STATE OF MINNESOTA BOARD OF DENTISTRY

In the Matter of the Proposed Rules
Of the Board of Dentistry
Relating to Continuing Dental Education

STATEMENT OF NEED AND REASONABLENESS

GENERAL STATEMENT

Introduction

The proposed rules do the following: (1) increase fees for sponsors of Continuing Dental Education courses; (2) require CDE sponsors to submit renewal applications annually; (3) establish stricter and clearer standards for approval of CDE sponsors; (4) establish standards for CDE courses; (5) clarify the requirements for proof of participation in CDE courses; (6) require sponsors to maintain records of CDE course offerings and attendance; (7) give the Board authority to review CDE sponsors' records and conduct surveys of participants; (8) require, if a course is not taken from an approved sponsor, that the licensee or registrant apply for course approval within 30 days, rather than two weeks, after completion of the course; (9) clarify credit hours for CDE courses and activities; (10) clarify that successful completion of examinations and education programs will not satisfy specific continuing education requirements such as for infection control, and (11) give registered dental assistants CDE credit comparable to that given to dentists and dental hygienists for completion of examinations and education programs.

Rule Development Process

The Board began the process of developing the proposed rules by publishing in the April 5, 1993 edition of the <u>State Register</u> a notice that the Board was seeking information or opinions from sources outside the Board in preparing to propose noncontroversial amendments. Additional Notices of Solicitation were published on May 8 and August 21, 1995, the latter pursuant to a new law which went into effect on May 26, 1995.

The Board developed the proposed amendments on the basis of needs identified by the Board and practicing dental health professionals. After having compiled a list of suggested changes, the Board surveyed the Minnesota Dental Association, the Minnesota Dental Hygienists' Association, the Minnesota Dental Assistants' Association and other dentistry-related groups and organizations and asked them to indicate, with respect to each proposed change, whether in their opinion the change was needed and whether it would be controversial. The Board's Rules Committee subsequently held a public meeting on July 16, 1993 to review the proposed changes and the survey responses. Based on the input provided by the various groups, the survey results, and the comments received at the meeting, the committee placed the proposed changes into several categories. The amendments now being proposed were classified as "category 2" changes, which are those deemed noncontroversial but needing additional research and advisory committee input before being proposed.

A group of interested representatives of organizations that sponsor CDE course offerings met on October 29, 1993 to review an initial draft of the proposed rules. Revised drafts were considered in two public meetings of the Rules Committee, the first on December 3, 1993, and the second on January 7, 1994. The proposed rules were approved by the Board of Dentistry at a public meeting held on November 19, 1994.

Pursuant to Minnesota Statutes, section 14.23, the Board has prepared this Statement of Need and Reasonableness and made it available to the public before publishing the Notice of Intent to Adopt Rules Without A Public Hearing.

The Board will publish in the <u>State Register</u> the proposed rules and the Notice of Intent to Adopt Rules Without a Public Hearing on December 26, 1995. On December 22, 1995, the Board will mail copies of the Notice to persons registered with the Board pursuant to Minnesota Statutes, section 14.22 as well as to others who the Board believes will have an interest in the rules. The Notice will comply with the requirements of Minnesota Statutes, section 14.22 and Minnesota Rules, part 2010.0300, item G.

These rules will become effective five working days after publication of a Notice of Adoption in the <u>State Register</u> pursuant to Minnesota Statutes, section 14.27.

Statutory Authority

Minnesota Statutes, section 150A.04, subdivision 5 provides that the Board may promulgate rules as are necessary to carry out and make effective the provisions and purposes of sections 150A.01 to 150A.12, in accordance with sections 14.02, 14.04 to 14.36, 14.38, 14.44 to 14.45, and 14.57 to 14.62.

Minnesota Statutes, section 214.06, subdivision 1 and section 16A.1285 require the Board to adjust any fee which the Board is empowered to assess a sufficient amount so that the total fees collected will as closely as possible equal anticipated expenditures during the fiscal biennium plus the agency's general costs, statewide indirect costs and Attorney General's costs attributable to the fee function.

