

***BOARD OF DENTAL
EXAMINERS MEETING
ANCHORAGE, AK***

550 W 7th Ave, Anchorage, AK 99501

Atwood Building Ste. 1550

December 7, 2018

8:30 A.M.

Item 1

- Call to Order/Roll Call

BOARD ROSTER

SEPTEMBER 28, 2018

PAUL SILVEIRA, DMD – BOARD PRESIDENT

GAIL WALDEN, RDH, BSDH, BOARD SECRETARY

DAVID NEILSON, DDS

PAULA ROSS, RDH

THOMAS KOVALESKI, DDS

STEVEN SCHELLER, DDS

MICHAEL MORIARTY, DDS

DOMINC WENZELL, DDS

ROBIN WAHTO, PUBLIC MEMBER

2019 STATE HOLIDAY CALENDAR

JANUARY

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State Holidays

Date	Holiday
01/01	New Year's Day
01/21	MLK Jr.'s Birthday
02/18	Presidents' Day
03/25	Seward's Day
05/27	Memorial Day
07/04	Independence Day

Holiday

State calendar maintained by the Division of Finance, Department of Administration
<http://doa.alaska.gov/calendars.html>

Biweekly employees please refer to appropriate collective bargaining unit agreement for more information regarding holidays.

State Holidays

Date	Holiday
09/02	Labor Day
10/18	Alaska Day
11/11	Veterans' Day
11/28	Thanksgiving Day
12/25	Christmas Day

Revised 08/28/2018



STATE OF ALASKA

DEPARTMENT OF COMMERCE, COMMUNITY, AND ECONOMIC DEVELOPMENT

DIVISION OF OCCUPATIONAL LICENSING BOARD OF DENTAL EXAMINERS

MISSION STATEMENT

To protect the health, safety, and welfare of Alaskans by ensuring that practitioners possess competency, ethical standards, and integrity necessary to offer or deliver quality services to consumers.

VISION STATEMENT

To ensure that all Alaskans receive the best possible dental care.

EXECUTIVE SESSION MOTION

Sec. 44.62.310. government meetings public.

(c) The following subject may be considered in an executive session:

- (1) matters, the immediate knowledge of which would clearly have an adverse effect upon the finances of the public entity;
- (2) subjects that tend to prejudice the reputation and character of any person, provided the person may request a public discussion;
- (3) matters which by law, municipal charter, or ordinance are required to be confidential;
- (4) matters involving consideration of government records that by law are not subject to public disclosure.

MOTION WORDING:

In accordance with the provisions of Alaska Statute 44.62.310 (c) (1) (2) (3) or (4) [*select appropriate paragraph number above*], I move to go into executive session for the purpose of discussing:

Board staff to remain during the session, *OR* Board only to remain during session.

Off the record at _____.

Example: 1

In accordance with the provisions of AS 44.62.310 (c)(2), I move to go into executive session for the purpose of discussing the license application of (name). Board staff (names) to remain during the session.

Example: 2

In accordance with the provisions of AS 44.62.310(c)(3), I move to go into executive session for the purpose of discussing investigative matters. Board staff (names) to remain during the session.

Statutes and Regulations **Dentists and** **Dental Hygienists**

September 2018



DEPARTMENT OF COMMERCE, COMMUNITY,
AND ECONOMIC DEVELOPMENT

***DIVISION OF CORPORATIONS, BUSINESS
AND PROFESSIONAL LICENSING***

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CHAPTER 32.
DENTAL HYGIENISTS AND ASSISTANTS.

Article

- 1. Examination and Licensing of Dental Hygienists**
(§ 08.32.010—§ 08.32.095)
- 2. Regulation of Dental Hygienists**
(§ 08.32.110—§ 08.32.180)
- 3. General Provisions** (§ 08.32.185—§ 08.32.190)

ARTICLE 1.
EXAMINATION AND LICENSING OF DENTAL HYGIENISTS.

Section.

- 10. License required**
- 14. Qualifications for license**
- 30. Licensure by credentials**
- 70. Licensing of dental hygienists**
- 71. Renewal of license**
- 81. Lapse and reinstatement of license**
- 85. Restorative function license endorsement**
- 95. Exemption from license requirement**

Sec. 08.32.010. License required. Except as provided in AS 08.32.095, a person may not practice, offer or attempt to practice, or advertise or announce as being prepared or qualified to practice dental hygiene without a license.

Sec. 08.32.014. Qualifications for license. (a) An applicant for a license to practice dental hygiene shall

(1) provide evidence to the board that the applicant

(A) has successfully completed an academic program in dental hygiene of at least two years duration that, at the time of graduation, is accredited by the Commission on Dental Accreditation of the American Dental Association and is approved by the board;

(B) has passed a written theory examination of the American Dental Association Joint Commission on National Dental Examinations or an equivalent examination approved by the board;

(C) has successfully passed a state or regional dental hygiene clinical examination approved by the board;

(D) has not had a license to practice dental hygiene revoked, suspended, or voluntarily surrendered in this state or another state;

(E) is not the subject of an adverse decision based on a complaint, investigation, review procedure, or other disciplinary proceeding within the five years immediately preceding application or of an unresolved complaint, investigation, review procedure, or other disciplinary proceeding undertaken by a state, territorial, local, or federal dental licensing jurisdiction;

(F) is not the subject of an unresolved or adverse decision based on a complaint, investigation, review procedure, or other disciplinary proceeding undertaken by a state, territorial, local, or federal dental licensing jurisdiction or law enforcement agency that relates to criminal or fraudulent activity, dental malpractice, or negligent dental care and that adversely reflects on the applicant's ability or competence to practice as a dental hygienist or on the safety or well-being of patients;

(G) is not the subject of an adverse report from the National Practitioner Data Bank or the American Association of Dental Boards Clearinghouse for Board Actions that relates to criminal or fraudulent activity or dental malpractice;

(H) is not impaired to an extent that affects the applicant's ability to practice as a dental hygienist;

(I) has not been convicted of a crime that adversely reflects on the applicant's ability or competency to practice as a dental hygienist or that jeopardizes the safety or well-being of a patient; and

(2) meet the other qualifications for a license established by the board by regulation.

(b) An applicant for a license to practice dental hygiene may be interviewed in person by the board or a designee of the board. The interview must be recorded. If the application is denied on the basis of the interview, the denial shall be stated in writing, with the reasons for it, and the record shall be preserved.

Sec. 08.32.020. Examination required. *[Repealed, Sec. 40 ch 53 SLA 2012].*

Sec. 08.32.030. Licensure by credentials. The board may provide for the licensing without examination of a dental hygienist who

(1) meets the criteria of AS 08.32.014;

(2) submits proof of continued competence as specified in regulations adopted by the board;

(3) is currently licensed to practice dental hygiene in another state or territory of the United States; and

(4) pays the fees established under AS 08.01.065.

Sec. 08.32.035. Temporary License. *[Repealed, Sec. 40 ch 53 SLA 2012].*

Sec. 08.32.040. Application and fee. *[Repealed, Sec. 40 ch 53 SLA 2012].*

Sec. 08.32.060. Frequency and content of examination. *[Repealed, Sec. 40 ch 53 SLA 2012].*

Sec. 08.32.070. Licensing of dental hygienists. The board shall issue each successful applicant a license upon payment of all required fees.

Sec. 08.32.071. Renewal of license. At least 60 days before expiration of a dental hygienist's license, the Department of Commerce, Community, and Economic Development shall notify the licensed dental hygienist. Each licensee who wishes to renew a dental hygienist's license shall submit a completed license renewal form, the appropriate fee, and evidence of continued professional competence as required by the board. The Department of Commerce, Community, and Economic Development shall, as soon as practicable, issue a dental hygienist license valid for a stated number of years. Failure to receive notification from the department under this section does not exempt a licensee from renewing the licensee's dental hygienist license.

Sec. 08.32.081. Lapse and reinstatement of license. A licensed dental hygienist who does not pay the renewal fee under AS 08.32.071 forfeits the hygienist's license. The board may reinstate the license without examination within two years of the date on which payment was due upon written application, proof of continued professional competence, and payment of all unpaid renewal fees and any penalty fee established under AS 08.01.100(b).

Sec. 08.32.085. Restorative function license endorsement. (a) The board shall issue a restorative function endorsement to a licensed dental hygienist if the licensee furnishes evidence satisfactory to the board that the licensee has

(1) successfully completed a course offered by or under the auspices of a program accredited by the Commission on Dental Accreditation of the American Dental Association or other equivalent course or program approved by the board; and

(2) passed the Western Regional Examining Board's restorative examination or other equivalent examination approved by the board within the five years preceding the licensee's endorsement application, or the licensee is licensed, certified, or otherwise permitted in another state or United States territory to perform restorative functions.

(b) An endorsement issued under this section authorizes a licensed dental hygienist under the direct supervision of a licensed dentist to place restorations into a cavity prepared by the licensed dentist and thereafter carve, contour, and adjust contacts and occlusion of the restoration.

(c) The board may by regulation establish renewal and continuing education requirements for an endorsement under this section.

Sec. 08.32.095. Exemption from license requirement. (a) A person enrolled as a student in an accredited dental hygiene program may perform dental hygiene procedures as part of a course of study without a license if

(1) the procedures are performed under the

(A) general supervision of a member of the faculty who is licensed under AS 08.36, and under the direct or indirect supervision of a member of the faculty who is licensed under this chapter; or

(B) direct or indirect supervision of a member of the faculty who is licensed under AS 08.36; and

(2) the clinical program has received written approval from the board.

(b) A person practicing dental hygiene under (a) of this section is subject to all other provisions of this chapter and laws and regulations that apply to the practice of dental hygiene by a licensed dental hygienist.

Sec. 08.32.097. Fees. *[Repealed, Sec. 40 ch 53 SLA 2012].*

ARTICLE 2.
REGULATION OF DENTAL HYGIENISTS.

Section

- 110. Scope of practice of dental hygienists**
- 115. Collaborative agreements**
- 160. Grounds for discipline, suspension or revocation of license**
- 165. Limits or conditions on license; discipline**
- 171. Disciplinary sanctions**
- 180. Penalty for violations**

Sec. 08.32.100. Employment of dental hygienists. *[Repealed, Sec. 40 ch 53 SLA 2012].*

Sec. 08.32.110. Scope of practice of dental hygienists. (a) The role of the dental hygienist is to assist members of the dental profession in providing oral health care to the public. A person licensed to practice the profession of dental hygiene in the state may,

- (1) under the general supervision of a licensed dentist,
 - (A) perform preliminary charting and triage to formulate a dental hygiene assessment and dental hygiene treatment plan;
 - (B) remove calcareous deposits, accretions, and stains from the exposed surfaces of the teeth beginning at the epithelial attachment by scaling and polishing techniques;
 - (C) remove marginal overhangs;
 - (D) use local periodontal therapeutic agents;
 - (E) perform nonsurgical periodontal therapy;
 - (F) perform other dental operations and services delegated by a licensed dentist if the dental operations and services are not prohibited by (c) of this section;
 - (G) if certified by the board, administer local anesthetic agents; and
- (2) if certified by the board and under the direct or indirect supervision of a licensed dentist, administer and monitor nitrous oxide-oxygen conscious sedation.
- (b) The board shall specify by regulation those additional functions that may be performed by a licensed dental hygienist only upon successful completion of a formal course of instruction approved by the board. The board shall adopt regulations specifying the education requirements, evaluation procedures, and degree of supervision required for each function.
- (c) This section does not authorize delegation of
 - (1) dental diagnosis, comprehensive treatment planning, and writing prescriptions for drugs; writing authorizations for restorative, prosthetic, or orthodontic appliances;
 - (2) operative or surgical procedures on hard or soft tissues; or
 - (3) other procedures that require the professional competence and skill of a dentist.
- (d) *[Repealed, Sec. 8 ch 111 SLA 2008].*
- (e) This section does not prohibit a licensed dental hygienist
 - (1) with an endorsement issued under AS 08.32.085 from performing the activities authorized under AS 08.32.085;
 - (2) who has entered into a collaborative agreement approved by the board under AS 08.32.115 from performing the activities authorized under the collaborative agreement; or
 - (3) from performing a dental operation, procedure, or service a dentist may delegate to a dental assistant under AS 08.36.346.

Sec. 08.32.115. Collaborative agreements. (a) If the collaborative agreement is approved by the board under (d) of this section, a licensed dental hygienist with a minimum of 4,000 documented hours of clinical experience within the five years preceding application for the board's approval may enter into a collaborative agreement with a licensed dentist in which the licensed dentist authorizes the licensed dental hygienist to perform one or more of the following:

- (1) oral health promotion and disease prevention education;
- (2) removal of calcareous deposits, accretions, and stains from the surfaces of teeth;
- (3) application of topical preventive or prophylactic agents, including fluoride varnishes and pit and fissure sealants;
- (4) polishing and smoothing restorations;
- (5) removal of marginal overhangs;
- (6) preliminary charting and triage to formulate a dental hygiene assessment and dental hygiene treatment plan;
- (7) the exposure and development of radiographs;
- (8) use of local periodontal therapeutic agents; and
- (9) performance of nonsurgical periodontal therapy, with or without the administration of local anesthesia, subsequent to a licensed dentist's authorization or diagnosis as specified in the licensed hygienist's collaborative agreement.

(b) The services described in (a) of this section may be performed under a collaborative agreement approved by the board

- (1) without the presence of the licensed dentist;
- (2) in a setting other than the usual place of practice of the licensed dentist; and
- (3) without the dentist's diagnosis and treatment plan unless otherwise specified in the collaborative agreement or in (a) of this section.

(c) The board shall adopt regulations regarding approval of collaborative agreements between licensed dental hygienists and licensed dentists.

(d) The board may approve a collaborative agreement between a licensed dentist and a licensed dental hygienist. However, the board may not approve more than five collaborative agreements with a licensed dentist, not including any collaborative agreements that have been terminated. A licensed dental hygienist shall notify the board of the termination of a collaborative agreement with a licensed dentist.

Sec. 08.32.120. Place of employment. *[Repealed, Sec. 40 ch 53 SLA 2012].*

Sec. 08.32.130. Information required. *[Repealed, Sec. 40 ch 53 SLA 2012].*

Sec. 08.32.140. Supervision required. *[Repealed, Sec. 40 ch 53 SLA 2012].*

Sec. 08.32.150. Revocation of dentist's license. *[Repealed, Sec. 32 ch 49 SLA 1980. For current law, see AS 08.36.315].*

Sec. 08.32.160. Grounds for discipline, suspension or revocation of license. The board may revoke or suspend the license of a dental hygienist, or may reprimand, censure, or discipline a licensee, if, after a hearing, the board finds that the licensee

- (1) used or knowingly cooperated in deceit, fraud, or intentional misrepresentation to obtain a license, certificate, or endorsement;
- (2) engaged in deceit, fraud, or intentional misrepresentation in the course of providing or billing for professional services or engaging in professional activities;
- (3) advertised professional services in a false or misleading manner;
- (4) has been convicted of a felony or other crime that affects the licensee's ability to continue to practice competently and safely;
- (5) failed to comply with this chapter, with a regulation adopted under this chapter or under AS 08.36, or with an order of the board;
- (6) continued to practice after becoming unfit due to
 - (A) professional incompetence;
 - (B) addiction or dependence on alcohol or other drugs that impairs the licensee's ability to practice safely;
 - (C) physical or mental disability;
- (7) engaged in lewd or immoral conduct in connection with the delivery of professional service to patients;
- (8) performed clinical procedures without being under the supervision of a licensed dentist;
- (9) did not conform to professional standards in delivering dental hygiene services to patients regardless of whether actual injury to the patient occurred.

Sec. 08.32.165. Limits or conditions on license; discipline. (a) In addition to action under AS 08.32.160, upon a finding that by reason of demonstrated problems of competence, experience, education or health the authority to practice dental hygiene should be limited or conditioned or the practitioner disciplined, the board may reprimand, censure, place on probation, restrict practice by specialty, procedure or facility, require additional education or training, or revoke or suspend a license.

(b) *[Repealed by Sec. 15 ch 59 SLA 1978].*

Sec. 08.32.171. Disciplinary sanctions. (a) *[Repealed, Sec. 49 ch 94 SLA 1987].*

(b) *[Repealed, Sec. 49 ch 94 SLA 1987].*

(c) The board may summarily suspend the license of a licensee who refuses to submit to a physical or mental examination under AS 08.36.070(b)(1). A person whose license is suspended under this section is entitled to a hearing by the board within seven days after the effective date of the order. If, after a hearing, the board upholds the suspension, the licensee may appeal the suspension to a court of competent jurisdiction.

(d) *[Repealed, Sec. 49 ch 94 SLA 1987].*

(e) *[Repealed, Sec. 49 ch 94 SLA 1987].*

Sec. 08.32.180. Penalty for violations. (a) A person who violates a provision of this chapter or a regulation adopted under this chapter for which a penalty is not otherwise provided is guilty of a class B misdemeanor.

(b) Notwithstanding AS 08.01.075(a)(8), the board may impose a civil fine not to exceed \$25,000 for each violation of this chapter or a regulation adopted under this chapter.

ARTICLE 3.
GENERAL PROVISIONS.

Section

185. Application of Administrative Procedure Act

187. Application of chapter

190. Definitions

Sec. 08.32.185. Application of Administrative Procedure Act. The Administrative Procedure Act (AS 44.62) applies to any action taken by the board under this chapter.

Sec. 08.32.187. Application of chapter. (a) This chapter applies to a person who practices, or offers or attempts to practice, as a dental hygienist in the state except

- (1) a dental hygienist in the military service in the discharge of official duties;
- (2) a dental hygienist in the employ of the United States Public Health Service, United States Department of Veterans Affairs, United States Indian Health Service, or another agency of the federal government, in the discharge of official duties;
- (3) a dental hygienist licensed in another state or jurisdiction who is teaching or demonstrating clinical techniques at a meeting, seminar, or limited course of instruction sponsored by a dental or dental auxiliary society or association or by an accredited dental or dental auxiliary educational institution;
- (4) a dental hygienist employed in the state by an Indian health program, as that term is defined in 25 U.S.C. 1603, while providing dental hygiene services to a person the Indian health program is entitled to serve under 25 U.S.C. 450 et seq. (Indian Self-Determination and Education Assistance Act), as amended, and 25 U.S.C. 1601 et seq. (Indian Health Care Improvement Act), as amended.

(b) A person excepted from this chapter under (a) of this section shall be held to the same standard of care as a person covered by this chapter.

Sec. 08.32.190. Definitions. In this chapter,

- (1) "board" means the Board of Dental Examiners;
- (2) "direct supervision" means the dentist is in the dental office, personally diagnoses the condition to be treated, personally authorizes the procedure, and before dismissal of the patient evaluates the performance of the dental hygienist;
- (3) "general supervision" means the dentist has authorized the procedures and they are being carried out in accordance with the dentist's diagnosis and treatment plan;
- (4) "indirect supervision" means a licensed dentist is in the dental facility, authorizes the procedures, and remains in the dental facility while the procedures are being performed by the dental hygienist;
- (5) "licensed dental hygienist" means a dental hygienist licensed under this chapter;
- (6) "licensed dentist" means a dentist licensed under AS 08.36.

**CHAPTER 36.
DENTISTRY.**

Article

- 1. Board of Dental Examiners**
(§ 08.36.010—§ 08.36.091)
- 2. Examination and Licensing**
(§ 08.36.100—§ 08.36.250)
- 3. Unlawful Acts** (§ 08.36.315—§ 08.36.340)
- 4. Dental Assistants** (§ 08.36.342—§ 08.36.349)
- 5. General Provisions** (§ 08.36.350—§ 08.36.370)

**ARTICLE 1.
BOARD OF DENTAL EXAMINERS.**

Section

- 10. Creation and membership of board; oath; seal**
- 25. Suspension of board members**
- 30. Election and term of officers**
- 40. Meetings**
- 50. Quorum**
- 61. Reimbursement for expenses**
- 70. General powers**
- 73. Investigator**
- 75. Dental radiological equipment**
- 80. Applicability of Administrative Procedure Act**
- 91. Records and reports**

Sec. 08.36.010. Creation and membership of board; oath; seal. (a) There is created the Board of Dental Examiners consisting of nine members. Six members shall be licensed dentists who have been engaged in the practice of dentistry in the state for five years immediately preceding appointment, two members shall be dental hygienists licensed under AS 08.32 who have been engaged in the practice of dental hygiene in the state for five years immediately preceding appointment, and one member shall be a public member who does not have a direct financial interest in the health care industry.

(b) When making appointments of dentists and dental hygienists under (a) of this section, the governor may consider licensed dentists who have been nominated by the Alaska Dental Society and licensed dental hygienists who have been nominated by the Alaska State Dental Hygienists' Association.

(c) Each member shall take an oath of office. The president or secretary elected under AS 08.36.030 may administer oaths. The oath shall be filed and preserved in the department.

(d) The board shall adopt a seal.

Sec. 08.36.025. Suspension of board members. A member against whom an accusation has been filed under AS 44.62 for violation of AS 08.32.160 or AS 08.36.315 is suspended from the board until the decision of the board on the accusation takes effect under AS 44.62.520.

Sec. 08.36.030. Election and term of officers. (a) The board shall elect from among its members

- (1) a president who is a licensed dentist or licensed dental hygienist; and
- (2) a secretary.

(b) Officers elected under (a) of this section serve for a term not to exceed two years.

Sec. 08.36.040. Meetings. The board shall meet at the call of the president at least four times annually and at other times necessary to conduct its business. In the absence of a call of the president, a majority of the board may call a meeting.

Sec. 08.36.050. Quorum. A majority of the board constitutes a quorum for the transaction of business.

Sec. 08.36.061. Reimbursement for expenses. Board members are entitled to per diem and travel expenses authorized for boards and commissions under AS 39.20.180. The department shall reimburse a member for other actual, reasonable expenses incurred in carrying out duties as a board member.

Sec. 08.36.070. General powers. (a) The board shall

(1) provide for the examination of applicants and the credentialing, registration, and licensure of those applicants it finds qualified;

- (2) maintain a registry of licensed dentists, licensed dental hygienists, and registered dental assistants who are in good standing;
 - (3) affiliate with the American Association of Dental Boards and pay annual dues to the association;
 - (4) hold hearings and order the disciplinary sanction of a person who violates this chapter, AS 08.32, or a regulation of the board;
 - (5) supply forms for applications, licenses, permits, certificates, registration documents, and other papers and records;
 - (6) enforce the provisions of this chapter and AS 08.32 and adopt or amend the regulations necessary to make the provisions of this chapter and AS 08.32 effective;
 - (7) adopt regulations ensuring that renewal of a license, registration, or certificate under this chapter or a license, certificate, or endorsement under AS 08.32 is contingent on proof of continued professional competence; the regulations must require that a licensee receive not less than two hours of education in pain management and opioid use and addiction in the two years preceding an application for renewal of a license, unless the licensee has demonstrated to the satisfaction of the board that the licensee does not currently hold a valid federal Drug Enforcement Administration registration number;
 - (8) at least annually, cause to be published on the Internet and in a newspaper of general circulation in each major city in the state a summary of disciplinary actions the board has taken during the preceding calendar year;
 - (9) issue permits or certificates to licensed dentists, licensed dental hygienists, and dental assistants who meet standards determined by the board for specific procedures that require specific education and training;
 - (10) require that a licensed dentist who has a federal Drug Enforcement Administration registration number register with the controlled substance prescription database under AS 17.30.200(o).
- (b) The board may
- (1) order a licensed dentist or licensed dental hygienist to submit to a reasonable physical or mental examination if the dentist's or the dental hygienist's physical or mental capacity to practice safely is at issue;
 - (2) authorize a designee of the board or the board's investigator to inspect the practice facilities or patient or professional records of a dentist at reasonable times and in a reasonable manner to monitor compliance with this chapter and with AS 08.32; and
 - (3) delegate the board's powers to act, hear, and decide matters as authorized by AS 44.62.

Sec. 08.36.073. Investigator. After consulting with the board, the department shall employ a person who is not a member of the board as the investigator for the board. The investigator shall

- (1) conduct investigations into alleged violations of this chapter and into alleged violations of regulations and orders of the board;
- (2) at the request of the board, conduct investigations based on complaints filed with the department or with the board; and
- (3) be directly responsible and accountable to the board, except that only the department has authority to terminate the investigator's employment and the department shall provide day-to-day and administrative supervision of the investigator.

Sec. 08.36.075. Dental radiological equipment. (a) The board shall establish standards that comply with applicable federal law for the registration, use, and inspection of dental radiological equipment, including standards for record keeping relating to the control panels and the use of the equipment. The board may charge a fee for dental radiological equipment registered under this section.

- (b) *[Repealed, Sec. 40 ch 53 SLA 2012].*
- (c) *[Repealed, Sec. 40 ch 53 SLA 2012].*
- (d) *[Repealed, Sec. 40 ch 53 SLA 2012].*
- (e) *[Repealed, Sec. 40 ch 53 SLA 2012].*
- (f) In this section, "dental radiological equipment" means equipment for use in the practice of dentistry, consisting of a control panel and associated tube heads, if the equipment emits electronic product radiation, as defined in AS 18.60.545, or uses radionuclides, as defined in AS 18.60.545.

Sec. 08.36.080. Applicability of Administrative Procedure Act. The board shall comply with the Administrative Procedure Act (AS 44.62).

Sec. 08.36.091. Records and reports. The board shall maintain

- (1) a record of its proceedings;
- (2) a registry containing the name, office and home addresses, and other information considered necessary by the board of each person licensed as a dentist or dental hygienist or registered as a dental assistant, a registry of the licenses, certificates, registrations, and endorsements revoked by the board, and information on the status of each licensee and each registered dental assistant.

ARTICLE 2.
EXAMINATION AND LICENSING.

Section

- 100. License required**
- 110. Qualifications for license; interview**
- 234. Licensure by credentials**
- 238. Exemption from license requirement**
- 240. Issuance and display of license**
- 250. License renewal, lapse, and reinstatement**

Sec. 08.36.100. License required. Except as provided in AS 08.36.238, a person may not practice, or attempt to practice, dentistry without a license.

Sec. 08.36.110. Qualifications for license; interview. (a) An applicant for a license to practice dentistry shall

- (1) provide certification to the board that the applicant
 - (A) is a graduate of a dental school that, at the time of graduation, is approved by the board;
 - (B) has successfully passed a written examination approved by the board;
 - (C) has not had a license to practice dentistry revoked, suspended, or voluntarily surrendered in this state or another state;
 - (D) is not the subject of an adverse decision based on a complaint, investigation, review procedure, or other disciplinary proceeding within the five years immediately preceding application, or of an unresolved complaint, investigation, review procedure, or other disciplinary proceeding, undertaken by a state, territorial, local, or federal dental licensing jurisdiction;
 - (E) is not the subject of an unresolved or an adverse decision based on a complaint, investigation, review procedure, or other disciplinary proceeding, undertaken by a state, territorial, local, or federal dental licensing jurisdiction or law enforcement agency that relates to criminal or fraudulent activity, dental malpractice, or negligent dental care and that adversely reflects on the applicant's ability or competence to practice dentistry or on the safety or well-being of patients;
 - (F) is not the subject of an adverse report from the National Practitioner Data Bank or the American Association of Dental Boards Clearinghouse for Board Actions that relates to criminal or fraudulent activity, or dental malpractice;
 - (G) is not impaired to an extent that affects the applicant's ability to practice dentistry;
 - (H) has not been convicted of a crime that adversely reflects on the applicant's ability or competency to practice dentistry or that jeopardizes the safety or well-being of a patient;
- (2) pass, to the satisfaction of the board, written, clinical, and other examinations administered or approved by the board; and
- (3) meet the other qualifications for a license established by the board by regulation, including education in pain management and opioid use and addiction in the two years preceding the application for a license, unless the applicant has demonstrated to the satisfaction of the board that the applicant does not currently hold a valid federal Drug Enforcement Administration registration number; approved education may include dental school coursework.

(b) An applicant for licensure may be interviewed in person by the board or by a member of the board before a license is issued. The interview must be recorded. If the application is denied on the basis of the interview, the denial shall be stated in writing, with the reasons for it, and the record shall be preserved.

Sec. 08.36.114. Qualifications for acupuncture applicants. *[Repealed, Sec. 40 ch 53 SLA 2012].*

Sec. 08.36.115. Malpractice insurance. *[Repealed, Sec. 40 ch 177 SLA 1978].*

Sec. 08.36.120, 08.36.130. Signing, photograph, and filing date of application; Examination. *[Repealed, Sec. 8 ch 47 SLA 2005].*

Sec. 08.36.160. Contents of examination. *[Repealed, Sec. 8 ch 47 SLA 2005].*

Sec. 08.36.170. Partial examination. *[Repealed, Sec. 40 ch 100 SLA 1984].*

Sec. 08.36.180, 08.36.190. Reexamination; Grading of examination. *[Repealed, Sec. 8 ch 47 SLA 2005].*

Sec. 08.36.200. Waiver of written examination. *[Repealed, Sec. 40 ch 100 SLA 1984].*

Sec. 08.36.210. - 08.36.220. Waiver of examination and issuance of license by reciprocity. *[Repealed, Sec. 32 ch 49 SLA 1980. For current law, see AS 08.36.234].*

Sec. 08.36.230. Practice outside the state. *[Repealed, Sec. 40 ch 53 SLA 2012].*

Sec. 08.36.234. Licensure by credentials. (a) The board may waive the examination requirement and license by credentials if the dentist applicant meets the requirements of AS 08.36.110, submits proof of continued competence as required by regulation, pays the required fee, and has

(1) an active license from a board of dental examiners established under the laws of a state or territory of the United States issued after thorough examination; or

(2) passed an examination as specified by the board in regulations.

(b) A dentist applying for licensure without examination is responsible for providing to the board all materials required by the board to implement this section to establish eligibility for a license without examination. In addition to the grounds for revocation of a license under AS 08.36.315, the board may revoke a license issued without examination upon evidence of misinformation or substantial omission.

(c) The board shall adopt regulations necessary to implement this section including the form and manner of certification of qualifications under this section.

(d) A dentist applying for licensure without examination shall be interviewed in person by the board or by a member of the board before a license is issued. The interview must be recorded. If the application is denied on the basis of the interview, the denial shall be stated in writing, with the reasons for it, and the record shall be preserved.

Sec. 08.36.238. Exemption from license requirement. (a) A person enrolled as a student in an accredited school of dentistry may perform procedures as part of a course of study without a license if

(1) the procedures are performed under the direct supervision of a member of the faculty who is licensed under this chapter, or under the direct supervision of a team of licensed faculty dentists, at least one of whom is licensed under this chapter; and

(2) the clinical program has received written approval from the board.

(b) A person practicing dentistry under (a) of this section is subject to all other provisions of this chapter and to other laws and regulations which apply to the practice of dentistry.

Sec. 08.36.240. Issuance and display of license. The board shall issue a license to each successful dentist applicant who has paid the required fees. The licensee shall display the license in a conspicuous place where the licensee practices.

Sec. 08.36.244. License to practice as specialist required. *[Repealed, Sec. 40 ch 53 SLA 2012].*

Sec. 08.36.246. - 08.36.248. Qualification for a specialist license; limitation of special practice; suspension or revocation of specialty licenses. *[Repealed, Sec. 40 ch 53 SLA 2012].*

Sec. 08.36.250. License renewal, lapse, and reinstatement. (a) At least 60 days before expiration of a license issued under this chapter, the department shall notify the licensed dentist. A licensee who wishes to renew a license shall submit a completed license renewal form, the appropriate fee, and evidence of continued professional competence as required by the board. The department shall, as soon as practicable, issue a new license valid for a stated number of years. Failure to receive notification from the department under this subsection does not exempt a licensee from renewing a license to practice dentistry under this chapter.

(b) When applying for license renewal, a dentist shall report to the board each instance during the prior registration period in which the quality of the licensee's professional services was the subject of legal action.

(c) A licensed dentist who does not pay the license renewal fee forfeits the dentist's license. The board may reinstate the license without examination within two years after the date on which payment was due upon written application, proof of continued professional competence, and payment of all unpaid renewal fees and any penalty fee established under AS 08.01.100(b).

Sec. 08.36.260. Branch office registration. *[Repealed, Sec. 40 ch 53 SLA 2012].*

Sec. 08.36.271. Permits for isolated areas. *[Repealed, Sec. 40 ch 53 SLA 2012].*

Sec. 08.36.290. Fees. *[Repealed, Sec. 40 ch 53 SLA 2012].*

ARTICLE 3. UNLAWFUL ACTS.

Section

- 315. Grounds for discipline, suspension or revocation of license
- 317. Civil fine authority
- 320. Summary license suspension
- 340. Penalties

Sec. 08.36.315. Grounds for discipline, suspension or revocation of license. The board may revoke or suspend the license of a dentist, or may reprimand, censure, or discipline a dentist, or both, if the board finds, after a hearing, that the dentist

- (1) used or knowingly cooperated in deceit, fraud, or intentional misrepresentation to obtain a license;
- (2) engaged in deceit, fraud, or intentional misrepresentation in the course of providing or billing for professional dental services or engaging in professional activities;
- (3) advertised professional dental services in a false or misleading manner;
- (4) received compensation for referring a person to another dentist or dental practice;
- (5) has been convicted of a felony or other crime that affects the dentist's ability to continue to practice dentistry competently and safely;
- (6) engaged in the performance of patient care, or permitted the performance of patient care by persons under the dentist's supervision, regardless of whether actual injury to the patient occurred,
 - (A) that did not conform to minimum professional standards of dentistry; or
 - (B) when the dentist, or a person under the supervision of the dentist, did not have the permit, registration, or certificate required under AS 08.32 or this chapter;
- (7) failed to comply with this chapter, with a regulation adopted under this chapter, or with an order of the board;
- (8) continued to practice after becoming unfit due to
 - (A) professional incompetence;
 - (B) addiction or dependence on alcohol or other drugs that impair the dentist's ability to practice safely;
 - (C) physical or mental disability;
- (9) engaged in lewd or immoral conduct in connection with the delivery of professional service to patients;
- (10) permitted a dental hygienist or dental assistant who is employed by the dentist or working under the dentist's supervision to perform a dental procedure in violation of AS 08.32.110 or AS 08.36.346;
- (11) failed to report to the board a death that occurred on the premises used for the practice of dentistry within 48 hours;
- (12) falsified or destroyed patient or facility records or failed to maintain a patient or facility record for at least seven years after the date the record was created;
- (13) prescribed or dispensed an opioid in excess of the maximum dosage authorized under AS 08.36.355; or
- (14) procured, sold, prescribed, or dispensed drugs in violation of a law, regardless of whether there has been a criminal action or harm to the patient.

Sec. 08.36.317. Civil fine authority. Notwithstanding AS 08.01.075(a), in a disciplinary action, the board may impose a civil fine not to exceed \$25,000 for each violation of this chapter or of a regulation adopted under this chapter.

Sec. 08.36.320. Summary license suspension. (a) *[Repealed, Sec. 49 ch 94 SLA 1987].*

(b) *[Repealed, Sec. 49 ch 94 SLA 1987].*

(c) The board may summarily suspend the license of a licensee who refuses to submit to a physical or mental examination under AS 08.36.070(b)(1). A person whose license is suspended under this section is entitled to a hearing by the board within seven days after the effective date of the order. If, after a hearing, the board upholds the suspension, the licensee may appeal the suspension to a court of competent jurisdiction.

(d) *[Repealed, Sec. 49 ch 94 SLA 1987].*

(e) *[Repealed, Sec. 49 ch 94 SLA 1987].*

Sec. 08.36.340. Penalties. A person who violates any provision of this chapter or regulations adopted under this chapter for which no specific penalty is provided is guilty of a class B misdemeanor.

ARTICLE 4. DENTAL ASSISTANTS.

Section

342. Coronal polishing certificate
344. Restorative function certificate
346. Delegation to dental assistants
347. Exemption from registration requirement
349. Definitions

Sec. 08.36.342. Coronal polishing certificate. (a) The board shall issue a coronal polishing certificate to a dental assistant if the dental assistant furnishes evidence satisfactory to the board that the dental assistant has completed a program of instruction approved by the board.

(b) A certificate issued under (a) of this section authorizes a dental assistant under the direct supervision of a dentist licensed in the state to perform coronal polishing on teeth without calculus.

(c) The board may by regulation establish fees, renewal, and continuing education requirements for a certificate issued under this section.

Sec. 08.36.344. Restorative function certificate. (a) The board shall issue a restorative function certificate to a dental assistant if the dental assistant furnishes evidence satisfactory to the board that the dental assistant has

(1) successfully completed a course offered by or under the auspices of a program accredited by the Commission on Dental Accreditation of the American Dental Association or other equivalent course or program approved by the board; and

(2) passed the Western Regional Examining Board's restorative examination or other equivalent examination approved by the board within the five years preceding the dental assistant's certificate application, or the dental assistant has legal authorization from another state or jurisdiction to perform restorative functions.

(b) A certificate issued under this section authorizes a dental assistant under the direct supervision of a licensed dentist to place restorations into a cavity prepared by the licensed dentist and thereafter carve, contour, and adjust contacts and occlusion of the restoration.

(c) The board may by regulation establish fees, renewal, and continuing education requirements for a certificate under this section.

Sec. 08.36.346. Delegation to dental assistants. (a) Except as otherwise provided in this chapter, a dentist licensed in this state may delegate to a dental assistant under indirect supervision

(1) the exposure and development of radiographs;

(2) application of topical preventive agents or pit and fissure sealants; and

(3) other dental operations and services except

(A) those that may be performed by a dental hygienist under AS 08.32.110(a); and

(B) those that may not be delegated to a dental hygienist under AS 08.32.110(c).

(b) A dentist licensed in this state may delegate to a dental assistant under direct supervision

(1) coronal polishing on teeth without calculus, if the dental assistant is certified under AS 08.36.342;

(2) the placement of a restoration into a cavity prepared by a dentist licensed under this chapter and the subsequent carving, contouring, and adjustment of the contacts and occlusion of the restoration, if the dental assistant is certified under AS 08.36.344; and

(3) other dental operations and services as defined and regulated by the board; however, a dentist may not delegate to a dental assistant a dental operation or service that requires the professional skill of a licensed dentist or licensed dental hygienist, including those dental operations and services specified in AS 08.32.110(c).

Sec. 08.36.347. Exemption from registration requirement. (a) A person enrolled in a program or course of study may perform dental assisting procedures as part of that program or course of study without a registration document if the procedures are performed

(1) under the direct supervision of a member of the faculty who is licensed under this chapter or AS 08.32; and

(2) as part of a clinical program that has received written approval from the board.

(b) A person performing dental assisting procedures under (a) of this section is subject to all other provisions of this chapter and statutes and regulations that apply to the practice of dental assisting by a registered dental assistant.

Sec. 08.36.349. Definitions. In AS 08.36.342 - 08.36.349,

(1) "direct supervision" means a dentist licensed in this state is in the dental office, personally diagnoses the condition to be treated, personally authorizes the procedure, and, before dismissal of the patient, evaluates the performance of the dental assistant;

(2) "indirect supervision" means a dentist licensed in this state is in the dental office, authorizes the procedures, and remains in the dental office while the procedures are being performed by the dental assistant.

ARTICLE 5.
GENERAL PROVISIONS.

Section

- 350. Application of chapter**
- 355. Maximum dosage for opioid prescriptions**
- 360. Practice of dentistry defined**
- 365. Rights of dentists**
- 367. Ownership of a dental office or facility**
- 370. Definitions for chapter**

Sec. 08.36.350. Application of chapter. (a) This chapter applies to a person who practices, or offers or attempts to practice, dentistry in the state except

- (1) a dental surgeon or dentist in the military service in the discharge of official duties;
- (2) a dentist in the employ of the United States Public Health Service, United States Department of Veterans Affairs, United States Indian Health Service, or other agency of the federal government, in the discharge of official duties;
- (3) a dentist licensed in another state who is teaching or demonstrating clinical techniques at a meeting, seminar, or limited course of instruction sponsored by a dental or dental auxiliary society or association or by an accredited dental or dental auxiliary educational institution;
- (4) a dentist licensed in another state who provides emergency care to an injured or ill person who reasonably appears to the dentist to be in immediate need of emergency aid in order to avoid serious harm or death if the care is provided without remuneration;
- (5) a dentist employed in the state by an Indian health program, as that term is defined in 25 U.S.C. 1603, while providing dental services to a person the Indian health program is entitled to serve under 25 U.S.C. 450 et seq. (Indian Self-Determination and Education Assistance Act), as amended, and 25 U.S.C. 1601 et seq. (Indian Health Care Improvement Act), as amended.

(b) A person excepted from this chapter under (a) of this section shall be held to the same standard of care as a person covered by this chapter.

Sec. 08.36.355. Maximum dosage for opioid prescriptions. (a) A licensee may not issue

- (1) an initial prescription for an opioid that exceeds a seven-day supply to an adult patient for outpatient use;
- (2) a prescription for an opioid that exceeds a seven-day supply to a minor; at the time a licensee writes a prescription for an opioid for a minor, the licensee shall discuss with the parent or guardian of the minor why the prescription is necessary and the risks associated with opioid use.

(b) Notwithstanding (a) of this section, a licensee may issue a prescription for an opioid that exceeds a seven-day supply to an adult or minor patient if, in the professional judgment of the licensee, more than a seven-day supply of an opioid is necessary for

(1) the patient's chronic pain management; the licensee may write a prescription for an opioid for the quantity needed to treat the patient's medical condition or chronic pain; the licensee shall document in the patient's medical record the condition triggering the prescription of an opioid in a quantity that exceeds a seven-day supply and indicate that a nonopioid alternative was not appropriate to address the medical condition; or

(2) a patient who is unable to access a practitioner within the time necessary for a refill of the seven-day supply because of a logistical or travel barrier; the licensee may write a prescription for an opioid for the quantity needed to treat the patient for the time that the patient is unable to access a practitioner; the licensee shall document in the patient's medical record the reason for the prescription of an opioid in a quantity that exceeds a seven-day supply and indicate that a nonopioid alternative was not appropriate to address the medical condition; in this paragraph, "practitioner" has the meaning given in AS 11.71.900.

(c) In this section,

- (1) "adult" means
 - (A) an individual who has reached 18 years of age; or
 - (B) an emancipated minor;
- (2) "emancipated minor" means a minor whose disabilities have been removed for general purposes under AS 09.55.590;
- (3) "minor" means an individual under 18 years of age who is not an emancipated minor.

Sec. 08.36.360. Practice of dentistry defined. A person engages in the practice of dentistry who

- (1) performs or holds out to the public as being able to perform dental operations;
- (2) diagnoses, treats, operates on, corrects, attempts to correct, or prescribes for a disease, lesion, pain, injury, deficiency, deformity, or physical condition, malocclusion or malposition of the human teeth, alveolar process, gingiva, maxilla, mandible, or adjacent tissues;
- (3) performs or attempts to perform an operation incident to the replacement of teeth;

(4) furnishes, supplies, constructs, reproduces, or repairs dentures, bridges, appliances or other structures to be used and worn as substitutes for natural teeth, except on prescription of a duly licensed and registered dentist and by the use of impressions or casts made by a duly licensed and registered dentist;

(5) uses the words “dentist” or “dental surgeon” or the letters “D.D.S.” or “D.M.D.” or other letter or title that represents the dentist as engaging in the practice of dentistry;

(6) extracts or attempts to extract human teeth;

(7) exercises control over professional dental matters or the operation of dental equipment in a facility where the acts and things described in this section are performed or done;

(8) evaluates, diagnoses, treats, or performs preventive procedures related to diseases, disorders, or conditions of the oral cavity, maxillofacial area, or adjacent and associated structures; a dentist whose practice includes the services described in this paragraph may only perform the services if they are within the scope of the dentist’s education, training, and experience and in accord with the generally recognized ethical precepts of the dental profession; nothing in this paragraph requires a person licensed under AS 08.64 to be licensed under this chapter.

Sec. 08.36.365. Rights of Dentists. A dentist licensed in this state may

(1) practice in an association, partnership, corporation or other lawful entity with other dentists including specialists;

(2) practice under the name of “dental center” or other descriptive term that does not deceive the public about the nature of the services provided;

(3) supervise research that would otherwise violate this chapter or regulations adopted under this chapter when the research does not involve treatment of dental patients if the research is performed by a nonprofit dental research institution chartered by this state or by a dental or dental auxiliary school accredited by the Commission on Accreditation of the American Dental Association, or its successor agency;

(4) supervise research that would otherwise violate this chapter or regulations adopted under this chapter when the research involves the treatment of dental patients if the research is performed by a nonprofit dental research institution chartered by this state or by a dental or dental auxiliary school accredited by the Commission on Accreditation of the American Dental Association, or its successor agency, and if the dentist notifies the board in writing, at least 60 days before beginning the treatment, of the intended practices or procedures and the board does not disapprove the research.

Sec. 08.36.367. Ownership of a dental office or facility. (a) Only a person who holds a valid license issued under this chapter may own, operate, or maintain a dental practice, office, or clinic. This restriction does not apply to

(1) a labor organization or a nonprofit organization formed by or on behalf of a labor organization for the purpose of providing dental services to rural or underserved populations;

(2) an institution of higher education recognized by the board;

(3) a local government;

(4) an institution or program accredited by the Commission on Dental Accreditation of the American Dental Association to provide education and training;

(5) a nonprofit corporation organized under state law to provide dental services to rural areas and medically underserved populations of migrant, rural community, or homeless individuals under 42 U.S.C. 254b or 254c or health centers qualified under 42 U.S.C. 1396d(l)(2)(B) operating in compliance with other applicable state and federal law;

(6) a nonprofit charitable corporation described in 26 U.S.C. 501(c)(3) (Internal Revenue Code) and determined by the board to be providing dental services by volunteer licensed dentists to populations with limited access to dental care at no charge or a substantially reduced charge.

(b) For the purpose of owning or operating a dental practice, office, or clinic, an entity described in (a) of this section shall

(1) name a licensed dentist as its dental director, who shall be subject to the provisions of AS 08.36.315 and 08.36.317 in the capacity of dental director; the dental director, or an actively licensed dentist designated by the director, shall have responsibility for the entity's practice of dentistry; and

(2) maintain current records of the names of licensed dentists who supervise dental hygienists, dental assistants, and other personnel involved in direct patient care who are employed by the entity; the records must be available to the board upon written request.

(c) Nothing in this chapter precludes a person or entity not licensed by the board from

(1) ownership or leasehold of any tangible or intangible assets used in a dental office or clinic, including real property, furnishings, equipment, and inventory, but not including dental records of patients related to clinical care;

(2) employing or contracting for the services of personnel other than licensed dentists; or

(3) management of the business aspects of a dental office or clinic that do not include the practice of dentistry.

(d) If all of the ownership interests of a dentist or dentists in a dental office or clinic are held by an administrator, executor, personal representative, guardian, conservator, or receiver of the estate of a former shareholder, member, or partner, the administrator, executor, personal representative, guardian, conservator, or receiver may retain the ownership interest for a period of 24 months following the creation of the ownership interest. The board shall extend the ownership period for an additional 24 months upon 30 days' notice and may grant additional extensions upon reasonable request.

(e) In this section, "labor organization" means an organization, not for pecuniary profit, constituted wholly or partly to bargain collectively or deal with employers, including the state and its political subdivisions, concerning grievances, terms or conditions of employment, or other mutual aid or protection in connection with employees that has existed for at least three years and that has a constitution and bylaws.

Sec. 08.36.370. Definitions for chapter. In this chapter, unless the context requires otherwise,

- (1) "board" means the Board of Dental Examiners;
- (2) "calculus" means a hardened deposit of mineralized plaque;
- (3) "coronal polishing" means the removal of supragingival plaque and stains;
- (4) "dental assistant" means a person employed to provide clinical assistance to a dentist licensed in the state;
- (5) "department" means the Department of Commerce, Community, and Economic Development;
- (6) "impaired practitioner" means a person who is unfit to practice dentistry due to addiction or dependence on alcohol or other drugs that impair the practitioner's ability to practice safely;
- (7) "licensed dental hygienist" means a dental hygienist licensed under AS 08.32;
- (8) "licensed dentist" means a dentist licensed under this chapter;
- (9) "registered dental assistant" means a dental assistant registered under this chapter;
- (10) "opioid" includes the opium and opiate substances and opium and opiate derivatives listed in AS 11.71.140 and 11.71.160.

CHAPTER 28.
BOARD OF DENTAL EXAMINERS.

Article

1. **Administration of Deep Sedation, General Anesthesia, Moderate Sedation, and Minimal Sedation**
(12 AAC 28.010 – 12 AAC 28.090)
2. **Examinations for Dental Licensure**
(12 AAC 28.100 – 12 AAC 28.300)
3. **Administration of Local Anesthetic Agents and Nitrous Oxide Sedation by Dental Hygienists**
(12 AAC 28.310 – 12 AAC 28.360)
4. **Continuing Professional Competence Requirements**
(12 AAC 28.400 – 12 AAC 28.420)
5. **Dental Hygienist Examination** (12 AAC 28.500)
6. **Parenteral Sedation**
(12 AAC 28.600 – 12 AAC 28.640)
7. **Professional Practices** (12 AAC 28.700 – 12 AAC 28.730)
8. **Restorative Functions by Dental Hygienists** (12 AAC 28.750 – 12 AAC 28.780)
9. **Coronal Polishing and Restorative Functions by Dental Assistants** (12 AAC 28.810 – 12 AAC 28.880)
10. **General Provisions** (12 AAC 28.900 – 12 AAC 28.990)

ARTICLE 1.
ADMINISTRATION OF DEEP SEDATION, GENERAL ANESTHESIA,
MODERATE SEDATION, AND MINIMAL SEDATION.

Section

10. **Permit requirements for use of deep sedation or general anesthesia**
15. **Permit requirements for use of moderate sedation, or for use of minimal sedation for a patient younger than 13 years of age**
20. **(Repealed)**
30. **Persons other than permit holders**
40. **Informed written consent**
50. **Medical history**
60. **Requirements for administering deep sedation, general anesthesia, moderate sedation, or minimal sedation for a patient younger than 13 years of age**
61. **Additional requirements for administering deep sedation or general anesthesia**
62. **Additional requirements for administering moderate sedation, or minimal sedation for a patient younger than 13 years of age**
65. **Exceptions to permit requirements under 12 AAC 28.010 - 12 AAC 28.080**
68. **Inspections**
70. **Suspension or revocation of permit**
80. **Mandatory reporting**
90. **Definition**

12 AAC 28.010. PERMIT REQUIREMENTS FOR USE OF DEEP SEDATION OR GENERAL ANESTHESIA. (a) Before administering deep sedation or general anesthesia a dentist licensed under AS 08.36 must have a deep sedation or general anesthesia permit issued by the board.

(b) An applicant for an initial or renewed permit to administer deep sedation or general anesthesia must

- (1) submit a completed application on a form provided by the board;
- (2) submit a dated and signed affidavit stating that the information provided is true, and that the dentist has read and complied with all applicable statutes and regulations;
- (3) submit, on a form provided by the board, a dated and signed affidavit attesting that the dentist's facility meets the requirements of this chapter for the administration of deep sedation or general anesthesia;
- (4) hold a current registration to prescribe and administer controlled substances in this state issued by the United States Drug Enforcement Administration (DEA);
- (5) provide proof of current certification in advanced resuscitative techniques with hands-on simulated airway and megacode training for healthcare providers, including basic electrocardiographic interpretation; qualifying certification for an applicant who seeks to treat patients 13 years of age or older includes the American Heart Association's Advanced Cardiac Life Support (ACLS) for Health Professionals; qualifying certification for an applicant who seeks to treat patients younger than 13 years of age includes Pediatric Advanced Life Support (PALS) for Health Professionals; an applicant who seeks to treat patients of any age must also be certified in both ACLS for Health Professionals and PALS for Health Professionals or must be certified in equivalent qualifying certifications

under this paragraph, one for advanced cardiac life support for health professionals and one for pediatric advanced life support for health professionals; and

(6) submit the applicable fees specified in 12 AAC 02.190.

(c) In addition to meeting the requirements of (b) and (d) of this section, an applicant for an initial permit to provide deep sedation or general anesthesia must provide documentation that the applicant

(1) is a member of the American Association of Oral and Maxillofacial Surgery;

(2) successfully completed an advanced educational program in oral maxillofacial surgery accredited by the Commission on Dental Accreditation (CODA) of the American Dental Association; or

(3) successfully completed an advanced educational program in dental anesthesiology accredited by the Commission on Dental Accreditation (CODA) of the American Dental Association.

(d) In addition to meeting the requirements of (b) and (c) of this section, an applicant for an initial permit to provide deep sedation or general anesthesia must provide documentation that

(1) within three years immediately before application, the applicant completed training or education identified in (c)(2) or (3) of this section in general anesthesia or deep sedation;

(2) if more than three years but less than five years have elapsed since completing training or education identified in (c)(2) or (3) of this section in general anesthesia or deep sedation, the applicant completed all continuing education that would have been required for a deep sedation or general anesthesia permit under this section;

(3) if more than three years but less than five years have elapsed since completing training or education identified in (c)(2) or (3) of this section in general anesthesia or deep sedation, the applicant completed a comprehensive review course approved by the board;

(4) if more than five years have elapsed since completing training or education identified in (c)(2) or (3) of this section in general anesthesia or deep sedation, the applicant holds a permit for general anesthesia or deep sedation from another jurisdiction where the applicant is also licensed to practice dentistry and where the applicant completed at least 25 anesthesia cases at the requested permit level not earlier than the 12 months immediately preceding application; or

(5) demonstrates current competency to the satisfaction of the board that the applicant has adequate sedation or anesthesia skill to safely deliver deep sedation or general anesthesia services to the public.

(e) In addition to meeting the requirements of (b) of this section, on or after March 1, 2019, a dentist who seeks to renew a permit to administer deep sedation or general anesthesia must

(1) during each biennial licensing period participate in four or more contact hours of continuing education that relates specifically to hands-on advanced airway management or general anesthesia; if the permit holder provides anesthesia for patients younger than 13 years of age, the course must be a pediatric course;

(2) during each biennial licensing period participate in eight contact hours of continuing education that focuses on one or more of the following:

(A) physical evaluation;

(B) medical emergencies;

(C) monitoring and use of monitoring equipment;

(D) pharmacology of drugs and agents used in deep sedation and general anesthesia;

(3) complete at least 50 general anesthesia or deep sedation cases each biennial licensing period; and

(4) maintain continuing education records that can be audited, including course titles, instructors, dates attended, sponsors, and number of contact hours for each course.

(f) A dentist who has met the requirements of this section to administer deep sedation or general anesthesia to patients younger than 13 years of age will be issued a permit that so indicates.

(g) A permit to administer deep sedation and general anesthesia

(1) will be renewed when the dentist's license to practice is renewed if the dentist demonstrates continued compliance with AS 08.36 and this chapter; and

(2) expires on the date the dentist's license expires.

(h) For purposes of this section,

(1) one contact hour equals 50 minutes of instruction;

(2) one academic semester credit hour equals 15 contact hours;

(3) one academic quarter credit equals 10 contact hours; and

(4) one continuing education credit equals one contact hour.

(i) Credit is given only for class hours and not hours devoted to class preparation.

Authority:	AS 08.01.065	AS 08.36.100	AS 08.36.234
	AS 08.36.070	AS 08.36.110	AS 08.36.250

12 AAC 28.015. PERMIT REQUIREMENTS FOR USE OF MODERATE SEDATION, OR FOR USE OF MINIMAL SEDATION FOR A PATIENT YOUNGER THAN 13 YEARS OF AGE. (a) Unless exempt under 12 AAC 28.065, before administering moderate sedation to a patient, or minimal sedation to a patient younger than 13 years of age, a dentist licensed under AS 08.36 must have a moderate sedation permit issued by the board.

(b) The requirement to obtain a permit to administer moderate or minimal sedation under this section does not apply to a dentist currently permitted under 12 AAC 28.010 to administer deep sedation and general anesthesia.

(c) A dentist who holds a permit under this section may not administer or employ an agent or technique that has so narrow a margin for maintaining consciousness that the agent or technique is most likely to produce deep sedation or general anesthesia. These agents include ketamine, propofol, brexvatil, and sodium pentothal.

(d) An applicant for an initial or renewed permit to administer moderate or minimal sedation under this section must

- (1) submit a completed application on a form provided by the board;
- (2) submit a dated and signed affidavit stating that the information provided is true, and that the dentist has read and complied with all applicable statutes and regulations;
- (3) submit, on a form provided by the board, a dated and signed affidavit attesting that the dentist's facility meets the requirements of this chapter for the administration of moderate or minimal sedation under this section;
- (4) hold a current registration to prescribe and administer controlled substances in this state issued by the United States Drug Enforcement Administration (DEA);
- (5) provide proof of current certification in advanced resuscitative techniques with hands-on simulated airway and megacode training for healthcare providers, including basic electrocardiographic interpretation; qualifying certification for an applicant who seeks to treat patients 13 years of age and older includes the American Heart Association's Advanced Cardiac Life Support (ACLS) for Health Professionals; qualifying certification for an applicant who seeks to treat patients younger than 13 years of age includes Pediatric Advanced Life Support (PALS) for Health Professionals; an applicant who seeks to treat patients of any age must also be certified in both ACLS for Health Professionals and PALS for Health Professionals or must be certified in equivalent qualifying certifications under this paragraph, one for advanced cardiac life support for health professionals and one for pediatric advanced life support for health professionals; and
- (6) submit the applicable fees specified in 12 AAC 02.190.

(e) In addition to meeting the requirements of (d) and (g) of this section, an applicant for an initial permit to administer moderate sedation to a patient who is at least 13 years of age under this section must provide documentation that the applicant completed either

(1) training in moderate sedation consistent with the *Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students*, as adopted by the American Dental Association (ADA) House of Delegates, October 2016, adopted by reference; the applicant must complete the training required under this paragraph while enrolled in

(A) a dental program accredited by the Commission on Dental Accreditation (CODA) of the American Dental Association; or

(B) a post-doctoral university or teaching hospital program; or

(2) a board-approved continuing education course in sedation consistent with the *Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students*, adopted by reference in (1) of this subsection; the course must consist of a minimum of 60 hours of instruction plus administration of sedation for at least 20 individually managed patients per participant to establish competency and clinical experience in moderate sedation and management of a compromised airway.

(f) In addition to meeting the requirements of (d) and (g) of this section, an applicant for an initial permit to administer moderate or minimal sedation to a patient who is younger than 13 years of age under this section must provide documentation that the applicant has completed a Commission on Dental Accreditation (CODA) accredited residency in pediatric dentistry or sufficient training in pediatric moderate sedation as determined by the board. The applicant must provide proof of administration of sedation for at least 20 individually managed patients younger than 13 years of age to establish competency and clinical experience in management of a compromised airway.

(g) In addition to meeting the requirements of (d) and (e) of this section, or (f) of this section if administering moderate or minimal sedation to a patient who is younger than 13 years of age, an applicant for an initial permit to provide moderate sedation and minimal sedation under this section must provide documentation that

(1) within three years immediately before application, the applicant completed training or education as required in this section in moderate sedation;

(2) if more than three years but less than five years have elapsed since completing training or education as required in this section in moderate sedation, the applicant completed all continuing education that would have been required for a permit under this section;

(3) if more than three years but less than five years have elapsed since completing training or education as required in this section in moderate sedation, the applicant completed a comprehensive review course approved by the board in moderate sedation;

(4) if more than five years have elapsed since completing training or education as required in this section in moderate sedation, the applicant holds a permit for moderate sedation from another jurisdiction where the applicant is also licensed to practice dentistry and where the applicant completed at least 25 anesthesia cases at the moderate sedation level not earlier than the 24 months immediately preceding application; or

(5) demonstrates current competency to the satisfaction of the board that the applicant has skill in moderate sedation to safely deliver moderate sedation services to the public.

(h) In addition to meeting the requirements of (d) of this section, on or after March 1, 2019, a dentist who seeks to renew a permit to administer moderate or minimal sedation under this section must

(1) during each biennial licensing period participate in four or more contact hours of continuing education that relates specifically to hands-on advanced airway management; if the permit holder provides moderate or minimal sedation for patients younger than 13 years of age, the course must be a pediatric course; contact hours earned from

certification in health care provider basic life support (BLS), advanced cardiac life support (ACLS), and pediatric advanced life support (PALS) courses may be used to meet the continuing education requirements for obtaining or renewing a permit to administer moderate or minimal sedation under this section;

(2) during each biennial licensing period participate in four contact hours of continuing education that focuses on one or more of the following:

- (A) venipuncture;
- (B) intravenous sedation;
- (C) enteral sedation;
- (D) physiology;
- (E) pharmacology;
- (F) nitrous oxide analgesia;
- (G) patient evaluation, patient monitoring, or medical emergencies;

(3) complete at least 25 moderate sedation cases each biennial renewal period; and

(4) maintain continuing education records that can be audited, including course titles, instructors, dates attended, sponsors, and number of contact hours for each course.

(i) A dentist who holds a permit for parenteral sedation that the board issued before April 14, 2018 will be issued a moderate sedation permit immediately.

(j) A dentist who has met the requirements of this section to administer moderate or minimal sedation to patients younger than 13 years of age will be issued a permit that so indicates.

(k) A permit to administer moderate or minimal sedation under this section

(1) will be renewed when the dentist's license to practice is renewed if the dentist demonstrates continued compliance with AS 08.36 and this chapter; and

(2) expires on the date the dentist's license expires.

