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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
May 16, 2014**

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 scheduled meeting of the Board of Dental Examiners was held May 16, 2014, at 4341 Tudor Centre DR, Ste 100, Anchorage, Alaska.

The meeting was called to order by Dr. Paul Silveira at 8:33 a.m.

Roll Call

Those present, constituting a quorum of the board, were:

Gail Walden – Dental Hygienist – Wasilla
Cheryl Fellenberg – Dental Hygienist - Wasilla
Dr. Steven Scheller- Dentist - Fairbanks
Dr. Mary Anne Navitsky –Dentist - Sitka
Robyn Chaney- Public Member – Dillingham
Dr. Thomas Kovaleski – Dentist - Chugiak
Dr. Paul Silveira – Dentist – Valdez

Absent:

Dr. Thomas Wells, President – Anchorage, excused
Dr. Robert Warren – Dentist – Anchorage, joined meeting at 8:38 a.m.

In attendance from the Division of Corporations, Business & Professional Licensing, Department of Commerce, Community and Economic Development were:

Angela Birt, Investigator- Anchorage
Debbie Kunow, Licensing Examiner – Juneau
Harriet Milks, Attorney IV, (telephonic from Juneau)
Sher Zinn, Licensing Supervisor, (telephonic from Juneau)

47 **Agenda Item 1- Agenda**

48

49 Ms. Kunow advised Ms. Martha Hewlett would not be available to conduct the
50 budget review until 9:00 a.m. Dr. Marley's email regarding practice ownership
51 would be added to miscellaneous correspondence. House Bill 140 will be discussed
52 during legislation section. Additionally, Dr. Silveira will be discussing a possible
53 alternative to radiological equipment inspections in the old/new business section.
54 Dr. Kovaleski advised he and Ms. Birt met with the Alaska Dental Society last
55 Monday and would like to brief the Board during old/new business section.

56

57 **Agenda Item 2- Minutes**

58

59 The Board reviewed the minutes from the February 7, 2014 meeting. Ms. Walden
60 stated on page 6, line 236, 'how to find' should be changed to 'how to define.'

61

62 **On a motion duly made by Kovaleski, seconded by Chaney and approved**
63 **unanimously, it was**

64

65 **RESOLVED to approve the minutes of February 7, 2014 with**
66 **amendment.**

67

68 **Agenda Item 3- Ethics**

69

70 There were no ethics violations to report.

71

72 Since the Board was running ahead of schedule and Ms. Hewlett would not be
73 available until 9:00 a.m., the Board continued to agenda item 6.

74

75 **Agenda Item 6- Miscellaneous Correspondence**

76

77 **WREB Specialty Exams:** Dr. Kovaleski advised these exams are for states that have
78 specialty licenses. The Northeast Regional Board conducts these specialty exams.
79 This does not mean the applicants are board certified.

80

81 Dr. Warren joined the meeting at 8:38 a.m.

82

83 Ms. Walden asked if the Board should send a letter to WREB. Dr. Kovaleski stated
84 this information is simply FYI for the Board.

85

86 Dental Radiologists: The Board reviewed an email sent from Ms. Annette Hill, OMDS
87 Program Assistant at University of Florida, inquiring about board-certified dental
88 radiologists interpreting scans.

89 Dr. Warren stated this is an American Dental Association (ADA) specialty and Alaska
90 does not have any dental radiologists. Dr. Silveira asked if a non-licensed dental
91 radiologist could interpret radiographic images. The Board agreed this would be
92 the same as sending a pathological report to the Mayo Clinic. The State does not
93 require out-of-state pathologists to have an Alaska license. Many tests are sent out
94 of state because the state does not have testing facilities. This happens on a daily
95 basis.

96 Ms. Kunow will send draft minute excerpts to Ms. Annette Hill, OMDS Program
97 Assistant at University of Florida.

98
99 Practice Ownership: The Board reviewed a letter signed by Drs. Thomas Jacobsen,
100 David Pearson and Ross Marley regarding Southeast Alaska Regional Health
101 Consortium (SEARHC) soliciting and treating non-native patients. Dr. Silveira
102 expressed concerns that SEARHC dentists are not state licensed. Ms. Kunow
103 distributed the proposed language of 12 AAC 40.981 set forth by the Alaska Board of
104 Medical Examiners that went to public comment. The Medical Board will be
105 reviewing the public comment at its June meeting in Sitka. 12 AAC 40.981 provides
106 exemptions for persons practicing in an Alaska tribal health program. Ms. Kunow
107 advised the Alaska Board of Pharmacy is also concerned about this issue and is
108 waiting to see how Department of Law deciphers this language.

109 Dr. Warren asked Dr. Kovaleski if Public Health Services (PHS) request their
110 practicing dentists have Alaska state licensure. Dr. Kovaleski advised each native
111 facility is unique and every one does their own thing. SouthCentral Foundation
112 requires that all of its dentists get an Alaska license within a year, but he could not
113 respond as to what other organizations are doing.

114 Dr. Scheller stated these dentists should be licensed in the State of Alaska. Dr.
115 Kovaleski advised the problem is they fall under a federal umbrella. Dr. Scheller and
116 Ms. Fellenberg stated those dentists should not be able to treat non-natives. Dr.
117 Kovaleski stated the federal umbrella also includes non-natives.

118 Ms. Walden expressed concerns about how insurance companies are billed. Dr.
119 Warren expressed concerns about patient complaints. The Board has no
120 jurisdiction.

121 Dr. Navitsky stated SEARHC has done this for some time. There have been medical
122 practitioners that have sold their clinics to SEARCH because of the competition.
123 They could do this in Juneau too.

124 Ms. Kunow suggested Board members contact Debora Stovern, the Executive
125 Administrator for the Medical Board.

126 Ms. Fellenberg stated it is not just about competition, but really is a matter of public
127 safety, and that is the Board's job.

128 Ms. Birt expressed concern about recourses should a patient have a complaint. They
129 will come to the State to file a complaint, but the State has no jurisdiction. We need
130 to find out where to direct them. Dr. Kovaleski stated the federal government would
131 investigate. Ms. Birt advised the Board needed to find out what agency would do the
132 investigations.

133 Ms. Walden and Dr. Kovaleski expressed concerns about Dental Health Aide
134 Therapists (DHAT) doing services.

135 Ms. Chaney stated that many Indian Health Services (IHS) dentists do not stay very
136 long and getting a license might be difficult.

137 The Board decided to wait to see how Department of Law deciphers the Medical
138 Board's proposed language and address this issue again at the September meeting.

139

140 **Agenda Item 4 -Budget Review**

141

142 Ms. Hewlett was unavailable by telephone.

143

144 **Agenda Item 5- Investigative Report**

145

146 Investigator Angela Birt distributed the investigative report to Board members.
147 Investigations opened twenty-four matters and closed thirty-nine; eleven remain
148 on-going. Ms. Birt explained the complaint-to-investigation process. Board actions
149 are reported to the National Practitioner Data Bank (NPDB). When a complaint
150 comes in, the provider is notified, but details are not disclosed. Records are
151 requested to be received within twenty days. The cases are assigned to a reviewing
152 Board member who will make a recommendation to the Board, if necessary.