DISCUSSION OF SPECIFIC PROVISIONS

3100.0100 DEFINITIONS.

- Subp. 7a. Clinical participation. This definition is added in order to clarify that one form of continuing dental education is that of providing clinical treatment, or practicing clinical techniques, on human subjects. This definition is needed to reduce confusion as to what may be included as particular types of continuing dental education coursework. This definition is reasonable because CDE courses often include treatment on human subjects and because the Board has granted CDE credit for clinical courses for a number of years.
- Subp. 9. Course. The definition of the word "course" is deleted and replaced with a definition of "continuing dental education." Defining the word "course" is unnecessary because the amendments to 3100.4200 provide an adequate definition.

Continuing Dental Education. The Board has had a specified number of CDE credits required for dentists, dental hygienists and registered dental assistants for several years. The proposed definition of continuing dental education (CDE) is needed to clarify that CDE refers to courses or activities which meet the standards set by the Board for the awarding of credit toward continuing dental education requirements for licensure and registration renewal. The definition clarifies that credits may be awarded by the Board for courses and activities approved by the Board or presented by CDE sponsors approved by the Board. This change is needed in order to more clearly advise licensees, registrants and CDE sponsors that Board approval of CDE sponsors and CDE courses is required before CDE credits may be granted. This approach is reasonable to avoid confusion: if the meaning of CDE is not clarified in definition, the word "approved" would need to be added to, or the word "CDE" deleted from, several sections of the rule for clarity and consistency.

Subp. 12c. Laboratory or preclinical participation. This definition is added in order to distinguish between "clinical" and "laboratory or preclinical" types of CDE courses. The definition includes practicing treatment techniques using study models, casts, manikins or other simulation methods, none of which involve practice on human subjects. The inclusion of "other simulation methods" allows the Board to consider approving computer simulations or other types of simulations which may be developed as technology advances. This change is needed in order to give the Board the flexibility to grant approval for new types of coursework being developed by educational institutions. This definition is reasonable because courses allowing for practicing techniques on other than human subjects have been in existence for years, and because the Board has granted CDE credits for these types of courses in the past. Furthermore, advances in technology will allow further development of computer simulations, thereby increasing the likelihood that more CDE courses will utilize this type of teaching method.

3100.2000 FEES.

Subp. 8. Application for approval as sponsor of CDE courses. The word "person" is changed to "organization" to more accurately reflect that most CDE sponsors are organizations rather than individuals. The initial application fee is increased from \$75.00 to \$100.00. The need for this increase is because the proposed rules require CDE sponsors to meet six new requirements, listed in Minnesota Rule 3100.4200, subp. 5, thereby increasing the cost to the Board of processing CDE applications. Also, an annual renewal fee of \$50.00 is imposed, replacing the \$95.00 renewal fee required every four years. These changes are needed because the proposed revisions will entail more detailed scrutiny of potential CDE sponsors by Board staff and Board members and, therefore, there will be increased costs to the Board to process initial and renewal applications. This approach is reasonable because Board must generate fees sufficient to cover costs.

3100.4100.CONTINUING DENTAL EDUCATION.

The proposed change reflects the repeal of Minnesota Rule 3100.4600 regarding providing evidence of attendance. The revised language states that evidence of attendance is required by parts 3100.4100 to 3100.4500. This change is needed in order to minimize confusion on the part of licensees, registrants and CDE sponsors who will be expected to comply with the rules. It is reasonable because it is consistent with other proposed changes.