(l) For purposes of this section,

- (1) one contact hour equals 50 minutes of instruction;
- (2) one academic semester credit hour equals 15 contact hours;
- (3) one academic quarter credit equals 10 contact hours; and
- (4) one continuing education credit equals one contact hour.

(m) Credit is given only for class hours and not hours devoted to class preparation.

Authority:	AS 08.01.065	AS 08.36.100	AS 08.36.234
	AS 08.36.070	AS 08.36.110	AS 08.36.250

Editor's note: A copy of the *Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students*, adopted by reference in 12 AAC 28.015, or an electronic equivalent may be obtained by contacting the American Dental Association, 211 East Chicago Ave., Chicago, Illinois 60611-2678; Internet address: http://www.ada.org/en/~media/ADA/Advocacy/Files/anesthesia_use_guidelines.

12 AAC 28.020. OPERATIVE PROCEDURE. Repealed 6/24/2012.

12 AAC 28.030. PERSONS OTHER THAN PERMIT HOLDERS. (a) In addition to a dentist holding a valid permit under 12 AAC 28.010 or 12 AAC 28.015, the following persons may administer deep sedation, general anesthesia, or moderate sedation:

(1) a certified registered nurse anesthetist with a valid license under AS 08.68 and 12 AAC 44 from the Board of Nursing;

(2) a physician with a valid license under AS 08.64 and 12 AAC 40 from the State Medical Board to practice anesthesiology.

(b) A dentist employing or collaborating with a person described in (a)(1) or (2) of this section must establish a written agreement with that person to guarantee that, when deep sedation, general anesthesia, or moderate sedation is provided, all facility, equipment, monitoring, and training requirements for all personnel under this chapter have been met. The dentist shall provide the written agreement to the board.

(c) The dentist employing or collaborating with a person described in (a)(1) or (2) of this section must

(1) hold a current registration to prescribe and administer controlled substances in this state issued by the United States Drug Enforcement Administration (DEA);

(2) provide all dental treatment and ensure that the person described in (a)(1) or (2) of this section remains in the dental facility until the patient receiving anesthesia or sedation services is discharged;

(3) ensure that all sedation and anesthesia records provided by the person described in (a)(1) or (2) of this section are maintained as a permanent part of the patient's treatment record; and

(4) notify the board at the initiation of the employment or collaboration by filing notice of the written agreement, on a form provided by the board; the dentist must notify the board of any amendments to the agreement when a dental license is renewed.

Authority: AS 08.36.070

12 AAC 28.040. INFORMED WRITTEN CONSENT. Before administering deep sedation, general anesthesia, or moderate sedation, and before administering minimal sedation to a patient younger than 13 years of age, a dentist shall

- (1) discuss with the patient, or with the patient's parent, legal guardian, or caregiver if the patient is younger than 13 years of age, the nature and objectives of the sedation and anesthesia along with the risks, benefits, and alternatives;
- (2) obtain informed written consent of the patient or of the parent or legal guardian; and
- (3) maintain a copy of the informed written consent in the patient's permanent record.

Authority: AS 08.36.070

12 AAC 28.050. MEDICAL HISTORY. (a) Before administering deep sedation, general anesthesia, or moderate sedation to a patient, and before administering minimal sedation to a patient younger than 13 years of age, a dentist shall

- (1) obtain and record the patient's medical history, including
 - (A) a description of all current treatments;
 - (B) all current medications and dosages;
 - (C) assessment of the patient's body mass index (BMI);
 - (D) impending operations;
 - (E) pregnancies; and
 - (F) other information that may be helpful to the person administering the sedation or anesthesia; and
 - (2) record the questions asked of and answers received from the patient, parent, legal guardian, or caregiver, signed by the patient, parent, legal guardian, or caregiver, as a permanent part of the patient's treatment record.
- (b) The dentist is not required to make a medical examination of the patient and draw medical diagnostic conclusions. If the dentist suspects a problem and calls in a physician for an examination, the dentist may rely upon the physician's conclusion and diagnosis.

Authority: AS 08.36.070

12 AAC 28.060. REQUIREMENTS FOR ADMINISTERING DEEP SEDATION, GENERAL ANESTHESIA, MODERATE SEDATION, OR MINIMAL SEDATION FOR A PATIENT YOUNGER THAN 13 YEARS OF AGE. (a) The document *Guidelines for the Use of Sedation and General Anesthesia by Dentists*, as adopted by the American Dental Association (ADA) House of Delegates, October 2016, is adopted by reference as the standards for administering deep sedation, general anesthesia, and moderate sedation to patients 13 years of age and older and applies to all licensees subject to this chapter, unless otherwise specified in this chapter.

(b) The document *Guideline for Monitoring and Management of Pediatric Patients During and After Sedation for Diagnostic and Therapeutic Procedures*, developed and endorsed by the American Academy of Pediatrics and the American Academy of Pediatric Dentistry, adopted in 2006 and reaffirmed in 2011, is adopted by reference as the standards for administering deep sedation, general anesthesia, moderate sedation, and minimal sedation to patients younger than 13 years of age and applies to all licensees subject to this chapter, unless otherwise specified in this chapter.

(c) When a patient younger than 13 years of age requires sedation or anesthesia, a sedating medication may not be prescribed for or administered to that patient before the patient arrives at the dentist's facility.

(d) When deep sedation, general anesthesia, moderate sedation, or minimal sedation to a patient younger than 13 years old is administered, the dentist

- (1) shall record baseline vital signs before administration of a controlled substance and before discharge, unless the patient's behavior prevents this determination; in this paragraph "controlled substance" has the meaning given in AS 11.71.900;
- (2) shall continually monitor a patient's heart rate, blood pressure, and respiration using electrocardiographic monitoring, pulse oximetry, a blood pressure monitoring device, and a respiration monitoring device;
- (3) shall record sedation and anesthesia records in a timely manner; the records must include
 - (A) blood pressure;
 - (B) heart rate;
 - (C) respiration;
 - (D) blood oxygen saturation;
 - (E) drugs administered, including dosages, the time that drugs were administered, and the route of administration;
 - (F) the length of the procedure;
 - (G) the patient's temperature; if depolarizing medications or volatile anesthetics are administered, temperature must be monitored constantly; and
 - (H) any complications from anesthesia or sedation;
- (4) shall stop the dental procedure if a patient enters a deeper level of sedation than the dentist is permitted to provide until the patient returns to, and is stable at, the intended level of sedation; while returning the patient to the

intended level of sedation, the patient's pulse, respiration, blood pressure, and pulse oximetry must be monitored and recorded at least every five minutes;

(5) may not discharge a patient until the person who administered the sedation or anesthesia, or another practitioner qualified to administer the same level of sedation or anesthesia, determines that the patient's level of consciousness, oxygenation, ventilation, and circulation are satisfactory for discharge and vital signs have been taken and recorded;

(6) shall give postoperative instructions verbally and in writing; the written instructions must include a 24-hour emergency telephone number that directly calls the dental provider;

(7) shall discharge the patient to a responsible individual who has been instructed with regard to the patient's care; and

(8) shall make a discharge entry in the patient's record describing the patient's condition upon discharge and the responsible party to whom the patient was discharged.

(e) When deep sedation, general anesthesia, moderate sedation, or minimal sedation to a patient younger than 13 years of age is administered, the dentist's facility shall

(1) have an operating table or chair that permits the patient to be positioned so the operating team can maintain the airway, quickly alter patient position in an emergency, and provide a firm platform for the administration of basic life support;

(2) have a lighting system that is adequate to permit evaluation of the patient's skin and mucosal color, and a backup lighting system of sufficient intensity to permit conclusion of the operation when power fails;

(3) have suction equipment capable of aspirating gastric contents from the mouth and pharyngeal cavities, and a backup suction device that does not depend on power supply from the facility;

(4) have an oxygen delivery system with adequate full face masks and appropriate connectors that is capable of delivering high flow oxygen to the patient under positive pressure, and an adequate portable backup system;

(5) have a recovery area that has available oxygen, adequate lighting, suction, and electrical outlets, though the recovery area can be the operating area;

(6) have a defibrillator or automated external defibrillator (AED) available and in reach within 60 seconds from any area where anesthesia or sedation is administered;

(7) have written basic emergency procedures established and maintain a staff of supervised personnel capable of handling procedures, complications, and emergency incidents; all personnel involved in patient care must hold a certification in healthcare professional cardiopulmonary resuscitation (CPR);

(8) conduct a training exercise at least two times each calendar year and log each exercise; the log must be signed and dated and must include

(A) the names and positions of facility personnel or practitioners present;

(B) proof of current certification in cardiopulmonary resuscitation (CPR), advanced cardiac life support (ACLS), or pediatric advanced life support (PALS) for each person involved in patient care; and

(C) a completed checklist provided by the board, or an equivalent, to establish competency in handling procedures, complications, and emergency incidents;

(9) maintain the following equipment and drugs in the facility and available for immediate use:

(A) oral and nasal airways of various sizes;

(B) a supra-glottic airway device;

(C) a blood pressure cuff of appropriate size and stethoscope, or equivalent monitoring devices;

(D) a pulse oximeter;

(E) a respiratory monitoring device;

(F) adequate equipment to establish an intravenous infusion, including hardware and fluids;

(G) a narcotic antagonist;

(H) a corticosteroid;

(I) a bronchodilator;

(J) an anticholinergic;

(K) an antiarrhythmic;

(L) an antihistamine;

(M) a coronary artery vasodilator;

(N) a benzodiazepine antagonist;

(O) sterile needles, syringes, tourniquets, and tape;

(P) epinephrine;

(Q) an antiemetic; and

(R) 50 percent dextrose or other anti-hypoglycemic; and

(10) display a permit for moderate sedation, deep sedation, or general anesthesia and current dental license in a conspicuous place where the dentist practices.

Authority: AS 08.36.070

Editor's note: A copy of the *Guidelines for the Use of Sedation and General Anesthesia by Dentists*, adopted by reference in 12 AAC 28.060, or an electronic equivalent may be obtained by contacting the American Dental

Association, 211 East Chicago Ave., Chicago, Illinois 60611-2678; Internet address: http://www.ada.org/~media/ADA/Education%20and%20Careers/Files/anesthesia_use_guidelines.pdf.

An electronic copy of the *Guideline for Monitoring and Management of Pediatric Patients During and After Sedation for Diagnostic and Therapeutic Procedures*, adopted by reference in 12 AAC 28.060, may be obtained from the American Academy of Pediatric Dentistry; Internet address: http://www.aapd.org/media/Policies_Guidelines/G_Sedation.pdf.

12 AAC 28.061. ADDITIONAL REQUIREMENTS FOR ADMINISTERING DEEP SEDATION OR GENERAL ANESTHESIA. In addition to meeting the requirements of 12 AAC 28.060, when deep sedation or general anesthesia is administered,

(1) the dentist's facility must have an operating area large enough to adequately accommodate the patient on a table or in an operating chair and permit an operating team consisting of at least three individuals to freely move about the patient;

(2) the dentist's facility must have a laryngoscope complete with an adequate selection of blades, spare batteries, and bulbs;

(3) the dentist's facility must have endotracheal tubes and appropriate connectors, a supra-glottic airway device, and other appropriate equipment necessary to do an intubation;

(4) the dentist's facility must have a tonsillar or pharyngeal suction tip adaptable to all outlets;

(5) the dentist's facility must have endotracheal tube forceps;

(6) the dentist's facility must have an electrocardiographic monitor;

(7) the dentist shall use an end-tidal carbon dioxide monitor to monitor respiration;

(8) the dentist's facility must have the following emergency equipment and drugs in the facility and available for immediate use:

(A) a vasopressor;

(B) a muscle relaxant;

(C) intravenous medications for treatment of cardiac arrest;

(D) an antihypertensive;

(E) an anticonvulsant; and

(F) dantrolene sodium or its equivalent if administering general anesthesia by means of inhalation;

(9) the provider administering deep sedation or general anesthesia shall establish and maintain a secured intravenous line throughout the procedure, unless poor patient cooperation prevents placement or the ability to maintain the line;

(10) the provider administering deep sedation or general anesthesia shall remain in the operatory room to monitor the patient continuously until the patient is responsive and recovery care can be transferred to a staff member capable of handling procedures, complications, and emergency incidents related to the type of sedation or anesthesia used;

(11) the provider who administered deep sedation or general anesthesia, or another licensed practitioner qualified to administer the same level of sedation or anesthesia, shall remain on the premises of the dentist's facility until the patient has regained consciousness and is discharged; and

(12) if the deep sedation or general anesthesia provider is the treating dentist, the treatment team shall include a second trained person to monitor and observe the patient at all times during the procedure, and a third person to assist the dentist.

Authority: AS 08.36.070

12 AAC 28.062. ADDITIONAL REQUIREMENTS FOR ADMINISTERING MODERATE SEDATION, OR MINIMAL SEDATION FOR A PATIENT YOUNGER THAN 13 YEARS OF AGE. In addition to meeting the requirements of 12 AAC 28.060, when moderate sedation is administered to a patient of any age, or minimal sedation is administered to a patient younger than 13 years of age,

(1) the dentist's facility must have an operating area of size and design to permit access of emergency equipment and personnel and to permit effective emergency management;

(2) the dentist shall use an end-tidal carbon dioxide monitor or a pre-cordial stethoscope to monitor respiration; and

(3) the treatment team shall consist of the treating dentist and a second person to assist, monitor, and observe the patient; both the treating dentist and the second person shall be in the operating area with the patient throughout the dental procedure.

Authority: AS 08.36.070

12 AAC 28.065. EXCEPTIONS TO PERMIT REQUIREMENTS UNDER 12 AAC 28.010 - 12 AAC 28.080. The requirement to obtain a permit under 12 AAC 28.010 or 12 AAC 28.015 does not apply to

(1) the administration of local anesthesia;

- (2) the administration of nitrous oxide sedation to patients of any age if the delivery system for the nitrous oxide-oxygen contains a mechanism that guarantees that an oxygen concentration of at least 25 percent will be administered to the patient at all times during the administration of the nitrous oxide;
- (3) the administration of an oral medication to achieve minimal sedation if
 - (A) the patient is 13 years of age or older;
 - (B) the dose of the administered drug is within the United States Food and Drug Administration's (FDA) recommended dose as printed in that agency's approved labeling for unmonitored home use; the dentist may not use a second drug without obtaining a permit under 12 AAC 28.010 or 12 AAC 28.015, as applicable;
 - (C) the dose of the administered drug is used in combination with nitrous oxide or oxygen and does not exceed minimal sedation; and
 - (D) the patient is re-appointed if the intended level of minimal sedation is not achieved; or
- (4) the administration of deep sedation, general anesthesia, moderate sedation, or minimal sedation in a licensed hospital, a state-operated hospital, or a facility directly maintained or operated by the federal government.

Authority: AS 08.36.070 AS 08.36.315 AS 08.36.360

12 AAC 28.068. INSPECTIONS. (a) The board may require an on-site inspection of the dentist's facility where deep sedation, general anesthesia, or moderate sedation is administered.

(b) A dentist will be notified in writing if an on-site inspection is required and will be provided with information about how the board conducts an on-site inspection. A dentist shall cooperate in scheduling a timely inspection not later than 90 days after receiving notice of an inspection.

(c) A designee of the board or the board's investigator shall carry out the inspection.

(d) An inspection shall be conducted according to the guidelines provided in the *Office Anesthesia Evaluation Manual*, Eighth Edition, 2012, adopted by reference, and may include the evaluation of equipment, medications, patient records, documentation of personnel training, and other items as determined necessary by the board, the designee of the board, or the board's investigator.

(e) If a dentist maintains membership in the American Association of Oral and Maxillofacial Surgeons (AAOMS) and receives notification from the board that an on-site inspection is required, the board may accept reports that result from the periodic office examinations required by that association.

(f) If the equipment, facilities, or personnel training are inadequate to assure safe use of sedation or anesthesia, the board will notify the dentist in writing and will conduct a follow-up inspection. If the board finds that the equipment, facilities, or trained personnel are still inadequate to assure safe use of sedation or anesthesia, the board will deny issuance of a permit under 12 AAC 28.010 or 12 AAC 28.015, immediately suspend a permit issued under 12 AAC 28.010 or 12 AAC 28.015, or order the dentist to immediately cease sedation or anesthesia services provided under 12 AAC 28.030.

(g) This section does not apply to investigations by the board, a designee of the board, or the board's investigator upon an allegation that a licensee has violated a provision of AS 08.32, AS 08.36, or this chapter.

Authority: AS 08.01.075 AS 08.01.087 AS 08.36.070

Editor's note: A copy of the *Office Anesthesia Evaluation Manual*, adopted by reference in 12 AAC 28.068, can be obtained by contacting the American Dental Association, 211 East Chicago Avenue, Chicago, Illinois 60611-2678.

12 AAC 28.070. SUSPENSION OR REVOCATION OF PERMIT. The board will automatically suspend or revoke a permit under 12 AAC 28.010 or 12 AAC 28.015 upon the suspension or revocation of the holder's license to practice dentistry in the state.

Authority: AS 08.36.070 AS 08.36.315 AS 08.36.320

12 AAC 28.080. MANDATORY REPORTING. (a) If a dental patient dies or experiences sedation or anesthesia complications that require hospitalization or emergency room care during or immediately after receiving sedation or general anesthesia, the dentist who treated the patient shall submit a written or electronic report of the incident to the board not later than 48 hours after learning of the death or hospitalization. The report must include

- (1) the name, age, and address of the patient;
- (2) the names of the dentist and of other personnel or providers present during the treatment;
- (3) the address of the facility where the treatment took place;
- (4) the medical history of the patient;
- (5) a description of the type of sedation or anesthetic that was used and the dosages of drugs administered to the patient;
- (6) a narrative description of the incident including approximate times and evolution of symptoms; and
- (7) as requested by the board, a designee of the board, or the board's investigator, additional information that is relevant to investigating the incident.

(b) Not later than 30 days after the receipt of a report required under (a) of this section, the board investigator may review the report, consult with a member of the board who is a dentist licensed under AS 08.36, and make a recommendation in writing as to whether further investigation by the board or the board's investigator should be made. The department will make a report of recommendations under this subsection at the next board meeting. If a recommendation by the department is that further investigation is not warranted, the department will make only a summary report. The board may accept the recommendation or request the department to make further investigations.

Authority: AS 08.01.087 AS 08.36.070 AS 08.36.315

12 AAC 28.090. DEFINITION. Repealed 4/13/91.

ARTICLE 2. EXAMINATIONS FOR DENTAL LICENSURE.

Section

- 100. (Repealed)**
- 105. (Repealed)**
- 110. (Repealed)**
- 120. (Repealed)**
- 130. (Repealed)**
- 140. (Repealed)**
- 150. (Repealed)**
- 160. (Repealed)**
- 170. (Repealed)**
- 180. (Repealed)**
- 190. (Repealed)**
- 200. (Repealed)**
- 210. (Repealed)**
- 220. (Repealed)**
- 230. (Repealed)**
- 240. (Repealed)**
- 250. (Repealed)**
- 260. (Repealed)**
- 270. (Repealed)**
- 280. (Repealed)**
- 290. (Repealed)**
- 300. (Deleted)**

12 AAC 28.100. EXAMINERS APPOINTED. Repealed 5/29/98.

12 AAC 28.105. EXAMINATIONS. Repealed 10/19/2008.

12 AAC 28.110. IDENTIFICATION OF APPLICANT. Repealed 5/29/98.

12 AAC 28.120. OPERATORY ASSIGNED TO APPLICANT. Repealed 5/29/98.

12 AAC 28.130. EQUIPMENT. Repealed 5/29/98.

12 AAC 28.140. PATIENTS. Repealed 5/29/98.

12 AAC 28.150. ASSISTANTS. Repealed 5/29/98.

12 AAC 28.160. SECTIONS OF EXAMINATION. Repealed 5/29/98.

12 AAC 28.170. TIME ALLOWED FOR CLINICAL EXAMINATION. Repealed 5/29/98.

12 AAC 28.180. CRITERIA FOR TEETH TO BE RESTORED. Repealed 5/29/98.

12 AAC 28.190. LOCAL ANESTHESIA; RUBBER DAM. Repealed 5/29/98.

12 AAC 28.200. ITEMS TO BE TURNED IN TO THE BOARD. Repealed 5/29/98.

12 AAC 28.210. ALL WORK PERFORMED IN CLINIC BY APPLICANT. Repealed 5/29/98.

12 AAC 28.220. LABORATORY PROCEDURES. Repealed 5/29/98.

12 AAC 28.230. EXAMINERS MAY CONTACT PATIENT, TAKE PHOTOGRAPHS AND MODELS. Repealed 5/29/98.

12 AAC 28.240. STEPS OF OPERATIONS CHECKED BY EXAMINERS. Repealed 5/29/98.

12 AAC 28.250. ERRORS OR OMISSIONS REQUIRING FAILING GRADE. Repealed 5/29/98.

12 AAC 28.260. GRADING OF A BOARD CONDUCTED CLINICAL EXAMINATION. Repealed 5/29/98.

12 AAC 28.270. COMPUTATION OF GRADE. Repealed 5/29/98.

12 AAC 28.280. NOTIFICATION OF GRADES. Repealed 5/29/98.

12 AAC 28.290. REEXAMINATION. Repealed 5/29/98.

12 AAC 28.300. DENIAL OF LICENSURE. Deleted 1/28/2000.

ARTICLE 3. ADMINISTRATION OF LOCAL ANESTHETIC AGENTS AND NITROUS OXIDE SEDATION BY DENTAL HYGIENISTS.

Section

310. (Deleted)

320. Application for certification to administer local anesthetic agents

325. Application for certification to administer nitrous oxide sedation

330. Approval of course of instruction

340. Requirements for course of instruction in local anesthetics

345. Requirements for course of instruction for administering nitrous oxide

350. Expiration of certification

360. Registry

12 AAC 28.310. ADMINISTRATION OF LOCAL ANESTHETIC AGENTS. Deleted 5/6/88.

12 AAC 28.320. APPLICATION FOR CERTIFICATION TO ADMINISTER LOCAL ANESTHETIC AGENTS. (a) The board will issue, to a dental hygienist licensed in this state, a certification to administer local anesthetic agents if the licensed hygienist submits

- (1) a completed, notarized application on the form provided by the department;
- (2) the applicable fees required in 12 AAC 02.190;
- (3) written verification of successful completion of an accredited college or university course of instruction in the administration of local anesthetics, approved by the board under 12 AAC 28.330 - 12 AAC 28.340; and
- (4) evidence of having passed the local anesthetic portion of the Western Regional Examining Board (WREB) dental hygienist examination within the five years immediately preceding the date of application.

(b) Instead of meeting the requirements of (a)(4) of this section, an applicant who is currently licensed or certified in another licensing jurisdiction to administer local anesthetic agents may submit evidence showing that the

- (1) applicant's license or certification in that licensing jurisdiction is current and in good standing;
- (2) applicant has actively, as part of routine dental hygiene procedure, administered local anesthetic agents at least an average of once per week during the two years immediately preceding the date of application.

Authority: AS 08.32.110 AS 08.36.070

12 AAC 28.325. APPLICATION FOR CERTIFICATION TO ADMINISTER NITROUS OXIDE SEDATION. The board will issue a certification to administer nitrous oxide sedation under direct or indirect supervision to a dental hygienist licensed in this state if the hygienist

- (1) submits a completed, notarized application on the form provided by the department;
- (2) pays the applicable fee required in 12 AAC 02.190; and
- (3) provides written verification of successful completion of an accredited college or university course of instruction in the administration of nitrous oxide, approved by the board under 12 AAC 28.345.

Authority: AS 08.01.065 AS 08.32.110 AS 08.36.070

12 AAC 28.330. APPROVAL OF COURSE OF INSTRUCTION. The board may, upon its own motion or upon the request of any interested person, approve a course of instruction upon receipt of

- (1) the name of the college or university sponsoring the course;
- (2) the name of the accredited program and faculty member presenting the course;
- (3) a course outline that verifies inclusion of the subjects and procedures required under
 - (A) 12 AAC 28.340 if certification to administer local anesthesia is sought; or
 - (B) 12 AAC 28.345, if certification to administer nitrous oxide sedation is sought; and
- (4) an explanation of the evaluation procedures used to determine successful completion of the course.

Authority: AS 08.32.110

12 AAC 28.340. REQUIREMENTS FOR COURSE OF INSTRUCTION IN LOCAL ANESTHETICS. A course of instruction in local anesthetics must include

- (1) at least 16 clock hours of didactic instruction;
- (2) at least eight clock hours of laboratory instruction during which time three injections each of the anterior palatine, incisive palatine, anterior and middle superior alveolar, posterior superior alveolar, inferior alveolar, mental, long buccal, and infiltration injections are administered;
- (3) clinical experience sufficient to establish the hygienist's ability to adequately anesthetize the entire dentition and supporting structures in a clinical setting, requiring not less than six clock hours, under the direct supervision of course faculty;
- (4) instruction in
 - (A) medical history evaluation procedures;
 - (B) anatomy of the head, neck and oral cavity as it relates to administering local anesthetic agents;
 - (C) pharmacology of local anesthetic agents, vasoconstrictors and preservatives, including physiologic actions, types of anesthetics, and maximum dose per weight;
 - (D) systemic conditions which influence selection and administration of anesthetic agents;
 - (E) signs and symptoms of reactions to local anesthetic agents, including monitoring of vital signs;
 - (F) management of reactions to, or complications associated with, the administration of local anesthetic agents to include
 - (i) a currently valid cardiopulmonary resuscitation certification card from either the American Heart Association or the American Red Cross; or
 - (ii) a provision for instruction and certification in cardiopulmonary resuscitation from an instructor certified in cardiopulmonary resuscitation by the American Heart Association or the American Red Cross as part of the course curriculum;
 - (G) selection and preparation of the armamentaria for administering various local anesthetic agents;
 - (H) methods of administering local anesthetic agents with emphasis on
 - (i) technique;
 - (ii) aspiration;
 - (iii) slow injection;
 - (iv) minimum effective dosage;
- (5) instruction by a faculty member of the college or university presenting the course; and
- (6) procedures for determining whether the hygienist has acquired the necessary knowledge and proficiency to administer local anesthetic agents.

Authority: AS 08.32.110

12 AAC 28.345. REQUIREMENTS FOR COURSE OF INSTRUCTION FOR ADMINISTERING NITROUS OXIDE. (a) To satisfy the requirements for a certification under 12 AAC 28.325, a course of instruction for administering nitrous oxide must be provided by an organization accredited by the Commission on Dental Accreditation (CODA) of the American Dental Association or approved by the board.

(b) To satisfy the requirements for certification under 12 AAC 28.325, a course of instruction for administering nitrous oxide must include

- (1) a minimum of three hours of clinical instruction sufficient to establish the ability to
 - (A) inspect, operate, and decontaminate nitrous oxide delivery and scavenging systems;
 - (B) properly induce nitrous oxide sedation; and
 - (C) recognize and counteract complications;
- (2) a minimum of three hours of didactic instruction, including
 - (A) sedation techniques;
 - (B) physiology of respiration and pharmacology of nitrous oxide;
 - (C) nitrous oxide machines;
 - (D) induction techniques; and
 - (E) complications and their management; and
- (3) procedures for determining whether the dental hygienist has acquired the necessary knowledge and proficiency to administer nitrous oxide sedation.

Authority: AS 08.32.110 AS 08.36.070

12 AAC 28.350. EXPIRATION OF CERTIFICATION. (a) A certification to administer local anesthetic agents or nitrous oxide sedation expires on the date the dental hygienist's license expires or is revoked or suspended.

(b) A certification to administer local anesthesia or nitrous oxide sedation remains active as long as the holder's dental hygiene license is active and in good standing.

(c) The board will notify a dental hygienist of initial certification to provide local anesthesia or nitrous oxide sedation and thereafter certification will be listed on the dental hygiene license.

Authority: AS 08.32.110 AS 08.36.070 AS 08.36.315

12 AAC 28.360. REGISTRY. The board will maintain a registry of all board approved courses of instruction and all dental hygienists certified to administer local anesthetic agents or nitrous oxide sedation.

Authority: AS 08.32.110 AS 08.36.070

ARTICLE 4. CONTINUING PROFESSIONAL COMPETENCE REQUIREMENTS.

Section

- 400. Continuing education requirements for dentistry and dental hygienists licensees**
- 405. Continuing education requirements for first time renewal of a license**
- 410. Approved continuing education courses**
- 420. Report of continuing education**

12 AAC 28.400. CONTINUING EDUCATION REQUIREMENTS FOR DENTISTRY AND DENTAL HYGIENISTS LICENSEES. (a) Except as provided in 12 AAC 28.405(a), an applicant for renewal of a dentistry license shall submit evidence of continued professional competence by documenting

- (1) completion of at least 32 contact hours of continuing education;
- (2) cardiopulmonary resuscitation (CPR) certification, that meets the requirements of AS 08.36.070 and 12 AAC 28.920; and
- (3) if the applicant holds a valid federal Drug Enforcement Administration registration number, verification that the applicant has completed not less than two hours of continuing education in pain management and opioid use and addiction during the concluding licensing period.

(b) Except as provided in 12 AAC 28.405(b), an applicant for renewal of a dental hygienist license shall submit evidence of continued professional competence by documenting

- (1) completion of at least 20 contact hours of continuing education; and
- (2) cardiopulmonary resuscitation (CPR) certification, that meets the requirements of AS 08.36.070 and 12 AAC 28.920.

(c) For the purpose of this section,

- (1) one "contact hour" equals a minimum of 50 minutes of instruction;
 - (2) one academic semester credit hour equals 15 contact hours;
 - (3) one academic quarter credit hour equals 10 contact hours;
 - (4) one continuing education unit equals one contact hour;
 - (5) one continuing education credit equals one contact hour.
- (d) Credit is given only for class hours and not hours devoted to class preparation.

Authority: AS 08.32.071 AS 08.36.070 AS 08.36.250

12 AAC 28.405. CONTINUING EDUCATION REQUIREMENTS FOR FIRST TIME RENEWAL OF A LICENSE. (a) An applicant applying for renewal of a dentistry license for the first time shall submit evidence of continued professional competence by documenting

(1) completion of at least one-half of the number of contact hours of continuing education required by 12 AAC 28.400(a)(1) for each complete calendar year that the applicant was licensed during the concluding licensing period; and

(2) cardiopulmonary resuscitation (CPR) certification that meets the requirements of AS 08.36.070 and 12 AAC 28.920.

(b) An applicant applying for renewal of a dental hygienist license for the first time shall submit evidence of continued professional competence by documenting

- (1) completion of at least one-half of the number of contact hours of continuing education required by 12 AAC 28.400(b)(1) for each complete calendar year that the applicant was licensed during the concluding licensing period; and
- (2) cardiopulmonary resuscitation (CPR) certification that meets the requirements of AS 08.36.070 and 12 AAC 28.920.

Authority: AS 08.32.071 AS 08.36.070 AS 08.36.250

12 AAC 28.410. APPROVED CONTINUING EDUCATION COURSES. (a) Except as provided in (c) of this section, and subject to the limits set out in (g) and (h) of this section, only the following courses will be accepted as continuing education under 12 AAC 28.400 — 12 AAC 28.420, and only if participation in those courses is verifiable and the subject matter contributes to the professional knowledge and development of the practitioner or enhances the ability to provide services to the patient:

- (1) courses, workshops, or symposiums approved, provided, or sponsored by the American Dental Hygienist's Association (ADHA), Academy of General Dentistry (AGD), or American Dental Association (ADA);
- (2) other courses, workshops, or symposiums approved by the board that are offered by dental or dental hygiene colleges or universities, or similar dental or dental hygiene organizations or associations;
- (3) organized study club courses approved by the board;
- (4) self-study programs offered by a dental or dental hygiene college or university, the AGD, or the ADA that have been approved by the board.

(b) Repealed 1/15/2003.

(c) The continuing education contact hours required by 12 AAC 28.400 or 12 AAC 28.405 for renewal of a dentistry license or a dental hygienist license may include no more than four hours of CPR training for the entire renewal period.

(d) An applicant for renewal of a dentistry or dental hygienist license may receive contact hours of continuing education for the applicant's presentation of a lecture or course that meets the requirements of (a) of this section. For the purpose of this section, contact hours for the presentation of a lecture or course will be awarded as follows:

- (1) three contact hours for each 50 minutes of an initial presentation; and
- (2) one contact hour for each 50 minutes of a repeat presentation.

(e) Acceptance or approval by the board under this section of a course, workshop, or symposium is valid for two years, if a change is not made to its content.

(f) If a change is made to the content of a course, workshop, or symposium or more than two years have passed since its acceptance or approval by the board, the course, workshop, or symposium must be resubmitted to the board for acceptance or approval under this section.

(g) Courses in practice management and risk management are limited to three hours per licensing period.

(h) Not more than two credit hours of continuing education may apply for at least two hours of volunteer service in a dental related setting.

Authority: AS 08.32.071 AS 08.36.070 AS 08.36.250

12 AAC 28.420. REPORT OF CONTINUING EDUCATION. (a) An applicant for renewal of a dentistry license or a dental hygienist license shall submit, on a renewal form provided by the department, a signed statement of compliance with the continuing education requirements under 12 AAC 28.400 – 12 AAC 28.410, as described in 12 AAC 02.960.

(b) An applicant for renewal is responsible for maintaining adequate and detailed records of continuing education courses taken, as described in 12 AAC 02.960(f), and shall make them available to the board upon request.

(c) Falsification of any written evidence submitted to the board under this section is grounds for license revocation or suspension under AS 08.32.160(1) and (5) and AS 08.36.315(1) and (7).

Authority: AS 08.32.071 AS 08.36.070 AS 08.36.315
AS 08.32.160 AS 08.36.250

ARTICLE 5. DENTAL HYGIENIST EXAMINATION.

Section

500. (Repealed)

12 AAC 28.500. DENTAL HYGIENIST EXAMINATION. Repealed 10/19/2008.

ARTICLE 6.

PARENTERAL SEDATION.

Section

600. (Repealed)

610. (Repealed)

620. (Repealed)

630. (Repealed)

640. (Repealed)

12 AAC 28.600. ADMINISTRATION OF PARENTERAL SEDATION. Repealed 4/14/2018.

12 AAC 28.610. PARENTERAL SEDATION PERMIT. Repealed 4/14/2018.

12 AAC 28.620. EDUCATION, TRAINING, AND CERTIFICATION REQUIREMENTS. Repealed 4/14/2018.

12 AAC 28.630. EQUIPMENT, FACILITIES, AND STAFF STANDARDS. Repealed 4/14/2018.

12 AAC 28.640. MANDATORY REPORTING. Repealed 4/14/2018.

ARTICLE 7. PROFESSIONAL PRACTICES.

Section

700. Identification of dental prosthesis

710. (Repealed)

720. (Repealed)

730. Control over professional dental matters and operation of dental equipment

12 AAC 28.700. IDENTIFICATION OF DENTAL PROSTHESIS. All non-metal full base dentures shall be permanently identified with the first initial and last name of the owner at the time of processing of the dentures.

Authority: AS 08.36.070

12 AAC 28.710. USE OF LASER DEVICES. Repealed 11/15/2005.

12 AAC 28.720. ADMINISTRATION OF NITROUS OXIDE. Repealed 4/14/2018.

12 AAC 28.730. CONTROL OVER PROFESSIONAL DENTAL MATTERS AND OPERATION OF DENTAL EQUIPMENT. In evaluating whether a person has engaged in the practice of dentistry under AS 08.36.360, the board will consider that a person "exercises control over professional dental matters or the operation of dental equipment" if the person determines, interprets, specifies, limits, prescribes, regulates, or otherwise controls by policy, lease, or other arrangement

(1) the use of dental equipment or material while the equipment or material is being used for the provision of dental treatment, whether the treatment is provided by the dentist, a dental hygienist, or a dental assistant;

(2) the selection of a course of treatment for the patient, the procedures, or materials to be used as part of the course of treatment and the manner in which the course of treatment is carried out by the dentist;

(3) the patient records of a dentist;

(4) policies and decisions relating to fees, rebates, billing, and advertising if the practice would result in the violation of AS 08.36 or this chapter, including the Principles of Ethics and Code of Professional Conduct adopted by reference under 12 AAC 28.905;

(5) decisions relating to the use of auxiliary personnel for the delivery of patient care in the dentist's practice and the hours of practice if the hours would impair the dentist's ability to safely and professionally deliver care for patients.

Authority: AS 08.36.070

AS 08.36.360

AS 08.36.367

ARTICLE 8. RESTORATIVE FUNCTIONS BY DENTAL HYGIENISTS.

Section

- 750. Restorative functions by dental hygienists**
- 760. Approval of restorative function courses for dental hygienists**
- 770. Requirements for restorative function courses for dental hygienists**
- 780. Renewal of dental hygienist's restorative function license endorsement**

12 AAC 28.750. RESTORATIVE FUNCTIONS BY DENTAL HYGIENISTS. (a) The board will issue an endorsement to perform restorative functions to a dental hygienist licensed in this state who meets the requirements of AS 08.32.085 and this section.

- (b) An applicant for an endorsement under this section must submit to the department
- (1) a complete, notarized application on a form provided by the department;
 - (2) the applicable fees under 12 AAC 02;
 - (3) verification that the applicant has successfully completed either
 - (A) a restorative function program accredited by the Commission on Dental Accreditation of the American Dental Association; or
 - (B) another course of instruction approved by the board under 12 AAC 28.760; and
 - (4) verification that the applicant either
 - (A) is licensed in another state or United States territory to perform restorative functions; or
 - (B) within the five years immediately before the date of application for an endorsement under this section, the applicant has passed either the restorative function examination of the Western Regional Examining Board or a restorative function examination approved by the board as equivalent to the restorative function examination of the Western Regional Examining Board.

Authority: AS 08.32.085 AS 08.32.187 AS 08.36.070

12 AAC 28.760. APPROVAL OF RESTORATIVE FUNCTION COURSES FOR DENTAL HYGIENISTS. The board may, upon its own motion or upon request of any interested person, approve a course of instruction upon receipt of an application that includes

- (1) the name of the course sponsor;
- (2) the name and credentials of the course presenter; and
- (3) a course outline showing that the course content meets the requirements of 12 AAC 28.770.

Authority: AS 08.32.085 AS 08.32.187 AS 08.36.070

12 AAC 28.770. REQUIREMENTS FOR RESTORATIVE FUNCTION COURSES FOR DENTAL HYGIENISTS. A course of instruction for restorative functions for dental hygienists must include

- (1) the physical, chemical, and biological properties of dental materials, including amalgam and composite materials;
- (2) the limitations and acceptability of a dental material based on the physical, chemical, and biological properties of the material;
- (3) proper safety when using dental materials, including appropriate infection control and mercury hygiene;
- (4) dental anatomy and occlusion;
- (5) isolation procedures;
- (6) proper placement and finishing of restorative materials;
- (7) assessment outcomes that measure the stated goals and objectives;
- (8) didactic course hours sufficient to meet the restorative course requirements of this section;
- (9) laboratory experience to be able to place and finish all classes of restorations; and
- (10) a required clinical proficiency to establish a demonstrated ability to place and finish all classes of restorations.

Authority: AS 08.32.085 AS 08.32.187 AS 08.36.070

12 AAC 28.780. RENEWAL OF DENTAL HYGIENIST'S RESTORATIVE FUNCTION LICENSE ENDORSEMENT. (a) A dental hygienist's endorsement to perform restorative functions expires on the date the dental hygienist's license expires.

(b) A dental hygienist's endorsement to perform restorative functions will be renewed when the dental hygienist's license to practice is renewed.

(c) The board will maintain a registry of dental hygienists who have an endorsement under AS 08.32.085 and 12 AAC 28.750 to perform restorative functions.

Authority: AS 08.32.071 AS 08.32.187 AS 08.36.070
AS 08.32.085

ARTICLE 9.

**CORONAL POLISHING AND RESTORATIVE FUNCTIONS
BY DENTAL ASSISTANTS.**

Section

- 810. Coronal polishing by dental assistants**
- 820. Approval of coronal polishing courses**
- 830. Requirements for coronal polishing courses**
- 840. Renewal of coronal polishing certificate**
- 850. Restorative functions by dental assistants**
- 860. Approval of restorative function courses for dental assistants**
- 870. Requirements for restorative function courses for dental assistants**
- 880. Renewal of dental assistant's restorative function certificate**

12 AAC 28.810. CORONAL POLISHING BY DENTAL ASSISTANTS. (a) The board will issue a certificate to perform coronal polishing to a dental assistant who meets the requirements of AS 08.36.342 and this section.

(b) An applicant for certification under this section must submit to the department

- (1) a complete, notarized application on a form provided by the department;
- (2) the following fees:
 - (A) \$60 nonrefundable application fee;
 - (B) \$60 certification fee;
- (3) either

(A) verification of successful completion of a course of instruction approved by the board under 12 AAC 28.820; or

(B) if the applicant is currently licensed or certified in another licensing jurisdiction to perform coronal polishing, evidence showing that the applicant's license or certificate to perform coronal polishing is current and in good standing in that licensing jurisdiction and a list of course of instruction for coronal polishing; the board will only approve the course of instruction under this subparagraph if it substantially complies with the requirements set out in 12 AAC 28.830.

Authority: AS 08.36.070 AS 08.36.342 AS 08.36.346

12 AAC 28.820. APPROVAL OF CORONAL POLISHING COURSES. The board may, upon its own motion or upon request of any interested person, approve a course of instruction upon receipt of an application that includes

- (1) the name of the course sponsor;
- (2) the name of the instructor presenting the course;
- (3) a course outline showing that the course content meets the requirements of 12 AAC 28.830;
- (4) an explanation of the evaluation procedures used to determine successful completion of the course.

Authority: AS 08.36.070 AS 08.36.342

12 AAC 28.830. REQUIREMENTS FOR CORONAL POLISHING COURSES. A course of instruction in coronal polishing must include didactic and clinical instruction in

- (1) characteristics of abrasives used for polishing;
- (2) aerosol production during polishing;
- (3) effects of heat production during polishing;
- (4) removal of tooth structure by polishing;
- (5) indications and contraindications of polishing;
- (6) selective polishing techniques;
- (7) coronal polishing by removing soft plaque and stain from exposed enamel utilizing appropriate rotary instrument and suitable polishing agent; and
- (8) proper infection control techniques while performing rotary coronal polishing.

Authority: AS 08.36.070 AS 08.36.342

12 AAC 28.840. RENEWAL OF CORONAL POLISHING CERTIFICATE. (a) A dental assistant certificate to perform coronal polishing must be renewed biennially on or before February 28 of odd-numbered years. In order to renew a certificate to perform coronal polishing, a dental assistant must submit to the department a

- (1) completed application for renewal on a form provided by the department; and
- (2) \$60 certificate renewal fee.

(b) The board will maintain a registry of dental assistants certified to perform coronal polishing under AS 08.36.342.

Authority: AS 08.36.070 AS 08.36.342

12 AAC 28.850. RESTORATIVE FUNCTIONS BY DENTAL ASSISTANTS. (a) The board will issue a certificate to perform restorative functions to a dental assistant in this state who meets the requirements of AS 08.36.344 and this section.

- (b) An applicant for certification under this section must submit to the department
- (1) a complete, notarized application on a form provided by the department;
 - (2) the following fees:
 - (A) \$60 nonrefundable application fee;
 - (B) \$60 certification fee;
 - (3) verification that the applicant has successfully completed either
 - (A) a restorative function program accredited by the Commission on Dental Accreditation of the American Dental Association; or
 - (B) another course of instruction approved by the board under 12 AAC 28.860; and
 - (4) verification that the applicant either
 - (A) has legal authorization from another state or jurisdiction to perform restorative functions; or
 - (B) within the five years immediately before the date of application for a certificate under this section, the applicant has passed either the restorative function examination of the Western Regional Examining Board or a restorative function examination approved by the board as equivalent to the restorative function examination of the Western Regional Examining Board.

Authority: AS 08.36.070 AS 08.36.344

12 AAC 28.860. APPROVAL OF RESTORATIVE FUNCTION COURSES FOR DENTAL ASSISTANTS. The board may, upon its own motion or upon request of any interested person, approve a course of instruction upon receipt of an application that includes

- (1) the name of the course sponsor;
- (2) the name and credentials of the course presenter; and
- (3) a course outline showing that the course content meets the requirements of 12 AAC 28.870.

Authority: AS 08.36.070 AS 08.36.344

12 AAC 28.870. REQUIREMENTS FOR RESTORATIVE FUNCTION COURSES FOR DENTAL ASSISTANTS. (a) A course of instruction for restorative functions for dental assistants must include

- (1) the physical, chemical, and biological properties of dental materials, including amalgam and composite materials;
- (2) the limitations and acceptability of a dental material based on the physical, chemical, and biological properties of the material;
- (3) proper safety when using dental materials, including appropriate infection control and mercury hygiene;
- (4) dental anatomy and occlusion;
- (5) isolation procedures;
- (6) proper placement and finishing of restorative materials;
- (7) assessment outcomes that measure the stated goals and objectives;
- (8) classroom hours sufficient to meet the restorative course requirements of this section;
- (9) laboratory experience to be able to place and finish all classes of restorations; and
- (10) a required clinical proficiency to establish a demonstrated ability to place and finish all classes of restorations.

Authority: AS 08.36.070 AS 08.36.344

12 AAC 28.880. RENEWAL OF DENTAL ASSISTANT'S RESTORATIVE FUNCTION CERTIFICATE. (a) A dental assistant's restorative function certificate must be renewed biennially on or before February 28 of odd-numbered years. In order to renew a certificate to perform restorative function, a dental assistant must submit to the department a

- (1) completed application for renewal on a form provided by the department; and
 - (2) \$60 certificate renewal fee.
- (b) The board will maintain a registry of dental assistants certified under AS 08.36.344 and 12 AAC 28.850 to perform restorative functions.

Authority: AS 08.36.070 AS 08.36.344

ARTICLE 10. GENERAL PROVISIONS.

Section

- 900. Current address
- 905. Ethical standards
- 906. Disciplinary sanctions
- 908. Additional qualifications for licensure
- 910. Denial of dental license
- 912. Denial of dental hygiene license
- 915. Application deadline for personal interview
- 920. CPR certification
- 925. Lapsed licenses
- 930. (Repealed)
- 935. Dental hygienist licensure by examination
- 937. Dental hygienist licensure by credentials
- 938. Dental educational requirements
- 940. Dental licensure by examination
- 950. (Repealed)
- 951. Dental licensure by credentials
- 952. (Repealed)
- 953. Registration with the prescription drug monitoring program controlled substance prescription database
- 955. Courtesy license
- 956. Collaborative agreement requirements
- 960. Registration of dental radiological equipment
- 965. Inspection of dental radiological equipment
- 970. Registration and inspection forms; review of completed forms
- 990. Definitions

12 AAC 28.900. CURRENT ADDRESS. A licensee shall maintain a current, valid mailing address on file with the division at all times. The latest mailing address on file for an active, inactive or lapsed license is the address of the licensee for official communications, notifications and service of legal process.

Authority: AS 08.36.070(a) AS 08.36.080

12 AAC 28.905. ETHICAL STANDARDS. (a) The "Code of Ethics for Dental Hygienists", as set out in the American Dental Hygienists' Association document titled *Bylaws – Code of Ethics*, dated June 23, 2014, is adopted by reference as the ethical standards for dental hygienists, and applies to all dental hygienists in the state.

(b) The American Dental Association's *Principles of Ethics and Code of Professional Conduct*, with official advisory opinions revised to April 2012, is adopted by reference as the ethical standards for dentists, and applies to all dentists in the state.

Authority: AS 08.01.070 AS 08.36.070 AS 08.36.110
AS 08.32.160

Editor's note: A copy of the "Code of Ethics for Dental Hygienists," adopted by reference in 12 AAC 28.905, is available for inspection at the Department of Commerce, Community, and Economic Development, Division of Corporations, Business and Professional Licensing, Juneau, Alaska, or may be obtained from the American Dental Hygienists' Association, 444 North Michigan Avenue, Suite 3400, Chicago, IL 60611-3980. A copy of the *Principles of Ethics and Code of Professional Conduct*, adopted by reference in 12 AAC 28.905, is available for inspection at the Department of Commerce, Community, and Economic Development, Division of Corporations, Business and Professional Licensing, Juneau, Alaska, or may be obtained from the American Dental Association, Council on Ethics, Bylaws and Judicial Affairs, 211 East Chicago Avenue, Chicago, IL 60611.

12 AAC 28.906. DISCIPLINARY SANCTIONS. The following acts, in addition to those specified in AS 08.36.315, constitute grounds for disciplinary sanctions:

(1) failing to prepare and maintain accurate, complete, and legible records in accordance with generally accepted standards of practice for each patient or to make those records available to the board or the board's representatives for inspection for investigation purposes;

(2) failing to provide copies of complete patient records in the licensee's custody and control within 30 days after receipt of a written request from the patient or the patient's guardian;

(3) failing to cooperate with an official investigation by the board or the board's representatives, including failing to timely provide requested information;

(4) failing to allow the board or the board's representative, upon written request, to examine and have access to records maintained by the licensee that relate to the licensee's practice under AS 08.36;

(5) failing to report to the board, not later than 30 days after the effective date of the action, any disciplinary action against the licensee taken by another licensing jurisdiction, health care entity, or law enforcement agency.

Authority: AS 08.36.070 AS 08.36.315

12 AAC 28.908. ADDITIONAL QUALIFICATIONS FOR LICENSURE. (a) In addition to the requirements of AS 08.32 and the other requirements of this chapter, to be eligible for licensure as a dental hygienist an applicant shall provide, with the application, on a form provided by the department and signed by the applicant,

(1) a statement that the applicant understands that a licensed dental hygienist shall adhere to the ethical standards for dental hygienists that are established by the board, and that failure to adhere to the ethical standards may result in the imposition of a sanction that is described in AS 08.32.160; and

(2) a certification that the applicant, if licensed as a dental hygienist, will adhere to the ethical standards.

(b) In addition to the requirements of AS 08.36 and the other requirements of this chapter, to be eligible for licensure as a dentist, an applicant shall provide, with the application, on a form provided by the department and signed by the applicant,

(1) a statement that the applicant understands that a licensed dentist shall adhere to the ethical standards for dentists that are established by the board, and that failure to adhere to the ethical standards may result in the imposition of a sanction that is described in AS 08.36.315; and

(2) a certification that the applicant, if licensed as a dentist, will adhere to the ethical standards.

Authority: AS 08.01.070 AS 08.36.070 AS 08.36.110
AS 08.32.160

12 AAC 28.910. DENIAL OF DENTAL LICENSE. (a) The board will deny an application for a dental license by examination if the applicant does not meet the requirements of AS 08.36.110 and the applicable requirements of this chapter.

(b) The board will deny an application for a dental license by credentials if the applicant does not meet the requirements of AS 08.36.234 and the applicable requirements of this chapter.

(c) The board may deny an application for a dental license for the same reasons that the board may impose disciplinary sanctions upon a licensee under AS 08.36.315.

Authority: AS 08.36.070 AS 08.36.110 AS 08.36.315
AS 08.36.100 AS 08.36.234

12 AAC 28.912. DENIAL OF DENTAL HYGIENE LICENSE. (a) The board will deny an application for a dental hygiene license by examination if the applicant does not meet the requirements of AS 08.32.014 and the applicable requirements of this chapter.

(b) The board will deny an application for a dental hygiene license by credentials if the applicant does not meet the requirements of AS 08.32.030 and the applicable requirements of this chapter.

(c) The board may deny an application for a dental hygiene license for the same reasons that the board may impose disciplinary sanctions upon a licensee under AS 08.32.160.

Authority: AS 08.32.014 AS 08.32.160 AS 08.36.070
AS 08.32.030

12 AAC 28.915. APPLICATION DEADLINE FOR PERSONAL INTERVIEW. To be scheduled for a personal interview as required in AS 08.36.234, an applicant for licensure by credentials must file with the department a complete application at least 30 days before the interview will be conducted. An application is considered complete when the completed application form, all supporting documents required in AS 08.36.234 and 12 AAC 28.951, and the application and credential review fees required in 12 AAC 02.190 are filed with the department.

Authority: AS 08.36.070 AS 08.36.110 AS 08.36.234

12 AAC 28.920. CPR CERTIFICATION. (a) Certification in cardiopulmonary resuscitation (CPR) techniques required under this chapter for a license or license renewal must be based upon training equivalent to that required for completion of a cardiopulmonary resuscitation course certified by the American Heart Association or American Red Cross. Online courses are not acceptable, unless there is a hands-on component.

(b) The board may approve a waiver of the cardiopulmonary resuscitation requirements upon submission of documentation of a physical disability prohibiting the person from performing cardiopulmonary resuscitation. A person with a waiver must work in close proximity to a staff person with current certification in cardiopulmonary resuscitation.

Authority: AS 08.32.014 AS 08.36.070 AS 08.36.110
AS 08.32.110

12 AAC 28.925. LAPSED LICENSES. (a) A dental license or dental hygienist license that has been lapsed for at least 60 days but less than one year will be reinstated if the applicant

- (1) submits a completed application for renewal;
- (2) pays the renewal fee established in 12 AAC 02.190(a)(4), (a)(8), (b)(5), (b)(6), and (b)(14), as applicable; and

(3) submits satisfactory documentation to verify the completion of the continuing education requirements in 12 AAC 28.400.

(b) Except as provided in (c) of this section, a dental license or a dental hygiene license that has been lapsed at least one year but no more than two years will be reinstated if the applicant

- (1) meets the requirements of (a) of this section;
- (2) arranges for reports to be sent directly to the department from the National Practitioner Data Bank and the American Association of Dental Examiners Clearinghouse for Board Actions;
- (3) arranges for verification of licensure to be sent directly to the division from each state where the applicant holds or has ever held a license as a dentist or dental hygienist; and
- (4) is qualified for a license under AS 08.32 or AS 08.36.

(c) After notice and hearing, the board may refuse to reinstate a dental license or dental hygienist license for the same reasons that the board may impose disciplinary sanctions against a licensee under AS 08.32 or AS 08.36, and under this chapter.

Authority: AS 08.32.081 AS 08.36.070 AS 08.36.250

12 AAC 28.930. INACTIVE LICENSE RENEWAL. Repealed 12/5/2009.

12 AAC 28.935. DENTAL HYGIENIST LICENSURE BY EXAMINATION. (a) The board will issue a license by examination to practice dental hygiene to an applicant who meets the requirements of AS 08.32.014 and this section.

- (b) An applicant for license under this section shall submit
- (1) a complete, notarized application on a form provided by the department;
 - (2) the applicable fees established in 12 AAC 02.190;
 - (3) as required under 12 AAC 28.908(a), a signed statement from the applicant certifying the applicant will adhere to the ethical standards specified in 12 AAC 28.905(a);
 - (4) an authorization from the applicant for release of the applicant's records to the department;
 - (5) an affidavit from the applicant that lists the license number and name of the jurisdiction for all dental hygiene licenses that the applicant holds or has ever held in any jurisdiction;
 - (6) a copy of a current certification in cardiopulmonary resuscitation (CPR) techniques that meets the requirements of 12 AAC 28.920;
 - (7) a copy of the applicant's certificate of examination from the Western Regional Examining Board (WREB) showing that the applicant has passed the clinical examination conducted by WREB within the five years immediately preceding the date of application;
 - (8) a copy of the applicant's certificate of examination that meets the requirements of AS 08.32.014(a)(1)(B).

(c) In addition to the requirements of (b) of this section, an applicant for licensure by examination must pass the written Alaska jurisprudence examination authorized under AS 08.32.014 and conducted by the board with a passing score of at least 70 percent.

(d) In addition to the requirements of AS 08.32.014, and (b) and (c) of this section, an applicant under this section who has not previously held a dental hygiene license in any jurisdiction before the 90 days immediately preceding the date of application shall arrange for and ensure the submission of the results of a level III Professional Background Information Services (PBIS) credentials review conducted by PBIS, sent directly to the department from PBIS.

(e) In addition to the requirements of (b) and (c) of this section, an applicant under this section who currently holds or has ever held a dental hygiene license in any jurisdiction before the 90 days immediately preceding the date of application shall

- (1) submit the results of a level II Professional Background Information Services (PBIS) credentials review conducted by PBIS, sent directly to the department from PBIS; and
- (2) verification of the applicant's status and complete information regarding any disciplinary action or investigation taken or pending from all licensing jurisdictions where the applicant holds or has ever held a dental hygiene license.

Authority: AS 08.32.014 AS 08.32.070 AS 08.36.070

Editor's note: Information regarding the examination required under 12 AAC 28.935(b)(7) may be obtained from the Western Regional Examining Board (WREB), 2400 West Dunlap Avenue, Suite 155, Phoenix, AZ, 85021-2826; telephone: (602) 944-3315, or the Department of Commerce, Community, and Economic Development, Division of Corporations, Business and Professional Licensing, P.O. Box 110806, Juneau, AK 99811-0806. An

application for a Professional Background Information Services (PBIS) credential review under 12 AAC 28.935 may be obtained from PBIS, 23460 North 19th Avenue, Suite 225, Phoenix, Arizona, 85027; telephone: (602) 861-5867.

12 AAC 28.937. DENTAL HYGIENIST LICENSURE BY CREDENTIALS. (a) The board will issue a license by credentials to practice dental hygiene under this section to an applicant who meets the requirements of AS 08.32.014, 08.32.030, and this section.

(b) An applicant for a license under this section shall submit to the department

- (1) a complete, notarized application on a form provided by the department;
- (2) the applicable fees established in 12 AAC 02.190;
- (3) an authorization from the applicant for release of the applicant's records to the department;
- (4) an affidavit from the applicant that lists the license number and the name of the jurisdiction for all dental hygiene licenses that the applicant holds or has ever held in any jurisdiction; and
- (5) copies of certificates showing the applicant has completed 30 hours of continuing education during the three years immediately preceding the date of application as required under 12 AAC 28.410.

(c) In addition to the requirements of (a) and (b) of this section, an applicant for a license under this section shall arrange for and ensure the submission of the results of a level II Professional Background Information Services (PBIS) credentials review conducted by PBIS, sent directly to the department from PBIS. The credential review must include

- (1) a copy of a current certification in cardiopulmonary resuscitation (CPR) techniques for the applicant that meets the requirements of 12 AAC 28.920;
 - (2) a copy of the applicant's certificate of examination that meets the requirements of AS 08.32.014(a)(1)(C);
 - (3) as required under 12 AAC 28.908(a), a statement from the applicant certifying the applicant will adhere to the ethical standards specified in 12 AAC 28.905(a);
 - (4) an affidavit from the applicant documenting that during the five years immediately preceding application
 - (A) the dates and locations where the applicant has practiced dental hygiene;
 - (B) that the applicant has been in active clinical practice documenting at least 2,500 hours for five years immediately preceding application;
 - (5) if the applicant is or has ever been employed as a dental hygienist with a federal agency, verification of the current status and disciplinary history from each federal agency where the applicant is or has been employed;
 - (6) verification of the applicant's status and complete information regarding any disciplinary action or investigation taken or pending from all licensing jurisdictions where the applicant holds or has ever held a dental hygiene license;
 - (7) affidavits from three licensed dentists or licensed dental hygienists stating the applicant has been in active clinical practice documenting at least 2,500 hours during the five years immediately preceding application.
- (d) In addition to the requirements of this section, an applicant for a dental hygiene license must document completion of the jurisprudence examination prepared by the board, covering the provisions of AS 08.32, AS 08.36, and this chapter relating to the practice of dental hygiene, with a passing score of at least 70 percent.

Authority: AS 08.32.014 AS 08.32.070 AS 08.36.070
AS 08.32.030

Editor's note: An application for a Professional Background Information Services (PBIS) credential review under 12 AAC 28.937 may be obtained from PBIS, 23460 North 19th Avenue, Suite 225, Phoenix, Arizona, 85027; telephone: (602) 861-5867.

12 AAC 28.938. DENTAL EDUCATIONAL REQUIREMENTS. An applicant for a license to practice dentistry must be a graduate of a dental school that, at the time of graduation, is accredited by the Commission on Dental Accreditation of the American Dental Association.

Authority: AS 08.36.070 AS 08.36.110

12 AAC 28.940. DENTAL LICENSURE BY EXAMINATION. (a) The board will issue a license by examination to practice dentistry to an applicant who meets the requirements of AS 08.36.110 and this section.

