

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

NOTICE OF PROPOSED REGULATORY ACTION

NOTICE IS HEREBY GIVEN that Dental Board of California (Board) is proposing to take the rulemaking action described below under the heading Informative Digest/Policy Statement Overview. Any person interested may present statements or arguments relevant to the action proposed in writing. Written comments, including those sent by mail, facsimile, or e-mail to the addresses listed under Contact Person in this Notice, must be received by the Board at its office by **5:00 p.m., Tuesday, February 15, 2022.**

PUBLIC HEARING

The Board has not scheduled a public hearing on this proposed action. The Board will, however, hold a hearing if it receives a written request for a public hearing from any interested person, or his or her authorized representative, no later than 15 days prior to the close of the written comment period.

AVAILABILITY OF CHANGED OR MODIFIED TEXT

The Board may, after considering all timely and relevant comments, adopt the proposed regulations substantially as described in this notice, or may modify the proposed regulations if such modifications are sufficiently related to the original text. With the exception of technical or grammatical changes, the full text of any modified proposal will be available for 15 days prior to its adoption from the person designated in this Notice as the contact person and will be mailed to those persons who submit written or oral testimony related to this proposal or who have requested notification of any changes to the proposal.

AUTHORITY AND REFERENCE:

Pursuant to the authority vested by Business and Professions Code (BPC) sections 1614, 1634.2, 1635.5, 1724, 1724.5, and 1646.2, and to implement, interpret or make specific BPC sections 27, 108, 1611.5, 1632, 1634.1, 1646.1, 1646.2, 1646.3, 1646.4, 1646.6, 1646.9, 1647.2, 1647.3, 1646.5, 1647.6, 1646.7, 1646.9, 1647.2, 1647.3, 1647.5, 1647.7, 1647.8, 1647.18, 1647.19, 1647.20, 1647.22, 1647.23, 1647.24, 1647.30, 1647.31, 1647.32, 1647.33, 1682, 1715, 1716.1, 1718.3, 1724, 1724.5, 1750.4, 1750.5, 1752.4, and 2827, the Board is considering changes to Division 10 of Title 16 of the California Code of Regulations as follows:

INFORMATIVE DIGEST/POLICY STATEMENT OVERVIEW

The Dental Board of California (Board) licenses and regulates dentists, registered dental assistants (RDA), and registered dental assistants in extended functions (RDAEF). In addition, the Board is responsible for setting the duties and functions of approximately 50,000 unlicensed dental assistants. The Board's highest priority is the protection of the public when exercising its licensing, regulatory, and disciplinary functions. The Board assures the initial and continued competence of its licensees through licensure, investigation of complaints against its licensees, and discipline of those found in violation of the Dental Practice Act, monitoring licensees whose licenses have been placed on probation, and managing the Diversion Program for licensees whose practice may be impaired due to abuse of dangerous drugs or alcohol.

The Dental Practice Act ("Act") governs the use of general anesthesia, conscious sedation, and oral conscious sedation for pediatric and adult patients. SB 501 (Glazer, Chapter 929, Stats. of 2018), beginning January 1, 2022, establishes new provisions governing the use of deep sedation and general anesthesia for dental patients. (Bus. & Prof. Code, §§ 1646 et seq.) As enacted, SB 501 (Glazer, Chapter 929, Stats. of 2018), beginning January 1, 2022, establishes new provisions in the Act governing the use of deep sedation and general anesthesia, moderate sedation, and pediatric minimal sedation for dental patients in Articles 2.75 (commencing with Section 1646 of the Business and Professions Code (BPC)), Article 2.84 (commencing with Section 1647 of the BPC), and Article 2.87 (commencing with Section 1647.30 of the BPC) of the Act. Among other requirements, the Act will require dentists to possess either a current license in good standing and a general anesthesia permit, or other specified credentials in order to administer or order the administration of deep sedation or general anesthesia on an outpatient basis. (Bus. & Prof. Code, §§ 1646.1 and 1646.2.) The Act will also authorize a licensed physician and surgeon to administer deep sedation or general anesthesia if that physician and surgeon meets certain requirements, including holding a valid general anesthesia permit and a pediatric endorsement, if applicable. (Bus. & Prof. Code, § 1646.9.)