3100.4200 CDE SPONSORS.

- Subpart 1. Approval of sponsors. The proposed language change deletes reference to a "system" of approving sponsors. This change is nonsubstantive in that the revised language retains the requirement that CDE sponsors be approved by the Board. This provision is needed because the existing language is confusing. It is reasonable because it more accurately reflects what the rules require.
- **Subp. 2.** Application procedure. This change substitutes the word "organization" for "person" in keeping with the proposed change to Minnesota Rule 3100.2000, subp.8 Also, the phrase "use as a consultant" is changed to "consult with" for clarification purposes only. These changes are needed to reduce confusion on the part of licensees, registrants and CDE sponsors who will be expected to comply with the rule. They are reasonable because they more accurately reflect what the rules require.
- Subp. 4. Sponsor renewal. The proposed changes will require CDE sponsors to submit a renewal application and renewal application fee annually by May 1st, rather than every four years as previously. This rule is needed in order to eliminate those sponsors who have been approved but do not offer CDE courses. By requiring annual renewal of sponsorship, an organization will demonstrate a commitment to being a provider of CDE and will provide the Board with updated information on the organization and its activities. If a decrease in the number of sponsors occurs as projected, this should not create a barrier for licensees and registrants in meeting the CDE requirements since only those sponsors who are actively offering courses will continue to be sponsors. The proposed change is reasonable because licensees and registrants of the Board currently are required to annually renew their licenses and registrations; an annual renewal process for CDE sponsors would, therefore, be consistent with processes already in place for this Board and should not be burdensome for CDE sponsors.
- Subp. 5. Approval standards. This section includes a considerable number of language changes which establish stricter and clearer standards for approval of CDE sponsors. The new standards are needed in order to ensure that CDE sponsors are actually serving the purpose of providing appropriate continuing dental education. The Board of Dentistry has had mandatory continuing education requirements for years and continues to be committed to the value of CDE to ensure continued competency for its licensees and registrants. Continuing dental education requirements for dental health professionals serve to protect the public by ensuring that those who provide treatment are competent. Therefore, the CDE sponsors who offer courses must also be competent in the subject areas to be taught.
- A. The proposed language more clearly specifies existing qualifications that a CDE sponsor must meet in order to obtain Board approval, and it adds new qualifications. The new qualifications include CDE sponsors having a designated individual to plan and manage CDE activities; disclosing to the Board any disciplinary or legal action taken or pending against the organization, its officers, or members of the organization directly involved in CDE activities; having written policies on any conflict of interest, and the organization providing complete and accurate information in materials used to publicize course offerings. The need for such clarification and stricter qualifications is based on the Board's need to ensure that the continuing dental education courses which its licensees and registrants take and obtain credit for are, in fact, based on appropriate, scientifically valid dental information. This approach is reasonable because

the Board's application form currently asks for some of this information, and the Board believes that such information should be easily provided by bona fide CDE sponsors. The Board also believes that these requirements will protect its regulated individuals as consumers of continuing dental education courses by preventing CDE sponsors from providing false or misleading information about course content. Ultimately, the Board believes that dental patients will benefit from the increased quality control over CDE courses.

- The proposed language clarifies existing CDE sponsor requirements and creates B. new requirements that a sponsor must meet in order to obtain Board approval. Specifically, CDE courses must be presented as an organized program of learning; teaching methods must fall into one or more of six specific types, such as clinical participation, media usage, etc.; courses must be designed to review existing dental concepts and techniques or must update participants on advances in dental or related sciences on oral health subjects; subject matter that includes clinical participation must be within the legal scope of practice for participants, and the course must promote practices that are scientifically valid, have proven efficacy, or ensure public safety. The need for such clarification and expansion of requirements is to ensure that courses for which the Board grants CDE credits are, indeed, consistent with the Board's intent to ensure continuing competency of its licensees and registrants for the ultimate benefit of dental patients. The Board also believes that there is a need to protect its regulated persons from "quackery-type" courses and from courses which would promote illegal or unethical practices, and from those that fall below the current accepted standards. This approach is reasonable because the Board believes that the requirements can be easily met by bona fide CDE sponsors, and because the requirements will eliminate potential CDE sponsors whose course offerings are not scientifically valid or are not directly related to the practice of dentistry, dental hygiene or dental assisting.
- C. The proposed language clarifies the qualifications of those who present, conduct or design CDE courses by stating that they not only must have training and experience, but also must be competent in the subject matter to be taught. Again, the need for this clarification is to ensure that CDE sponsors are qualified to teach regulated individuals who must meet specific CDE requirements in order to maintain their licenses or registrations. This approach is reasonable because the Board believes that bona fide CDE sponsors will easily be able to meet this requirement.
- D. This is a new requirement that states that CDE activities must be conducted in a certain type of facility, i.e. classroom, laboratory, or other facility appropriate for the subject offered. The need for this requirement is to prevent CDE credit from being granted for informal discussions and "entertainment." This approach is reasonable because bona fide CDE sponsors will be able to easily meet this requirement. Also, this approach should serve to eliminate sponsors whose course offering do not provide valid learning experiences for participants who need to meet CDE requirements in order to maintain their licenses or registrations.
- E. This is a new requirement which states that when various types of technologies are used for teaching purposes, such as videotapes or teleconferences, a qualified person must be available to interact with the participants and verify attendance. Furthermore, the "qualified individual" must be competent in the subject matter taught. The need for this proposed language is based on the Board's understanding that a valuable part of an educational experience is the ability of course participants to ask questions to enhance their understanding of the subject matter presented; in the absence of a qualified individual, that interaction could not happen. Dentists,