(b) An applicant for a license under this section shall submit

- (1) a complete, notarized application on a form provided by the department;
- (2) the applicable fees established in 12 AAC 02.190;
- (3) an affidavit by the applicant stating the applicant is not an impaired practitioner;
- (4) as required under 12 AAC 28.908(b), a statement from the applicant certifying the applicant will adhere to the ethical standards specified in 12 AAC 28.905(b);
- (5) an authorization from the applicant for release of the applicant's records to the department;
- (6) an affidavit from the applicant that lists the license number and name of the jurisdiction for all dental licenses that the applicant holds or has ever held in any jurisdiction;
- (7) a copy of a current certification in cardiopulmonary resuscitation (CPR) techniques that meets the requirements of 12 AAC 28.920;

(8) a copy of the applicant's certificate

(A) of examination from the Western Regional Examining Board (WREB) showing that the applicant has passed the clinical examination conducted by WREB before February 1, 2019 and within the five years immediately preceding the date of application;

(B) of examination showing that the applicant has passed the clinical examination conducted by WREB on or after February 1, 2019 or an equivalent examination; an applicant must have passed an examination under this subparagraph within the five years immediately preceding the date of application; and the examination must include the following subject areas, components, or characteristics;

- (i) standardization and calibration of the examiners and anonymity between candidates and grading examiners;
- (ii) patient based periodontics testing;
- (iii) constructive response testing that includes treatment planning;
- (iv) endodontics testing, on a mannequin or live patient, to include access and obturation of an anterior tooth and access of a multi-canalled posterior tooth;
- (v) prosthetics testing, on a mannequin or live patient, to include a crown prep or a bridge prep;
- (vi) patient based operative examination that includes one class II posterior alloy and one composite procedure, either anterior class III or posterior class II; or

(C) showing successful completion of a two-year or more postgraduate training program approved by the Commission on Dental Accreditation of the American Dental Association, and evidence of having five years of continuous clinical practice with an average of 20 hours per week, immediately preceding the date of application; for purposes of the clinical practice requirements of this subparagraph, clinical practice may include dental school; and

(9) a copy of the applicant's certificate of examination from the American Dental Association Joint Commission on National Dental Examinations, verifying successful passage of the National Board of Dental Examinations Part I and Part II; and

(10) if the applicant holds a valid federal Drug Enforcement Administration registration number, verification that the applicant has completed no less than two hours of education in pain management and opioid use and addiction within the two years prior to the date of application.

(c) In addition to the requirements of (a) and (b) of this section, an applicant for licensure by examination must pass the written Alaska jurisprudence examination authorized under AS 08.36.110 and conducted by the board with a passing score of at least 70 percent.

(d) In addition to the requirements of (a) — (c) of this section, an applicant who has not previously held a dental license in any jurisdiction before the 90 days immediately preceding the date of application or in any foreign country, shall arrange for and ensure the submission of the results of a level III Professional Background Information Services (PBIS) credentials review conducted by PBIS, sent directly to the department from PBIS.

(e) In addition to the requirements of (a) — (c) of this section, an applicant who has ever been licensed in a jurisdiction before the 90 days immediately preceding the date of application or has ever been licensed to practice dentistry in a foreign country shall submit

(1) the results of a level II Professional Background Information Services (PBIS) credentials review conducted by PBIS, sent directly to the department from PBIS;

(2) verification of the status of the applicant's registration with the Drug Enforcement Administration (DEA), sent directly to the department from DEA, even if the applicant is not currently registered with the DEA; and

(3) verification of the applicant's status and complete information regarding any disciplinary action or investigation taken or pending from all licensing jurisdictions where the applicant holds or has ever held a dental license.

(f) Notwithstanding other provisions of this section, the board will issue a license to practice dentistry to an applicant who

(1) held an active Alaska dental specialty license from this state in 2012;

(2) meets the requirements of AS 08.36.110 and (b)(1) – (7) of this section; and

(3) provides a copy of the applicant's certificate of examination from the American Dental Association Joint Commission on National Dental Examinations that the applicant has successfully passed the written examinations given by the commission.

Authority: AS 08.36.070

AS 08.36.110

Editor's note: Information regarding the examination required under 12 AAC 28.940(b)(8) may be obtained from the Western Regional Examining Board (WREB), 2400 West Dunlap Avenue, Suite 155, Phoenix, AZ, 85021-2826; telephone: (602) 944-3315, or the Department of Commerce, Community, and Economic Development, Division of Corporations, Business and Professional Licensing, P.O. Box 110806, Juneau, AK 99811-0806. An application for a Professional Background Information Services (PBIS) credentials review required under 12 AAC 28.940(c) may be obtained from PBIS, 23460 North 19th Avenue, Suite 225, Phoenix, Arizona, 85027; telephone: (602) 861-5867.

12 AAC 28.950. CESSATION OF LICENSING BY CREDENTIALS. Repealed 2/18/93.

12 AAC 28.951. DENTAL LICENSURE BY CREDENTIALS. (a) The board will issue a license by credentials to practice dentistry to an applicant who meets the requirements of AS 08.36.110, 08.36.234, and this section.

(b) An applicant for a license under this section shall submit to the department

- (1) a complete, notarized application on a form provided by the department;
- (2) the applicable fees established in 12 AAC 02.190;
- (3) an authorization from the applicant for release of the applicant's records to the department;
- (4) an affidavit from the applicant that lists the license number and name of the jurisdiction for all dental licenses that the applicant holds or has ever held in any jurisdiction;
- (5) verification of the status of the applicant's registration with the Drug Enforcement Administration (DEA), sent directly to the department from DEA, even if the applicant is not currently registered with the DEA;
- (6) copies of certificates showing the applicant has completed 48 hours of continuing education during the three years immediately preceding the date of application as required under 12 AAC 28.410; and
- (7) if the applicant holds a valid federal Drug Enforcement Administration registration number, verification that the applicant has completed not less than two hours of education in pain management and opioid use and addiction within the two years prior to the date of application.

(c) In addition to the requirements of (a) and (b) of this section, an applicant for a license under this section shall arrange for and ensure submission of the results of a level II Professional Background Information Services (PBIS) credentials review conducted by PBIS, sent directly to the department from PBIS. The credential review must include

- (1) repealed 12/15/2013;
- (2) a copy of a current certification in cardiopulmonary resuscitation (CPR) techniques that meets the requirements of 12 AAC 28.920;
- (3) a copy of the applicant's certificate of examination documenting graduation from a dental school accredited by the Commission on Dental Accreditation of the American Dental Association, or its successor agency, and a copy of the applicant's certificate from the American Dental Association Joint Commission on National Dental Examination that the applicant has passed the written examination given by the commission;
- (4) an affidavit from the applicant stating the applicant is not impaired to an extent that affects the applicant's ability to practice dentistry;
- (5) as required under 12 AAC 28.908(b), a statement from the applicant certifying the applicant will adhere to the ethical standards specified in 12 AAC 28.905(b);
- (6) an affidavit from the applicant documenting that during the five years immediately preceding application
 - (A) the dates and locations where the applicant has practiced dentistry;
 - (B) the applicant has been in active clinical practice documenting at least 5,000 hours;
- (7) repealed 3/11/2016;
- (8) if the applicant is or has ever been employed as a dentist with a federal agency, verification of the current status and disciplinary history from each federal agency where the applicant is or has been employed;
- (9) a certification from the applicable licensing jurisdiction or testing agency, that verifies that a state, territory, or region of the United States where the applicant passed a written and clinical dental examination and has been licensed to practice dentistry has, at the time the applicant applies for licensure by credentials in this state, licensing requirements at least generally equivalent to those of this state;
- (10) verification of the applicant's status and complete information regarding any disciplinary action or investigation taken or pending from all licensing jurisdictions where the applicant holds or has ever held a dental license;
- (11) affidavits from three licensed dentists documenting the applicant has been in active clinical practice for at least 5,000 hours during the five years immediately preceding the date of application;
- (12) three professional references from licensed dentists that reflect clinical skills that meet the standard of care, ability to exercise sound professional judgment, and professional ethics that meet the code established by the American Dental Association's *Principles of Ethics and Code of Professional Conduct* adopted by reference in 12 AAC 28.905(b).

(d) In addition to the requirements of this section, an applicant for a dental license must document completion of the jurisprudence examination prepared by the board, covering the provisions of AS 08.32, AS 08.36, and this chapter relating to the practice of dentistry, with a passing score of at least 70 percent.

(e) To determine whether the examination portion of the licensing requirements of another jurisdiction are generally equivalent to those of this state, the examinations for licensure in that jurisdiction must include at least six of the following subject areas and their components or characteristics:

- (1) periodontics; clinical abilities testing;
- (2) endodontics; clinical abilities testing;
- (3) amalgam; clinical abilities testing;
- (4) cast gold; clinical abilities testing;
- (5) prosthetics; written or clinical abilities testing;
- (6) oral diagnosis; written or clinical abilities testing;
- (7) other restorative procedure; clinical abilities testing;
- (8) standardization and calibration of examiners and anonymity between candidates and grading examiners;
- (9) constructive response testing.

(f) If the licensing requirements of another jurisdiction are determined to not be generally equivalent to those of this state because a subject area specified in (e)(1) – (9) of this section was not included in the other jurisdiction's licensing examination, the board will determine if the applicant meets the requirements for that subject area.

(g) The personal interview of the applicant required in AS 08.36.234(d) will be scheduled as provided in 12 AAC 28.915.

(h) In this section, "clinical abilities testing" means an examination that

- (1) evaluates a candidate's performance of a procedure or portion of a procedure;
- (2) is conducted for the purpose of demonstrating an acceptable level of practical skill in a subject; and
- (3) uses a live patient, laboratory simulation, or interactive computer simulation.

Authority: AS 08.36.070 AS 08.36.110 AS 08.36.234

Editor's note: An application for a Professional Background Information Services (PBIS) credential review under 12 AAC 28.951(c) may be obtained from PBIS, 23460 North 19th Avenue, Suite 225, Phoenix, Arizona, 85027; telephone: (602) 861-5867.

12 AAC 28.952. DENTAL SPECIALTY LICENSE. Repealed 12/15/2013.

12 AAC 28.953. REGISTRATION WITH THE PRESCRIPTION DRUG MONITORING PROGRAM CONTROLLED SUBSTANCE PRESCRIPTION DATABASE. A dentist who holds a federal Drug Enforcement Administration registration number must register and comply with the controlled substance prescription database under AS 17.30.200.

Authority: AS 08.36.070 AS 08.36.234 AS 17.30.200
AS 08.36.110

12 AAC 28.955. COURTESY LICENSE. (a) The board will issue a courtesy license to practice dentistry or dental hygiene for only a limited purpose that is approved by the board under (b) of this section to an applicant who meets the requirements of this section. The board will specify the limitations on scope of the approved practice and duration of the courtesy license. A courtesy license does not authorize the licensee to practice dentistry or dental hygiene outside the limited purpose that is specified on the courtesy license.

(b) The board will consider a limited purpose for a courtesy license to be the practice of dentistry or dental hygiene to underserved persons by a dentist or dental hygienist who has entered a written contract with a non-profit organization, charitable organization, or governmental agency.

(c) An applicant for a courtesy license under this section shall submit to the department a completed, notarized application on a form provided by the department. An application must include

- (1) the applicable application and license fees established in 12 AAC 02.190;
- (2) a description of the scope of practice of dentistry or dental hygiene required to perform the duties for which the courtesy license is to be issued; the description must include the practice location, duration of practice, and patient population to be seen; the applicant must demonstrate to the board's satisfaction that the scope of practice of dentistry or dental hygiene is for a limited purpose set out in this section;

(3) a verification of a current license to practice dentistry or dental hygiene in good standing in another state or other jurisdiction with requirements at least equivalent to those of this state at the time of application under this section and that the licensee is not under investigation in the state or other jurisdiction in which the applicant is licensed; and

(4) a description in sufficient detail for the board to evaluate the circumstances under which the applicant will be practicing under any courtesy license issued, including the name and license number of the supervising dentist licensed to practice in this state if the applicant is working in a supervised clinic.

(d) A courtesy license issued under this section is nonrenewable and is valid for a period not to exceed either a total of 40 days of practice during a 12-consecutive-month period or the duration of the limited purpose approved under this section for the courtesy license holder, whichever is less. A person will not be issued more than one courtesy license under this section in a 12-month period.

(e) A courtesy license holder may not use a courtesy license

- (1) for the purposes of locum tenens coverage;
- (2) to serve in place of a license under AS 08.32 or AS 08.36;
- (3) for the purposes of employment consideration, if licensure is required under AS 08.32 or AS 08.36; or
- (4) for receipt of remuneration directly or indirectly for practicing dentistry or dental hygiene requiring licensure under this chapter.

(f) A holder of a courtesy license for dental hygiene may practice only under this section and under the general supervision of a dentist licensed in Alaska.

(g) While practicing under a courtesy license issued under this section, the holder of the courtesy license is obligated to uphold the standards of practice identified in AS 08.32, AS 08.36, and in this title for the relevant provisions, and is subject to the relevant disciplinary provisions in AS 08.32, AS 08.36 and this title for actions taken or omitted while practicing under the courtesy license.

(h) The board may refuse to issue a courtesy license for the same reasons that it may impose disciplinary sanctions against a licensee under AS 08.32.160, 08.32.165, and AS 08.36.315.

(i) In this section,

(1) “remuneration” does not include reimbursement for actual reasonable expenses incurred for travel, food, and lodging;

(2) “underserved persons” means individuals and groups of individuals whose access to dental health care in this state is limited or nonexistent due to geographic or economic factors, including low income and rural residence.

Authority:	AS 08.01.062	AS 08.32.165	AS 08.36.234
	AS 08.32.160	AS 08.36.110	AS 08.36.315

12 AAC 28.956. COLLABORATIVE AGREEMENT REQUIREMENTS. (a) The board may approve a collaborative agreement between a dental hygienist licensed under AS 08.32 and a dentist licensed under AS 08.36 and who is affiliated with an active dental practice in this state, if the collaborative agreement meets the requirements of AS 08.32.115 and that the dental hygiene and the dental licenses are in good standing. The applicant must submit

(1) a completed, notarized application on the form provided by the department, which includes the names and license numbers of the collaborating dentist and dental hygienist, and the name and location of the dentist’s affiliated practice;

(2) the applicable fees required in 12 AAC 02.190;

(3) an affidavit stating that the applicant has a minimum of 4,000 hours of clinical experience within the five years preceding the date of application;

(4) a copy of current certification in cardiopulmonary resuscitation (CPR) techniques for the applicant that meets the requirements of 12 AAC 28.920;

(5) a copy of the applicant’s and the collaborating dentist’s current professional liability policy or declaration page that includes the policy number and expiration date;

(6) an evidence of continuing educational courses meeting the requirements of the collaborative agreement;

(7) a written agreement including

(A) identification of each affiliated practice setting in which the dental hygienist may engage in dental hygiene practice under the collaborative agreement relationship;

(B) identification of the procedures that can be performed in accordance with AS 08.32.115 and standing orders that the dental hygienist must follow;

(C) a requirement that the dental hygienist refer patients who have been assessed by the dental hygienist to the affiliated dentist for treatment or planning that is outside of the dental hygienist’s scope of practice;

(D) starting and ending dates of the collaboration;

(E) patient record location;

(F) patient billing process.

(b) The dental hygienist and the affiliated dentist must notify the board of any amendments to the agreement.

(c) The board may not approve a collaborative agreement to a dental hygienist if

(1) the affiliated dentist has five current collaborative agreements under this section;

(2) the applicant or affiliated dentist is under unresolved investigation under AS 08.32 – 08.36 or this chapter, or a similar provision of another jurisdiction;

(3) during the five years immediately preceding the date of application, the applicant or affiliated dentist is the subject of adverse disciplinary action under AS 08.32 – 08.36 or this chapter, or a similar provision of another jurisdiction.

(d) In addition to the continuing education requirements in 12 AAC 28.400 – 12 AAC 28.420, a dental hygienist who wishes to practice under a collaborative agreement must complete an additional four contact hours of continuing education per biennial license renewal period in one or more of the following subject areas:

(1) medical emergencies;

(2) pediatric and other special health care needs;

(3) pharmacology;

(4) oral pathology;

(5) public health or other eleemosynary facility, relating to, or supporting charity;

(6) patient management;

(7) general medicine and physical diagnosis;

(8) jurisprudence relating to unsupervised practice.

(e) An affiliated dentist in a collaborative agreement must

(1) be available to provide contact, communication, and consultation with the affiliated dental hygienist;

(2) adopt standing orders applicable to dental hygiene procedures that may be performed by the dental hygienist.

(f) A dental hygienist authorized in a collaborative agreement

(1) may perform any dental operations or other services the dental hygienist is authorized to perform under AS 08.32.110 and this chapter, and those dental operations and other services authorized under the collaborative agreement, if approved by the board;

(2) must maintain contact, communication, and consultation with the affiliated dentist; and

(3) before performing any dental hygiene services, shall assess the patient, gather data, interpret the data, determine the patient's dental hygiene treatment needs, and formulate a patient care plan.

(g) A dental hygienist authorized in a collaborative agreement shall

(1) maintain dental charts and other records for the patients who are treated by the dental hygienist; the collaborative agreement must specify where these records are to be secured;

(2) document in the patient's official chart the name of the affiliated dentist;

(3) document all referrals.

(h) A collaborative agreement

(1) expires immediately on date agreed upon by the collaborating dental hygienist and dentist and approved by the board;

(2) may not have a term exceeding two years.

(i) If a dental hygienist and affiliated dentist in a collaborative agreement end their affiliation before the expiration date of the collaborative agreement, each shall notify the board within 30 days of the end of the affiliation.

(j) Before or upon the expiration of the collaborative agreement, the board may renew a collaborative agreement if the applicant submits a new completed application under this section.

(k) The board shall maintain in registry of all current collaborative agreements.

Authority: AS 08.32.115 AS 08.32.187 AS 08.36.070

12 AAC 28.960. REGISTRATION OF DENTAL RADIOLOGICAL EQUIPMENT. (a) Dental radiological equipment with a valid registration from the Department of Health and Social Services under AS 18.60.475 as of September 6, 1998 is considered registered with the board under AS 08.36.075 and this section.

(b) Repealed 3/11/2016.

(c) Repealed 3/11/2016.

(d) The owner or lessee of dental radiological equipment that is registered under this section shall notify the board, in writing, within 60 days after the equipment is sold, relocated, or no longer in use.

(e) To register dental radiological equipment, the owner or lessee of the equipment shall submit a completed registration form, adopted by reference in 12 AAC 28.970(b).

(f) Upon receipt of a completed registration form, the board will issue a registration seal to the owner or lessee of the equipment if it meets the requirements of AS 08.36.075, this section, and 12 AAC 28.965. The owner or lessee of the equipment shall ensure that the registration seal is attached to the equipment that is registered under this section.

Authority: AS 08.36.070 AS 08.36.075

Editor's note: A copy of the list of dental radiological equipment registered under 12 AAC 28.960(a) is available for inspection at the Department of Commerce, Community, and Economic Development, Division of Corporations, Business and Professional Licensing, P.O. Box 110806, Juneau, AK 99811-0806.

12 AAC 28.965. INSPECTION OF DENTAL RADIOLOGICAL EQUIPMENT. (a) The owner or lessee of dental radiological equipment must have that equipment inspected within six years from the date that the equipment was first registered with the board under 12 AAC 28.960. The owner or lessee of dental radiological equipment must have that equipment inspected again at least once during every six-year period following the initial inspection.

(b) The inspection of dental radiological equipment must

(1) repealed 9/26/2018;

(2) be documented by the inspector on the form adopted by reference in 12 AAC 28.970(c); and

(3) meet or exceed, and must determine whether the equipment meets or exceeds, the standards applicable to dental radiological equipment in the *"Suggested State Regulations for the Control of Radiation,"* Part F, published by the Conference of Radiation Control Program Directors, Inc., May, 2009 edition, adopted by reference.

(c) Repealed 3/11/2016.

(d) Repealed 3/11/2016.

(e) Upon receipt of a form documenting an inspection that meets the requirements of AS 08.36.075 and this section, the inspector shall issue to the owner or lessee of the dental radiological equipment, an inspection seal indicating the date by when the equipment must be inspected again. The owner or lessee shall ensure that the inspection seal is placed on the equipment in a location visible to persons operating the equipment.

(f) Owners or lessees of dental radiological equipment shall maintain records that document compliance with the requirements of AS 08.36.075, 12 AAC 28.960, and this section. The records shall be made available to the board or its designee for inspection.

(g) Repealed 3/11/2016.

(h) An inspector who performs an inspection of dental radiological equipment shall complete and submit the form titled *"Inspection of Dental Radiological Equipment,"* adopted by reference in 12 AAC 28.970(c), to the owner or lessee of the equipment after the inspection.

Authority: AS 08.36.070 AS 08.36.075

Editor's note: A copy of the *"Suggested State Regulations for the Control of Radiation,"* Part F, published by the Conference of Radiation Control Program Directors, Inc., May, 2009 edition, adopted by reference in 12 AAC 28.965, is available for inspection at the Department of Commerce, Community, and Economic Development, Division of Corporations, Business and Professional Licensing, P.O. Box 110806, Juneau, AK 99811-0806 or may be obtained from the Conference of Radiation Control Program Directors, Inc., 1030 Burlington Lane, Suite 4B, Frankfort, KY 40601-2832; telephone: (502) 227-4543.

12 AAC 28.970. REGISTRATION AND INSPECTION FORMS; REVIEW OF COMPLETED FORMS.

(a) A registration seal or inspection seal may not be issued unless the information on the completed form meets the requirements of AS 08.36.075, and of 12 AAC 28.960 and 12 AAC 28.965, as applicable.

(b) The form titled *"Radiological Equipment Registration Form,"* dated February 2014, is adopted by reference. This form is established by the board for review by staff of the registration of dental radiological equipment under 12 AAC 28.960.

(c) The form titled *"Inspection of Dental Radiological Equipment,"* dated February 2014, is adopted by reference. This form is established by the board for use by inspectors of dental radiological equipment, and for review by staff of the documentation of the inspection of that equipment, under 12 AAC 28.965.

Authority: AS 08.36.070 AS 08.36.075

Editor's note: The forms listed in 12 AAC 28.970 are available at the Department of Commerce, Community, and Economic Development, Division of Corporations, Business and Professional Licensing, P.O. Box 110806, Juneau, AK 99811-0806; phone (907) 465-2542.

12 AAC 28.990. DEFINITIONS. (a) In this chapter,

(1) "administer local anesthetic agents" means to administer an agent that induces local anesthesia and to administer that agent by injection, both infiltration and block, limited to the oral cavity, for the purposes of pain control;

(2) "American Association of Dental Examiners Clearinghouse for Board Actions" means the American Association of Dental Examiners information source described in AS 08.36.110(a)(1)(F);

(3) "board" means the Board of Dental Examiners;

(4) "coronal polishing," within the meaning given in AS 08.36.370, means removal of supragingival plaque and stains from teeth without calculus, including the removal of soft deposits, such as materia alba, plaque, and stains from the anatomical crowns of the teeth;

(5) "deep sedation" means a drug-induced depression of consciousness during which

(A) patients cannot be easily aroused but respond purposefully following repeated or painful stimulation;

(B) the ability to independently maintain ventilatory function may be impaired;

(C) patients may require assistance in maintaining a patent airway, and spontaneous ventilation may be inadequate; and

(D) cardiovascular function is usually maintained;

(6) "department" means the Department of Commerce, Community, and Economic Development;

(7) "facility" means a dental practice, office, or clinic that is subject to the requirements of AS 08.36.367;

(8) "general anesthesia" means a drug-induced loss of consciousness during which

(A) patients are not arousable, even by painful stimulation;

(B) the ability to independently maintain ventilatory function is often impaired;

(C) patients often require assistance in maintaining a patent airway, and positive pressure ventilation may be required because of depressed spontaneous ventilation or drug-induced depression of neuromuscular function; and

(D) cardiovascular function may be impaired;

(9) "local anesthesia" means the elimination of sensation, especially pain, in one part of the body by the topical application or regional injection of a drug;

(10) "minimal sedation" means a minimally depressed level of consciousness, produced by a pharmacological method, in which

(A) the patient retains the ability to independently and continuously maintain an airway and respond normally to tactile stimulation and verbal command; and

(B) although cognitive function and coordination may be modestly impaired, ventilatory and cardiovascular functions are unaffected;

(11) "moderate sedation" means a drug-induced depression of consciousness, during which

(A) a patient responds purposefully to verbal commands, either alone or accompanied by light tactile stimulation;

(B) no interventions are required to maintain a patent airway, and spontaneous ventilation is adequate; and

(C) cardiovascular function is usually maintained;

(12) "nitrous oxide sedation" means an induced, controlled state of minimal sedation, produced solely by the inhalation of a combination of nitrous oxide and oxygen in which the patient retains the ability to independently and continuously maintain an airway and to respond purposefully to physical stimulation and to verbal command;

(13) "radiological equipment" means a control panel and associated radiological tubeheads capable of exposing a dental patient to x-rays;

(14) "restorative function" means under the direct supervision of a licensed dentist, to place restorations into a cavity prepared by the licensed dentist and thereafter carve, contour, and adjust contacts and occlusion of the restoration.

(b) In AS 08.32, AS 08.36, and this chapter, unless the context requires otherwise, "jurisdiction" means a state or territory of the United States.

Authority:	AS 08.32.085	AS 08.36.342	AS 08.36.346
	AS 08.36.070	AS 08.36.344	

Occupational Licensing **Centralized Regulations**

August 2018



DEPARTMENT OF COMMERCE, COMMUNITY,
AND ECONOMIC DEVELOPMENT

***DIVISION OF CORPORATIONS, BUSINESS
AND PROFESSIONAL LICENSING***

NOTE: The official version of the statutes in this document is printed in the Alaska Statutes, copyrighted by the State of Alaska. The official version of the regulations in this document is published in the Alaska Administrative Code, copyrighted by the State of Alaska. If any discrepancies are found between this document and the official versions, the official versions will apply.

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CHAPTER 02.
GENERAL OCCUPATIONAL LICENSING FUNCTIONS.

Article

- 1. Collection of Fees**
(12 AAC 02.010 — 12 AAC 02.030)
- 2. Occupational Licensing Fees**
(12 AAC 02.100 — 12 AAC 02.396)
- 3. Examination Review Procedures**
(12 AAC 02.400)
- 4. Real Estate Errors and Omissions Insurance**
(12 AAC 02.510 — 12 AAC 02.590)
- 5. Telemedicine Business Registry**
(12 AAC 02.600)
- 6. General Provisions**
(12 AAC 02.900 — 12 AAC 02.990)

ARTICLE 1.
COLLECTION OF FEES.

Section

- 10. Licensing and renewal fees**
- 15. Refund of license fees**
- 20. Prorating renewal fees**
- 30. Prorating initial renewal fees**

12 AAC 02.010. LICENSING AND RENEWAL FEES. (a) The department will collect fees for licensing and for license renewal for the boards and professions listed in AS 08.01.010.

(b) The department will not issue a license or renew a license unless the applicable fees established in AS 08 or in this chapter have been collected.

(c) Except as otherwise provided in this title, an application for initial licensure or renewal of license will be considered filed as of the filing date of the document, as determined by 12 AAC 02.920.

(d) Repealed 5/4/90.

(e) An application fee is not refundable.

Authority:	AS 08.01.050	AS 08.01.065	AS 08.01.100
	AS 08.01.060	AS 08.01.080	

12 AAC 02.015. REFUND OF LICENSE FEES. (a) Except as provided in (b) of this section, after a license is initially issued or renewed, the department will not refund the initial license fee or the license renewal fee.

(b) On request, the department will issue a prorated refund of a license fee paid for a licensing period in which the individual licensee dies. The department will issue the refund to the estate of the licensee. The department will not issue a refund when the estate of the licensee remains a partner in a partnership that received a license under AS 08.

(c) To request a refund under this section, the estate of the licensee shall submit to the department

(1) a written request for a refund within 12 months of the licensee's death or before the end of the licensing period in which the licensee died, whichever time period is greater; and

(2) verification of the licensee's death; the department will accept a letter from a coroner or mortuary, a death certificate, or a copy of a newspaper article as verification.

(d) The department will calculate the amount of the prorated refund described in (b) of this section based on the number of complete months remaining in the licensing period on the date of the licensee's death.

Authority:	AS 08.01.050	AS 08.01.065	AS 08.01.080
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12 AAC 02.020. PRORATING RENEWAL FEES. The department will prorate the first license renewal fees following initial licensure, in accordance with 12 AAC 02.030. All renewal fees, including penalty and delinquent fees must be paid by the licensee applying for renewal of a license, except as provided in 12 AAC 02.030(a)(1) and (b)(1).

Authority:	AS 08.01.050	AS 08.01.080	AS 08.01.100
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12 AAC 02.030. PRORATING INITIAL RENEWAL FEES. (a) When the department issues an initial biennial license

(1) on or within the 90 days before the date by which it must be renewed, the applicant shall pay the entire license fee but is not required to pay the prescribed renewal fee until the second renewal date;

(2) more than 90 days but 12 months or less before the date by which the license must be renewed, the applicant shall pay the entire license fee, and shall pay one-half of the prescribed renewal fee at the time of the first renewal date; or

(3) more than 12 months before the date by which the license must be renewed, the applicant shall pay the entire license fee, and shall pay the entire prescribed renewal fee at the time of the first renewal date.

(b) When the department issues an initial annual license

(1) on or within the 90 days before the date by which it must be renewed, the applicant shall pay the entire license fee but is not required to pay the prescribed renewal fee until the second renewal date;

(2) more than 90 days but six months or less before the date by which the license must be renewed, the applicant shall pay the entire license fee, and shall pay one-half of the prescribed renewal fee at the time of the first renewal date; or

(3) more than six months before the date by which the license must be renewed, the applicant shall pay the entire license fee, and shall pay the entire prescribed renewal fee at the time of the first renewal date.

(c) Repealed 12/28/97.

(d) Repealed 9/29/2005.

(e) The department will not prorate fees for applications, examinations, reexaminations, credential review or investigation, temporary or emergency permits, locum tenens permits, certificates, or other such fees established in AS 08 or in this chapter.

Authority: AS 08.01.065

AS 08.01.080

AS 08.01.100

ARTICLE 2. OCCUPATIONAL LICENSING FEES.

Section

100. Fees established by department

102. Fees for a temporary license issued under AS 14.43.148 or AS 25.27.244; waivers; refunds

105. Administrative fees

106. Telemedicine business registry

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- 290. Nursing home administrators
- 300. Board of Examiners in Optometry
- 310. Board of Pharmacy
- 320. State Physical Therapy and Occupational Therapy Board
- 325. Board of Professional Counselors
- 330. Board of Psychologist and Psychological Associate Examiners
- 340. Board of Public Accountancy
- 350. Board of Veterinary Examiners
- 360. Real Estate Commission
- 370. Board of Certified Real Estate Appraisers
- 380. Pawnbrokers
- 390. Behavior analysts
- 395. Athletic trainers
- 396. Board of Massage Therapists

12 AAC 02.100. FEES ESTABLISHED BY DEPARTMENT. The fees established in this chapter have been adopted by the department after considering any recommendations of the applicable board or commission listed in AS 08.01.010.

Authority: AS 08.01.065

12 AAC 02.102. FEES FOR A TEMPORARY LICENSE ISSUED UNDER AS 14.43.148 OR AS 25.27.244; WAIVERS; REFUNDS. (a) When the division issues a temporary license under AS 14.43.148 or AS 25.27.244, the division will collect the annual or biennial license fee for the trade or profession for which the temporary license is issued, subject to the refund and waiver provisions set out in this section. The temporary license fee is the amount paid to the division under this section from the annual or biennial license fee that is not refunded or waived under this section.

(b) When an individual who holds a temporary license issued under AS 14.43.148 is

(1) issued a notice of release by the Alaska Commission on Postsecondary Education and takes the action necessary, on or before the expiration date of the temporary license, to convert the temporary license to an annual or biennial license under AS 05.10, AS 08, or AS 46.03.375, the division will waive one-half of the annual or biennial license fee for the trade or profession for which the individual is receiving an annual or biennial license;

(2) not issued a notice of release by the Alaska Commission on Postsecondary Education on or before the expiration date of the temporary license, the department will

(A) refund one-half of the annual or biennial license fee paid under (a) of this section; and

(B) not refund a bond, cash deposit, negotiable instrument, or other mechanism to provide proof of financial responsibility that was deposited for claims under AS 05.10.090, AS 08, or this chapter, except as required by law.

(c) When an individual who holds a temporary license issued under AS 25.27.244 is

(1) issued a release by the child support services agency and takes the action necessary, on or before the expiration date of the temporary license, to convert the temporary license to an annual or biennial license under AS 05.10, AS 08, or AS 46.03.375, the division will waive one-half of the annual or biennial license fee for the trade or profession for which the individual is receiving an annual or biennial license;

(2) not issued a notice of release by the child support services agency on or before the expiration date of the temporary license, the department will

(A) refund one-half of the annual or biennial license fee paid under (a) of this section; and

(B) not refund a bond, cash deposit, negotiable instrument, or other mechanism to provide proof of financial responsibility that was deposited for claims under AS 05.10.090, AS 08, or this chapter, except as required by law.

(d) In this section, "annual or biennial license fee" means the initial license fee or the license renewal fee established in

(1) AS 05.10.120 or this chapter for a licensing category included under the trades and professions listed in AS 08.01.010; and

(2) 18 AAC 78.495 for certification as an underground storage tank worker.

Authority: AS 08.01.050 AS 14.43.148 AS 25.27.244
AS 08.01.065

12 AAC 02.105. ADMINISTRATIVE FEES. Except as otherwise provided in this chapter for a particular board or occupation, the following fees apply to all boards and professions listed in AS 08.01.010:

- (1) duplicate license fee, \$5;
- (2) fee for verification or certification of an Alaska license, registration, or examination, \$20;
- (3) name change, except for construction contractors, \$5;
- (4) photocopy fee, \$.25 per page, which may be waived by the department if the total fee is less than \$5;

- (5) facsimile fee, \$1 per page, which may be waived by the department if the total fee is less than \$5;
- (6) returned check fee, \$20;
- (7) repealed 12/28/97;
- (8) exam postponement fee, \$25;
- (9) wall certificate fee, \$20;
- (10) fee for proctoring an examination for another state's applicant, \$50;
- (11) fee for specialized report of licensing data that the department has agreed to provide, \$100 plus the cost of supplies;
- (12) express delivery handling fee, \$20;
- (13) fee for providing the most recently printed roster of all licensees in a licensing program, other than business licensing, with
 - (A) 2,000 or less licensees, \$5;
 - (B) more than 2,000 licensees, \$15;
 - (C) repealed 3/25/2004;
- (14) fee for a courtesy license issued under 12 AAC 02.955, \$100;
- (15) courtesy license application fee, \$50;
- (16) examination review fee, \$50.

Authority: AS 08.01.062 AS 08.01.065 AS 08.01.100

12 AAC 02.106. TELEMEDICINE BUSINESS REGISTRY. The following fees are established for registration under AS 44.33.381 (telemedicine business registry) for businesses performing telemedicine services in this state;

- (1) initial registration fee, \$50;
- (2) fee to report changes in the information on the initial registration, \$50.

Authority: AS 44.33.020 AS 44.33.381

12 AAC 02.107. PRESCRIPTION DRUG MONITORING PROGRAM CONTROLLED SUBSTANCE PRESCRIPTION DATABASE REGISTRATION. The following fees are established for registration as required under AS 17.30.200 with the prescription drug monitoring program (PDMP) controlled substance prescription database by a pharmacist who dispenses, or a practitioner who prescribes, administers, or directly dispenses a schedule II, III, or IV controlled substance under federal law:

- (1) initial registration fee, \$25;
- (2) biennial registration renewal fee, \$25.

Authority: AS 08.01.065 AS 17.30.200

12 AAC 02.108. ACUPUNCTURISTS. The following fees are established for acupuncturists:

- (1) application fee for initial license, \$200;
- (2) license fee for all or part of the initial biennial license period, \$325;
- (3) biennial license renewal fee, \$325.

Authority: AS 08.01.010 AS 08.06.030 AS 08.06.100
AS 08.01.065

12 AAC 02.110. BOARD OF REGISTRATION FOR ARCHITECTS, ENGINEERS, AND LAND SURVEYORS. (a) The following fees are established for architects, engineers, land surveyors, and landscape architects:

- (1) application fee for initial registration and corporate, limited liability company, or limited liability partnership certification, \$200;
 - (2) repealed 10/29/2017;
 - (3) registration fee for all or part of the initial biennial registration period, \$100;
 - (4) biennial registration renewal fee, \$100;
 - (5) corporation, limited liability company, or limited liability partnership certification fee, for all or part of the biennial certification period, \$300;
 - (6) biennial corporation, limited liability company, or limited liability partnership certification renewal fee, \$300;
 - (7) amendment to corporate, limited liability company, or limited liability partnership certification, \$75;
 - (8) repealed 11/13/2014;
 - (9) repealed 10/29/2017;
 - (10) retired status registration one-time fee, \$25.
- (b) The following examination fees are established for land surveyors and landscape architects:
- (1) Alaska Land Surveying Exam (AKLS), \$100;

- (2) repealed 11/13/2014.
- (c) Repealed 4/19/97.
- (d) The examination fees established in this section are due each time an applicant applies for an examination or examination division.
- (e) The following fee is established for opening a file for the retention of completed land surveyor work verification forms: \$50.

Authority: AS 08.01.065 AS 08.48.265

12 AAC 02.130. AUDIOLOGIST, HEARING AID DEALERS, SPEECH-LANGUAGE PATHOLOGISTS, AND SPEECH-LANGUAGE PATHOLOGIST ASSISTANTS. The following fees are established for audiologists, hearing aid dealers, speech-language pathologists, and speech-language pathologist assistants:

- (1) application fee for initial license or registration, \$250;
- (2) temporary license fee for audiologists or speech-language pathologists, \$225;
- (3) audiologist or speech-language pathologist license fee for all or part of the initial biennial license period, \$225;
- (4) biennial audiologist or speech-language pathologist license renewal fee, \$225;
- (5) hearing aid dealer license fee for all or part of the initial biennial license period, \$225;
- (6) hearing aid dealer biennial license renewal fee, \$225;
- (7) delinquent fee for delayed renewal, \$50;
- (8) speech-language pathologist assistant registration fee for all or part of the initial biennial registration period, \$225;
- (9) biennial speech-language pathologist assistant registration renewal fee, \$225.

Authority:	AS 08.01.065	AS 08.11.025	AS 08.55.010
	AS 08.11.010	AS 08.11.030	AS 08.55.020
	AS 08.11.015	AS 08.11.043	AS 08.55.040
	AS 08.11.020	AS 08.11.050	

12 AAC 02.140. BOARD OF BARBERS AND HAIRDRESSERS. (a) The following fees are established:

- (1) nonrefundable application fee for
 - (A) initial license, \$150;
 - (B) courtesy license, \$80;
- (2) temporary permit fee, \$100;
- (3) fee for student permit, student instructor permit, or apprenticeship that is valid for
 - (A) one year, \$100;
 - (B) two years, \$125;
- (4) barber, hairdresser, esthetician, advanced manicurist, or instructor written examination fee, \$60;
- (5) barber, hairdresser, esthetician, or instructor practical examination fee, \$60;
- (6) temporary license fee, \$100;
- (7) written examination fee for practitioners of body piercing or practitioners of tattooing and permanent cosmetic coloring, \$60;
- (8) temporary shop license fee, \$100;
- (9) courtesy license for practitioners of hairdressing, body piercing, or for practitioners of tattooing and permanent cosmetic coloring, \$80;
- (10) advanced manicurist endorsement one-time fee, \$20.
- (b) The following license fees are established for all or part of the initial biennial license period:
 - (1) barber or hairdresser, \$180;
 - (2) esthetician, \$180;
 - (3) instructor, \$260;
 - (4) shop owner, \$260;
 - (5) school and school owner combined, \$660;
 - (6) manicurist, \$180;
 - (7) repealed 6/8/2016;
 - (8) practitioner of tattooing and permanent cosmetic coloring, \$180;
 - (9) practitioner of body piercing, \$180.
- (c) The following biennial license renewal fees are established:
 - (1) barber or hairdresser, \$180;
 - (2) esthetician, \$180;
 - (3) instructor, \$260;
 - (4) shop owner, \$260;
 - (5) school and school owner combined, \$660;
 - (6) manicurist and advanced manicurist endorsement, \$180;
 - (7) repealed 6/8/2016;

- (8) practitioner of tattooing and permanent cosmetic coloring, \$180;
- (9) practitioner of body piercing, \$180.

Authority: AS 08.01.065 AS 08.13.185

12 AAC 02.145. BOARD OF CERTIFIED DIRECT-ENTRY MIDWIVES. The following fees are established for direct-entry midwives and apprentices:

- (1) nonrefundable application fee for initial certification, \$500;
- (2) certification fee for all or part of the initial biennial certification period, \$3,800;
- (3) biennial certification renewal fee, \$3,800;
- (4) apprentice direct-entry midwife permit fee, \$1,275;
- (5) biennial apprentice direct-entry midwife permit renewal fee, \$1,275;
- (6) nonrefundable application fee for initial apprentice direct-entry midwife permit, \$250.

Authority: AS 08.01.065 AS 08.65.100

12 AAC 02.150. BOARD OF CHIROPRACTIC EXAMINERS. (a) The following fees are established for chiropractors:

- (1) application fee for
 - (A) initial license, \$250;
 - (B) locum tenens permit, \$250;
 - (C) any courtesy license, \$250;
 - (2) license fee for all or part of the initial biennial license period, \$600;
 - (3) biennial license renewal fee, \$600;
 - (4) temporary permit fee, \$150;
 - (5) examination fee, \$200;
 - (6) locum tenens permit fee, \$150;
 - (7) inactive license fee, \$150;
 - (8) retired status license fee, \$150;
 - (9) specialty designation fee, \$50;
 - (10) fee for any courtesy license, \$150;
 - (11) continuing education course approval fee, \$125;
 - (12) continuing education course change approval fee, \$50;
 - (13) delayed renewal penalty fee, \$100.
- (b) The peer review fee charged to a complainant is \$50.

Authority: AS 08.01.062 AS 08.01.100 AS 08.20.185
AS 08.01.065 AS 08.20.180

12 AAC 02.155. BOARD OF SOCIAL WORK EXAMINERS. (a) The following fees are established for social workers:

- (1) application fee for initial license, \$100;
- (2) clinical social worker license fee for all or part of the initial biennial license period, \$325;
- (3) master social worker license fee for all or part of the initial biennial license period, \$275;
- (4) baccalaureate social worker license fee for all or part of the initial biennial license period, \$225;
- (5) biennial clinical social worker license renewal fee, \$325;
- (6) biennial master social worker license renewal fee, \$275;
- (7) biennial baccalaureate social worker license renewal fee, \$225;
- (8) temporary license fee, \$75.

(b) Notwithstanding 12 AAC 02.020 and 12 AAC 02.030, the initial license renewal fee for a clinical social worker, master social worker, or baccalaureate social worker in (a)(5) – (7) of this section will not be prorated, except as provided in 12 AAC 02.030(a)(1).

(c) The following fees are established for submission of social worker continuing education courses for approval under 12 AAC 18.220:

- (1) initial continuing education course submittal fee, \$50;
- (2) continuing education course resubmittal fee, \$25.

Authority: AS 08.01.065 AS 08.95.110 AS 08.95.125
AS 08.95.030 AS 08.95.120

12 AAC 02.160. COLLECTION AGENCIES. (a) The following fees are established for collection agencies:

- (1) application fee for initial license, \$50;
- (2) operator license fee for all or part of the initial biennial license period, \$125;
- (3) biennial operator license renewal fee, \$125;

- (4) agency license fee for all or part of the initial biennial license period, \$125;
- (5) biennial agency license renewal fee, \$125;
- (6) branch office license fee, for all or part of the initial biennial license period, \$125;
- (7) biennial branch office license renewal fee, \$125;
- (8) delayed renewal penalty, \$50.

(b) Under AS 08.24.370, all nonresident operator and agency fees are double the fees established in (a) of this section, except for branch office fees.

Authority: AS 08.01.065 AS 08.24.135 AS 08.24.370
AS 08.01.100

12 AAC 02.170. CONCERT PROMOTERS. The following fees are established for concert promoters:

- (1) application fee for initial registration, \$125;
- (2) certificate of registration fee, for all or part of the initial biennial registration period, \$800;
- (3) biennial certificate of registration renewal fee, \$800.

Authority: AS 08.01.065 AS 08.92.020 AS 08.92.080

12 AAC 02.180. CONSTRUCTION CONTRACTORS. (a) The following fees are established for general, mechanical, and all specialty construction contractors:

- (1) nonrefundable application fee for initial registration or residential contractor endorsement, \$65;
- (2) certificate of registration and license enforcement support fee, for all or part of the initial biennial registration period, \$235;
- (3) biennial certificate of registration renewal and license enforcement support fee, \$235;
- (4) fee for change from one specialty to another specialty, or from specialty to mechanical, or from mechanical to specialty, contractor registration, \$35;
- (5) name change, \$65;
- (6) bonding research, \$30;
- (7) residential contractor endorsement fee, for all or part of the initial biennial endorsement period, \$235;
- (8) biennial residential contractor endorsement renewal fee, \$235;
- (9) residential contractor endorsement examination fee, \$95.

(b) When a registrant upgrades from a specialty or mechanical contractor registration to a general contractor registration, or downgrades from a general contractor registration to a specialty or mechanical contractor registration, the following fees will be assessed:

- (1) when, as a result of the change, the registrant's registration period at the time of the change is reduced, \$65;
- (2) when, as a result of the change, the registrant's registration period at the time of the change is extended, \$95;
- (3) repealed 11/15/96.

Authority: AS 08.01.065 AS 08.18.041

12 AAC 02.190. BOARD OF DENTAL EXAMINERS. (a) The following fees for dental hygienists are established:

- (1) nonrefundable application fee for
 - (A) initial license, \$100;
 - (B) courtesy license, \$50;
 - (C) initial restorative function endorsement, \$100;
 - (D) local anesthetic permit, \$100;
 - (E) nitrous oxide certification, \$100;
- (2) repealed 12/13/2014;
- (3) license fee for all or part of the initial biennial license period, \$200;
- (4) biennial license renewal fee, \$200;
- (5) local anesthetic permit, \$100;
- (6) credential review fee, \$110;
- (7) local anesthetic permit renewal fee, \$100;
- (8) courtesy license fee, \$50;
- (9) restorative function endorsement fee, for all or part of the initial endorsement period, \$60;
- (10) restorative function endorsement renewal fee, \$60;
- (11) nitrous oxide certification one-time fee, \$100.
- (b) The following fees for dentists are established:
 - (1) nonrefundable application fee for
 - (A) initial license by examination, \$600;
 - (B) repealed 12/13/2014;

- (C) courtesy license, \$50;
- (D) repealed 12/13/2014;
- (E) deep sedation, moderate sedation, minimal sedation, or general anesthetic permit, \$100;
- (2) nonrefundable application and review fee for license by credentials, \$1,000;
- (3) repealed 12/13/2014;
- (4) license fee for all or part of the initial biennial license period, \$450;
- (5) repealed 12/13/2014;
- (6) biennial license renewal fee, \$450;
- (7) repealed 12/13/2014;
- (8) repealed 12/13/2014;
- (9) deep sedation, moderate sedation, or minimal sedation permit fee for all or part of the initial biennial permit period, \$1,000;
- (10) biennial deep sedation, moderate sedation, or minimal sedation permit renewal fee, \$350;
- (11) repealed 12/13/2014;
- (12) general anesthetic permit fee for all or part of the initial biennial permit period, \$1,000;
- (13) biennial general anesthetic permit renewal fee, \$350;
- (14) courtesy license fee, \$50.
- (c) The following fees are established for submission of dental and dental hygiene continuing education courses for approval under 12 AAC 28.410:
 - (1) initial continuing education course submittal fee, \$50;
 - (2) continuing education course resubmittal fee, \$50.

Authority:	AS 08.01.065	AS 08.32.070	AS 08.32.081
	AS 08.01.100	AS 08.32.071	AS 08.36.250
	AS 08.32.030		

12 AAC 02.195. DIETITIANS AND NUTRITIONISTS. The following fees are established for dietitians and nutritionists:

- (1) application fee for initial license, \$100;
- (2) license fee for all or part of the initial biennial license period, \$125;
- (3) biennial license renewal fee, \$125.

Authority:	AS 08.01.010	AS 08.01.100	AS 08.38.030
	AS 08.01.065	AS 08.38.020	

12 AAC 02.200. DISPENSING OPTICIANS. The following fees are established for dispensing opticians and apprentices:

- (1) nonrefundable application fee for initial license, \$50;
- (2) license fee for all or part of the initial biennial license period, \$275;
- (3) biennial license renewal fee, \$275;
- (4) apprentice registration fee, \$250;
- (5) apprentice registration change fee, \$50.

Authority:	AS 08.01.065	AS 08.71.120	AS 08.71.160
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12 AAC 02.210. ELECTRICAL ADMINISTRATORS. The following fees are established for electrical administrators:

- (1) nonrefundable application fee for each license category applied for separately, \$50;
- (2) examination fee, due each time an applicant applies for an examination, \$125 per category;
- (3) electrical administrator license fee for all or part of the initial biennial license period, \$200;
- (4) biennial electrical administrator license renewal fee, \$200;
- (5) repealed 10/1/88;
- (6) repealed 5/30/97.

Authority:	AS 08.01.065	AS 08.40.150
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12 AAC 02.215. EUTHANASIA OF DOMESTIC ANIMALS. The following fees are established for agencies that purchase, possess, and use certain drugs to euthanize domestic animals:

- (1) application fee for initial euthanasia permit, \$25;
- (2) permit fee for all or part of the initial biennial license period, \$25;
- (3) biennial permit renewal fee, \$25.

Authority:	AS 08.01.065	AS 08.02.050
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12 AAC 02.220. GEOLOGISTS. The fee for certification of a professional geologist is \$50.

Authority: AS 08.01.065 AS 08.02.011

12 AAC 02.225. PRIVATE PROFESSIONAL GUARDIAN LICENSE AND PRIVATE PROFESSIONAL CONSERVATOR LICENSE. The following fees are established for private professional guardians and private professional conservators:

- (1) application fee for initial registration, \$125;
- (2) license fee for all or part of the initial biennial licensing period, \$725;
- (3) biennial license renewal fee, \$725;
- (4) temporary license fee for private professional guardian or private professional conservator, \$50;
- (5) nonrefundable fingerprint processing fee, \$59.

Authority: AS 08.01.065 AS 08.26.060

12 AAC 02.230. BIG GAME COMMERCIAL SERVICES BOARD. (a) The following fees are established for registered and master guide-outfitters:

- (1) nonrefundable application fee for initial license, \$200;
 - (2) initial registered guide-outfitter qualification examination or retake examination fee, \$125;
 - (3) game management unit examination fee for taking initial examination, retaking examination, or adding game management units, \$400 per game management unit;
 - (4) registered or master guide-outfitter license fee, for all or part of the biennial license period, \$850;
 - (5) biennial registered or master guide-outfitter license renewal fee, \$850;
 - (6) examination preparation packet for registered guide-outfitter, \$100;
 - (7) retired status license fee, \$300;
 - (8) hunt record annual filing fee, \$300;
 - (9) guide use area registration fee, \$100.
- (b) The following fees are established for Class-A assistant and assistant guides:
- (1) nonrefundable application fee for initial license, \$200;
 - (2) Class-A assistant and assistant guide license fee for all or part of the initial biennial license period, \$410;
 - (3) Class-A assistant and assistant guide biennial license renewal fee, \$410;
 - (4) retired status license fee, \$175.
- (c) The following fees are established for transporter licenses:
- (1) nonrefundable application fee, \$200;
 - (2) transporter license fee, for all or part of the biennial license period, \$850;
 - (3) biennial transporter license renewal fee, \$850;
 - (4) transporter activity report annual filing fee, \$300.
- (d) Under AS 08.54.770(e), the license fees for nonresidents are double the license fees established in (a) – (c) of this section.

Authority: AS 08.01.010 AS 08.54.650 AS 08.54.760
AS 08.01.065 AS 08.54.750 AS 08.54.770
AS 08.01.100

12 AAC 02.235. HOME INSPECTORS. The following fees are established for home inspectors and associate home inspectors:

- (1) nonrefundable application fee for initial license, \$65;
- (2) certificate of registration and license enforcement support fee, for all or part of the initial biennial licensing period, \$235;
- (3) biennial certificate of registration renewal and license enforcement support fee, \$235;
- (4) bonding research, \$30;
- (5) fee for adding an additional type of authorized inspection to a registration, \$30.

Authority: AS 08.01.065 AS 08.18.022 AS 08.18.041

12 AAC 02.240. BOARD OF MARINE PILOTS. The following fees are established for all license and registration categories of marine pilots and vessel agents:

- (1) nonrefundable application fee for
 - (A) initial deputy marine pilot license, including the application fee for the regional comprehensive local knowledge examination, \$500;
 - (B) core examination, extension of route examination, marine pilot license, vessel agent registration, VLCC endorsement, or tonnage upgrade, \$100;

- (2) marine pilot license fee for all or part of the initial biennial license period, \$2,500, which will be waived by the department if the applicant is upgrading from a deputy marine pilot license and has paid the deputy marine pilot license fee for the same biennial license period;
- (3) biennial marine pilot license renewal fee, \$2,500;
- (4) vessel agent registration fee for all or part of the initial biennial registration period, \$1,000;
- (5) biennial vessel agent renewal fee, \$1,000;
- (6) core examination fee, \$500;
- (7) deputy marine pilot license fee for all or part of the initial biennial license period, \$2,500;
- (8) biennial deputy marine pilot license renewal fee, \$2,500;
- (9) regional comprehensive local knowledge examination fee, \$500;
- (10) extension of route examination fee, \$200.

Authority: AS 08.01.065 AS 08.62.140

12 AAC 02.242. BOARD OF MARITAL AND FAMILY THERAPY. The following fees are established for marital and family therapists and associates:

- (1) nonrefundable application fee for initial license, \$200;
- (2) license fee for all or part of the initial biennial license period, \$800;
- (3) biennial license renewal fee, \$800;
- (4) four-year associate license fee for supervised practice, \$500;
- (5) temporary license fee, \$200.

Authority: AS 08.01.065 AS 08.63.110 AS 08.63.140
AS 08.63.100 AS 08.63.130

12 AAC 02.245. MECHANICAL ADMINISTRATORS. The following fees are established for mechanical administrators:

- (1) nonrefundable application fee for each license category applied for separately, \$50;
- (2) examination fee, due each time an applicant applies for an examination, \$125 per category;
- (3) mechanical administrator license fee for all or part of the initial biennial license period, \$250;
- (4) biennial mechanical administrator license renewal fee, \$250;
- (5) repealed 5/30/97.

Authority: AS 08.01.065 AS 08.40.290 AS 08.40.310

12 AAC 02.250. STATE MEDICAL BOARD. (a) The following fees are established for physicians, podiatrists, and osteopaths:

- (1) nonrefundable application fee for initial license, \$200;
- (2) temporary permit fee, \$75;
- (3) initial or extended locum tenens permit fee, \$100;
- (4) license fee for all or part of the initial biennial license period, \$300;
- (5) active biennial license renewal fee, \$300;
- (6) inactive biennial license renewal fee, \$125;
- (7) retired status license one-time fee, \$50;
- (8) courtesy license fee, \$100;
- (9) residency permit nonrefundable application and permit fee, \$50;
- (10) nonrefundable application fee for locum tenens permit, \$100;
- (11) nonrefundable application fee for courtesy license, \$100.
- (b) The following fees are established for physician assistants:
 - (1) nonrefundable application fee for initial license, \$150;
 - (2) temporary license fee, \$50;
 - (3) temporary authorization to practice fee, \$50;
 - (4) locum tenens authorization to practice fee, \$50;
 - (5) fee for establishing or changing a collaborative relationship, \$100;
 - (6) license fee for all or part of the initial biennial license period, \$200;
 - (7) biennial license renewal fee, \$200;
 - (8) graduate physician assistant nonrefundable application and license fee, \$50;
 - (9) inactive biennial license fee, \$100.
- (c) The following fees are established for mobile intensive care paramedics:
 - (1) nonrefundable application fee for initial license, \$50;
 - (2) temporary permit fee, \$50;
 - (3) provisional license fee, \$50;
 - (4) license fee for all or part of the initial biennial license period, \$50;
 - (5) biennial license renewal fee, \$50.

Authority:	AS 08.01.062	AS 08.64.270	AS 08.64.276
	AS 08.01.065	AS 08.64.272	AS 08.64.315
	AS 08.64.107		

12 AAC 02.255. MOBILE HOME DEALERS. (a) The following fees are established for mobile home dealers:

- (1) nonrefundable application fee for initial registration, \$50;
- (2) registration fee for all or part of the initial biennial registration period, \$510;
- (3) biennial registration renewal fee, \$510;
- (b) A registration as a mobile home dealer expires on August 31 of odd-numbered years.

Authority:	AS 08.01.065	AS 08.67.020	AS 08.67.040
	AS 08.01.100		

12 AAC 02.260. MORTUARY SCIENCE. (a) A funeral director or embalmer license and a funeral establishment permit expires on December 31 of all even-numbered years. The following fees are established for funeral directors, embalmers, and funeral establishments:

- (1) nonrefundable application fee for initial license or permit, \$150;
- (2) license or permit fee for all or part of the initial license or permit period, \$275;
- (3) biennial license or permit renewal fee, \$275;
- (4) state law examination fee, \$100.
- (b) The following fees are established for funeral director or embalmer trainee permits:
 - (1) application fee for initial permit, \$150;
 - (2) trainee permit issuance and renewal fee, \$100.
- (c) Permit fee for disposal of human remains for compensation by a person not licensed under AS 08.42 is \$75.

Authority:	AS 08.01.065	AS 08.42.010
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12 AAC 02.270. NATUROPATHS. The following fees are established for naturopaths:

- (1) nonrefundable application fee for initial license, \$500;
- (2) license fee for all or part of the initial biennial license period, \$1,800;
- (3) biennial license renewal fee, \$1,800;
- (4) temporary license fee, \$500;
- (5) repealed 10/28/2000.

Authority:	AS 08.01.065	AS 08.45.030	AS 08.45.100
	AS 08.45.020	AS 08.45.035	

12 AAC 02.280. BOARD OF NURSING: FEES FOR NURSES AND ADVANCED PRACTICE REGISTERED NURSES. The following fees are established for nurses and advanced practice registered nurses:

- (1) nonrefundable application fee for
 - (A) initial registered or practical nursing license, \$100;
 - (B) advanced practice registered nurse license, \$100;
 - (C) preceptorship registration one-time fee, \$100;
- (2) license fee for all or part of the initial biennial registered or practical nursing license period, \$200;
- (3) biennial registered or practical nursing license renewal fee, \$200;
- (4) temporary permit fee, \$100;
- (5) prescriptive authority or controlled substance authority application one-time fee, \$100;
- (6) advanced practice registered nurse license fee for all or part of the initial biennial license period, \$100;
- (7) advanced practice registered nurse biennial license renewal fee, \$100;
- (8) reexamination application fee, \$50;
- (9) late renewal penalty fee, \$100;
- (10) nonrefundable fingerprint processing fee, \$75;
- (11) courtesy license fee, \$50;
- (12) retired nurse status license one-time fee, \$100.

Authority:	AS 08.01.010	AS 08.01.100	AS 08.68.220
	AS 08.01.065		

12 AAC 02.282. BOARD OF NURSING: FEES FOR CERTIFIED NURSE AIDES. The following fees are established for certified nurse aides:

- (1) nonrefundable application fee for initial certification, \$100;
- (2) examination fee, \$55;
- (3) certification fee for all or part of the initial biennial nurse aide certification period, \$100;
- (4) biennial nurse aide certification renewal fee, \$100;

- (5) certified nurse aide training program approval fee, \$500;
- (6) reexamination fee, \$50;
- (7) nonrefundable fingerprint processing fee, \$75.

Authority: AS 08.01.010 AS 08.01.065 AS 08.68.336

12 AAC 02.290. NURSING HOME ADMINISTRATORS. The following fees are established for nursing home administrators:

- (1) application fee for
 - (A) initial license, \$125;
 - (B) provisional license, \$100;
- (2) license fee for all or part of the initial biennial license period, \$250;
- (3) biennial license renewal fee, \$250;
- (4) provisional license fee, \$125.

Authority: AS 08.01.065 AS 08.70.130 AS 08.70.150
AS 08.70.080

12 AAC 02.300. BOARD OF EXAMINERS IN OPTOMETRY. The following fees are established for optometrists:

- (1) nonrefundable application fee for initial license, \$300;
- (2) examination fee, \$100;
- (3) license fee for all or part of the initial biennial license period, \$480;
- (4) biennial license renewal fee, \$480;
- (5) retired status license fee, \$150;
- (6) temporary military courtesy license fee, \$240;
- (7) extension of temporary military courtesy license fee, \$240.

Authority: AS 08.01.063 AS 08.01.065 AS 08.72.191

12 AAC 02.310. BOARD OF PHARMACY. (a) The following fees are established for pharmacists, pharmacy interns, pharmacy technicians, pharmacies, wholesale drug distributors, and drug dispensaries:

- (1) application fee for initial license, \$60
- (2) repealed 10/28/2000;
- (3) temporary pharmacist license fee, \$60;
- (4) emergency permit to practice pharmacy fee, \$110;
- (5) pharmacy intern license fee, \$30.

(b) The following license and registration fees for all or part of the initial biennial licensing or registration period and subsequent biennial license and registration renewal fees are established for pharmacists, pharmacy technicians, remote and other pharmacies, and wholesale drug distributors:

- (1) pharmacist, \$240;
- (2) wholesale drug distributor, \$500;
- (3) pharmacy, \$240;
- (4) drug room, \$240;
- (5) registered pharmacy located outside of the state, \$600;
- (6) pharmacy technician, \$60;
- (7) remote pharmacy, \$240.