The Act will require dentists to possess a pediatric endorsement of their general anesthesia permit to administer or order the administration of deep sedation or general anesthesia to patients under 7 years of age and will require dentists to be present in the dental office during the ordering and administration of general anesthesia or deep sedation. (Bus. & Prof. Code, § 1646.1, subd. (b).) The Act requires the presence of the operating dentist and at least 2 additional personnel for patients under 13 years of age for procedures involving deep sedation or general anesthesia and requires that certain personnel be present throughout the procedure and to maintain current certification in pediatric life support and airway management, as specified. (Bus. & Prof. Code, § 1646.1, subd. (d).) Dentists applying for a pediatric endorsement for the general anesthesia permit will have to provide proof of successful completion of an accredited or equivalent residency training program, and a certain number of cases of deep sedation

or general anesthesia for patients under 7 years of age, along with current certification in specific life support training. (Bus. & Prof. Code, § 1646.2, subd. (c).)

Presently, the Act prohibits a dentist from administering or ordering the administration of conscious sedation, as defined, on an outpatient basis unless the dentist meets certain licensing criteria. (Bus. & Prof. Code, § 1647.19.) Effective January 1, 2022, changes to the Act under SB 501 will repeal existing provisions relating to the use of conscious sedation. The term “conscious sedation” will be replaced with “moderate sedation,” meaning a drug-induced depression of consciousness during which a patient responds purposefully to verbal commands and meets other criteria. (Bus. & Prof. Code, § 1647.1.) The Act will authorize dentists to administer or order the administration of moderate sedation on an outpatient basis to a dental patient if the dentist meets specified licensing criteria and has applied to the Board, submitted an application fee, and shown successful completion of training in moderate sedation. (Bus. & Prof. Code, § 1647.2.)

The Act will require a dentist who orders the administration of moderate sedation to be physically present in the treatment facility while the patient is sedated and would require the presence of additional specified personnel for sedation of patients 13 years of age or younger. (Bus. & Prof. Code, § 1647.2, subd. (c)(1).) Training in the administration of moderate sedation will be acceptable if it consists of a certain number of instructional hours and completion of cases and complies with certain guidelines for teaching pain control and sedation. (Bus. & Prof. Code, § 1647.3, subd. (c).) The Act will require a dentist to obtain a pediatric endorsement on the moderate sedation permit prior to administering moderate sedation to a patient under 13 years of age, except as specified, and will require a dentist to obtain specified training and apply on a form prescribed by the Board to receive a pediatric endorsement. (Bus. & Prof. Code, § 1647.3, subd. (d).)

The Act also requires, as a condition of renewal, under amendments enacted by SB 501 (Chapter 929, Stats. of 2018), and effective January 1, 2022, that specified permit holders establish continuing competency to administer general anesthesia, deep sedation (“anesthesia”) or moderate sedation (“sedation”) by completing 20 cases of anesthesia or sedation for specified pediatric populations within the 24-month period immediately preceding each permit renewal period (Bus. & Prof. Code, §§ 1646.2, 1647.3.) Existing regulations do not specify how the Board will determine compliance with these new requirements. This proposal would specify these compliance requirements for permit holders who seek to administer anesthesia and sedation as provided under the Act.

The Act will establish new requirements for dentists administering or ordering the administration of minimal sedation, defined as a drug-induced state during which patients respond normally to verbal commands. (Bus. & Prof. Code, § 1647.30.) Dentists may administer or order the administration of minimal sedation on pediatric patients under 13 years of age if the dentist possesses specified licensing credentials

and follows certain procedures. (Bus. & Prof. Code, 1647.31.) Any dentist who desires to administer or order the administration of minimal sedation must apply on a form prescribed by the Board and submit an application fee. (Bus. & Prof. Code, § 1647.32.)

