Call to Order / Roll Call

STATE OF ALASKA 2021

State Holidays

54	ate Hondays
Date	Holiday
01/01	New Year's Day
01/18	MLK Jr.'s Birthday
02/15	Presidents' Day
03/29	Seward's Day
05/31	Memorial Day
07/04	Independence Day (observed 7/5)
09/06	Labor Day
10/18	Alaska Day
11/11	Veterans' Day
11/25	Thanksgiving Day
12/25	Christmas Day (observed 12/24)
01/01/22	New Year's Day (observed 12/31/21)

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



Holiday



State calendar maintained by the Division of Finance, Department of Administration http://doa.alaska.gov/calendars.html Revised 12/16/2019

OLIDAY CALENDAR

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DECEMBER



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.

Dental Board Roster

David Nielson, DDS – Board President
Kelly Lucas, DDS
Jesse Hronkin, DDS
Dominic Wenzell, DMD
Jon Woller, DDS
Greg Johnson, DDS
Brittany Dschaak, RDH
Christina Hansen, RDH
Bradley Heaston, Public Member

Ethics Report

MEMORANDUM

State of Alaska

Department of Law

10:		DATE:		
		FILE NO.:		
	Angia Whita	TEL. NO.:		
FROM:	Angie White Litigation Assistant Department of Law	FAX:		
	Opinions, Appeals, & Ethics Section	SUBJECT:	Executive Branch Ethics Act, AS 39.52 Quarterly Report	
:	**SAMPLE LANGUAGE – PLEASE O ONTO YOUR BOARD OR COM	COPY <u>ON</u> MISSION	LY THE PARTS THAT APPLY 'S LETTERHEAD **	
	As designated ethics supervisor . I wish to advise		ir [executive director] for the I have received no notifications of	
_	ial violations or requests for ethics detaye made no written determinations for	erminatio	ns under the Ethics Act (AS 39.52)	
	As designated ethics supervisor, I have received		ir [executive director] for the ification(s) of a potential violation	
attach reviev	requests for ethics determinations ed a copy of the notices and requests by by the attorney general. I did [did ney General.	along wi	th my written determination(s) for	
	<u>A</u> 1	<u>ND</u>		
_	at as addressed above, no other [board notes are conflicted interest at a recorded put of the conflict of interest at a recorded put of the conflict of interest at a recorded put of the conflict of the conf			
	dition to the above, at the [date] disclosed a potential	meeting, conflict v	with respect to[insert brief	
detern	<pre>ption] Insert disposition: [nined s/he could [could not] participation. to permit [not to permit] participation.</pre>	ite.] or [T	rained from participation.] <i>or</i> [I The Board [Commission] members	

CONFIDENTIAL

ETHICS SUPERVISOR DETERMINATION FORM

(Board or Commission Member)

Board or Commission:
Member Disclosing Potential Ethics Violation:
I have determined that the situation described on the attached ethics disclosure form does or would violate AS 39.52.110190. Identify applicable statute below. does not or would not violate AS 39.52.110190.
Signature of Designated Ethics Supervisor (Chair)
Printed Name of Designated Ethics Supervisor
Date:
COMMENTS (Please attach a separate sheet for additional space):

Note: Disclosure Form must be attached. Under AS 39.52.220, if the chair or a majority of the board or commission, not including the disclosing member, determines that a violation of AS 39.52.110 39.52.190 will exist if the member participates, the member shall refrain from voting, deliberating, or participating in the matter. A member will not be liable under the Ethics Act for action in accordance with such a determination so long as the member has fully disclosed all facts reasonably necessary to the determination and the attorney general has not advised the member, chair, or board or commission that the action is a violation. Forward disclosures with determinations to the State Ethics Attorney as part of your quarterly report. Quarterly reports are submitted to Litigation Assistant, Opinions, Appeals & Ethics, Department of Law, 1031 W. 4th Avenue, Suite 200, Anchorage, AK 99501.

State of Alaska Department of Law

Who Is My Designated Ethics Supervisor?

Every state public officer, employee or board or commission member, has a designated ethics supervisor.

Executive Agencies

The ethics supervisor for each agency is the Commissioner or a senior manager to whom the Commissioner has delegated the function. The current ethics supervisor for each agency is listed below. The ethics supervisor for a Commissioner is Guy Bell, Director of Administrative Services in the Office of Governor, by delegation from the Governor.

Boards and Commissions

The Chair of each board and commission serves as the ethics supervisor for the other members and any executive director. The ethics supervisor for the Chair is Guy Bell, Director of Administrative Services in the Office of Governor, by delegation from the Governor. If a board or commission employs staff, the executive director serves as the ethics supervisor for these employees.

Public Corporations

The Chair of the board serves as the ethics supervisor for the other members of the board and any executive director. The executive director is the ethics supervisor for employees of the corporation.

Office of the Governor

The ethics supervisor for the Governor and Lieutenant Governor is the Attorney General. By delegation from the Governor, the ethics supervisor for the staff of the offices of the Governor and Lieutenant Governor is Guy Bell, Director of Administrative Services.

University of Alaska

By delegation of the University President, the ethics supervisor for university employees is Associate General Counsel Andy Harrington.

EXECUTIVE BRANCH AGENCIES

Administration: Leslie Ridle, Deputy Commissioner

Commerce, Community & Economic Development: Jon Bittner, Deputy Commissioner

Corrections: April Wilkerson, Director of Administrative Services

Education & Early Development: Les Morse, Deputy Commissioner

Environmental Conservation: Tom Cherian, Director of Administrative Services

Fish & Game: Kevin Brooks, Deputy Commissioner

Health & Social Services: Dallas Hargrave, Human Resource Manager

Labor & Workforce Development: Michael Monagle, Director, Division of Workers Compensation

Law: Jonathan Woodman, Assistant Attorney General

Military & Veterans Affairs: Marty Meyer, Special Assistant to Commissioner

Natural Resources: John Crowther, Inter-Governmental Coordinator

Public Safety: Terry Vrabec, Deputy Commissioner

Revenue: Dan DeBartolo, Administrative Services Director

Transportation & Public Facilities:

- Highways & Public Facilities: Steve Hatter, Deputy Commissioner
- Aviation: John Binder, Deputy Commissioner
- Central Region: Rob Campbell, Regional Director
- Northern Region: Rob Campbell, Acting Regional Director
- Southcoast Region: Acting Regional Director
- · Alaska Marine Highway System: Michael Neussl, Deputy Commissioner
- Headquarters: Mary Siroky, Administrative Services Director

Updated April 2015

Department of Law attorney.general@alaska.gov P.O. Box 110300, Juneau, AK 99811-0300 Phone: 907-465-3600 Fax: 907-465-2075 TTY: 907-258-9161 State of Alaska © 2015 Webmaster

State of Alaska Department of Law

Ethics Information for Members of Boards & Commissions (AS 39.52)

Introduction

This is an introduction to AS 39.52, the Alaska Executive Branch Ethics Act. This guide is not a substitute for reading the law and its regulations. State board and commission members who have further questions should contact their board chair or staff.

The Ethics Act applies to all current and former executive branch public employees and members of statutorily created boards and commissions.

Scope of Ethics Act (AS 39.52.110)

Service on a state board or commission is a public trust. The Ethics Act prohibits substantial and material conflicts of interest. Further, board or commission members, and their immediate family, may not improperly benefit, financially or personally, from their actions as board or commission members. The Act does not, however, discourage independent pursuits, and it recognizes that minor and inconsequential conflicts of interest are unavoidable.

Misuse of Official Position (AS 39.52.120)

Members of boards or commissions may not use their positions for personal gain or to give an unwarranted benefit or treatment to any person. For example, board members may not:

- use their official positions to secure employment or contracts;
- accept compensation from anyone other than the State for performing official duties;
- use State time, equipment, property or facilities for their own personal or financial benefit or for partisan political purposes;
- take or withhold official action on a matter in which they have a personal or financial interest; or
- coerce subordinates for their personal or financial benefit.
- attempt to influence outcome of an administrative hearing by privately contacting the hearing officer.

Terry knew that a proposal that was before the board would harm Terry's business competitor. Instead of publicly disclosing the matter and requesting recusal, Terry voted on the proposal.

Board member Mick has board staff employee Bob type an article for him that Mick hopes to sell to an Alaskan magazine. Bob types the article on State time.

Improper Gifts (AS 39.52.130)

A board member may not solicit or accept gifts if a person could reasonably infer from the circumstances that the gift is intended to influence the board member's action or judgment. "Gifts" include money, items of value, services, loans, travel, entertainment, hospitality, and employment. All gifts from registered lobbyists are presumed to be improper, unless the giver is immediate family of the person receiving the gift.

A gift worth more than \$150 to a board member or the board member's immediate family must be reported within 30 days if:

- the board member can take official action that can affect the giver, or
- the gift is given to the board member because he or she is on a state board.

The receipt of a gift worth less than \$150 may be prohibited if a person could reasonably infer from the circumstances that the gift is intended to influence the board member's action or judgment. Receipt of such a gift should be disclosed.

Any gift received from another government, regardless of value, must be reported; the board member will be advised as to the disposition of this gift.

A form for reporting gifts is available at www.law.alaska.gov/doclibrary/ethics or from the board or commission staff.

This restriction on gifts does not apply to lawful campaign contributions.

The commission is reviewing Roy's proposal for an expansion of his business. Roy invites all the board members out to dinner at an expensive restaurant. He says it will be okay, since he isn't excluding any of the members.

Jody receives a holiday gift every year from Sam. Jody was recently appointed to a state board, but Sam has no business that is before the board. Jody may accept the gift.

Improper Use or Disclosure of Information (AS 39.52.140)

No former or current member of a board may use or disclose any information acquired from participation on the board if that use or disclosure could result in a financial or personal benefit to the board member (or immediate family), unless that information has already been disseminated to the public. Board members are also prohibited from disclosing confidential information, unless authorized to do so.

Sheila has been on the board for several years. She feels she has learned a great deal of general information about how to have a successful business venture. So she sets up her own business and does well.

Delores has always advised and assisted the other doctors in her clinic on their continuing education requirements. After Delores is appointed to the medical board, she discloses this role to the board and continues to advise the doctors in her clinic.

Jim reviews a confidential investigation report in a licensing matter. He discusses the practitioner's violation with a colleague who is not a board member.

Improper Influence in State Grants, Contracts, Leases or Loans (AS 39.52.150)

A board member, or immediate family, may not apply for, or have an interest in a State grant, contract, lease, or loan, if the board awards or takes action to administer the State grant, contract, lease, or loan.

A board member (or immediate family) may apply for or be a party to a competitively solicited State grant, contract or lease, if the board as a body does not award or administer the grant, contract, or lease and so long as the board member does not take official action regarding the grant, contract, or lease.

A board member (or immediate family) may apply for and receive a State loan that is generally available to the public and has fixed eligibility standards, so long as the board member does not take (or withhold) official action affecting the loan's award or administration.

Board members must report to the board chair any personal or financial interest (or that of immediate family) in a State grant, contract, lease or loan that is awarded or administered by the agency the board member serves. A form for this purpose is available at www.law.alaska.gov/doclibrary/ethics or from the board or commission staff.

John sits on a board that awards state grants. John hasn't seen his daughter for nearly ten years so he figures that it doesn't matter when her grant application comes up before the board.

The board wants to contract out for an analysis of the board's decisions over the last ten years. Board member Kim would like the contract since she has been on the board for ten years and feels she could do a good job.

Improper Representation (AS 39.52.160)

A board or commission member may not represent, advise, or assist a person in matters pending before the board or commission for compensation A nonsalaried board or commission member may represent, advise, or assist in matters in which the member has an interest that is regulated by the member's own board or commission, if the member acts in accordance with AS 39.52.220 by disclosing the involvement in writing and on the public record, and refraining from all participation and voting on the matter. This section does not allow a board member to engage in any conduct that would violate a different section of the Ethics Act.

Susan sits on the licensing board for her own profession. She will represent herself and her business partner in a licensing matter. She discloses this situation to the board and refrains from participation in the board's discussions and determinations regarding the matter.

Restriction on Employment After Leaving State Service (AS 39.52.180)

For two years after leaving a board, a former board member may not provide advice or work for compensation on any matter in which the former member personally and substantially participated while serving on the board. This prohibition applies to cases, proceedings, applications, contracts, legislative bills, regulations, and similar matters. This section does not prohibit a State agency from contracting directly with a former board member.

With the approval of the Attorney General, the board chair may waive the above prohibition if a determination is made that the public interest is not jeopardized.

Former members of the governing boards of public corporations and former members of boards and commissions that have regulation-adoption authority, except those covered by the centralized licensing provisions of AS 08.01, may not lobby for pay for one year.

The board has arranged for an extensive study of the effects of the Department's programs. Andy, a board member, did most of the liaison work with the contractor selected by the board, including some negotiations about the scope of the study. Andy quits the board and goes to work for the contractor, working on the study of the effects of the Department's programs.

Andy takes the job, but specifies that he will have to work on another project.

Aiding a Violation Prohibited (AS 39.52.190)

Aiding another public officer to violate the Ethics Act is prohibited.

Agency Policies (AS 39.52.920)

Subject to the Attorney General's review, a board may adopt additional written policies further limiting personal or financial interests of board members.