153

154 Ms. Birt stated the next items involved disciplinary action and would require
155 executive session.

156

157 **On a motion duly made by Chaney, seconded by Silveira, and approved**
158 **unanimously, it was**

159

160 **RESOLVED to go into executive session in accordance with AS**
161 **44.62.310(c)(2), for the purpose of discussing investigative matters.**

162

163 Board staff to remain during executive session.

164

165 Off the record at 9:08 a.m.

166 On the record at 10:52 a.m.

167 The Board thanked Angela for her great work.

168

169 Board members requested a five minute break.

170 Off record 10:52 a.m.

171 On record 10:58 a.m.

172

173 **Agenda Item 8- Public Comment**

174

175 Dr. Silveira requested all public comments be less than ten minutes because of the
176 very full agenda.

177

178 **Erin Jack – Referral of Patients for Gifts –**

179 Ms. Jack, a management consultant with Reliable Practice Solutions, asked the
180 Board's opinion regarding gifts to patients for referrals. Gifts or monetary rewards
181 for patient referrals are happening in most practices. This is a violation of the Code
182 of Ethics. It is a form of kick-back if there is advertising of monetary rewards for
183 patient referrals. If, however, an unsolicited reward is given as a token of gratitude,
184 that would be acceptable. Ultimately, it is up to the Board to make a stated opinion.
185 Many states have made a firm stated opinion. Ms. Jack requested some guidance
186 from the Board in order to give appropriate information to practices.

187 Ms. Fellenberg agreed Ms. Jack's statements were completely right. If a dentist is
188 advertising rewards, it is unethical and unprofessional. The American Dental
189 Association (ADA) spells it out. Ms. Chaney stated the Board has adopted the ADA's
190 Code of Ethics and every dentist in Alaska should know this.

191 Dr. Warren suggested sending a statement which would be included with license
192 renewals.

193 **Billing Practices –**

194 Ms. Jack discussed another issue involving advertising for new patients which
195 includes x-rays and cleanings for \$149.00. Those types of advertisements are being
196 rendered in the office and the insurance companies are being billed the full amount.
197 This is a type of fraud, even if unintentional. There is a breakdown between office
198 personnel doing the billing and the dentists. Sometimes these dentists do not
199 understand that everything that goes out under their license number is their
200 responsibility. What the patient is charged should be the same as what the
201 insurance company is billed.

202 Dr. Warren stated the patient discount should apply to the insurance company as
203 well.

204 Ms. Jack advised the discount should be disclosed to the insurance company and the
205 insurance company can adjudicate that claim the way it sees fit.

206 Dr. Warren suggested including a statement regarding this issue also be included in
207 the renewal insert.

208 Ms. Walden suggested working on an advisory statement that could be posted to the
209 website.

210 Dr. Scheller stated it was fraud. Ms. Walden advised it was overbilling. Ms. Jack
211 expressed concerns that these dentists may be audited by the insurance companies.
212 Many of these dentists are taking Medicaid. When a dentist signs up with a federal
213 program, they are guaranteeing the patient the lowest costs. If a dentist is offering a
214 new patient exam for free, but charging \$100.00 to everyone else, the dentist should
215 be charging Medicaid the same price.

216 The Board thanked Ms. Jack for bringing these issues to the Board's attention.

217

218 Dr. Julie Robinson – Alaska Mission of Mercy –

219 Dr. Robinson distributed final details of the Mission of Mercy (MOM) event held in
220 April. There were 1,332 volunteers and 1,589 patients. Estimated value of care was
221 \$1,156,650.00. There has been nothing but positive comments. The nice thing was
222 that this event brought together dental practitioners from all aspects. The entire
223 State was represented: Fairbanks, Kenai, Dillingham, Southeast and many from out
224 of State. Twenty-four courtesy licenses were issued. Alaska averaged thirty percent
225 dentist participation, well above the average for other MOMs. The only area short
226 was in dental assistants. Next time, more assistants will be recruited.

227 University of Alaska (UAA) did a great job with oral hygiene instruction. This was a
228 mandatory part of the whole process. When patients exited, they were given a
229 document for emergency dental procedures and what constitutes an emergency.
230 This will hopefully keep patients out of the emergency room. Patients were also
231 given a list of community resources.

232 The event targeted the uninsured and only roughly ten percent had insurance.
233 About fifty percent did know about the sliding fee at the Anchorage Neighborhood
234 Health Center. Also, about fifty percent of the patients who attended MOM were in
235 pain.

236 Additionally, since HB269 was passed this year, volunteer health providers will be
237 covered under Alaska's civil immunities law next year.

238 MOM received proclamations from the mayor, city assembly, the Governor, and
239 Senator Mark Begich. Representative Pete Higgins stopped by and was put to work.

240 Dr. Warren asked if continuing education credit was given to participants. Dr.
241 Robinson stated an email was sent to everyone instructing they could get two hours
242 of CE for volunteer work.

243 The next MOM is scheduled for Fairbanks August 7-8, 2015. The lead time may be
244 affected because the event is scheduled in the summer. The Anchorage event had
245 the opportunity for planning during the winter months. The last three months got
246 pretty hectic, so Fairbanks will have to do some major planning.

247 Dr. Robinson would like to see more veteran participation, as well as more people
248 from the Medicaid Office to enroll patients, and more concessions from the
249 municipality.

250 Financial requirements for Fairbanks will be lower. The Carlson Center will not be
251 able to accommodate as many participants. Many items from this year's event can
252 be used next year. There will be less public service announcements since people
253 now know about the event.

254 The biggest challenge going forward for MOM is that, unlike some other states, there
255 is no permanent staff to handle the logistics.

256 The Board congratulated Dr. Robinson for all her hard work.

257

258 Dr. Steve Rayes – Specialty Advertising –

259 Dr. Rayes, Director of Pediatric Residency Program for Public Health Services and
260 representing the Alaska Pediatric Dental Society, addressed the Board with some
261 concerns regarding specialty advertising. There have been several patients coming
262 to the Society unsatisfied with experiences with their previous pediatric dentist.
263 Upon further inquiry, it was found that they were not pediatric dentists, but general
264 dentists advertising as pediatric dentists.

265 Recently, there was the unfortunate perishing of a child in Hawaii. That was a
266 general dentist advertising as a pediatric dentist. That dentist never received formal
267 training in sedation, asked the auxiliaries to give meds while she was thirty minutes
268 away from the office, didn't use any monitors of any kind, walked into a dark room
269 and started doing treatment and about thirty-five minutes later, realized the patient
270 had not made any noise or movement.

