (EFCS) Permit Program
SUBJECT	Agenda Item 16: Report on the July 11, 2012 Meeting of the Elective Facial Cosmetic Surgery Permit Credentialing Committee; and Discussion and Possible Action to Accept Committee Recommendations for Issuance of Permits.

CURRENT UPDATE:

The Elective Facial Cosmetic Surgery (EFCS) Permit Credentialing Committee met on July 11, 2012 by teleconference in seven (7) locations, including Sacramento, Poway, Redlands, Rancho Mirage, Irvine, Paso Robles, and San Diego.

The Committee welcomed Dr. Bruce Witcher as the new EFCS Permit Credentialing Committee Board Liaison who recently replaced Dr. Suzanne McCormick.

In closed session, the Credentialing Committee reviewed one (1) application. According to statute, the Committee shall make a recommendation to the Dental Board on whether to issue or not issue a permit to the applicant. The permit may be unqualified, entitling the permit holder to perform any facial cosmetic surgical procedure authorized by the statute, or it may contain limitations if the Credentialing Committee is not satisfied that the applicant has the training or competence to perform certain classes of procedures, or if the applicant has not requested to be permitted for all procedures authorized in statute.

The Committee's recommendation to the Board is as follows:

Applicant: Dr. Monty Wilson – Requested unlimited privileges for Category I (cosmetic contouring of the osteocartilaginous facial structure, which may include, but not limited to, rhinoplasty and otoplasty) and Category II (cosmetic soft tissue contouring or rejuvenation, which may include, but not limited to, facelift, blepharoplasty, facial skin resurfacing, or lip augmentation).

The Credentialing Committee recommends the Board issue a permit for unlimited Category I (cosmetic contouring of the osteocartilaginous facial structure, which may include, but not limited to, rhinoplasty and otoplasty) and Category II (cosmetic soft tissue contouring or rejuvenation, which may include, but not limited to, facelift, blepharoplasty, facial skin resurfacing, or lip augmentation) procedures.

Action requested:

- 1. Staff requests a motion from the Board to accept the EFCS permit Credentialing Committee Report.**
- 2. Staff requests a motion to issue Dr. Monty C. Wilson, DDS as EFCS Permit in Category I and Category II procedures.**



MEMORANDUM

DATE	July 30, 2012
TO	Dental Board of California
FROM	Linda Byers, Administrative Assistant Dental Board of California
SUBJECT	Agenda Items 17-18, 20-22: Committee Reports

The Committee Chairs will give reports.



MEMORANDUM

DATE	July 20, 2012
TO	Dental Board of California
FROM	Linda Byers, Administrative Assistant Dental Board of California
SUBJECT	Agenda Item 19: Update on Portfolio Licensure Examination for Dentistry (<i>AB 1524, Stats 2010 ch 446</i>)

Dr. Casagrande will provide an update.