Disclosure Procedures

DECLARATION OF POTENTIAL VIOLATIONS BY MEMBERS OF BOARDS OR COMMISSIONS (AS 39.52.220)

A board member whose interests or activities could result in a violation of the Ethics Act if the member participates in board action must disclose the matter on the public record and in writing to the board chair who determines whether a violation exists. A form for this purpose is available at www.law.alaska.gov/doclibrary/ethics or from the board or commission staff. If another board member objects to the chair's ruling or if the chair discloses a potential conflict, the board members at the meeting (excluding the involved member) vote on the matter. If the chair or the board determines a violation will occur, the member must refrain from deliberating, voting, or participating in the matter. For more information, see Ethics Act Procedures for Boards and Commissions available at the above noted web site.

When determining whether a board member's involvement in a matter may violate the Ethics Act, either the chair or the board or commission itself may request guidance from the Attorney General.

ATTORNEY GENERAL'S ADVICE (AS 39.52.240-250)

A board chair or a board itself may request a written advisory opinion from the Attorney General interpreting the Ethics Act. A former board member may also request a written advice from the Attorney General. These opinions are confidential. Versions of opinions without identifying information may be made available to the public.

REPORTS BY THIRD PARTIES (AS 39.52.230)

A third party may report a suspected violation of the Ethics Act by a board member in writing and under oath to the chair of a board or commission. The chair will give a copy to the board member and to the Attorney General and review the report to determine whether a violation may or does exist. If the chair determines a violation exists, the board member will be asked to refrain from deliberating, voting, or participating in the matter.

Complaints, Hearings, and Enforcement

COMPLAINTS (AS 39.52.310-330)

Any person may file a complaint with the Attorney General about the conduct of a current or former board member. Complaints must be written and signed under oath. The Attorney General may also initiate complaints based on information provided by a board. A copy of the complaint will be sent to the board member who is the subject of the complaint and to the Personnel Board.

All complaints are reviewed by the Attorney General. If the Attorney General determines that the complaint does not warrant investigation, the complainant and the board member will be notified of the dismissal. The Attorney General may refer a complaint to the board member's chair for resolution.

After investigation, the Attorney General may dismiss a complaint for lack of probable cause to believe a violation occurred or recommend corrective action. The complainant and board member will be promptly notified of this decision.

Alternatively, if probable cause exists, the Attorney General may initiate a formal proceeding by serving the board or commission member with an accusation alleging a violation of the Ethics Act. Complaints or accusations may also be resolved by settlement with the subject.

CONFIDENTIALITY (AS 39.52.340)

Complaints and investigations prior to formal proceedings are confidential. If the Attorney General finds evidence of probable criminal activity, the appropriate law enforcement agency shall be notified.

HEARINGS (AS 39.52.350-360)

An accusation by the Attorney General of an alleged violation may result in a hearing. An administrative law judge from the state's Office of Administrative Hearings serves as hearing officer and determines the time, place and other matters. The parties to the proceeding are the Attorney General, acting as prosecutor, and the accused public officer, who may be represented by an attorney. Within 30 days after the hearing, the hearing officer files a report with the Personnel Board and provides a copy to the parties.

PERSONNEL BOARD ACTION (AS 39.52.370)

The Personnel Board reviews the hearing officer's report and is responsible for determining whether a violation occurred and for imposing penalties. An appeal may be filed by the board member in the Superior Court.

PENALTIES (AS 39.52.410-460)

When the Personnel Board determines a board member has violated the Ethics Act, it will order the member to refrain from voting, deliberating, or participating in the matter. The Personnel Board may also order restitution and may recommend that the board member be removed from the board or commission. If a recommendation of removal is made, the appointing authority will immediately remove the member.

If the Personnel Board finds that a former board member violated the Ethics Act, it will issue a public statement about the case and will ask the Attorney General to pursue appropriate additional legal remedies.

State grants, contracts, and leases awarded in violation of the Ethics Act are voidable. Loans given in violation of the Ethics Act may be made immediately payable.

Fees, gifts, or compensation received in violation of the Ethics Act may be recovered by the Attorney General.

The Personnel Board may impose a fine of up to \$5,000 for each violation of the Ethics Act. In addition, a board member may be required to pay up to twice the financial benefit received in violation of the Ethics Act.

Criminal penalties are in addition to the civil penalties listed above.

DEFINITIONS (AS 39.52.960)

Please keep the following definitions in mind:

Benefit - anything that is to a person's advantage regardless financial interest or from which a person hopes to gain in any way.

Board or Commission - a board, commission, authority, or board of directors of a public or quasi-public corporation, established by statute in the executive branch, including the Alaska Railroad Corporation.

Designated Ethics Supervisor - the chair or acting chair of the board or commission for all board or commission members and for executive directors; for staff members, the executive director is the designated ethics supervisor.

Financial Interest - any property, ownership, management, professional, or private interest from which a board or commission member or the board or commission member's immediate family receives or expects to receive a financial benefit. Holding a position in a business, such as officer, director, partner, or employee, also creates a financial interest in a business.

Immediate Family - spouse; another person cohabiting with the person in a conjugal relationship that is not a legal marriage; a child, including a stepchild and an adoptive child; a parent, sibling, grandparent, aunt, or uncle of the person; and a parent or sibling of the person's spouse.

Official Action - advice, participation, or assistance, including, for example, a recommendation, decision, approval, disapproval, vote, or other similar action, including inaction, by a public officer.

Personal Interest - the interest or involvement of a board or commission member (or immediate family) in any organization or political party from which a person or organization receives a benefit.

For further information and disclosure forms, visit our Executive Branch Ethics web site or please contact:

State Ethics Attorney Alaska Department of Law 1031 West 4th Avenue, Suite 200 Anchorage, Alaska 99501-5903 (907) 269-5100 attorney.general@alaska.gov

Revised 9/2013

Department of Law attorney.general@alaska.gov P.O. Box 110300, Juneau, AK 99811-0300 Phone: 907-465-3600 Fax: 907-465-2075 TTY: 907-258-9161 State of Alaska © 2015 Webmaster

State of Alaska Department of Law

Executive Branch Ethics Act

Responsibilities of Designated Ethics Supervisors for Boards and Commissions

Boards and commissions subject to the Ethics Act have designated ethics supervisors. The chair serves as the designated ethics supervisor for board or commission members and the executive director. The executive director is the designated ethics supervisor for staff. The designated ethics supervisor for a chair is the governor, who has delegated this responsibility to Guy Bell, Administrative Director of the Office of the Governor.

Designated ethics supervisors should refer to the Manual for Designated Ethics Supervisors (April 2008), available from the state ethics attorney, regarding their responsibilities under the Ethics Act. Briefly, as designated ethics supervisor, you must --

- 1. Ensure that members and employees are provided copies of the guides, Ethics Information for Members of Boards and Commissions and Ethics Act Procedures for Boards and Commissions -- and keep a supply of disclosure forms.
 - 1. These guides, other educational materials, disclosure forms, statutes and regulations are available for review and copying on the Department of Law ethics web site. If access to this page is not available, please contact the Attorney General's office at 269-7195.
- 2. Review all disclosures, investigate potential ethics violations, make determinations regarding conduct, and take action.
- 3. Keep member or employee disclosure statements (of potential violations, receipt of gifts, and interests in grants/contracts/leases/loans) on file in your office. Disclosure of a gift received from another government must be forwarded to the Office of the Governor.
- 4. Submit an ethics report to the Department of Law in April, July, October and January for the preceding quarter. You will receive a reminder. There is a sample report on the ethics web page.
 - 1. Mail, email or fax to Kim Halstead, Litigation Assistant, Department of Law, Opinions, Appeals & Ethics Section, 1031 W. 4th Avenue, Suite 200, Anchorage, AK, 99501, ethicsreporting@alaska.gov, fax no. 907-279-2834.

You may request ethics advice from your agency's Assistant Attorney General or from the State Ethics Attorney, Jon Woodman, at 269-5100 or jonathan.woodman@alaska.gov. Please direct questions about reporting procedures to Kim Halstead at 269-7195 or kimberly.halstead@alaska.gov.

6/14

Department of Law attorney.general@alaska.gov P.O. Box 110300, Juneau, AK 99811-0300 Phone: 907-465-3600 Fax: 907-465-2075 TTY: 907-258-9161 State of Alaska © 2015 Webmaster

Review / Approve Agenda

STATE OF ALASKA

DEPARTMENT OF COMMERCE, COMMUNITY, AND ECONOMIC DEVELOPMENT DIVISION OF CORPORATIONS, BUSINESS, AND PROFESSIONAL LICENSING

BOARD OF DENTAL EXAMINERS AGENDA August 20, 2021

Teleconference

Meeting ID: 863 9424 9311

Registration Link: https://us02web.zoom.us/meeting/register/tZlufu2qqjlpG9UjwQ2U-

vx9r2xlmFdewCY6

Remote Call in Number: 1-253-215-8782

AGENDA

<u>TIME</u>	<u>TOPIC</u>	LEAD PERSON
1. 9:00 AM	Call to Order/Roll Call	Chair
	Ethics ReportReview/Approve Agenda	
2. 9:15 AM	Review/Approve Minutes	Chair
	• May 14	
3. 9:30 AM	Public Comment	Chair
	Mannequin Exams - email	
4. 9:45 AM	Investigations Report	Bautista/Francois
5. 10:45 AM	Break	
6. 11:00 AM	PDMP Report	Sherrell
	 Guidelines from May– email from Dr. Johnson/t Documents from Laura/Lisa – Board Chairs Mee 	
7. 12:00 PM	Lunch	
8. 1:00 PM	Division Update/Regulations Project	Chair/Maiguis
	Fee Analysis/Fiscal Data not available until after	•
9. 1:45 PM	 Fee Analysis/Fiscal Data not available until after Old Business 	•
9. 1:45 PM	•	October

- No Surprises Act
- CDCA-WREB Merger
- CRDTS Update
- DANB Survey

11. 3:00 PM Adjourn Chair

Review / Approve Past Meeting Minutes

1	STATE OF ALASKA
2	DEPARTMENT OF COMMERCE, COMMUNITY, AND ECONOMIC DEVELOPMENT
3	DIVISION OF CORPORATIONS, BUSINESS, AND PROFESSIONAL LICENSING
4	
5	BOARD OF DENTAL EXAMINERS AGENDA
6	May 14, 2021
7	
8	These are DRAFT minutes prepared by the staff of the Division of Corporation, Business, and
9	Professional Licensing. These minutes have not been approved by the Board.
10	Teleconference
11	Meeting ID: 979 8766 2063
12	Registration Link: https://zoom.us/meeting/register/tJMkf-6uqDkqHNcWh0X3Oo0Mrk7J1cZMHhlv
13	Remote Call in Number: 1-253-215-8782
14	
10 To	
15	Board members present, constituting a quorum, were:
16	Dr. Kelly Lucas
17	Dr. Jon Woller
18	Dr. Greg Johnson
19	Dr. David Nielson
20	Dominic Wenzell – Joined at 9:29 AM
21	Mr. Bradley Heaston – Joined at 9:57 AM
22	IVII. Bradley Heaston – Joined at 9.57 Aivi
23	Board members absent:
24	Dr. Jesse Hronkin
25	Ms. Brittany Dschaak
26	Ms. Christina Hansen
27	IVISI CHI ISCHIA TIANSCH
28	In attendance from the Division of Corporations, Business and Professional Licensing, Department of
29	Commerce, Community and Economic Development were:
30	
31	Joe Bonnell – Records and Licensing Supervisor
32	Abby O'Brien -Licensing Examiner
33	Jasmin Bautista - Investigator – Joined at 9:26 AM
34	Melissa Dumas – Administrative Officer – Joined at 9:55 AM
35	Colleen Kautz - Program Coordinator – <i>Joined at 10:00 AM</i>
36	Lisa Sherrell - PDMP Manager – Joined at 11:12 AM
37	
38	Members of the Public in attendance:
39	
40	Dr. David Logan
41	
42	On record at 9:19 AM
43	Agenda Item 1 – Roll Call – 9:19 AM

- 44 Not having a quorum, the members present reviewed the letters that were listed under Old Business.
- 45 Ms. O'Brien informed the board that these were informational only. Dr. Nielson stated that the Board
- 46 had already reached the decision regarding the Apnea Letter at the last meeting and that their position
- 47 remained the same. Dr. Nielson then reviewed the letter sent by American Association of Dental Boards
- 48 which took an unfavorable view towards interstate compacts. He stated that the Council of State
- 49 Governments and AADB have had a contentious relationship, so the board needs to smooth some
- 50 feathers so that we can move the Compact discussion forward, perhaps going through American Dental
- Association as a middleman. Another option he suggested to bring them to the table was to recognize
- 52 the AADB's database as a model of successful information exchange.
- 53 At 9:29 AM Dr. Wenzell was able to sign in, constituting a quorum
- 54 9:30 AM Meeting Officially called to order by Dr. Nielson
- 55 Dr. Nielson asked Dr. Woller to make a statement not to influence his employee, Christina Hansen, or
- 56 her votes or deliberation during board business. Dr. Woller stated Ms. Hansen is employee of Spruce
- 57 Roots Family Dentistry, and her board appointment will not change their employee/employer
- 58 relationship, and that they will not use their employer/employee relationship to discuss board business
- 59 or matters.