In addition to the foregoing changes, SB 501 amended, added to, and repealed portions of Business and Professions Code sections 1601.8, 1646-1646.10, 1647-1647.9.5, 1682, 1724, and 1750.5. The Board needs to make significant regulatory updates to the current anesthesia and sedation permit program regulations to implement the foregoing statutory changes and ensure minimum standards for the professions are met, including adding new forms, permit requirements, and fees, making revisions to renewal requirements, onsite inspection and evaluation standards, facility and equipment standards, Board-approved educational requirements for dentists and dental sedation assistants; and, repealing oral conscious sedation references and case documentation requirements.

In this rulemaking proposal, the Board proposes to:

- Adopt section 1017.1 and a new title “Continued Competency Requirements for Renewal of Permits with Pediatric Endorsements,” to replace a prior repealed regulation entitled “Processing Times.” This change would prescribe the requirements to maintain continued competency in the administration of deep sedation, general anesthesia, and moderate sedation to patients under the age of 13 by prescribing the documentation or written confirmation general anesthesia and moderate sedation permit holders with pediatric endorsements must provide the Board at license renewal.
- Amend section 1021 to (1) provide grammatical changes and other non-substantive changes to add references to the “Business and Professions Code” or the “Code” to existing subsections (a)-(p); (2) strike references to “conscious sedation” and replace with references to “moderate sedation” in subsections (q), (s), and (u) (re-lettered from current (t)); and (3) establish fees for the following:
 - (q) an application for general anesthesia (dentist or physician) or moderate sedation permit (\$524),
 - (s) application for pediatric minimal sedation permit (\$459),
 - (t) pediatric minimal sedation permit renewal (\$182),
 - (ae) application for adult oral conscious sedation certificate (\$459),
 - (af) adult oral conscious sedation certificate renewal (\$168),
 - (ag) application for pediatric endorsement for general anesthesia permit (dentist or physician) (\$532); and,
 - (ah) application for pediatric endorsement for moderate sedation permit (\$532).
- Amend section 1043 to add the words “deep sedation” wherever the words “general anesthesia” are used, and strike the word “conscious” wherever it is used and replace it with “moderate” before the word “sedation” in the definitions

section applicable to deep sedation and moderate sedation. This proposal would also capitalize the “C” in “code” throughout this section.

- Amend section 1043.1 to establish permit application requirements for general anesthesia permits (which will include deep sedation) and moderate sedation permits and the requirements to pay a fee to process those applications as set forth in Section 1021. The regulation will incorporate by reference the “Application for General Anesthesia Permit” Form GAP-1 (New 05/2021) and “Application for Moderate Sedation Permit” Form MSP-1 (New 05/2021). The regulation will incorporate by reference a “Certification of Moderate Sedation Training” Form MSP-2 (New 05/2021) which must accompany the “Application for Moderate Sedation Permit.” The regulation will also require applicants who wish to administer or order the administration of deep sedation or general anesthesia to patients under seven years of age to separately apply for a pediatric endorsement to their permit and receive approval from the Board. The regulation will require applicants who wish to administer or order the administration of moderate sedation to patients under 13 years of age to separately apply for a pediatric endorsement to their permit and receive approval from the Board.
- Amend section 1043.2 to establish the number and qualifications of evaluators required to evaluate applicants for the issuance or renewal of general anesthesia and moderate sedation permits. Proposed amendments to section 1043.2(a) would require two or more persons for each evaluation team for the first evaluation or in the event an applicant has failed an evaluation; all subsequent evaluations would only require one evaluator. Proposed amendments to subsections (b) and (c) would add the words “deep sedation” wherever the words “general anesthesia” are used, and strike the word “conscious” wherever it is used and replace it with “moderate” before the word “sedation.” This proposal would also capitalize the “C” in “code” in subsection (b). In subsection (d), this proposal would require evaluators to possess a current, active, and unrestricted license from the Board or, the Medical Board of California for applicants qualifying under Section 1646.9 of the Code. For purposes of this section, “unrestricted” would mean not subject to any disciplinary action such as revocation, suspension, or probation.
- Amend section 1043.3 to revise facilities, equipment, records, and drug requirements for dental offices administering general anesthesia, deep sedation, or moderate sedation to adult and pediatric patients. This proposal would add the words “deep sedation” wherever the words “general anesthesia” are used and strike the word “conscious” wherever it is used and replace it with “moderate” before the word “sedation.”