Authority: AS 08.01.065 AS 08.80.160

12 AAC 02.320. STATE PHYSICAL THERAPY AND OCCUPATIONAL THERAPY BOARD. The following fees are established for physical therapists, physical therapy assistants, occupational therapists, and occupational therapy assistants:

- (1) application fee for initial license, \$150;
- (2) license fee for physical or occupational therapist for all or part of the initial biennial license period, \$240;
- (3) biennial license renewal fee for physical or occupational therapist, \$240;
- (4) temporary permit fee, \$65;
- (5) limited permit fee, \$65;
- (6) license fee for physical or occupational therapy assistant for all or part of the initial biennial license period, \$175;
- (7) biennial license renewal fee for physical or occupational therapy assistant, \$175.

Authority: AS 08.01.065 AS 08.84.050

12 AAC 02.325. BOARD OF PROFESSIONAL COUNSELORS. The following fees are established for professional counselors:

- (1) application fee for any initial license, \$200;
- (2) license fee for all or part of any initial biennial license period, \$500;
- (3) any biennial license renewal fee, \$500;
- (4) any board-approved supervisor fee, \$150.

Authority: AS 08.01.065

12 AAC 02.330. BOARD OF PSYCHOLOGIST AND PSYCHOLOGICAL ASSOCIATE EXAMINERS. The following fees are established for psychologists and psychological associates:

- (1) application fee for
 - (A) initial license, \$200;
 - (B) any courtesy psychologist license, \$50;
- (2) credential review fee, \$100;
- (3) psychologist license fee for all or part of the initial biennial licensing period, \$775;
- (4) psychologist biennial license renewal fee, \$775;
- (5) temporary license fee, \$150;
- (6) psychological associate license fee for all or part of the initial biennial licensing period, \$775;
- (7) psychological associate biennial license renewal fee, \$775;
- (8) state examination fee, \$50;
- (9) Examination for Professional Practice in Psychology (EPPP), examination retest fee, \$25;
- (10) fee for any courtesy psychologist license, \$200.

Authority: AS 08.01.062 AS 08.86.135 AS 08.86.140
AS 08.01.065

12 AAC 02.340. BOARD OF PUBLIC ACCOUNTANCY. The following fees are established for accountants, partnerships, corporations, limited liability companies, and other legal entities:

- (1) nonrefundable application fee for
 - (A) initial license, permit, or practice privilege, \$300;
 - (B) repealed 10/18/2015;
- (2) repealed 11/18/2006;
- (3) certified public accountant license fee for all or part of the initial biennial license period, \$390;
- (4) certified public accountant biennial active license renewal fee, \$390;
- (5) certified public accountant biennial inactive license renewal fee, \$245;
- (6) uncertified public accountant biennial license renewal fee, under AS 08.04.661, \$200;
- (7) uncertified public accountant biennial inactive license renewal fee, under AS 08.04.661, \$200;
- (8) partnership, corporation, limited liability company, or other legal entity registration and permit fee for all or part of the initial biennial registration period, \$530;
- (9) biennial partnership, corporation, limited liability company, or other legal entity permit renewal fee, \$530;
- (10) out-of-state practice privilege permit fee for all or part of the initial biennial registration period, \$900;
- (11) biennial out-of-state practice privilege permit renewal fee, \$900;
- (12) license reactivation fee, \$150;
- (13) delayed renewal penalty fee, \$100.

Authority: AS 08.01.065 AS 08.04.495

12 AAC 02.350. BOARD OF VETERINARY EXAMINERS. The following fees are established for veterinarians and veterinary technicians:

- (1) nonrefundable application fee for
 - (A) initial veterinarian license by examination, \$250;
 - (B) initial veterinary technician license, \$125;
 - (C) courtesy license, \$125;
 - (D) student permit, \$125;
- (2) state written examination fee for veterinarians, \$200;
- (3) repealed 10/9/2016;
- (4) license fee for veterinarians for all or part of the initial biennial license period, \$500;
- (5) biennial license renewal fee for veterinarians, \$500;
- (6) temporary license fee, \$125;
- (7) temporary permit fee, \$125;
- (8) registration fee for veterinary technicians for all or part of the initial biennial registration period, \$100;
- (9) biennial registration renewal fee for veterinary technicians, \$100;
- (10) courtesy license fee, \$125;

(11) nonrefundable application and investigation fee for veterinarian license by credentials under AS 08.98.184, \$250;

(12) delayed renewal penalty fee for a veterinarian license that has lapsed more than 60 days and for each year the license has been lapsed, \$150;

(13) delayed renewal penalty fee for a veterinary technician license that has lapsed more than 60 days and for each year the license has been lapsed, \$75.

Authority: AS 08.01.062 AS 08.01.100 AS 08.98.190
AS 08.01.065

12 AAC 02.360. REAL ESTATE COMMISSION. (a) The following fees are established for real estate salespersons, associate brokers, and brokers:

(1) license fee, for all or part of the initial biennial license period, whether licensure is by examination or endorsement, \$200;

(2) biennial license renewal fee for both active and inactive licenses, \$200;

(3) fee for office changes, including change of broker and company name, \$75 for each license;

(4) transfer of license fee, \$225;

(5) application fee for initial license, \$200;

(6) initial office registration fee, \$225;

(7) license inactivation or reactivation fee, \$150;

(8) duplicate license fee, \$50;

(9) name change fee, \$75;

(10) post-license education certification and new license document fee, \$30;

(11) reinstatement fee for a lapsed license, \$275.

(b) The following fees are established for real estate education course certification and instructor approval:

(1) initial course certification fee, \$30 per credit hour;

(2) biennial course recertification fee, \$25 per credit hour;

(3) instructor approval fee, \$200 per instructor;

(4) temporary instructor approval fee, \$250 per instructor;

(5) instructor approval recertification fee, \$100.

(c) The following fees are established for publications offered by the Real Estate Commission:

(1) information pamphlet on landlord and tenant rights, \$5;

(2) repealed 12/2/2005.

Authority: AS 08.01.065 AS 08.88.221

12 AAC 02.370. BOARD OF CERTIFIED REAL ESTATE APPRAISERS. The following fees are established for general real estate appraisers, residential real estate appraisers, institutional real estate appraisers, and registered real estate appraiser trainees:

(1) nonrefundable application fee for initial certification, license, or registration, \$450;

(2) certification fee for all or part of the initial biennial certification period, \$1,050;

(3) biennial certification renewal fee, \$1,050;

(4) real estate appraiser trainee registration fee, \$450;

(5) real estate appraiser trainee renewal fee, \$450;

(6) courtesy license fee, \$150;

(7) course approval fee, \$400;

(8) annual federal registry fee, \$40.

Authority: AS 08.01.062 AS 08.87.110 AS 08.87.310
AS 08.01.065 AS 08.87.120

12 AAC 02.380. PAWNBROKERS. The following fees are established for pawnbrokers:

(1) nonrefundable application fee for initial license, \$200;

(2) license fee for all or part of the initial biennial licensing period, \$800;

(3) biennial license renewal fee, \$800.

Authority: AS 08.01.065 AS 08.76.110 AS 08.76.140

12 AAC 02.390. BEHAVIOR ANALYSTS. The following fees are established for behavior analysts and assistant behavior analysts:

(1) nonrefundable application fee for initial license, \$200;

(2) behavior analyst license fee for all or part of the initial biennial licensing period, \$250;

(3) behavior analyst biennial license renewal fee, \$250;

(4) assistant behavior analyst license fee for all or part of the initial biennial licensing period, \$150;

- (5) assistant behavior analyst biennial license renewal fee, \$150;
- (6) temporary license fee, \$100;
- (7) nonrefundable fingerprint processing fee, \$60.

Authority: AS 08.01.010 AS 08.15.020 AS 08.15.080
AS 08.01.065

12 AAC 02.395. ATHLETIC TRAINERS. The following fees are established for athletic trainers:

- (1) nonrefundable application fee for initial license, \$200;
- (2) athletic trainer license fee for all or part of the initial biennial licensing period, \$500;
- (3) athletic trainer biennial license renewal fee, \$500.

Authority: AS 08.01.010 AS 08.07.020 AS 08.07.040
AS 08.01.065

12 AAC 02.396. BOARD OF MASSAGE THERAPISTS. The following fees are established for massage therapists:

- (1) nonrefundable application fee for initial license, \$200;
- (2) massage therapy license fee for all or part of the initial biennial licensing period, \$290;
- (3) massage therapy biennial license renewal fee, \$290;
- (4) nonrefundable fingerprint processing fee, \$60.

Authority: AS 08.01.010 AS 08.01.065 AS 08.61.090

ARTICLE 3. EXAMINATION REVIEW PROCEDURES.

Section

400. Examination review

12 AAC 02.400. EXAMINATION REVIEW. (a) The division will follow the examination review procedures established in this section unless the public or private organization that prepares and owns the examination has procedures for examination review that conflict with the procedures in this section. When there is a conflict, the division will follow the procedures of the public or private organization that prepares and owns the examination.

(b) An applicant who wishes to review a failed examination shall submit a written request, and the applicable examination review fee specified in this chapter, to the division within 30 days after the notice of examination results was mailed to the applicant.

(c) All examination reviews will be conducted in the presence of division staff or the division's designee at the time and location determined by the division. An examination review will not be conducted within 30 days of the next examination the applicant is scheduled to take.

(d) Only an applicant who has failed an examination may participate in the examination review and the applicant may review only his or her own examination.

(e) An applicant may use the same reference materials during an examination review that were allowed during the examination itself, but applicants may not use other materials or take notes or make copies of any kind. All materials brought to an examination review are subject to inspection by the division staff.

(f) An applicant may challenge questions on the examination by submitting the challenge in writing during the time allowed to conduct the examination review under (h) of this section. The written challenge to an examination question must include

- (1) the applicant's name;
- (2) the date of the examination;
- (3) the title of the examination;
- (4) the number of the question being challenged; and
- (5) a detailed explanation of the reason for the challenge.

(g) A challenge to an examination question will be reviewed by the division, licensing board, or the public or private organization administering the examination. If the division, licensing board, or public or private organization administering the examination sustains a challenge to an examination question, the department will give credit to the applicant for that question.

(h) To conduct the examination review, the division will allow the applicant challenging a question under (f) of this section one half of the length of time that was allowed for the taking of the examination being reviewed.

(i) Unless otherwise provided by an organization that provides or administers an examination for the division or the release is prohibited by law or contract, the division will provide an applicant who requests an examination review with the questions answered incorrectly on the failed examination and the answer that the applicant selected

only. If the examination contains multiple choice questions, the applicant may be provided with all of the answer selections to each failed question without identification of the correct answers.

Authority: AS 08.01.050

AS 08.01.080

ARTICLE 4. REAL ESTATE ERRORS AND OMISSIONS INSURANCE.

Section

- 510. Minimum standards**
- 520. Exceptions to coverage**
- 530. Standards for equivalent coverage**
- 540. Notification required for cancellation**
- 550. Maximum amount of premium**
- 560. Method of adjustment**
- 590. Definitions**

12 AAC 02.510. MINIMUM STANDARDS. (a) The master errors and omissions insurance policy must provide to each individual licensee, at a minimum, the following terms of coverage:

(1) not less than \$100,000 limit of liability for each licensee per covered wrongful act or per covered claim depending on the policy form used by the insurer; claims expenses including the cost for investigation or defense must be in addition to the limit of liability; if the limit of liability is on a

(A) covered wrongful act basis, two or more claims arising out of a single wrongful act or a series of related wrongful acts may be considered one claim;

(B) covered claim basis, two or more related wrongful acts may be considered one claim;

(2) an annual aggregate limit of liability of not less than \$300,000 per licensee;

(3) a deductible amount for each covered wrongful act of not more than \$5,000 for every \$300,000 annual aggregate limit of liability; an additional deductible for investigation and defense costs may be considered;

(4) an extended reporting period of 90 days and an option to purchase an additional three years extended reporting period for a premium not to exceed 200 percent of the premium charged for the last year of the terminating coverage;

(5) the ability of a licensee, upon payment of an additional premium, to obtain higher limits of coverage or to purchase additional coverages from the group insurer as may be available from the insurer;

(6) the coverage provided under the master errors and omissions insurance policy must be individual and specific to the licensee and must cover the licensee regardless of changes in real estate broker or changes in the business relationship between a real estate broker and the licensee; and

(7) prior acts coverage must be offered to a licensee who has maintained the same or similar coverage, continually in-force until the date and the time that coverage begins under the master errors and omissions insurance policy coverage.

(b) The master errors and omissions insurance policy must contain a provision requiring the consent of the insured to settle a claim except that the insured may not unreasonably withhold consent.

(c) The insurer that is selected to provide the master errors and omissions insurance policy shall

(1) maintain an A.M. Best rating of "B+" or better and financial size category of class VI or higher;

(2) maintain a certificate of authority issued under AS 21.09 by the director of insurance to transact insurance business in this state and be in compliance with AS 21;

(3) provide the master errors and omissions insurance policy after notification by the Real Estate Commission that it is the successful bidder of a competitive bidding process under AS 36.30;

(4) enter into contract to provide the master errors and omissions insurance policy in conformity with AS 08.88.172, 12 AAC 02.510 – 12 AAC 02.590, and AS 21; and

(5) collect premiums, maintain records, and report to the Real Estate Commission the names of those insured and prior claims experience if known, date of claim, amount paid, nature of claim, and claims information on a quarterly basis or an annual basis or on request by the Real Estate Commission.

Authority: AS 08.88.172

12 AAC 02.520. EXCEPTIONS TO COVERAGE. Except as provided in this section, the master errors and omissions insurance policy may not exclude coverage for claims brought against the insured licensee arising out of a wrongful act by the licensee when performing a professional service for which a real estate license is required. The policy may limit or exclude coverage for claims brought against a licensee that arise as follows:

(1) out of claims or lawsuits made or brought by any insured person against any other insured person within the same firm or from compensation disputes between licensees;

(2) out of loss assumed under a contract or an agreement, except for liability the insured would have had in the absence of the agreements;

(3) from a criminal, dishonest, fraudulent, or intentional act or omission; this exclusion does not apply to an insured person who did not personally participate in committing the act or omission and who, upon having knowledge of the act or omission, reported it to the Real Estate Commission, or appropriate law enforcement authorities;

- (4) from unlawful discrimination committed by or for the insured person;
- (5) from fines or penalties imposed by a tribunal or other governmental agency;
- (6) from bodily injury, personal injury, advertising injury, or property damage;
- (7) from related business activities for which a license is not required under AS 08.88;
- (8) from the presence of or the actual, alleged, or threatened discharge, dispersal, release, or escape of hazardous materials, nuclear materials, or pollutants;
- (9) from prior wrongful acts unless specific prior wrongful acts coverage is provided;
- (10) from any violation of 15 U.S.C. 77a – 77aa (Securities Act of 1933) or 15 U.S.C. 78a – 78mm (Securities Exchange Act of 1934) or any state blue sky or securities law or similar state or federal statutes; or
- (11) other standard exclusions that are typical in a professional liability insurance policy and that have been approved by the director of insurance under AS 21.42;
- (12) from the insolvency of an insured person;
- (13) from any injury or damage that the insured had reason to expect; or
- (14) from the conversion, misappropriation, commingling, or defalcation of funds or other property.

Authority: AS 08.88.172

12 AAC 02.530. STANDARDS FOR EQUIVALENT COVERAGE. An insurer issuing equivalent coverage under AS 08.88.172(c)(2) shall hold a certificate of authority issued under AS 21.09. All activities contemplated under AS 08.88.172 must be covered. The insurance must meet the minimum coverage standards of 12 AAC 02.510, except that

(1) a policy with a higher deductible amount or self-insured retention will qualify as equivalent coverage for purposes of AS 08.88.172(c)(2) if, when applying to obtain or renew the license, the insured licensee provides the Real Estate Commission with

(A) an affidavit certifying that the insured licensee has the financial resources in set-aside funds to pay the higher deductible amount or self-insured retention; and

(B) a certificate of insurance from the insured licensee's insurer; and

(2) a broker employing other real estate licensees may comply with the requirements of 12 AAC 02.510(a)(1) and (2) by obtaining insurance with coverage of a minimum of \$300,000 per wrongful act and \$1,000,000 aggregate, if all licensees associated with the broker are covered.

Authority: AS 08.88.172

12 AAC 02.540. NOTIFICATION REQUIRED FOR CANCELLATION. If equivalent insurance coverage obtained by a licensee under AS 08.88.172(c)(2) is to lapse or not be renewed, the insurer shall notify the Real Estate Commission of the intent to lapse or not to renew a minimum of 30 days before the expiration date of the term. It is the responsibility of the broker or licensee, as applicable, to instruct the insurer to provide the notice required by this section to the Real Estate Commission with named licensees covered.

Authority: AS 08.88.172

12 AAC 02.550. MAXIMUM AMOUNT OF PREMIUM. The maximum amount of premium to be charged a licensee annually under the master errors and omissions insurance policy may not exceed \$2,500.

Authority: AS 08.88.172

12 AAC 02.560. METHOD OF ADJUSTMENT. Every three years after the initial procurement of the master errors and omissions insurance policy, the department may adjust the amount of coverage under 12 AAC 02.510(a). The department will not make an adjustment if the department finds the adjustment will significantly reduce the number of insurers willing to bid on a contract to offer the master errors and omissions insurance policy. An adjustment in the limits of liability under 12 AAC 02.510(a) must be an increment of no less than \$25,000. The department will give notice of the adjustments under this section by posting the amounts on its Internet website. An adjustment under this section does not take effect until the renewal or the issuance of a new master errors and omissions insurance policy.

Authority: AS 08.88.172

12 AAC 02.590. DEFINITIONS. In this chapter, unless the context requires otherwise,

(1) "aggregate limit" means the maximum liability of an insurer regardless of the number of claims during the policy term;

(2) "director of insurance" means the person appointed under AS 21.06.010 to head the division of insurance of this state;

(3) "equivalent coverage" means errors and omissions insurance coverage obtained independently of the master errors and omissions insurance policy available from the Real Estate Commission and that complies with the requirements, terms, and conditions as set out in 12 AAC 02.510 – 12 AAC 02.590;

(4) "errors and omissions insurance" means professional liability insurance that provides coverage to holders of active real estate brokers, associate brokers, and salespersons licensed in this state for wrongful acts made during the course of real estate transactions, subject to the coverages, limitations, and exclusions of one or more specific insurance policies in place;

(5) "extended reporting period" means a designated period of time after an errors and omissions insurance policy has expired during which a claim may be made and coverage triggered as if the claim has been made during the policy period;

(6) "master errors and omissions insurance policy" means the policy obtained by the Real Estate Commission under AS 08.88.172 that meets the requirements of 12 AAC 02.510 – 12 AAC 02.590.

(7) "prior acts coverage" means the insurance policy provides coverage for claims that are made during a current policy period, but one or more acts causing the claim or injuries for which the claim is made occurred before the inception of the current policy period;

(8) "wrongful act" means a negligent act, error, or omission.

Authority: AS 08.88.172

ARTICLE 5. TELEMEDICINE BUSINESS REGISTRY.

Section

600. Application for placement on the telemedicine business registry; changes of information

12 AAC 02.600. APPLICATION FOR PLACEMENT ON THE TELEMEDICINE BUSINESS REGISTRY; CHANGES OF INFORMATION. (a) To be registered on the telemedicine business registry established and maintained under AS 44.33.381, and before providing telemedicine services to a recipient located in this state, a business performing telemedicine services must submit to the department

(1) a complete registration on a form provided by the department; the registration must include the business's name, address, and contact information;

(2) a copy of the business's valid business license issued under AS 43.70 and 12 AAC 12; and

(3) the applicable fee established in 12 AAC 02.106.

(b) A business performing telemedicine services must register with the name it is using to perform telemedicine services in this state. A business operating under multiple names to perform telemedicine services shall file a separate registration for each name.

(c) If the name, address, or contact information of a business on the telemedicine business registry changes, the business performing telemedicine services must submit to the department, not later than 30 days after the change or termination,

(1) a complete report, on a form provided by the department, of each change; and

(2) the applicable fee established in 12 AAC 02.106.

(d) A business that fails to comply timely with (c) of this section may not perform telemedicine services in this state and must submit a new application under (a) of this section before resuming the provision of telemedicine services to a recipient located in this state.

(e) If a business terminates the performance of telemedicine services in this state, the business shall notify the department, requesting that the department remove the business from the telemedicine business registry. If a business gives notification under this subsection, the business must submit a new application under (a) of this section before resuming the provision of telemedicine services to a recipient located in this state.

(f) In this section, "telemedicine services" has the meaning given in AS 44.33.381.

Authority: AS 44.33.020 AS 44.33.381

ARTICLE 6.
GENERAL PROVISIONS.

Section

- 900. Name and address changes**
- 910. Abandoned applications**
- 920. Filing date**
- 930. Date of license lapse**
- 935. Effective date of license**
- 940. Effective date of renewed licenses**
- 950. (Repealed)**
- 955. Courtesy license**
- 960. Audit of compliance with continuing competency requirements**
- 965. Failure to meet continuing education requirements for renewal and reinstatement of license**
- 990. Definitions**

12 AAC 02.900. NAME AND ADDRESS CHANGES. (a) A person licensed, registered, or certified by a board or commission listed in AS 08.01.010, or in an occupation listed in AS 08.01.010, shall maintain a current, valid, mailing address on file with the division at all times. The latest mailing address on file with the division is the address that will be used for official communications, notifications, and service of legal process.

(b) A licensee must notify the division in writing, of a change of the licensee's address.

(c) If a licensee has a change of name, the licensee shall submit to the division within 30 days of the change of name

(1) notification of the change of the licensee's name, on a form provided by the division that has been completed by the licensee and notarized;

(2) a copy of the marriage certificate, court document, or other legal document verifying the change of name; and

(3) the fee established in 12 AAC 02.105 for a name change.

(d) The division will issue a new license showing the change of name if a licensee meets the requirements in (c) of this section.

Authority: AS 08.01.050 AS 08.01.080 AS 08.01.087

12 AAC 02.910. ABANDONED APPLICATIONS. (a) Except if procedures are otherwise expressly provided in this title for a particular board or occupation, an application is considered abandoned when

(1) 12 months have elapsed since correspondence was last received from or on behalf of the applicant; or

(2) the applicant has failed to appear for two successive examinations.

(b) An abandoned application is denied without prejudice and the application fee forfeited.

(c) At the time an application is considered abandoned, the division will send notification of abandonment to the last known address of the applicant. An applicant may request a refund of all unused examination and licensing fees credited to the application by submitting a written request for refund within 30 days from the date notification of abandonment was mailed by the division. If no request for refund is received, all fees are forfeited.

Authority: AS 08.01.050 AS 08.01.080

12 AAC 02.920. FILING DATE. (a) Except as otherwise provided in this title, a document submitted to the division will be considered filed as of the postmark date of the document. If the document is submitted by a method that does not provide a postmark date, the document will be considered filed as of the date stamped on the document,

(1) except as provided in (2) of this subsection, when it is received in the division office in Juneau;

(2) for a document related to licensing for nursing under 12 AAC 44 or real estate licensing under 12 AAC 64, when it is received in the division office in Anchorage.

(b) If a filing deadline established in AS 08 or this title falls on a Saturday, Sunday, or state holiday, the deadline will be extended to the next regular state business day.

(c) For the purposes of this section, "postmark date" means the date of a document with prepaid postage and correctly addressed to the division by the United States Postal Service or other established domestic courier service.

Authority: AS 08.01.050 AS 08.01.080

Editor's note: For the purposes of 12 AAC 02.920(a), the division of corporations, business and professional licensing office in the Department of Commerce, Community, and Economic Development, in Juneau is located at the State Office Building, 9th Floor, 333 Willoughby Avenue, Juneau, Alaska 99801 and the division office in Anchorage is located at the Atwood Building, 550 W. 7th Avenue, Suite 1500, Anchorage, Alaska 99501.

12 AAC 02.930. DATE OF LICENSE LAPSE. For the purposes of AS 08.01.100, if a person licensed by the department or by one of the boards or commissions under AS 08.01.010 was issued a temporary license under AS 14.43.148 or AS 25.27.244 and the temporary license was not converted to an annual or biennial license under AS 05.10, or AS 08, or AS 46.03.375, the lapsed period begins from the date that the temporary license expired.

Authority: AS 08.01.050 AS 08.01.080 AS 08.01.100

12 AAC 02.935. EFFECTIVE DATE OF LICENSE. (a) When the Alaska Commission on Postsecondary Education issues a notice of release, on or before the expiration date of the temporary license issued by the division under AS 14.43.148, the division will issue the initial license or renewal under AS 08 or AS 46.03.375. The effective date of the license is the date that the license is issued under AS 08 or AS 46.03.375, except as provided in 12 AAC 02.940(b).

(b) When the child support services agency issues a release, on or before the expiration date of the temporary license issued by the division under AS 25.27.244, the division will issue the initial license or renewal under AS 08 or AS 46.03.375. The effective date of the license is the date that the license is issued under AS 08 or AS 46.03.375, except as provided in 12 AAC 02.940(b).

Authority: AS 08.01.050 AS 08.01.080 AS 08.01.100

12 AAC 02.940. EFFECTIVE DATE OF RENEWED LICENSES. (a) Except as provided in (b) of this section, the effective date of a renewed license will be the date a complete renewal application is filed with the division as determined by 12 AAC 02.920. A complete application includes

- (1) a completed renewal form;
- (2) any applicable renewal fees required by this chapter; and
- (3) documentation of fulfillment of all applicable prerequisites to license renewal, such as continuing competency, recent experience, insurance coverage, or other requirements.

(b) The division will, in its discretion, show a retroactive effective date on a licensee's renewed license if the licensee

- (1) holds a license that has been lapsed less than 60 days;
- (2) requests in writing that the division issue a renewed license showing an effective date that is earlier than the date the renewed license was issued;
- (3) documents that the licensee was in substantial compliance with the renewal requirements in (a) of this section as of the requested effective date; and
- (4) establishes to the satisfaction of the division that the licensee made a good faith effort to strictly comply with the renewal requirements.

(c) The division will not issue a renewed license with an effective date that is earlier than the postmark date of the licensee's first written attempt to renew the licensee's license. "Written attempt to renew" means an effort by the licensee to submit the proper documentation to comply with the license renewal requirements. A request for a renewal application form alone does not constitute a "written attempt to renew."

Authority: AS 08.01.050 AS 08.01.100

12 AAC 02.950. APPLICATION DEADLINE FOR EXAMINATION FOR AN OPTOMETRY LICENSE.
Repealed 12/16/2001.

12 AAC 02.955. COURTESY LICENSE. (a) If an applicant meets the requirements of this section, the department will issue a courtesy license authorizing the holder to practice one of the following professions for the limited purpose recognized by the division:

- (1) acupuncturist under AS 08.06;
- (2) audiologist under AS 08.11;
- (3) electrical administrator or mechanical administrator under AS 08.40;
- (4) funeral director or embalmer under AS 08.42;
- (5) naturopath under AS 08.45.

(b) A courtesy license issued under (a) of this section authorizes the holder to practice the profession or occupation for which the license is issued for a limited purpose recognized by the division under (f) of this section. A courtesy license does not authorize the holder to practice the profession outside the scope of the limited purpose for which the courtesy license is issued.

(c) An applicant for a courtesy license issued under (a) of this section shall submit to the department

- (1) a completed application on a form provided by the department;
- (2) the fee established in 12 AAC 02.105 for a courtesy license;
- (3) a sworn statement, signed by the applicant before a notary, that the applicant is not a resident of this state;
- (4) verification of a current license in another licensing jurisdiction to practice the profession for which a courtesy license is requested; the license in that jurisdiction must be active, in good standing, and cover the scope of the practice required for the limited purpose of the courtesy license;

(5) a description of the limited purpose of the courtesy license and the applicant's intended scope of practice under the courtesy license; and

(6) a sworn statement, signed by the applicant before a notary, that the applicant has not previously been denied a license or had a license revoked in this or another state or other licensing jurisdiction for the profession that the courtesy license is sought.

(d) A courtesy license issued under (a) of this section is valid for no more than 90 consecutive days. The department will not issue more than two courtesy licenses for the profession to an individual within a consecutive eighteen-month period.

(e) The holder of a courtesy license issued under (a) of this section is obligated to uphold the standards of practice identified in AS 08 and in this title for the relevant profession and is subject to the relevant disciplinary provisions in AS 08 and this title.

(f) The department will recognize the following limited purposes for a courtesy license issued under (a) of this section:

(1) provision of professional services in an emergency situation specifically recognized by the department; the department will, in its discretion, restrict the license to cover only the professional services required to respond to the emergency situation, if the department finds that the courtesy license is only needed for this purpose;

(2) instruction or provision of professional services at a clinic or seminar focused on a subject in which the applicant for a courtesy license is a specialist.

Authority: AS 08.01.050

AS 08.01.080

AS 08.02.030

12 AAC 02.960. AUDIT OF COMPLIANCE WITH CONTINUING COMPETENCY REQUIREMENTS.

(a) Except as provided in (b) - (j) of this section, the department will audit compliance of licenses with continuing competency requirements in accordance with this section if

(1) the licensee is required to meet continuing competency requirements under AS 08 or this title;

(2) repealed 9/29/2005;

(3) repealed 9/29/2005.

(b) A licensee subject to audit under (a) of this section and applying for license renewal shall

(1) complete and sign a statement of compliance with continuing competency requirements; and

(2) submit the statement to the department with the application for license renewal.

(c) Except as provided in (d) of this section, the department will select licensees for audit under (a) of this section as follows:

(1) ten percent of the total number of licensees in that profession if the total number of licensees is less than 3,000; or

(2) five percent of the total number of licensees in that profession if the total number of licensees is 3,000 or more.

(d) The department will require that a different percent of licensees be selected for audit, if the board that regulates the profession, or the department for a profession not regulated by a board or commission, finds that a different percent to be audited is necessary to protect public health and safety.

(e) A licensee selected for audit under (c) or (d) of this section will be notified by the department. Within 30 days of notification, the licensee shall submit to the department, documentation to verify completion of the continuing competency activities claimed on the statement submitted with the application for license renewal. The documentation must include a valid copy of a certificate or similar verification of satisfactory completion of the continuing competency activities claimed that provides

(1) the name of the licensee;

(2) the amount of continuing competency credit awarded;

(3) a description of the continuing competency activity;

(4) the dates of actual participation or successful completion; and

(5) the name, mailing address and signature of the instructor, sponsor, or other verifier.

(f) A licensee subject to audit under (a) of this section is responsible for maintaining adequate and detailed records of all continuing competency activities completed and shall make the records available to the department on request. A licensee shall maintain the records until the later of

(1) four years from the date of completion of the continuing competency activity; or

(2) if the licensee was selected for audit, the date that the department notifies the licensee that the audit is completed.

(g) The department will extend the period for providing documentation of completion of continuing competency activities if the department finds that the licensee has good cause for the need for additional time to submit the documentation required in (e) of this section.

(h) The department will notify the respective board of a licensee's failure to comply with the department's request for records under (e) of this section.

(i) For professions licensed by the department, the department will consider the licensee's failure to comply with the department's request for records under (e) of this section as grounds for imposition of disciplinary sanctions to the extent allowed under AS 08 and this title.

(j) In this section, “successful completion” means the date that credit for the continuing competency activity is awarded by the instructor, sponsor, or other verifier for completion of the activity.

Authority: AS 08.01.050 AS 08.01.087 AS 08.01.100
AS 08.01.080

12 AAC 02.965. FAILURE TO MEET CONTINUING EDUCATION REQUIREMENTS FOR RENEWAL AND REINSTATEMENT OF LICENSE. (a) Except as otherwise provided in AS 08 or this title, a license issued under AS 08 will not be renewed or reinstated if the applicant for renewal or reinstatement has not earned the required number of continuing education credits. The applicant may earn the required number of credits after the expiration date of the license. Continuing education credits earned to reinstate or renew an expired license may not be used to satisfy the continuing education requirements for a future renewal or reinstatement. Credits submitted to satisfy the continuing education requirements under this section must be approved under AS 08 and this title by the department or the applicable board.

(b) For the purposes of this section, “continuing education credits” includes continuing competency, contact hours, continuing education units (CEU’s), and credit hours.

Authority: AS 08.01.050 AS 08.01.080 AS 08.01.100

12 AAC 02.990. DEFINITIONS. As used in this chapter

- (1) “department” means the Department of Commerce, Community, and Economic Development;
- (2) “division” means the division assigned occupational licensing functions in the Department of Commerce, Community, and Economic Development;
- (3) “license” means a license, certificate, permit, registration, or similar evidence of authority issued by the division or by one of the boards listed in AS 08.01.010;
- (4) “licensee” means a person who holds a license issued by the division or by one of the boards listed in AS 08.01.010.

Authority: AS 08.01.050 AS 08.01.080 AS 08.01.100

APPENDIX

Fees for Certification of Underground Storage Tank Workers

18 AAC 78.495. FEES. (a) The following fees are established for purposes of this chapter:

- (1) application fee, \$75;
- (2) certification fee for each category for which an applicant seeks certification, \$130;
- (3) certification fee for each category for which an applicant seeks renewal, \$130;
- (4) duplicate certificate fee, \$5; and
- (5) reciprocity certification fee for each category for which an applicant seeks certification through reciprocity, \$130.

(b) An applicant shall submit a fee required under this section to the division at the time of application, renewal, or request for duplicate certificate.

Authority: AS 46.03.375

Centralized Licensing Statutes

July 2017



DEPARTMENT OF COMMERCE, COMMUNITY,
AND ECONOMIC DEVELOPMENT

***DIVISION OF CORPORATIONS, BUSINESS
AND PROFESSIONAL LICENSING***

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CHAPTER 01.
CENTRALIZED LICENSING.

Section

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Sec. 08.01.010. Applicability of chapter. This chapter applies to the

- (1) Board of Public Accountancy (AS 08.04.010);
- (2) regulation of acupuncturists under AS 08.06;
- (3) State Board of Registration for Architects, Engineers, and Land Surveyors (AS 08.48.011);
- (4) Athletic Commission (AS 05.05 and AS 05.10);
- (5) regulation of athletic trainers under AS 08.07;
- (6) regulation of audiologists and speech-language pathologists under AS 08.11;
- (7) Board of Barbers and Hairdressers (AS 08.13.010);
- (8) regulation of behavior analysts under AS 08.15;
- (9) Big Game Commercial Services Board (AS 08.54.591);
- (10) regulation of business licenses under AS 43.70;
- (11) Board of Chiropractic Examiners (AS 08.20.010);
- (12) regulation of collection agencies under AS 08.24;
- (13) regulation of concert promoters under AS 08.92;
- (14) regulation of construction contractors and home inspectors under AS 08.18;
- (15) Board of Dental Examiners (AS 08.36.010);
- (16) regulation of dietitians and nutritionists under AS 08.38;
- (17) Board of Certified Direct-Entry Midwives (AS 08.65.010);
- (18) regulation of dispensing opticians under AS 08.71;
- (19) regulation of electrical and mechanical administrators under AS 08.40;
- (20) regulation of agencies that perform euthanasia services under AS 08.02.050;
- (21) regulation of professional geologists under AS 08.02.011;
- (22) regulation of private professional guardians and private professional conservators (AS 08.26);
- (23) regulation of hearing aid dealers under AS 08.55;
- (24) Board of Marine Pilots (AS 08.62.010);
- (25) Board of Marital and Family Therapy (AS 08.63.010);
- (26) Board of Massage Therapists (AS 08.61.010);
- (27) State Medical Board (AS 08.64.010);
- (28) regulation of morticians under AS 08.42;
- (29) regulation of the practice of naturopathy under AS 08.45;
- (30) Board of Nursing (AS 08.68.010);
- (31) regulation of nursing home administrators under AS 08.70;
- (32) Board of Examiners in Optometry (AS 08.72.010);
- (33) regulation of pawnbrokers (AS 08.76.100 – 08.76.590);

- (34) Board of Pharmacy (AS 08.80.010);
- (35) State Physical Therapy and Occupational Therapy Board (AS 08.84.010);
- (36) Board of Professional Counselors (AS 08.29.010);
- (37) Board of Psychologist and Psychological Associate Examiners (AS 08.86.010);
- (38) Real Estate Commission (AS 08.88.011);
- (39) Board of Certified Real Estate Appraisers (AS 08.87.010);
- (40) Board of Social Work Examiners (AS 08.95.010);
- (41) Board of Veterinary Examiners (AS 08.98.010).

Sec. 08.01.020. Board organization. Board members are appointed by the governor and serve at the pleasure of the governor. Unless otherwise provided, the governor may designate the chair of a board, and all other officers shall be elected by the board members. Unless otherwise provided, officers of a board are the chair and the secretary. A board may provide by regulation that three or more unexcused absences from meetings are cause for removal.

Sec. 08.01.025. Public members. A public member of a board may not

- (1) be engaged in the occupation that the board regulates;
- (2) be associated by legal contract with a member of the occupation that the board regulates except as a consumer of the services provided by a practitioner of the occupation; or
- (3) have a direct financial interest in the occupation that the board regulates.

Sec. 08.01.030. Quorum. A majority of the membership of a board constitutes a quorum unless otherwise provided.

Sec. 08.01.035. Appointments and terms. Members of boards subject to this chapter are appointed for staggered terms of four years. Except as provided in AS 39.05.080(4), a member of a board serves until a successor is appointed. Except as provided in AS 39.05.080(4), an appointment to fill a vacancy on a board is for the remainder of the unexpired term. A member who has served all or part of two successive terms on a board may not be reappointed to that board unless four years have elapsed since the person has last served on the board.

Sec. 08.01.040. Transportation and per diem. A board member is entitled to transportation expenses and per diem as set out in AS 39.20.180.

Sec. 08.01.050. Administrative duties of department. (a) The department shall perform the following administrative and budgetary services when appropriate:

- (1) collect and record fees;
- (2) maintain records and files;
- (3) issue and receive application forms;
- (4) notify applicants of acceptance or rejection as determined by the board or, for occupations or activities listed in AS 08.01.010 that are regulated directly by the department, as determined by the department under applicable law;
- (5) designate dates examinations are to be held and notify applicants;
- (6) publish notice of examinations and proceedings;
- (7) arrange space for holding examinations and proceedings;
- (8) notify applicants of results of examinations;
- (9) issue licenses or temporary licenses as authorized by the board or, for occupations or activities listed in AS 08.01.010 that are regulated directly by the department, as authorized by the department under applicable law;
- (10) issue duplicate licenses upon submission of a written request by the licensee attesting to loss of or the failure to receive the original and payment by the licensee of a fee established by regulation adopted by the department;
- (11) notify licensees of renewal dates at least 30 days before the expiration date of their licenses;
- (12) compile and maintain a current register of licensees;
- (13) answer routine inquiries;
- (14) maintain files relating to individual licensees;
- (15) arrange for printing and advertising;
- (16) purchase supplies;
- (17) employ additional help when needed;
- (18) perform other services that may be requested by the board;
- (19) provide inspection, enforcement, and investigative services to the boards and for the occupations listed in AS 08.01.010 regarding all licenses issued by or through the department;
- (20) retain and safeguard the official seal of a board and prepare, sign, and affix a board seal, as appropriate, for licenses approved by a board;
- (21) issue business licenses under AS 43.70.

(b) The form and content of a license, authorized by a board listed in AS 08.01.010, including any document evidencing renewal of a license, shall be determined by the department after consultation with and consideration of the views of the board concerned.

(c) *[Repealed, Sec. 49 ch 94 SLA 1987.]*

(d) At the request of one of the following boards, the department may contract with public agencies and private professional organizations to provide assistance and treatment to persons licensed by the board who abuse alcohol, other drugs, or other substances:

- (1) Board of Social Work Examiners;
- (2) Board of Dental Examiners;
- (3) Board of Marital and Family Therapy;
- (4) State Medical Board;
- (5) Board of Nursing;
- (6) Board of Examiners in Optometry;
- (7) Board of Pharmacy;
- (8) State Physical Therapy and Occupational Therapy Board;
- (9) Board of Professional Counselors;
- (10) Board of Psychologist and Psychological Associate Examiners; and
- (11) Board of Veterinary Examiners.

Sec. 08.01.060. Application for license. (a) All applications for examination or licensing to engage in the business or profession covered by this chapter shall be made in writing to the department.

(b) If the applicant is a natural person, the application must require that the applicant submit the applicant's social security number to the department. Notwithstanding any other provision of this title, a license to engage in a profession may not be issued by the department to a natural person unless the social security number has been provided to the department.

Sec. 08.01.062. Courtesy licenses. (a) A board established under this title and the Department of Commerce, Community, and Economic Development, with respect to an occupation that it regulates under this title, may by regulation establish criteria for issuing a temporary courtesy license to nonresidents who enter the state so that, on a temporary basis, they may practice the occupation regulated by the board or the department.

(b) The regulations adopted under (a) of this section may include limitations relating to the

- (1) duration of the license's validity;
- (2) scope of practice allowed under the license; and
- (3) other matters considered important by the board or the department.

Sec. 08.01.063. Military courtesy licenses. (a) Except as provided in (d) of this section, and notwithstanding another provision of law, the department or appropriate board may issue a temporary courtesy license to the spouse of an active duty member of the armed forces of the United States if the spouse applies to the department or appropriate board in the manner prescribed by the department or appropriate board. An application must include evidence satisfactory to the department or appropriate board that the applicant

(1) is married to and living with a member of the armed forces of the United States who is on active duty and assigned to a duty station in this state under official active duty military orders;

(2) holds a current license or certificate in another state, district, or territory of the United States with requirements that the department or appropriate board determines are equivalent to those established under this title for that occupation;

(3) if required by the department or appropriate board for obtaining a license in the applicant's profession, has been fingerprinted and has provided the fees required by the Department of Public Safety under AS 12.62.160 for criminal justice information and a national criminal history record check; the fingerprints and fees shall be forwarded to the Department of Public Safety to obtain a report of criminal justice information under AS 12.62 and a national criminal history record check under AS 12.62.400;

(4) has not committed an act in any jurisdiction that would have constituted grounds for the refusal, suspension, or revocation of a license or certificate to practice that occupation under this title at the time the act was committed;

(5) has not been disciplined by a licensing or credentialing entity in another jurisdiction and is not the subject of an unresolved complaint, review procedure, or disciplinary proceeding conducted by a licensing or credentialing entity in another jurisdiction; and

(6) pays any fees required under this title.

(b) The department or appropriate board shall expedite the procedure for issuance of a license under (a) of this section.

(c) A temporary courtesy license issued under this section is valid for 180 days and may be extended at the discretion of the department or appropriate board for one additional 180-day period, on application of the holder of the temporary courtesy license.

(d) This section does not apply to the practice of law or the regulation of attorneys under AS 08.08.

Sec. 08.01.064. Military education, training, and service credit; temporary license. (a) Notwithstanding another provision of law, the department or applicable board shall accept military education, training, and service for some or all of the qualifications otherwise required of an applicant for a license or certificate issued under this chapter if

(1) the department or applicable board determines that the military education, training, and service is substantially equivalent to some or all of the qualifications otherwise required of an applicant for a license or certificate issued under this chapter; and

(2) the applicant provides satisfactory evidence of successful completion of the education, training, or service as a member of the armed forces of the United States, the United States Reserves, the National Guard of any state, the Military Reserves of any state, or the Naval Militia of any state.

(b) If the department issues temporary licenses or certificates as authorized by the department or applicable board under AS 08.01.050(a)(9), the department or applicable board shall issue a temporary license or certificate to a person who

(1) applies to the department or applicable board in a manner prescribed by the department or board;

(2) meets the requirements in AS 08.01.063(a)(3) - (6); and

(3) while in the armed forces of the United States or any state, as described in (a) of this section,

(A) held a current license or certificate in another state, district, or territory of the United States, practiced in the area of the license or certificate, and maintained the license or certificate in active status before and at the time of application for a license or certificate under this subsection; or

(B) was awarded a degree, diploma, or certificate by a branch of the armed forces of the United States or any state, as described in (a) of this section, that met standards for an equivalent license or a certificate of technical training.

(c) The department or applicable board shall expedite the procedure for issuance of a license or certificate under (b) of this section for an applicant who is on active duty.

(d) A license or certificate issued under (b) of this section is valid for 180 days and may be extended at the discretion of the department or applicable board for one additional 180-day period if the holder of the license or certificate applies for an extension on a form approved by the department or applicable board.

(e) The department or applicable board may adopt regulations necessary to implement this section.

Sec. 08.01.065. Establishment of fees. (a) Except for business licenses, the department shall adopt regulations that establish the amount and manner of payment of application fees, examination fees, license fees, registration fees, permit fees, investigation fees, and all other fees as appropriate for the occupations covered by this chapter.

(b) *[Repealed, Sec. 4 ch 34 SLA 1992.]*

(c) Except as provided in (f) – (i) of this section, the department shall establish fee levels under (a) of this section so that the total amount of fees collected for an occupation approximately equals the actual regulatory costs for the occupation. The department shall annually review each fee level to determine whether the regulatory costs of each occupation are approximately equal to fee collections related to that occupation. If the review indicates that an occupation's fee collections and regulatory costs are not approximately equal, the department shall calculate fee adjustments and adopt regulations under (a) of this section to implement the adjustments. In January of each year, the department shall report on all fee levels and revisions for the previous year under this subsection to the office of management and budget. If a board regulates an occupation covered by this chapter, the department shall consider the board's recommendations concerning the occupation's fee levels and regulatory costs before revising fee schedules to comply with this subsection. In this subsection, "regulatory costs" means costs of the department that are attributable to regulation of an occupation plus

(1) all expenses of the board that regulates the occupation if the board regulates only one occupation;

(2) the expenses of a board that are attributable to the occupation if the board regulates more than one occupation.

(d) The license fee for a business license is set by AS 43.70.030(a). The department shall adopt regulations that establish the manner of payment of the license fee.

(e) *[Repealed, Sec. 28 ch 90 SLA 1991.]*

(f) Notwithstanding (c) of this section, the department shall establish fee levels under (a) of this section so that the total amount of fees collected by the State Board of Registration for Architects, Engineers, and Land Surveyors approximately equals the total regulatory costs of the department and the board for all occupations regulated by the board. The department shall set the fee levels for the issuance and renewal of a certificate of registration issued under AS 08.48.211 so that the fee levels are the same for all occupations regulated by the board.

(g) Notwithstanding (c) of this section, the department shall establish fee levels under (a) of this section so that the total amount of fees collected by the department for all occupations regulated under AS 08.11 approximately equals the total regulatory costs of the department for all occupations regulated by the department under AS 08.11. The department shall set the fee levels for the issuance and renewal of licenses issued under AS 08.11 so that the fee levels are the same for all occupations regulated by the department under AS 08.11.

(h) Notwithstanding (c) of this section, the department shall establish fee levels under (a) of this section so that the total amount of fees collected by the Board of Barbers and Hairdressers approximately equals the total regulatory costs of the department, the board, and the Department of Environmental Conservation for all occupations regulated by the board. For purposes of this subsection, the regulatory costs of the Department of Environmental

Conservation for the occupations regulated by the board include the cost of inspections under AS 08.13.210(b), the cost of developing and adopting regulations under AS 44.46.020 for barbershop, hairdressing, manicuring, esthetics, body piercing, ear piercing, and tattooing and permanent cosmetic coloring establishments, and the cost to the Department of Environmental Conservation of enforcing those regulations except for the enforcement costs relating to ear piercing establishments. The department shall set the fee levels for the issuance and renewal of a practitioner's license issued under AS 08.13.100 so that the license and license renewal fees are the same for all occupations regulated by the Board of Barbers and Hairdressers.

(i) Notwithstanding (c) of this section, the department shall establish fee levels under (a) of this section so that the total amount of fees collected by the Department of Commerce, Community, and Economic Development for specialty contractors, home inspectors, and associate home inspectors approximately equals the total regulatory costs of the department for those three registration categories. The department shall set the fee levels for the issuance and renewal of a certificate of registration issued under AS 08.18 so that the fee levels are the same for all three of these registration categories and so that the fee level for a home inspector with a joint registration is not different from the fee level for a home inspector who does not have a joint registration. In this subsection, "joint registration" has the meaning given in AS 08.18.171.

Sec. 08.01.070. Administrative duties of boards. Each board shall perform the following duties in addition to those provided in its respective law:

- (1) take minutes and records of all proceedings;
- (2) hold a minimum of one meeting each year;
- (3) hold at least one examination each year;
- (4) request, through the department, investigation of violations of its laws and regulations;
- (5) prepare and grade board examinations;
- (6) set minimum qualifications for applicants for examination and license and may establish a waiver of continuing education requirements for renewal of a license for the period in which a licensee is engaged in active duty military service as described under AS 08.01.100(f);
- (7) forward a draft of the minutes of proceedings to the department within 20 days after the proceedings;
- (8) forward results of board examinations to the department within 20 days after the examination is given;
- (9) notify the department of meeting dates and agenda items at least 15 days before meetings and other proceedings are held;
- (10) submit before the end of the fiscal year an annual performance report to the department stating the board's accomplishments, activities, and needs.

Sec. 08.01.075. Disciplinary powers of boards. (a) A board may take the following disciplinary actions, singly or in combination:

- (1) permanently revoke a license;
 - (2) suspend a license for a specified period;
 - (3) censure or reprimand a licensee;
 - (4) impose limitations or conditions on the professional practice of a licensee;
 - (5) require a licensee to submit to peer review;
 - (6) impose requirements for remedial professional education to correct deficiencies in the education, training, and skill of the licensee;
 - (7) impose probation requiring a licensee to report regularly to the board on matters related to the grounds for probation;
 - (8) impose a civil fine not to exceed \$5,000.
- (b) A board may withdraw probationary status if the deficiencies that required the sanction are remedied.
- (c) A board may summarily suspend a licensee from the practice of the profession before a final hearing is held or during an appeal if the board finds that the licensee poses a clear and immediate danger to the public health and safety. A person is entitled to a hearing conducted by the office of administrative hearings (AS 44.64.010) to appeal the summary suspension within seven days after the order of suspension is issued. A person may appeal an adverse decision of the board on an appeal of a summary suspension to a court of competent jurisdiction.
- (d) A board may reinstate a suspended or revoked license if, after a hearing, the board finds that the applicant is able to practice the profession with skill and safety.
- (e) A board may accept the voluntary surrender of a license. A license may not be returned unless the board determines that the licensee is competent to resume practice and the licensee pays the appropriate renewal fee.
- (f) A board shall seek consistency in the application of disciplinary sanctions. A board shall explain a significant departure from prior decisions involving similar facts in the order imposing the sanction.

Sec. 08.01.077. Conviction as grounds for disciplinary action. Notwithstanding any other provision of this title, the conviction under AS 47.24.010 of a person licensed, certified, or regulated by the department or a board under this title may be considered by the department or board as grounds for disciplinary proceedings or sanctions.

Sec. 08.01.080. Department regulations. The department shall adopt regulations to carry out the purposes of this chapter including but not limited to describing

- (1) how an examination is to be conducted;
- (2) what is contained in application forms;
- (3) how a person applies for an examination or license.

Sec. 08.01.087. Investigative and enforcement powers of department. (a) The department may, upon its own motion, conduct investigations to

(1) determine whether a person has violated a provision of this chapter or a regulation adopted under it, or a provision of AS 43.70, or a provision of this title or regulation adopted under this title dealing with an occupation or board listed in AS 08.01.010; or

(2) secure information useful in the administration of this chapter.

(b) If it appears to the commissioner that a person has engaged in or is about to engage in an act or practice in violation of a provision of this chapter or a regulation adopted under it, or a provision of AS 43.70, or a provision of this title or regulation adopted under this title dealing with an occupation or board listed in AS 08.01.010, the commissioner may, if the commissioner considers it in the public interest, and after notification of a proposed order or action by telephone, telegraph, or facsimile to all board members, if a board regulates the act or practice involved, unless a majority of the members of the board object within 10 days,

(1) issue an order directing the person to stop the act or practice; however, reasonable notice of and an opportunity for a hearing must first be given to the person, except that the commissioner may issue a temporary order before a hearing is held; a temporary order remains in effect until a final order affirming, modifying, or reversing the temporary order is issued or until 15 days after the person receives the notice and has not requested a hearing by that time; a temporary order becomes final if the person to whom the notice is addressed does not request a hearing within 15 days after receiving the notice; the office of administrative hearings (AS 44.64.010) shall conduct the hearing and shall issue a proposed decision within 10 days after the hearing; the commissioner shall issue a final order within five days after the proposed decision is issued;

(2) bring an action in the superior court to enjoin the acts or practices and to enforce compliance with this chapter, a regulation adopted under it, an order issued under it, or with a provision of this title or regulation adopted under this title dealing with business licenses or an occupation or board listed in AS 08.01.010;

(3) examine or have examined the books and records of a person whose business activities require a business license or licensure by a board listed in AS 08.01.010, or whose occupation is listed in AS 08.01.010; the commissioner may require the person to pay the reasonable costs of the examination; and

(4) issue subpoenas for the attendance of witnesses, and the production of books, records, and other documents.

(c) Under procedures and standards of operation established by the department by regulation, and with the agreement of the appropriate agency, the department may designate appropriate state or municipal agencies to investigate reports of abuse, neglect, or misappropriation of property by certified nurse aides.

Sec. 08.01.089. Copies of records for child support purposes. If a copy of a public record concerning an individual who owes or is owed child support that is prepared or maintained by the department is requested by the child support services agency created in AS 25.27.010 or a child support enforcement agency of another state, the department shall provide the requesting agency with a certified copy of the public record, including the individual's social security number. If these records are prepared or maintained by the department in an electronic data base, the records may be supplied by providing the requesting agency with a copy of the electronic record and a statement certifying its contents. A requesting agency receiving information under this section may use it only for child support purposes authorized under law.

Sec. 08.01.090. Applicability of the Administrative Procedure Act. The Administrative Procedure Act (AS 44.62) applies to regulations adopted and proceedings held under this chapter, except those under AS 08.01.087(b) and actions taken under AS 08.68.333(c).

Sec. 08.01.100. License renewal, lapse, and reinstatement. (a) Licenses shall be renewed biennially on the dates set by the department with the approval of the respective board.

(b) A license subject to renewal shall be renewed on or before the date set by the department. If the license is not renewed by the date set by the department, the license lapses. In addition to renewal fees required for reinstatement of the lapsed license, the department may impose a delayed renewal penalty, established by regulation, that shall be paid before a license that has been lapsed for more than 60 days may be renewed. The department may adopt a delayed renewal penalty only with the concurrence of the appropriate board.

(c) Except as provided in (f) of this section, when continuing education or other requirements are made a condition of license renewal, the requirements shall be satisfied before a license is renewed.

(d) Except as otherwise provided, a license may not be renewed if it has been lapsed for five years or more.

(e) Notwithstanding any other provision of this title, a renewal of a license may not be issued by the department to a natural person unless the licensee's social security number has been provided to the department.

(f) The department may establish and implement a waiver of continuing education requirements for renewal of a license regulated by the department and a board may establish and implement a waiver of continuing education

requirements for renewal of a license regulated by the board for the period in which a licensee is engaged in active duty military service in the armed forces of the United States.

(g) A member of the armed forces of the United States on active duty in a combat zone, danger pay post, or qualified hazardous duty area, who is a licensee under this title in good standing at the time of the licensee's active duty order is exempt from any fees or other requirements to maintain that license or good standing while the licensee is in that zone, at that post, or in that area. This exemption is valid for 180 days after returning to the licensee's permanent duty station, if the licensee does not engage in licensed practice for profit in the private sector. The licensee shall pay fees and meet all other requirements for the license period beginning after the exemption ends. In this subsection,

- (1) "combat zone" has the meaning given in 26 U.S.C. 112(c)(2) (Internal Revenue Code);
- (2) "danger pay post" means a post so designated by the United States Secretary of State in the Department of State Standardized Regulations for purposes of danger pay under 5 U.S.C. 5928;
- (3) "qualified hazardous duty area" means an area that, during the applicant's deployment, is treated as if it were a combat zone for purposes of a federal tax exemption under 26 U.S.C. 112 (Internal Revenue Code).

Sec. 08.01.102. Citation for unlicensed practice or activity. The department may issue a citation for a violation of a license requirement under this chapter, except a requirement to have a license under AS 43.70, if there is probable cause to believe a person has practiced a profession or engaged in business for which a license is required without holding the license. Each day a violation continues after a citation for the violation has been issued constitutes a separate violation. A citation issued under this section must comply with the standards adopted under AS 12.25.175 - 12.25.230.

Sec. 08.01.103. Procedure and form of citation. (a) A person receiving the citation issued under AS 08.01.102 is not required to sign a notice to appear in court.

(b) The time specified in the notice to appear on a citation issued under AS 08.01.102 shall be at least five working days after the issuance of the citation.

(c) The department is responsible for the issuance of books containing appropriate citations and shall maintain a record of each book issued and each citation contained in it. The department shall require and retain a receipt for every book issued to an employee of the department.

(d) On or before the 10th working day after the issuance of a citation, the department shall deposit the original or a copy of the citation with a court having jurisdiction over the alleged offense. Upon its deposit with the court, the citation may be disposed of only by trial in the court or other official action taken by the magistrate, judge, or prosecutor. The department may not dispose of a citation, copies of it, or the record of its issuance except as required under this subsection and (e) of this section.

(e) The department shall require the return of a copy of every citation issued by the department and all copies of a citation that has been spoiled or upon which an entry has been made and not issued to an alleged violator. The department shall also maintain, in connection with each citation, a record of the disposition of the charge by the court where the original or copy of the citation was deposited.

(f) A citation issued under AS 08.01.102 is considered to be a lawful complaint for the purpose of prosecution.

Sec. 08.01.104. Failure to obey citation. Unless the citation has been voided or otherwise dismissed by the magistrate, judge, or prosecutor, a person who without lawful justification or excuse fails to appear in court to answer a citation issued under AS 08.01.102, regardless of the disposition of the charge for which the citation was issued, is guilty of a class B misdemeanor.

Sec. 08.01.105. Penalty for improper payment. An applicant shall pay a penalty of \$10 each time a negotiable instrument is presented to the department in payment of an amount due and payment is subsequently refused by the named payor.

Sec. 08.01.110. Definitions. In this chapter,

- (1) "board" includes the boards and commissions listed in AS 08.01.010;
- (2) "commissioner" means the commissioner of commerce, community, and economic development;
- (3) "department" means the Department of Commerce, Community, and Economic Development;
- (4) "license" means a business license or a license, certificate, permit, or registration or similar evidence of authority issued for an occupation by the department or by one of the boards listed in AS 08.01.010;
- (5) "licensee" means a person who holds a license;
- (6) "occupation" means a trade or profession listed in AS 08.01.010.

CHAPTER 02.
MISCELLANEOUS PROVISIONS.

Section

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- 50. Permits for use of drugs to euthanize domestic animals**
- 90. Definition**

Sec. 08.02.010. Professional designation requirements. (a) An acupuncturist licensed under AS 08.06, an audiologist or speech-language pathologist licensed under AS 08.11, a behavior analyst licensed under AS 08.15, a person licensed in the state as a chiropractor under AS 08.20, a professional counselor licensed under AS 08.29, a dentist under AS 08.36, a dietitian or nutritionist licensed under AS 08.38, a massage therapist licensed under AS 08.61, a marital and family therapist licensed under AS 08.63, a medical practitioner or osteopath under AS 08.64, a direct-entry midwife certified under AS 08.65, a registered or advanced practice registered nurse under AS 08.68, an optometrist under AS 08.72, a licensed pharmacist under AS 08.80, a physical therapist or occupational therapist licensed under AS 08.84, a psychologist under AS 08.86, or a clinical social worker licensed under AS 08.95, shall use as professional identification appropriate letters or a title after that person's name that represents the person's specific field of practice. The letters or title shall appear on all signs, stationery, or other advertising in which the person offers or displays personal professional services to the public. In addition, a person engaged in the practice of medicine or osteopathy as defined in AS 08.64.380, or a person engaged in any manner in the healing arts who diagnoses, treats, tests, or counsels other persons in relation to human health or disease and uses the letters "M.D." or the title "doctor" or "physician" or another title that tends to show that the person is willing or qualified to diagnose, treat, test, or counsel another person, shall clarify the letters or title by adding the appropriate specialist designation, if any, such as "dermatologist," "radiologist," "audiologist," "naturopath," or the like.

(b) A person subject to (a) of this section who fails to comply with the requirements of (a) of this section shall be given notice of noncompliance by that person's appropriate licensing board or, if the person is not regulated by a board, by the department. If, after a reasonable time, with opportunity for a hearing, the person's noncompliance continues, the board or department, as appropriate, may suspend or revoke the person's license or registration, or administer other disciplinary action which in its determination is appropriate.

Sec. 08.02.011. Professional geologist. The commissioner of commerce, community, and economic development shall certify an applicant as a professional geologist if the applicant is certified as a professional geologist by the American Institute of Professional Geologists.

Sec. 08.02.020. Limitation of liability. An action may not be brought against a person for damages resulting from

- (1) the person's good faith performance of a duty, function, or activity required as a
 - (A) member of, or witness before, a licensing board or peer review committee established to review a licensing matter;
 - (B) member of a committee appointed under AS 08.64.336(c);
 - (C) contractor or agent of a contractor under AS 08.01.050(d) or AS 08.64.101(5);
- (2) a recommendation or action in accordance with the prescribed duties of a licensing board, peer review committee established to review a licensing matter, committee appointed under AS 08.64.336(c), or contractor or agent of a contractor under AS 08.01.050(d) or AS 08.64.101(5) when the person acts in the reasonable belief that the action or recommendation is warranted by facts known to the person, board, peer review committee, committee appointed under AS 08.64.336(c), or contractor or agent of the contractor under AS 08.01.050(d) or AS 08.64.101(5) after reasonable efforts to ascertain the facts upon which the action or recommendation is made; or
- (3) a report made in good faith to a public agency by the person, or participation by the person in an investigation by a public agency or a judicial or administrative proceeding relating to the report, if the report relates to the abuse of alcohol, other drugs, or other substances by a person licensed by a board listed in AS 08.01.050(d).