65

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- 60 Dr. Nielson then read the ethics report and has received no reports or requests for the quarter. He then
- 61 requested to add an HB111 update to the agenda. Dr. Woller asked to move the COVID Guidance
- 62 discussion forward in the agenda as he may lose connection later in the meeting.
- 63 9:34 AM On a motion duly made by Dr. Wenzell, seconded by Dr. Johnson, and with unanimous
- 64 consent, it was RESOLVED that the Board accept the agenda as amended.
- 66 Agenda Item 2 Review/Approve Minutes 9:35 AM
- 67 Dr. Nielson asked Ms. O'Brien to change "Specialty License" to "Initial License" on line 184. He also
- asked Ms. O'Brien to update Line 211 and provide titles to the bills listed.
- 69 Line 211 Advanced Dental Hygiene Permit bill hb127.....re-write letter of support for the current
- 70 version of HB111 Advanced Hygiene Permit.
- 71 9:39 AM On a motion duly made by Dr. Johnson, seconded by Dr. Wenzell, and with unanimous
- 72 consent, it was RESOLVED that the Board accept the board minutes as amended.
- 74 While waiting to receive and share the investigative report. Dr. Nielson asked if any public comment had
- 75 been received through the Division. Ms. O'Brien had received no comments, so Dr. Nielson asked if Dr.
- 76 Logan had anything to add. Dr. Logan requested that the board reevaluate previous COVID testing
- 77 procedures, as he had received feedback from several licensees regarding the subject. He added that
- 78 practitioners that were strictly adhering to the board's guidance from last year were being penalized, as
- 79 they were losing patients who did not want to take a COVID test prior to treatment. Dr Woller
- 80 responded, saying that the word "required" is not in the board guidance when it comes to testing, but
- 81 rather "strongly recommended". Dr. Nielson added that the board would be discussing COVID guidance
- 82 adjustments later in the agenda.

Agenda Item 3 – Investigations – 9:45 AM

- Ms. Bautista introduced the investigative report for 11/26/2020 through 03/01/2021, which included
- 85 intakes, complaints, and investigative matters. She noted the Board's concern that many cases were still
- 86 open, and she explained that since several of them were still in litigation, they could not be closed. Dr.
- 87 Nielson asked how many cases were under active investigation, to which Ms. Bautista replied 9. Dr.
- 88 Nielson inquired about the investigations process when the department is unable to reach the
- 89 respondent. Ms. Bautista explained the process of filing an accusation through the attorney general's
- 90 office against a respondent when they are unresponsive. She added that a couple of the cases were at
- 91 that point in the process, but the majority of the pending cases were not. She then explained final
- 92 default actions, such as revocation of license, that are taken against a non-responsive licensee, and that
- 93 none of the cases were at this point. She added that none of the current cases would necessitate going
- 94 into executive session, but the NPDB reports listed later on in the agenda would require it. Dr. Wenzell
- 95 asked how many new cases had been opened for 2021, to which Ms. Bautista replied 4. Dr. Nielson
- 96 asked if Ms. Bautista was able to join the board for executive session later to discuss the NPDB reports,
- 97 to which she replied yes.

98 Agenda Item 4 – Division Update - 10:00 AM

- 99 Ms. Dumas presented the Board's 3rd Quarter Revenue Report, from July 1, 2020 through March 1, 2021.
- 100 She added that the board will still see revenue coming in during the 4th quarter, as they had an extended
- 101 renewal period. Ms. Dumas shared the last 3 biennia for comparison and reviewed the board's
- 102 expenditures.

83

- 103 Ms. Dumas then presented a Legislative Update. She stated that SB68, the Supplemental bill, was still in
- 104 process, and had been added into the House operating bill, SB49. She said that \$411,000 still intact in
- the bill, and the Division was hopeful that the bill will pass, and they will not have their request stricken.
- 106 Ms. Dumas then touched on the fee analysis for the potential passing of HB111, the Advanced Hygiene
- 107 endorsement. She stated that the licensee would have to hold both a hygiene license and the
- 108 endorsement. Dr. Nielson agreed, and state that it would be much like the Hygiene Collaborative
- 109 Agreements that are already in place. Ms. Dumas said that for setting the fee for the endorsement, the
- 110 board would need to discuss how the license is created and what level of work is needed. Once the
- 111 Supplemental Bill is passed, the Division would need to make a new fee analysis with advanced permits
- 112 considered as part of the Board's Revenue and Expenditures.
- 113 She updated the board on HB15 and SB86, regarding temporary permits and military licensing. HB15
- 114 had died and SB86 was withdrawn, but HB15 was then added into SB21, the Mobile Intensive Care
- 115 Paramedics bill within DHSS. Ms. Dumas believes that the new bill will pass, and the Division has asked
- for additional staff to assist with updating hundreds of existing forms and implementing the rollout of
- the bill. Dr. Nielson asked if the new bill rollout would affect the temporary license that the dental
- 118 board has in place. Ms. Dumas replied that that would be a future regulations project, as the new SB21
- 119 bill changes had just taken place within the last week.
- 120 Ms. Dumas added that Senator Wilson and the DHSS Division of Public Assistance are starting the
- 121 discussion to move the Radiological Equipment from the Dental program to DHSS. Dr. Nielson thanked
- 122 Ms. Dumas for her time and the updates.

123 124	Dr. Nielson then entertained a motion to adjust the agenda and move reviewal of the NPDB reports forward.
125 126 127	On a motion duly made by Dr. Wenzell, seconded by Dr. Johnson, and with unanimous consent, it was RESOLVED that the Board move Item 9 up to 10:15 AM, directly after Item 4.
128 129	I, Dr. David Nielson, move that the Alaska State Board of Dental Examiners enter into executive
130 131 132	session in accordance with AS 44.62.310(c), and Alaska Constitutional Right to Privacy Provisions, for the purpose of discussing National Practitioner Data Bank Reports for renewals.
133	Off Record at 10:17AM
134 135	On Record at 10:54 AM
136 137	Dr. Nielson moved to break until 11:15 AM
138	Agenda Item 5 – Break – 10:56 AM
139	Nielson - Move to break till 11:15 AM
140	Off Record at 10:57 AM
141	On Record at 11:12AM
142	
143	Dr. Nielson asked if anyone was available to attend the HB111 hearing on Saturday the 15 at 10AM
144	before moving on to the next agenda item.
145	Agenda Item 6 - PDMP Report - 11:17 AM
146	Ms. Sherrell informed the board that the new Appriss contract had been secured, and new user manuals
147	and dispenser guides will be posted on the website soon. Ms. Sherrell said that license integration has
148	tentatively been scheduled for mid-June and will be helpful for staff as it will deactivate any lapsed or
149	expired licenses. Appriss will also send out an awareness and feedback questionnaire in June. Ms.
150	Sherrell then gave an overview of PDMP compliance in Portal, the State's license databank. She then let
151	the board know that the PDMP has proposed an education and outreach plan to help with training on
152	the PDMP Program and that a letter was being created for licensees.
153	Dr. Nielson asked if 2-Day exemptions were considered. Ms. Sherrell said yes, and that the PDMP is only
154	looking at prescriptions over 3 days. She noted that many of the discrepancies seen in the report could
155	be from a licensee entering their specialty incorrectly on the website, creating the requirement for
156	reporting where there doesn't need to be one. Ms. Sherrell added that the PDMP anticipates questions
157	from licensees regarding account management once the questionnaire's data is received and
158	interpreted.
159	Dr. Nielson asked if the data would take into consideration the exemptions for the dental board, such as
160	the 48-hour exemption. Ms. Sherrell replied that yes, but each individual profile would have to be
161	examined. She added that PDMP and Appriss are working together to create a program to streamline
162	the data and give boards the information that they need.
163 164	Dr. Johnson noted that there is a system to penalize, but not system to enact. He made a suggestion of creating a half page set of guidelines to act as a reference for licensees to use. Dr. Nielson asked if this

- was a possibility, to which Ms. Sherrell replied yes, and the PDMP would help the dental board review
- and fine tune the guidelines. She added that the PDMP would communicate with Direct Dispensers by
- sending them a description of the designation to make sure that they're within the statutes and
- definitions of the position, and to make sure that it's what they're really doing.
- 169 Dr. Nielson asked Dr. Logan had any additional input. Dr. Logan advocated for assistants to be able to
- 170 access the PDMP and look up patients and assist in reporting.
- 171 Dr. Nielson asked what goes into determining the PDMP's report. Ms. Sherell replied that they use
- 172 search parameters to narrow down a list of providers, then go into the provider's profile to ensure that
- 173 they are supplying and checking the patient's records. She added that they are not looking at the
- patient's medical history, they are looking at the timelines when the prescriptions are written and filled.
- 175 Dr. Johnson expressed difficulties with licensees tracking patients that see multiple healthcare providers,
- 176 stating that the stop would now fall with the pharmacist. Dr. Nielson agreed, stating that while
- 177 pharmacists want to help, they need assistance from prescribers to ensure that they're not constantly
- 178 having to be the gatekeeper.
- 179 Ms. Sherrell explained the limitations of a patient seeking multiple providers, saying that pharmacists
- 180 wouldn't know of overlap until multiple prescriptions had been filled. She added that data from the
- 181 previous PDMP survey showed that many dentists searched the database while the patient was in the
- 182 room. Ms. Sherrell stated that licensees using the pharmacists as a catch all is problem as they are not
- 183 the medical provider. She added that a communications module is coming out on the platform that
- would allow correspondence between providers and the ability to make notes on a patient's file.
- 185 Dr. Nielson asked why dental assistants were not allowed to access the database and help report. Ms.
- 186 Sherrell replied that a dental assistant would be required to have a license under AS. 08, or that a
- 187 statute change would have to occur to allow access. She added that any actions in the database taken
- 188 by an assistant serving as a delegate will all fall under the dentist's license. Dr. Johnson asked if there
- 189 could be a CE course or certification that could be created to allow an assistant an endorsement that
- 190 would give them access to the PDMP database. Dr. Lucas agreed with Drs. Nielson and Johnson, stating
- 191 that allowing assistants access to the database would provide the PDMP with higher compliance. He
- 192 then asked for clarification on requirements for direct dispensers, which Ms. Sherrell provided. She
- 193 then added that hygienists working under a collaborative agreement with a dentist were allowed to
- 194 access the PDMP database and assist in reporting.
- 195 Dr. Nielson asked if the board could draft a document on prescribing guidelines to present to licensees,
- 196 to which Ms. Sherrell replied yes. The board then thanked her for her time.
- 197 Agenda Item 10 Old Business 11:58 AM
- 198 Dr. Nielson asked Dr. Woller for an update on his review of the board's COVID guidance. Dr. Woller
- 199 stated that after he reviewed the Dental Board's current COVID guidelines, some of the challenges that
- 200 he identified are: a lack of working links in the document; outdated guidance from the CDC and OSHA;
- the data doesn't take into account COVID transmission rates and risks in the dental settings, instead
- 202 combining dental data with the rest of the medical programs; a lack of data regarding enhanced PPE
- 203 versus standard precautions; unclear definitions as to what community transmission means defined
- 204 rate of transmission seems to be an arbitrary number defined by local governments; conflicting

- 205 messages regarding surface disinfection of dental settings versus the use of general disinfectants and
- 206 barriers; and conflicting information regarding testing of asymptomatic patients.
- 207 Dr. Woller then noted the positives that he found, which included effective mitigation of COVID
- 208 transmission in dental offices, both on a state and national level. He added that if the risk of contracting
- 209 COVID in a dental office setting was as high as originally thought, then dentists are doing a great job of
- 210 preventing that occurrence.
- 211 Dr. Woller stated that with the rollout of vaccinations and with a percentage of the population
- 212 contracting COVID, he would like to know how that plays a role in the new data. He then made his
- 213 recommendations to the new guidance, including changing the wording from "recommendations" to
- 214 "considerations" to give dentists a pathway of what they can do to mitigate transmission and reduce
- 215 personal liability. He added that this would still acknowledge that COVID is present and licensees can
- 216 continue to maintain high success rates of mitigation.
- 217 Dr. Nielson asked if Dr. Woller would put together new guidance for the board to consider with his
- 218 proposed edits. Dr. Woller replied yes, stating that he would remove the links that were made
- throughout the document to specific pages at the CDC and OSHA, and instead list general links as a 219
- 220 footnote to provide the most up to date information. He added that he could finish the document and
- 221 send to Ms. O'Brien for a vote on OnBoard. Dr. Woller noted key considerations were that licensees be
- 222 aware of the infection rate in their own communities and would have a plan in place should there be a
- 223 resurgence of COVID. Dr. Nielson appointed Dr. Woller as the task leader for the new board guidance,
- 224 to which Dr. Woller agreed.
- 225 Agenda Item 11 - New business - 12:08 PM
- 226 Dr. Nielson announced that the annual report was coming out and asked Ms. O'Brien what else the
- 227 board needed to do. Ms. O'Brien explained how the template is created and put together by the
- 228 Division, and any travel requests or legislative requests should be put forward for her to add to the
- 229 report.
- 230 Dr. Nielson then asked Ms. O'Brien to confirm the next board meeting dates as soon as possible to
- 231 ensure that a quorum could be maintained for the entirety of the meeting. She replied that she had
- 232 August 20 and December 3 as the most popular dates taken from a previous Doodle poll, and that the
- 233 board was welcome to vote on them to ensure that the Division could start the process of creating the
- 234 meetings.
- 235 On a motion duly made by Dr. Johnson, seconded by Dr. Nielson, and with unanimous consent, it was
- 236 RESOLVED that the Board accept August 20 and December 3 as their upcoming meeting dates.
- 238

237

- Dr. Nielson then reviewed the task list:
- 239 Dr. Nielson would find someone to testify for HB 111. Dr. Woller would work on the COVID guidance re-
- 240 write. Dr. Johnson would forward prescribing guidelines to Ms. O'Brien to send to Ms. Sherrell and work
- 241 with Dr. Logan for input. Ms. O'Brien would book upcoming meetings, send new signature page from
- 242 the March meeting minutes to Dr. Nielson, and work with AAG, INV, and her new supervisor to come up
- 243 with game plans for NPDB reports received during renewals.
- 244 Agenda Item 12 - Adjourn - 12:14 PM

245	Dr. Nielson entertained a motion to adjourn, which was seconded by Dr. Woller.
246	Off record at 12:15 PM
247	
248	On record at 1:00 PM
249 250	Ms. O'Brien returned to the conference room and attended the phone, should a member of the public wish to call in during the allotted time. No calls or comments were received during this time.
251	Off record at 1:15 PM



Investigations Report

Public Comment



Re: DEN Board Exam Questions - ADEX/CDCA Monday, July 26, 2021 10:16:25 AM

Thanks so much, Abby! This is a big help!