Subsection (a): The office facilities and equipment maintenance requirement to be in “good operating condition” will be struck and replaced with a requirement

that equipment be maintained, tested and inspected according to manufacturer specifications. For pediatric patients, equipment, medication and resuscitative capabilities would be required to be appropriately sized for use on pediatric patients.

Subsection (a)(7)(K): Existing requirements will be struck and replaced with a requirement that patients receiving moderate sedation, deep sedation or general anesthesia shall have ventilation continuously monitored during the procedure by at least two of three specified methods.

Subsection (b)(3): This new subsection would require that records include: the category of the provider (as defined in BPC 1680(z)(3)) responsible for sedation oversight, the category of the provider delivering sedation, the category of the provider monitoring the patient during sedation, and whether the person supervising the sedation performed one or more of the procedures.

Subsection (b)(4): This proposal would revise the current requirements to include written consent of the patient's conservator, or the informed consent of a person authorized to give such consent for the patient pursuant to BPC section 1682(e).

- Amend section 1043.4 to add the words “deep sedation” wherever the words “general anesthesia” are used and strike the word “conscious” wherever it is used and replace it with “moderate” before the word “sedation”. This proposal would also capitalize the “C” in “code” wherever it occurs in this section.
- Amend section 1043.5, and 1043.7 to replace “conscious” with “moderate” as SB 501 eliminates the use of term “conscious.” This proposal would also capitalize the “C” in “code” wherever it occurs in section 1043.5.
- Amend section 1043.6 to prescribe the grades evaluators will be required to use to recommend to the Board for inspections and evaluations of applicants for the general anesthesia and moderate sedation permits, which would include: (1) “Passed Evaluation” (met all required components of the onsite inspection and evaluation), (2) “Conditional Approval” (for failing to have appropriate equipment, proper documentation of controlled substances, or proper recordkeeping and must submit written proof, as specified, of correcting the deficiencies within fifteen (15) days of receiving notice), (3) “Failed Simulated Emergency” (Permit holder failed one or more simulated emergency scenario(s) required for the on-site inspection and evaluation); or, (4) “Failed Evaluation”(Permit holder failed due to multiple deficient components required for the on-site inspection and evaluation or failed to comply with the conditions for issuance of a conditional approval as specified).

The proposal would delete references to appeal procedures to the full board after failing an evaluation and also the process for requesting an independent reevaluation upon payment of an additional evaluation fee.

This proposal would require applicants (who have failed two previous inspections) to successfully complete remedial education in a subject within the scope of the onsite inspection and evaluation as determined by the Board prior to being retested if a third onsite inspection and evaluation is granted or prior to the issuance of a new permit. The proposal would also make other technical changes to add a relevant cross-reference to Section 1646.9(d) (relating to physician and surgeon qualifications) and capitalize the “C” in Code wherever it appears in this section.