271 Dr. Rayes distributed an advisory alert regarding dental specialty advertising from
272 the Michigan Department of Licensing and Regulatory Affairs. General dentists who
273 advertise certain specialty treatments must also include a statement that they are
274 not certified as specialists, according to state law and administrative rules.
275 Describing themselves as "general dentists" in the ads isn't enough to comply with
276 the parameters of dental specialty advertising as set out in state law, the rules of the
277 Michigan Board of Dentistry, and an opinion from the Michigan Office of the
278 Attorney General. Any advertisement of these services identified as prosthodontics,
279 endodontics, oral and maxillofacial surgery, orthodontics, pediatric dentistry,
280 periodontics and oral pathology must include a statement or disclaimer indicating
281 that the dentist is not a certified specialist. For example, a general dentist who lists
282 "braces" as one of several services offered is not doing anything outside of normal
283 limits. However, a phrase such as "expertise in braces" implies knowledge or ability
284 in a specialty and a disclosure would be required stating they are not a specialty
285 dentist.

286 Searching the internet, Anchorage Dentistry for Kids shows up under pediatric
287 dentistry and they are not a pediatric dentist. This is walking an ethical line.

288 Parents believe their children are being treated by a specialist for their child when,
289 in fact, it wasn't made clear that they were treated by a general dentist.
290 Dr. Warren stated this issue was brought up before. He was in charge of monitoring
291 the yellow pages. Sometime the yellow pages would create the specialty section
292 based on if the dentist saw kids. Dr. Rayes stated some web designers may be doing
293 this. Dr. Warren stated this is totally a breach of ethics if they are advertising a
294 specialty when not properly trained in that specialty. Dr. Warren volunteered to
295 take on the task of checking webpages. In the past, letters were sent to those in
296 violation.

297 Ms. Walden suggested putting a statement in the renewal insert. Dr. Kovalski
298 cautioned if the dentist did not graduate from a two or more year CODA program, it
299 would be unethical to advertise a specialty.

300 Dr. Silveira suggested Dr. Rayes bring any of these violations to the Board's
301 attention. Ms. Birt advised Investigations is looking into several complaints
302 involving pediatric dentistry advertising.

303 The Board thanked Dr. Rayes for his time.

304

305 Dr. Guy Burk – Practice Ownership –

306 Dentistry has always been a cottage industry where dentists own their own
307 practices. That is changing very quickly down in the lower 48 right now. There are
308 huge corporations now that are buying up practices. The beginning of the fight is
309 happening in North Carolina. The North Carolina Dental Board issued an injunction
310 against Heartland Dental preventing them from buying any practices in the state.

311 Oregon has really big corporate dentistry. Even though these big corporations are
312 not supposed to be dictating patient treatment, they are and it's affecting patient
313 care. Dr. Burk is aware of dentists in Oregon that are encouraged to turn a blind eye
314 to teeth that need crowns and things like that, because they're getting paid on the
315 number of patients they see and not what they're doing. There are lawsuits in Texas
316 because of this. It's not happening in Alaska right now, but it will be.

317 Dr. Burk expressed concern that the dental industry could go the way of the
318 pharmacy industry. It is rare to find a private pharmacist. Walgreens is opening
319 dental clinics. Walmart is selling franchises to dentists within their stores. These
320 dentists may have some stake in how they can run their practices because they own
321 the franchise and because they are still under a Board's jurisdiction.

322 It becomes a gray area when a big corporation like Heartland comes in and
323 purchases dental practices. They can skirt the dental board law because they are
324 creating LLCs.

325 Dr. Burk distributed the Corporate Practice of Medicine Doctrine 50 State Survey to
326 Board members. Most states still have laws that dentistry and medicine cannot be
327 practiced as a corporation. It becomes very convoluted when private equity firms

328 own the corporations. The main concern is profits. Standard of care becomes an
329 issue.

330 Flipping dental practices is becoming big business. It's being done here in
331 Anchorage.

332 Dr. Warren asked if the statutes define dental ownership. Dr. Burk advised the State
333 makes exceptions for labor unions and native corporations. They can own a dental
334 practice because they take care of their people. Dr. Burk referred to the Sitka
335 dentists' letter of complaint regarding SEARHC. The State is allowing different
336 corporations to manage dental clinics.

337 Dentistry is a very profitable business and that is why billions of dollars are being
338 spent by private equity firms to purchase dental businesses. There's nothing to stop
339 SEARHC from selling to Heartland.

340 Patient decisions get whittled away over time when large corporations own dental
341 facilities.

342 Dr. Burk will gather more material and present at next Board meeting.

343 The Board thanked Dr. Burk for his time.

344

345 Frank Thomas- Mears - MRSA Infections -

346 Mr. Thomas-Mears from Multiple Risk Managers, Inc. thanked Dr. Burk for bringing
347 the practice ownership issue to the Board's attention. He also advised that, on a
348 national level, CNA insurance is paying enormous claims that have come out of these
349 "dental mills." The patients are not central anymore.

350 Mr. Thomas- Mears distributed a memo to Board members regarding Methicillin-
351 resistant Staphylococcus aureus (MRSA). Two phone calls have been received
352 within the last month involving three dental office technicians, two dental assistants
353 and a dental hygienist from two different offices in two different parts of the State.
354 The dental assistant had open, oozing wounds. The dental hygienist had a MRSA
355 infection of the brain. Another office assistant had MRSA but it is under control.
356 These people were working chair side.

357 Mr. Thomas-Mears asked the Board what is an unlawful act. It is an unlawful act if
358 one is practicing under the standard of patient care. If there is no informed consent
359 for the patient and the patient is unaware, is that practicing below the standard of
360 patient care? Would that rise to the level that the Board would do an investigation?

361 Dr. Warren asked how this information is disseminated.

362 Mr. Thomas-Mears responded that the universal precaution is to protect staff from
363 the patients. MRSA is spread item-to-skin or skin-to-skin contact. Dental offices are
364 a 7 to 8 on a scale of 10 regarding infection control. It is easy to overhear that a staff
365 member might have MRSA.

366 It was alarming to get two calls so close together.

367 Ms. Walden asked if the calls were asking advice. Mr. Thomas-Mears responded yes.

368 The dentist wanted to know if he should fire the employee or tell the patient. Mr.

369 Thomas-Mears did not know what to tell the dentist. A patient has the right to
370 know, but that's informed consent. Under the Code of Ethics, the dentist has the
371 duty to respect the patient, a duty not to harm, treat fairly and communicate
372 truthfully. Shouldn't the patient be made aware in order to consent to treatment or
373 not?

374 If a complaint is made to the Board, would it be considered substandard care?

375 Dr. Warren wanted to know why this issue was brought to the attention of Mr.
376 Thomas-Mears and not the Board. Mr. Thomas-Mears stated these were office
377 managers from two different dental offices asking for advice. Multiple Risk
378 Managers insures these practitioners. There's no guidance for this.

379 Mr. Thomas-Mears asked the Board to consider this issue for future meetings.

380 The Board thanked him for his time.

381

382 Dr. Silveira asked if there was any other public comment. There was no other public
383 comment.

384

385 Ms. Chaney requested that, since the Board was behind schedule, to postpone
386 Agenda Item 9 - Old/New Business until after the credentials interviews scheduled
387 for 1:00 p.m.