Best, Kimber

Kimber Cobb

National Director, Licensure Acceptance and Portability



The Commission on Dental Competency Assessments

www.cdcaexams.org

From: OBrien, Abby J (CED) <abby.obrien@alaska.gov>

Sent: Monday, July 26, 2021 11:43:03 AM

To: Kimber Cobb

Cc:

Subject: DEN Board Exam Questions - ADEX/CDCA

Good morning,

Yes, Mannequin based exams are accepted through 2021 for dental applicants. We do not know yet if the board will extend this through 2022 – the board will need to determine the extension at one of our next two board meetings we have remaining this year. (August 20 and December 3, respectively)

We do not accept mannequin-based exams for dental hygienist applications, as this would take a regulations change. [12 AAC 28.935(b)(7)]

When the board passed its emergency regulations in 2020, they allowed for WREB-equivalent exams, with the mannequin-based exam specification being offered only to dental students for the year 2021.

Please feel free to contact me if you have any other questions.

Thank you,

Abby O'Brien

Occupational Licensing Examiner
State of Alaska – DCCED – CBPL
Dental Examiners

DEN: (907) 465-2542

Email: abby.obrien@alaska.gov

Fax: (907) 465-2974

Please visit our <u>COVID-19 information page</u> to read the guidance document. This guidance for licensees and facilities should be straightforward and self-explanatory. However, if you still have questions, please email your programs email or <u>license@alaska.gov</u>.

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PDMP Report



Regulations Project

1	STATE OF ALASKA
2	DEPARTMENT OF COMMERCE, COMMUNITY, AND ECONOMIC DEVELOPMENT
3	DIVISION OF CORPORATIONS, BUSINESS, AND PROFESSIONAL LICENSING
4	,
5	Minutes of the meeting on
6	March 15, 2021
7	111311111111111111111111111111111111111
8	By authority of AS 08.01.070(2) and AS 08.36.040 and in compliance with the provision of Article 6 of AS
9	44.62, a meeting of the Board of Dental Examiners was held March 15, 2021, via Zoom
_	
10	Videoconferencing.
11	On record at 9:00 AM
12	The meeting was called to order by Dr. Nielson at 9:00 AM.
13	Agenda Item 1 – Roll Call
14	Board members present, constituting a quorum, were:
15	Dr. Greg Johnson
16	Ms. Christina Hansen
17	Dr. Dominic Wenzell
18	Dr. David Nielson – Board President
19	Dr. Jesse Hronkin
20	Mr. Brad Heaston – joined 10:47 AM
21	Ms. Brittany Dschaak
22	Board members absent:
23	Dr. Jon Woller
23 24	Dr. Kelly Lucas
2 4 25	DI. Kelly Lucas
25 26	In attendance from the Division of Corporations, Business and Professional Licensing, Department of
27	Commerce, Community and Economic Development were:
_,	commerce, community and Economic Development were.
28	Abby O'Brien – Licensing Examiner
29	Joe Bonnell – Records and Licensing Supervisor
30	Melissa Dumas – Administrative Officer - Joined 9:35 AM
31	Lisa Sherrell – PDMP Manager – Joined 10:30 AM
32	Jasmin Bautista – Investigator – Joined 9:22 AM
33	Karina Medina – Investigator – <i>Joined 9:26 AM</i>
34	
35	Members of the Public in attendance:
36	Dr. David Logan
37	Dr. Vivian Lee
38	Dr. Anthony Zeibert - Joined at 2:10 PM
39	2, without acceptance and accepta
40	Dr. Nielson welcomed the incoming board members to their first meeting and thanked them for their
41	time. Before proceeding, Dr. Nielson recognized that one of the new board members, Ms. Hansen,
12	works directly under another hoard member. Dr. Woller Dr. Nielson asked for a statement from Ms

- 43 Hansen saying that her employment from Dr. Woller would not affect her board decisions. Ms. Hansen
- 44 affirmed this statement.

45 Agenda Item 2 - Review/Approve Agenda – 9:06 AM

- 46 Dr. Nielson presented the following amendments to the agenda: Adding a section about new PREP Act
- 47 rules allowing licensees to perform COVID vaccinations; Adding a section to Old Business to discuss the
- 48 ongoing process of moving responsibility of Radiological Equipment Registration to DHSS and former
- 49 SB157; and asking if any public comments had been pre-registered. Ms. O'Brien had no pre-registered
- comments, so Dr. Nielson moved to accept the agenda with amendments.
- On a motion duly made by Dr. Wenzell, seconded by Dr. Hronkin, and with unanimous consent, it was
- 52 **RESOLVED** that the Board accept the agenda for the meeting as amended.

53 Agenda Item 3 - Review/Approve Minutes – 9:10 AM

- 54 For the October 16 minutes, Dr. Wenzell requested to change line 92 to add the word "not" before
- 55 "...getting a fair breakdown". Dr. Nielson noted that his name was spelled incorrectly. For the
- December 4 minutes, Dr. Nielson noted that his name was spelled incorrectly. Ms. O'Brien stated that
- 57 she would make the necessary adjustments to both sets of minutes.

58 59

- On a motion duly made by Dr. Wenzell, seconded by Dr. Hronkin, and with unanimous consent, it was
- 60 RESOLVED that the Board accept both board minutes as amended. 9:14 AM
- 61 As the board was ahead of schedule, Dr. Nielson provided an introduction to sections 28.951(e)(f) and
- 62 28.940(b)(8)(c) in the Dental Statutes and regulations. He suggested that a change might be in order,
- 63 and the Board would eventually need to review and update these regulations as necessary.
- 64 Ms. Dschaak asked if Board Guidance set forth in November of 2020 was still applicable. Dr. Nielson
- 65 replied that the Board's recommendations were still in effect. He stated that the recommendations
- 66 could be updated, and that he would ask Dr. Woller to evaluate and adjust them.

67 Agenda Item 4 – Public Comment – 9:24 AM

- 68 Dr. Nielson moved Public Comment forward while the board was waiting for the Investigations Team. He
- 69 asked if there were any statements or questions. Dr. Logan asked for clarification or any new
- 70 information regarding COVID testing and vaccination to present to licensees. Dr. Nielson replied that
- 71 they would need to contact the CDC for protocol review and recommendations.

72 Agenda Item 5 – Investigations Report – 9:27 AM

- 73 Ms. Bautista began the Investigations Report, presenting cases back to 2017, and stating that some
- 74 licensees had multiple cases open, with multiple dates.
- 75 Dr. Wenzell asked how many cases have been started in 2021, and how many were open and active. He
- also asked when the Investigations Department anticipated resolutions to the cases that were dated
- 77 back to 2017. Ms. Bautista replied that to determine actions that were taken in the older cases, that the
- 78 court docket needs to be pulled, and that all court dates and processes had been affected due to COVID.
- 79 Dr. Nielson asked if attorney's fees and litigation fees were billed to the board, and Ms. Bautista replied
- that they were.

- 81 On a motion duly made by Ms. Dschaak and seconded by Dr. Nielson, it was MOVED that the Alaska
- State Board of Dental Examiners enter into executive session in accordance with AS 44.62.310 (c), and
- 83 Alaska Constitutional Right to Privacy Provisions, for the purpose of discussing matters which by law,
- 84 municipal charter, ordinance are required to be confidential, with all board staff to remain during the
- 85 session.
- 86 Off Record at 9:37 AM
- 87 On Record at 9:59 AM

88 89

- On a motion duly made by Dr. Nielson, seconded by Dr. Wenzell, and with unanimous consent, it was
- 90 RESOLVED that the Board adopt modifications to the consent agreement for Case #2019-001427 as
- 91 requested by the respondent. 10:00 AM
- 92 Agenda Item 6 Division Update 10:02 AM
- 93 Dr. Wenzell left at 10:04 AM and returned at 10:07 AM, but the board still maintained quorum.
- 94 Ms. Dumas provided and introduction to the Dental Program's revenues and expenditures for the
- 95 Second Quarter using the three previous bienniums for comparison. She also outlined the cost of
- 96 Investigations for the board. Dr. Wenzell asked for clarification of Division timeline as to when indirect
- 97 costs were calculated. Ms. Dumas replied that the numbers were calculated beforehand and were up to
- date, explaining that indirect costs are charged after year end, and not on a quarterly basis. She also
- stated that the numbers shown reflect the removal of perpetual license types and the subsequent costs
- 100 had been adjusted.
- 101 Ms. Dumas introduced SB68 and explained that the Division requested money for programs in deficit
- that couldn't increase their fees for this renewal period. She said that the Dental board falls under this
- category. She stated that this is an appropriation not a loan. Ms. Dumas said that the Division had sort
- of "savings account" in the general fund that is distributed when needed. She added that the Dental
- 105 Programs new fees won't take effect until after this renewal period closes. She stated that the Division
- will do another fee analysis after the renewal period closes, and that the Division has taken the Board's
- suggestions into consideration regarding reviewal of indirect expenses.
- 108 Ms. Dumas suggested that the Board create a letter of support for SB68. Dr. Nielson volunteered to
- write one and add it to OnBoard for a vote of approval.

110 Agenda Item 7 – PDMP Report – 10:30 AM

- Ms. Sherrell informed the board that the New Appriss contract had been secured. Now, licensees can
- email each other through the database and communicate and exchange information within the system.
- 113 DEA and AWARE Registration were reviewed, and Ms. Sherrell offered an opportunity for education for
- the program's licensees after renewals are completed. She affirmed that direct dispensers required to
- report daily and recommended that the board needs to make sure providers know they cannot
- prescribe before being registered with PDMP. Ms. Sherrell discussed previous actions used to
- disseminate information to licensees, including town hall type meetings, and making sure a penalty
- matrix is in place to convey the seriousness of infractions. Dr. Wenzell asked if the Dental Board could
- see the letter previously sent by the Pharmacy Board and adjust it to the Dental program's specific
- needs. Ms. Sherell said yes and would send a copy of the letter to Ms. O'Brien.

- 121 Ms. Sherrell added that the PDMP will send out questionnaire again to licensees for data analysis on
- how licensees are using the program. She will try to put together videos or a presentation with the
- information gathered. Dr. Nielson asked if a letter from board and ADS would help reach more
- licensees. Dr. Logan agreed, and said the letter would act as something the ADS can reference. He then
- asked if the 72-hour surgery exemption had been recorded. Ms. Sherrell replied that surgical
- exemptions are already considered in data.
- 127 Dr. Johnson stated that the board needs to better define terms and purpose for the PDMP program to
- 128 get info for licensees, or progress cannot be made in ensuring compliance. Dr. Logan agreed to help
- spread info in newsletter from the ADS. Ms. Sherrell offered to write an article for newsletter and will
- get it prepared and send to Ms. O'Brien to present to Board.
- 131 Dr. Wenzell asked about difficulties during renewal with creating a payment tab for the PDMP renewal
- fee and a lag between renewal times. Ms. O'Brien and Mr. Bonnell explained that the PDMP and Dental
- licenses are separate registrations in the system and are billed separately, and that a lag occurs because
- each license has to be checked manually.
- 135 Dr. Nielson moved for a 15-minute break before continuing with the agenda.
- 136 Off record at 11:13 AM
- 137 On Record at 11:24 AM
- 138

151

139 Agenda Item 8 – Old Business – 11:25 AM

- Dr. Nielson reviewed moving Radiological Equipment to DHSS and SB157 and asked if there was any sort
- of status report. Mr. Bonnell replied that there were no updates from the Division. Dr. Logan stated
- that he did ask the ADS's lobbyist to reach out, but it was a question of finding a spot in the legislative
- schedule and determining its importance. Dr. Nielson asked if a letter of support would help the ADS to
- advance the bill's priority. Dr. Logan responded that the best course of action is to have a letter ready to
- be submitted to the legislature so that it could help bring weight to the processes. Dr. Johnson asked if
- the board could write a letter and send it directly to the Governor. Mr. Bonnell replied that if an existing
- statement is ready, it can be added to the bill analysis for the Division when the bill gets dropped. Dr.
- 148 Nielson agreed to draft a letter and add it to OnBoard.
- Dr. Nielson then moved the board to take care of New Business items in the time before the scheduled
- 150 break for lunch.