dental hygienists and registered dental assistants are required to earn a certain number of CDE credits every five years in order to maintain their licenses or registrations. Therefore, the proposed language is needed because the Board has an obligation to verify that when CDE cards are submitted by licensees and registrants, those regulated individuals did, in fact, attend the courses for which they are claiming credit. This approach is reasonable because it will not only enhance learning by regulated individuals, but it will also prevent individuals from claiming fraudulent CDE credits.

- F. This is a new requirement which states that self-instructional courses must include a test to measure the regulated individual's level of comprehension of the course content. The test is to be submitted to the sponsor for grading and determination of successful completion of the course. The need for this requirement is to ensure that those who use self-instructional materials do not fraudulently claim CDE credits. This approach is reasonable because valid, self-instructional materials prepared by competent individuals typically have testing components.
- Subp. 6. Proof of participation. The proposed language clarifies how proof of participation in CDE courses shall be made, and it extends the length of time in which a CDE sponsor may submit participant cards to the Board office after presentation of a course. The new requirement states that a CDE sponsor must inform participants that it is an approved sponsor for CDE in Minnesota and that participants receive credit by submitting a preprinted card to the sponsor upon course completion. The sponsor then sends to the Board all cards in an envelope provided by the Board within 30 days after course completion. These changes are needed in order to provide a mechanism for sponsors to be accountable both to the Board and to course participants. This approach is reasonable because the Board has provided preprinted cards to regulated individuals at no cost to those individuals for years, and because the Board believes that requiring sponsors to submit cards within 30 days would not pose any barrier or hardship to sponsors or to participants.

Subp. 6a. Record keeping.

- A. This is a new requirement which describes specific recordkeeping requirements of CDE sponsors, including specifics related to course offerings. It grants a variance in this recordkeeping for attendees of annual conventions or mid-year meetings of the Minnesota Dental Association, Minnesota Dental Hygienists' Association, Minnesota Dental Assistants' Association and meetings of their respective districts or components. It states that records of the names of participants of each individual CDE course do not have to be maintained; records of the names of participants for the meeting as a whole are sufficient. Records required under this item are to be maintained for three years following the course offering. This amendment is needed in order to prevent fraudulent CDE credit from being claimed by regulated individuals. The variance is needed for large conventions because there is no practical way for those sponsors to compile attendance records for each course offering. This approach is reasonable because it does not place an undue burden on CDE sponsors.
- B. This is a new requirement that allows the Board to review records kept by CDE sponsors and allows the Board to conduct random sample surveys of course participants in order to determine the sponsor's compliance with standards specified in subpart 5. This amendment is needed in order to allow the Board to enforce its standards by verifying course attendance and CDE sponsor compliance with Board standards, thereby preventing fraudulent CDE credits from being granted and eliminating CDE sponsors who do not meet Board standards. It is reasonable

because the recordkeeping requirements for CDE sponsors are not cumbersome, and because CDE course attendees are often asked to provide course evaluations.