388

389 Taylor Rands from Clapp, Peterson, Tiemessen, Thorsness & Johnson Law Firm
390 representing Dr. Glenn Lockwood, introduced himself to the Board. Mr. Rand asked
391 the Board to consider the petition for reinstatement of Dr. Lockwood's license.

392 The Board agreed to hear from Dr. Lockwood. Dr. Lockwood stated he was unsure if
393 he was supposed to be present at the Board meeting. Ms. Kunow advised that if the
394 Board wanted him present at the meeting, a letter would have been sent requesting
395 his appearance and that this was an open meeting.

396 Mr. Rands asked if the Board had any questions for Dr. Lockwood.

397 Dr. Warren said Dr. Lockwood could make a statement to the Board.

398 Dr. Lockwood stated that, as the Board was aware, he had a tax case where he got
399 involved with an attorney in Las Vegas that got him into some offshore leasing and
400 some other programs. My attorney in Kenai sent me down to him and I partook in
401 it. I thought it was legal; came back to my attorney who said it was. Turned out it
402 wasn't and I fought it all the way, but lost. The judge said if it sounded too good to
403 be true, it probably was. The next year, my attorney won a case in West Virginia on
404 the same thing. There, they thought the operation was legal. I've learned my lesson
405 to stay away from anything that has shades of gray. It was a hard lesson to learn. I
406 spent four years away from my family in "club fed." I have a couple of things to
407 work out with the Board - continuing education for ethics. I have twelve months to
408 get that done while I'm working. I appreciate it if everything goes well and my
409 license is reinstated.

410 The Board thanked Dr. Lockwood for his time.

411

412 Ms. Birt requested the Board address two matters discussed earlier in executive
413 session. The first involved an imposition of civil fine, case number 2014-000630.

414

415 **On a motion duly made by Chaney, seconded by Warren, and approved**
416 **unanimously, it was**

417

418 **RESOLVED to adopt the imposition of civil fine in case number 2014-**
419 **000630.**

420

421 Dr. Silveira called for discussion. There was no discussion.

422

423 Case number 2014-000630 referred to Dr. Henry W. Gottschalk, a credentials
424 applicant scheduled for interview.

425

426 Ms. Birt explained the second matter, a consent agreement discussed earlier in
427 executive session regarding case number 2013-002068.

428

429 **On a motion duly made by Chaney, seconded by Scheller, and approved**
430 **unanimously, it was**

431

432 **RESOLVED to adopt the consent agreement in case number 2013-**
433 **002068.**

434

435 Dr. Silveira called for discussion. There was no discussion.

436

437 Case number 2013-002068 referred to Dr. George T Murphy, license #442.

438

439 Dr. Kovaleski asked the Board about tabling all credentials applicants scheduled for
440 interview based on a National Practitioner Data Base (NPDB) hit. Ms. Chaney stated
441 it would be a monumental shift in direction for the Board. Ms. Fellenberg agreed.
442 Ms. Chaney advised it would be a change of past protocol based on a new
443 Department of Law's employee's recommendation. Dr. Kovaleski said many
444 applicants have had NPDB hits and the Board has always looked at those hits. Ms.
445 Walden stated that if the Board denied an applicant based on a NPDB hit, the
446 applicant then would have a denial hit on the NPDB report.

447 Ms. Birt suggested the Board send a letter to Law asking for clarification.

448 Dr. Silveira advised many insurance companies pay out-of-pocket instead of dealing
449 with arbitration and those hits may be insignificant. Criminal hits are different.

450 Ms. Birt advised NPDB does not make a distinction between a dental settlement and
451 a judgment for malpractice. Some insurance companies may settle claims under
452 \$10,000.00 and the dentist may not be aware of the settlement. That may or may
453 not come back as a hit. On the other hand, a judgment is a different standard.

454

455 The Board recessed for lunch.

456 Off record 12:03 a.m.

457 On record 1:00 p.m.

458

459 **Agenda Item 10 - Personal Interview for Applicants by Credentials**

460

461 Ms. Kunow advised Dr. Backus was boarding a plane at this time and suggested the
462 Board schedule him first. Dr. Prisbrey was present and could be scheduled second.

463

464 Dr. Silveira welcomed Dr. David R. Backus to the Board meeting and explained the
465 interview process. Dr. Backus appeared telephonically. The Board asked the
466 standard interview questions.

467

468 **On a motion duly made by Silveira, seconded by Scheller, and approved**
469 **unanimously, it was**

470

471 **RESOLVED to approve the application for a dental license for Dr. David**
472 **R. Backus.**

473

474 Dr. Scheller welcomed Dr. Lorraine Prisbrey to the Board meeting and explained the
475 interview process. Dr. Prisbrey appeared in person.

476 Dr. Scheller asked Dr. Prisbrey if she practiced dentistry while she was unemployed
477 for a year and a half. Dr. Prisbrey stated she was unemployed from June 2013 to
478 March 2014 and did not practice at that time. She was dealing with a family
479 emergency, left employment and then was hired at Copper River Native facility.
480 There was another period of unemployment from February 2012 when she left
481 Mendocino and was offered a job at Kotzebue in March. It took three months to get
482 credentialed. The Board asked the standard interview questions. Dr. Prisbrey will
483 have Maniilaq Health Center submit the federal employment verification to the
484 Board.

485

486

487 **On a motion duly made by Scheller, seconded by Warren, and approved**
488 **unanimously, it was**

489

490 **RESOLVED to approve the application for a dental license for Dr.**
491 **Lorraine Prisbrey contingent on receipt of federal verification from**
492 **Maniilaq Health Center.**

493

494 Dr. Kovaleski welcomed Dr. James A. Fischer to the board meeting and advised he
495 reviewed Dr. Fischer's application. Dr. Fischer appeared in person. Dr. Kovaleski
496 expressed the Board's concern that Dr. Fischer had "spaced out" several malpractice
497 suits and asked for an explanation. Dr. Fischer asked if Dr. Kovaleski meant he
498 hadn't stated them correctly on his application. Dr. Kovaleski said that was correct.
499 Dr. Fischer stated that when he read through the application, he didn't understand
500 the formal part of reading it. Dr. Fischer stated he thought the complaints were in
501 the sense of the ones that were handled by the board or disciplined by the board
502 where he received the letter of admonition. As far as the complaints, there was no
503 action taken by the board or any other organization. Dr. Fischer stated he did not
504 think about those because the ones that really set forth in his mind involved the
505 letter of admonition issue. With the liability trust that he was under in Colorado,
506 any board complaint or any type of issue that came up was turned into their
507 malpractice carrier so they could resolve it, whether it turned into a board action or
508 not. Dr. Fischer stated he did not consider those issues when he was filling out the
509 application.

510

511 Dr. Kovaleski asked Dr. Fischer if he was aware of the seriousness of those questions
512 when filling out the application. Dr. Fischer said when he was contacted by the
513 investigator; that was when it hit him. That was when he tried to put together the
514 letter explaining some of those issues. Dr. Fischer apologized to the Board and
515 stated he never intended to mislead the Board.