Agenda Item 9 – New Business – 11:31 AM

- 152 Ms. O'Brien offered to establish a schedule for uploading ballots to OnBoard to reduce the number of
- missed votes. The board confirmed that this would help to expedite the licensure process and assist
- with establishing everyone's voting schedule, so Ms. O'Brien would start the procedure with her next
- 155 batch of applicants.
- 156 Dr. Wenzell presented a disciplinary matrix from the State of Washington. He was asked by Ms. Bautista
- to help develop a comparable matrix for the State of Alaska. He stated that the Investigations
- Department wants to establish a system of fines that is high enough to be punitive, yet not so high that
- a licensee appeals the decision. Dr. Wenzell offered to create a fine schedule and add it to the existing
- 160 chart, so that the Investigations Team would have disciplinary framework for violations of conduct by

- 161 licensees. Dr. Nielson asked if the board had authority to create the matrix. Mr. Bonnell stated that if
- the board approved the matrix, then a regulation change would not be necessary. Dr. Johnson
- recommended that Dr. Wenzell include Ms. Bautista when determining the appropriate size of the fines
- to be added, to reduce their appealability.
- 165 After finishing the New Business Items, the Board adjourned for lunch.
- 166 Off record at 11:51 AM
- 167 On Record at 1:00 PM

168 169

Agenda Item 10 – Regulations Update – 1:01 PM

- 170 Dr. Nielson introduced SB86 and HB15. He reintroduced a letter that had addressed concerns issuance
- of temporary licenses. He asked if the board has the authority to issue temporary licenses. Mr. Bonnell
- replied that discussions between himself, Ms. O'Brien and the Regulations staff regarding the intent of
- the board with issuing temporary licenses had occurred. Mr. Bonnell said that these bills passing would
- allow the board to determine the standard by which licenses can be issued. He stated that the bills must
- pass first to grant the board the authority to do so. Mr. Bonnell added that the current Dental
- temporary license for incapacitated dentists would be removed and replaced with the new temporary
- permit when the bills pass. He added that the board could prepare questions for the Division and hold
- an emergency meeting on one topic.
- 179 Dr. Nielson introduced 12 AAC 28.940 (b)(8)(c). He explained the various pathways to licensure. He
- proposed changing the regulation requirement from a 2-year GPR to a 1-year GPR, thus allowing an
- applicant to bypass the regional exam when applying for an initial license. He cited other states using
- residencies as an exam equivalent for his reasoning. Dr. Wenzell concurred, stating that as long as the
- regulation leaves in "CODA Accredited (non-foreign)". Ms. Hansen and Dr. Johnson agreed.
- Dr. Nielson then introduced 12 AAC 28.951 (c)(2) regarding exam equivalency, and section (e) which
- 185 provided a list of criteria that must be met. Regarding exams, Dr. Nielson stated that the board had
- never compared an application against the list in section (e) when determining equivalency. He stated
- that removing subsections (e), (f), and (h) would be appropriate if an applicant's regional examination is
- performed within the United States and is generally equivalent.
- 189 Dr. Johnson concurred, noting that having regulations that the board doesn't use could potentially be
- 190 harmful to the board. Dr. Nielson asked if the board could make a motion and wait for the temporary
- license legislature to go through. Mr. Bonnell replied yes, and that the board should put together
- 192 questions for Ms. O'Brien to present to the Regulations team. He said they would then review the
- 193 questions and determine whether the board could hold a special meeting to adjust the regulation
- 194 changes as needed.
- 195 On a motion duly made by Dr. Nielson, seconded by Dr. Wenzell, and with unanimous consent, it was
- 196 RESOLVED that the Board amend 12 AAC 28.940 (b)(8)(c) from 2-Year to 1-Year.
- 197 On a motion duly made by Dr. Nielson, seconded by Dr. Wenzell, and with unanimous consent, it was
- 198 RESOLVED that the Board amend 12 AAC 28.951 by striking (e), (f), and (h) and by renumbering as
- 199 **necessary. 1:27 PM**

- 200 Dr. Nielson introduced a case where an applicant asked to sit in on a WREB exam with a letter of support
- from the military serving as verification of her credentials. The board had previously recommended that
- the applicant take the WREB exam to secure her Local Anesthesia certification. Dr. Nielson noted that
- 203 WREB has much of the same criteria as the state. He continued that even if military signs off on the
- applicant's abilities and the board recommends the applicant to take the exam, WREB still has
- requirements that still must be met. Dr. Nielson asked Ms. O'Brien to list the criteria for the applicant so
- that she knows what requirements are still needed. Ms. O'Brien offered to forward the information
- from WREB to the applicant and let her know of the decision.
- 208 Dr. Nielson then introduced a previous letter of support the board had written in favor of HB127, the
- previous Dental Hygienist Advanced Practice Permit bill, on March 9 of 2020. He asked permission to re-
- 210 write the letter to include information and dates pertinent to HB111, the current Dental Hygienist
- 211 Advanced Practice Permit bill, and to re-present the letter to the Division.
- 212 On a motion duly made by Dr. Johnson, seconded by Dr. Hronkin, and with unanimous consent, it was
- 213 RESOLVED that Dr. Nielson amend the letter of support dated March 9, 2020 and make it current with
- 214 reference to HB111. 1:41 PM
- 215 Dr. Nielson introduced letters regarding the recommendation of HSAT tests by dentists, and the
- 216 concerns brought forth by the American Academy of Sleep Medicine. He stated that the Board had
- addressed the ability to recommend HSATs at the December 2020 meeting, and that consensus was that
- 218 dentists were able to recommend the tests, as long as a licensed sleep physician interpreted the results
- and developed the patient treatment plan. Dr. Wenzell stated that he had been in contact with Dr.
- 220 Easley, a dentist and member of AASM, who offered to come present on sleep apnea to the board
- 221 should they ask. Dr. Wenzell thought that Dr. Ramar, who sent the email and letter from AASM, might
- 222 want a position statement from the board. He added that maybe Dr. Ramar could be under the
- impression that dentists in Alaska are interpreting the results of the HSATs that are being
- recommended, which the board does not approve. Dr. Wenzell agreed to write a position statement to
- add to OnBoard for the Board to review and then send to AASM. Dr. Johnson conferred, and said that
- this is the kind of collaborative process and screening that allows for better patient care.

227 Agenda Item 11 – New Business – 2:15 PM

- 228 Dr. Nielson introduced licensing compacts while waiting for Dr. Zeibert to sign on. He said that he
- received an email earlier today stating that the Department of Defense had granted approval to the
- dental profession to begin creation of an interstate licensing compact. Dr. Nielson stated that this
- conversation came about as the Nursing board has started the process for their own interstate compact,
- and that the Dental Board will write a letter of support for them. He then moved for a quick break
- 233 before Dr. Zeibert started his presentation.
- 234 Off record at 1:54 PM
- 235 On Record at 2:12 PM

236
 237 Dr. Zeibert began his presentation by acknowledging the National Center for Interstate Compacts and

- the Council of State Governments. He then defined an interstate compact as an agreement between
- 239 states as a means to provide "substantive sameness". He also defined it as a means of cooperatively
- solving common concerns when regarding Occupational and Professional Licensure. He stated that this

241 242 243 244 245 246 247 248 249	process was begun, under concern of a federally mandated solution, as a means for regulating consumer prices driven by the number of licensed occupations. After listing the references he cited, Dr. Zeibert presented some of the benefits of a compact, such as agreement on uniform licensure requirements, formation of information system or database, and streamlined background checks. Dr. Zeibert explained that a compact is supra-state, but sub-federal in its authority, and is opt-in, but not opt-out. He then outlined how state licensure processes remain in place, and licensees voluntarily become part of the compact. Dr. Zeibert then said that as of this morning, the field of dentistry had been awarded the grant to start the process of creating a dental compact. He estimated the timeline of commencement of the active compact to be in 2022-2023.
250 251 252 253 254 255 256 257	Dr. Nielson inquired to disciplinary measures of a state. Dr. Zeibert replied that any state in the compact may open a case, and the licensee is held to disciplinary guidelines of his or her home licensure state. He added that once a case is open against a licensee, the record is flagged in the database, so all states are made aware of any license actions. Dr. Nielson asked about the operating costs of the compact. Dr. Zeibert replied that operating costs and database maintenance is directly tied to an individual's state licensing fees and costs. He added that dentists and dental hygienists are treated as a single entity by the Department of Defense, as they are recognized as a synergistic relationship. At the conclusion of his presentation, Dr. Zeibert offered to send his PowerPoint to Ms. O'Brien as a resource for the board.
258 259 260 261 262 263 264 265	Dr. Nielson reviewed the task list for board members. He said that he would write various letters: Support for SB68, support for the Nursing Board and SB67, Support for dental hygienists and HB111, a letter to the Division regarding radiological equipment, and an informational letter regarding the PDMP using Ms. Sherrell's template. He asked Ms. Hansen to contact Dr. Woller to review and update the COVID guidelines for licensees. Ms. Hansen said she would see Dr. Woller the following day and complete his request. Dr. Wenzell was going to develop a penalty matrix for Professional Misconduct using the Washington Statues previously presented. Ms. O'Brien agreed to set the dates for the next quarterly meetings in May, August, and December.
266 267	On a motion entertained by Dr. Nielson and seconded by Dr. Johnson, and with unanimous consent, the Board moved to adjourn at 2:50 PM.
268	Off Record at 2:51 PM
269	Respectfully Submitted:
270271272273	Abby O'Brien Occupational Licensing Examiner
274	Approved:
275276277	David Nielson, DDS, President
278	Date: Aug. 5, 2021

Old Business

Annual Report Fiscal Year 2021

Board of Dental Examiners



Department of Commerce, Community and Economic Development

Division of Corporations, Business and Professional Licensing

This annual performance report is presented in accordance with Alaska statute AS 08.01.070(10).

Its purpose is to report the accomplishments, activities, and the past and present needs of the licensing program.

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Identification of the Board

Board Member	Duty Station	Date Appointed	Term Expires
David Nielson, DDS Dentist - Chair	Anchorage	Mar 01, 2015	Mar 01, 2023
Dominic Wenzell, DMD Dentist	Girdwood	Mar 01, 2018	Mar 01, 2022
Kelly Lucas, DDS Dentist	Wasilla	Jan 25, 2019	Mar 01, 2025
Jonathan Woller, DMD Dentist	Fairbanks	Mar 01, 2019	Mar 01, 2023
Jesse Hronkin, DMD Dentist	Palmer	Mar 01, 2019	Mar 01, 2023
Gregory Johnson, DDS Dentist	Fairbanks	Mar 01, 2021	Mar 01, 2025
Brittany Dschaak, RDH Dental Hygienist	Dillingham	Mar 01, 2019	Mar 01, 2023
Christina Hansen, RDH Dental Hygienist	Fairbanks	Mar 01, 2021	Mar 01, 2025
Bradley Heaston Public Member	Eagle River	Mar 01, 2021	Mar 01, 2025

Identification of Staff

Christianne Carrillo – Licensing Examiner (6/30/2020 – 8/9/2020)

Department of Commerce, Community & Economic Development Division of Corporations, Business and Professional Licensing Post Office Box 110806 Juneau, Alaska 99811-0806 (907) 465-2542

Abby O'Brien – Licensing Examiner (8/10/2020 – Current)

Department of Commerce, Community & Economic Development Division of Corporations, Business and Professional Licensing Post Office Box 110806 Juneau, Alaska 99811-0806 (907) 465-2542

Joseph Bonnell – Records and Licensing Supervisor (7/1/2020 – 5/14/2021)

Department of Commerce, Community & Economic Development
Division of Corporations, Business and Professional Licensing
Post Office Box 110806
Juneau, Alaska 99811-0806
(907) 465-2691

Terry Ryals – Records and Licensing Supervisor (5/15/2021 – Current)

Department of Commerce, Community & Economic Development
Division of Corporations, Business and Professional Licensing
Post Office Box 110806
Juneau, Alaska 99811-0806
(907) 465-2588

Jasmin Bautista - Investigator

Department of Commerce, Community & Economic Development Division of Corporations, Business and Professional Licensing 550 West 7th Avenue Anchorage, Alaska 99501 (907) 269-8026

Identification of Staff (continued)

Sher Zinn – Regulations Specialist II (7/1/2020 – 6/9/2021)

Department of Commerce, Community & Economic Development

Division of Corporations, Business and Professional Licensing

Post Office Box 110806

Juneau, Alaska 99811-0806

(907) 465-1049

Jun Maiquis – Regulations Specialist II (6/10/2021 – Current)
Department of Commerce, Community & Economic Development
Division of Corporations, Business and Professional Licensing
Post Office Box 110806
Juneau, Alaska 99811-0806
(907) 465-1049

Narrative Statement

During FY2020, the State Board of Dental Examiners (Board) has met four times via teleconference on August 7, 2020; October 16, 2020; December 4, 2020; and March 15, 2021. A fifth FY2020 meeting will be held May 14, 2021. The COVID-19 emergency declaration did not require unscheduled meetings as it did in FY2019.

Last year the board retired three members and added three new members. Hygienist Gail Walden, public member Robin Wahto, and dentist Dr. Steven Scheller all termed off. The board would like to thank them for their years of service to the profession and the State of Alaska. Appointed to the board were hygienist Christina Hansen (Fairbanks), dentist Dr. Greg. Johnson (Fairbanks), and public member Bradley Heaston (Eagle River). The new members have attended one meeting so far and have already contributed to the board's work.

During FY2020, the board welcomed a new licensing examiner, Abby O' Brien. Abby is now the sixth examiner to work with the board in six years. The turnover continues to be a challenge as it takes time for new examiners to get up to speed on how the board operates and all the nuances of different license and permit categories. Abby has been doing a commendable job so far, but the board continues to feel the workload has grown to a point an executive director position may be more appropriate and a budget analysis should be done to see if it would be feasible. The budget has been strained partly because of the extra help needed from Supervisor Joe Bonnell and over-time put in by Abby to process all the renewals for 2021. The board appreciates the help from Mr. Bonnell but feels that processing renewals is probably not the best use of his time.