- Amend section 1043.8 to replace “conscious” with “moderate” and cross-reference section 1017 and 1017.1’s continuing competency requirements, and section 1021 for the required fees for the permits.
- Adopt section 1043.8.1 to establish the requirements for completed applications for pediatric endorsements to the general anesthesia and moderate sedation permits. The regulation will incorporate by reference the “Documentation of Deep Sedation and General Anesthesia or Moderate Sedation Cases for Pediatric Endorsement” Form PE-1 (New 05/2021). The section would require an applicant for a pediatric endorsement who seeks to use general anesthesia or moderate sedation in the treatment of pediatric patients under 13 years of age or seven years of age to submit to the Board information to document each of the 20 cases of deep sedation and general anesthesia or moderate sedation required by Sections 1646.2 and 1647.3 of the Code on Form PE-1.

This section would further authorize the Board to require, upon request by the Board in any investigation of the information provided on Form PE-1, that applicants also provide documentation or patient records for each deep sedation and general anesthesia or moderate sedation pediatric case listed on Form PE-1, including preoperative evaluation, medical history, monitoring of vital signs throughout the procedure, and condition at discharge.

Finally, this proposal would require applicants to submit legible copies of the information required by this section with pediatric patient identifying information redacted.

- Adopt Article 5.1 and title “Pediatric Minimal Sedation” to establish a new article for the regulations relating to the pediatric minimal sedation permit.
- Adopt section 1043.9 to establish definitions for Article 5.1 relating to the pediatric minimal sedation permit, including definitions for “another sedation permit”, “outpatient basis”, and “pediatric patient,” as specified.

- Adopt section 1043.9.1 to establish who must apply for the pediatric minimal sedation permit for the purposes of BPC section 1647.31 and 1647.32. The regulation will incorporate by reference the “Application for Pediatric Minimal Sedation Permit” PMSP-1 (New 05/2021) and the “Certification of Pediatric Minimal Sedation Training” Form PMSP-2 (New 05/2021) that must accompany the application and applicable fee as set by Section 1021. This proposal would create an exemption for a licensed dentist who desires to administer or order minimal sedation if they possess another sedation permit from the Board (as defined in section 1043.9). This section would also require that the office in which the pediatric minimal sedation is administered meet the facilities and equipment standards set forth in Section 1043.9.2.
- Adopt section 1043.9.2 to establish the facility, equipment (including ancillary equipment as specified), emergency cart or kit, emergency drugs, and records requirements applicable to facilities in which pediatric minimal sedation is administered to patients.
- Amend section 1044 to delete references to superseded articles and references to oral conscious sedation for minors, and clarify definitions applicable to “outpatient basis” (means “outpatient setting” as referenced in Health and Safety Code section 1248) in regulations in Article 5.5, for oral conscious sedation.
- Amend section 1044.1 to delete current references to current forms for applications for certificates for adult (OCS-1 (Rev. 01/05) or minor (OCS-3 Rev. 03/07) conscious sedation and establish and incorporate by reference the “Application for Use of Oral Conscious Sedation on Adult Patients” Form OCS-C (New 05/2021). This proposal would also remove references to requirements for dentists who possess only an adult oral conscious sedation permit and oral conscious sedation certificate for minor patients references. This proposal would also replace the word “conscious” with the word “moderate” before the words “sedation permit.”
- Amend section 1044.2 to make non-substantive, clarifying amendments including to remove an outdated reference to section 16147.12(b), add a reference to “of the Code” (short form reference for Business and Professions Code) and capitalize the “B” in the word “board.”
- Amend section 1044.3 to eliminate reference to the administration of and program coursework related to oral conscious sedation on minors since this is now replaced by pediatric minimal sedation. This section would further be amended to shorten a reference to the Business and Professions Code to “Code,” strike a reference to “conscious” sedation and replace it with “moderate” sedation, and strike a reference to “the American Academy of Pediatric Dentistry.”