Sec. 08.02.040. Access to certain mental health information and records by the state. (a) Notwithstanding AS 08.29.200, AS 08.63.200, AS 08.86.200, AS 08.95.900, another provision of this title, or a regulation adopted under this title, a licensee or an entity employing or contracting with a licensee may disclose confidential patient mental health information, communications, and records to the Department of Health and Social Services when disclosure is authorized under AS 47.30.540, 47.30.590, 47.30.845, or AS 47.31.032. Information, communications, and records received by the Department of Health and Social Services under this section are confidential medical records of patients and are not open to public inspection and copying under AS 40.25.110 - 40.25.120.

(b) In this section, "licensee" has the meaning given in AS 08.01.110.

Sec. 08.02.050. Permits for use of drugs to euthanize domestic animals. (a) A qualified agency may apply to the department and obtain a permit that authorizes the purchase, possession, and use by the agency of sodium pentobarbital, sodium pentobarbital with lidocaine, and other drugs authorized in regulations adopted by the department for the purpose of euthanizing injured, sick, or abandoned domestic animals in the lawful possession of the agency. To qualify to obtain the permit, the agency shall certify that it will

(1) comply with applicable federal laws related to the use of the drugs; and

(2) not permit an employee to administer the drugs unless the employee has successfully completed a euthanasia technician certification course approved by the National Animal Control Association, the American Humane Association, or the Humane Society of the United States.

(b) The department may revoke or suspend a permit or take another disciplinary action under AS 08.01.075 if it determines that the agency or an employee of the agency

(1) improperly used sodium pentobarbital, sodium pentobarbital with lidocaine, or another drug authorized for use under this section;

(2) failed to follow federal or state laws regarding proper storage and handling of the drugs;

(3) allowed an employee to administer the drugs before the employee successfully completed the certification course described in (a)(2) of this section; or

(4) violated this title or a regulation adopted under this title.

(c) In this section, "agency" means an animal control agency of a municipality or recognized governmental entity or an entity that has contracted with a municipality or recognized governmental entity to perform animal control or animal euthanasia services.

(d) The department may adopt regulations to implement this section.

Sec. 08.02.090. Definition. In this chapter, "department" means the Department of Commerce, Community, and Economic Development.

CHAPTER 03.
TERMINATION, CONTINUATION AND REESTABLISHMENT
OF REGULATORY BOARDS.

Section

10. Termination dates for regulatory boards

20. Procedures governing termination, transition, and continuation

Sec. 08.03.010. Termination dates for regulatory boards.

(a) *[Repealed, Sec. 4 ch 14 SLA 1987.]*

(b) *[Repealed, Sec. 4 ch 14 SLA 1987.]*

(c) The following boards have the termination date provided by this subsection:

- (1) Board of Public Accountancy (AS 08.04.010) – June 30, 2021;
 - (2) Board of Governors of the Alaska Bar Association (AS 08.08.040) – June 30, 2021;
 - (3) State Board of Registration for Architects, Engineers, and Land Surveyors (AS 08.48.011) – June 30, 2025;
 - (4) Board of Barbers and Hairdressers (AS 08.13.010) – June 30, 2019;
 - (5) Board of Chiropractic Examiners (AS 08.20.010) – June 30, 2022;
 - (6) Board of Professional Counselors (AS 08.29.010) – June 30, 2018;
 - (7) Board of Dental Examiners (AS 08.36.010) – June 30, 2019;
 - (8) Board of Certified Direct-Entry Midwives (AS 08.65.010) – June 30, 2021;
 - (9) Big Game Commercial Services Board (AS 08.54.591) – June 30, 2019;
 - (10) Board of Marine Pilots (AS 08.62.010) – June 30, 2019;
 - (11) Board of Marital and Family Therapy (AS 08.63.010) – June 30, 2018;
 - (12) Board of Massage Therapists (AS 08.61.010) – June 30, 2018;
 - (13) State Medical Board (AS 08.64.010) – June 30, 2020;
 - (14) Board of Nursing (AS 08.68.010) – June 30, 2019;
 - (15) Board of Examiners in Optometry (AS 08.72.010) – June 30, 2022;
 - (16) Board of Pharmacy (AS 08.80.010) – June 30, 2018;
 - (17) State Physical Therapy and Occupational Therapy Board (AS 08.84.010) – June 30, 2022;
 - (18) Board of Psychologist and Psychological Associate Examiners (AS 08.86.010) – June 30, 2018;
 - (19) Real Estate Commission (AS 08.88.011) – June 30, 2018;
 - (20) Board of Certified Real Estate Appraisers (AS 08.87.010) – June 30, 2018;
 - (21) Board of Social Work Examiners (AS 08.95.010) – June 30, 2018;
 - (22) Board of Veterinary Examiners (AS 08.98.010) – June 30, 2025.
- (d) *[Repealed, Sec. 3 ch 74 SLA 1979.]*
- (e) *[Repealed, Sec. 3 ch 74 SLA 1979.]*

Sec. 08.03.020. Procedures governing termination, transition, and continuation. (a) Upon termination, each board listed in AS 08.03.010 shall continue in existence until June 30 of the next succeeding year for the purpose of concluding its affairs. During this period, termination does not reduce or otherwise limit the powers or authority of each board. One year after the date of termination, a board not continued shall cease all activities, and the statutory authority of the board is transferred to the department.

(b) The termination, dissolution, continuation or reestablishment of a regulatory board shall be governed by the legislative oversight procedures of AS 44.66.050.

(c) A board scheduled for termination under this chapter may be continued or reestablished by the legislature for a period not to exceed eight years unless the board is continued or reestablished for a longer period under AS 08.03.010.

(d) The department shall carry out the functions of a board that has ceased all activities under (a) of this section. Litigation, hearings, investigations, and other proceedings pending at the time the board ceased activities continue in effect and may be continued or completed by the department. Licenses, certificates, orders, and regulations issued or adopted by the board and in effect at the time the board ceased activities remain in effect for the term issued or until revoked, amended, vacated, or repealed by the department.

Item 2

- Review of Agenda

**STATE OF ALASKA
DEPARTMENT OF COMMERCE, COMMUNITY, AND
ECONOMIC DEVELOPMENT
DIVISION OF CORPORATIONS, BUSINESS AND
PROFESSIONAL LICENSING**

BOARD OF DENTAL EXAMINERS AGENDA

December 7, 2018

550 W 7th Ave, Atwood Building Ste. 1550, Anchorage, AK 99501

Zoom Webinar Number and ID:

Zoom Webinar: 1(408)638-0968

Meeting ID: 566-315-455

<https://zoom.us/j/566315455>

<u>AGENDA</u>			
<u>TIME</u>	<u>TOPIC</u>	<u>LEAD PERSON</u>	
1. 8:00 a.m.	Call to Order/Roll Call	CHAIR	
2. 8:35 a.m.	Review of Agenda	CHAIR	
3. 8:40 a.m.	Review/Approve Minutes <ul style="list-style-type: none">o August 24, 2018o Teleconference – September 17, 2018o Teleconference – September 28, 2018o Teleconference – November 9, 2018o December 9, 2016	CHAIR	
4. 9:20 a.m.	Ethics Report	CHAIR	
5. 9:30 a.m.	Investigative Report <ul style="list-style-type: none">• Consent Agreements – executive session	Zimmerman/Bautista	
6. 10:00 a.m.	Break		
7. 10:15 a.m.	Public Comment		
8. 10:30 a.m.	Sedation Regulations <ul style="list-style-type: none">o Changes to 28.010 and 28.015	CHAIR	

- Approval of Course of Instruction
- FAQ page

- | | | | |
|------------|-------------------|--|-------------------------|
| 9. | 12:00 p.m. | Lunch | |
| 10. | 1:00 p.m. | Division Update | Ward/Chambers |
| 11. | 2:00 p.m. | AADB and HERB Reports | Nielson/Walden |
| | | <ul style="list-style-type: none"> ○ AADB 2018 Board Report ○ HERB Executive Summary November, 2018 | |
| 12. | 2:40 p.m. | Regulation Review | CHAIR/Zinn |
| | | <ul style="list-style-type: none"> ○ Radiologic Inspections ○ Military Licenses ○ Clean up | Nielson/Wenzell |
| 13. | 3:30 p.m. | PDMP – Unsolicited Notifications | CHAIR/PDMP STAFF |
| | | <ul style="list-style-type: none"> ○ Executive Session | |
| 14. | 3:45 p.m. | Local Anesthetic Certificate | CHAIR |
| | | <ul style="list-style-type: none"> ○ Question about qualifications | |
| 15. | 4:00 p.m. | Administering IV medications | CHAIR |
| | | <ul style="list-style-type: none"> ○ Who qualifies to administer the IV medications | |
| 16. | 4:15 p.m. | CE Course Approval Application Review | CHAIR |
| | | <ul style="list-style-type: none"> ○ BLS for Healthcare Providers ○ Opioid Crisis ○ BTY Dental – Self Study | |
| 17. | 5:00 p.m. | Adjourn | CHAIR |

Item 3

- Review/Approve Minutes
 - August 24, 2018
 - Teleconference – September 17, 2018
 - Teleconference – September 28, 2018
 - Teleconference – November 9, 2018
 - December 9, 2016

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**STATE OF ALASKA
DEPARTMENT OF COMMERCE, COMMUNITY AND
ECONOMIC DEVELOPMENT
DIVISION OF CORPORATIONS,
BUSINESS & PROFESSIONAL LICENSING
BOARD OF DENTAL EXAMINERS**

**MINUTES OF MEETING
August 24, 2018**

These minutes were prepared by the staff of the Division of Corporations, Business and Professional Licensing. They have been reviewed or approved by the Board.

By authority of AS 08.01.070(2) and AS 08.36.040 and in compliance with the provisions of Article 6 of AS 44.62, a meeting of the Board of Dental Examiners was held August 24, 2018, in person in Anchorage, AK.

The meeting was called to order by Dr. Paul Silveira, President, at 8:42 a.m.

Agenda Item 1 - Roll Call

Those present, constituting a quorum of the board, were:

Dr. Paul Silveira, President – Valdez
Dr. David Nielson – Anchorage
Ms. Paula Ross – Anchorage
Ms. Gail Walden – Wasilla
Dr. Steven Scheller – Fairbanks
Dr. Michael Moriarty – Seward
Ms. Robin Wahto - Anchorage
Dr. Thomas Kovaleski – Chugiak
Dr. Dominic Wenzell – Girdwood

In attendance from the Division of Corporations, Business & Professional Licensing, Department of Commerce, Community and Economic Development were:

Ms. Amber Treston, Licensing Examiner – Juneau
Ms. Jasmin Bautista, Investigator – Anchorage
Ms. Sonia Lipker, Senior Investigator - Anchorage
Ms. Sher Zinn, Regulation Specialist – Juneau – Teleconference
Ms. Marilyn Zimmerman, Paralegal – Juneau - Teleconference
Ms. Megyn Weigand, AAG – Anchorage

Members of the public in attendance:

Dr. Kenley Michaud – Anchorage
Dr. Michale Booth – Anchorage

Agenda Item 2 – Review of Agenda

Dr. Silveira requests to add 12 AAC 28.951 (c)(6) to the agenda under item 9 to have the board state the intent of the wording *during the 5 years immediately preceding application*. The board elects to discuss this item at this time along with the correct application to fill out for specialists who have been licensed greater than 5 years: Credential vs. Examination level II applications. The board feels that a specialist who has been licensed for greater than 5 years can apply by Examination level II because it will allow the specialist a quicker route to become licensed and PBIS will still obtain the background information regarding their work history.

Discussed 12 AAC 28.951(c)(6) and the board states that the applicant must be licensed for 5 years to qualify by Credentials. *During the 5 years immediately preceding application* means that they had to have held a dental license for 5 years and the applicant has been in active clinical practice documenting at least 5,000 hours. The board states that this reads that the applicant has to have held a license for at least 5 years.

Agenda Item 3 – Review/Approve Minutes

Reviewed meeting minutes for April 20, 2018 and made corrections accordingly.

On a motion duly made by Ross, seconded by Nielson, and approved the minutes as amended unanimously, it was

RESOLVED to approve the minutes as amended of the April 20, 2018 teleconference with the edits requested by the board.

**Silveira – yea, Nielson – yea, Ross – yea, Kovaleski – yea, Walden – yea, Scheller – yea, Moriarty – yea, Wahto – yea, Wenzell - yea.
9 yeas, 0 nays.**

Motion passed.

Reviewed the meeting minutes for May 18, 2018 Teleconference and made changes accordingly.

On a motion duly made by Kovaleski, seconded by Ross, and approved the minutes as amended unanimously, it was

RESOLVED to approve the minutes as amended of the teleconference May 18, 2018 with the edits requested by the board.

Silveira – yea, Nielson – yea, Ross – yea, Kovaleski – yea, Walden – yea,
Scheller – yea, Moriarty – yea, Wahto – yea, Wenzell - yea.
9 yeas, 0 nays.

Motion passed.

Reviewed the meeting minutes for July 30, 2018 Teleconference. No changes requested.

On a motion duly made by Ross, seconded by Moriarty, and approved the minutes unanimously, it was

RESOLVED to approve the meeting minutes for the May 18, 2018 teleconference.

Silveira – yea, Nielson – yea, Ross – yea, Kovaleski – yea, Walden – yea,
Scheller – yea, Moriarty – yea, Wahto – yea, Wenzell - yea.
9 yeas, 0 nays.

Motion passed.

Agenda Item 4 – Ethics Report

Dr. Silveira states that it is important that if any board members have a conflict of interest it is important to state that there is a conflict and recuse themselves from voting. No conflicts to report at this time.

Agenda Item 5 – Investigative Report and disciplinary actions for failing to register with PDMP

Bautista gave the investigative report for the period between April 13, 2018 through August 20, 2018 informing the board of the number of cases opened (11), number of cases closed (10), and total number of cases that remain open at this time (26). Bautista explained that the rest of the cases are in the report.

Bautista requests that board discuss the disciplinary actions for dentists who fail to register with the PDMP program. The dental board does not elect to issue a disciplinary action for failing to register for the PDMP late at this point, as long as all dentists register at the time of their renewal.

Agenda Item 4 – Investigative Report

On a motion duly made by Ross, seconded by Walden, and approved by roll call vote, it was

RESOLVED to go in to executive session in accordance with Alaska Statute 44.62.310(c)(3) for the purpose of discussing investigative matters which by law, municipal charter, or ordinance are required to be confidential. Board staff to remain during this session

**Silveira – yea, Nielson – yea, Ross – yea, Kovaleski – yea, Walden – yea, Scheller – yea, Moriarty – yea, Wahto – yea, Wenzell - yea.
9 yeas, 0 nays.**

Motion passed.

Off the record at 9:41 a.m.

On the record at 9:58 a.m.

On a motion duly made by Walden, seconded by Ross, and approved by roll call vote, it was

RESOLVED to accept the Consent Agreement for case No. 2018-000369.

**Silveira – yea, Nielson – yea, Ross – yea, Kovaleski – yea, Walden – yea, Scheller – yea, Moriarty – yea, Wahto – yea, Wenzell - yea.
9 yeas, 0 nays.**

Motion passed.

Case No. 2018-00369 involved a consent agreement for a dental hygiene license for Kayla Kepler, license #DENH2208.

On a motion duly made by Dr. Nielson, seconded by Walden, and approved by roll call vote, it was

RESOLVED to adopt the Consent Agreement for case No. 2018-000399.

**Silveira – yea, Nielson – yea, Ross – yea, Kovaleski – yea, Walden – yea, Scheller – yea, Moriarty – yea, Wahto – yea, Wenzell - yea.
9 yeas, 0 nays.**

Motion passed.

Case No. 2018-000399 involved a consent agreement for a dental license for Guy Ingram, license #DEND696.

On a motion duly made by Ross, seconded by Walden, and approved by roll call vote, it was

184 **RESOLVED to accept the Voluntary Surrender for case No. 2018-000372,**
185 **effective immediately.**

186
187 **Silveira – yea, Nielson – yea, Ross – yea, Kovaleski – yea, Walden – yea,**
188 **Scheller – yea, Moriarty – yea, Wahto – yea, Wenzell - yea.**
189 **9 yeas, 0 nays.**

190
191 **Motion passed.**

192
193 Case No. 2018-000372 involved a voluntary surrender for a dental hygiene license for
194 Kimberlee Stewart, license #DENH2058.

195
196 Dr. Silveira states that the board adopted two consent agreements and accepted one
197 voluntary surrender. The board chair signed the consent agreements for staff to bring
198 back to Juneau for paralegal Zimmerman.

199
200 **Agenda Item 7 - Break**

201
202 Off the record at 10:02 a.m.

203 On the record at 10:10 a.m.

204
205 **Agenda Item 8 – Public Comment**

206
207 Michale Boothe – Is a dentist with the department of corrections and wants to know if a
208 dental hygienist is allowed to enter the ICD-10 codes into an electronic database and if
209 they do so would this be a violation of the dental practice act. The board determines that
210 the dental hygienist is allowed to enter the codes into the computer as long as this is
211 being entered at the direction of the dentist and the dentist reviews the diagnosis and
212 codes prior to finalizing this in the patient's charts.

213
214 Dr. Boothe has a second question regarding the radiologic inspections and what the
215 pathway to compliance would be. The board states that this topic is on the agenda
216 under item 9. Briefly discussed inspections and the problems the board is running into
217 when writing the regulations. The current state inspector requirements are overly
218 burdensome and it is difficult to locate people who qualify. The board will continue this
219 discussion with AAG Weigand.

220
221 **Agenda item 9 – Regulation Project**

222
223 Dr. Silveira reminds the board that during break and between board meetings it is
224 important not to discuss board business with more than two board members.

225
226 Reviewed the drafted regulations for radiological equipment regulations. The board will
227 be required to fill out the FAQ form for this regulation project. Dr. Nielson volunteers to
228 fill out this FAQ form.

AAG Weigand joined the meeting at 10:36 a.m.

Continued discussion on who qualifies to perform the radiologic inspections under AS 08.36.075. The board will review the FDA and ADA guidelines to determine who qualifies as an inspector and draft regulations that will be in compliance with federal standards.

Clarification over the sedation training was brought up by AAG Weigand and she recommends referencing 12 AAC 28.410 and it will state what courses will be approved if it is AGD, ADHA or ADA courses and for the board to include a specific checklist of what topics are required to be covered within that course. The board will continue to develop a pathway for completing continuing education courses that will qualify for a moderate/minimal sedation permit. The board discussed reviewing the current regulation project out for public comment and do not plan to make substantial changes at this point. They plan to make a new project outlining the requirements for the pediatric sedation courses.

Dr. Nielson asks about updates on the Smile Direct and AAG Weigand explains that it is in an active open case and she cannot discuss this. She explains the board is not able to have any information at this time. They want to avoid any prejudgment of something before they have all the facts as this would be a disadvantage to the board and could knock them out as a final trial fact.

Discussion started on the Temporary Permit regulation. The drafted regulations need to have some areas removed as the purpose of the regulation is to clarify the statute not to reiterate it. The board would like to see the following items listed on the temporary permit: the incapacitated dentist's name, address/es showing the locations the temporary permit holder is able to practice, effective and expiration dates. The incapacitated dentist will be required to submit a letter from a physician stating they are rendered impaired and unable to practice. Would also like to add that the incapacitated dentist must make reasonable effort to find a substitute dentist licensed under this chapter. Elected to remove (b)(d) and (e) and keep (f) from the first draft of the temporary regulations.

On a motion duly made by Silveira, seconded by Nielson, and approved by roll call vote, it was

RESOLVED to accept the regulations for the temporary permit to be sent to the regulation specialist for drafting prior to going out for public comment.

**Silveira – yea, Nielson – yea, Ross – yea, Kovaleski – yea, Walden – yea, Scheller – yea, Moriarty – yea, Wahto – yea, Wenzell - yea.
9 yeas, 0 nays.**

Motion passed.

Discussed WREB equivalent exams for dental hygienists. Treston explained that applicants are contacting the examiner asking if they are able to apply for a dental hygiene license using a WREB equivalent exam, similar to the new dental regulations. The board would like more information from CRDTS, SRTA and ADEX prior to drafting any regulation changes to the dental hygiene regulations regarding examinations. The board agrees that patient based clinical examinations are mandatory.

Reviewed 12 AAC 28.925 Lapsed licenses regulations and determined it requires a few changes to reflect the correct numbers in the regulation.

On a motion duly made by Silveira, seconded by Ross, and approved by roll call vote, it was

RESOLVED to adopt the changes to 12 AAC 28.925 Lapsed Licenses (a)(2)

Silveira – yea, Nielson – yea, Ross – yea, Kovaleski – yea, Walden – yea, Scheller – yea, Moriarty – yea, Wahto – yea, Wenzell - yea. 9 yeas, 0 nays.

Motion passed.

Off the record at 12:07 p.m.

Agenda Item 10 - Lunch

On the record at 1:08 p.m.

Roll Call

Those present, constituting a quorum of the board, were:

Dr. Paul Silveira, President – Valdez
Dr. David Nielson – Anchorage
Ms. Paula Ross – Anchorage
Ms. Gail Walden – Wasilla
Dr. Steven Scheller – Fairbanks
Dr. Michael Moriarty – Seward
Ms. Robin Wahto - Anchorage
Dr. Thomas Kovaleski – Chugiak
Dr. Dominic Wenzell - Girdwood

In attendance from the Division of Corporations, Business & Professional Licensing, Department of Commerce, Community and Economic Development were:

Ms. Amber Treston, Licensing Examiner – Juneau

Ms. Janey McCullough, Division Director – Juneau
Ms. Melissa Dumas, Administrative Officer II – Juneau
Ms. Marylene Wales, Accountant III - Juneau

Agenda Item 11 – Division Update

Reviewed the Fee Analysis and do not recommend any changes to the dental fees. Do not project a deficit for the upcoming 2019 renewal period through the next renewal period of 2021. Walden does not see the Nitrous Oxide one-time application fee on the projected budget and requests having that added to this analysis.

Agenda Item 12 – Review Applications

The board reviewed the application for Jae Mi Cho. The only item needed is the documentation of 2 hours of CE in pain management, opioid use and addiction.

On a motion made by Dr. Silveira, seconded by Ross, and approved by roll call vote, it was

RESOLVED to approve Dr. Jae Mi Cho’s application for a Dental License by Exam level II pending the receipt of documentation showing 2 hours of CE in pain management, opioid use and addiction.

**Silveira – yea, Nielson – yea, Ross – yea, Kovaleski – yea, Walden – yea, Scheller – yea, Moriarty – yea, Wahto – yea, Wenzell - yea.
9 yeas, 0 nays.**

Motion passed.

Reviewed the application for Catherine Ramiso for a local anesthetic application.

Dr. Silveira moved to adopt Catherine Ramiso’s application for a Local Anesthetic permit, which was seconded by Dr. Kovaleski. The motion was denied by roll call vote:

Silveira – nay, Nielson – nay, Ross – nay, Kovaleski – nay, Walden – nay, Scheller – nay, Moriarty – nay, Wahto – nay, Wenzell – nay.

0 yeas, 9 nays

Motion fails.

Grounds for denial:

12 AAC 28.340 (2) at least eight clock hours of laboratory instruction during which time three injections each of the anterior palatine, incisive palatine,

367 anterior and middle superior alveolar, posterior superior alveolar, inferior
368 alveolar, mental, long buccal, and infiltration injections are administered;
369 (3) clinical experience sufficient to establish the hygienist's ability to
370 adequately anesthetize the entire dentition and supporting structures in a
371 clinical setting, requiring not less than six clock hours, under the direct
372 supervision of course faculty;
373

374 The board's decision to deny Ms. Catherine Ramiso was based on her Verification of
375 Licensure in South Carolina was for a Dental Hygienist with IA (has certification in
376 Infiltration Anesthesia) and her course verification form states infiltration only and this
377 does not meet the requirements for licensure. The board would like to encourage Ms.
378 Ramiso to take a WREB exam for Local Anesthesia and reapply.
379

380 The board reviewed the application for William Atkinson. Discussed his continuing
381 education courses that were taken. Discussion on obtaining CE online vs. in person.
382 The board does not elect to limit the number of CE that can be taken on line at this time.
383 The board questions why Dr. Atkinson is requesting a license by his middle name and
384 not his legal name, Aubrey.
385

386 **On a motion made by Walden, seconded by Dr. Kovaleski, and approved by roll**
387 **call vote, it was**
388

389 **RESOLVED to approve Dr. William Atkinson's application for a Dental**
390 **License by Credentials.**
391

392 **Silveira – yea, Nielson – yea, Ross – yea, Kovaleski – yea, Walden – yea,**
393 **Scheller – yea, Moriarty – yea, Wahto – yea, Wenzell – yea.**
394 **9 yeas, 0 nays.**
395

396 **Motion passed.**
397

398 The board reviewed the application for Senan Ziadeh. Discussed the regulations and
399 necessity to graduate from a CODA accredited dental school.
400

401 **Dr. Silveira moved to adopt Dr. Senan Ziadeh's application for a Dental**
402 **License by Credentials, which was seconded by Dr. Kovaleski. The motion**
403 **was denied by roll call vote:**
404

405 **Silveira – nay, Nielson – nay, Ross – nay, Kovaleski – nay, Walden – nay,**
406 **Scheller – nay, Moriarty – nay, Wahto – nay, Wenzell – nay.**
407

408 **0 yeas, 9 nays**
409

410 **Motion fails.**
411

412 **Grounds for denial:**

12 AAC 28.938 An applicant for a license to practice dentistry must be a graduate of a dental school that, at the time of graduation, is accredited by the Commission on Dental Accreditation of the American Dental Association.

The board's decision to deny Dr. Senan Ziadeh's application for a Dental License by Credentials was based on the fact that he graduated dental school outside the US and the program was not an accredited CODA program.

Agenda Item 13 – Oral Cancer Screenings

The examiner received an email asking for clarification from the board if she is able to perform oral cancer screenings outside of the dental office at a fire station. As this is a voluntary service she is providing and she is not making a diagnosis. As long as she is only making a recommendation to see a dentist or oral surgeon for follow up. The board feels she will not require a collaborative agreement for this service.

Agenda Item 14 – Break

Ahead of schedule and no break necessary.

Agenda Item 15 – Old/New Business

The board elected to not discuss the penalty matrix at this time. Discussed what a dentist can delegate to a dental assistant specifically relating to Silver Diamine. The board reviewed AS 08.36.346(a)(A) and determined that under indirect supervision the dental assistant can apply Silver Diamine.

Agenda Item 16 – Amalgam testing in WREB

The board states many dental programs are no longer teaching this procedure. The board feels this is a useful restoration and when dentists are applying for a dental license they will look up the requirements for that state and will take the appropriate portions of the WREB or equivalent in order to qualify for the license. WREB will need to show what portions of the WREB the applicant took.

The board requested a link on the website that clearly states what is needed to qualify for a dental license. Treston will contact PBIS who collects the WREB exam scores for the applicants and they can ensure the correct portions of WREB are included in the report.

Agenda Item 17 - Office Business

Board chair and board secretary signed the wall certificates.

The board elected to vote on Doodle to set up a Teleconference to review the regulations that are currently out for public comment and closes on September 10, 2018.

Reviewed the forms that are currently on the website. Would like to see changes made to Moderate Sedation permit Program Verification form 08-4172a and Nitrous Oxide Course Approval Application form 08-4774. The board will review all forms currently on the website and email any changes to Treston for review.

Silveira brings up the discussion about the 20 documented pediatric cases that need to be submitted to the board. The board discussed if these cases need to be supervised and who would qualify to supervise these cases.

Briefly discussed that Dr. Kovaleski and Dr. Silveira's terms will be up and not eligible for reappointment as of 3/1/19.

Agenda Item 18 - Adjourn

On a motion made by Dr. Silveira, seconded by Dr. Kovaleski, and approved by roll call vote, it was

RESOLVED to adjourn the meeting.

**Silveira – yea, Nielson – yea, Ross – yea, Kovaleski – yea, Walden – yea, Scheller – yea, Moriarty – yea, Wahto – yea, Wenzell – yea.
9 yeas, 0 nays.**

Motion passed.

Off the record at 2:35 p.m.

Respectfully Submitted:

Amber Treston
Occupational Licensing Examiner

Approved:

Paul Silveira, DMD, President

Date:_____

1 STATE OF ALASKA
2 DEPARTMENT OF COMMERCE, COMMUNITY AND
3 ECONOMIC DEVELOPMENT
4 DIVISION OF CORPORATIONS,
5 BUSINESS & PROFESSIONAL LICENSING
6 BOARD OF DENTAL EXAMINERS

7
8 MINUTES OF MEETING
9 September 17, 2018

10
11 These minutes were prepared by the staff of the Division of Corporations, Business and
12 Professional Licensing. They have been reviewed and approved by the Board.

13
14 By authority of AS 08.01.070(2) and AS 08.36.040 and in compliance with the
15 provisions of Article 6 of AS 44.62, a meeting of the Board of Dental Examiners was
16 held September 17, 2018, by teleconference.

17
18 The teleconference was called to order by Dr. Paul Silveira, President, at 12:08 p.m.

19
20 **Agenda Item 1 – Roll Call**

21
22 Those present, constituting a quorum of the board, were:

23
24 Dr. Paul Silveira, President – Valdez
25 Dr. David Nielson – Anchorage
26 Ms. Paula Ross – Anchorage
27 Ms. Gail Walden – Wasilla
28 Ms. Robin Wahto - Anchorage
29 Dr. Thomas Kovaleski – Chugiak

30
31 In attendance from the Division of Corporations, Business & Professional
32 Licensing, Department of Commerce, Community and Economic Development
33 were:

34 Ms. Amber Treston, Licensing Examiner – Juneau
35 Ms. Sher Zinn, Regulation Specialist II – Juneau

36
37 Members of the public in attendance:

38
39 Dr. Shane Rhoton – Fairbanks

40
41 **Agenda Item 2 – Review of Agenda**

42
43 Dr. Silveira asked if everyone had been able to review the agenda and asked if anyone
44 had any conflicts of interest with the items on the agenda.

45
46 **Agenda Item 3 – Public Comment**

Dr. Rhoton asks the board about the email he had sent and if the board had the opportunity to review this. The board confirms the email was received and the board has reviewed his email. Dr. Silveira explained emails that are received by the examiner are answered directly by the examiner. If the licensee has questions that the examiner cannot answer the emails are then forwarded to the board for review and clarification. Dr. Nielson adds to this by stating most questions can be found in the Statutes or Regulations therefore questions are answered quickly. However, if the licensee has questions about regulations that are being drafted or worked on by the board then they do not have the answer at that time, but they are working on it. Zinn helps to further clarify that if licensees submit a public comment during a proposed regulation project that is out for public comment then the board is not allowed to see those comments until the public comment period is over. If Dr. Rhoton is asking about the email that was sent during the regulation project period and he is attempting to discuss this at this teleconference then the board will have to send it out for public comment again to include oral testimony at a meeting so that everyone has the opportunity to speak openly about it. The public can comment on this after it has been adopted by the board.

Dr. Rhoton speaks to the board and states his frustrations with the dental board and feels the board is taking his privileges away. He feels the new regulations are impacting his livelihood and practice and he does not appreciate the way he has been treated. He asks for the board to identify a pathway for continuing education. Zinn explains that his comment is getting too close to the regulations that are out for public comment and if Dr. Silveira wants to accept his public comment after the adoption of the regulation then he can continue his comment at that time.

Agenda Item 4 – Application Review – Local Anesthetic

On a motion duly made by Walden, seconded by Dr. Nielson, and approved by roll call vote, it was

RESOLVED to go in to executive session in accordance with Alaska Statute 44.62.310(c)(2) for the purpose of discussing an application for local anesthetic.

Board staff to remain during this session

Silveira – yea, Nielson – yea, Ross – yea, Kovaleski – yea, Walden – yea, Wahto – yea.

6 yeas, 0 nays.

Motion passed.

Off the record at 12:31 p.m.

On the record at 12:48 p.m.

Roll Call

Those present, constituting a quorum of the board, were:

Dr. Paul Silveira, President – Valdez
Dr. David Nielson – Anchorage
Ms. Paula Ross – Anchorage
Ms. Gail Walden – Wasilla
Ms. Robin Wahto - Anchorage
Dr. Thomas Kovaleski – Chugiak

In attendance from the Division of Corporations, Business & Professional Licensing, Department of Commerce, Community and Economic Development were:

Ms. Amber Treston, Licensing Examiner – Juneau
Ms. Sher Zinn, Regulation Specialist II – Juneau

Members of the public in attendance:

Dr. Shane Rhoton – Fairbanks

Reviewed the application for Mia Tandoc for a local anesthetic application.

Walden moved to approve Mia Tandoc’s application for a Local Anesthetic permit, which was seconded by Dr. Kovaleski. The motion was denied by roll call vote:

Silveira – nay, Nielson – nay, Ross – nay, Kovaleski – nay, Walden – nay, Wahto – nay.

0 yeas, 6 nays.

Motion fails.

Grounds for denial:

12 AAC 28.320(a)(4) evidence of having passed the local anesthetic portion of the Western Regional Examining Board (WREB) dental hygienist examination within the five years immediately preceding the date of application.

12 AAC 28.340 (2) at least eight clock hours of laboratory instruction during which time three injections each of the anterior palatine, incisive palatine, anterior and middle superior alveolar, posterior superior alveolar, inferior alveolar, mental, long buccal, and infiltration injections are administered; (3) clinical experience sufficient to establish the hygienist’s ability to adequately anesthetize the entire dentition and supporting structures in a

clinical setting, requiring not less than six clock hours, under the direct supervision of course faculty;

The board's decision to deny Ms. Mia Tandoc was based on her Verification of Licensure in South Carolina for a Dental Hygienist with IA (has certification in Infiltration Anesthesia) and her course verification form states infiltration only and this does not meet the requirements for licensure. The board would like to encourage Ms. Tandoc to take a WREB exam for Local Anesthesia and reapply.

Agenda Item 5 – Regulation Review

Dr. Silveira reminds everyone that the public comment period is closed and there can only be board members talking from this point forward. Dr. Silveira states that all the board members have been able to review the public comments that were received and have considered the costs to private persons.

Discussed regulation 12 AAC 28.015(e)(1) provide documentation that the applicant completed either (A) or (B). Who will collect this documentation: will the board review each renewal or will the examiner review this? After discussion they determined regulation 12 AAC 28.420 Report of Continuing Education will be sufficient for the licensee to maintain adequate and detailed records of continuing courses taken and shall make them available to the board upon request.

The board began discussion on coursework that must be covered in a program or a continuing education class. Will not be able to add it to the currently proposed regulations as the board will be required to draft new regulations with the requirements of each course. The board will be discussing guidelines at a later time in the meeting.

Discussed 12 AAC 28.062 (4) and (5) and the language used for monitoring patients unless the patient's behavior prevents it. The board believes that the behavior could prevent monitoring in all ages and not specific to pediatric patients. Zinn will discuss this with AAG Weigand to ensure this will not be enough to change the intent that would require a second public comment period.

Before the board was able to adopt the regulations that were out for public comment with the suggested changes to the language regarding monitoring patients of all ages unless their behavior prevents it, the board was interrupted repeatedly by Dr. Rhoton. Unable to conduct board business.

Walden suggested we move to agenda item 6 and review the drafted Temporary permit regulations and FAQ form.

Agenda Item 6 – Temporary Permit Regulations and FAQ Worksheet

Discussed the fees associated with the temporary permit. Zinn explained that is a division project and the fiscal department is coming up with an application fee. Zinn will

184 send the board the final version of the fee when she receives it. The bill does not have a
185 fee for an extension of this permit and will have to see if there will be a cost for this.

186
187 Walden suggests making the language in the temporary permit to be consistent with the
188 language in 08.36.110(1)(c)(d)(e)(f). Walden volunteers to work on this drafted
189 regulation with Zinn to include this language.

190
191 Reviewed the temporary license FAQ form and Walden asks about question #15 item 2
192 and if the dentist covering for the incapacitated dentist will have the same qualifications
193 that they did, such as specialists. Sher will contact Law and ask for a file opening and
194 they will assign it to an AAG.

195
196 **Returned to Agenda Item 5 – Regulation Review**

197
198 Discussed the continuing education for the moderate sedation permit. The board will
199 provide the public with a list of topics that need to be covered in the course. Dr. Rhoton
200 continued to interrupt the board multiple times and did not allow the board to conduct
201 their meeting. Board chair elects to adjourn the meeting.

202
203 **Agenda Item 7 – Adjourn**

204
205 The board was unable to discuss the CE course requirements for the moderate and
206 minimal sedation permits that was on the agenda. Will reschedule this teleconference
207 for the next available date for the majority of the dental board members.

208
209 The board adjourned the meeting at 2:04 p.m.

210
211 Respectfully Submitted:

212
213
214
215
216 _____
217 Amber Treston
218 Occupational Licensing Examiner

219 Approved:

220
221
222
223 _____
224 Paul Silveira, DDS, President

225 Date: _____
226

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**STATE OF ALASKA
DEPARTMENT OF COMMERCE, COMMUNITY AND
ECONOMIC DEVELOPMENT
DIVISION OF CORPORATIONS,
BUSINESS & PROFESSIONAL LICENSING
BOARD OF DENTAL EXAMINERS**

**MINUTES OF MEETING
September 28, 2018**

These minutes were prepared by the staff of the Division of Corporations, Business and Professional Licensing. They have been reviewed and approved by the Board.

By authority of AS 08.01.070(2) and AS 08.36.040 and in compliance with the provisions of Article 6 of AS 44.62, a meeting of the Board of Dental Examiners was held September 28, 2018, by videoconference via Zoom.

The teleconference was called to order by Dr. Paul Silveira, President, at 10:08 a.m.

Agenda Item 1 – Roll Call

Those present, constituting a quorum of the board, were:

Dr. Paul Silveira, President – Valdez
Dr. Dominic Wenzell – Girdwood
Ms. Gail Walden – Wasilla
Ms. Robin Wahto - Anchorage
Dr. Thomas Kovaleski – Chugiak

In attendance from the Division of Corporations, Business & Professional Licensing, Department of Commerce, Community and Economic Development were:

Ms. Amber Treston, Licensing Examiner – Juneau
Ms. Sher Zinn, Regulation Specialist II – Juneau

Agenda Item 2 – Review of Agenda

Agenda has been reviewed by all board members present. No changes recommended.

Agenda Item 3 – Consent Agreement

On a motion duly made by Walden, seconded by Dr. Silveira, and approved by roll call vote, it was

RESOLVED to go in to executive session in accordance with Alaska Statute 44.62.310(c)(3) for the purpose of discussing case No. 2018-001039

Board staff to remain during this session

**Silveira – yea, Kovaleski – yea, Walden – yea, Wahto – yea, Wenzell - yea.
5 yeas, 0 nays.**

Motion passed.

Off the record at 10:11 a.m.

On the record at 10:34 a.m.

Roll Call

Those present, constituting a quorum of the board, were:

Dr. Paul Silveira, President – Valdez

Dr. Dominic Wenzell – Girdwood

Ms. Gail Walden – Wasilla

Ms. Robin Wahto - Anchorage

Dr. Thomas Kovaleski – Chugiak

In attendance from the Division of Corporations, Business & Professional
Licensing, Department of Commerce, Community and Economic Development
were:

Ms. Amber Treston, Licensing Examiner – Juneau

Ms. Sher Zinn, Regulation Specialist II – Juneau

**On a motion duly made by Dr. Silveira, seconded by Dr. Kovaleski, and approved
by roll call vote, it was**

RESOLVED to accept the Consent Agreement for case No. 2018-001039.

**Silveira – yea, Kovaleski – yea, Walden – yea, Wahto – yea, Wenzell - yea.
5 yeas, 0 nays.**

Motion passed.

Case number 2018-001039 involved a consent agreement for a dental license for
Senan Ziadeh, record #132992.

Agenda Item 4 – Regulation Review

Reviewing the regulation 12 AAC 28.062 (4) the board would like to add the language
that if the patient's behavior prevents being monitored then it needs to be documented
in the patient's record.

Requested clarification by changing the language from *a moderate* to *an adult moderate* in 12 AAC 28.015 (j)

The board discussed the 20 individually managed patients and if these should be required to be supervised. Discussion on who would qualify to supervise these cases. The board would prefer these cases be supervised by someone who holds a higher level of sedation permit than the one the applicant is applying for.

On a motion made by Dr. Silveira, seconded by Wahto, and approved by roll call vote, it was

RESOLVED to adopt the regulation project that was sent out for public comment regarding continuing education that is required to renew their sedation permits with the changes that were recommended to 12 AAC 28.015(j) to change a moderate to *an adult* and 12 AAC 28.062 (4) add *and is documented in the patient's record* and remove 12 AAC 28.062 (5).

Silveira – yea, Kovaleski – yea, Walden – yea, Wahto – yea, Wenzell - yea. 5 yeas, 0 nays.

Motion passed.

Reviewed the course work that must be covered in a program or continuing education course. Will place this on the website as a guideline for applicants and start a regulation project to add this into regulation. Also discussed having the 20 individually managed patients supervised by someone who holds a higher level of sedation permit. Will anticipate a subcommittee to discuss this further.

Dr. Nielson joined the meeting at 11:27 a.m.

The board requested these course requirements be drafted into regulation and propose a teleconference to review the drafted regulation at the end of October. Will require the regulations to state the approval of course of instruction and requirements for course of instructions. Continued discussion on the sedated cases and how to effectively document these were performed safely if they were not supervised. Dr. Nielson and Dr. Wenzell will work on the language for the supervised cases. The board cannot work on this together unless they public notice this. Only two board members can discuss board business at a time.

Agenda Item 5 – Temporary Permit Regulations and FAQ Worksheet

Discussed changes to 12 AAC 28.953 (b)(4) to include a form completed by the incapacitated dentist's healthcare provider verifying the dentist is incapacitated and unable to practice. This will provide clarification.

Discussed 12 AAC 28.953 (b)(6)(A) that has been changed to show documented proof the dentist applying has similar or equivalent credentials as the incapacitated dentist.

12 AAC 28.953(c) was also updated to include the NPDB report shall be reviewed by the board as part of the application process and the board may deny a temporary permit application based on the contents of the report.

On a motion made by Walden, seconded by Dr. Kovaleski, and approved by roll call vote, it was

RESOLVED to adopt the drafted regulations for 12 AAC 28.953 regarding the temporary permit as amended to go out for public comment.

Silveira – yea, Kovaleski – yea, Walden – yea, Wahto – yea, Wenzell - yea. 5 yeas, 0 nays.

Motion passed.

Agenda Item 6 – Adjourn

Tasks for the board staff to complete for the next teleconference meeting:

- 1.) Subcommittee to discuss the 20 cases requiring to be supervised
- 2.) Zinn will draft regulations for course requirements for the sedation permits
- 3.) Nielson and Wenzell to assist with drafted regulations and FAQ worksheet
- 4.) Will post the document with course requirements on the dental board website as a guideline for applicants.

The board adjourned the meeting at 12:05 p.m.

Respectfully Submitted:

Amber Treston
Occupational Licensing Examiner

Approved:

Paul Silveira, DDS, President

Date:_____

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**STATE OF ALASKA
DEPARTMENT OF COMMERCE, COMMUNITY AND
ECONOMIC DEVELOPMENT
DIVISION OF CORPORATIONS,
BUSINESS & PROFESSIONAL LICENSING
BOARD OF DENTAL EXAMINERS**

**MINUTES OF MEETING
November 9, 2018**

These minutes were prepared by the staff of the Division of Corporations, Business and Professional Licensing. They have been reviewed and approved by the Board.

By authority of AS 08.01.070(2) and AS 08.36.040 and in compliance with the provisions of Article 6 of AS 44.62, a meeting of the Board of Dental Examiners was held November 9, 2018, by teleconference.

The teleconference was called to order by Dr. Paul Silveira, President, at 10:01 a.m.

Agenda Item 1 - Roll Call

Those present, constituting a quorum of the board, were:

Dr. Paul Silveira, President – Valdez
Ms. Gail Walden – Wasilla
Dr. David Nielson – Anchorage
Dr. Thomas Kovaleski – Chugiak
Dr. Dominic Wenzell – Girdwood
Ms. Robin Wahto - Anchorage

In attendance from the Division of Corporations, Business & Professional Licensing, Department of Commerce, Community and Economic Development were:

Ms. Amber Treston, Records and Licensing Supervisor – Juneau
Ms. Sher Zinn, Regulation Specialist II - Juneau

Members of the public in attendance via teleconference:

Dr. John Leach
Dr. David Logan
Dr. Kenley Michaud
Dr. Samantha Mize

Agenda Item 2 – Review of Agenda

Agenda reviewed. No recommended changes at this time.

On a motion duly made by Silveira, seconded by Kovaleski, and approved by roll call vote, it was

RESOLVED to go in to executive session in accordance with Alaska Statute 44.62.310(c)(2)(4) for the purpose of discussing Case No. 2017-001070 and to discuss the legislative audit. Board staff to remain during this session.

**Silveira – yea, Walden – yea, Nielson – yea, Kovaleski – yea, Wenzell - yea
Wahto – yea.
6 yeas, 0 nays.**

Motion passed.

Off the record at 10:05 a.m.

On the record at 10:47 a.m.

Roll Call

Those present, constituting a quorum of the board, were:

Dr. Paul Silveira, President – Valdez
Ms. Gail Walden – Wasilla
Dr. David Nielson – Anchorage
Dr. Thomas Kovaleski – Chugiak
Dr. Dominic Wenzell – Girdwood
Ms. Robin Wahto - Anchorage

In attendance from the Division of Corporations, Business & Professional Licensing, Department of Commerce, Community and Economic Development were:

Ms. Amber Treston, Records and Licensing Supervisor – Juneau
Ms. Sher Zinn, Regulation Specialist II - Juneau
Megyn Weigand, AAG – Juneau

Members of the public in attendance:

Dr. John Leach
Dr. David Logan
Dr. Kenley Michaud
Dr. Samantha Mize
Rep. Tammie Wilson
Ms. Angela Ramponi

Agenda Item 3 – Consent Agreement

On a motion duly made by Nielson, seconded by Wahto, and approved by roll call vote, it was

93 **RESOLVED to accept the Consent Agreement for case No. 2017-**
94 **001070.**

95
96 **Silveira – yea, Walden – yea, Nielson – yea, Kovaleski – yea, Wenzell - yea**
97 **Wahto – yea.**
98 **6 yeas, 0 nays.**

99
100 **Motion passed.**

101
102 Case No. 2017-001070 involved a consent agreement for a dental license for James
103 Wimsatt III, license #DEND1451.

104
105 Dr. Silveira proposed to start a new regulation project regarding the radiology regulation
106 and to open a file with the AAG so a representative from the board can discuss this
107 information and prepare this for the December 7th, 2018 meeting. Zinn will open the file
108 and Dr. Nielson and Dr. Wenzell volunteered to work with the AAG on these regulations.

109
110 **Agenda Item 4 – Regulation Review**

111
112 Reviewed the temporary permit that closed for public comment on 11/5/18. No public
113 comments were received.

114
115 **On a motion made by Nielson, seconded by Wenzel, and approved by roll call**
116 **vote, it was**

117
118 **RESOLVED to adopt the regulation project that was sent out for public**
119 **comment regarding the temporary permit 12 AAC 28.953.**

120
121 **Silveira – yea, Walden – yea, Nielson – yea, Kovaleski – yea, Wenzell - yea**
122 **Wahto – yea.**
123 **6 yeas, 0 nays.**

124
125 **Motion passed.**

126
127 The board reviewed and agree with the temporary permit fees. No changes
128 recommended.

129
130 Discussed 12 AAC 28.360 to remove the language the board will maintain a registry of
131 all board approved courses of instruction for the local anesthetic agents or nitrous oxide
132 sedation.

133
134 Reviewed the language suggested for 12 AAC 28.937(c)(4)(B), 12 AAC 28.937(c)(7), 12
135 AAC 28.951(c)(6)(B) and 12 AAC 28.951 (c)(11) and add *continuous* active clinical
136 practice to each regulation. The board feels this language would be restrictive in case
137 the professional was on maternity or medical leave for an extended period of time.
138 Recommend changing the language in these regulations to be worded as follows: the

applicant has been licensed for at least 5 years and in active clinical practice documenting at least 5,000 hours for dentists or 2,500 hours for hygienists.

Representative Tammie Wilson and Ms. Angela Ramponi joined the meeting at 11:04 a.m.

Walden brings up the National board exams part I and II and these will need to be changed after the effective date 8/1/2020.

Agenda Item 5 – Sedation Permit Course Requirement

Dr. Silveira recommended that the board skip Agenda Item 5 and return after discussing Agenda Item 6.

Agenda Item 6 – WREB Equivalent Exams

The board reviews alloy materials and why it is important to the board that this be tested before an applicant is issued a dental license in Alaska. The board discussed some research showing that composite resin restorations could be considered cariogenic and may be contraindicated in certain high risk populations. Cariogenic populations prefer amalgam restorations because they will last longer and the board feels it should be tested as it is used more frequently in Alaska. Dental schools are not teaching students how to place an amalgam/alloy routinely and it is not required at testing sites as students have the option during their test to choose between composite and amalgam/alloy.

Megayn Weigand, AAG, joined the meeting approximately 11:30 a.m.

Rep. Wilson addresses the board with concerns about the current regulation requiring that the applicant complete an amalgam and a composite in their regional exam. She feels this will be an issue for military dentists who relocate more frequently than typical dentists and they may not know at the time of their exam that will eventually relocate to Alaska and would have been required to be tested on both materials. Rep. Wilson asks the board if a practicing dentist places amalgam routinely can they be evaluated by their supervisor and have this be accepted opposed to flying down south to a testing center to be tested on amalgam. She also brings up the applicants who apply by Credentials and have been practicing for 5 years and have never placed an amalgam and they qualify with a generally equivalent exam to WREB and never have to prove competency with amalgam. Rep. Wilson also address the military courtesy license in Alaska and would like the board to adopt regulations that will allow military applicants to obtain a license.

Rep. Wilson and Ramoponi left the meeting approximately 11:45 a.m.

The board considered Rep. Wilson's concerns and would like to see amalgams taught in more schools as they last longer and are preferred for anti-cariogenic populations.

The board is willing to allow the applicant to choose between amalgam and composite materials. Walden would like to reach out to CODA and express their concern about dental schools no longer teaching amalgam.

On a motion made by Nielson, seconded by Wahto, and approved by roll call vote, it was

RESOLVED to amend regulation 12 AAC 28.940(b)(8)(B)(vi) to read patient based operative examination that includes one class II posterior alloy or composite and one additional operative procedure, either anterior class III or posterior class II.

**Silveira – yea, Walden – yea, Nielson – yea, Wenzell - yea Wahto – yea.
5 yeas, 0 nays.**

Motion passed.

Zinn clarifies for the record that the current regulation 12 AAC 28.940(b)(8)(B) states the February 1, 2019 date only applies to applicants who have taken the WREB exam. Allowing applicants to be aware that when they take the exam after February 1, 2019 they will be required to comply with components (i)-(vi) after that date. Applicants who are applying with an equivalent exam are currently required to comply with these components at this time.

Agenda Item 4 – Regulation Review

Kovalkesi left the meeting at 12:00 p.m.

The board discussed the Courtesy license and defining who qualifies as a nonresident. The board would like to allow military applicants who live in Alaska to be able to qualify for this license.

On a motion made by Walden, seconded by Silveira, and approved by roll call vote, it was

RESOLVED to approve the addition of regulation 12 AAC 28.955 (i) and add (3) “non-resident” means individuals with permanent residence outside Alaska or members of the military stationed in Alaska, to go out for public comment.

**Silveira – yea, Walden – yea, Nielson – yea, Wenzell - yea Wahto – yea.
5 yeas, 0 nays.**

Motion passed.

Next item on the agenda is to return to the drafted regulations for the course requirements for sedation permits. Will table this for December 7, 2018 meeting as time is limited for today.

Zinn clarifies with the board when the public comments should be sent out from this meeting since the sedation regulations have been tabled for the December 7, 2018. The board would prefer these regulations wait to be sent out for public comment when the public comments are sent out in December.

Agenda Item 7 – Adjourn

Tasks for the board staff to complete for the December 7, 2018 board meeting:

- 1.) Zinn to open a file with Dept. of Law for Radiology regulation
- 2.) Radiology regulation to be worked on by Dr. Nielson and Dr. Wenzell
- 3.) Treston to set up a poll for upcoming board meeting in February 2019

The board adjourned the meeting at 12:54 p.m.

Respectfully Submitted:

Amber Treston
Records and Licensing Supervisor

Approved:

Paul Silveira, DMD, President

Date:_____

Members of public in attendance-

Dr. Kenly Michaud
Dr. David Logan
Dr. Jessica Blanco
Dr. M. Boothe
Dr. William Marley
Dr. Mary Starsiak - CRDTS
Dr. Joan Sheppard - CRDTS
Dr. Ryan Gard

Agenda Item 1- Review of Agenda

The board reviewed the agenda and added the following:

- Radiological Regulations added to Old/New business.
- Governor's Task Force on Opiates presentation by Dr. Kovaleski added to Old/New business.
- Presentation by Angela Birt moved to 3:00 pm
- Dr. Scheller was assigned to review Dr. Libby's application.
- Dr. Silveira was assigned to review Dr. Dowling's application.

On a motion duly made by Neilson, seconded by Walden, and approved unanimously, it was

RESOLVED to approve the amended agenda.

Agenda Item 2- Approval of Minutes

The board reviewed the minutes from the September 16, 2016 meeting, September 23, 2016 meeting, and November 4, 2016 teleconference.

On a motion duly made by Scheller, seconded by Neilson, and approved unanimously, it was

RESOLVED to approve the minutes of the September 16, 2016 teleconference, September 23, 2016 meeting, and November 4, 2016 teleconference.

Agenda Item 3- Ethics

Dr. Scheller will abstain from voting on approval of the dental application for Dr. Tyler Ingersoll, due to their personal acquaintance.

Agenda Item 6- Old/New Business

99 Dr. Wells requested that Dr. Kovaleski give his presentation first, as it would not take very
100 long.

101
102 -Dr. Kovaleski stated that he had attended numerous meetings regarding the Governor's
103 Opiate Task Force, and had a deadline of January 1, 2017 to present a report to the Governor
104 and Legislature on opiates. They primarily looked at existing legislation as a resource and
105 template, focusing on Arizona and Washington. The Task Force finally decided on Washington
106 as the truest example of what the Task Force was trying to achieve and had assigned Sara
107 Chambers to modify the Washington legislation to fit into Alaska Statutes without
108 "reinventing the wheel". The Task Force was using the ADS and Dr. David Logan as a
109 resource to maintain dental specific information related to acute pain. The Washington
110 legislation did include wording specific to acute pain related to perioperative (after surgery)
111 pain, which with some tweaking, could apply to dentistry. Dr. Kovaleski is pushing for
112 wording such as "Prescriptions for acute dental pain should be for the lowest dose and
113 shortest course possible, ideally no more than three days, non-opiate therapies are
114 encouraged whenever possible." Dr. Wells stated that that wording sounded reasonable. Dr.
115 Kovaleski acknowledged that his wording would probably not survive the legislative process.
116 There is still input being given by multiple organizations and parties but it would go out for
117 public comment soon.

118
119 Dr. Nielson offered to give his presentation on the AADB convention that he recently attended
120 in Denver, CO.

121
122 -AADB does not make resolutions or take specific stands. It provides excellent resources for
123 license applicants and information sharing between states. One of the things discussed by the
124 AADB was interstate compacts which supposedly increases the number of licensees' access to
125 care portability. The AADB claims that it attracts clean record providers. There was
126 apparently some debate as to the efficacy of the interstate compacts as compared to the NPDB,
127 PBIS, and current methods of Credentialing applicants. There is also a high cost to entering
128 into the compacts, startup costs that the state and potential licensees would have to bear.

129
130 -The consensus within the AADB for the use of live patients during testing is good. Having a
131 human element is important. Managing the patient is important as well as evaluating
132 kinematic skills. Should test on criteria that the institutions teach on. Psychometrically, the
133 exam should reflect actual practice. CODA requires the treatment of live patients for their
134 accreditation of a dental program so the Boards should require live patient testing. The AADB
135 does not officially take a stand on this but that was the consensus amongst the attendees of
136 the convention.

137
138 -The last topic is determining what a specialist is. Current policy is to rely on the ADA to
139 define what a specialist is. Dr. Nielson talked to the ADA attorneys to find out how the board
140 can proactively determine whether a dentist advertising as a specialist is allowed to do that.
141 The ADA suggested that the board needs to work with the attorney general to establish
142 criteria defining a specialist. They suggested wording such as "must be a graduate of
143 educational program accredited by an agency recognized by the United States Department of

Education.” Currently the only accrediting agency recognized by the DoE is CODA. Dr. Nielson proposed that in the near future, the board should establish criteria defining a specialist in order to prevent false advertising on the part of unqualified dentists. The board would have to work with state supervision in order to rework the statute to be passed by the legislature.

-There is a CE tracker called the Dental Exchange that might reduce the amount of paperwork occasioned by audits. The company collects the information and provides it in the form of a certified spreadsheet to save time and simplify the process. Dr. Nielson requested that board staff research this method and provide a report to the board.

Audio/Teleconferences

Any board member, or member of the staff, can request of the Board Chair to arrange a meeting. The Chair must then determine whether a meeting is necessary or not.

Jasmine Bautista arrived at 9:00 a.m.

Agenda Item 4 - Investigations

On a motion duly made by Walden, seconded by Nielson, and approved unanimously, it was

RESOLVED to go into executive session in accordance with AS 44.62.310(c)(2)(3), for the purpose of discussing the investigation of applicants.

Staff to remain.

Off the record at 9:02 a.m.

Back on record at 9:21 a.m.

Agenda Item 5 - CRDTS Exam Presentation

Dr. Joan Sheppard and Dr. Mary Starsiak introduced themselves to the board and stated their qualifications. Dr. Sheppard is currently the President of CRDTS, an 8 year member of the Minnesota Board of Dentistry and still does consulting work with that organization. She has been a part of the CRDTS organization since 2007. Dr. Starsiak is the President-Elect of CRDTS while serving her third term as Board Chair for the State of Illinois Board of Dentistry. Both Dr. Sheppard and Dr. Starsiak are practicing dentists.

The Board had requested a presentation from the CRDTS organization with the intent of reviewing other forms of official dental testing, the eventual goal being to find acceptable alternative tests to use as qualifications for licensure by exam in Alaska. The presentation covered the methods, content, and style of the CRDTS testing process. Also covered were the details and benefits of being an affiliate member of the CRDTS organization.

Dr. Silveira joined the meeting at 9:58 a.m.

Agenda Item 7 - Break

Off the record at 10:37 a.m.

Back on the record at 10:47 a.m.

Agenda Item 6 - Old/New Business - continuation

Continuous query of the NPDB/Online Renewal

Ms. Sher Zinn informed the board about how the NPDB continuous query would function and how using that function would affect the board staff as far as time and funding. The board did not make any decisions regarding the NPDB continuous query.

Ms. Zinn informed the board that the updated fee regulations have been signed by the Director and they have gone on the Lt. Gov. for signature. Due to this being regulation, the renewal will not be available for 30 days after the Lt. Gov. signs, making the earliest date the renewal will be available is January 10th. She also explained to the board the addition of the Restorative Function Endorsement as a separate license to replace the current method of merely noting the presence of a Restorative Function Endorsement on the Hygienist license.

Ms. Zinn's final item to discuss was to inform the board that SRTA, ADEX and WREB all wish to give presentations to the board and answer questions. This discussion turned to the scheduling of meetings. Ms. Zinn informed the board the results of using the "Doodle" scheduling tool to determine the best date for the next several board meetings. The board chose Friday, February 24, 2017, as the next meeting date, depending on how discussion of the Sedation Regulations proceeds.

Dr. Moriarty interjected that the board should discuss the earlier presentation by CRDTS as a whole. Dr. Nielson and Dr. Wells doubted that there would be time. Dr. Wells suggested that all presentations be allotted an hour, to prevent losing too much time to a long presentation.

The board progressed on to the next topic for discussion in Item 6: Consent agreement with CE requirements.

Dr. Gary Sawdy, as a requirement of a previous consent agreement, submitted a total of 10.5 hours of Proof of Continuing Education to the board for their approval.

On a motion duly made by Scheller, seconded by Moriarty, and approved unanimously, it was

RESOLVED to approve the Continuing Education credits submitted by Dr. Gary Sawdy as per a previous Consent Agreement

Ms. Zinn introduced the next item to the board; the ongoing CE audits for the 1/1/2013 – 2/28/2015 renewal period. Three audits had been tabled or rejected by the reviewing board member for board discussion.

Dr. Nielson was the reviewing member for the audit of Dr. Woojung Park. His concern was regarding the validity of some of the credits issued under the authority of a study club class. The paperwork for the class did not strike him as being complete, as it left the amount of credits the class was worth as well as the name of the class “to be filled in by instructor”. Dr. Nielson found this fishy. The board continued discussion debating the validity of every single hour of CE for Dr. Park, specifically Course ID # 861. Dr. Nielson recused himself from the vote.