516

517 Dr. Kovaleski stated the Board would ask the standard interview questions and
518 would go into executive session to discuss the application.

519

520 The Board asked the standard interview questions:

521 Dr. Kovaleski: Is your dental license in good standing in all jurisdictions in which
522 you have practiced? Dr. Fischer: I believe so.

523 Dr. Navitsky: Is everything in your application file up-to-date and accurate? Dr.
524 Fischer: Yes.

525 Ms. Chaney: Have you been the subject of any disciplinary or peer review
526 proceeding? Dr. Fischer: I was.

527 Ms. Walden: Are you now or have you ever been under investigation for any
528 complaint relating to dental practice? Would you like to make any statements? Dr.
529 Fischer: I have resolved all those complaints and I've done everything that the board
530 has asked me to do to complete all that was necessary with regard to those
531 complaints. I believe they are all up to date and satisfied.

532 Dr. Warren asked if Dr. Fischer was in good standing in Colorado. Dr. Fischer
533 responded yes.

534 Dr. Silveira: Are you the subject of an adverse report from the National Practitioner
535 Data Bank or the American Association of Dental Boards? Dr. Fischer: Yes sir – the
536 letter of admonition.

537 Ms. Fellenberg: Have you read the American Dental Association's Principles of Ethics
538 and Code of Professional Conduct? Do you understand this document has been
539 adopted as the ethical standards for dental practice in Alaska? Dr. Fischer: Yes.

540 Dr. Scheller: Do you care to make a statement on any matter that would support
541 your application or to clarify any aspect of your credentials? Dr. Fischer: I know
542 these issues happened some time ago when they did occur, and I have worked very
543 hard to learn from them. Through all the processes I went through at that time in
544 my life - it was a very difficult time. I learn every day from my patients and from the
545 people around me to become a better dentist and better person to provide high-
546 quality dental care.

547 Dr. Warren stated the lawsuits in Colorado seemed to have happened in a short
548 period of time, from June 2005 through July 2008. Dr. Warren asked why that
549 period of time was significant and how long Dr. Fischer had been practicing. Dr.
550 Fischer stated he had been out of dental school since 1997, moved to Colorado and
551 started practicing in 1998. That period of time was a difficult time. My personal life
552 was not going in a good direction. Marital issues became catastrophic and there was
553 a lot of emotional struggle. Dr. Fischer stated he did not handle his emotional issues
554 very well and it took him off his "A" game with patients. It was a difficult time and
555 he learned a lot from it, from the mistakes that happened and the mistakes that he
556 made.

557 Dr. Kovaleski: Have you read the dental statutes and regulations for Alaska? Dr.
558 Fischer: Yes.

559 Dr. Navitsky: Do you have any questions regarding the practice of dentistry in
560 Alaska? Dr. Fischer: No.

561
562 Dr. Kovaleski thanked Dr. Fischer for his attendance, and based on the complications
563 of the application, the Board would go into executive session for discussion.

564
565

566 **On a motion duly made by Walden, seconded by Fellenberg, and approved**
567 **unanimously, it was**

568

569 **RESOLVED to go into executive session in accordance with AS**
570 **44.62.310(c)(2), for the purpose of discussing Dr. Fischer's application.**

571

572 Board staff to remain during executive session.

573

574 Off the record at 1:24 p.m.

575 On the record at 1:35 p.m.

576

577 **On a motion duly made by Chaney, seconded by Warren, and approved by roll**
578 **call vote, it was**

579

580 **RESOLVED to deny the dental licensure application for Dr. James A. Fischer**
581 **for failing to meet the criteria for licensure per Sec. 08.36.110(a)(1)(D)**
582 **Qualifications for license: An applicant for a license to practice dentistry shall**
583 **provide certification to the board that the applicant is not the subject of an**
584 **adverse decision based upon a complaint, investigation, review procedure, or**
585 **other disciplinary proceeding within the five years immediately preceding**
586 **application, or of an unresolved complaint, investigation, review procedure,**
587 **or other disciplinary proceeding, undertaken by a state, territorial, local, or**
588 **federal dental licensing jurisdiction. Dr. Fischer submitted a letter of**
589 **admonition from the Colorado Dental Board.**

590 **Also, failing to meet criteria of Sec. 08.36.110(a)(1)(F): is not the subject of**
591 **an adverse report from the National Practitioner Data Bank or the American**
592 **Association of Dental Boards Clearinghouse for Board Actions that relates to**
593 **criminal or fraudulent activity, or dental malpractice; and**

594 **Also, failing to meet the criteria of Sec. 08.36.315(1): Grounds for discipline,**
595 **suspension or revocation of license. The board may revoke or suspend the**
596 **license of a dentist, or may reprimand, censure, or discipline a dentist, or both,**
597 **if the board finds after a hearing that the dentist used or knowingly**
598 **cooperated in deceit, fraud, or intentional misrepresentation to obtain a**
599 **license. Dr. Fischer's answered "no" question #31 of the Professional**
600 **Background Investigative Services (PBIS): List all malpractice or negligence**
601 **lawsuits and claims (including active cases) within the last ten years with**
602 **dates and results, including settlements or resolution, including all cases that**
603 **have been dismissed or were settle without payment. The Dentists**
604 **Professional Liability Trust of Colorado reported four lawsuits/claims/board**
605 **actions including a June 2005 claim involving an endodontic procedure done**
606 **on the wrong tooth, a November 2006 lawsuit involving a burr left in tissue, an**

607 **April 2007 claim that Dr. Fischer damaged a tooth during a crown procedure**
608 **in which the tooth was extracted and a 2008 Colorado Board action for a Cerec**
609 **crown on tooth #14 which was placed improperly.**

610 **Additionally, Dr. Fischer erred in checking 'no' to PBIS report question #23:**
611 **has your dental license ever been revoked, suspended, reprimanded, fined or**
612 **disciplined? The Colorado Dental Board issued a letter of admonition in**
613 **2010.**

614

615 Roll call- Navitsky, yea- Warren, yea - Chaney, yea - Silveira, yea- Fellenberg, yea-
616 Scheller, yea - Kovaleski, abstain - Walden, yea- Wells- absent -7 yeas, 0 nays- 1
617 abstention -motion passed.

618

619 Dr. Silveira welcomed Dr. Patricia A. Sharp to the Board meeting and explained the
620 interview process. Dr. Sharp appeared telephonically. The Board asked the
621 standard interview questions. Dr. Warren asked if Dr. Sharp had ever been under
622 investigation for any complaint relating to dental practice. Dr. Sharp stated yes, that
623 there was a settlement in 2008. Dr. Sharp graduated dental school in 2005 and
624 worked in a clinic for a year and a half where she saw a lot of children. One eight
625 year old was treated for a crown. Mother was there; there were no complications or
626 complaints. Dr. Sharp was later told the girl went to the emergency room with a
627 burn on her cheek. The insurance company settled it for \$11,000.00. Ms. Fellenberg
628 asked if Dr. Sharp did any damage to the child. Dr. Sharp responded no, that the
629 bruise was on the outside of her face when she observed her later. Mother was in
630 the room the whole time and everything went well. Mom thanked me afterward. It
631 was really baffling.

