

Additional questions about proposed interstate licensing compacts

To be completed by proposal sponsor. (500 Word Count Limit for this page)

Name: BRIDGETT ANDERSON

Organization: MINNESOTA BOARD OF DENTISTRY

Phone: 612 548 2127

Email Address: bridgett.anderson@state.mn.us

**Please fill out this form in addition to the applicable Questionnaire A or B.*

Bill Number: **SF2990/ HF3001**

Who would be affected by the compact? Are any of these practitioners unionized? If so, which unions represent these practitioners?

Dentists and Dental Hygienists. They are not unionized.

How will practitioners who are not represented by the advocates learn about the bill?

They are already very well aware of the bill through discussions, information sharing, social media sharing and public meetings. The bill is supported by both the state dental association and dental hygiene association.

Do standards for practice and/or licensing vary throughout the country? How?

Yes, they do but the compact was designed to align with common grounds in dental and dental hygiene licensure. The compact has background check requirements, jurisprudence requirements, continuing education requirements, educational requirements, and examination requirements. The compact aligns with what we already use in MN to determine eligibility for licensure.

Does the compact already exist? When did it become active? Which states are members of the compact? If not, when will it become active?

The compact needs seven states to begin the process of establishing the compact commission. There are five states that have adopted the legislation so far. It will become active after seven states enact. Wisconsin and Iowa are already members, along with Tennessee and Washington. Legislation has been introduced in Colorado, Nebraska, Kansas, Missouri, Illinois, Indiana, Ohio, Pennsylvania, New Jersey, Virginia, and Maine.

How many of the affected occupation are currently working in Mn? How many are expected to work in Minnesota if the compact is approved?

Dentists 3,948

Hygienists 5,730

We do not have a way to estimate how many will be working here in MN once approved. The dentist and dental hygienist compact is new. However, there have been studies performed since the medical compact was instituted in states and the results were favorable and show an increase in providers by 3%. Further, they report that the IMLC increased the number of states in which physicians practiced, with more growth in participating states even after accounting for other policy reforms.

Will Minnesota's regulatory authority be notified when an out-of-state begins practice in Minnesota? What process, if any, will be followed?

Once they are licensed through the compact, the Board will be able to gain the information through a shared data system with the participating compact states.

How will out-of-state practitioners be regulated while in MN? Will Minnesota's regulatory agency accept and investigate complaints regarding out-of-state licensees? If not, what is the process for a patient to make a complaint?

Minnesota Board of Dentistry is the regulatory agency for any licensee that gets licensed through the compact and is practicing on a patient in MN. We maintain the same regulatory authority. The patient would make a complaint through our agency, just as it is now.

Does the regulator body have capacity/how will it increase capacity to handle additional complaints? Will out-of-state practitioners pay a fee to increase regulatory capacity?

We have the capacity to process additional complaints. We are efficient in our Practitioner Review process where complaints and discipline are handled.