- Repeal section 1044.4 relating to requirements for documentation of 10 cases of oral conscious sedation based on its reference to an outdated experience pathway for applicants administering oral conscious sedation.
- Amend section 1044.5 to revise facility, equipment, records, and drug requirements applicable to facilities in which oral conscious sedation is administered to patients. This proposal would add requirements for all equipment to be maintained, tested, and inspected according to the manufacturers' specifications. This proposal would add requirements for obtaining the patient's conservator, or the informed consent of a person authorized to give such consent for the patient and strike a reference to "the parent or legal guardian of the patient" (as this section no longer pertains to minors).
- Amend section 1070.8 to revise course requirements for the dental sedation assistant permit to include references to deep sedation, moderate sedation (and striking references to "conscious sedation") and adding a requirement that didactic instruction include resuscitation of pediatric patients. The proposal would also include minor, technical and grammatical changes to the text for consistency of use of terms throughout the Division.

ANTICIPATED BENEFITS OF PROPOSED REGULATIONS:

This regulatory proposal will afford maximum protection to pediatric patients who receive sedation and anesthesia services in California. The regulations will create an orderly process for applicants to obtain pediatric endorsements to the general anesthesia permit and moderate sedation permits. The application process will ensure that the Board grants permits and endorsements to only those applicants who are qualified to provide sedation and anesthesia services. The renewal process will ensure permit holders possess continued competency in the administration of deep sedation or general anesthesia, by requiring general anesthesia permit holders to submit documentation of completion of twenty (20) cases of general anesthesia to pediatric patients in order to maintain continued competency. This proposal will also require moderate sedation permit holders to submit documentation of completion of twenty (20) cases of moderate sedation to pediatric patients in order to maintain continued competency. Pediatric patients are our States most vulnerable patients and these requirements will ensure dentists possess competency at the time of renewal.

The adoption of the forms incorporated by reference in this proposal will assist staff in ensuring an applicant meets the training requirements for the administration of general anesthesia, deep sedation, moderate sedation, pediatric minimal sedation, oral conscious sedation for adults and training requirements applicable to pediatric endorsements.

The amendments to the regulations governing onsite inspections and evaluations will ensure that evaluators are properly qualified and utilize appropriate standards. The regulations will provide clarity to regulated professionals about how these evaluations are graded and passing evaluations, and how to remedy areas in which they receive failing grades.

The fees established and amended in this proposal will ensure the Board has sufficient resources to process applications and ensure applicants meet legal requirements for permits and endorsements.

This proposal will also amend faculty and course requirements for dental sedation assistant permit courses including instruction requirements. These amendments will ensure those obtaining this permit will be properly trained in all categories of anesthesia and sedation established by SB 501, and will properly monitor patients during procedures.

DETERMINATION OF INCONSISTENCY/INCOMPATIBILITY WITH EXISTING REGULATION(S)

During the process of developing these regulations and amendments, the Board conducted a search of any similar regulations on this topic and concluded that these regulations are neither inconsistent nor incompatible with existing state regulations.

INCORPORATION BY REFERENCE

The following forms have been incorporated by reference:

1. "Application for General Anesthesia Permit" Form GAP-1 (New 05/2021)
2. "Application for Moderate Sedation Permit" Form MSP-1 (New 05/2021)
3. "Certification of Moderate Sedation Training" Form MSP-2 (New 05/2021)
4. "Documentation of Deep Sedation and General Anesthesia or Moderate Sedation Cases for Pediatric Endorsement" Form PE-1 (05/2021)
5. "Application for Pediatric Minimal Sedation Permit" PMSP-1 (New 05/2021)
6. "Certification of Pediatric Minimal Sedation Training" Form PMSP-2 (New 05/2021)
7. "Application for Use of Oral Conscious Sedation on Adult Patients" Form OCS-C (New 05/2021)

DISCLOSURES REGARDING PROPOSED ACTION

FISCAL IMPACT ESTIMATES:

Fiscal Impact on Public Agencies Including Costs or Savings to State Agencies or Costs/Savings in Federal Funding to the State:

The Board anticipates workload will be greatest in the first two years of implementation as existing and new applicants transition to the new permit types.