With help from the board, the department approved new fee increases for the 2021 renewal cycle which would have helped balance the dental program's deficit. Unfortunately, the increases did not make it through the process in time to be incorporated into the new renewals. The renewal cycle deadline for the program was extended from February 28, 2021 to April 30 this year for a couple of reasons. First, during COVID, the requirement for "hands-on" Basic Life Support certification was more difficult to comply with. Second, the third-party application processing service (PBIS) the board used for years to gather necessary documentation for initial licensure went out of business with no alternatives to fall back on. Therefore, we needed a new regulation project to begin collecting and processing initial applications in-house. The additional time required for Abby to learn this process also contributed to the need for an extension. Streamlining licensure in general is a goal the board continues to be interested in, including looking into forming multi-state licensure compacts.

In FY2020, the board continued to evaluate operational guidelines for dentists during the COVID-19 pandemic. We posted guidelines that consider CDC recommendations and are proud that dental operations have not been found to contribute to the spread of COVID-19. New CDC guidelines are coming out all the time, and we will again look at changing board recommendations during our upcoming meeting in May.

Regulation changes during FY2020 included an expansion of the number of exams the board will accept for initial hygiene licensure in order to open licensure to more qualified candidates. Also, because live patient dental exams were still unavailable during this year due to COVID, the board extended the acceptance of a mannequin-based exam through 2021. The board will continue to evaluate the fidelity of the mannequin exam to decide whether to make a permanent change.

Radiologic equipment inspections continue to be a problem as in they are NOT happening. The State has shown interest in taking on the inspection program but has not made the necessary statute changes to allow for it. The x-ray inspection program is non-existent and out of compliance until that changes. Also, the board supports the effort to bring back specialty licenses and to allow dentists to provide vaccinations to their patients who need and want them.

Finally, the board looks forward to the time in-person meetings may resume. Virtual meetings have been challenging and much more difficult to get board members to engage with. Board business suffers as a result and less gets accomplished in general.

Budget Recommendations for FY 2022

The Budget Recommendations section anticipates the board's fiscal priorities for the upcoming year. Please complete all parts of this section with details about anticipated meetings, conferences, memberships, supplies, equipment, to other board requests. Meeting expenses that are being funded through third-party reimbursement or direct booking must be identified separately from expenses paid through license fees (receipt-supported services or RSS). Be sure to explain any items listed as "other" so they may be tracked appropriately.

Board Meeting Date	Location	# Board	# Staff
August 20, 2021	Anchorage	9	2
🗷 Airfare:			\$1,400.00
■ Hotel:			\$1,505.00
🗷 Ground:			\$440.00
☑ Other:			\$321.00
Total Estimated Cost:			\$3,666.00

Board Meeting Date	Location	# Board	# Staff
December 3, 2021	Anchorage	9	2
图 Airfare: 图 Hotel: 图 Ground: 图 Other:			\$1,400.00 \$1,505.00 \$440.00 \$321.00
Total Estimated Cost:			\$3,666.00

Board Meeting Date	Location	# Board	# Staff
TBD	Video Conference	9	2
☐ Airfare:			\$0.00
☐ Hotel:			\$0.00
☐ Ground:			\$0.00
🗷 Other:			\$350.00
Total Estimated Cost:			\$350.00

Budget Recommendations for FY 2022 (continued)

The Budget Recommendations section anticipates the board's fiscal priorities for the upcoming year. Please complete all parts of this section with details about anticipated meetings, conferences, memberships, supplies, equipment, to other board requests. Meeting expenses that are being funded through third-party reimbursement or direct booking must be identified separately from expenses paid through license fees (receipt-supported services or RSS). Be sure to explain any items listed as "other" so they may be tracked appropriately.

Board Meeting Date	Location	# Board	# Staff
TBD	Video Conference	9	2
☐ Airfare:			\$0.00
☐ Hotel:			\$0.00
☐ Ground:			\$0.00
☑ Other:			\$350.00
Total Estimated Cost:			\$350.00

Board Meeting Date	Location	# Board	# Staff
TBD	Video Conference	9	2
□ Airfare: □ Hotel: □ Ground: ☑ Other:			\$0.00 \$0.00 \$0.00 \$350.00
Total Estimated Cost:			\$350.00

Board Meeting Date	Location	# Board	# Staff
☐ Airfare: ☐ Hotel: ☐ Ground: ☐ Other:			\$0.00 \$0.00 \$0.00 \$0.00
Total Estimated Cost:			\$0.00

Budget Recommendations for FY 2022 (continued)

Travel Required to Perfor Mathematical Not applicable	m Examinations			
Date	Location	# Board	# Staff	
Description of meeting and its	role in supporting the mission of t	he Board:		
☐ Airfare:			\$0.00	
☐ Hotel:			\$0.00	
☐ Ground:			\$0.00	
☐ Conference:			\$0.00	
☐ Other:			\$0.00	
Describe "Other" (bre	Describe "Other" (break out all sections):			
Total Estimated Cost: \$0.00				

Out-of-State Mee	etings and Addition	(Rank in order of importance)					
Date		Location	# Board	# Staff			
Description of meet	Description of meeting and its role in supporting the mission of the Board:						
Expenditure	License Fees (RSS)	Third-Party Reimbursement	Third-Party Direct Booked	Total			
☐ Airfare:	\$0.00	\$0.00	\$0.00	\$0.00			
☐ Hotel:	\$0.00	\$0.00	\$0.00	\$0.00			
☐ Ground:	\$0.00	\$0.00	\$0.00	\$0.00			
□ Conference:	\$0.00	\$0.00	\$0.00	\$0.00			
□ Other	\$0.00	\$0.00	\$0.00	\$0.00			
Describe "Othe	Describe "Other" (break out all sections):						
Net Total:	\$0.00	\$0.00	\$0.00	\$0.00			

Budget Recommendations for FY 2022 (continued)

Non-Travel Budget Requests					
☐ Not Applicable	☐ Resources	☐ Examinations			
☑ Membership	☐ Training	☐ Other			
Product or Service	Provider	Cost Per Event			
AADB	American Association of Dental Boards	\$5,385.00			
Description of item and its role in supporting the mission of the Board: Nationwide association providing continuing education, information networking and exchange, publications and database, assessment services, and advocacy and representation.					
Non-Travel Budget Requests					
☐ Not Applicable	☐ Resources	☐ Examinations			
☑ Membership	☐ Training	☐ Other			
Product or Service	Provider	Cost Per Event			
NPDB	National Practitioners Databank	\$2,768.00			
Description of item and its role in sup NPDB Continuous Query provides the board ex increase public protection and give the board	xaminer with a report should any licensee be discip	olined in another state. This will			
Non-Travel Budget Requests					
☐ Not Applicable	☐ Resources	□ Examinations			
☐ Membership	☐ Training	☑ Other			
Product or Service	Provider	Cost Per Event			
Subscription Journal	American Association of Dental Examiners	\$380.00			
Description of item and its role in sup The board has two journal subscriptions. One Healthcare Integrity & Protection Data for \$18	to the American Association of Dental Examiners J	ournal for \$196.00 and one to			

Budget Recommendations for FY 2022 (continued)

Other Items with a Fiscal Impact	Cost Per E	vent:	\$0.00
■ Not Applicable	Number of Events:		0
Product or Service	Provider		Total Cost
			\$0.00

Description of item and its role in supporting the mission of the Board:

Summary of FY 2022 Fiscal Requests

Board Meetings and Teleconferences: \$8,382.00

Travel for Exams: \$0.00

Out-of-State and Additional In-State Travel: \$0.00

Dues, Memberships, Resources, Training: \$8,533.00

Total Potential Third-Party Offsets: -\$0.00

Other: \$0.00

Total Requested: \$16,915.00

Legislation Recommendations Proposed Legislation for FY 2022

	No Recommendations The Board has no recommendations for proposed legislation at this time.
æ	Recommendations The Board has the following recommendations for proposed legislation:
1)	The Dental Board (Board) has been clear that we can no longer handle the inspection of radiological equipment due to a lack of qualified inspectors willing to do the job and the severe backlog of past due inspections. The State has said they would once again be willing to take on the responsibility for dental radiologic equipment inspections through the Department of Health but have yet to pass the necessary legislation needed to make that happen. Until there are changes to 08.36.075, we will continue to be out of compliance.
	During the pandemic, it became apparent that dentists could have been used to help administer vaccinations for COVID-19 if they were so authorized under Chapter 36 of their Practice Act. Many states allow dentists to deliver vaccinations to their patients and believe this scope of practice change should be added to 08.36.367 or other appropriate place.
	Without designated specialty licensing or recognition in Alaska, it is difficult for the board to take any action on those dentists who present to the public false or misleading advertising with respect to their training and qualifications. Years ago, specialty recognition was repealed for some unknown reason and the board believes 08.36.246-248 should be brought back in the interest of protecting the public from possible misleading advertisements as to a practitioner's qualifications.
100	The board believes that 08.36.254, our temporary permit to substitute for an incapacitated dentist, is too narrow and should have broader authority, as it does not allow us to grant temporary licenses for other reasons. Examples could include: military spouses who need to work right away, candidates right out of school just waiting on something that is held up and beyond their control, declared emergencies like COVID-19, and of course filling in for an incapacitated dentist who can't find coverage any other way so they can keep a viable practice.

Regulation Recommendations Proposed Legislation for FY 2022

æ	No Recommendations The Board has no recommendations for proposed regulations at this time.
■ Recommendations The Board has the following recommendations for proposed regulations	

Goals and Objectives

Part I

FY 2021's goals and objectives, and how they were met:

- 1) The Dental Board (Board) completed a regulation project that expanded the pool of potential hygiene applicants for Alaska licensure. The board did this by accepting all generally equivalent patient-based hygiene exams for licensure rather than the Western Regional (WREB) Exam only.
- 2) The board also completed a similar regulation change that allows for equivalent patient-based local anesthesia exams rather than WREB only.
- 3) The board met numerous times during the COVID-19 declared emergency in order to work with state officials to develop guidance and protocols in order to keep dental offices open safely during the height of the pandemic. Dental offices were able to treat patients for emergencies and later for routine dental work without becoming a source of COVID-19 transmission in part thanks to these guidelines.
- 4) Because there have been no live-patient dental exams available nationwide during the pandemic, and because mannequin-based exams for dental licensure have become better over the last couple years, the board extended its acceptance of mannequin-based exams for dental applicants through December 31, 2021 by another regulation change.
- 5) The board routinely used a service (PBIS) to help process license applications. During FY2021, PBIS shut its doors. This forced the board to start processing all applications in-house with our one licensing examiner who has picked up much of the load. Another regulation project was needed to accommodate this change in process, including the ability to collect fees and request additional documentation if necessary.
- 6) Due to the lack of availability of some in-person CE required by regulation during the pandemic, and because of the PBIS closure and increased staff workload, the board extended its renewal deadline from February 28 to April 30, 2021.
- 7) The board also moved to add two changes to regulation that would allow applicants to qualify for licensure with a one-year general practice residency in lieu of a regional exam and also eliminate some of the items that could be used to determine if someone applying for licensure by credentials took an equivalent exam. The reason being that the criteria were never used and most of the items were not even being tested for anymore.

Goals and Objectives

Part II

FY 2022's goals and objectives, and proposed methods to achieve them.

Describe any strengths, weaknesses, opportunities, threats and required resources:

- 1) Finish regulation projects already started.
- 2) Have the State Department of Health take over radiological equipment inspections.
- 3) Bring back the specialty license.
- 4) Streamline licensure more.
- 5) Track the new required sedation permit office inspection compliance.
- 6) Continue to develop and finalize a penalty matrix.
- 7) Have better communication and efficiency with our investigative unit.
- 8) Return to 2-4 in-person meetings per year.

Sunset Audit Recommendations

Date of Last Legislative Audit: April 26, 2018
Board Sunset Date: June 30, 2027

Audit Recommendation:	The board president should take steps to correct a regulation error regarding who is authorized to conduct inspections on dental radiological equipment.
Action Taken:	The board has discussed this at several meetings, including special guests from DHSS for their input.
Next Steps:	The board, along with the division and DHSS, is working to propose legislation that would move these inspections back to DHSS, who are better equipped to manage these.
Date Completed:	Requires legislation to complete.

Audit Recommendation:	CBPL's chief investigator, in consultation with the board, implement controls to ensure the appropriate entities are notified when a licensee's prescription authority is suspended or revoked.
Action Taken:	The board was informed by the executive director of the Pharmacy Board that they are not required to notify the Board of Pharmacy of DEA revocations or suspensions. The PDMP program has a DEA Status Change Form DEA holders should use when there is a status change.
Next Steps:	N/A
Date Completed:	FY2020

COVID-19 Practice Guidance for Licensees and Facilities Alaska Board of Dental Examiners, 05/16/21

The Alaska Board of Dental Examiners wants to help oral health professionals minimize the risk of COVID-19 transmission when seeing patients by using the appropriate Personal Protective Equipment (PPE) and evaluating engineering controls. This document provides recommendations and guidelines as we continue to navigate through the effects of COVID-19.

At this time, guidelines and recommendations from many sources, most notably the CDC and OSHA, are months out of date. Dentistry in Alaska has proven to be a safe and essential part of the healthcare system. Please continue to have awareness of the COVID-19 situation in your community.

Please keep in mind that during this pandemic, we are in a situation of evolving understanding of coronavirus and COVID-19, these are interim guidelines and guidance, and may change as further evidence is reviewed.

Practitioners are advised to be aware of rates of community transmission in their service area and mitigate risks accordingly. Each community is unique, and appropriate mitigation strategies will vary based on the level of community transmission, characteristics of the community and its population, and the local capacity to implement strategies. Vaccination numbers and recovered cases are other factors to consider.

Applicability: This guidance applies to all dental offices and providers regulated by the Board of Dental Examiners to practice dentistry and dental hygiene in the State of Alaska.