On a motion duly made by Nielson, seconded by Silveira, and approved unanimously, it was

RESOLVED not to approve the Continuing Education Credits submitted by Dr. Woojung Park for the audit of license renewal 1/1/2013 – 2/28/2015. The audit will be passed over to paralegal to make judgement and recommend a course of action. The paralegal will defer to reviewing board member for final decision. (Nielson)

Dr. Silveira was the reviewing board member for the audit of Dr. William Marley. Dr. Marley submitted a total of 32.5 credits for approval as required for the 1/1/2013 – 2/28/2015 CE audit. Dr. Silveira was concerned about a single credit listed as “Get Fit, Get Smarter”. Dr. Silveira did not find this to be representative of a course relating to the clinical practice of dentistry. The board debated the options available, reminded by Mrs. Zinn that a decision will set precedent. Dr. Kovaleski recused himself from the vote.

On a motion duly made by Kovaleski, seconded by Ross, and approved unanimously, it was

RESOLVED not to approve the Continuing Education Credits submitted by Dr. William Marley for the audit of license renewal 1/1/2013 – 2/28/2015. The audit will be passed over to paralegal to make judgement and recommend a course of action. The paralegal will defer to reviewing board member for final decision. (Kovaleski)

Dr. Nielson was the reviewing board member for the audit of Dr. Seth Jorgensen. Dr. Nielson’s reason for tabling the audit was that 20 hours of Dr. Jorgensen’s continuing education were certified by the AMA, not the ADA. The board discussed the case, focusing on the fact that the course “Otolaryngology” does not apply to a certain extent to the practice of dentistry, especially with regards to oral surgery. Dr. Nielson recused himself from the vote.

On a motion duly made by Nielson, seconded by Silveira, and approved unanimously, it was

RESOLVED not to approve the Continuing Education Credits submitted by Dr. Seth Jorgensen for the audit of license renewal 1/1/2013 – 2/28/2015. The audit will be passed over to paralegal to make judgement and recommend a course of action. The paralegal will defer to reviewing board member for final decision. (Nielson)

The board moved on the final discussion topic in Item 6. A letter was sent from Governor's office regarding the acceptance of other exams in lieu of the WREB.

Dr. Wells brought the discussion to the topic of a dentist in Fairbanks with Stage IV Lymphoma. His sister and brother-in-law are willing to move from Louisiana to support his practice while he undergoes treatment. Dr. Wells is in favor of establishing statute that will allow for a temporary license to be issued when associated with extenuating circumstances and held to a strict time limit. Ms. Zinn brought to the board's attention the existence of "Locum Tenens" regulation, which exists with the Medical board but not in the Dental board. The Locum Tenens allows for a professional to temporarily replace an equivalent professional in their field for a limited amount of time. The board asked how to go about making a change to statute and was advised by Ms. Zinn to contact a legislator.

Dr. Logan, a member of the public who was attending the meeting, and the Executive Director of the Alaskan Dental Society, offered his knowledge of the original statute that allowed for a temporary license, and the reason for its removal. In his testimony, he informed the board that when the practice act was rewritten, the committee in charge could not remember the last time a temporary license had been issued. The consensus was that if it wasn't needed, it shouldn't be there. Dr. Logan asked the board to be aware of incoming Licensees who apply by way of a temporary license not receiving the proper level of review. Dr. Logan offered for the ADS to draft a bill to alter current statute to allow for a temporary license to be issued. The draft will be reviewed by the board at the next meeting. Pending that review, it will go on to a legislator to be brought up before the Legislature. Dr. Logan went on to say that in the last six months, the need for a temporary license has become more and more apparent. The current situation with Dr. Menard in Fairbanks is a good example but another example is of Dr. Ellis. In his case, he was a specialist in endodontics, which is a difficult position to find a replacement for. For a general dentist, finding a replacement is not overly difficult. For more specialized practitioners, finding a replacement might be impossible. This does establish a need to quickly and safely bring in a replacement to take over the patient load and maintain a minimum standard of care. Dr. Logan advises language such as "the board **may** issue..." in order to maintain control, also creating very strict time elements to prevent any long term practice under a temporary license. Another example of specific wording is that "temporary license is not a path to permanent licensure", with a ~3 month gap between temporary license and application for permanent license. Other states do have legislation regarding Locum Tenens, and the ADS will pull language from their example. The key will be in establishing a way to expedite the review without missing important applicant details. Dr. Logan agreed to draft legislation, with the assistance of a board member.

The discussion progressed, with the mention of statute changes, to moving Radiological Equipment Inspection back to Division of Radiology. Division of Radiology is apparently willing to take the task of inspecting dental office radiology equipment back under their wing. All that this would take is to repeal AS 08.36.075, and change the statute in Division of Radiology back to the way it was. Dr. Logan stated that a large part of the issue with moving that responsibility around was that for many years, dentists in this state paid inspection fees and rarely, if ever, received a visit from an inspector. Ms. Walden requested that a member of the Division of Radiology be present at a future meeting to debate the potential changes. Part of the problem is that regardless of who accepts inspection fees, budget cuts and expenses will prevent some (or all) of the inspections from happening.

Lunch Break - Off the Record at 11:50 a.m.

On Record at 1:03 p.m.

Agenda Item 9 – Personal Interviews

The board welcomed Dr. Kevin Croft to the meeting and explained the interview process. Dr. Croft appeared telephonically. The Board asked the standard interview questions.

On a motion duly made by Silveira, seconded by Ross, and approved unanimously, it was

RESOLVED to approve the application for a Dental License for Dr. Kevin Croft.

On a motion duly made by Silveira, seconded by Walden, and approved unanimously, it was

RESOLVED to approve the General Anesthesia Permit for Dr. Kevin Croft

The board welcomed Dr. Christopher Kaouk to the Board meeting and explained the interview process. Dr. Kaouk appeared telephonically. The Board asked the standard interview questions.

On a motion duly made by Nielson, seconded by Moriarty, and approved unanimously, it was

RESOLVED to approve the application for a Dental License for Dr. Christopher Kaouk.

The board welcomed Dr. Larry Kemp to the Board meeting and explained the interview process. Dr. Kemp appeared telephonically. The Board asked the standard interview questions.

On a motion duly made by Wells, seconded by Walden, and approved unanimously, it was

RESOLVED to approve the application for a Dental License for Dr. Larry Kemp.

The board welcomed Dr. Derek Lowe to the Board Meeting and explained the interview process. Dr. Lowe appeared telephonically. The Board asked the standard interview questions.

On a motion duly made by Ross, seconded by Silviera, and approved unanimously, it was

RESOLVED to approve the application for a Dental License for Dr. Derek Lowe.

The board welcomed Dr. Tyler Ingersoll to the Board meeting and explained the interview process. Dr. Ingersoll appeared telephonically. The Board asked the standard interview questions. Dr. Scheller abstained from the vote.

On a motion duly made by Kovalski, seconded by Walden, and approved unanimously, it was

RESOLVED to approve the application for a Dental License for Dr. Tyler Ingersoll.

The board welcomed Dr. Robert Bartoletti to the Board meeting and explained the interview process. Dr. Bartoletti appeared telephonically. The Board asked the standard interview questions.

On a motion duly made by Walden, seconded by Scheller, and approved unanimously, it was

RESOLVED to approve the application for a Dental License for Dr. Robert Bartoletti.

The board welcomed Dr. Allen Smith to the Board meeting and explained the interview process. Dr. Smith appeared telephonically. The Board asked the standard interview questions.

On a motion duly made by Moriarty, seconded by Ross, and approved unanimously, it was

RESOLVED to approve the application for a Dental License for Dr. Allen Smith.

The board welcomed Dr. Landon Libby to the Board meeting and explained the interview process. Dr. Libby appeared telephonically. The Board asked the standard interview questions. The board questioned Dr. Libby extensively regarding a discrepancy between his PBIS report and his State of Alaska Dental Application.

The board welcomed Dr. David Dowling to the Board meeting and explained the interview process. Dr. Dowling appeared telephonically. The Board asked the standard interview questions. The Board questioned a discrepancy in Dr. Dowling's application, regarding a "yes" answer that was mistakenly marked as "no". Dr. Dowling explained his misunderstanding of the question as it was written on the application.

On a motion duly made by Ross, seconded by Walden, and approved unanimously, it was

RESOLVED to go into executive session in accordance with AS 44.62.310(c)(2)(3), for the purpose of discussing the license applications for Dr. Landon Libby, Dr. David Dowling, and Dr. Samuel Lee.

Staff to remain.

Off the record at 2:34 p.m.

On record at 2:48 p.m.

On a motion duly made by Scheller, seconded by Ross, and approved unanimously, it was

RESOLVED to approve the application for a Dental License for Dr. Landon Libby.

On a motion duly made by Silveira, seconded by Walden, and approved unanimously, it was

RESOLVED to approve the application for a Dental License for Dr. David Dowling.

On a motion duly made by Scheller, seconded by Moriarty, and approved unanimously, it was

RESOLVED to approve the application for a Dental License for Dr. Samuel Lee.

Break – Off the record at 2:50 p.m.

On the record at 2:57 p.m.

The board reviewed draft regulations pertaining to radiological equipment inspections and dates of renewal for Coronal Polishing and Restorative Function Certificates.

On a motion duly made by Nielson, seconded by Wells, and approved unanimously, it was

RESOLVED to accept the regulation amendment to 12AAC 28.965(a), 12 AAC 28.965(b)(1), and 12 AAC 28.965 for Radiological Equipment Inspection and authorizes them to be sent out for public comment.

On a motion duly made by Wells, seconded by Scheller, and approved unanimously, it was

RESOLVED to accept amendments to 12 AAC 28.840(a) and 12 AAC 28.880(a) changing the renewal date of Coronal Polishing Certificates and Restorative Function Certificates from December 31 of even years to February 28 of odd years and to have them sent out for public comment.

Dr. Wells brought up that the board would soon be losing their public member and that any interested parties should be directed to the website application. He also requested that any board members whose terms were coming to an end reapply via the same method.

Agenda Item 10 – Budget/Expense Report

Sara Chambers and Angela Birt joined the meeting at 15:01 p.m.

Ms. Chambers, Manager of Division Operations began the expense report by covering the fiscal status report. Ms. Chambers informed the board that the fee change regulations had been signed by the Division Director and passed on to the Lt. Governor for his signature. Ms. Chambers continued on to detail particular matters of note in the expense report, as well as the differences between this year and previous years' expense reports.

Ms. Angela Birt, Chief Investigator, began her presentation by informing the board that all license denials authorized by the board had been upheld. Chief Birt commended this and allowed that there should never be much of a problem with that as long as any denials are accompanied by statutory authority and an explanation of the applicants' lack of qualification. Dr. Wells had originally asked Chief Birt to the meeting to go over the investigative process. Chief Birt proceeded to cover this topic, highlighting on board involvement.

Ms. Walden asked Chief Birt if the reviewing board member could be kept in the loop while the consent agreement is written, negotiated, and signed. Chief Birt allowed that there is not any specific language preventing that, but that the Investigations division tries not to put any more workload on the board members than necessary.

Dr. Wells requested that Board Staff begin acquiring materials associated with standardizing punishments for specific violations. Chief Birt continued her presentation, offering more detailed explanations of earlier topics and fielded a few questions for the Board.

Dr. Wells thanked Chief Investigator Birt for her presentation.

Agenda Item 11 – Sedation Regulations

Note: All suggestions made by the board with regards to the Sedation Regulations are pending approval of the AAG and public comment.

The Board asked that Assistant Attorney General Megyn Greider be telephonically included for the initial part discussion to give an update on the recent regulations edit submission.

Megyn Greider joined meeting telephonically at 3:53 p.m.

Ms. Greider had not yet had a chance to include the edits that Ms. Walden had recently sent. The board agreed to review the regulations again, and submit any additional edits to Ms. Greider for further review.

Megyn Greider left the meeting at 3:55 p.m.

The board began a page by page review of the sedation regulations. Dr. Nielson and Gail Walden dominated the discussion, with the other board members interjecting comments and ideas.

Dr. Moriarty left the room at 3:58 p.m., returned at 4:00 p.m.

Dr. Kenley Michaud (member of the public) requested that a series of examples of General Anesthetics that may be used for conscious sedation but which can quickly and easily induce a state of General Anesthesia, be included on page 6. He suggested wording such as "including, but not limited to, Propothol, Ketamine, and Brevitol".

The board wished to include wording to specify that applicants for certain permits have at least 20 personally managed patients and 60 hours of instruction.

Dr. Moriarty left the room at 4:10 p.m. and returned at 4:11 p.m.

The board generally agreed that the regulations should reference the ADA Guidelines for Use of Sedation and General Anesthesia, and the Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students.

The board discussed inspection fees and policies for Dentists who enter into collaborative agreements with CRNAs.

The board had some issues with the listing of necessary emergency equipment and drugs. In their opinion, the wording is not clear. Required emergency equipment should be clearly established for each particular level of sedation; moderate, general, and deep.

Dr. Scheller excused himself at 4:43 p.m. to catch his flight back to Fairbanks.

The board discussed scheduling a teleconference when the AAG has completed the requested edits, in order to vote on the finalized regulations and have them sent out for public comment.

Agenda Item 12 – Office Business

The Doodle tool had been sent out for scheduling the May/April meeting. The majority of the board will be able to make the April 28, 2017 meeting. Mrs. Walden will be unavailable for that meeting. Dr. Kovaleski requested to resend the Doodle request for the September meeting.

- Wall Certificates were signed by Dr. Wells and Dr. Nielson. Dr. Nielson substituted as secretary for Ms. Chaney.

- The finalized minutes from the September 16, September 23, and November 4 meetings were signed by Dr. Wells.

Tasks –

- Mr. Smith will collect examples of standardized punishments for specified violations from other boards, assisted by Chief Investigator Birt.
- Dr. Nielson requested that Board Staff conduct research into the Dental Exchange Continuing Education Tracker and provide information to the board.
- Ms. Walden requested that a member of the Division of Radiology be present at a future meeting to debate the potential changes to statute that would put the Division of Radiology back in charge of radiological equipment registration.
- Schedule a teleconference when the AAG has completed the requested edits on the sedation regulations.

The board adjourned the meeting at 5:20 p.m.

Respectfully Submitted:

Jedediah Smith
Occupational Licensing Examiner

Approved:

Thomas Wells, DDS, President

Date: _____

Item 4

- Ethics Report

State of Alaska Department of Law

Ethics Act Procedures for Boards & Commissions

All board and commission members and staff should be familiar with the Executive Branch Ethics Act procedures outlined below.

Who Is My Designated Ethics Supervisor (DES)?

Every board or commission subject to the Ethics Act¹ has several ethics supervisors designated by statute.

- The chair serves as DES for board or commission members.
- The chair serves as DES for the executive director.
- The executive director serves as DES for the staff.
- The governor is the DES for a chair.²

What Do I Have To Disclose?

The Ethics Act requires members of boards and commissions to disclose:

- Any matter that is a potential conflict of interest with actions that the member may take when serving on the board or commission.
- Any circumstance that may result in a violation of the Ethics Act.
- Any personal or financial interest (or that of an immediate family member) in a state grant, contract, lease or loan that is awarded or administered by the member's board or commission.
- The receipt of certain gifts.

The executive director of the board or commission and its staff, as state employees, must also disclose:

- Compensated outside employment or services.
- Volunteer service, if any compensation, including travel and meals, is paid or there is a potential conflict with state duties.
- For more information regarding the types of matters that may result in violations of the Ethics Act, board or commission members should refer to the guide, *"Ethics Information for Members of Boards and Commissions."* The executive director and staff should refer to the guide, *Ethics Information for Public Employees.* Both guides and disclosure forms may be found on the Department of Law's ethics website.

How Do I Avoid Violations of the Ethics Act?

- Make timely disclosures!

- Follow required procedures!
- Provide all information necessary to a correct evaluation of the matter!³
- When in doubt, disclose and seek advice!
- Follow the advice of your DES!

What Are The Disclosure Procedures for Board and Commission Members?

The procedural requirements for disclosures by members are set out in AS 39.52.220 and 9 AAC 52.120. One goal of these provisions is to help members avoid violations of the Ethics Act. The procedures provide the opportunity for members to seek review of matters in advance of taking action to ensure that actions taken will be consistent with the Act.

Procedure for declaring actual or potential conflicts.

Members must declare potential conflicts and other matters that may violate the Ethics Act **on the public record and in writing to the chair.**

Disclosure on the public record. Members must identify actual and potential conflicts orally at the board or commission's public meeting **in advance** of participating in deliberations or taking any official action on the matter.

- A member must always declare a conflict and may choose to refrain from voting, deliberations or other participation regarding a matter.⁴
- If a member is uncertain whether participation would result in a violation of the Act, the member should disclose the circumstances and seek a determination from the chair.

Disclosure in writing at a public meeting. In addition to an oral disclosure at a board or commission meeting, members' disclosures must be made in writing.

- If the meeting is recorded, a tape or transcript of the meeting is preserved **and** there is a method for identifying the declaration in the record, an oral disclosure may serve as the written disclosure.
- Alternatively, the member must note the disclosure on the Notice of Potential Violation disclosure form and the chair must record the determination.

Confidential disclosure in advance of public meeting. Potential conflicts may be partially addressed in advance of a board or commission's public meeting based on the published meeting agenda or other board or commission activity.

- A member identifying a conflict or potential conflict submits a Notice of Potential Violation to the chair, as DES, in advance of the public meeting.
- This written disclosure is considered confidential.
- The chair may seek advice from the Attorney General.
- The chair makes a written determination, also confidential, whether the disclosed matter represents a conflict that will result in a violation of the Ethics Act if the member participates in official action addressing the matter. ⁵

- If so, the chair directs the member to refrain from participating in the matter that is the subject of the disclosure.
- An oral report of the notice of potential violation and the determination that the member must refrain from participating is put on the record at a public meeting.⁶

Determinations at the public meeting. When a potential conflict is declared by a member for the public record, the following procedure must be followed:

- The chair states his or her determination regarding whether the member may participate.
- Any member may then object to the chair's determination.
- If an objection is made, the members present, excluding the member who made the disclosure, vote on the matter.
- *Exception:* A chair's determination that is made consistent with advice provided by the Attorney General may not be overruled.
- If the chair, or the members by majority vote, determines that a violation will exist if the disclosing member continues to participate, the member must refrain from voting, deliberating or participating in the matter.⁷

If the chair identifies a potential conflict, the same procedures are followed. If possible, the chair should forward a confidential written notice of potential violation to the Office of the Governor for a determination in advance of the board or commission meeting. If the declaration is first made at the public meeting during which the matter will be addressed, the members present, except for the chair, vote on the matter. If a majority determines that a violation of the Ethics Act will occur if the chair continues to participate, the chair shall refrain from voting, deliberating or participating in the matter. A written disclosure or copy of the public record regarding the oral disclosure should be forwarded to the Office of the Governor for review by the chair's DES.

Procedures for Other Member Disclosures

A member's interest in a state grant, contract, lease or loan and receipt of gifts are disclosed by filling out the appropriate disclosure form and submitting the form to the chair for approval. The disclosure forms are found on the Department of Law's ethics website.

What Are The Disclosure Procedures for Executive Directors and Staff?

Ethics disclosures of the executive director or staff are made in writing to the appropriate DES (chair for the executive director and the executive director for staff).

- Disclosure forms are found on the ethics website, noted above.

Notices of Potential Violations. Following receipt of a written notice of potential violation, the DES investigates, if necessary, and makes a written determination whether a violation of the Ethics Act could exist or will occur. A DES may seek advice from the Attorney General. If feasible, the DES shall reassign duties to cure a potential violation or direct divestiture or

removal by the employee of the personal or financial interests giving rise to the potential violation.

- These disclosures are not required to be made part of the public record.
- A copy of a determination is provided to the employee.
- Both the notice and determination are confidential.

Other Disclosures. The DES also reviews other ethics disclosures and either approves them or determines what action must be taken to avoid a violation of the Act. In addition to the disclosures of certain gifts and interests in the listed state matters, state employees must disclose all outside employment or services for compensation.

- The DES must provide a copy of an approved disclosure or other determination to the employee.

How Are Third Party Reports of Potential Violations or Complaints Handled?

Any person may report a potential violation of the Ethics Act by a board or commission member or its staff to the appropriate DES or file a complaint alleging actual violations with the Attorney General.

- Notices of potential violations and complaints must be submitted **in writing and under oath**.
- Notices of potential violations are investigated by the appropriate DES who makes a written determination whether a violation may exist.⁸
- Complaints are addressed by the Attorney General under separate procedures outlined in the Ethics Act.
- **These matters are confidential**, unless the subject waives confidentiality or the matter results in a public accusation.

What Are The Procedures for Quarterly Reports?

Designated ethics supervisors must submit copies of notices of potential violations received and the corresponding determinations to the Attorney General for review by the state ethics attorney as part of the quarterly report required by the Ethics Act.

- Reports are due in April, July, October and January for the preceding quarter.
- A sample report may be found on the Department of Law's ethics website.
- An executive director may file a quarterly report on behalf of the chair and combine it with his or her own report.
- If a board or commission does not meet during a quarter and there is no other reportable activity, the DES advises Angie White by e-mail at Angie.White@alaska.gov and no other report is required.

If the state ethics attorney disagrees with a reported determination, the attorney will advise the DES of that finding. If the ethics attorney finds that there was a violation, the member who committed the violation is not liable if he or she fully disclosed all relevant facts

reasonably necessary to the ethics supervisor's or commission's determination and acted consistent with the determination.

How Does A DES or Board or Commission Get Ethics Advice?

A DES or board or commission may make a **written request** to the Attorney General for an opinion regarding the application of the Ethics Act. In practice, the Attorney General, through the state ethics attorney, also provides **advice by phone or e-mail** to designated ethics supervisors, especially when time constraints prevent the preparation of timely written opinions.

- A request for advice and the advisory opinion are confidential.
- The ethics attorney endeavors to provide prompt assistance, although that may not always be possible.
- The DES must make his or her determination addressing the potential violation based on the opinion provided.

It is the obligation of each board or commission member, as well as the staff, to ensure that the public's business is conducted in a manner that is consistent with the standards set out in the Ethics Act. We hope this summary assists you in ensuring that your obligations are met.

- 1 The Act covers a board, commission, authority, or board of directors of a public or quasi-public corporation, established by statute in the executive branch of state government.
- 2 The governor has delegated the DES responsibility to Guy Bell, Administrative Director of the Office of the Governor.
- 3 You may supplement the disclosure form with other written explanation as necessary. Your signature on a disclosure certifies that, to the best of your knowledge, the statements made are true, correct and complete. False statements are punishable.
- 4 In most, but not all, situations, refraining from participation ensures that a violation of the Ethics Act does not occur. Abstention does not cure a conflict with respect to a significant direct personal or financial interest in a state grant, contract, lease or loan because the Ethics Act prohibition applies whether or not the public officer actually takes official action.
- 5 The chair must give a copy of the written determination to the disclosing member. There is a determination form available on the Department of Law's ethics web page. The ethics supervisor may also write a separate memorandum.
- 6 In this manner, a member's detailed personal and financial information may be protected from public disclosure.
- 7 When a matter of particular sensitivity is raised and the ramifications of continuing without an advisory opinion from the Attorney General may affect the validity of the board or commission's action, the members should consider tabling the matter so that an opinion may be obtained.

8 The DES provides a copy of the notice to the employee who is the subject of the notice and may seek input from the employee, his or her supervisor and others. The DES may seek advice from the Attorney General. A copy of the DES' written determination is provided to the subject employee and the complaining party. The DES submits a copy of both the notice and the determination to the Attorney General for review as part of the DES' quarterly report. If feasible, the DES shall reassign duties to cure a potential violation or direct divestiture or removal by the employee of the personal or financial interests giving rise to the potential violation.

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Item 5

- Investigative Report
 - Consent Agreement

Item 6

- Break

Item 7

- Public Comment

Public Comment:

The board chair shall open public comment. The time allotted for comment will be divided between all individuals signed in to give comment. The group will be told how much time each person will have to speak; the licensing examiner will keep track of the time and notify the individual when they have 1 minute left.

This is not the time for the board to respond to the comments. The board can choose to respond to any comments at the end of the comment period; they can choose to send a letter with their responses to the individual; or they can choose to not respond.

Item 8

- Sedation Regulations
 - Changes to 28.010 and 28.015
 - Approval of Course of Instruction
 - FAQ page

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Chapter 28. Board of Dental Examiners.

(Words in boldface and underlined indicate language being added; words [CAPITALIZED AND BRACKETED] indicate language being deleted. Complete new sections are not in boldface or underlined.)

12 AAC 28.010(e) is amended to read:

(e) In addition to meeting the requirements of (b) of this section, on or after March 1, 2019, a dentist who seeks to renew a permit to administer deep sedation or general anesthesia must

(1) during each biennial licensing period participate in four or more contact hours of continuing education that relates specifically to hands-on advanced airway management or general anesthesia; [IF THE PERMIT HOLDER PROVIDES ANESTHESIA FOR PATIENTS YOUNGER THAN 13 YEARS OF AGE, THE COURSE MUST BE A PEDIATRIC COURSE;]

(A) if the permit holder provides anesthesia for patients younger than 13 years of age, the course must be a pediatric course;

(B) if the permit holder provides anesthesia for patients older and younger than 13 years of age, at least four contact hours of continuing education must relate specifically to hands-on advanced airway management of patients older than 13 years of age, and at least four additional contact hours of continuing education must relate specifically to hands-on advanced airway management of patients younger than 13 years of age;

(2) during each biennial licensing period participate in eight contact hours of continuing education that focuses on one or more of the following:

(A) physical evaluation;

(B) medical emergencies;

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(C) monitoring and use of monitoring equipment;

(D) pharmacology of drugs and agents used in deep sedation and general anesthesia;

(3) complete at least 50 general anesthesia or deep sedation cases each biennial licensing period; and

(4) maintain continuing education records that can be audited, including course titles, instructors, dates attended, sponsors, and number of contact hours for each course[.]; and

(5) if seeking to renew a permit to administer general anesthesia or deep sedation to a patient younger than 13 years of age, a dentist must

(A) meet the requirements of this section; and

(B) provide documentation that **at least** (reason: doesn't have to be absolute) 20 of the 50 anesthesia or deep

sedation cases were **on** (reason: this is for renewal not initial training) ~~individually managed~~ patients younger than 13 years of age.

(Eff. 4/10/70, Register 34; am 5/29/98, Register 146; am 6/24/2012, Register 202; am

12/15/2013, Register 208; am 4/14/2018, Register 226; am ____/____/____, Register ____)

Authority: AS 08.01.065 AS 08.36.100 AS 08.36.234

AS 08.36.070 AS 08.36.110 AS 08.36.250

12 AAC 28.015(e) is amended to read:

(e) In addition to meeting the requirements of (d) and (g) of this section, an applicant for an initial permit to administer moderate sedation to a patient who is at least 13 years of age under this section must

(1) provide documentation that the applicant completed either

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(A) [1] training in moderate sedation consistent with the Guidelines for

Teaching Pain Control and Sedation to Dentists and Dental Students, as adopted by the

American Dental Association (ADA) House of Delegates, October 2016, adopted by

reference; the applicant must complete the training required under this paragraph while enrolled in

(i) a dental program accredited by the Commission on Dental

Accreditation (CODA) of the American Dental Association; or

(ii) a post-doctoral university or teaching hospital program; or

(B) [2] a board-approved continuing education course in sedation **under 28.026 of this section and (reason: added for clarification)**

consistent with the Guidelines for Teaching Pain Control and Sedation to Dentists and

Dental Students, adopted by reference in (1) of this subsection; the course must consist of

a minimum of 60 hours of instruction plus administration of sedation for at least 20

individually managed patients per participant to establish competency and clinical

experience in moderate sedation and management of a compromised airway; and

(2) Before administering moderate or minimal sedation to a patient younger

than 13 years of age, an applicant for an initial permit must

(A) provide proof that the applicant completed an additional 30 hours

of board-approved coursework in pediatric moderate sedation **under 28.027(b) of this section (reason: added for clarification); and**

(B) provide proof of administration of sedation for at least 20

individually managed patients younger than 13 years of age **while under the supervision of a sedation provider holding a current moderate or deep sedation permit in good standing for patients under 13**

years of age or a Certified Registered Nurse Anesthetist (CRNA) with a valid license under AS 08.68 and 12AAC 44 from the board of nursing.

12 AAC 28.015(f) is amended to read:

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(f) In addition to meeting the requirements of (d) and (g) of this section, an applicant for an initial permit to administer moderate or minimal sedation only to [A PATIENT] patients who are [IS] younger than 13 years of age under this section must provide [DOCUMENTATION

THAT THE APPLICANT HAS COMPLETED A COMMISSION ON DENTAL

ACCREDITATION (CODA) ACCREDITED RESIDENCY IN PEDIATRIC DENTISTRY AND (reason: add this back and remove reference to a CE course that does not exist. Prevents confusion. ~~OR~~

SUFFICIENT TRAINING IN PEDIATRIC MODERATE SEDATION AS DETERMINED BY

~~THE BOARD. THE APPLICANT MUST PROVIDE]~~ proof of administration of sedation for at

least 20 individually managed patients younger than 13 years of age to establish competency and clinical experience in management of a compromised airway, [-] ~~and provide documentation that the applicant has completed~~

~~(1) a Commission on Dental Accreditation (CODA) accredited residency in pediatric dentistry; or~~

~~(2) at least 60 hours of continuing education coursework in pediatric moderate sedation approved by the board.~~

12 AAC 28.015(h) is amended to read:

(h) In addition to meeting the requirements of (d) of this section, on or after March 1, 2019, a dentist who seeks to renew a permit to administer moderate or minimal sedation under this section must

(1) during each biennial licensing period participate in four or more contact hours

of continuing education that relates specifically to hands-on advanced airway management; [IF THE PERMIT HOLDER PROVIDES MODERATE OR MINIMAL SEDATION FOR PATIENTS YOUNGER THAN 13 YEARS OF AGE, THE COURSE MUST BE A

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PEDIATRIC COURSE;] contact hours earned from certification in health care provider basic life support (BLS), advanced cardiac life support (ACLS), and pediatric advanced life support (PALS) courses may be used to meet the continuing education requirements for obtaining or renewing a permit to administer moderate or minimal sedation under this section;

(A) if the permit holder provides moderate or minimal sedation for patients younger than 13 years of age, the course must be a pediatric course;

(B) if the permit holder provides moderate or minimal sedation for patients older and younger than 13 years of age, at least four contact hours of continuing education must relate specifically to hands-on advanced airway management of patients older than 13 years of age, and at least four additional contact hours of continuing education must relate specifically to hands-on advanced airway management of patients younger than 13 years of age;

(2) during each biennial licensing period participate in four contact hours of continuing education that focuses on one or more of the following:

(A) venipuncture;

(B) intravenous sedation;

(C) enteral sedation;

(D) physiology;

(E) pharmacology;

(F) nitrous oxide analgesia;

(G) patient evaluation, patient monitoring, or medical emergencies;

(3) complete at least 25 moderate sedation cases each biennial renewal period;

and

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(4) maintain continuing education records that can be audited, including course

titles, instructors, dates attended, sponsors, and number of contact hours for each course[.]; and

(5) if seeking to renew a permit to administer moderate or minimal sedation

to a patient younger than 13 years of age, a dentist must

(A) meet the requirements of this section;

(B) provide documentation that **at least** (reason: the number 10 is a minimum) 10 of the 25 moderate sedation cases

were **on** (reason: this is for renewal and not initial training) ~~individually managed~~ patients younger than 13 years of age.

12 AAC 28.015 is amended by adding a new subsection to read:

(j) After March 1, 2019, in order to provide moderate or minimal sedation to patients

younger than 13 years of age, a dentist who holds a **13 years or older** (reason: this would not be a requirement for someone with a current permit for under 13 years old only) moderate sedation permit must:

(1) provide proof of an additional 30 hours of board approved continuing

education in pediatric moderate sedation **under 28.027(b) of this section** (reason: for clarification); and

(2) provide proof of administration of sedation for at least 20 individually

managed patients younger than 13 years of age **while under the supervision of a sedation provider holding a current moderate or deep sedation permit in good standing for patients under 13 years of age or a Certified Registered Nurse Anesthetist (CRNA) with a valid license under AS 08.68 and 12AAC 44 from the board of nursing.**

12 AAC 28.015 is amended to read:

(k) [J] A dentist who has met the requirements of this section to administer moderate or minimal sedation to patients younger than 13 years of age will be issued a permit that so indicates.

(l) [K] A permit to administer moderate or minimal sedation under this section

(1) will be renewed when the dentist's license to practice is renewed if the dentist demonstrates continued compliance with AS 08.36 and this chapter; and

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(2) expires on the date the dentist's license expires.

(m) [L] For purposes of this section,

(1) one contact hour equals 50 minutes of instruction;

(2) one academic semester credit hour equals 15 contact hours;

(3) one academic quarter credit equals 10 contact hours; and

(4) one continuing education credit equals once contact hour.

(n) [M] Credit is given only for class hours and not hours devoted to class preparation.

(Eff. 4/14/2018, Register 226; am ____/____/____, Register ____)

Authority: AS 08.01.065 AS 08.36.100 AS 08.36.234

AS 08.36.070 AS 08.36.110 AS 08.36.250

12 AAC 28.060(d)(2) is repealed:

(d)(2) Repealed __/__/__. [SHALL CONTINUALLY MONITOR A PATIENT'S

HEART RATE, BLOOD PRESSURE, AND RESPIRATION USING

ELECTROCARDIOGRAPHIC MONITORING, PULSE OXIMETRY, A BLOOD PRESSURE

MONITORING DEVICE, AND A RESPIRATION MONITORING DEVICE;]

Chapter 28. Board of Dental Examiners.

(Words in **boldface and underlined** indicate language being added; words [CAPITALIZED AND BRACKETED] indicate language being deleted. Complete new sections are not in boldface or underlined.)

12 AAC 28 is amended by adding a new section to read;

12 AAC 28.025. Approval of course of instruction in moderate sedation, or minimal sedation of patients younger than 13 years of age. The board may upon its own motion or upon the request of any interested person, approve a course of instruction upon receipt of

(1) a completed form provided by the department that includes the name of the college or university if the course is completed through a residency program, or if the course is completed through a continuing education course, names of the sponsor, accredited program and faculty member presenting the course;

(2) a course outline that verifies inclusion of the subjects and procedures required under

(A) 12 AAC 28.026 if certification to administer moderate sedation only for patients 13 years of age and older is sought; and

(B) 12 AAC 28.027 if certification to administer moderate or minimal sedation for patients younger than 13 years of age is sought; and

(3) An explanation of the evaluation procedures used to determine successful completion of the course. (Eff. ____/____/____, Register ____)

Authority: AS 08.36.070

12 AAC 28 is amended by adding a new section to read;

12 AAC 28.026. Requirements for a continuing education course, or training in a postgraduate residency in moderate sedation for patients 13 years of age and older. (a) A continuing education course, or a dental training program for an initial permit in moderate sedation only for patients 13 years of age and older must meet the requirements of 12 AAC 28.015(e)(1), and must include:

- (1) certification of competence in moderate sedation techniques;
- (2) certification of competence in rescuing patients from a deeper level of sedation than intended including managing the airway, intravascular or intraosseous access, and reversal medications;
- (3) provision by course director or faculty of additional clinical experience if participant competency has not been achieved in time allotted; and
- (4) records of instruction and clinical experience that are maintained and available for participant review, including number of patients managed by each participant in each modality or route.

(b) A continuing education course for an initial permit in moderate sedation for patients 13 years of age and older under 12 AAC 28.015(e)(1)(B) must be certified by the American Dental Association (ADA) Continuing Education Recognition Program (CERP), or the Academy of General Dentistry (AGD) Program Approval for Continuing Education (PACE). (Eff.

_____/_____/_____, Register _____)

Authority: AS 08.36.070

12 AAC 28 is amended by adding a new section to read;

12 AAC 28.027. Requirements for continuing education courses in moderate sedation, or minimal sedation for patients younger than 13 years of age. (a) A dentist who applies for a designation to sedate patients younger than 13 years of age on their initial moderate permit under 12 AAC 28.015(e)(2) or on their existing moderate permit under 12 ACC 28.015(j), must complete an additional 30 hours of continuing education under (b) of this section, and provide proof of administration of sedation of at least 20 individually managed cases of children younger than 13 years of age, while under the supervision of a sedation provider holding a current moderate or deep sedation permit in good standing for patients younger than 13 years of age or a certified registered nurse anesthetist (CRNA) with a valid license under AS 08.68 and 12 AAC 44 from the Board of Nursing.

(b) Continuing education coursework under (a) of this section must be certified by the American Dental Association (ADA) Continuing Education Recognition Program (CERP), the Academy of General Dentistry (AGD) Program Approval for Continuing Education (PACE), or the American Academy of Pediatric Dentistry (AAPD), or offered by other organizations approved by the board including, the American Dental Society of Anesthesiology (ADSA) and the Society for Pediatric Sedation (SPS). Course titles and outlines must be provided to the board and must include the following subject areas:

- (1) physical, psychological and social child development, and age appropriate behavior response;
- (2) principles and objectives of sedation and general anesthesia as behavior guidance techniques in children, and indication and contraindications for sedatives and their use;
- (3) prevention, recognition, treatment and management of pharmacological related emergencies in pediatric patients, and rescuing a child from a deeper level of sedation

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than intended;

(4) pre-operative evaluation and risk assessment of the pediatric patient;

(5) assessing the effects of pharmacologic agents on the pediatric patient;

(6) at least three hours of hands on simulated airway management specific to the pediatric patient;

(7) pediatric patient monitoring; and

(8) recovery room management and pediatric post-operative appraisal and follow up. (Eff. ____/____/____, Register ____)

Authority: AS 08.36.070

Regulation Changes Questionnaire

Division/Board: Board of Dental Examiners **Meeting Date:** 11/9/18

Regulation change being proposed: 12 AAC 28.025

General top of the regulation: Approval of course of instruction in moderate sedation, or mii

This worksheet is designed to help the board think through an anticipated regulations project. Staff will provide this worksheet to the board at the time a regulations project is being approved for public notice. This information will be used to develop a FAQ to be posted on the board's web page to help the public understand the project. Staff will submit the completed worksheet with the draft board minutes to the Regulations Specialist within 10 days of the meeting and provide a copy to the supervisor. Appropriate staff will be assigned to complete this worksheet if a division regulation. **NOTE: Use a separate worksheet for each section being proposed.**

1. Is the new regulation needed to comply with new legislation or federal law?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If yes, effective date of new statute/federal law: _____	
<i>(If appropriate, ensure the new regulation is in line with federal requirements prior to initiating a regulation project.)</i>	
2. Does the change add a new license type?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If yes:	
Does it affect current licensees?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do current licensees/non-licensees already perform the service for which the new license type is required?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is there a grace period or date explicitly included in the regulation to allow for a transition period?	Yes <input type="checkbox"/> No <input type="checkbox"/>
3. Does it change the qualifications or requirements of an existing license?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If yes, does it affect current licensees?	
Yes <input type="checkbox"/> No <input type="checkbox"/>	
4. Does it affect continuing education/competency requirements?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
If yes:	
Does it add additional requirements or hours?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Does it clarify existing regulations?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Is there an effective date in the future to give licensees time to comply?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
5. Is it a fee change or does it create a new fee?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If yes:	
Does it move fees in the centralized regulations to a new number, therefore affecting other program regulations?	Yes <input type="checkbox"/> No <input type="checkbox"/>
6. Does it make changes to the requirements of licensees?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
If yes:	
All licensees	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Certain licensees (List: <u>Those licensees applying for a moderate sedation permit to</u>)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Initial licensees	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
7. In addition to interested parties, who should receive the public notice? (All licensees or certain license types?)	
Any licensee who wishes to determine whether a residency or the continuing education coursework they plan to take or have taken will qualify them for their desired moderate sedation permit type. All licensees should probably receive the public notice.	

<p>8. In addition to the 30-day minimum written notice, does the board request a public hearing? If yes, when and where.</p> <p>Not for this section.</p>
<p>9. What will the regulation do?</p> <p>This section clarifies what will be required in order to apply for any one of three different moderate sedation permits. It shows which section to reference for educational requirements and course approval perimeters for the three available moderate sedation permit categories.</p>
<p>10. What is the demonstrated public need or purpose of this regulation?</p> <p>There has been some confusion as to what the board considers sufficient training when it comes to the sedation of children under 13 years of age. This section takes a step towards clarifying that confusion. The desire to strengthen educational training requirements for sedation in the dental office overall has been a goal of the board for some time.</p>
<p>11. What is the known or estimated cost of the new regulation to a private person, another agency, or a municipality (see Step 3 of the <i>Steps in the Regulation Process...</i>)?</p> <p>There will be no additional cost to a private person or agency as this new section does not create a new permit type. Some of the new training requirements will cause an additional cost for any licensee wishing to either add an under 13 designation to their adult moderate sedation permit or get a moderate sedation permit for under 13 years of age only.</p>
<p>12. What <u>positive</u> consequences may this regulation have on public or private people, businesses, or organizations?</p> <p>This regulation will simply help dentists who want to apply for certain moderate sedation permit types know where to look for more specific training requirements. It will indirectly have a positive consequence on the general public by helping dentists understand what they need to do in order to qualify for the particular moderate sedation permit they seek.</p>
<p>13. What <u>negative</u> consequences may this regulation have on public or private people, business, or organizations?</p> <p>This regulation section will not have a negative consequence on the public as it simply provides clarification for licensees about requirements for different moderate sedation permits and where to look for training requirements.</p>
<p>14. If any <u>negative</u> consequences, please address the reasons why the public need for this change outweighs the negative impact.</p> <p>There is nothing negative with this section of proposed regulation with respect to the general public.</p>
<p>15. List any additional questions or comments that may arise from the public during the comment period. Include a response to the questions.</p> <p>1) Is it necessary to have a residency that includes moderate sedation training or a moderate sedation continuing education course be approved by the board prior to entering the residency or taking the sedation course? Answer: No, not always. Pediatric residencies accredited by CODA, other post graduate residencies or continuing education courses that offer moderate sedation training consistent with current ADA guidelines and are CODA accredited, CERP, PACE or AGD certified will likely qualify . However, if you are unsure if a course or residency will qualify it is best to ask the board for an opinion prior to taking the course. *Remember, oral conscious sedation courses that are less than the required 60 hours of didactic training</p>
<p>16. What type of notification outlining the changes will be required once the regulation is adopted? Check appropriate boxes.</p> <p style="text-align: center;"> FAQ on website <input checked="" type="checkbox"/> Email to licensees <input type="checkbox"/> Letter to licensees <input checked="" type="checkbox"/> </p>

Staff submitting this worksheet: _____ Date submitted to Regulations Specialist: _____

Regulation Changes Questionnaire

Division/Board: Board of Dental Examiners **Meeting Date:** 11/9/18

Regulation change being proposed: 12 AAC 28.026

General top of the regulation: Requirements for course of instruction in moderate sedation

This worksheet is designed to help the board think through an anticipated regulations project. Staff will provide this worksheet to the board at the time a regulations project is being approved for public notice. This information will be used to develop a FAQ to be posted on the board's web page to help the public understand the project. Staff will submit the completed worksheet with the draft board minutes to the Regulations Specialist within 10 days of the meeting and provide a copy to the supervisor. Appropriate staff will be assigned to complete this worksheet if a division regulation. **NOTE: Use a separate worksheet for each section being proposed.**

1. Is the new regulation needed to comply with new legislation or federal law? If yes, effective date of new statute/federal law: _____ <i>(If appropriate, ensure the new regulation is in line with federal requirements prior to initiating a regulation project.)</i>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
2. Does the change add a new license type? If yes: Does it affect current licensees? Do current licensees/non-licensees already perform the service for which the new license type is required? Is there a grace period or date explicitly included in the regulation to allow for a transition period?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>
3. Does it change the qualifications or requirements of an existing license? If yes, does it affect current licensees?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>
4. Does it affect continuing education/competency requirements? If yes: Does it add additional requirements or hours? Does it clarify existing regulations? Is there an effective date in the future to give licensees time to comply?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
5. Is it a fee change or does it create a new fee? If yes: Does it move fees in the centralized regulations to a new number, therefore affecting other program regulations?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>
6. Does it make changes to the requirements of licensees? If yes: All licensees Certain licensees (List: _____) Initial licensees	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>
7. In addition to interested parties, who should receive the public notice? (All licensees or certain license types?) All licensees should receive public notice since this regulation can apply to anyone who desires to work towards getting a moderate sedation permit for the 13 and over age group. Although, this section only clarifies existing requirements already in place for this particular permit type.	

<p>8. In addition to the 30-day minimum written notice, does the board request a public hearing? If yes, when and where.</p> <p>Not for this section.</p>
<p>9. What will the regulation do?</p> <p>This section simply clarifies topics and requirements that must be included in any residency or continuing education course in order to be approved by the board for a 13 and older moderate sedation permit. The section basically lists the requirements that are necessary to bring training into compliance with the current ADA guidelines for adult moderate sedation.</p>
<p>10. What is the demonstrated public need or purpose of this regulation?</p> <p>This section does not have a direct effect on public need other than to help ensure strong moderate sedation training requirements for dental providers. The purpose of this section is to help clear up confusion and/or give licensees a guideline as to what coursework is required to get a moderate sedation permit for the 13 and older age group.</p>
<p>11. What is the known or estimated cost of the new regulation to a private person, another agency, or a municipality (see Step 3 of the <i>Steps in the Regulation Process...</i>)?</p> <p>No new additional cost above what is already in current regulations regarding moderate sedation permitting.</p>
<p>12. What <u>positive</u> consequences may this regulation have on public or private people, businesses, or organizations?</p> <p>The only positive consequence of this section will be to give licensees a more clear idea of the requirements necessary for moderate sedation permit for the 13 and older age group.</p>
<p>13. What <u>negative</u> consequences may this regulation have on public or private people, business, or organizations?</p> <p>There are no negative consequences of this section because it is for clarification purposes mainly.</p>
<p>14. If any <u>negative</u> consequences, please address the reasons why the public need for this change outweighs the negative impact.</p> <p>Not applicable</p>
<p>15. List any additional questions or comments that may arise from the public during the comment period. Include a response to the questions.</p> <p>1) Is it necessary to have a residency that includes adult moderate sedation training or an adult moderate sedation continuing education course approved by the board prior to entering the residency or taking the sedation course? Answer: No, not always. Post graduate residencies or continuing education courses that offer adult moderate sedation training consistent with current ADA guidelines and are CODA accredited, CERP, PACE or AGD certified will likely qualify. However, if you are unsure if a course or residency will qualify it is best to ask the board for an opinion prior to taking the course.</p>
<p>16. What type of notification outlining the changes will be required once the regulation is adopted? Check appropriate boxes.</p> <div style="display: flex; justify-content: space-around; margin-top: 10px;"> FAQ on website <input checked="" type="checkbox"/> Email to licensees <input type="checkbox"/> Letter to licensees <input checked="" type="checkbox"/> </div>

Staff submitting this worksheet: _____ Date submitted to Regulations Specialist: _____

Regulation Changes Questionnaire

Division/Board: Board of Dental Examiners **Meeting Date:** 11/9/18

Regulation change being proposed: 12 AAC 28.027

General top of the regulation: Requirements for course of instruction in moderate or minim

This worksheet is designed to help the board think through an anticipated regulations project. Staff will provide this worksheet to the board at the time a regulations project is being approved for public notice. This information will be used to develop a FAQ to be posted on the board's web page to help the public understand the project. Staff will submit the completed worksheet with the draft board minutes to the Regulations Specialist within 10 days of the meeting and provide a copy to the supervisor. Appropriate staff will be assigned to complete this worksheet if a division regulation. **NOTE: Use a separate worksheet for each section being proposed.**

1. Is the new regulation needed to comply with new legislation or federal law? If yes, effective date of new statute/federal law: _____ <i>(If appropriate, ensure the new regulation is in line with federal requirements prior to initiating a regulation project.)</i>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
2. Does the change add a new license type? If yes: Does it affect current licensees? Do current licensees/non-licensees already perform the service for which the new license type is required? Is there a grace period or date explicitly included in the regulation to allow for a transition period?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>
3. Does it change the qualifications or requirements of an existing license? If yes, does it affect current licensees?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>
4. Does it affect continuing education/competency requirements? If yes: Does it add additional requirements or hours? Does it clarify existing regulations? Is there an effective date in the future to give licensees time to comply?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
5. Is it a fee change or does it create a new fee? If yes: Does it move fees in the centralized regulations to a new number, therefore affecting other program regulations?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>
6. Does it make changes to the requirements of licensees? If yes: All licensees Certain licensees (List: <u>Any licensee who has not graduated from a pediatric</u>) Initial licensees	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
7. In addition to interested parties, who should receive the public notice? (All licensees or certain license types?) This section sets forth requirements that the board will use to approve continuing education courses that train enrollees in pediatric moderate sedation. Any licensee who is considering this permit type may have a comment on this section. Therefore, all licensees should receive the public notice.	

<p>8. In addition to the 30-day minimum written notice, does the board request a public hearing? If yes, when and where.</p> <p>Not in this case.</p>
<p>9. What will the regulation do?</p> <p>This section will set forth requirements that the board will use to evaluate continuing education courses for approval that train enrollees in pediatric moderate sedation . The requirements under this new section mirror those found in the section dealing with courses in adult moderate sedation that are currently available and consistent with the ADA guidelines, although there are no ADA guidelines specifically for pediatric moderate sedation training.</p>
<p>10. What is the demonstrated public need or purpose of this regulation?</p> <p>This regulation should further strengthen the qualifications of dentists who choose to sedate children under 13 years of age in the dental office. When the public brings a child to the dental office to be sedate for treatment, they should be confident the dental provider is competent to handle any complication that may arise. These requirements will ensure that any dentist sedating children with any drug or agent other than nitrous oxide alone will have extra training to do so.</p>
<p>11. What is the known or estimated cost of the new regulation to a private person, another agency, or a municipality (see Step 3 of the <i>Steps in the Regulation Process...</i>)?</p> <p>There will be no direct additional cost to a private person or another agency. The cost of the training, if under taken, would be born by the dental licensee who receives the training. The permit type already exists.</p>
<p>12. What <u>positive</u> consequences may this regulation have on public or private people, businesses, or organizations?</p> <p>Safe in office sedation of children is of paramount importance. This section will add training requirements required for dentists who have not graduated from a pediatric residency and who want a permit to sedate children in their office. This is a positive step towards helping to ensure the sedation of children is done safely.</p>
<p>13. What <u>negative</u> consequences may this regulation have on public or private people, business, or organizations?</p> <p>This regulation may tend to have a negative impact by reducing the total number of dental providers who are permitted or allowed to sedate children under 13 years of age with any drug other nitrous oxide alone in the dental office. This could decrease access to certain types of in office sedation for children who can not be treated using traditional management techniques and nitrous oxide. It is the boards opinion that these traditional management techniques have become underutilized in favor of sedation with drugs.</p>
<p>14. If any <u>negative</u> consequences, please address the reasons why the public need for this change outweighs the negative impact.</p> <p>It is the board's opinion that the need to provide safe in office sedation outweighs a possible decrease in access to care for some children. The board believes continuing education coursework specific to the sedation of children is critical in order to qualify for an under 13 years of age moderate sedation permit. If a licensee wishes to obtain a moderate sedation permit of this type only without graduating from a pediatric residency, the board feels the course should at least be equivalent to the training required for an adult moderate permit.</p>
<p>15. List any additional questions or comments that may arise from the public during the comment period. Include a response to the questions.</p> <p>1) Where can I find a continuing education course that is the required 60 hours of instruction and 20 individually managed patients that focuses on the age group of under 13 years old? Answer: At this time there are no available courses offered in the United States that meet all the requirements described in this section. As of now, this is not a viable pathway to receive an under 13 year old only moderate permit. However, there may soon be available course that do qualify and the board is allowing a regulation to be put in lace for when that day comes.</p> <p>2) What are my options if I want to receive a permit that allows me to sedate children with an oral drug in addition to or in place of</p>
<p>16. What type of notification outlining the changes will be required once the regulation is adopted? Check appropriate boxes.</p> <p> FAQ on website <input checked="" type="checkbox"/> Email to licensees <input type="checkbox"/> Letter to licensees <input checked="" type="checkbox"/> </p>

Staff submitting this worksheet: _____ Date submitted to Regulations Specialist: _____

Regulation Changes Questionnaire

Division/Board: Board of Dental Examiners Meeting Date: 11/9/18

Regulation change being proposed: 12 AAC 12.028

General top of the regulation: Permit holders of moderate sedation for patients 13 years of

This worksheet is designed to help the board think through an anticipated regulations project. Staff will provide this worksheet to the board at the time a regulations project is being approved for public notice. This information will be used to develop a FAQ to be posted on the board's web page to help the public understand the project. Staff will submit the completed worksheet with the draft board minutes to the Regulations Specialist within 10 days of the meeting and provide a copy to the supervisor. Appropriate staff will be assigned to complete this worksheet if a division regulation. **NOTE: Use a separate worksheet for each section being proposed.**

1. Is the new regulation needed to comply with new legislation or federal law?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If yes, effective date of new statute/federal law: _____	
<i>(If appropriate, ensure the new regulation is in line with federal requirements prior to initiating a regulation project.)</i>	
2. Does the change add a new license type?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If yes:	
Does it affect current licensees?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do current licensees/non-licensees already perform the service for which the new license type is required?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is there a grace period or date explicitly included in the regulation to allow for a transition period?	Yes <input type="checkbox"/> No <input type="checkbox"/>
3. Does it change the qualifications or requirements of an existing license?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If yes, does it affect current licensees?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
4. Does it affect continuing education/competency requirements?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
If yes:	
Does it add additional requirements or hours?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Does it clarify existing regulations?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Is there an effective date in the future to give licensees time to comply?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
5. Is it a fee change or does it create a new fee?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
If yes:	
Does it move fees in the centralized regulations to a new number, therefore affecting other program regulations?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
6. Does it make changes to the requirements of licensees?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
If yes:	
All licensees	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Certain licensees (List: <u>Licensees who already have an existing moderate sedation</u>)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Initial licensees	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
7. In addition to interested parties, who should receive the public notice? (All licensees or certain license types?)	
This section will apply to any licensee considering training required to apply for a moderate sedation permit for all age groups or wanting to add an under 13 years of age designation to their current moderate permit. This will be of particular interest to anyone wanting to add the designation to an existing permit as there is an effective date of March 1, 2019 at which time they will no longer be able to sedate the under 13 age group with any drug other than nitrous oxide. Send to all licensees.	

<p>8. In addition to the 30-day minimum written notice, does the board request a public hearing? If yes, when and where.</p> <p>Not for this section.</p>
<p>9. What will the regulation do?</p> <p>This regulation section will clarify the course topic requirements that must be covered in the 30 hours of additional training needed to either add an under 13 years of age designation to an existing moderate sedation permit or must be included along with an application for a 13 and older moderate sedation permit if the applicant wants to sedate all age groups.</p>
<p>10. What is the demonstrated public need or purpose of this regulation?</p> <p>Sedating children is not like sedating small adults. It is the board's opinion that extra training focusing on the sedation of children should be required to supplement the training licensees receive during a normal adult moderate sedation curriculum. This regulation section will help ensure dentists who also choose to sedate children in the dental office will be more familiar with differences in sedating both age groups. This should help increase public safety.</p>
<p>11. What is the known or estimated cost of the new regulation to a private person, another agency, or a municipality (see Step 3 of the <i>Steps in the Regulation Process...</i>)?</p> <p>Only additional cost to comply with this regulation will be born by the licensee for the training involved. The department, however, may need to come up with a fee associated with adding an under 13 designation to an existing moderate sedation permit.</p>
<p>12. What <u>positive</u> consequences may this regulation have on public or private people, businesses, or organizations?</p> <p>The board believes extra coursework specific to the sedation of children is warranted in order to add an under 13 designation to a moderate sedation permit. This regulation section will help ensure dentists who choose to sedate children in the dental office will be better trained to do so. The section will also clarify what type of course work should be included in the training.</p>
<p>13. What <u>negative</u> consequences may this regulation have on public or private people, business, or organizations?</p> <p>This section should not have any negative consequences as it simply helps clarify how a licensee can go about adding an under 13 year old designation to a moderate sedation permit.</p>
<p>14. If any <u>negative</u> consequences, please address the reasons why the public need for this change outweighs the negative impact.</p> <p>This question does not apply.</p>
<p>15. List any additional questions or comments that may arise from the public during the comment period. Include a response to the questions.</p> <p>1) How did the board arrive at the topics that must be covered under this section? Answer: The topics relating to the sedation of children in this section were taken directly from the requirements a pediatric residency must meet in order to be accredited by CODA. 2) Where can I find courses that cover these topics? Answer: Coursework can be offered anywhere but should be CERP, PACE, ADA or AAPD certified or be offered by other organizations approved by the board. Examples may include the American Dental Society of Anesthesiology (ADSA) and the Society for Pediatric Sedation. 3) Who is responsible for determining if all the topics required are covered? Answer: It will up to the applicant to make sure the</p>
<p>16. What type of notification outlining the changes will be required once the regulation is adopted? Check appropriate boxes.</p> <p>FAQ on website <input checked="" type="checkbox"/> Email to licensees <input type="checkbox"/> Letter to licensees <input checked="" type="checkbox"/></p>

Staff submitting this worksheet: _____ Date submitted to Regulations Specialist: _____

Item 9

- Lunch

Item 10

- Division Update

Department of Commerce Community, and Economic Development
Corporations, Business and Professional Licensing

Board of Dental Examiners
Schedule of Revenues and Expenditures

	FY 12		FY 13		FY 14		FY 15		FY16		FY17		FY18	
Licensing Revenue	\$	56,206	\$	389,729	\$	75,095	\$	479,846	\$	103,201	\$	686,060	\$	179,011
Allowable Third Party Reimbursement		-		-		-		-		-		-		-
Total Revenue		56,206		389,729		75,095		479,846		103,201		686,060		179,011
Direct Expenditures														
Personal Services		118,947		176,988		154,086		116,909		132,528		167,345		164,638
Travel		22,787		16,471		12,796		14,040		8,138		5,286		9,189
Contractual		17,235		128,666		105,918		55,437		17,491		61,412		50,681
Supplies		1,483		1,491		525		1,102		427		846		493
Equipment		-		-		-		-		-		-		-
Total Direct Expenditures		160,452		323,616		273,325		187,488		158,584		234,889		225,001
Indirect Expenditures*		122,053		150,253		108,227		90,087		102,251		186,587		188,796
Total Expenses		282,505		473,869		381,552		277,575		260,835		421,476		413,797
Annual Surplus (Deficit)		(226,299)		(84,140)		(306,457)		202,271		(157,634)		264,584		(234,786)
Beginning Cumulative Surplus (Deficit)		490,477		264,178		180,038		(126,419)		75,852		(81,782)		182,802
Ending Cumulative Surplus (Deficit)	\$	264,178	\$	180,038	\$	(126,419)	\$	75,852	\$	(81,782)	\$	182,802	\$	(51,984)

The 4th quarter board reports reflect the current year's actual indirect expenses allocated to the boards.