Permit application workload costs are estimated to range from approximately \$141,000 to \$447,000 per year and up to \$2.5 million over a ten-year period.

Permit application revenue is estimated to range from approximately \$141,000 to \$447,000 per year and up to \$2.5 million over a ten-year period.

Please see the Initial Statement of Reasons for further detail.

Cost or Savings in Federal Funding to the State: None

Nondiscretionary Costs/Savings to Local Agencies: None

Local Mandate: None

Cost to Any Local Agency or School District for Which Government Code Sections 17500 - 17630 Require Reimbursement: None

Business Impact:

The Board has made an initial determination that the proposed regulatory action would have no significant statewide adverse economic impact directly affecting business, including the ability of California businesses to compete with businesses in other states. This initial determination is based upon the following facts.

This regulation may have an economic impact on businesses, specifically, the Board's licensees, permitholders and applicants. The proposal would: (1) increase the fee for an application for the general anesthesia permit (for dentist and physician licensees) to \$524, (2) increase the fee for an application for a moderate sedation permit to \$524, (3) set a new fee for an application for pediatric minimal sedation permit at \$459, (4) set a new pediatric minimal sedation permit renewal fee at \$182, (5) increase the fee for an application for adult oral conscious sedation certificate to \$459, (6) set a new fee for the application for pediatric endorsement for general anesthesia permit at \$532; and, (7) set a new fee for the pediatric endorsement for moderate sedation permit at \$532. To the extent these applicants apply for such permits, or licensees opt to renew their licenses and permits, the proposed regulations will impact them.

Licensees who seek to administer general anesthesia and moderate sedation to pediatric patients may incur costs to provide the Board documentation showing

completion of required cases at the time of renewal. However, those costs are anticipated to be minimal considering the number of cases required to be documented.

There is no cost to California businesses except for those of dental offices in which deep sedation, general anesthesia, moderate sedation, pediatric minimal sedation, and oral conscious sedation for adult patients is administered. The cost includes application and renewal fees which are minimal in comparison with the income of such individuals. According to online data, the annual salary of a dentist who practices in California averages \$169,000 per year. In addition, these fees represent incremental increases compared with what is currently being charged by the Board for the same services (increases of \$24, \$91, \$532, and \$14).

Cost Impact on Representative Private Person or Business:

The Board has determined that the following individuals may be affected by the proposed changes to the Board's anesthesia and sedation permit program.

Applicants and existing permit holders of the general anesthesia, moderate sedation, pediatric minimal sedation, or oral conscious sedation for adult's permits, and pediatric endorsement for general anesthesia or moderate sedation permit holders that pay initial application and renewal fees.

Licensees who seek to administer general anesthesia and moderate sedation to pediatric patients may incur costs to provide the Board documentation showing completion of required cases at the time of renewal. However, those costs are anticipated to be minimal considering the number of cases required to be documented.

The proposed regulations are anticipated to result in an economic impact to permits holders ranging from approximately \$141,000 to \$447,000 per year and up to \$2.5 million over a ten-year period.

Please see the Initial Statement of Reasons for further detail.

Effect on Housing Costs: None

EFFECT ON SMALL BUSINESS:

The Board has determined that the proposed regulations would not affect small businesses. Although small businesses owned by licensees of the Board and small businesses that employ licensees of the Board may be impacted, the Board estimates that the fiscal impact would be minor and absorbable as described in the above Business Impact statement. The Board does not maintain data relating to the number or percentage of licensees who own a small business; therefore, the number or percentage of small businesses that may be impacted cannot be predicted.