632 The Board noted the NPDB reported insignificant injury.

633

634 **On a motion duly made by Chaney, seconded by Fellenberg, and approved**
635 **unanimously, it was**

636

637 **RESOLVED to go into executive session in accordance with AS**
638 **44.62.310(c)(2), for the purpose of discussing NPDB reports as they**
639 **pertain to dental applications with Department of Commerce**
640 **supervisory staff.**

641

642 Board staff to remain during executive session.

643

644 Off the record at 2:08 p.m.

645 On the record at 2:21 p.m.

646

647 **On a motion duly made by Navitsky, seconded by Walden, and approved**
648 **unanimously, it was**

649

650 **RESOLVED to approve the application for a dental license for Dr.**
651 **Patricia A. Sharp.**

652

653 Dr. Silveira welcomed Dr. Henry W. Gottschalk to the Board meeting and explained
654 the interview process. Dr. Gottschalk appeared telephonically. The Board asked the
655 standard interview questions. Dr. Gottschalk has been practicing dentistry for
656 thirty-two years and general anesthesia for thirty-one years. Dr. Gottschalk is
657 interested in developing mobile anesthesia in Alaska.

658

659 **On a motion duly made by Kovalski, seconded by Warren, and approved**
660 **unanimously, it was**

661

662 **RESOLVED to approve the application for a dental license and general**
663 **anesthesia permit for Dr. Henry W. Gottschalk.**

664

665 Dr. Silveira welcomed Dr. Edward E. Linsell to the Board meeting and explained the
666 interview process. Dr. Linsell appeared telephonically. The Board asked the
667 standard interview questions. Dr. Silveria asked about Dr. Linsell's contract with
668 SEARHC and requested Dr. Linsell have SEARHC fill out and submit the federal
669 verification form. SEARHC is considered a federal jurisdiction. Dr. Linsell will have
670 SEARHC submit the federal employment verification to the Board.

671

672 **On a motion duly made by Navitsky, seconded by Chaney, and approved**
673 **unanimously, it was**

674

675 **RESOLVED to approve the application for a dental license for Dr.**
676 **Edward E. Linsell contingent on receipt of federal verification from**
677 **Southeast Alaska Regional Health Consortium.**

678

679 Dr. Silveira welcomed Dr. John K. Capua to the Board meeting and explained the
680 interview process. Dr. Capua appeared telephonically. The Board asked the
681 standard interview questions.

682

683 **On a motion duly made by Silveira, seconded by Walden, and approved**
684 **unanimously, it was**

685

686 **RESOLVED to approve the application for a dental license for Dr. John K.**
687 **Capua.**

688 Ms. Chaney left the meeting at 3:03 p.m.

689

690 Dr. Warren welcomed Dr. Kirk A. Yegerlehner to the Board meeting and explained
691 the interview process. Dr. Yegerlehner appeared telephonically. The Board asked
692 the standard interview questions.

693

694 **On a motion duly made by Warren, seconded by Scheller, and approved**
695 **unanimously, it was**

696

697 **RESOLVED to approve the application for a dental license for Dr. Kirk A.**
698 **Yegerlehner.**

699

700 Dr. Silveira welcomed Dr. Michael T. Smith to the Board meeting and explained the
701 interview process. Dr. Smith appeared telephonically. The Board asked the
702 standard interview questions.

703

704 **On a motion duly made by Fellenberg, seconded by Walden, and approved**
705 **unanimously, it was**

706

707 **RESOLVED to approve the application for a dental license for Dr.**
708 **Michael T. Smith.**

709

710 Dr. Silveira welcomed Dr. Ryan K. Larsen to the Board meeting and explained the
711 interview process. Dr. Larsen appeared telephonically. The Board asked the
712 standard interview questions.

713

714 **On a motion duly made by Scheller, seconded by Warren, and approved**
715 **unanimously, it was**

716

717 **RESOLVED to approve the application for a dental license and general**
718 **anesthesia permit for Dr. Ryan K. Larsen.**

719

720 Dr. Silveira welcomed Dr. Clifton L. Harris to the Board meeting and explained the
721 interview process. Dr. Harris appeared telephonically. The Board asked the
722 standard interview questions.

723

724 **On a motion duly made by Warren, seconded by Kovaleski, and approved**
725 **unanimously, it was**

726

727 **RESOLVED to approve the application for a dental license for Dr. Clifton**
728 **L. Harris.**

729

730 The Board was unable to reach Dr. Brian A. Kelleher and will reschedule him for
731 interview at the September 5, 2014 meeting.

732

733 The Board elected to take a five minute break.

734 Off record at 3:31 p.m.

735 On record at 3:35 p.m.

736

737 **Agenda Item 9- Old/New Business**

738

739 **Glenn E. Lockwood, DDS - Reinstatement of Dental License -**

740

741 Dr. Glenn E. Lockwood present at the meeting.

742

743 **On a motion duly made by Walden, seconded by Fellenberg, and approved**
744 **unanimously, it was**

745

746 **RESOLVED to go into executive session in accordance with AS**
747 **44.62.310(c)(2), for the purpose of discussing reinstatement of Dr.**
748 **Glenn Lockwood's dental license.**

749

750 Board staff to remain during executive session.

751

752 Off the record at 3:35 p.m.

753 On the record at 4:03 p.m.

754

755 **On a motion duly made by Walden, seconded by Warren, and approved by roll**
756 **call vote, it was**

757

758 **RESOLVED to deny reinstatement of dental license for Dr. Glenn E.**
759 **Lockwood based on failure to meet compliance of the consent**
760 **agreement (eight hours of ethics training have not been**
761 **completed).**

762 **Additionally, Dr. Lockwood does not qualify for reinstatement**
763 **based on the following statutes and regulations: that per 12 AAC**
764 **28.925(b)(4): "a dental license that has been lapsed for at least one**
765 **year but less than five years must meet qualifications for a license**
766 **under AS 08.36:**

767 **Sec. 08.36.110(a)(1)(C): "has not had a license to practice dentistry**
768 **revoked, suspended, or voluntarily surrendered in this state or**
769 **another state" and**

770 **Sec. 08.36.110(a)(1)(D): “is not the subject of an adverse decision**
771 **based upon a complaint, investigation, review procedure, or other**
772 **disciplinary proceeding within the five years immediately**
773 **preceding application, or of an unresolved complaint, investigation,**
774 **review procedure, or other disciplinary proceeding, undertaken by**
775 **a state, territorial, local or federal dental licensing jurisdiction” and**
776 **also**

777 **Sec. 08.36.110(a)(1)(F): “is not the subject of an adverse report**
778 **from the National Practitioner Data Bank or the American**
779 **Association of Dental Boards Clearinghouse for Board Actions that**
780 **relates to criminal or fraudulent activity, or dental malpractice.”**

781 **This is based on the California Dental Board’s revocation of your**
782 **California dental license and conviction of four counts of Felony Tax**
783 **Evasion.**

784

785 Dr. Silveira called for discussion. There was no discussion.

786

787 Roll call- Navitsky, yea- Warren, yea – Chaney, absent - Silveira, yea- Fellenberg, yea-
788 Scheller, yea - Kovaleski, yea – Walden, yea- Wells- absent -7 yeas, 0 nays, - motion
789 passed.