Appropriation	(All)
Activity Code	DEN1

Sum of Expenditures	Column Labels			
	1000 - Personal Services	2000 - Travel	3000 - Services	4000 - Commodities
Row Labels				
1011 - Regular Compensation	78,415.88			
1014 - Overtime	44.95			
1023 - Leave Taken	8,530.24			
1028 - Alaska Supplemental Benefit	5,341.98			
1029 - Public Employee's Retirement System Defined Benefits	9,398.16			
1030 - Public Employee's Retirement System Defined Contribution	2,284.91			
1034 - Public Employee's Retirement System Defined Cont Health Reim	1,973.94			
1035 - Public Employee's Retirement Sys Defined Cont Retiree Medical	456.19			
1037 - Public Employee's Retirement Sys Defined Benefit Unfnd Liab	5,027.36			
1039 - Unemployment Insurance	236.05			
1040 - Group Health Insurance	26,117.40			
1041 - Basic Life and Travel	38.51			
1042 - Worker's Compensation Insurance	791.64			
1047 - Leave Cash In Employer Charge	2,008.63			
1048 - Terminal Leave Employer Charge	1,121.67			
1053 - Medicare Tax	1,196.28			
1069 - SU Business Leave Bank Contributions	14.67			
1077 - ASEA Legal Trust	133.02			
1079 - ASEA Injury Leave Usage	11.94			
1080 - SU Legal Trst	27.87			
1970 - Personal Services Transfer	21,468.09			
2000 - In-State Employee Airfare		1,578.17		
2001 - In-State Employee Surface Transportation		85.27		
2002 - In-State Employee Lodging		284.00		
2003 - In-State Employee Meals and Incidentals		225.00		
2005 - In-State Non-Employee Airfare		1,345.41		
2007 - In-State Non-Employee Lodging		375.00		
2008 - In-State Non-Employee Meals and Incidentals		765.00		
2009 - In-State Non-Employee Taxable Per Diem		390.00		
2010 - In-State Non-Employee Non-Taxable Reimbursement		969.16		
2020 - Out-State Non-Employee Meals and Incidentals		562.50		
2022 - Out-State Non-Employee Non-Taxable Reimbursement		2,609.01		
3002 - Memberships			5,385.00	
3023 - Expert Witness			14,800.00	
3035 - Long Distance			383.99	
3044 - Courier			26.77	
3045 - Postage			227.00	
3046 - Advertising			812.75	
3057 - Structure, Infrastructure and Land - Rentals/Leases			120.91	
3067 - Honorariums/Stipend			80.00	
3069 - Commission Sales			93.00	
3088 - Inter-Agency Legal			25,864.14	
3094 - Inter-Agency Hearing/Mediation			1,264.00	
4001 - Equipment/Furniture/Tools/Vehicles				13.56
4002 - Business Supplies				89.47
4005 - Subscriptions				380.00
4006 - I/A Commodity Purchases				10.00
3085 - Inter-Agency Mail			1,623.00	
Grand Total	164,639.38	9,188.52	50,680.56	493.03

FY 2018 CBPL COST ALLOCATIONS

Name	Activity Code	Direct Revenues	3rd Party Reimbursement	Total Revenues	Direct Expense	Percentage of board licenses/total licensees:	Division receipting personal services by transaction %:	Department Personal Services - Fiscal Revenue personal services by transaction %	Indirect Expense (Total Non-PCN Allocated)	Percentage of direct personal services:	Total Indirect Expenses	Total Expenses	2018 Annual Surplus (Deficit)
Acupuncture	ACU1	\$ 4,875	\$ -	\$ 4,875	\$ 6,772	\$ 2,955	\$ 342	\$ 259	\$ 3,556	2,387	\$ 5,943	\$ 12,715	\$ (7,840)
Architects, Engineer	AEL1	\$ 909,305	\$ 13,692	\$ 922,997	\$ 365,518	\$ 183,868	\$ 20,083	\$ 4,202	\$ 208,153	110,051	\$ 318,204	\$ 683,722	\$ 239,275
Athletic Trainers	ATH1	\$ 15,965	\$ -	\$ 15,965	\$ 1,934	\$ 1,083	\$ 135	\$ 309	\$ 1,527	726	\$ 2,253	\$ 4,187	\$ 11,778
Audiology/Speech Pathologists	AUD1	\$ 37,685	\$ -	\$ 37,685	\$ 33,745	\$ 19,195	\$ 2,921	\$ 1,364	\$ 23,480	12,577	\$ 36,057	\$ 69,802	\$ (32,117)
Barbers & Hairdressers	BAH1	\$ 1,210,958	\$ -	\$ 1,210,958	\$ 370,573	\$ 192,033	\$ 27,986	\$ 9,220	\$ 229,239	113,491	\$ 342,730	\$ 713,303	\$ 497,655
Behavior Analysts	BEV1	\$ 7,815	\$ -	\$ 7,815	\$ 4,167	\$ 1,286	\$ 176	\$ 169	\$ 1,631	1,118	\$ 2,749	\$ 6,916	\$ 899
Chiropractors	CHI1	\$ 36,390	\$ 505	\$ 36,895	\$ 87,493	\$ 8,548	\$ 1,719	\$ 1,065	\$ 11,332	22,375	\$ 33,707	\$ 121,200	\$ (84,305)
Collection Agencies	COA1	\$ 152,230	\$ -	\$ 152,230	\$ 29,563	\$ 20,954	\$ 2,134	\$ 1,125	\$ 24,213	9,571	\$ 33,784	\$ 63,347	\$ 88,883
Concert Promoters	CPR1	\$ 1,205	\$ -	\$ 1,205	\$ 874	\$ 519	\$ 114	\$ 110	\$ 743	338	\$ 1,081	\$ 1,955	\$ (750)
Construction Contractors	CON1	\$ 895,543	\$ -	\$ 895,543	\$ 614,413	\$ 221,512	\$ 24,133	\$ 6,233	\$ 251,878	119,600	\$ 371,478	\$ 985,891	\$ (90,348)
Home Inspectors	HIN1	\$ 21,035	\$ -	\$ 21,035	\$ 6,630	\$ 2,819	\$ 155	\$ 428	\$ 3,402	2,497	\$ 5,899	\$ 12,529	\$ 8,506
Dental	DEN1	\$ 179,011	\$ -	\$ 179,011	\$ 225,001	\$ 116,023	\$ 7,934	\$ 2,380	\$ 126,337	62,459	\$ 188,796	\$ 413,797	\$ (234,786)
Dietitians/Nutritionists	DTN1	\$ 34,685	\$ -	\$ 34,685	\$ 5,527	\$ 7,037	\$ 766	\$ 1,215	\$ 9,018	2,009	\$ 11,027	\$ 16,554	\$ 18,131
Direct Entry Midwife	MID1	\$ 24,565	\$ -	\$ 24,565	\$ 17,315	\$ 1,376	\$ 217	\$ 149	\$ 1,742	5,322	\$ 7,064	\$ 24,379	\$ 186
Dispensing Opticians	DOP1	\$ 8,465	\$ -	\$ 8,465	\$ 18,731	\$ 4,759	\$ 549	\$ 319	\$ 5,627	7,093	\$ 12,720	\$ 31,451	\$ (22,986)
Electrical Administrator	EAD1	\$ 183,575	\$ -	\$ 183,575	\$ 60,636	\$ 23,457	\$ 3,905	\$ 2,529	\$ 29,891	10,066	\$ 39,957	\$ 100,593	\$ 82,982
Euthanasia Services	EUT1	\$ 125	\$ -	\$ 125	\$ 76	\$ 338	\$ 31	\$ 60	\$ 429	29	\$ 458	\$ 534	\$ (409)
Geologists	GEO1	\$ 920	\$ -	\$ 920	\$ 1,011	\$ 316	\$ 197	\$ 179	\$ 692	369	\$ 1,061	\$ 2,072	\$ (1,152)
Guardians/Conservators	GCO1	\$ 2,688	\$ -	\$ 2,688	\$ 1,733	\$ 383	\$ 41	\$ 50	\$ 474	621	\$ 1,095	\$ 2,828	\$ (140)
Guide-Outfitters	GUI1	\$ 1,122,760	\$ -	\$ 1,122,760	\$ 378,702	\$ 39,020	\$ 14,428	\$ 4,879	\$ 58,327	84,045	\$ 142,372	\$ 521,074	\$ 601,686
Marine Pilots	MAR1	\$ 6,100	\$ -	\$ 6,100	\$ 103,406	\$ 3,428	\$ 207	\$ 110	\$ 3,745	32,195	\$ 35,940	\$ 139,346	\$ (133,246)
Foreign Pleasure Craft	FPC1	\$ 85,050	\$ -	\$ 85,050	\$ 7,520	\$ -	\$ 259	\$ 110	\$ 369	2,850	\$ 3,219	\$ 10,739	\$ 74,311
Marital & Family Therapy	MFT1	\$ 7,975	\$ -	\$ 7,975	\$ 46,122	\$ 2,346	\$ 269	\$ 259	\$ 2,874	14,232	\$ 17,106	\$ 63,228	\$ (55,253)
Massage Therapists	MAS1	\$ 346,505	\$ 1,161	\$ 347,666	\$ 275,296	\$ 33,787	\$ 10,627	\$ 4,212	\$ 48,626	57,328	\$ 105,954	\$ 381,250	\$ (33,584)
Mechanical Administrator	MEC1	\$ 140,540	\$ -	\$ 140,540	\$ 42,623	\$ 14,728	\$ 2,393	\$ 1,952	\$ 19,073	8,258	\$ 27,331	\$ 69,954	\$ 70,586
Medical	MED1	\$ 347,304	\$ 3,517	\$ 350,821	\$ 835,051	\$ 160,997	\$ 23,957	\$ 4,431	\$ 189,385	265,121	\$ 454,506	\$ 1,289,557	\$ (938,736)
Mortuary Science	MOR1	\$ 3,525	\$ -	\$ 3,525	\$ 4,617	\$ 3,564	\$ 269	\$ 239	\$ 4,072	1,644	\$ 5,716	\$ 10,333	\$ (6,808)
Naturopaths	NAT1	\$ 77,640	\$ -	\$ 77,640	\$ 16,825	\$ 1,218	\$ 207	\$ 239	\$ 1,664	1,741	\$ 3,405	\$ 20,230	\$ 57,410
Nurse Aides	NUA1	\$ 416,180	\$ -	\$ 416,180	\$ 291,375	\$ 99,940	\$ 17,318	\$ 3,735	\$ 120,993	68,460	\$ 189,453	\$ 480,828	\$ (64,648)
Nursing	NUR1	\$ 814,178	\$ 1,666	\$ 815,844	\$ 1,213,025	\$ 440,702	\$ 43,221	\$ 9,648	\$ 493,571	336,688	\$ 830,259	\$ 2,043,284	\$ (1,227,440)
Nursing Home Administrators	NHA1	\$ 1,740	\$ 131	\$ 1,871	\$ 7,888	\$ 1,308	\$ 124	\$ 60	\$ 1,492	1,685	\$ 3,177	\$ 11,065	\$ (9,194)
Optometry	OPT1	\$ 8,900	\$ 1,000	\$ 9,900	\$ 78,027	\$ 4,962	\$ 383	\$ 249	\$ 5,594	24,519	\$ 30,113	\$ 108,140	\$ (98,240)
Pawnbrokers	PAW1	\$ 20,300	\$ -	\$ 20,300	\$ 865	\$ 744	\$ 73	\$ 229	\$ 1,046	322	\$ 1,368	\$ 2,233	\$ 18,067
Pharmacy	PHA1	\$ 801,317	\$ 210	\$ 801,527	\$ 309,070	\$ 128,112	\$ 24,071	\$ 3,774	\$ 155,957	103,723	\$ 259,680	\$ 568,750	\$ 232,777
Physical/Occupational Therapy	PHY1	\$ 405,168	\$ 1,064	\$ 406,232	\$ 119,083	\$ 46,035	\$ 7,675	\$ 2,937	\$ 56,647	41,206	\$ 97,853	\$ 216,936	\$ 189,296
Professional Counselors	PCO1	\$ 345,905	\$ 246	\$ 346,151	\$ 94,113	\$ 18,540	\$ 3,221	\$ 2,509	\$ 24,270	28,620	\$ 52,890	\$ 147,003	\$ 199,148
Psychology	PSY1	\$ 17,080	\$ 1,017	\$ 18,097	\$ 72,032	\$ 6,541	\$ 829	\$ 587	\$ 7,957	18,943	\$ 26,900	\$ 98,932	\$ (80,835)
Public Accountancy	CPA1	\$ 730,935	\$ 6,580	\$ 737,515	\$ 265,624	\$ 40,960	\$ 6,090	\$ 2,579	\$ 49,629	76,215	\$ 125,844	\$ 391,468	\$ 346,047
Real Estate	REC1	\$ 766,875	\$ -	\$ 766,875	\$ 197,108	\$ 93,129	\$ 20,321	\$ 3,893	\$ 117,343	63,165	\$ 180,508	\$ 377,616	\$ 389,259
Real Estate Appraisers	APR1	\$ 76,010	\$ 1,534	\$ 77,544	\$ 98,416	\$ 7,714	\$ 1,699	\$ 846	\$ 10,259	26,568	\$ 36,827	\$ 135,243	\$ (57,699)
Social Workers	CSW1	\$ 250,209	\$ 1,116	\$ 251,325	\$ 95,707	\$ 21,269	\$ 3,470	\$ 2,011	\$ 26,750	30,588	\$ 57,338	\$ 153,045	\$ 98,280
Storage Tank Workers	UST1	\$ 17,105	\$ -	\$ 17,105	\$ 3,530	\$ 1,669	\$ 684	\$ 468	\$ 2,821	1,329	\$ 4,150	\$ 7,680	\$ 9,425
Veterinary	VET1	\$ 57,225	\$ -	\$ 57,225	\$ 79,311	\$ 19,848	\$ 2,662	\$ 1,275	\$ 23,785	28,190	\$ 51,975	\$ 131,286	\$ (74,061)
No longer existent board/commission (ie Athletic)												-	-
Totals All Boards		\$ 10,593,566	\$ 33,439	\$ 10,627,005	\$ 6,487,048	\$ 1,999,022	\$ 277,995	\$ 82,596	\$ 2,359,613	\$ 1,800,334	\$ 4,159,947	\$ 10,646,995	\$ (19,990)

ABL & Corporations		080801005	\$ 9,564,539	\$ -	\$ 9,564,539	\$ 1,087,580	\$ 108,258	\$ 269,779	\$ 9,178	\$ 387,215	\$ 138,603	\$ 525,818	\$ 1,613,398
Fines & Forfeit GF			174,538		174,538								-
Revenue Transfer In (Carry Forward) CFWD			20,763		20,763								-
Reimbursable Service Agreements AR 080801007			-		-								-
RSA 0680470- DHSS Nurse Aide Program			120,000		120,000	120,000							120,000
RSA 0680378- DHSS PDMP			200,000		200,000	200,000							200,000
RSA 0680154- DHSS EPI PDMP			59,500		59,500	59,500							59,500
RSA 0680579- DHSS PDMP			34,391		34,391	34,391							34,391
RSA 0480042 Child Support Assistance			2,139		2,139	2,139							2,139
RSA 0880179- Publication Specialist Duties			222		222	222							222
Real Estate Recovery Fund ZSU1			132,315		132,315	126,264							126,264
Clear SDPR training 8000				1,306	1,306	1,306							1,306
Total CBPL			\$ 20,901,973	\$ 34,745	\$ 20,936,718	\$ 8,118,450	\$ 2,107,280	\$ 547,774	\$ 91,774	\$ 2,746,828	\$ 1,938,937	\$ 4,685,765	\$ 12,804,215

Indirect Expense Allocated by License %: license count by board / total professional licenses currently active Note: does not include Geologists
HIN1 and CON1 combined for board reports

12,804,215

DIVISION INDIRECT EXPENSES	Total		Prof Lic	Corp & Bus Lic
Percentage of direct personal services:				
Business Supplies	21,186		20,259	927
Office Equipment	82,223	**	73,972	8,251
State Vehicles	4,908		4,458	450
Storage and Archives	7,130		7,127	3
Legal Support	21,233		21,233	-
Mail postage	19,962		33,034	(13,072)
Software Licensing and Maintenance	54,275	***	53,533	742
Division coding adjustment - conversion				
Division Administrative Expenses - all other	354,300		350,369	3,931
Division allocated by percentage of direct personal services:	565,217		563,985	1,232
Percentage of board licenses/total licensees:				
Division supervisors of receipting Personal Services 75%	143,358	****	129,022	14,336
Receipting Personal Services 40%	333,326	****	299,993	33,333
Investigations indirect Personal Services	391,513	*****	362,108	29,405
Division Administration Personal Services	511,173		462,870	48,303
Professional License Administration Personal Services	131,941		219,324	(87,383)
Division allocated by percentage of board licenses/total licensees:	1,511,311		1,473,317	37,994
Receipting personal services by transaction %:				49%
Division supervisors of receipting Personal Services 25%	47,786	****	24,251	23,535
Receipting Personal Services 60%	499,988	****	253,744	246,244
Division receipting personal services by transaction %:	547,774		277,995	269,779
Total Division Indirect Expenses	2,624,302		2,315,297	309,005
DEPARTMENT INDIRECT EXPENSES	Total		Prof Lic	Corp & Bus Lic
Percentage of direct personal services:				
Commissioner's Office	201,103		180,993	20,110
Administrative Services - Director's Office	60,198		54,178	6,020
Administrative Services - Human Resources	69,920		62,928	6,992
Administrative Services - Fiscal	84,892		76,403	8,489
Administrative Services - Budget	56,286		50,657	5,629
Administrative Services - Information Technology	146,370		131,733	14,637
Administrative Services - Information Technology - Network & Database	147,192		132,473	14,719
Administrative Services - Mail postage	8,704		7,834	870
Administrative Services - Facilities - Maintenance	9,772		8,795	977
Department allocated by percentage of direct personal services:	784,437		705,994	78,443
Percentage of board licenses/total licensees:				
Department administrative services support: Fiscal, IT, Procurement	595,969	*	525,705	70,264
Receipting personal services by transaction %:				
Department Personal Services - Fiscal Revenue personal services by transaction %	91,774		82,596	9,178
Total DEPARTMENT INDIRECT EXPENSES	1,472,180	*****	1,314,295	157,885
STATEWIDE INDIRECT EXPENSES	Total		Prof Lic	Corp & Bus Lic
Percentage of direct personal services:				
Accounting and Payroll Systems	16,397		14,757	1,640
State Owned Building Rental (Building Leases)	303,308	*****	272,977	30,331
Human Resources	63,573		57,216	6,357
IT Non-Telecommunications	75,572	*****	68,015	7,557
IT Telecommunications	128,543	*****	115,689	12,854
Risk Management	1,890		1,701	189
Statewide allocated by percentage of direct personal services:	589,283		530,355	58,928
FY18 TOTALS BY METHODOLOGY	Total		Prof Lic	Corp & Bus Lic
Percentage of direct personal services:	1,938,937		1,800,334	138,603
Percentage of board licenses/total licensees:	2,107,280		1,999,022	108,258
Receipting personal services by transaction %:	639,548		360,591	278,957
Grand Total	4,685,765		4,159,947	525,818

Department of Commerce Community, and Economic Development
Corporations, Business and Professional Licensing

Board of Dental Examiners
Schedule of Revenues and Expenditures

	FY 12		FY 13		FY 14		FY 15		FY16		FY17		FY18		FY19 1st QTR	
Licensing Revenue	\$	56,206	\$	389,729	\$	75,095	\$	479,846	\$	103,201	\$	686,060	\$	179,011	\$	29,180
Allowable Third Party Reimbursement		-		-		-		-		-		-		-		-
Total Revenue		56,206		389,729		75,095		479,846		103,201		686,060		179,011		29,180
Direct Expenditures																
Personal Services		118,947		176,988		154,086		116,909		132,528		167,345		164,638		44,816
Travel		22,787		16,471		12,796		14,040		8,138		5,286		9,189		1,686
Contractual		17,235		128,666		105,918		55,437		17,491		61,412		50,681		6,231
Supplies		1,483		1,491		525		1,102		427		846		493		62
Equipment		-		-		-		-		-		-		-		-
Total Direct Expenditures		160,452		323,616		273,325		187,488		158,584		234,889		225,001		52,795
Indirect Expenditures*		122,053		150,253		108,227		90,087		102,251		186,587		188,796		47,199
																-
Total Expenses		282,505		473,869		381,552		277,575		260,835		421,476		413,797		99,994
Annual Surplus (Deficit)		(226,299)		(84,140)		(306,457)		202,271		(157,634)		264,584		(234,786)		(70,814)
Beginning Cumulative Surplus (Deficit)		490,477		264,178		180,038		(126,419)		75,852		(81,782)		182,802		(51,984)
Ending Cumulative Surplus (Deficit)	\$	264,178	\$	180,038	\$	(126,419)	\$	75,852	\$	(81,782)	\$	182,802	\$	(51,984)	\$	(122,798)

** For the first three quarters, indirect costs are based on the prior fiscal year's total indirect amount on a percent of year completed basis.

Appropriation (All)
AL Sub Unit (All)
AL Task Code DEN1

Sum of Expenditures		Object Type Code				
Object Code	Object Name	1000	2000	3000	4000	Grand Total
1011	Regular Compensation	\$23,686.65				\$23,686.65
1023	Leave Taken	\$4,695.70				\$4,695.70
1028	Alaska Supplemental Benefit	\$1,742.81				\$1,742.81
1029	Public Employee's Retirement System Defined Benefits	\$3,782.53				\$3,782.53
1030	Public Employee's Retirement System Defined Contribution	\$588.40				\$588.40
1034	Public Employee's Retirement System Defined Cont Health Reim	\$501.92				\$501.92
1035	Public Employee's Retirement Sys Defined Cont Retiree Medical	\$105.01				\$105.01
1037	Public Employee's Retirement Sys Defined Benefit Unfnd Liab	\$1,265.95				\$1,265.95
1039	Unemployment Insurance	\$91.72				\$91.72
1040	Group Health Insurance	\$6,618.12				\$6,618.12
1040	Basic Life and Travel	\$10.00				\$10.00
1042	Worker's Compensation Insurance	\$278.71				\$278.71
1047	Leave Cash In Employer Charge	\$655.54				\$655.54
1048	Terminal Leave Employer Charge	\$340.70				\$340.70
1053	Medicare Tax	\$388.11				\$388.11
1077	ASEA Legal Trust	\$45.87				\$45.87
1079	ASEA Injury Leave Usage	\$17.60				\$17.60
1080	SU Legal Trst	\$0.74				\$0.74
2000	In-State Employee Airfare		\$355.41			\$355.41
2001	In-State Employee Surface Transportation		\$61.44			\$61.44
2002	In-State Employee Lodging		\$229.00			\$229.00
2003	In-State Employee Meals and Incidentals		\$90.00			\$90.00
2005	In-State Non-Employee Airfare		\$196.15			\$196.15
2008	In-State Non-Employee Meals and Incidentals		\$150.00			\$150.00
2009	In-State Non-Employee Taxable Per Diem		\$125.00			\$125.00
2010	In-State Non-Employee Non-Taxable Reimbursement		\$478.50			\$478.50
3002	Memberships			\$5,385.00		\$5,385.00
3044	Courier			\$45.47		\$45.47
3046	Advertising			\$744.32		\$744.32
3057	Structure, Infrastructure and Land - Rentals/Leases			\$20.91		\$20.91
3066	Print/Copy/Graphics			\$26.00		\$26.00
3069	Commission Sales			\$9.50		\$9.50
4002	Business Supplies				\$1.93	\$1.93
4005	Subscriptions				\$60.00	\$60.00
GRAND TOTAL		\$44,816.08	\$1,685.50	\$6,231.20	\$61.93	\$52,794.71

Item 11

- AADB 2018 Board Report
- HERB Executive Summary November, 2018

Report from the 2018 AADB meeting: Chicago

Submitted by: David Nielson, DDS

October 23, 2018

1) SPECIALTY LICENSES

In an effort to avoid law suits brought on by lawyers representing certain dental disciplines looking for specialty status, the board needs authority to determine what criteria are required for recognition and the authority must be granted by the State of Alaska. This ability is critical to the board when they find it necessary to protect the public from a false or misleading claim that a dentist is a "specialist." Several other states have lost law suits because they have relied on the American Dental Association's definition of what constitutes a dental specialty. Action recommended: After receiving information from Idaho and North Carolina about legislation they introduced to enable their dental boards to deal with this issue, I feel we must have a discussion to introduce similar legislation. Also, the board should seriously consider bringing back the specialty license as part of that legislation.

2) NATIONAL DENTAL LICENSURE OBJECTIVE STRUCTURED CLINICAL EXAM- (DLOSCE) by the ADA

All state boards in attendance were in agreement that the ADA's development of a national written licensing exam with no hands on clinical skills testing on a live patient would NOT be something they could get behind. All states continue to feel that testing hands on clinical skills on live patients should remain a priority. This can be a somewhat contentious issue between the examining community and the ADA, ASDA and many educators from dental schools. Although, the main issue in the eyes of new dentists is portability. Action recommended: Continue our regulatory efforts to accept all regional licensing exams offered in the US that test for the hands on clinical skills our board has determined to be appropriate. It is the AABD's opinion that the dental schools need independent third party evaluation of hands on clinical skills to identify the 1-2% of graduates who are not minimally competent to practice in their states.

3) SEDATION INSPECTION OF DENTAL OFFICES

Inspection of dental offices that provide moderate and deep sedation is mandatory in many of the states I checked with. Most have teams or inspectors contracted to perform the inspections but many states are trying to get out of the inspection business. In Alaska, with limited resources and large geographic area, board run inspections will be extremely difficult. Action recommended: I consulted AAFDO who offer a Sedation Anesthesia Medical Emergency Readiness Inspection (SAMERI) for a fee. They offer unbiased, 3rd party inspections that can be done remotely and certify an office for a suggested 3 years. Although boards can make the interval more or less as they see fit. With each inspection they also offer up to 36 mock emergency drills over the 3 years. The board may realistically need to use a service like this to carry out inspections as required by regulation.

4) PEDIATRIC MODERATE SEDATION

Many states have side-stepped the pediatric sedation issue by only allowing pediatric residency graduates to moderately sedate children or by not yet addressing age at all. But again, in Alaska this may not be reasonable for geographic reasons and workforce issues. Alaska and Colorado are the only states I found so far working on a pathway for GP's to moderately sedate children. Action recommended: For access to care reasons, continue fine tuning regulations that will allow a pathway for a general dentist to provide mild/moderate sedation to a child. This effort will likely affect some licensees who are currently sedating children without a pediatric designation to a large degree, but I feel it is important to take appropriate steps to help protect the public from tragedy that has occurred in other states.

5) LICENSING REQUIREMENTS

An occupational licensing expert and someone from the FTC spoke about the fairness and consistency of intra-jurisdictional licensing requirements. If there is a variation in the strictness of licensing rules between jurisdictions, it doesn't look good to lawyers, economists or the FTC. Are rules really linked to public safety? Rules effect intrastate migration and scope of practice. Remember, licenses are a response to the consumer's difficulty to determine on their own as to whether providers are qualified, but not meant to restrict freedom of movement according to the FTC. In 2016, the White House made it clear it wanted harmonization of licensing requirements from state to state. Interstate compacts are something the FTC likes and may focus on a state with higher restrictions or requirements than most. The FTC has the core belief that increased competition will decrease price, increase value and increase quality. Some argued that in dentistry, increased competition may decrease quality as it can lead to overtreatment, the FTC wasn't so sure. The FTC has hearings and workshops where they weigh competition restrictions against public protection. Action recommended: I believe we are on the right track for our efforts to accept more regional exams, and as long as testing on live patients for certain procedures remains the standard across the country, we should be on good footing. Our only issue may arise by requiring a class II amalgam if we are the only jurisdiction to do so. We have good reasons to continue testing for this skill and we need to be ready to defend the decision if we face scrutiny from the FTC or our own legislature.

6) MID-LEVEL DENTAL THERAPISTS

There was a presentation from Minnesota where they have licensed Advanced Dental Therapists (ADT). The ADT works under indirect supervision in designated "shortage areas" and is allowed to do perform fillings and SSC's on permanent and primary teeth, as well as a pulpotomy or extraction of a primary tooth. The training has CODA standards associated with it and CDTA and CRDTS will provide testing of the hands on clinical portion. In fact, the ADT is tested along with the dental candidates. (Something the ADA opposes) To qualify for the ADT license, a candidate needs 2000 hours of clinical work, the ADT education certificate and passage of CRDTS or CDCA. Action recommended: No action is necessary here at this time as the DHAT model seems to be working well in our state of Alaska as the DHAT is not licensed or regulated by the Board of Dental Examiners and they are mainly working where they are needed most.

7) DENTAL EDUCATION REQUIREMENTS

ADA president Crowley once again made it clear the ADA was all for portability when and however possible. In addition to topics just discussed, he specifically mentioned granting licensure to an applicant who has recently graduated from a CODA accredited residency program whether or not they have graduated from a CODA accredited dental school. In Alaska's case, that would be addressed in 28.938 and whether we should consider adding language to allow for that. Action recommended: We should probably at least discuss inserting the following language into 28.938. "...of a dental school ***[or a two or more year postgraduate residency program]*** that at the time....." Also, do we consider changing the two year residency requirement in 28.940(b)(8)(B) to a one year requirement as in New York's PGY1? The answers to these questions should at least be discussed.

**Western Regional Examining Board
Hygiene Exam Review Board Meeting
Tempe, Arizona
November 2, 2018**

Executive Summary

Present:

Brenda Chavez, RDH	Norm Magnuson, DDS
Beth Cole	Beverly Marsh, RDH
Christy Jo Fogarty, RDH	Yadira Martinez, RDH
Heather Hardy, RDH	Sharon Osborn Popp, PhD
Kathleen Harris, RDH	Betty Pate, RDH
Kathy Heiar, RDH	Deb Polc, RDH
Janet Ingrao, RDH	Kelly Reich, RDH
Paula Jenkins, RDH	Melinda Reich, RDH
Michael Johnston, RDH	Laura Richoux, RDH, BSDH
Lorie Jones, RDH	Marianne Timmerman, RDH
Mary Kelly, RDH	Gail Walden, RDH
Diane Klemann, RDH	Patti Weber, RDH
Jennifer Lamb, RDH	Robin Yeager
Jackie Leahey, RDH	
Meg Long, RDH	

Committee Reports

- Kelly Reich and Janet Ingrao, Co-Directors of Dental Hygiene Exam Development provided an overview of the Local Anesthesia, Restorative and Dental Hygiene committees work over the past year as well exam updates, where applicable.

Role of HERB/DERB

- Beth Cole, WREB CEO, clarified the role of ERB members which include providing two way communication and input related to clinical licensure exams, advocating for WREB in the examining community and sharing information they hear regarding WREB, both positive and negative.
- HERB/DERB will meet once a year, tentatively each fall.

Psychometric Review

- Sharon Osborn Popp, PhD, provided an update regarding year to date pass rates for Candidates and a comprehensive statistical analysis of both Candidate and Examiner performance.
- She also provided an overview of the dental hygiene practice analysis that was completed in collaboration with CRDTS with data gained utilizing the ADHA's email list.

- Sharon enlightened the members with a brief Dental exam update on the 2018 exam changes and their success in 2018. Year to date WREB needed 42% fewer patient procedures to come to the same determinations regarding candidate competence in the operative section of the exam.

State Board Updates

- Each HERB member briefly reported on behalf of their respective state boards or dental hygiene committee. Noting any proposed, pending or future legislation and whether their state is considering or has accepted other testing agencies for licensure.
- Brenda Chavez, the educator member of the board, reported that educators are appreciative of the student and educator webinars, love that there will be no fee for onsite retakes for dental hygiene in 2019 and that schools remain very interested in purchasing the calibration typodonts.

WREB Update

- Beth Cole provided a review of the successful changes to both dental and dental hygiene exams.
- She discussed internal and external factors that contribute to WREBs success as well as the challenges that WREB faces.
- Walked the attendees through an overview of the Examiner pool and the addition of new exam sites and schools.

Item 12

- Regulation Review
 - Radiologic Equipment
 - Military Licenses
 - Clean up

Radiologic Inspector

As currently worded

Sec. 08.36.075. Dental radiological equipment. (a) The board shall establish standards that comply with applicable federal law for the registration , use, and inspection of dental radiological equipment, including standards for record keeping relating to the control panels and the use of the equipment. The board may charge a fee for dental radiological equipment registered under this section.

(b) [Repealed, Sec. 40 ch 53 SLA 2012].

(c) [Repealed, Sec. 40 ch 53 SLA 2012].

(d) [Repealed, Sec. 40 ch 53 SLA 2012].

(e) [Repealed, Sec. 40 ch 53 SLA 2012].

(f) In this section, “dental radiological equipment” means equipment for use in the practice of dentistry, consisting of a control panel and associated tube heads, if the equipment emits electronic product radiation, as defined in AS 18.60.545, or uses radionuclides, as defined in AS 18.60.545.

As passed in SB92 (in 2012)

4 * Sec. 23. AS 08.36.075(a) is amended to read:

5 (a) **The** [SUBJECT TO (b) OF THIS SECTION, THE] board shall establish
6 standards that **comply with applicable federal law** for the registration, **use**, and
7 inspection of dental radiological equipment, including standards for record keeping
8 relating to the control panels and the use of the equipment. The board **may charge a**
9 **fee for dental radiological equipment registered under this section** [INSPECTION
10 STANDARDS ADOPTED BY THE BOARD MUST REQUIRE THAT AN
11 INSPECTION BE PERFORMED BY A PERSON WHO HAS QUALIFICATIONS
12 EQUIVALENT TO THE QUALIFICATIONS ESTABLISHED AS OF
13 SEPTEMBER 7, 1998, IN THE "APPLICANT PROFILE AND JOB
14 QUALIFICATION SUMMARY" FOR A STATE RADIOLOGICAL HEALTH
15 SPECIALIST I].

If we have to redo it:

Sec. 08.36.075. Dental radiological equipment. (a) The board shall establish standards that comply with applicable federal law for the registration , use, and inspection of dental radiological equipment, including standards for record keeping relating to the control panels and the use of the equipment. The board may charge a fee for dental radiological equipment registered under this section. **The board will define the educational and experience necessary for a dental radiologic inspector.**

(b) [Repealed, Sec. 40 ch 53 SLA 2012].

(c) [Repealed, Sec. 40 ch 53 SLA 2012].

(d) [Repealed, Sec. 40 ch 53 SLA 2012].

(e) [Repealed, Sec. 40 ch 53 SLA 2012].

(f) In this section, “dental radiological equipment” means equipment for use in the practice of dentistry, consisting of a control panel and associated tube heads, if the equipment emits electronic product radiation, as defined in AS 18.60.545, or uses radionuclides, as defined in AS 18.60.545.

STATE OF ALASKA
BOARD OF DENTAL EXAMINERS
LETTER OF PROFESSIONAL REFERENCE

Dear : _____:

I am applying to be a dental radiological equipment inspector in the State of Alaska and I am required to provide two professional references. Please provide the information requested to the State of Alaska at the address shown below. In lieu of using this form, this professional reference may be written on professional letterhead. Thank you for your assistance.

State of Alaska
Department of Commerce, Community and Economic Development
Division of Corporations, Business and Professional Licensing
Board of Dental Examiners
P.O. Box 110806
Juneau, Alaska 99811-0806

Signature: _____

Printed Name: _____

Address: _____

PLEASE DO NOT DETACH

I recommend the applicant as being professional capable, reliable, and worthy of confidence. In addition, I offer the following personal statement regarding my knowledge of the applicant:

Printed name Degree

Signature

Title/Company

Address

City State Zip Code

Office Telephone Number

Home Telephone Number



NOTE: The letter of recommendation must come from a professional who is familiar with the applicant's work.



LAWS OF ALASKA

2012

Source

HCS CSSB 92(FIN)

Chapter No.

AN ACT

Relating to dental hygienists, dentists, dental assistants, dental hygiene, and dentistry.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

THE ACT FOLLOWS ON PAGE 1

AN ACT

1 Relating to dental hygienists, dentists, dental assistants, dental hygiene, and dentistry.

2 _____
3 * **Section 1.** AS 08.32.010 is amended to read:

4 **Sec. 08.32.010. License required.** Except as provided in AS 08.32.095, a
5 person may not practice, offer or attempt to practice, or advertise or announce as being
6 prepared or qualified to practice dental hygiene without a license [AND A CURRENT
7 CERTIFICATE OF REGISTRATION].

8 * **Sec. 2.** AS 08.32 is amended by adding a new section to read:

9 **Sec. 08.32.014. Qualifications for license.** (a) An applicant for a license to
10 practice dental hygiene shall

11 (1) provide evidence to the board that the applicant

12 (A) has successfully completed an academic program in dental
13 hygiene of at least two years duration that, at the time of graduation, is

1 accredited by the Commission on Dental Accreditation of the American Dental
2 Association and is approved by the board;

3 (B) has passed a written theory examination of the American
4 Dental Association Joint Commission on National Dental Examinations or an
5 equivalent examination approved by the board;

6 (C) has successfully passed a state or regional dental hygiene
7 clinical examination approved by the board;

8 (D) has not had a license to practice dental hygiene revoked,
9 suspended, or voluntarily surrendered in this state or another state;

10 (E) is not the subject of an adverse decision based on a
11 complaint, investigation, review procedure, or other disciplinary proceeding
12 within the five years immediately preceding application or of an unresolved
13 complaint, investigation, review procedure, or other disciplinary proceeding
14 undertaken by a state, territorial, local, or federal dental licensing jurisdiction;

15 (F) is not the subject of an unresolved or adverse decision
16 based on a complaint, investigation, review procedure, or other disciplinary
17 proceeding undertaken by a state, territorial, local, or federal dental licensing
18 jurisdiction or law enforcement agency that relates to criminal or fraudulent
19 activity, dental malpractice, or negligent dental care and that adversely reflects
20 on the applicant's ability or competence to practice as a dental hygienist or on
21 the safety or well-being of patients;

22 (G) is not the subject of an adverse report from the National
23 Practitioner Data Bank or the American Association of Dental Boards
24 Clearinghouse for Board Actions that relates to criminal or fraudulent activity
25 or dental malpractice;

26 (H) is not impaired to an extent that affects the applicant's
27 ability to practice as a dental hygienist;

28 (I) has not been convicted of a crime that adversely reflects on
29 the applicant's ability or competency to practice as a dental hygienist or that
30 jeopardizes the safety or well-being of a patient; and

31 (2) meet the other qualifications for a license established by the board

1 by regulation.

2 (b) An applicant for a license to practice dental hygiene may be interviewed in
3 person by the board or a designee of the board. The interview must be recorded. If the
4 application is denied on the basis of the interview, the denial shall be stated in writing,
5 with the reasons for it, and the record shall be preserved.

6 * **Sec. 3.** AS 08.32.030 is amended to read:

7 **Sec. 08.32.030. Licensure by credentials.** The board may provide for the
8 licensing without examination of a dental hygienist who

9 (1) meets the criteria of AS 08.32.014 [AS 08.32.020(a)];

10 (2) submits proof of continued competence as specified in
11 regulations adopted by the board;

12 (3) is currently licensed to practice dental hygiene in another state
13 or territory of the United States; and

14 (4) [HAS SUCCESSFULLY PASSED A STATE OR REGIONAL
15 DENTAL HYGIENE CLINICAL EXAMINATION THAT THE BOARD HAS
16 DETERMINED IS AT LEAST EQUIVALENT IN SCOPE, QUALITY, AND
17 DIFFICULTY TO THE ALASKA CLINICAL EXAMINATION;

18 (3) HAS BEEN IN ACTIVE CLINICAL DENTAL HYGIENE
19 PRACTICE AVERAGING NOT LESS THAN 700 HOURS A YEAR FOR EACH
20 OF THE TWO YEARS IMMEDIATELY PRECEDING APPLICATION FOR
21 STATE LICENSURE;

22 (4) HAS NOT FAILED THE CLINICAL DENTAL HYGIENE
23 EXAMINATION OF THIS STATE;

24 (5) HAS NOT PREVIOUSLY HAD A LICENSE TO PRACTICE
25 DENTAL HYGIENE ISSUED BY ANY STATE OR REGION REVOKED;

26 (6) HAS COMPLETED NOT LESS THAN 14 HOURS OF
27 CONTINUING EDUCATION RELATED TO CLINICAL HYGIENE IN THE TWO
28 YEARS BEFORE FILING AN APPLICATION WITH THE BOARD; THE
29 CONTINUING EDUCATION REQUIRED UNDER THIS PARAGRAPH MUST BE
30 APPROVED BY THE BOARD, THE AMERICAN DENTAL ASSOCIATION, THE
31 ACADEMY OF GENERAL DENTISTRY, OR THE AMERICAN DENTAL

1 HYGIENISTS' ASSOCIATION;

2 (7)] pays the fees established [REQUIRED] under AS 08.01.065
3 [AS 08.32.097; AND

4 (8) IS NOT THE SUBJECT OF AN UNRESOLVED COMPLAINT,
5 REVIEW PROCEDURE, OR DISCIPLINARY PROCEEDING UNDERTAKEN BY
6 A DENTAL OR DENTAL HYGIENE LICENSING JURISDICTION].

7 * **Sec. 4.** AS 08.32.070 is amended to read:

8 **Sec. 08.32.070. Licensing** [REGISTRATION AND LICENSING] of dental
9 **hygienists.** The board shall issue [REGISTER] each successful applicant [AND
10 ISSUE THE APPLICANT] a license upon payment of all required fees.

11 * **Sec. 5.** AS 08.32.071 is amended to read:

12 **Sec. 08.32.071. Renewal of license** [REGISTRATION]. At least 60 days
13 before expiration of a dental hygienist's license [LICENSEE'S REGISTRATION
14 CERTIFICATE], the Department of Commerce, Community, and Economic
15 Development shall notify the [MAIL A FORM FOR RENEWAL OF
16 REGISTRATION TO EACH] licensed dental hygienist. Each licensee who wishes to
17 renew a dental hygienist's license shall submit a completed license renewal form,
18 [REGISTRATION CERTIFICATE SHALL COMPLETE THE FORM AND
19 RETURN IT WITH] the appropriate fee, and evidence of continued professional
20 competence as required by the board. The Department of Commerce, Community, and
21 Economic Development shall, as soon as practicable, issue a dental hygienist license
22 [REGISTRATION CERTIFICATE] valid for a stated number of years. [EACH
23 LICENSEE SHALL KEEP THE REGISTRATION CERTIFICATE BESIDE OR
24 ATTACHED TO THE LICENSEE'S LICENSE.] Failure to receive notification from
25 the department under this section [THE REGISTRATION FORM] does not exempt
26 a licensee from renewing the licensee's dental hygienist license [REGISTRATION].

27 * **Sec. 6.** AS 08.32.081 is amended to read:

28 **Sec. 08.32.081. Lapse and reinstatement of license.** A licensed dental
29 hygienist who does not pay the renewal [REGISTRATION] fee under AS 08.32.071
30 forfeits the hygienist's license. The board may reinstate the license without
31 examination within two years of the date on which payment was due upon written

1 application, proof of continued professional competence, and payment of all unpaid
2 renewal fees and any penalty fee established under AS 08.01.100(b).

3 * **Sec. 7.** AS 08.32.085(a) is amended to read:

4 (a) The board shall issue a restorative function endorsement to a **licensed**
5 dental hygienist [WHO IS LICENSED UNDER THIS CHAPTER] if the licensee
6 furnishes evidence satisfactory to the board that the licensee has

7 (1) successfully completed a **course offered by or under the auspices**
8 **of a program** accredited by the Commission on Dental Accreditation of the American
9 Dental Association or other **equivalent** course **or program** [OF INSTRUCTION]
10 approved by the board; and

11 (2) passed the Western Regional Examining Board's restorative
12 examination or other equivalent examination approved by the board within the five
13 years preceding the licensee's endorsement application, or the licensee is licensed,
14 **certified, or otherwise permitted** in another state or United States territory to
15 perform restorative functions.

16 * **Sec. 8.** AS 08.32.095(a) is amended to read:

17 (a) A person enrolled as a [FULL-TIME] student in an accredited [SCHOOL
18 OF] dental hygiene **program** may perform dental hygiene procedures as part of a
19 course of study without a license if

20 (1) the procedures are performed under the

21 **(A) general** [DIRECT] supervision of a member of the faculty
22 who is licensed under AS 08.36, **and under the direct or indirect**
23 **supervision of a member of the faculty who is licensed under this chapter;**
24 or

25 **(B)** [UNDER THE] direct **or indirect** supervision of a
26 **member of the faculty who** [TEAM OF LICENSED FACULTY DENTISTS,
27 AT LEAST ONE OF WHOM] is licensed under AS 08.36; and

28 (2) the clinical program has received written approval from the board.

29 * **Sec. 9.** AS 08.32.110(a) is amended to read:

30 (a) The role of the dental hygienist is to assist members of the dental
31 profession in providing oral health care to the public. A person licensed to practice the

profession of dental hygiene in the state may,

(1) **under the general supervision of a licensed dentist,**

(A) perform preliminary charting and triage to formulate a dental hygiene assessment and dental hygiene treatment plan;

(B) remove calcareous deposits, accretions, and stains from the exposed surfaces of the teeth beginning at the epithelial attachment by scaling and polishing techniques;

(C) remove marginal overhangs;

(D) use local periodontal therapeutic agents;

(E) perform nonsurgical periodontal therapy;

(F)[(2) APPLY TOPICAL PREVENTIVE AGENTS;

(3) APPLY PIT AND FISSURE SEALANTS;

(4) PERFORM ROOT PLANING AND PERIODONTAL SOFT TISSUE CURETTAGE;

(5)] perform other dental operations and services delegated by a licensed dentist if the dental operations and services are not prohibited by (c) of this section;

(G) [AND (6)] if certified by the board [AND UNDER THE DIRECT, INDIRECT, OR GENERAL SUPERVISION OF A LICENSED DENTIST], administer local anesthetic agents; **and**

(2) if certified by the board and under the direct or indirect supervision of a licensed dentist, administer and monitor nitrous oxide-oxygen conscious sedation.

* **Sec. 10.** AS 08.32.110(c) is amended to read:

(c) This section does not authorize delegation of

(1) **dental diagnosis, comprehensive** [DIAGNOSING,] treatment planning, and writing prescriptions for drugs; writing authorizations for restorative, prosthetic, or orthodontic appliances;

(2) operative or surgical procedures on hard or soft tissues [EXCEPT AS ALLOWED IN (a)(4) OF THIS SECTION]; or

(3) other procedures that require the professional competence and skill

1 of a dentist.

2 * **Sec. 11.** AS 08.32.110(e) is amended to read:

3 (e) This section does not prohibit a **licensed** dental hygienist

4 (1) with an endorsement issued under AS 08.32.085 from performing
5 the activities authorized under AS 08.32.085; [OR]

6 (2) who has entered into a collaborative agreement approved by the
7 board under AS 08.32.115 from performing the activities authorized under the
8 collaborative agreement; **or**

9 **(3) from performing a dental operation, procedure, or service a**
10 **dentist may delegate to a dental assistant under AS 08.36.346.**

11 * **Sec. 12.** AS 08.32.115(a) is amended to read:

12 (a) If the collaborative agreement is approved by the board under (d) of this
13 section, a **licensed** dental hygienist with a minimum of 4,000 documented hours of
14 clinical experience within the five years preceding application for the board's approval
15 may enter into a collaborative agreement with a **licensed** dentist [LICENSED UNDER
16 AS 08.36] in which the licensed dentist authorizes the **licensed** dental hygienist to
17 perform one or more of the following:

18 (1) oral health promotion and disease prevention education;

19 (2) removal of calcareous deposits, accretions, and stains from the
20 surfaces of teeth;

21 (3) application of topical preventive or prophylactic agents, including
22 fluoride varnishes and pit and fissure sealants;

23 (4) polishing and smoothing restorations;

24 (5) removal of marginal overhangs;

25 (6) preliminary charting and triage **to formulate a dental hygiene**
26 **assessment and dental hygiene treatment plan;**

27 (7) **the exposure and development of** radiographs;

28 (8) use of local periodontal therapeutic agents; and

29 (9) performance of nonsurgical periodontal therapy, with or without
30 the administration of local anesthesia, subsequent to a licensed dentist's authorization
31 or diagnosis as specified in the licensed hygienist's collaborative agreement.

1 * **Sec. 13.** AS 08.32.115(d) is amended to read:

2 (d) The board may approve a collaborative agreement between a licensed
3 dentist and a **licensed** dental hygienist. However, the board may not approve more
4 than five collaborative agreements with a licensed dentist, not including any
5 collaborative agreements that have been terminated. A **licensed** dental hygienist shall
6 notify the board of the termination of a collaborative agreement with a licensed
7 dentist.

8 * **Sec. 14.** AS 08.32.160 is amended to read:

9 **Sec. 08.32.160. Grounds for discipline, suspension, or revocation of license.**

10 The board may revoke or suspend the license of a dental hygienist, or may reprimand,
11 censure, or discipline a licensee, if, after a hearing, the board finds that the licensee

12 (1) used or knowingly cooperated in deceit, fraud, or intentional
13 misrepresentation to obtain a license, **certificate**, or **endorsement**
14 [REGISTRATION];

15 (2) engaged in deceit, fraud, or intentional misrepresentation in the
16 course of providing or billing for professional services or engaging in professional
17 activities;

18 (3) advertised professional services in a false or misleading manner;

19 (4) has been convicted of a felony or other crime that affects the
20 licensee's ability to continue to practice competently and safely;

21 (5) failed to comply with this chapter, with a regulation adopted under
22 this chapter or under AS 08.36, or with an order of the board;

23 (6) continued to practice after becoming unfit due to

24 (A) professional incompetence;

25 (B) addiction or dependence on alcohol or other drugs that
26 impairs the licensee's ability to practice safely;

27 (C) physical or mental disability;

28 [(D) FAILURE TO KEEP INFORMED OF OR USE
29 CURRENT PROFESSIONAL THEORIES AND PRACTICES;]

30 (7) engaged in lewd or immoral conduct in connection with the
31 delivery of professional service to patients;

1 (8) performed clinical procedures [FOR COMPENSATION] without
2 being under the supervision of a licensed dentist;

3 **(9) did not conform to professional standards in delivering dental**
4 **hygiene services to patients regardless of whether actual injury to the patient**
5 **occurred.**

6 * **Sec. 15.** AS 08.32.180 is amended by adding a new subsection to read:

7 (b) Notwithstanding AS 08.01.075(a)(8), the board may impose a civil fine not
8 to exceed \$25,000 for each violation of this chapter or a regulation adopted under this
9 chapter.

10 * **Sec. 16.** AS 08.32.187(a) is amended to read:

11 (a) This chapter applies to a person who practices, or offers or attempts to
12 practice, as a dental hygienist in the state except

13 (1) a dental hygienist in the military service in the discharge of official
14 duties;

15 (2) a dental hygienist in the employ of the United States Public Health
16 Service, United States Department of Veterans Affairs, **United States Indian Health**
17 **[ALASKA NATIVE] Service**, or another agency of the federal government, in the
18 discharge of official duties;

19 (3) a dental hygienist licensed in another state **or jurisdiction** who is
20 teaching or demonstrating clinical techniques at a meeting, seminar, or limited course
21 of instruction sponsored by a dental or dental auxiliary society or association or by an
22 accredited dental or dental auxiliary educational institution;

23 **(4) a dental hygienist employed in the state by an Indian health**
24 **program, as that term is defined in 25 U.S.C. 1603, while providing dental**
25 **hygiene services to a person the Indian health program is entitled to serve under**
26 **25 U.S.C. 450 et seq. (Indian Self-Determination and Education Assistance Act),**
27 **as amended, and 25 U.S.C. 1601 et seq. (Indian Health Care Improvement Act),**
28 **as amended.**

29 * **Sec. 17.** AS 08.32.190 is amended by adding new paragraphs to read:

30 (6) "licensed dental hygienist" means a dental hygienist licensed under
31 this chapter;

(7) "licensed dentist" means a dentist licensed under AS 08.36.

* **Sec. 18.** AS 08.36.010(a) is amended to read:

(a) There is created the Board of Dental Examiners consisting of nine members. Six members shall be licensed dentists who have been engaged in the practice of dentistry in the state for five years immediately preceding appointment, two members shall be dental hygienists licensed under AS 08.32 who have been engaged in the practice of dental hygiene in the state for five years immediately preceding appointment, and one member shall be a public member **who does not have a direct financial interest in the health care industry.**

* **Sec. 19.** AS 08.36.010 is amended by adding new subsections to read:

(c) Each member shall take an oath of office. The president or secretary elected under AS 08.36.030 may administer oaths. The oath shall be filed and preserved in the department.

(d) The board shall adopt a seal.

* **Sec. 20.** AS 08.36.030 is amended to read:

Sec. 08.36.030. Election of officers. **(a)** The board shall elect **from among its members**

(1) a president **who is a licensed dentist or licensed dental hygienist;**
and

(2) a secretary.

(b) **Officers elected under (a) of this section** [FROM AMONG ITS MEMBERS, EACH TO] serve for a term not to exceed two years.

* **Sec. 21.** AS 08.36.070 is amended to read:

Sec. 08.36.070. General powers. (a) The board shall

(1) provide for the examination of applicants and **the credentialing, registration, and licensure of** [ISSUE LICENSES TO] those applicants it finds qualified;

(2) **maintain a registry of** [REGISTER] licensed dentists, [AND] licensed dental hygienists, **and registered dental assistants** who are in good standing;

(3) affiliate with the American Association of Dental **Boards** [EXAMINERS] and pay annual dues to the association;

1 (4) hold hearings and order the disciplinary sanction of a person who
2 violates this chapter, AS 08.32, or a regulation of the board;

3 (5) supply forms for applications, licenses, permits, certificates,
4 **registration documents,** and other papers and records;

5 (6) enforce the provisions of this chapter and AS 08.32 and adopt or
6 amend the regulations necessary to make the provisions of this chapter and AS 08.32
7 effective;

8 (7) adopt regulations ensuring that renewal of **a license, registration,**
9 **or certificate under this chapter or a license, certificate, or endorsement under**
10 **AS 08.32** [REGISTRATION] is contingent upon proof of continued professional
11 competence [BY A LICENSED DENTIST OR LICENSED DENTAL HYGIENIST];

12 (8) [PROVIDE THE DEPARTMENT WITH THE REQUIREMENTS
13 FOR PROOF OF CONTINUED PROFESSIONAL COMPETENCE AND REQUEST
14 THE DEPARTMENT TO MAKE THESE REQUIREMENTS AVAILABLE TO
15 EACH LICENSED DENTIST AND LICENSED DENTAL HYGIENIST AT LEAST
16 ONE YEAR BEFORE THE DATE ON WHICH THE DENTIST OR DENTAL
17 HYGIENIST MUST RENEW REGISTRATION;

18 (9)] at least annually, cause to be published **on the Internet and** in a
19 newspaper of general circulation in each major city in the state a summary of
20 disciplinary actions the board has taken during the preceding calendar year;

21 **(9)** [(10)] issue permits or certificates to licensed dentists, licensed
22 dental hygienists, and dental assistants who meet standards determined by the board
23 for specific procedures that require specific education and training [;

24 (11) REGULATE THE REENTRY INTO PRACTICE OF INACTIVE
25 DENTISTS AND DENTAL HYGIENISTS;

26 (12) REQUIRE, AS A CONDITION OF A LICENSE OR LICENSE
27 RENEWAL ISSUED BY THE BOARD, THAT AN APPLICANT OR LICENSEE
28 HAS, AT THE TIME OF LICENSING OR RENEWAL AND MAINTAINS
29 THROUGHOUT THE PERIOD OF A LICENSE, CURRENT CERTIFICATION IN
30 CARDIOPULMONARY RESUSCITATION TECHNIQUES, EXCEPT THAT THE
31 BOARD MAY WAIVE THIS REQUIREMENT UNDER AN AGREEMENT WITH

1 THE APPLICANT OR LICENSEE IF THE APPLICANT OR LICENSEE
2 DOCUMENTS, TO THE SATISFACTION OF THE BOARD, THE EXISTENCE OF
3 A PHYSICAL IMPAIRMENT THAT RESULTS IN AN INABILITY TO BE
4 CERTIFIED IN CARDIOPULMONARY RESUSCITATION TECHNIQUES AND
5 THE AGREEMENT SPECIFIES THAT THE APPLICANT OR LICENSEE WILL
6 ENSURE THAT ANOTHER PERSON WHO IS CERTIFIED IN
7 CARDIOPULMONARY RESUSCITATION TECHNIQUES WILL BE IN THE
8 SAME ROOM AS THE APPLICANT OR LICENSEE WHENEVER THE
9 APPLICANT OR LICENSEE IS PRACTICING DENTISTRY ON A LIVING
10 PATIENT WHO IS ALSO PRESENT; THE BOARD MAY INCLUDE IN THE
11 AGREEMENT AN EXPIRATION DATE OR PROVIDE THAT THE AGREEMENT
12 REMAINS IN EFFECT UNTIL REVIEWED BY THE BOARD].

13 (b) The board may

14 (1) order a licensed dentist or licensed dental hygienist to submit to a
15 reasonable physical or mental examination if the dentist's or the dental hygienist's
16 physical or mental capacity to practice safely is at issue; [AND]

17 (2) authorize **a designee of the board or the board's investigator**
18 [ITS REPRESENTATIVE] to inspect the practice facilities or patient or professional
19 records of a dentist at reasonable times and in a reasonable manner to monitor
20 compliance with this chapter and with AS 08.32; **and**

21 **(3) delegate the board's powers to act, hear, and decide matters as**
22 **authorized by AS 44.62.**

23 * **Sec. 22.** AS 08.36 is amended by adding a new section to read:

24 **Sec. 08.36.073. Investigator.** After consulting with the board, the department
25 shall employ a person who is not a member of the board as the investigator for the
26 board. The investigator shall

27 (1) conduct investigations into alleged violations of this chapter and
28 into alleged violations of regulations and orders of the board;

29 (2) at the request of the board, conduct investigations based on
30 complaints filed with the department or with the board; and

31 (3) be directly responsible and accountable to the board, except that

1 only the department has authority to terminate the investigator's employment and the
2 department shall provide day-to-day and administrative supervision of the
3 investigator.

4 * **Sec. 23.** AS 08.36.075(a) is amended to read:

5 (a) ~~The~~ [SUBJECT TO (b) OF THIS SECTION, THE] board shall establish
6 standards that comply with applicable federal law for the registration, ~~use,~~ and
7 inspection of dental radiological equipment, including standards for record keeping
8 relating to the control panels and the use of the equipment. The board may charge a
9 fee for dental radiological equipment registered under this section [INSPECTION
10 STANDARDS ADOPTED BY THE BOARD MUST REQUIRE THAT AN
11 INSPECTION BE PERFORMED BY A PERSON WHO HAS QUALIFICATIONS
12 EQUIVALENT TO THE QUALIFICATIONS ESTABLISHED AS OF
13 SEPTEMBER 7, 1998, IN THE "APPLICANT PROFILE AND JOB
14 QUALIFICATION SUMMARY" FOR A STATE RADIOLOGICAL HEALTH
15 SPECIALIST I].

16 * **Sec. 24.** AS 08.36.091 is amended to read:

17 **Sec. 08.36.091. Records and reports.** The board shall maintain

18 (1) a record of its proceedings;

19 (2) a registry [REGISTER] containing the name, office and home
20 addresses, and other information considered necessary by the board [,] of each person
21 licensed as a dentist or dental hygienist or registered as a dental assistant, [AND] a
22 registry [REGISTER] of the licenses, certificates, registrations, and endorsements
23 revoked by the board, and information on the status of each licensee and each
24 registered dental assistant.

25 * **Sec. 25.** AS 08.36.100 is amended to read:

26 **Sec. 08.36.100. License required.** Except as provided in AS 08.36.238, a
27 person may not practice, or attempt to practice, dentistry without a license [AND A
28 CURRENT CERTIFICATE OF REGISTRATION].

29 * **Sec. 26.** AS 08.36.110 is amended to read:

30 **Sec. 08.36.110. Qualifications for license.** An applicant for a license to
31 practice dentistry shall

1 (1) provide certification to the board that the applicant

2 (A) is a graduate of a dental school that, at the time of
3 graduation, is **approved** [ACCREDITED] by the **board** [COMMISSION ON
4 ACCREDITATION OF THE AMERICAN DENTAL ASSOCIATION];

5 (B) [HOLDS A CERTIFICATE FROM THE AMERICAN
6 DENTAL ASSOCIATION JOINT COMMISSION ON NATIONAL
7 DENTAL EXAMINATIONS THAT THE APPLICANT] has successfully
8 passed **a** [THE] written **examination approved** [EXAMINATIONS GIVEN]
9 by the **board** [COMMISSION];

10 (C) has not had a license to practice dentistry revoked,
11 suspended, or voluntarily surrendered in this state or another state;

12 (D) is not the subject of an adverse decision based upon a
13 complaint, investigation, review procedure, or other disciplinary proceeding
14 within the five years immediately preceding application, or of an unresolved
15 complaint, investigation, review procedure, or other disciplinary proceeding,
16 undertaken by a state, territorial, local, or federal dental licensing jurisdiction
17 [OR A DENTAL SOCIETY];

18 (E) is not the subject of an unresolved or an adverse decision
19 based upon a complaint, investigation, review procedure, or other disciplinary
20 proceeding, undertaken by a state, territorial, local, or federal dental licensing
21 jurisdiction [, DENTAL SOCIETY,] or law enforcement agency that relates to
22 criminal or fraudulent activity, dental malpractice, or negligent dental care and
23 that adversely reflects on the applicant's ability or competence to practice
24 dentistry or on the safety or well-being of patients;

25 (F) is not the subject of an adverse report from the National
26 Practitioner Data Bank or the American Association of Dental **Boards**
27 [EXAMINERS] Clearinghouse for Board Actions that relates to criminal or
28 fraudulent activity, or dental malpractice;

29 (G) is not impaired to an extent that affects the applicant's
30 ability to practice dentistry;

31 (H) has not been convicted of a crime that adversely reflects on

1 the applicant's ability or competency to practice dentistry or that jeopardizes
2 the safety or well-being of a patient;

3 (2) pass, to the satisfaction of the board, written, clinical, and other
4 examinations administered or approved by the board; and

5 (3) meet the other qualifications for a license established by the board
6 by regulation.

7 * **Sec. 27.** AS 08.36.110 is amended by adding a new subsection to read:

8 (b) An applicant for licensure may be interviewed in person by the board or by
9 a member of the board before a license is issued. The interview must be recorded. If
10 the application is denied on the basis of the interview, the denial shall be stated in
11 writing, with the reasons for it, and the record shall be preserved.

12 * **Sec. 28.** AS 08.36.234(a) is repealed and reenacted to read:

13 (a) The board may waive the examination requirement and license by
14 credentials if the dentist applicant meets the requirements of AS 08.36.110, submits
15 proof of continued competence as required by regulation, pays the required fee, and
16 has

17 (1) an active license from a board of dental examiners established
18 under the laws of a state or territory of the United States issued after thorough
19 examination; or

20 (2) passed an examination as specified by the board in regulations.