RESULTS OF ECONOMIC IMPACT ASSESSMENT/ANALYSIS:

Impact on Jobs/Businesses:

The Board has made the initial determination that this regulatory proposal will not have a significant impact on the creation of jobs or the elimination of jobs or existing businesses or the expansion of businesses in the State of California because it would only impact individual applicants who are applying for the permits and/or endorsements. Applicants and existing permit holders of the general anesthesia, moderate sedation, pediatric minimal sedation, or oral conscious sedation for adult's permits, and pediatric endorsement for general anesthesia or moderate sedation permit holders will pay initial application and renewal fees. However, these fees are minimal in comparison to the income of such individuals and represent incremental increases compared with what is currently being charged by the Board for the same services (increases of \$24, \$91, \$532, and \$14). The Board does not anticipate that this proposal will create or eliminate existing businesses in which anesthesia or sedation is administered as the cases required to document competency for the renewal of the general anesthesia and moderate sedation permits are minimal.

Benefits of Regulation:

The Board has determined that this regulatory proposal will have the following benefits to health and welfare of California residents:

This regulatory proposal affects the health and welfare of California residents because the proposed regulation will further increase the priority of the Board which is the protection of the public. The adoption of the new permits and endorsements ensures that individual applicants will be current and up to date with the latest in sedation and anesthesia process/methods to ensure that they can perform procedures on consumers consistent with minimum standards for safety and care. The proposal will also benefit the health and welfare of California residents by verifying continued competency is maintained by general anesthesia and moderate sedation permit holders.

This regulatory proposal does not affect worker safety because the regulations pertain to the Board's adoption of new anesthesia/sedation permits and endorsements and would only impact individual applicants who are applying for the permits and/or endorsements and is not related to worker safety.

This regulatory proposal does not affect the state's environment because the regulations pertain to the Board's adoption of new anesthesia/sedation permits and endorsements, and this proposal is not relevant to the State's environment.

INITIAL STATEMENT OF REASONS AND INFORMATION:

The Board has prepared an initial statement of the reasons for the proposed action and has available all the information upon which the proposal is based, which may be obtained from the contact person identified in this notice.

TEXT OF PROPOSAL:

Copies of the exact language of the proposed regulations, and any document incorporated by reference, and of the initial statement of reasons, and all of the information upon which the proposal is based, may be obtained at the hearing or prior to the hearing upon request from the Board at 2005 Evergreen Street, Suite 1550, Sacramento, California 95815 or by accessing the Board's website at https://www.dbc.ca.gov/about_us/lawsregs/proposed_regulations.shtml.

AVAILABILITY AND LOCATION OF THE FINAL STATEMENT OF REASONS AND RULEMAKING FILE

All the information upon which the proposed regulations are based is contained in the rulemaking file which is available for public inspection by contacting the person named below.

You may obtain a copy of the final statement of reasons once it has been prepared, by making a written request to the contact person named below or by accessing the website listed below.

CONSIDERATION OF ALTERNATIVES:

The Board must determine that no reasonable alternative it considered to the regulation or that has otherwise been identified and brought to its attention would be more effective in carrying out the purpose for which the action is proposed, would be as effective and less burdensome to affected private persons than the proposal described in this Notice, or would be more cost effective to affected private persons and equally effective in implementing the statutory policy or other provision of law.

Any interested person may present statements or arguments orally or in writing relevant to the above determinations at the above-mentioned hearing.

CONTACT PERSON

Inquiries or comments concerning the proposed rulemaking action may be addressed to:

Name: Jessica Olney, Staff Services Manager I
Dental Board of California
Address: 2005 Evergreen Street, Suite 1550
Sacramento, CA 95815
Telephone No.: (916) 263-2373
Fax No.: (916) 263-2140
E-Mail Address: Jessica.Olney@dca.ca.gov

The backup contact person is:

Name: Sarah Wallace, Interim Executive Officer
Dental Board of California
Address: 2005 Evergreen Street, Suite 1550
Sacramento, CA 95815
Telephone No.: (916) 263-2187
Fax No.: (916) 263-2140
E-Mail Address: Sarah.Wallace@dca.ca.gov

WEBSITE ACCESS

Materials regarding this proposal can be found at the Board's Website at https://www.dbc.ca.gov/about_us/lawsregs/proposed_regulations.shtml