790

791 Dr. Lockwood asked the Board for an explanation.

792 Ms. Walden asked Ms. Kunow to address Dr. Lockwood. Ms. Kunow stated the
793 Board had just approved the denial of the reinstatement, with reasons on record.
794 The recorded reasons will be included in a denial letter that will be sent with
795 instructions for the appeal process.

796

797 Dr. Lockwood asked if the denial is forever. Ms. Kunow stated the reinstatement of
798 this license is being denied. It may be possible to apply for a new license.

799

800 Dr. Lockwood asked how to apply for a new license. Ms. Kunow advised that since
801 he is represented by counsel he should discuss that with his attorney. The Board
802 cannot have any exparte communication.

803

804 Dr. Lockwood left the meeting.

805

806 Robert L. English II, DDS Application –

807 Dr. Kovaleski stated he was the reviewing Board member for Dr. English.

808

809 **On a motion duly made by Kovaleski, seconded by Warren, and approved by**
810 **roll call vote, it was**

811
812 **RESOLVED to deny the application for licensure for Dr. Robert**
813 **English II for his failure to meet the criteria in Alaska Statute Sec.**
814 **08.36.110(a)(1)(C): “has not had a license to practice dentistry**
815 **revoked, suspended, or voluntarily surrendered in this state or**
816 **another state.” Dr. English’s California dental license was revoked**
817 **in 1996, reimposed and revoked again in 1997 and 2000;**
818 **Failure to meet the criteria in Alaska Statute**
819 **Sec.08.36.110(a)(1)(E): “is not the subject of an unresolved or an**
820 **adverse decision based upon a complaint, investigation, review**
821 **procedure, or other disciplinary proceeding, undertaken by a state,**
822 **territorial, local, or federal dental licensing jurisdiction or law**
823 **enforcement agency that relates to criminal or fraudulent activity,**
824 **dental malpractice, or negligent dental care and that adversely**
825 **reflects on the applicant’s ability or competence to practice**
826 **dentistry or on the safety or well-being of patients” Dr. English was**
827 **the subject of six criminal convictions, including a Felony Driving**
828 **Under the Influence conviction, and 2000, 2010 and 2011**
829 **malpractice settlements;**
830 **Failure to meet the criteria in Alaska Statute Sec.**
831 **08.36.110(a)(1)(F): “is not the subject of an adverse report from the**
832 **National Practitioner Data Bank or the American Association of**
833 **Dental Boards Clearinghouse for Board Actions that relates to**
834 **criminal or fraudulent activity, or dental malpractice.” The NPDB**
835 **report processed July 25, 2013 contained disciplinary actions taken**
836 **by the California Board of Dental Examiners, 2000, 2010 and 2011**
837 **malpractice settlements, and a prohibition from US Department of**
838 **Health and Social Services;**
839 **Failure to meet criteria in Alaska Statute AS 08.36.315(1): “used or**
840 **knowingly cooperated in deceit, fraud, or intentional**
841 **misrepresentation to obtain a license.” Dr. English answered ‘NO’ to**
842 **question #6: “Are you the subject of an unresolved decision or a**
843 **decision based upon a complaint, investigation, review procedure,**
844 **or other disciplinary proceeding, undertaken by a state, territorial,**
845 **local, or federal dental licensing jurisdiction, dental society, or law**
846 **enforcement agency that relates to criminal or fraudulent activity,**
847 **dental malpractice, or negligent dental care that reflects on your**
848 **ability or competence to practice dentistry or on the safety or well-**
849 **being of patients?” Dr. English knew he was the subject of six**
850 **criminal convictions and three malpractice settlements when he**
851 **submitted his application for dental licensure.**

852

853 Dr. Silveira called for discussion. There was no discussion.

854

855 Roll call- Navitsky, yea- Warren, yea – Chaney, absent - Silveira, yea- Fellenberg, yea-
856 Scheller, yea - Kovaleski, abstain – Walden, yea- Wells- absent -6 yeas, 0 nays, 1
857 abstention- motion passed.

858

859 The recorded reasons will be included in a denial letter that will be sent with
860 instructions for the appeal process.

861

862 Maranda M. Allegood, RDH – Application –

863

864 The Board reviewed Ms. Allegood’s application for dental hygiene by credentials.
865 The Board approved the North Carolina state exam based on new information
866 provided by North Carolina.

867

868 **On a motion duly made by Scheller, seconded by Warren, and approved**
869 **unanimously, it was**

870

871 **RESOLVED to approve the application for a dental hygiene licensure by**
872 **credentials for Dr. Maranda M. Allegood.**

873

874 Constance N. Burke – Restorative Function Certificate Application -

875

876 Dr. Kovaleski stated the course has not been approved by the Board and Ms. Burke
877 did not pass the WREB. Also, does the Board consider the military as a jurisdiction?

878 The Board responded yes; the military is a federal jurisdiction. Ms. Walden advised
879 the federal government is in and of itself a jurisdiction.

880 Dr. Kovaleski expressed concerns that if the Board approved military training, that
881 applications from DHATs would also have to be approved because they fall into the
882 federal jurisdiction. DHATs would be able to get an expanded function license
883 without a WREB.

884 Dr. Scheller asked if there was a military exemption. Ms. Walden stated it does not
885 apply to dentistry.

886 Dr. Kovaleski suggested approving the didactic, but Ms. Burke would have to take
887 the WREB. The same would apply to the DHATs. The Board could review the
888 curriculum and, if approved, the applicant could take the WREB. They have to prove
889 they have some type of exam.

890 Ms. Walden asked when the last time Ms. Burke provided services. Ms. Walden
891 stated the last time she herself took the restorative WREB was more than five years

892 ago, so she would have to take the WREB again if she were applying. Ms. Burke's
893 army diploma is from 2005.

894 Ms. Walden requested Ms. Burke provide the restorative logs and didactic
895 curriculum.

896 Dr. Kovaleski stated WREB will want Board approval of the didactic before Ms.
897 Burke can register to take the WREB. Dr. Kovaleski will contact WREB for specific
898 information on how it relates to military and DHATs.

899

900 **On a motion duly made by Walden, seconded by Warren, and approved**
901 **unanimously, it was**

902

903 **RESOLVED to table the application for a restorative function**
904 **certification for Constance N. Burke pending restorative function logs,**
905 **didactic curriculum and Western Regional Exam Board information.**

906

907 Dr. Jess Ellis requested to speak to the Board.

908 Dr. Ellis stated he is the most senior endodontist practicing in the State of Alaska.
909 He has done an estimated 33,000 root canals in the State. He has an itinerate type of
910 practice and services Homer, Soldotna, Anchorage, Fairbanks, Juneau and Wrangell.