Health Care Delivery

Providers and facilities are encouraged to adhere to the following practices when delivering health care:

Risk Mitigation Strategies

Patient Considerations:

- 1) If the same level of care may be achieved through the use of phone consultation as achieved through in-office service, then this delivery method can be used.
- 2) A screening protocol which involves screening dental healthcare workers, patients and building visitors should be used.
 - a) Temperature may be elevated in the case of an odontogenic infection; consider all other screening questions when elevated temperature is noted, and use professional best judgement.
- 3) Testing guidelines for care delivery: Pre-procedural testing is up to the discretion of each facility.
 - a) Factors to consider include COVID-19 infection rates, availability of testing, vaccination status of patient. Molecular based PCR testing remains the most accurate form of testing to date.
- 4) Each facility should maintain a plan to stop performing non-emergent procedures in the event of an outbreak or resurgence of COVID-19 or a shortage of PPE.
- 5) Strongly consider the balance of risks vs. benefits for patients in higher-risk groups. Persons over age 60 and those of any age with serious underlying medical conditions are at higher risk for severe illness from COVID-19. These include but are not limited to those with compromised immune systems, diabetes, hypertension, chronic kidney disease, lung and heart function problems.

- a) To mitigate risk for high-risk groups, consider delaying routine care if appropriate, or scheduling these patients for dental care at the first appointment of the day. Non-emergent and elective procedures should be prioritized based on indication and urgency.
- 6) Consider social distancing when deciding to have patients utilize the waiting room vs waiting outside or in their vehicles.
- 7) Consider the use of public and universal facemasks for your facility.
- 8) At time of patient discharge ask the patient to inform the dental facility if they develop symptoms or are diagnosed with COVID-19 within 48 hours following their appointment.

Facilities:

- 1) It is recommended that offices re-evaluate HVAC and other facility controls and improvements for efficacy.
- 2) Facilities and practices should have a plan in place for patient isolation in the case of a suspected or positive COVID-19 case.
- 3) Implement social distancing measures within waiting rooms and other areas of the office.
- 4) Post visual alerts (e.g., signs, posters) at the entrance and in strategic places (e.g., waiting areas, elevators, break rooms) to provide instructions in the appropriate language(s) about hand and respiratory hygiene and cough etiquette. Instructions should include wearing a cloth face covering or facemask for source control, and how and when to perform hand hygiene.
- 5) Provide supplies for respiratory hygiene and cough etiquette, such as alcohol-based hand rub, tissues, and no- touch receptacles for disposal.

Dental Health Care Providers:

- 1) Dental offices should maintain a plan to address the potential of a dental healthcare worker contracting COVID-19
- 2) It is the responsibility of each provider to ensure the safety of their staff and patients. This includes ensuring providers and staff do not come to work while ill and providing appropriate personal protective equipment (PPE).
- 3) All staff should be screened and their temperature should be taken at the beginning of each shift, and those displaying respiratory symptoms and/or fever (≥100.4º F) should immediately leave. Staff should not report to work with fever or respiratory symptoms that are unrelated to seasonal allergies.

Practice Operations:

- 1) Minimize potential of dental aerosols and spatter.
- 2) Aerosol generating procedures include but are not limited to:
 - a) The use of a dental handpiece.
 - b) The use of an ultrasonic scaler (e.g., Cavitron)
 - c) The simultaneous spray of compressed air and water into the oral cavity; air/water syringe use.
 - d) Use of lasers, electro-surge or any similar device creating a vapor
 - e) Use of intra-oral air-polishing or air-abrasion unit
- 3) Use high volume evacuator when possible
- 4) Use dental isolation devices such as dental dams or isolating-type mouth props when possible.

- 5) Utilize low-aerosol techniques such as hand scaling in dental hygiene procedures when appropriate.
- 6) Infection control should be practiced in all patient-accessed areas:
 - a) Unused supplies and instruments should be in covered storage, such as drawers and cabinets, and away from potential contamination. Any supplies and equipment that are exposed but not used during a procedure should be considered contaminated and should be disposed of or reprocessed properly after completion of the procedure.
- 7) It is recommended to use HEPA filtration in the operatories to provide further protection from airborne particles

Personal Protective Equipment (PPE)

- 1) DHCP shall adhere to standard precautions, which include but are not limited to: hand hygiene, use of personal protective equipment (PPE), respiratory hygiene/etiquette, sharps safety, safe injection practices, sterile instruments and devices, clean and disinfected environmental surfaces.
- 2) Enhanced PPE such as respirators, face-shields, gowns, foot coverings are covered in CDC and OSHA recommendations. The efficacy of these compared with standard PPE (surgical mask, protective eyewear, gloves) has not been established in the delivery of dental care for asymptomatic patients.
- 3) The dental office should have enough recommended PPE in inventory for its workforce for 2 weeks without the need for emergency PPE- conserving measures. If an office experiences an inability to source PPE for a period of one week, the office should close for non-emergent procedures until sufficient PPE has been obtained. If a facility proposes to extend the use of or reuse PPE, it should follow CDC guidance.
- 4) If a practice chooses to treat a known COVID-19 positive patient, CDC and OSHA guidance should be followed

New Business

From:
To:
Subject: CDCA-WREB merger

Date: Wednesday, August 4, 2021 11:47:06 AM

Attachments: <u>image001.png</u>

Good afternoon,

The Commission on Dental Competency Assessment and the Western Regional Examining Board, the two leading dental competency assessment organizations in the United States, are pleased to announce that the final steps to complete the previously announced merger have been completed.

WREB's member states, represented by their members of the Dental Exam Review Board (DERB) and Hygiene Exam Review Board (HERB) met on July 21 and heard the details of the proposed merger. They voted unanimously to support the merger.

The CDCA's General Assembly met on August 3rd and voted unanimously to approve the Plan of Merger along with linked Constitution and Bylaws changes that support the new organization and fully incorporate WREB examiners.

Effective immediately the new organization will be known as CDCA-WREB. Together we will simplify the needs of boards, licensure candidates and schools as we continue to serve the oral health professions.

"We come together with 100 years combined experience between the two organizations... when you look at the simplification for educators and consistency for the students, it's going to be a great marriage for the two organizations to come together," offered CDCA Board Chair, Dr. Harvey Weingarten.

WREB President, Dr. Robert Lauf agreed, stating that, "Portability is definitely the key to this union. We are very excited in providing a national examination for the dental and dental hygiene programs."

Please click this <u>link</u> to view the full comments from CDCA-WREB leadership.

Thanks!

Beth

Beth Cole Chief Operating Officer



WREB is now CDCA-WREB Click <u>cdcaexams.org or wreb.org</u> to learn more





The Commission on Dental Competency Assessment and the Western Regional Examining Board, the two leading dental competency assessment organizations in the United States, are pleased to announce their intention to combine into one organization to further serve the oral health professions. A Memorandum of Understanding was signed on June 15, 2021, outlining the intent of the merger.

The new entity will be known as CDCA-WREB. Together, the merged entity will administer the ADEX exams which are accepted in 49 states, the District of Columbia, Jamaica, and Puerto Rico as the basis for initial licensure for dentists and dental hygienists. The existing Boards of Directors of CDCA and WREB will combine to provide governance oversight to the combined entity with equal representation from both Boards.

The transition to fully operationalize the merger is expected to be ongoing throughout 2022. During this year, the combined organization will implement best practices from both organizations to create new processes to better serve all key constituencies. The combined organization intends to administer both the ADEX exam and the current WREB exam throughout 2022 and will begin to administer only the ADEX exam at all locations for the Class of 2023. CDCA-WREB will maintain two offices to best serve schools and candidates throughout North America. Exams will be administered in manikin, patient and computer based OSCE formats that satisfy state board requirements.

Dr. Rob Lauf, President of WREB states: "Members of the Boards of Directors of both organizations enthusiastically and unanimously support this plan and recognize the need to administer a single national psychomotor performance exam to simplify the process for obtaining licensure for dental and hygiene candidates and provide maximum portability."

There is already considerable overlap. Many states by law recognize both the WREB and CDCA-administered examinations as the basis for licensure and many examiners serve both organizations. Combination is a logical next step for both agencies. In reflecting on the merger, Dr. Harvey Weingarten, CDCA Chair, commented that "the pandemic highlighted the complexity of the licensure process for candidates, state boards, and for both our agencies and expedited innovation across the industry, making this collaboration more important than ever before. This is a long-awaited defining moment in the history of the dental profession. We are the only remaining health profession that has not defined a single, national pathway to licensure."

Together CDCA-WREB will become one of the largest organizations providing initial dental licensure testing and will have the most experienced staff in the industry. Together the two agencies have provided independent third party, mission-driven services to state dental boards for a combined 100 years. The merged entity will be able to further devote its time, effort, and resources to the continued development of the exams it administers. Having a single exam will simplify the licensure process for candidates, for state boards and for dental education programs.

For questions contact Alex Vandiver at avandiver@cdcaexams.org or Beth Cole at bcole@wreb.org.

WHAT IS NEW AT CRDTS?

CRDTS is committed to providing dental and dental hygiene candidates the most efficient, effective, and reliable opportunities for testing towards professional licensure, while ensuring competency and safety for the public.

We are growing and continually enhancing our examination platform to meet the needs of both the state licensing boards and candidates across the nation.

CRDTS LICENSURE EXAMINATIONS

The CRDTS Dental and Dental Hygiene Examination Committees have worked tirelessly over the past 18 months to meet the needs of the state boards, schools, and candidates. In addition to the traditional patient based dental restorative, periodontal and dental hygiene examinations, CRDTS has developed and implemented a total dental and dental hygiene manikin-based exam. The dental candidate can also elect to do the restorative preparations and the prosthodontic preparations on a virtual haptic Simodont machine at an approved CRDTS testing site. Acceptance of all CRDTS dental and dental hygiene manikin and haptic licensure examinations are subject to terms and conditions of the individual state licensing boards.

RETAKES:

While CRDTS has allowed and offered complimentary on-site retakes for dental hygiene candidates the past few years, the CRDTS Steering Committee approved the introduction of this same option for dental candidates. CRDTS understands the opportunity to retest at the same exam site rather than having to wait until the next scheduled full exam is advantageous and important to candidates. Qualifications for specific information regarding onsite retakes are outlined in the CRDTS Candidate Manuals.

Scores for dental examinations are released by 8 p.m. the night of the initial exam, so qualified candidates have the opportunity to register for retakes directly from the CRDTS website, make payments according to the fee schedule, and test the day following completion of the initial examination.

FEES:

The new Dental Examination fee schedule for retakes of CRDTS Dental Examinations is as follows: Complementary onsite retakes for the candidate's initial attempt for the first failure of one part of a dental examination. If a candidate is unsuccessful on more than one part, i.e. (endodontics/ prosthodontics/periodontics /restorative) the fee will be \$250.00 per part after the first complimentary retake. Off-site retakes will be \$587.50 per part.

The Dental Hygiene Examination offers one complimentary onsite retake for qualified candidates.

EXAM SITES:

CRDTS understands the need to be informed and to remain open to technological changes within the dental and dental hygiene testing industry.

With an independent manikin exam site in Athens, GA and soon in Coldwater MI, and Topeka, KS, CRDTS offers initial exams and retakes for both Dental and Dental Hygiene manikin exams by appointment.

CRDTS also has the ability to provide a virtual haptic Dental Examination as a supplement to the manikin restorative and prosthodontic exam for candidates whose state dental board approves this modality of testing for licensure. The Athens, GA site can now be utilized to do the restorative and prosthodontic preparations.

COMMITMENT TO EXAM EXCELLENCE:

CRDTS has been committed to testing excellence for nearly 50 years. CRDTS continues to work with dental and dental hygiene schools, candidates, and state boards to improve the quality of our examinations. We strive to be, not just an acceptable mode of licensure examinations, but the most efficient, effective, and portable option.

To that end, CRDTS continues to assess and enhance our examinations. For the 2021 examination season an Objective Structured Clinical Examination (OSCE) oral assessment component was added to the simulated patient dental hygiene exam, and for the 2022 examination season an OSCE oral assessment component will be added to the Dental Periodontal Manikin Examination. The dental hygiene and the dental oral assessment OSCE will be taken on site with no additional charge to the candidates.

WE ARE EXCITED TO ANNOUNCE RECENT CHANGES IN OUR LEADERSHIP AND STAFF:

Richael "Sheli" Cobler: Executive Director:

With CRDTS since April 2021, Ms. Cobler is a Topeka native and her office is at the Central Office headquarters. She has a Bachelor of Business degree with a dual major in Strategic Business Communications and Human Resources and a minor in Marketing. As a leader in business administration, Ms. Cobler has provided strategic advice and expertise in the implementation of policies, procedures, and governance standards throughout the course of her career. Ms. Cobler has been instrumental in the facilitation of board governance and implementation of technological advances for the efficiency and effectiveness of executives and directors for more than 20 years.

Dr. Mark Edwards:

Dr. Mark Edwards was recently hired to the position of Director of Dental Examinations at CRDTS. Dr. Edwards has examined for CRDTS for 26 years and has served on the Exam review, dental Calibration and Computer Simulated Exam Committees over this time frame. Dr. Edwards is a Diplomate of the American Board of Periodontology, Assistant Professor in the Department of Graduate Periodontics at the University of Missouri-Kansas City School of Dentistry and is in private practice in Lawrence and Topeka, KS.