21 * **Sec. 29.** AS 08.36.234(b) is amended to read:

22 (b) A dentist applying for licensure without [CLINICAL] examination is
23 responsible for providing to the board all materials required by [THIS SECTION OR
24 BY] the board to implement this section to establish eligibility for a license without
25 [CLINICAL] examination. In addition to the grounds for revocation of a license under
26 AS 08.36.315, the board may revoke a license issued without [A CLINICAL]
27 examination upon evidence of misinformation or substantial omission.

28 * **Sec. 30.** AS 08.36.234 is amended by adding a new subsection to read:

29 (d) A dentist applying for licensure without examination shall be interviewed
30 in person by the board or by a member of the board before a license is issued. The
31 interview must be recorded. If the application is denied on the basis of the interview,

1 the denial shall be stated in writing, with the reasons for it, and the record shall be
2 preserved.

3 * **Sec. 31.** AS 08.36.238(a) is amended to read:

4 (a) A person enrolled as a [FULL-TIME] student in an accredited school of
5 dentistry may perform procedures as part of a course of study without a license if

6 (1) the procedures are performed under the direct supervision of a
7 member of the faculty who is licensed under this chapter, or under the direct
8 supervision of a team of licensed faculty dentists, at least one of whom is licensed
9 under this chapter; and

10 (2) the clinical program has received written approval from the board.

11 * **Sec. 32.** AS 08.36.250(a) is amended to read:

12 (a) At least 60 days before expiration of a license issued under this chapter
13 [LICENSEE'S REGISTRATION CERTIFICATE], the department shall notify the
14 [MAIL A FORM FOR RENEWAL OF REGISTRATION TO EACH] licensed
15 dentist. A licensee who wishes to renew a license shall submit a completed license
16 renewal form. [COMPLETE THE FORM AND RETURN IT WITH] the appropriate
17 fee, and evidence of continued professional competence as required by the board. The
18 department shall, as soon as practicable, issue a new license [REGISTRATION
19 CERTIFICATE] valid for a stated number of years. [A LICENSEE SHALL KEEP
20 THE REGISTRATION CERTIFICATE BESIDE OR ATTACHED TO THE
21 LICENSEE'S LICENSE.] Failure to receive notification from the department under
22 this subsection [THE REGISTRATION FORM] does not exempt a licensee from
23 renewing a license to practice dentistry under this chapter [REGISTRATION].

24 * **Sec. 33.** AS 08.36.250 is amended by adding a new subsection to read:

25 (c) A licensed dentist who does not pay the license renewal fee forfeits the
26 dentist's license. The board may reinstate the license without examination within two
27 years after the date on which payment was due upon written application, proof of
28 continued professional competence, and payment of all unpaid renewal fees and any
29 penalty fee established under AS 08.01.100(b).

30 * **Sec. 34.** AS 08.36.315 is amended to read:

31 **Sec. 08.36.315. Grounds for discipline, suspension, or revocation of license.**

1 The board may revoke or suspend the license of a dentist, or may reprimand, censure,
2 or discipline a dentist, or both, if the board finds after a hearing that the dentist

3 (1) used or knowingly cooperated in deceit, fraud, or intentional
4 misrepresentation to obtain a license;

5 (2) engaged in deceit, fraud, or intentional misrepresentation in the
6 course of providing or billing for professional dental services or engaging in
7 professional activities;

8 (3) advertised professional dental services in a false or misleading
9 manner;

10 (4) received compensation for referring a person to another dentist or
11 dental practice;

12 (5) has been convicted of a felony or other crime that affects the
13 dentist's ability to continue to practice dentistry competently and safely;

14 (6) engaged in the performance of patient care, or permitted the
15 performance of patient care by persons under the dentist's supervision, **regardless of**
16 **whether actual injury to the patient occurred.**

17 (A) that **did** [DOES] not conform to minimum professional
18 standards of dentistry [REGARDLESS OF WHETHER ACTUAL INJURY
19 TO THE PATIENT OCCURRED]; **or**

20 (B) **when the dentist, or a person under the supervision of**
21 **the dentist, did not have the permit, registration, or certificate required**
22 **under AS 08.32 or this chapter;**

23 (7) failed to comply with this chapter, with a regulation adopted under
24 this chapter, or with an order of the board;

25 (8) continued to practice after becoming unfit due to

26 (A) professional incompetence;

27 (B) [FAILURE TO KEEP INFORMED OF OR USE
28 CURRENT PROFESSIONAL THEORIES OR PRACTICES;

29 (C) addiction or dependence on alcohol or other drugs that
30 **impair** [IMPAIRS] the dentist's ability to practice safely;

31 (C) [(D)] physical or mental disability;

1 (9) engaged in lewd or immoral conduct in connection with the
2 delivery of professional service to patients;

3 (10) permitted a dental hygienist or dental assistant who is employed
4 by the dentist or working under the dentist's supervision to perform a dental procedure
5 in violation of AS 08.32.110 or **AS 08.36.346** [AS 08.36.070(a)(10)];

6 (11) failed to report to the board a death that occurred on the premises
7 used for the practice of dentistry within 48 hours;

8 **(12) falsified or destroyed patient or facility records or failed to**
9 **maintain a patient or facility record for at least seven years after the date the**
10 **record was created.**

11 * **Sec. 35.** AS 08.36.344(a) is amended to read:

12 (a) The board shall issue a restorative function certificate to a dental assistant
13 if the dental assistant furnishes evidence satisfactory to the board that the dental
14 assistant has

15 (1) successfully completed a **course offered by or under the auspices**
16 **of a** program accredited by the Commission on Dental Accreditation of the American
17 Dental Association or other **equivalent** course **or program** [OF INSTRUCTION]
18 approved by the board; and

19 (2) passed the Western Regional Examining Board's restorative
20 examination or other equivalent examination approved by the board within the five
21 years preceding the dental assistant's certificate application, or the dental assistant has
22 legal authorization from another state or jurisdiction to perform restorative functions.

23 * **Sec. 36.** AS 08.36 is amended by adding a new section to read:

24 **Sec. 08.36.347. Exemption from registration requirement.** (a) A person
25 enrolled in a program or course of study may perform dental assisting procedures as
26 part of that program or course of study without a registration document if the
27 procedures are performed

28 (1) under the direct supervision of a member of the faculty who is
29 licensed under this chapter or AS 08.32; and

30 (2) as part of a clinical program that has received written approval
31 from the board.

(b) A person performing dental assisting procedures under (a) of this section is subject to all other provisions of this chapter and statutes and regulations that apply to the practice of dental assisting by a registered dental assistant.

* **Sec. 37.** AS 08.36.350(a) is amended to read:

(a) This chapter applies to a person who practices, or offers or attempts to practice, dentistry in the state except

(1) a dental surgeon or dentist in the military service in the discharge of official duties;

(2) a dentist in the employ of the United States Public Health Service, United States Department of Veterans Affairs, United States Indian Health [ALASKA NATIVE] Service, or other agency of the federal government, in the discharge of official duties;

(3) [A PHYSICIAN OR SURGEON;

(4) A DENTIST PROVIDING CARE IN AN ISOLATED AREA BY AUTHORITY OF A PERMIT ISSUED UNDER AS 08.36.271;

(5)] a dentist licensed in another state who is teaching or demonstrating clinical techniques at a meeting, seminar, or limited course of instruction sponsored by a dental or dental auxiliary society or association or by an accredited dental or dental auxiliary educational institution;

(4)[(6)] a dentist licensed in another state who provides emergency care to an injured or ill person who reasonably appears to the dentist to be in immediate need of emergency aid in order to avoid serious harm or death if the care is provided without remuneration;

(5) a dentist employed in the state by an Indian health program, as that term is defined in 25 U.S.C. 1603, while providing dental services to a person the Indian health program is entitled to serve under 25 U.S.C. 450 et seq. (Indian Self-Determination and Education Assistance Act), as amended, and 25 U.S.C. 1601 et seq. (Indian Health Care Improvement Act), as amended.

* **Sec. 38.** AS 08.36 is amended by adding a new section to read:

Sec. 08.36.367. Ownership of a dental office or facility. (a) Only a person who holds a valid license issued under this chapter may own, operate, or maintain a

1 dental practice, office, or clinic. This restriction does not apply to

2 (1) a labor organization or a nonprofit organization formed by or on
3 behalf of a labor organization for the purpose of providing dental services to rural or
4 underserved populations;

5 (2) an institution of higher education recognized by the board;

6 (3) a local government;

7 (4) an institution or program accredited by the Commission on Dental
8 Accreditation of the American Dental Association to provide education and training;

9 (5) a nonprofit corporation organized under state law to provide dental
10 services to rural areas and medically underserved populations of migrant, rural
11 community, or homeless individuals under 42 U.S.C. 254b or 254c or health centers
12 qualified under 42 U.S.C. 1396d(l)(2)(B) operating in compliance with other
13 applicable state and federal law;

14 (6) a nonprofit charitable corporation described in 26 U.S.C. 501(c)(3)
15 (Internal Revenue Code) and determined by the board to be providing dental services
16 by volunteer licensed dentists to populations with limited access to dental care at no
17 charge or a substantially reduced charge.

18 (b) For the purpose of owning or operating a dental practice, office, or clinic,
19 an entity described in (a) of this section shall

20 (1) name a licensed dentist as its dental director, who shall be subject
21 to the provisions of AS 08.36.315 and 08.36.317 in the capacity of dental director; the
22 dental director, or an actively licensed dentist designated by the director, shall have
23 responsibility for the entity's practice of dentistry; and

24 (2) maintain current records of the names of licensed dentists who
25 supervise dental hygienists, dental assistants, and other personnel involved in direct
26 patient care who are employed by the entity; the records must be available to the board
27 upon written request.

28 (c) Nothing in this chapter precludes a person or entity not licensed by the
29 board from

30 (1) ownership or leasehold of any tangible or intangible assets used in
31 a dental office or clinic, including real property, furnishings, equipment, and

1 inventory, but not including dental records of patients related to clinical care;

2 (2) employing or contracting for the services of personnel other than
3 licensed dentists; or

4 (3) management of the business aspects of a dental office or clinic that
5 do not include the practice of dentistry.

6 (d) If all of the ownership interests of a dentist or dentists in a dental office or
7 clinic are held by an administrator, executor, personal representative, guardian,
8 conservator, or receiver of the estate of a former shareholder, member, or partner, the
9 administrator, executor, personal representative, guardian, conservator, or receiver
10 may retain the ownership interest for a period of 24 months following the creation of
11 the ownership interest. The board shall extend the ownership period for an additional
12 24 months upon 30 days' notice and may grant additional extensions upon reasonable
13 request.

14 (e) In this section, "labor organization" means an organization, not for
15 pecuniary profit, constituted wholly or partly to bargain collectively or deal with
16 employers, including the state and its political subdivisions, concerning grievances,
17 terms or conditions of employment, or other mutual aid or protection in connection
18 with employees that has existed for at least three years and that has a constitution and
19 bylaws.

20 * **Sec. 39.** AS 08.36.370 is amended by adding new paragraphs to read:

21 (7) "licensed dental hygienist" means a dental hygienist licensed under 22 AS 08.32;

22 (8) "licensed dentist" means a dentist licensed under this chapter;

23 (9) "registered dental assistant" means a dental assistant registered
24 under this chapter.
25

26 * **Sec. 40.** AS 08.32.020, 08.32.035, 08.32.040, 08.32.060, 08.32.097, 08.32.100, 08.32.120,
27 08.32.130, 08.32.140, 08.32.190(2); AS 08.36.075(b), 08.36.075(c), 08.36.075(d),
28 08.36.075(e), 08.36.114, 08.36.230, 08.36.244, 08.36.246, 08.36.247, 08.36.248, 08.36.260,
29 08.36.271, and 08.36.290 are repealed.

30 * **Sec. 41.** The uncoded law of the State of Alaska is amended by adding a new section to
31 read:

1 REVISOR'S INSTRUCTION. The revisor of statutes shall change the catch line of
2 AS 08.36.250 from "Renewal of registration" to "License renewal, lapse, and reinstatement."

HOUSE CS FOR CS FOR SENATE BILL NO. 160(FIN) am H

IN THE LEGISLATURE OF THE STATE OF ALASKA

TWENTIETH LEGISLATURE - SECOND SESSION

BY THE HOUSE FINANCE COMMITTEE

Amended: 5/9/98

Offered: 5/8/98

Sponsor(s): SENATOR TAYLOR BY REQUEST

A BILL

FOR AN ACT ENTITLED

1 "An Act relating to radiological equipment used in the practice of dentistry."

2 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

3 * Section 1. AS 08.36 is amended by adding a new section to read:

4 Sec. 08.36.075. Dental radiological equipment. (a) Subject to (b) of this
5 section, the board shall establish standards for the registration and inspection of dental
6 radiological equipment, including standards for record keeping relating to the control
7 panels and the use of the equipment. The inspection standards adopted by the board
8 must require that an inspection be performed by a person who has qualifications
9 equivalent to the qualifications established as of the effective date of this Act in the
10 "Applicant Profile and Job Qualification Summary" for a state Radiological Health
11 Specialist I.

12 (b) The board may not adopt a standard under this section that is more
13 stringent than a standard applicable under federal law or regulations or that is more
14 strict than a manufacturer's standard that is applicable to the same aspect of the dental
15 radiological equipment except that, if a federal standard is different from the

1 manufacturer's standard on the same subject, the board shall adopt the stricter of the
2 two standards unless adoption of the other standard would not present a risk of harm
3 to the public or to the operator of the equipment.

4 (c) A dentist may not use, or allow a person under the dentist's supervision to
5 use, dental radiological equipment in this state unless the owner or lessee of the
6 equipment has registered the equipment's control panel with the board and the control
7 panel displays a seal indicating that it has been registered. The board may charge the
8 owner or lessee of the dental radiological equipment a fee for the registration of each
9 control panel registered under this subsection. For each registered control panel, the
10 board shall issue to the owner or lessee a registration seal that indicates that the
11 registration requirement has been met.

12 (d) The board shall require that inspection of dental radiological equipment
13 occur once within every five calendar years and require that records concerning the
14 inspection be provided to the board by the owner or lessee of the equipment and kept
15 on file where the equipment is located. The board shall, upon application by the
16 owner or lessee of the dental radiological equipment, submission of evidence
17 documenting compliance with the inspection standards of the board, and payment of
18 a fee set by the board, issue to the owner or lessee an inspection seal indicating the
19 date by which the dental radiological equipment must pass inspection again. The date
20 on the inspection seal shall be December 31 of the fourth calendar year that occurs
21 after the calendar year in which the inspection occurred. A dentist may not use, or
22 allow a person under the dentist's supervision to use, dental radiological equipment in
23 this state after the date on the most recent inspection seal.

24 (e) Fees charged under this section may not be higher than the amount
25 necessary to cover the board's cost of registering a control panel or approving the
26 inspection of dental radiological equipment, as appropriate, plus the cost of issuing the
27 applicable seals.

28 (f) In this section, "dental radiological equipment" means equipment for use
29 in the practice of dentistry, consisting of a control panel and associated tube heads, if
30 the equipment emits electronic product radiation, as defined in AS 18.60.545, or uses
31 radionuclides, as defined in AS 18.60.545.

* **Sec. 2.** AS 18.05 is amended by adding a new section to read:

Sec. 18.05.065. Dental radiological equipment. This chapter does not authorize the department to register, inspect, test, or otherwise regulate dental radiological equipment or records relating to dental radiological equipment regulated by the Board of Dental Examiners under AS 08.36.075.

* **Sec. 3.** AS 18.60.525 is amended by adding a new subsection to read:

(e) AS 18.60.475 - 18.60.545 do not authorize the department to register, inspect, test, or otherwise regulate dental radiological equipment or records relating to dental radiological equipment regulated by the Board of Dental Examiners under AS 08.36.075.

* **Sec. 4.** AS 44.29 is amended by adding a new section to read:

Sec. 44.29.027. Dental radiological equipment. This chapter does not authorize the department to register, inspect, test, or otherwise regulate dental radiological equipment or records relating to dental radiological equipment regulated by the Board of Dental Examiners under AS 08.36.075.

* **Sec. 5.** AS 44.46 is amended by adding a new section to read:

Sec. 44.46.029. Dental radiological equipment. This chapter does not authorize the department to register, inspect, test, or otherwise regulate dental radiological equipment or records relating to dental radiological equipment regulated by the Board of Dental Examiners under AS 08.36.075.

* **Sec. 6.** AS 46.03 is amended by adding a new section to read:

Sec. 46.03.022. Dental radiological equipment. This title does not authorize the department to register, inspect, test, or otherwise regulate dental radiological equipment or records relating to dental radiological equipment regulated by the Board of Dental Examiners under AS 08.36.075.

* **Sec. 7. TRANSITIONAL PROVISIONS.** (a) All litigation, hearings, investigations, and other proceedings pending under a law amended by this Act, or in connection with functions transferred by this Act, continue in effect and may be continued and completed notwithstanding a transfer or amendment provided for in this Act. Certificates, orders, and regulations issued or adopted under authority of a law amended by this Act remain in effect for the term issued or until revoked, vacated, or otherwise modified under the provisions of

1 this Act. All contracts, rights, liabilities, and obligations created by or under a law amended
2 by this Act, and in effect on the day before the effective date of this Act, remain in effect
3 notwithstanding this Act's taking effect. Records of agencies of the state whose functions are
4 transferred under this Act shall be transferred commensurate with the provisions of this Act.

5 (b) Notwithstanding other provisions of this Act, the Department of Health and Social
6 Services and the Department of Environmental Conservation may continue to regulate dental
7 radiological equipment and record keeping relating to dental radiological equipment, as
8 defined in AS 08.36.075, added by sec. 1 of this Act, to the same extent that the respective
9 departments were authorized to regulate dental radiological equipment and records on the day
10 before the effective date of this Act until the effective date of regulations adopted by the
11 Board of Dental Examiners to implement AS 08.36.075, added by sec. 1 of this Act.

12 (c) Notwithstanding other provisions of this Act, a person is not considered to be in
13 violation of AS 08.36.075(c) or (d), added by sec. 1 of this Act, unless the violation occurs
14 more than one year after the effective date of regulations adopted by the Board of Dental
15 Examiners to implement AS 08.36.075, added by sec. 1 of this Act.

Dr. Nielson requests this topic 11/19/18 - This is in reference to 08.01.064(a)(2) in central statute and how it may apply to things like restorative function 28.850, 28.750 and coronal polish 28.810 certificate training. Can/should we accept military training for that?

Sec. 08.01.064. Military education, training, and service credit; temporary license. (a) Notwithstanding another provision of law, the department or applicable board shall accept military education, training, and service for some or all of the qualifications otherwise required of an applicant for a license or certificate issued under this chapter if

(1) the department or applicable board determines that the military education, training, and service is substantially equivalent to some or all of the qualifications otherwise required of an applicant for a license or certificate issued under this chapter; and

(2) the applicant provides satisfactory evidence of successful completion of the education, training, or service as a member of the armed forces of the United States, the United States Reserves, the National Guard of any state, the Military Reserves of any state, or the Naval Militia of any state.

(b) If the department issues temporary licenses or certificates as authorized by the department or applicable board under AS 08.01.050(a)(9), the department or applicable board shall issue a temporary license or certificate to a person who

(1) applies to the department or applicable board in a manner prescribed by the department or board;

(2) meets the requirements in AS 08.01.063(a)(3) - (6); and

(3) while in the armed forces of the United States or any state, as described in (a) of this section,

(A) held a current license or certificate in another state, district, or territory of the United States, practiced in the area of the license or certificate, and maintained the license or certificate in active status before and at the time of application for a license or certificate under this subsection; or

(B) was awarded a degree, diploma, or certificate by a branch of the armed forces of the United States or any state, as described in (a) of this section, that met standards for an equivalent license or a certificate of technical training.

(c) The department or applicable board shall expedite the procedure for issuance of a license or certificate under (b) of this section for an applicant who is on active duty.

(d) A license or certificate issued under (b) of this section is valid for 180 days and may be extended at the discretion of the department or applicable board for one additional 180-day period if the holder of the license or certificate applies for an extension on a form approved by the department or applicable board.

(e) The department or applicable board may adopt regulations necessary to implement this section.

12 AAC 28.850. RESTORATIVE FUNCTIONS BY DENTAL ASSISTANTS. (a) The board will issue a certificate to perform restorative functions to a dental assistant in this state who meets the requirements of AS 08.36.344 and this section.

(b) An applicant for certification under this section must submit to the department

(1) a complete, notarized application on a form provided by the department;

(2) the following fees:

(A) \$60 nonrefundable application fee;

(B) \$60 certification fee;

(3) verification that the applicant has successfully completed either

(A) a restorative function program accredited by the Commission on Dental Accreditation of the American Dental Association; or

(B) another course of instruction approved by the board under 12 AAC 28.860; and

(4) verification that the applicant either

(A) has legal authorization from another state or jurisdiction to perform restorative functions; or
(B) within the five years immediately before the date of application for a certificate under this section, the applicant has passed either the restorative function examination of the Western Regional Examining Board or a restorative function examination approved by the board as equivalent to the restorative function examination of the Western Regional Examining Board.

12 AAC 28.750. RESTORATIVE FUNCTIONS BY DENTAL HYGIENISTS. (a) The board will issue an endorsement to perform restorative functions to a dental hygienist licensed in this state who meets the requirements of AS 08.32.085 and this section.

(b) An applicant for an endorsement under this section must submit to the department

(1) a complete, notarized application on a form provided by the department;

(2) the applicable fees under 12 AAC 02;

(3) verification that the applicant has successfully completed either

(A) a restorative function program accredited by the Commission on Dental Accreditation of the American Dental Association; or

(B) another course of instruction approved by the board under 12 AAC 28.760; and

(4) verification that the applicant either

(A) is licensed in another state or United States territory to perform restorative functions; or

(B) within the five years immediately before the date of application for an endorsement under this section, the applicant has passed either the restorative function examination of the Western Regional Examining Board or a restorative function examination approved by the board as equivalent to the restorative function examination of the Western Regional Examining Board.

12 AAC 28.810. CORONAL POLISHING BY DENTAL ASSISTANTS. (a) The board will issue a certificate to perform coronal polishing to a dental assistant who meets the requirements of AS 08.36.342 and this section.

(b) An applicant for certification under this section must submit to the department

(1) a complete, notarized application on a form provided by the department;

(2) the following fees:

(A) \$60 nonrefundable application fee;

(B) \$60 certification fee;

(3) either

(A) verification of successful completion of a course of instruction approved by the board under 12 AAC 28.820; or

(B) if the applicant is currently licensed or certified in another licensing jurisdiction to perform coronal polishing, evidence showing that the applicant's license or certificate to perform coronal polishing is current and in good standing in that licensing jurisdiction and a list of course of instruction for coronal polishing; the board will only approve the course of instruction under this subparagraph if it substantially complies with the requirements set out in 12 AAC 28.830.

Chapter 28. Board of Dental Examiners.

(Words in **boldface and underlined** indicate language being added; words [CAPITALIZED AND BRACKETED] indicate language being deleted. Complete new sections are not in boldface or underlined.)

12 AAC 28.360 is amended to read:

12 AAC 28.360. **Registry.** The board will maintain a registry of all [BOARD APPROVED COURSES OF INSTRUCTION AND ALL] dental hygienists certified to administer local anesthetic agents or nitrous oxide sedation. (Eff. 5/31/81, Register 78; am 4/14/2018, Register 226; am ____/____/____, Register ____)

Authority: AS 08.32.110 AS 08.36.070

12 AAC 28.925(a)(2) is amended to read:

(2) pays the renewal fee established in 12 AAC 02.190(a)(4), (a)**10** [8], (b)**6** [5], (b)**10** [6], and (b)**13** [14], as applicable; and
(Eff. 1/15/2003, Register 165; am 12/15/2013, Register 208; ____/____/____, Register ____)

Authority: AS 08.32.081 AS 08.36.070 AS 08.36.250

12 AAC 28.937(c)(4)(B) is amended to read:

(B) that the applicant has been **licensed for five years and** in active clinical practice documenting at least 2,500 hours for five years immediately preceding application;

12 AAC 28.937(c)(7) is amended to read:

Register _____, _____ 2019 PROFESSIONAL REGULATIONS

(7) affidavits from three licensed dentists or licensed dental hygienists stating the applicant has been **licensed for five years and** in active clinical practice documenting at least 2,500 hours during the five years immediately preceding **the date of** application.

(Eff. 1/22/2004, Register 169; am 5/5/2006, Register 178; am 12/5/2009, Register 192; am 12/15/2013, Register 208; am 3/11/2016, Register 217; am ____/____/____, Register ____)

Authority: AS 08.32.014 AS 08.32.070 AS 08.36.070
AS 08.32.030

12 AAC 28.940(b)(8)(B)(vi) is amended to read:

(vi) patient based operative examination that includes one class II posterior alloy **or** [AND] one composite procedure, **and one additional operative procedure** either anterior class III or posterior class II; or
(Eff. 1/28/2000, Register 153; am 8/15/2001, Register 159; am 1/15/2003, Register 165; am 1/22/2004, Register 169; am 4/27/2007, Register 182; am 10/19/2008, Register 188; am 12/2/2012, Register 204; am 12/15/2013, Register 208; am 9/26/2018, Register 227; am ____/____/____, Register ____)

Authority: AS 08.36.070 AS 08.36.110

12 AAC 28.951(c)(6)(B) is amended to read:

(B) the applicant has been **licensed for five years and** in active clinical practice documenting at least 5,000 hours;

12 AAC 28.951(c)(11) is amended to read:

(11) affidavits from three licensed dentists documenting the applicant has been **licensed for five years and** in active clinical practice for at least 5,000 hours during the five years immediately preceding the date of application;

(Eff. 2/18/93, Register 125; am 2/4/94, Register 129; am 2/22/98, Register 145; am 1/28/2000, Register 153; am 8/15/2001, Register 159; am 1/22/2004, Register 169; am 5/5/2006, Register 178; am 10/19/2008, Register 188; am 12/15/2013, Register 208; am 3/11/2016, Register 217; am ____/____/____, Register ____)

Authority: AS 08.36.070 AS 08.36.110 AS 08.36.234

12 AAC 28.955(a) is amended to read:

(a) The board will issue a courtesy license to practice dentistry or dental hygiene **to a non-resident** for only a limited purpose that is approved by the board under (b) of this section to an applicant who meet the requirements of this section. The board will specify the limitations on scope of the approved practice and duration of the courtesy license. A courtesy license does not authorize the licensee to practice dentistry or dental hygiene outside the limited purpose that is specified on the courtesy license.

12 AAC 28.955(i) is amended by adding a new paragraph to read:

(3) “non-resident” means individuals with permanent residence outside this state or members of the military stationed in this state. (Eff. 12/24/2006, Register 180; am 12/15/2013, Register 208; am ____/____/____, Register ____)

Authority: AS 08.01.062 AS 08.32.165 AS 08.36.234
AS 08.32.160 AS 08.36.110 AS 08.36.315

Item 13

- PDMP – Unsolicited Notifications

Item 14

- Local Anesthetic Certificate
 - Questions about qualifications

Local Anesthetic application – A RDH has held a license for 10 years. Administered local anesthetic for 8.5 years. Last 1.5 years she worked in a clinic where the dentist administered all LA. How can she qualify for the LA permit?

12 AAC 28.320. APPLICATION FOR CERTIFICATION TO ADMINISTER LOCAL ANESTHETIC

AGENTS. (a) The board will issue, to a dental hygienist licensed in this state, a certification to administer local anesthetic agents if the licensed hygienist submits

- (1) a completed, notarized application on the form provided by the department;
- (2) the applicable fees required in 12 AAC 02.190;
- (3) written verification of successful completion of an accredited college or university course of instruction in the administration of local anesthetics, approved by the board under 12 AAC 28.330 - 12 AAC 28.340; and

(4) evidence of having passed the local anesthetic portion of the Western Regional Examining Board (WREB) dental hygienist examination within the five years immediately preceding the date of application.

(b) Instead of meeting the requirements of (a)(4) of this section, an applicant who is currently licensed or certified in another licensing jurisdiction to administer local anesthetic agents may submit evidence showing that the

(1) applicant's license or certification in that licensing jurisdiction is current and in good standing;

(2) applicant has actively, as part of routine dental hygiene procedure, administered local anesthetic agents at least an average of once per week during the two years immediately preceding the date of application.

Item 15

- Administering IV medications
 - Who qualifies to administer the IV medications

Item 16

- CE course Approval Application Review
 - BLS for Healthcare Providers
 - Opioid Crisis
 - BTY Dental – Self Study

CE COURSE APPROVAL CHECKLIST

Name of Course BLS for Healthcare Providers

Course Provider EMS Safety Services

Name of Instructor Paul Lepore

9/6/18 Completed application, without any signatures, form # 08-4241

8/27/18 A detailed outline which provides course content, and clearly breaks down the amount of time spent on each portion of the course and the direct relation to patient care.

 Information regarding the instructor of the course

9/6/18 \$50 fee Renewal? ☐ Receipt # 201820085338

 Approved by board via mail ballot

Comments:



THE STATE
of **ALASKA**

Department of Commerce, Community and Economic Development
Division of Corporations, Business and Professional Licensing

Board of Dental Examiners

State Office Building, 333 Willoughby Avenue, 9th Floor
PO Box 110806, Juneau, AK 99811-0806
Phone: (907) 465-2550 • Fax: (907) 465-2974
Email: license@alaska.gov
ProfessionalLicense.Alaska.Gov/BoardOfDentalExaminers



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Juneau

SEP 06 2018

CBPL

CC 50 B

Course Approval Application

Per 12 AAC 28.410, the Board will accept courses workshops, or symposiums approved, provided, or sponsored by the American Dental Hygienists' Association (ADHA), Academy of General Dentistry (AGD), or American Dental Association (ADA), other courses, workshops, or symposiums approved by the Board that are offered by dental or dental hygiene colleges or universities, or similar dental or dental hygiene organizations or associations.

The Board will accept self-study programs offered by a dental or dental hygiene college or university, the AGD, or the ADA that have been approved by the Board. A licensee may obtain all of their required continuing education by self-study.

DIVISION USE ONLY

Course ID:

Credit Hours:

Type:

Course Approved:

Course Expires:

PART I Payment of Fees

Required Fees:

☒ Application Fee

\$50

☐ Resubmission of Application Fee

\$50

PART II Course Information

Course Title:	BLS for Healthcare Providers
Course Type:	<input checked="" type="checkbox"/> Course, Workshop, or Symposium <input type="checkbox"/> Organized Study Club <input type="checkbox"/> Self-Study Club
Number of Credit Hours:	6
Date of Course:	Open
Person Conducting the Course:	
Course Sponsor:	EMS Safety Services, Inc.
Sponsor Address:	1046 Calle Recodo, Suite K
Sponsor Contact:	Paul Lepore
Sponsor Phone:	949-325-9676

RECEIVED
Juneau

SEP 06 2018

PART II Course Information**(continued)**

CBPL

A detailed outline which provides course content and clearly breaks down the amount of time spent on each portion of the course and the direct relation to patient care must be submitted with application.

Courses will be accepted as continuing education under 12 AAC 28.400-.420 if participation is verifiable and the subject matter relates directly to dental patient clinical care.

Content Summary:	CPR (Adult, Child, and Infant)	Hours:	3.5
Content Summary:	Skills Testing	Hours:	1
Content Summary:	Scene Size-Up, Legal Issues, and BBP	Hours:	.5
Content Summary:	Team CPR	Hours:	1

☐ Official in Charge☐ Lecturer

Signature:



Date:

8/9/2018

Date approved by the Board of Dental Examiners: _____



560 W. Lake St. 312.440.4300
Sixth Floor Fax: 312.440.0559
Chicago, IL USA Toll-free: 888.243.3368
60661-6600 agd.org

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AUG 27 2018

April 30, 2018

CBPL

Provider ID# 355121
EMS Safety Services Inc.
Krysten Winstead
1046 Calle Recodo Ste K
San Clemente, CA 92673-6261

Dear Ms. Winstead:

Congratulations! On behalf of the Academy of General Dentistry (AGD), I am pleased to inform you that **EMS Safety Services Inc.**, provider ID # **355121**, has received approval from the AGD Program Approval for Continuing Education (PACE) Council. Please use your provider ID number on all correspondence. The approval period extends from **9/1/2018 to 8/31/2022**. Check your listing on the *Find a PACE Approved Provider* page of the AGD Website. E-mail PACE@agd.org if there are any corrections or updates to your information. The PACE Council noted the following concerns with your application. The council expects to see improvements in each of the areas listed within the next twelve (12) months:

Publicity: Programs providers are required to develop all publicity according PACE Standard IX to ensure it is informative and not misleading. Please work to make sure all future publicity produced by your organization includes the elements listed in Standard IX.

Course Records: As a program provider, you are responsible for maintaining permanent and accurate records. Standard XI requires approved provider to keep records for a minimum of seven years. Please make sure your course records includes the elements listed in the guidelines.

Please review the current PACE Program Guidelines available on the AGD Website. PACE Standard XI requires all PACE providers to submit CE credits for AGD member attendees to the AGD within 30 days of course completion. **Effective Jan. 1 2017 all approved providers must submit CE through the AGD Website.** To read more about this please log on to www.agd.org. Enter **355121** as your username/member ID. New users should use the password **agdpac** and then change it for better security. Next scroll to the bottom of the page and under the *Continuing Education & Events* heading select **PACE**. Next click on the blue *Submit a Roster* button on the right.

The AGD requires that you use the AGD PACE Logo and the following approval statement on all publicity:



EMS Safety Services Inc.
Nationally Approved PACE Program Provider for FAGD/MAGD credit.
Approval does not imply acceptance by
any regulatory authority or AGD endorsement.
9/1/2018 to 8/31/2022.
Provider ID# 355121

You can receive an electronic copy of the AGD PACE logo by e-mailing a request to PACE@agd.org. The terms "accreditation," "accredited" or "certified" must not be used in conjunction with PACE approval.

Approved providers have the obligation, if requested, to allow one monitor at least one time per year to monitor one of their programs. Details on the AGD monitoring program can be found in the PACE Program Guidelines.

The AGD e-mails approval renewal notices to providers approximately eleven months and six months before their expiration date. All nationally approved PACE Providers are required to pay an annual non-refundable maintenance fee in addition to the non-refundable application fee. Providers will receive an e-mail invoice for this fee approximately 90 days prior to each due

date. To learn more about PACE visit the PACE section of AGD Website often. This section is designed to help you manage your program.

Thank you again for your commitment to providing quality continuing dental education.

Sincerely,

Howard H. Chi, DMD, MA, MAGD

Howard H. Chi, DMD, MA, MAGD

Chair, Program Approval for Continuing Education (PACE) Council

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Once course applications are approved, the original application is assigned a course approval number. A certificate will be mailed, stamped with the official Board seal. The certificate will be documentation of completing the course; therefore, each attendee must receive a copy of the form. Each copy of the form must have an original signature of the attendee and an original signature of the official-in-charge or lecturer.

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The following is a SAMPLE of an outline acceptable to the Board. If you choose to use a different format, please be sure that the outline provides the same information.

COURSE TITLE: Treating the Dental Patient of the 90's - Medicated and Complicated!

COURSE SYNOPSIS: As our dental population ages and becomes more medically compromised, we must consider the dental treatment impact of chronic drug therapy. The purpose of this course is too important in clinical dentistry. Extensive handouts will supplement discussion of intra-oral drug effects and treatment modifications involving medicated patients. New antibiotic premedication guidelines and controversial issues in antibiotic premedication will be examined. Throughout the day, drug-drug interactions significant in dentistry will also be discussed with emphasis on clinical management.

COURSE SCHEDULE:

9:00 a.m.	—	9:15 a.m.	Medication Effects Important in Clinical Dentistry
9:15 a.m.	—	9:30 a.m.	Drug References for Office Use
9:30 a.m.	—	10:30 a.m.	Cardiovascular Medications
10:30 a.m.	—	10:45 a.m.	Refreshment Break
10:45 a.m.	—	11:15 a.m.	Cardiovascular Medications (continued)
11:15 a.m.	—	12:00 p.m.	Controversies in Antibiotic Premedication
12:00 p.m.	—	1:00 p.m.	Lunch
1:00 p.m.	—	1:30 p.m.	New SBE Prophylaxis Guidelines
1:30 p.m.	—	2:30 p.m.	Central Nervous System Medications
2:30 p.m.	—	2:45 p.m.	Refreshment Break
2:45 p.m.	—	3:15 p.m.	Respiratory System Medications
3:15 p.m.	—	3:45 p.m.	Respiratory System Medications
3:45 p.m.	—	4:00 p.m.	Gastrointestinal Medications
4:00 p.m.	—	4:15 p.m.	Dental Implications of Substance Abuse
4:15 p.m.	—	5:00 p.m.	Questions and Adjournment

COURSE OBJECTIVES:

After completing this program, the dental professional should be able to:

1. recognize that dental treatment modifications may be necessary to prevent complications in patients with major cardiovascular or central nervous system disease; and
2. list the new SBE antibiotic prophylaxis guidelines and discuss treatment modifications for large joint prosthesis patients; and
3. identify and appropriately manage the dental patient on chronic medications for a variety of disease states;
4. recognize signs and symptoms of substance abuse; and
5. discuss drug-drug interactions significant in clinical dentistry.

CE COURSE APPROVAL CHECKLIST

Name of Course Opioids: The Path to Addiction, The Climb to Recovery

Course Provider UAA College of Health - Dept. of Human Services

Name of Instructor See list provided

10/17/18 ☒ Completed application, without any signatures, form # 08-4241

10/17/18 A detailed outline which provides course content, and clearly breaks down the amount of time spent on each portion of the course and the direct relation to patient care.

10/17/18 Information regarding the instructor of the course

10/17/18 \$50 fee Renewal? ☐ Receipt # 201820086893

 Approved by board via mail ballot

Comments:



THE STATE
of **AL**

Department
Division of Corporations, Commerce and Consumer Protection



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DEN

Board of Dental Examiners

State Office Building, 333 Willoughby Avenue, 9th Floor

PO Box 110806, Juneau, AK 99811-0806

Phone: (907) 465-2550 • Fax: (907) 465-2974

Email: license@alaska.gov

ProfessionalLicense.Alaska.Gov/BoardOfDentalExaminers

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Juneau

OCT 17 2018

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Course Approval Application

Per 12 AAC 28.410, the Board will accept courses workshops, or symposiums approved, provided, or sponsored by the American Dental Hygienists' Association (ADHA), Academy of General Dentistry (AGD), or American Dental Association (ADA), other courses, workshops, or symposiums approved by the Board that are offered by dental or dental hygiene colleges or universities, or similar dental or dental hygiene organizations or associations.

The Board will accept self-study programs offered by a dental or dental hygiene college or university, the AGD, or the ADA that have been approved by the Board. A licensee may obtain all of their required continuing education by self-study.

DIVISION USE ONLY

Course ID:

Credit Hours:

Type:

Course Approved:

Course Expires:

PART I Payment of Fees

Required Fees:

☒ Application Fee

\$50

☐ Resubmission of Application Fee

\$50

PART II Course Information

Course Title:	THE OPIOID CRISIS - THE PATH TO ADDICTION & THE CLIMB
Course Type:	<input checked="" type="checkbox"/> Course, Workshop, or Symposium <input type="checkbox"/> Organized Study Club <input type="checkbox"/> Self-Study Club
Number of Credit Hours:	2.5 hours per session - total 20 hours
Date of Course:	September 6 - November 29, 2018
Person Conducting the Course:	See complete list of presenters in attached spreadsheet
Course Sponsor:	UAA College of Health - Department of Human Services
Sponsor Address:	3211 Providence Dr Anchorage, AK
Sponsor Contact:	Jo Ann Bartley, Ph.D.
Sponsor Phone:	907-786-6442

PART II Course Information**(continued)**

A detailed outline which provides course content and clearly breaks down the amount of time spent on each portion of the course and the direct relation to patient care must be submitted with application.

Courses will be accepted as continuing education under 12 AAC 28.400-.420 if participation is verifiable and the subject matter relates directly to dental patient clinical care.

Content Summary:	Course Content: See schedule for weekly topics	Hours:	2.0
Content Summary:	Question and Answer session	Hours:	.5
Content Summary:		Hours:	
Content Summary:		Hours:	

☒ **Official in Charge**☐ **Lecturer**

Official in Charge's
Signature: _____

Date: 8-23-18

Date approved by the Board of Dental Examiners: _____

OPIOIDS

THE PATH TO ADDICTION

THE CLIMB TO RECOVERY

9 CEU / CME PRESENTATIONS:

- Sept 06 Dr. McAnally- Understanding Opioids:
Biology, Pharmacology, Basic Science and
Core Concepts
- Sept 13 Dr. Sonkiss- Addictive Thinking Patterns:
Boundaries and Therapeutic Interventions
- Sept 20 Dr. Sonkiss- Addiction Theory and Risk Factors
- Sept 27 Dr. Colescott- Intoxication Withdrawal and
Overdose: Adverse Physical Effects
- Oct 04 Dr. McAnally- Understanding Pain, the Benefits
of Opioids and Weighing the Risk for Addiction
- Oct 18 Dr. Colescott- Drug History / Drug Timeline
Case Study
- Nov 01 Dr. von Hafften- Psychiatric Co-Morbidities
Commonly Seen with Addiction
- Nov 15 Dr. Butler- Federal, State and Regulatory
Agencies: Alaska's Response to the Opioid
Epidemic
- Nov 29 Dr. Colescott- Spiritual Recovery Systems

Location:

2533 Providence Dr.
PSB – Professional
Studies Building
Room, 166

Thursdays at UAA
5:30 PM – 8:15 PM
Sept 6 – Nov 29, 2018

This is an opportunity to learn
about the origin, current status
and response to the opioid
epidemic in our communities.

Open to medical and mental
health providers.

\$40 Registration fee per session.

Continuing Education Credits Available for Licensed Professionals:

- * Social Work: 2.5 Contact Hours available per session.
- * Physicians: This Live series activity has been reviewed and is acceptable for credit by the American Academy of Family Physicians. Physicians should claim only the credit commensurate with the extent of their participation in the activity. Approved for 2.5 AAFP prescribed credits per session.

REGISTER AT: www.akcache.org

SPEAKER BIOS

Opioids: The Path to Addiction, The Climb to Recovery

Joshua Sonkiss MD

Joshua Sonkiss, MD is board-certified in addiction medicine as well as adult, adolescent and forensic psychiatry. He completed his undergraduate training at the University of Alaska, attended medical school at McGill University, and completed residency at the University of Utah. After completing forensic training at the University of Rochester, he returned to Alaska to provide psychiatric and addiction treatment in hospital residential, and ambulatory settings. He is founding President of the Alaska Society of Addiction Medicine and past President of the Alaska Psychiatric Association. He is former editor-in-chief of the Carlat Addiction Treatment Report, and now serves on its editorial board. Currently he is Chief Medical Officer of Anchorage Community Mental Health Services. He is well known for his work educating medical colleagues, other healthcare providers and the general public about addiction.

Paula Colescott MD

Dr. Colescott holds board certifications Internal Medicine and Addiction Medicine, completing her internal medicine residency in the United States Air Force Wilford Hall Medical Center, with subsequent service at the Air Force Academy in Colorado Springs.

She has subsequently practiced inpatient, outpatient, and emergency medicine over twenty years in Colorado, Bush Alaska and Hawaii. After completing her Fellowship in Addiction Medicine @ the John A Burns Medical School in Honolulu, Queens Hospital, she returned to Anchorage, and served as the medical director of The Salvation Army Clitheroe Center (a detox/residential facility), became the Associate Medical Director of Providence Breakthrough (providing Partial hospitalization, IOP, OP services addressing chemical dependency), and provided services in a methadone maintenance program in the Anchorage Bowl. In these venues she provided didactic and onsite training of family medicine residents. She is currently an addiction consultant, and adjunct faculty at the University of Alaska Anchorage developing a semester course on opioids for the College of Health.

Jay Butler MD

Jay C. Butler, MD, CPE, FAAP, MACP, FIDSA was appointed Chief Medical Officer for the Alaska Department of Health and Social Services and Director of the Division of Public Health by Governor Bill Walker in December 2014. He is a graduate of the University of North Carolina Medical School, has completed post-doctoral clinical trainings at Vanderbilt and Emory Universities, and maintains board certifications in infectious diseases, internal medical, and pediatrics. He has authored or co-authored over 100 scientific papers and medical textbook chapters on infectious diseases, vaccines, public health and emergency preparedness. He is an affiliate professor of medicine at the University of Alaska Anchorage. From 2010 to 2014, Dr. Butler was Senior Director for Community Health Services at the Alaska Native Tribal Health Consortium in Anchorage, where he was also a clinical infectious diseases consultant and Medical Director for Infection Control and Employee Health. Earlier work includes serving as Chief Medical Officer of the Alaska Department of Health Social Services from 2007 to 2009, Alaska State Epidemiologist, 2005-07, Director of the Centers for Disease Control and Prevention's (CDC) Arctic Investigations Program, 1998-2005, medical epidemiologist in CDC's National Center for Infectious Diseases in Atlanta, 1991-98, and CDC Epidemic Intelligence Service Officer assigned to the Wisconsin Division of Public Health, 1989-91. He completed over 23 years of service as a U.S. Public Health Service

SPEAKER BIOS

Opioids: The Path to Addiction, The Climb to Recovery

medical officer. He served as Governor of the Alaska Chapter of the American College of Physicians from 2005 to 2009 and was the 2017 President of the Association of State and Territorial Health Officials. He is a founding member of the new Alaska Chapter of the American Society of Addiction Medicine.

Dr. Heath McAnally

Dr. Heath McAnally is a board-certified anesthesiologist, pain medicine physician and addictionologist who came to Alaska in 2005 with the United States Air Force. After separating from the Air Force he remained in South Central working first in the operating rooms around town (Providence, Regional and Matsu) before forming an integrative pain management practice in Eagle River. He is a faculty member with the Department of Anesthesia & Pain Medicine at the University Of Washington School Of Medicine, and is committed to education. His professional interests include helping people improve their pain using a biopsychosocial-spiritual model and by increasing their responsibility and self-efficacy, treating somatic pain by interventional procedures, and reducing opioid and sedative dependence. He is also an author, and is currently working on a book for Oxford University Press on the subject of preoperative optimization of chronic pain, based on a program being created jointly with colleagues around the country. Before he used to work way too hard, he really enjoyed mountaineering, hiking and skiing in the great Chugach.

Dr. Alexander von Hafften

Dr. von Hafften is a psychiatrist who first worked in Alaska as a WWAMI resident from the University Of Washington School Of Medicine in 1990. Since 1990, he has worked on three continents: North America, Europe and Africa. Dr. von Hafften has worked in a wide variety of clinical, administrative and policy settings. Dr. von Hafften is a member of the Alaska Controlled Substances Advisory Committee.

CE COURSE APPROVAL CHECKLIST

Name of Course bty Study Club

Course Provider bty Dental Group, LLC

Name of Instructor Dr. Joshua Jeon

4/3/17 Completed application, without any signatures, form # 08-4241

4/3/17 A detailed outline which provides course content, and clearly breaks down the amount of time spent on each portion of the course and the direct relation to patient care.

rnwl Information regarding the instructor of the course

4/3/17 \$50 fee Renewal? ☒ Receipt # 3689952

 Approved by board via mail ballot

Comments:

Previously approved course, applying for renewal.

3689952



THE STATE
of

ALASKA

Department of Commerce, Community and Economic Development
Division of Corporations, Business and Professional Licensing

Board of Dental Examiners

State Office Building, 333 Willoughby Avenue, 9th Floor

PO Box 110806, Juneau, AK 99811-0806

Phone: (907) 465-2550 • Fax: (907) 465-2974

Email: license@alaska.gov

ProfessionalLicense.Alaska.Gov/BoardOfDentalExaminers

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Course Approval Application

Per 12 AAC 28.410, the Board will accept courses workshops, or symposiums approved, provided, or sponsored by the American Dental Hygienists' Association (ADHA), Academy of General Dentistry (AGD), or American Dental Association (ADA), other courses, workshops, or symposiums approved by the Board that are offered by dental or dental hygiene colleges or universities, or similar dental or dental hygiene organizations or associations.

The Board will accept self-study programs offered by a dental or dental hygiene college or university, the AGD, or the ADA that have been approved by the Board. A licensee may obtain all of their required continuing education by self-study.

DIVISION USE ONLY

Course ID:

Credit Hours:

Type:

Course Approved:

Course Expires:

PART I

Payment of Fees

Required Fees:

☐ Application Fee

\$50

☒ Resubmission of Application Fee (Renewal):

\$50

PART II

Course Information

Course Title:	bty study club
Course Type:	<input type="checkbox"/> Course, Workshop, or Symposium <input type="checkbox"/> Organized Study Club <input checked="" type="checkbox"/> Self-Study Club
Number of Credit Hours:	40 hrs
Person Conducting the Course:	Dr. Joshua Jeon
Course Sponsor:	bty DENTAL Group, LLC
Sponsor Address:	726 E. 9th Ave Anchorage, AK 99501
Sponsor Contact:	Dr. Joshua Jeon
Sponsor Phone:	907-556-2379

PART II Course Information

APR 03 2017

(continued)

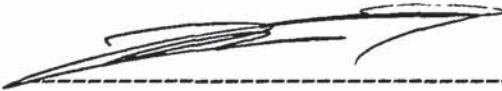
A detailed outline which provides course content and clearly breaks down the amount of time spent on each portion of the course and the direct relation to patient care must be submitted with application. *CBPL*

Courses will be accepted as continuing education under 12 AAC 28.400-.420 if participation is verifiable and the subject matter relates directly to dental patient clinical care.

Content Summary:		Hours:	
Content Summary:		Hours:	
Content Summary:		Hours:	
Content Summary:		Hours:	

☒ Official in Charge☐ Lecturer

Signature:



Date:

Date approved by the Board of Dental Examiners: _____

APR 03 2017

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Implant Dentistry Study Club**Course Synopsis:**

This study club is designed to improve the knowledge and skill of the dentist in diagnosis and treatment planning in implant dentistry. In addition, the study club will cover topics on implant surgery and implant prostheses. The study club is divided into several sessions. Each weekend is equivalent to one session. The meeting will be every Saturday (7:00pm-10:00pm) and Sunday (1:00pm-9:00pm). The meeting will be held once a month. Participants will each earn 10 CE units from attending the course.

Course Schedule (First Session): Diagnosis and Treatment Planning**Day I**

7:00 pm – 8:00 pm	Implant Definitions and Terminology
8:00 pm – 9:00 pm	Rationale for Implants
9:00 pm - 10:00 pm	Patient Evaluation and Treatment Planning for Implant I

Day II

1:00 pm – 2:00 pm	Patient Evaluation and Treatment Planning for Implant II
2:00 pm – 3:00 pm	Classification of Implant Supported Prosthesis
4:00 pm - 5:00 pm	Bone Density and the Available Bone Volume
5:00 pm – 5:30 pm	Dinner
5:30 pm – 6:30 pm	Principles of Biomechanics
6:30 pm – 7:30 pm	Implant number and size
8:30 pm – 9:00 pm	Surgical Anatomy

Course Objectives I

1. Recognize and describe the impact of complete and partial edentulism on intra-oral and extra-oral anatomy and its impact on patient's psychology.
2. Understand the history of Implants.
3. Classify and be able to define the different types of implants.
4. Classify and define different implant prosthesis.
5. Be able to recognize and explain all maxillary and mandibular anatomical landmarks and their relations to implant placement.
6. Demonstrate and conduct complete dental history and clinical evaluation of implant patients.
7. Be able to utilize diagnostic imaging procedures for the assessment of available bone quality and quantity.

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8. Understand the principles of biomechanics and its impact on implant placement and implant restorations.
9. Learn ideal implant size in each location.

Course Schedule (Second Session): Implant Surgery and Bone Graftings**Day I**

7:00 pm – 7:30 pm	Osteoplasty: Indications prior to implant placement
7:30 pm – 8:00 pm	Implant Suturing
8:00 pm – 9:00 pm	Treatment Planning for posterior mandible

Day II

1:00 pm – 1:30 pm	Socket preservation
1:30 pm – 2:00 pm	Implant Surgery Step by Step
2:00 pm – 3:00 pm	Pharmacology
3:00 pm – 3:30 pm	Bone Growth Factors and their effects on healing
3:30 pm – 4:30 pm	Bone Harvesting, Membrane Placement and Grafting techniques
4:30 pm – 5:30 pm	Anterior Single Tooth Replacement
5:30 pm – 6:00 pm	Soft Tissues Consideration
6:00 pm – 6:30 pm	Dinner
6:30 pm – 7:00 pm	Extraction and implant placement
7:00 pm – 8:00 pm	Medical Evaluation
8:00 pm – 9:00 pm	Work shops

Course Objectives II

1. Describe and perform a step by step implant surgery.

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2. Understand and be able to apply the principle of soft tissues incision, flap reflection, and suturing in conjunction with implant placement.
3. Understand the bone formation process after the extraction.
4. Understand and be able to perform socket preservation after the extraction.
5. Perform and understand osteoplasty prior to implant placement.
6. Understand and able to achieve predictable results with bone grafting.
7. Recognize and be able to obtain growth factors in conjunction with particulate bone grafting prior to implant placement.
8. Describe and perform soft tissues procedures for bone grafting.
9. Perform procedures to obtain autologous bone for particulate bone grafts
10. Describe the ideal host site conditions for maxillary anterior root form implant.
11. Evaluate and perform the soft tissue incision line for maxillary anterior root form implant.
12. Know the advantages/disadvantages of implant placement in conjunction with tooth extraction.
13. Describe and understand pharmacology and medical evaluation protocol for implant dentistry.

Course Schedule (Third Session): Sinus Grafts, Edentulous Maxilla, and Immediate Load**Day I**

- | | |
|-------------------|---|
| 7:00 pm – 7:30 pm | Maxillary Sinus Anatomy |
| 7:30 pm – 8:00 pm | Histology and Pathology of Maxillary Sinus |
| 8:00 pm – 9:00 pm | Treatment Plan and Surgical Approach to Posterior Maxilla |

Day II

- | | |
|-------------------|---|
| 1:00 pm – 1:30 pm | Rationale for Sinus Graft |
| 1:30 pm – 2:00 pm | Pharmacology for Sinus Grafting |
| 2:00 pm – 3:00 pm | Materials used for Sinus Grafting |
| 3:00 pm – 4:00 pm | Sinus Lift and Sinus Graft Procedures |
| 4:00 pm – 5:00 pm | Sinus Surgery: Complications and Management |
| 5:00 pm – 6:00 pm | Treatment Planning for Edentulous Maxilla |
| 6:00 pm – 6:30 pm | Dinner |

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6:30 pm – 7:00 pm	Rationale for Immediate Load
7:00 pm – 8:00 pm	Immediate Load : Complete/Partial Edentulous Surgery
8:00 pm – 9:00 pm	Risk of Immediate Load

Course Objectives III

1. Describe and perform sinus lift procedure in the posterior maxilla.
2. Understand the key to bone grafting as applicable to the sinus graft and able to select the proper grafting material to perform sinus elevation.
3. Understand and able to perform sinus lift/sinus graft with predictable results.
4. Able to interpret radiographs and treatment plan for completely edentulous maxilla.
5. Describes the maxillary sinus anatomy.
6. Diagnose the types of pathology most commonly observed in the maxillary sinus.
7. List ideal situations when immediate load can be utilized.
8. Understand types of complications and management relating to immediate load.
9. Describe treatment sequences for immediate loading in different prosthetic options.

Course Schedule (Fourth Session): Fixed and Removable Implant Prosthetics

Day I

7:00 pm – 7:30 pm	Fixed Prosthetic Options
7:30 pm – 8:00 pm	Cemented Prosthesis Principles
8:00 pm – 8:30 pm	Abutment Selection for Cemented Prosthesis
8:30 pm – 9:00 pm	Prosthesis Fabrication: Direct and Indirect Techniques

Day II

1:00 pm – 2:00 pm	Implant Protective Occlusion
2:00 pm – 2:30 pm	Occlusal Materials and Shade Selections
2:30 pm – 3:00 pm	Progressive Bone Loading
3:00 pm – 3:30 pm	Attachment for Fixed Prosthesis

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3:30 pm – 4:30 pm	Complications in Implant Prosthetics
4:30 pm – 5:00 pm	Treatment Planning Options for FPD
5:00 pm – 5:30 pm	Dinner
5:30 pm – 6:00 pm	Removable Prosthetic Options
6:30 pm – 7:30 pm	Cement/Screw Retained Prosthesis
7:30 pm – 8:00 pm	Implant Overdentures
8:00 pm – 8:30 pm	Removable Prosthesis Fabrication
8:30 pm – 9:00 pm	Attachment Selections

Course Objective IV

1. Compare prosthetic options for fixed prosthesis.
2. Apply the principles of cemented prostheses to implant dentistry.
3. Understand advantages/disadvantages of fixed prosthetic options.
4. Understand and apply occlusal concepts to fixed restorations.
5. Apply principles of biomechanics to the treatment planning.
6. Understand the most common causes for complications.
7. Understand the differences and indications for indirect and direct techniques of prosthesis fabrication.
8. Determine methods to select the occlusal material and able to apply the principles of shade selection.
9. Learn and apply the principles of progressive loading in order to improve bone density.
10. Treatment plan partials and completely edentulous patients for implant restorations.

Ownership

btyDENTAL Group, LLC., Glacier Dental, LLC., and Clear Dental, LLC. are owned 100% by Dr. Joshua Jeon.

While he doesn't practice as much as he used to, he is readily available over 60 hours per week for clinical and administrative advice and spends at least one day per week providing care. Dr. Jeon is a mentor for the associate doctors and team members. When he's not seeing patients, Dr. Jeon is preparing for in house education. The doctors meet weekly for a clinical conference and case studies and monthly for seminars.

Curriculum Vitae

JOSHUA JEON, DDS

726 E 9th Avenue, Anchorage, AK 99501 | 907.333.6666 | jaekwangj@hotmail.com

EDUCATION

Loma Linda School of Dentistry, Loma Linda, CA

Doctor of Dental Surgery 2007

La Sierra University, Riverside, CA

B.A. in Biology 2003

AWARDS

Fellowship Misch International Implant Institute

International Congress of Oral Implantologists

Mastership International Congress of Oral Implantologists

PROFESSIONAL LICENSURE

Alaska State License California State License

Basic Life Support

Advanced Cardiovascular Life Support

Intravenous Conscious Sedation Permit

TEACHING EXPERIENCE

Riverside, CA

Co-Instructor – Comprehensive Implant Study Club (CIS) May 2009 – Jan 2010

Instructed course and structured open discussions regarding implants.

PROFESSIONAL EXPERIENCE

btyDENTAL, Anchorage, AK

Dentist

March 2013 – Present

Entrepreneur who started a new dental chain using business skills as well as knowledge gained from being a clinician. Managing staff so that everyone connected to us will have a life that is better than yesterday.

Responsible for 40+ employees, including 10 Associate Dentists.

Glacier Dental, Anchorage, AK

Dentist

July 2007 – Present

Manage, control, and train employees. Work to improve the environment, patient experience, and overhead costs.

CONTINUING EDUCATION (MORE THAN 2000 CE CREDITS ON IMPLANT AND ORAL SURGERY)

Loma Linda / Academy of American Implant Dentistry Maxi Course Mar 2007-Dec 2007

(300 CE Credits) Loma Linda, CA

American Academy of Implant Dentistry (21 CE Credits) April 2007

International Congress of Oral Implantologists (21 CE Credits) Aug 2007

University of Southern California – Advanced Bone grafting (14 CE Credits) Oct 2007

American Academy of Implant Dentistry (21 CE Credits) Nov 2007

Misch International Implant Institute –Surgical and Prosthetic Jan 2008 –Nov 2008
(200 CE Credits) Chicago, IL
American Academy of Implant Dentistry –Advanced bone grafting (16 CE Credits) Jan 2008
California Implant Institutes –Surgical and Prosthetic Jan 2008
(120 CE Credits) San Diego, CA
International Congress of Oral Implantologists (21 CE Credits) Feb 2008
University of Southern California –Endo Continuum (42 CE Credits) June 2008
International Congress of Oral Implantologists (21 CE Credits) Aug 2008
Advanced Bone and Soft Tissue Grafting (40 CE Credits) Sept 2008 –Oct 2008
Pikos Implant Institute, Tampa, FL
American Academy of Implant Dentistry (21 CE Credits) Oct 2008
University of Southern California –Esthetic Full Mouth Implant Reconstruction Jan 2009
From Treatment Planning To Fixed Restoration (21 CE Credits)
Foster Executive Education: Minority Business Executive Program June 2015
Seattle, WA
McCombs Texas Executive Education: Strategic Decision Making Sept 2015
Austin, TX
UC Berkeley Executive Education: Financial Analysis for Non-Financial Executive Oct 2015
Berkeley, CA
NYU Stern Executive Education: Disruptive Leadership (Fostering a Culture of Game-Changing Innovation)
Dec 2015
New York, NY

LANGUAGES

Korean –native language
English –speak fluently, read, and write with high proficiency

MEMBERSHIPS –PAST AND CURRENT

American Dental Association
Academy of General Dentistry
Alaska Dental Society
American Dental Society of Anesthesiology
International Congress of Oral Implantologists
Academy of Laser Dentistry
American Academy of Cosmetic Dentistry
American Academy of Periodontology
American Academy of Implant Dentistry
Academy of Osseo integration

Item 17

- Adjourn