911 Dr. Ellis stated he had worked with the licensing division on applications and
912 approvals. He has also been involved with malpractice suit testifying. Dr. Ellis
913 thanked the Board for taking time out of their lives and practices to do what they do.
914 One thing that Dr. Ellis has been impressed with the Dental Board over the years is
915 that this organization tries to insure that the people practicing in this State are
916 competent and qualified.

917 Another notion was that the Board was the entity that would make sure there is
918 some sort of justice in what was done in those things that sometimes run afoul
919 because of bureaucratic regulations and unintended consequences. The Board is
920 here to mitigate that as much as possible.

921 Dr. Ellis stated he thought the decision the Board made with regard to Dr. Lockwood
922 maybe in full compliance with all of the little nuances of the law but the net effect is
923 absolutely an injustice.

924 Dr. Ellis summarized what he knew of Dr. Lockwood's situation was that he was
925 made a show trial for the IRS who wanted to hammer home the message to all
926 medical practitioners that they don't mess with the IRS and get away with it. If the
927 Board would review his history, there were procedures that were supposed to be
928 followed but weren't. Dr. Lockwood was probably incorrectly and unfairly
929 convicted of tax problems. That, in some circumstances, probably might be
930 justification for all of what's happened here, or not.

931 With the 'kinder, gentler' IRS that we have, any one of us can be the subject of the
932 same over-aggressive and somewhat unfair dealings with the IRS. That has set up a
933 situation where now he's guilty of this and it then causes other consequences.
934 Dr. Lockwood's losing his license in California has become the basis of denying
935 license here. There was a lack of due process in the revocation of the California
936 license.
937 The bottom line is that this guy is being railroaded in a way that's denying him the
938 opportunity to practice his profession.
939 I've seen his work on the Kenai Peninsula and I think he has shown the skill ability
940 and ethics to have his license reinstated.
941 I know the Board has rules and justifications but I think the Board has erred in its
942 decision today. The Board is now setting up a "catch-22" by saying he can't reinstate
943 this license and if he applies for a new license, you'll be asking the same questions.
944 He can't get a new license because of all the stuff he's been convicted of.
945 This Board needs to come up with justice for the practitioners and for the public in
946 the face of unintended consequences of all these competing regulations. Dr. Ellis
947 requested the Board reconsider its decision.
948 Dr. Warren advised the statutes are written by the legislature, not the Board. The
949 Board sometimes writes regulations with legal help to apply to the statutes. In this
950 case, the license could not be reinstated because of the statutes. The Board doesn't
951 have the flexibility to do what you are requesting. The Board has to follow State law.
952 Dr. Ellis stated there was a consent decree that was agreed to and I think Dr.
953 Lockwood has complied with it. The consent decree should trump these other
954 considerations. That agreement was agreed by all, the Attorney General, and he has
955 complied. Now the Board is not honoring that agreement.
956 Ms. Kunow cautioned the Board could not participate in ex parte communication
957 since Dr. Lockwood was represented by council.
958 The Board thanked Dr. Ellis for his time.
959
960

961 **Agenda Item 11 - Regulations**

962

963 **On a motion duly made by Silveira, seconded by Fellenberg, and approved**
964 **unanimously, it was**

965

966 **RESOLVED to stop Part 2 of JU2013200315 and include that into the**
967 **new regulation project going out to public comment.**

968

969 The Board reviewed the new proposed regulation language.

970 Changes to the new proposed regulation recommendations included:

971

972 12 AAC 28.955(c)(1): KEEP the \$50.00 courtesy license application fee.

973 12 AAC 28.955(c)(5): REPEAL (Passage of HB 269 nullified this subsection.)

974

975 12 AAC 02.190(a)(1):

976 ADD subsection (D): local anesthetic permit, \$50;

977

978 The Board agreed to send the new language to the regulations specialist for public
979 comment.

980

981 **Agenda Item 9- Old/New Business (con't)**

982

983 **FY2014 Annual Report -**

984 Dr. Wells is compiling the narrative. The Board is responsible for completing the
985 report. Ms. Kunow will compile the statistics. The report is due by end of fiscal year
986 2014, June 30, 2014.

987 Ms. Walden proposed the Board ask the Governor's Office to repeal Sec 08.36.075,
988 Dental Radiological Equipment. This could be a short bill to repeal it. The Board can
989 research what other state dental boards are doing with regard to dental radiological
990 equipment registration and inspection and what departments are handling that.
991 This information can be submitted before legislative session. We would have two
992 years to pass this. If the Board goes to the Governor, they will not need a lobbyist.
993 The Board will not need a legislative liaison to carry the bill to the Governor. In the
994 legislative process, the idea must be communicated to a legislator, legislative
995 committee or the Governor for further action. The Board can get the Governor on
996 board, convey the information, and if he is in agreement, it will not be a big deal. Dr.
997 Warren volunteered to present it to the Governor if Ms. Walden would write it.

998 Ms. Walden suggested contacting the Governor's Office so the Board could discuss
999 what is needed at the next meeting.

1008 Ms. Walden volunteered to write a generic letter to each of the states to find out
1009 whether the dental boards handle the radiological equipment or, if not, what agency
1010 does. The Board agreed it would be worth a try.
1011

1012 **On a motion duly made by Walden, seconded by Scheller, and approved**
1013 **unanimously, it was**

1014
1015 **RESOLVED to contact the Governor's Office and have a representative**
1016 **present at the September Board meeting to explain the legislative**
1017 **process for bill introduction.**
1018

1019 Dr. Silveira presented a radiological equipment testing device made by Di-Quad.
1020 The dentist can send images to the company and they certify the machine. Dr.
1021 Silveira suggested putting the company on the list of approved equipment
1022 inspectors. This will be discussed at the September meeting.
1023

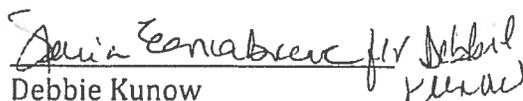
1024 **Agenda Item 14- Office Business**

1025
1026 Travel authorizations distributed to Board members for signature.
1027 Minutes from February 7, 2014 signed by Dr. Paul Silveira.
1028

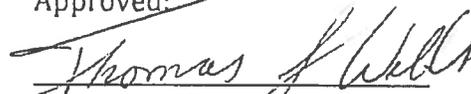
1029 Ms. Walden made a motion to adjourn the meeting. All in favor.

1030
1031 The meeting adjourned at 4:45 p.m.
1032

1033 Respectfully submitted:

1034
1035 
1036 Debbie Kunow
1037 Debbie Kunow
1038 Licensing Examiner
1039

1040 Approved:

1041 
1042 Thomas Wells, DDS, President
1043 Thomas Wells, DDS, President
1044

1045 Date: Sept 15, 2014