CRDTS is also pleased to announce that due to continued growth a new position has been created to help our current Director of Dental Hygiene Examinations, Ms. Kim Laudenslager, with the increasing workload in our hygiene department. We anticipate hiring a new Assistant Director to Dental Hygiene Examinations in mid-July and look forward to introducing you to this person at our CRDTS Annual Meeting

Re-organization of Central Office Staff:

The CRDTS Central Office staff has also had some recent changes that have increased the effectiveness of the nucleus of the organization.

Renee' Gideon is our Office and Accounting Manager. Renee' has been a devoted and essential part of CRDTS for nearly 20 years. With a background in business and bookkeeping Renee' continues to enhance the office processes and improve the effective manner in which the center of CRDTS operates.

Shanee' Askren has recently assumed the new position as Exam Administration and Data Management Coordinator. Shanee' has been with CRDTS full-time for seven years and part-time for several years prior to that. Shanee' provides critical assistance to the exam teams during examinations as well as administration of scoring for dental and dental hygiene exams.

Emma Rupke is the Hotel Coordinator and Administrative Assistant and has been with CRDTS for eight years. Emma provides vital expertise in communication and organization as she is the front line for inquiries and requests to the central office. Emma also handles the distribution of candidate scores and maintenance of the database.

Taya Dayis was brought on board in April this year as a part-time permanent employee. Taya has quickly proven her ability and value to the organization through efficient and effective assembly of examination materials and electronics for shipping to the various examination sites where CRDTS is administering an examination.

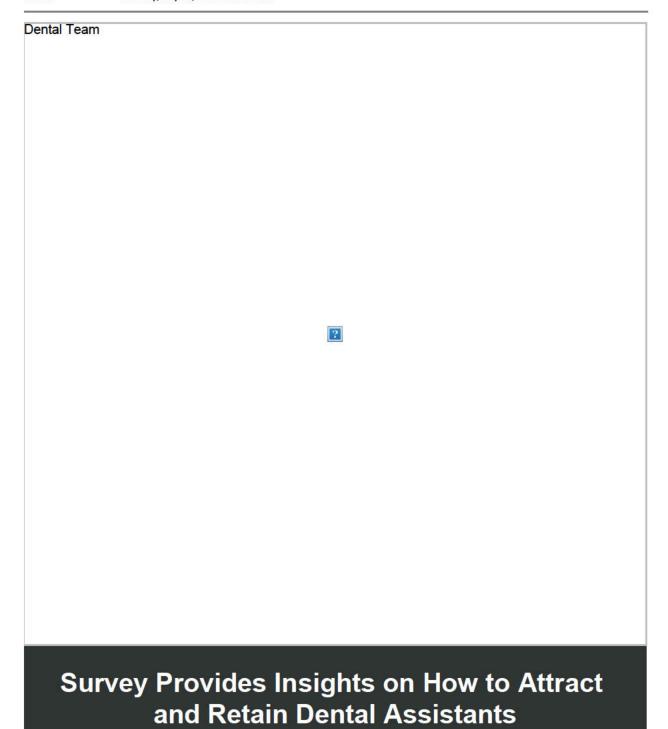
You can contact any member of the Central Office staff at 785.273.0380 or at info@crdts.org.

From: To:

Board of Dental Examiners (CED sponsored)

Subject: Survey Provides Insights on Hiring Dental Assistants

Date: Tuesday, July 13, 2021 11:02:39 AM



Even before COVID-19, there were several reports of dental assistant shortages in locations across the country. Since the pandemic, many dental practices have

found it even more challenging to fill vacant dental assisting positions.

That's why it's critical for dental practices to know how to attract and retain knowledgeable and skilled dental assistants. The Dental Assisting National Board (DANB) recently conducted a survey that provides some insight into this area.

DANB's 2020-2021 Dental Assistants Salary and Satisfaction Survey includes responses from nearly 1,400 dental assistants across the country, including those who hold DANB's Certified Dental Assistant (CDA) certification and those who do not. Below are some key findings from the research.

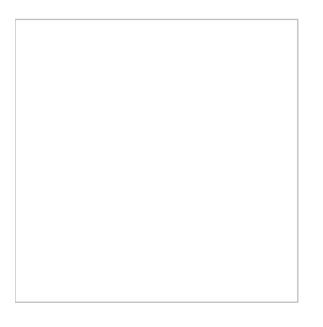
SEE THE FULL REPORT

The CDA Certification Difference

Dental assistants who hold DANB's CDA certification are educated and experienced professionals who are committed to the profession and passionate about lifelong learning.

Perform additional duties

CDA certificants were significantly more likely to order supplies, perform expanded functions, and handle office management duties compared to non-certified assistants.



Education

Hold an associate's degree or higher

44% of CDA certificants

27% of non-certified assistants

Expanded Functions

Hold an expanded functions credential

42% of CDA certificants

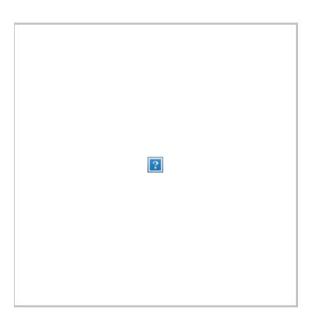
22% of non-certified assistants

Employer loyalty

7.7 years CDA certificants have worked for the same employer

Job Satisfaction

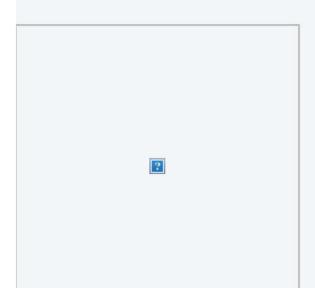
According to the survey, certified and non-certified assistants reported that they enjoy their careers and have high job satisfaction. This shows that dental assisting remains a rewarding profession.



reported high or very high job satisfaction:

78% of CDA certificants

72% of non-certified assistants



Most Rewarding Aspects

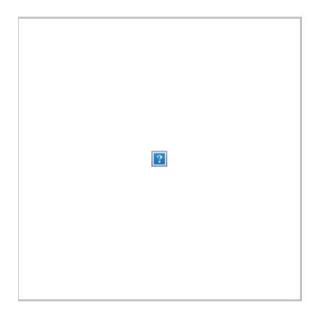
Dental assistants shared that the most rewarding aspects of their jobs were:

- · Making a difference
- Improving patients' oral health
- Patient relationships
- · Gratitude from patients

Top Factors in a Job

Dental assistants named these as the top three factors that are most important to them in a job:

Salary



- Work/life balance
- · Feeling part of a team

3 THINGS DENTISTS CAN DO TO ATTRACT QUALITY DENTAL ASSISTANTS

- 1. Offer a competitive salary and bonuses.
- 2. Invest in dental assistants' education and encourage earning credentials.
- 3. Foster a culture of recognition.

LEARN MORE

Learn more about DANB's Dental Assistants Salary and Satisfaction Survey.

SEE THE FULL REPORT

Dental Assisting National Board, 444 N. Michigan Ave., Suite 900, Chicago, IL 60611, United States



2020-2021 DENTAL ASSISTANTS
SALARY AND SATISFACTION SURVEY



The latest results from DANB's Dental Assistants Salary and Satisfaction Survey show that earning and maintaining DANB Certified Dental Assistant (CDA) certification brings a wealth of personal and professional advantages, including higher hourly wages.

"HOLDING DANB CERTIFICATION
MAKES ME FEEL VERY PROUD.
IT SHOWS THAT I HAVE THE
KNOWLEDGE. I ALWAYS ENCOURAGE
OTHERS TO EARN CREDENTIALS
WHENEVER POSSIBLE."

DANB CDA CERTIFICANTS EARN MORE

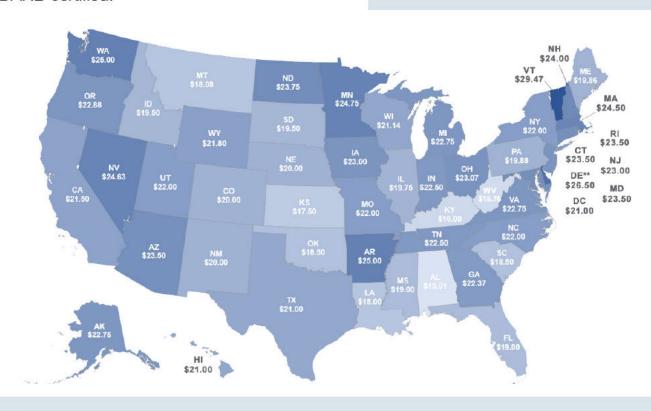
Surveyed DANB CDA certificants reported earning over \$2 more per hour compared to all dental assistants, most of whom are not DANB certified.

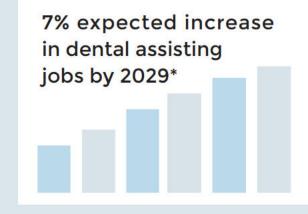
\$22.09

Median hourly pay for CDA certificants

\$19.80*

Median hourly pay for all dental assistants

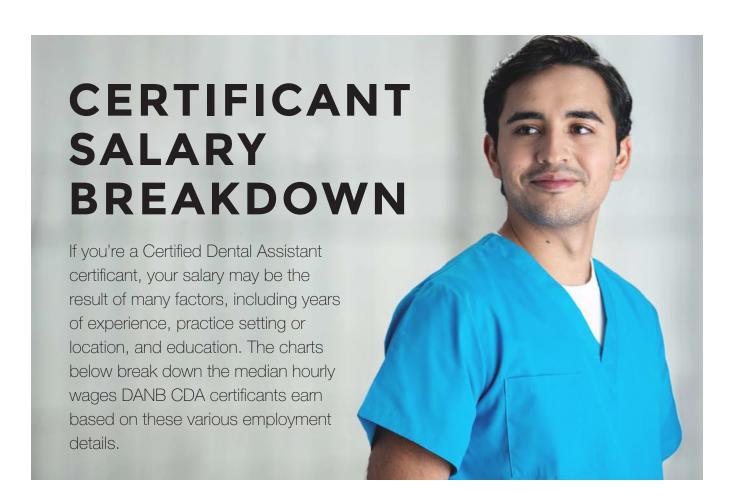




CAREER OUTLOOK

Dental assisting is a fast-growing profession, and DANB CDA certificants are positioned for success.

- * Data is from the 2020 Occupational Outlook Handbook, published by the U.S. Department of Labor's Bureau of Labor Statistics.
- **Data from DE is from 2018 due to insufficient data collected from the 2020 survey.



YEARS OF EXPERIENCE

<1 year	\$17.50
1-2 years	\$19.50
3-5 years	\$19.54
6-10 years	\$22.00
11-15 years	\$23.00
16-19 years	\$22.75
20+ years	\$24.00

EDUCATION

High school	\$23.00
Some college	\$23.00
Associate degree	\$22.50
Bachelor's degree	\$21.25
Master's degree	\$20.00
Doctorate degree	\$29.21

LOCATION

	Φ00 00
Rural area	\$22.00
Town/city	\$22.00
City/suburb	\$23.00
Large city	\$23.00
Metropolitan area	\$23.50

PRACTICE TYPE

General dentistry	\$22.50
Pediatric	\$22.50
Orthodontic	\$23.50
Multi-specialty	\$22.00



★★★★ TOP JOB FACTORS

- Salary
- Work/life balance
- Feeling part of a team

CERTIFICATION BENEFITS

- Pride
- Increased knowledge
- Standing out when applying for a job
- Higher pay
- Greater confidence

MOST REWARDING ASPECTS

- Making a difference in patients' lives
- Helping patients improve oral health
- Relationships with patients
- Gratitude from patients

"EVERY TIME A PATIENT SAYS THANK YOU, IT PUTS A SMILE ON MY FACE."



DANB CDA CERTIFICANTS VALUE CERTIFICATION

91% of CDA certificants would encourage others to earn certification

99% of CDA certificants plan to renew their certification

60% of DANB CDA certificants said earning certification was a personal goal

OTHER BENEFITS

Certificants are more likely than non-certified assistants to receive benefits, such as:

- Paid vacation
- Paid holidays
- 401(k)/pension plan
- Health insurance
- Paid sick leave
- Bonuses

"EARNING CDA
CERTIFICATION HELPED
ME BECOME AN EFDA
IN MY STATE. IT LED TO
A HIGHER SALARY FOR
ME, AS WELL."



Dental assistants who hold DANB's CDA certification are educated and experienced professionals who are committed to the profession and passionate about lifelong learning.

EDUCATION

Hold an associate's degree or higher

44% of CDA certificants

27% of non-certified dental assistants

"EARNING DANB
CERTIFICATION IS A
GREAT ACCOMPLISHMENT
AS A DENTAL ASSISTANT.
GET IT!"

EXPANDED FUNCTIONS

Hold a state-specific expanded functions credential

42% of CDA certificants

22% of non-certified dental assistants

PERFORM EXPANDED FUNCTIONS

63% of CDA certificants

37% of non-certified dental assistants



ABOUT THE SURVEY

DANB's 2020-2021 Dental Assistants Salary and Satisfaction Survey was conducted in November and December 2020. The findings in this report are based on a 15% total response rate from a stratified random sample of 6,000 CDA certificants. Survey researchers consider this response rate sufficient to generalize the results to the population surveyed.

Salary figures are reported as the median response (the median is the point in a data set at which about 50% of the responses fall above and 50% fall below). Salary figures are reported as hourly wages, without including the dollar value of any employee benefits.

DANB has conducted a salary survey every two years since 2004. The consistency of data over these years supports the conclusion that these results are representative of the population.

CONTACT US

Dental Assisting National Board, Inc. 444 N. Michigan, Suite 900 Chicago, IL 60611 www.danb.org 1-800-367-3262

Task List

Adjourn