Subp. 7. Denial or revocation of approval. The proposed changes bring consistency to the rule, given the changes proposed for 3100.4200, subpart 5, items B to F. The changes are needed to prevent confusion for regulated individuals and CDE sponsors in order to be consistent with the Board's authority to deny approval for specific coursework. The provisions are reasonable because if the Board learns that a sponsor's courses do not meet the aforementioned requirements, it needs to have the authority to deny or revoke approval of not just the course, but also the sponsor.

3100.4300 APPROVAL OF COURSES PRESENTED BY NONAPPROVED SPONSORS.

- Subpart 1. Credit for nonapproved courses by nonapproved sponsors. Changes in this subpart are not substantive. They are needed to prevent confusion, and they are reasonable because they clarify the process by which credit is granted by the Board.
- Subp. 2. Information required. The revised language deletes reference to a form supplied by the Board. This change is needed in order to be consistent with the language proposed for item A of this subpart: Because of the revised language in item A, the reference to a form is no longer needed. Other changes in the first paragraph are not substantive; they are for purposes of clarification only. Most of the changes below are non-substantive, but reflect the need to assign different letters to specific requirements because of the addition of two items. Substantive changes include requiring regulated persons to submit a CDE card, rather than a form, and a course outline rather than a detailed course description.
- A. This provision requires that a regulated individual seeking CDE credit from a nonapproved sponsor must submit a completed CDE card supplied by the Board. The language replaces the reference to a "form" in the first paragraph of this subpart. The revised language is needed because it more accurately reflects the Board's current practice. It is reasonable because it places no undue hardship on regulated individuals who must already complete CDE cards for courses from approved CDE sponsors. The stricken language regarding name and address now appears in item C.
- B. This provision requires that a regulated individual provide evidence of attendance at the course. This provision is needed in order to give the Board a basis for being able to verify that the regulated person actually attended the course. It is reasonable because regulated individuals already provide such information when they attend courses presented by approved CDE sponsors. The stricken language regarding name and address now appears in item D.
- C. The new language regarding name and address of the sponsoring organization is the same as what was previously found in item A. The stricken language regarding a course description is replaced by the new language regarding a course outline found in item E.
- **D.** The new language regarding name and address of correspondent is the same as what was previously found in item B. The stricken language is replaced by the new language regarding the presenters' credentials in item F.

- E. The new language replaces the language previously found in item C. The revised language permits a regulated person to submit an outline of the course content, rather than a detailed course description. This change is needed because it is not always feasible for the participant to submit a detailed description, nor is a detailed description always necessary for the Board to consider whether a course is acceptable. This provision is reasonable because it should be relatively easy for regulated individuals to obtain a course outline from a course presenter. The stricken language regarding location of course presentation is replaced by the new language in item G.
- **F.** This provision replaces what was previously found in item D regarding name and credentials of course presenters. The minor change in wording is needed for clarification purposes and is reasonable because it is consisent with the previous language.
- G. This provision replaces language previously found in item E regarding name and address of the facility at which the course was presented. The change in wording is for purposes of clarification only.
- Subp. 2a. Time limits for notice of attendance. This item requires that if a course is taken from a nonapproved sponsor, a regulated individual must apply for course approval within 30 days of course completion. This new language replaces the language previously found in part 3100.4600, which provided for a two-week time period. This change is needed in order to give regulated individuals as well as CDE sponsors a sufficient amount of time to adequately prepare the required documentation for course approval. The provision is reasonable because it extends the time period, thereby increasing the likelihood that regulated individuals will properly prepare and submit the required documentation.
- Subp. 3. Course approval standards. The revised language clarifies that the Board must grant CDE credit when a course meets the Board's standards, including the new standards contained in part 3100.4600, subparts 1 and 2. This revision is necessary in order to be consistent with other proposed amendments. This provision is reasonable because it should serve to eliminate confusion on the part of regulated individuals and CDE sponsors.
- Subp. 4. Written denial. This new language replaces the repealed language found in subpart 6. The stricken language is replaced by the approval standards language now found in part 3100.4200, subpart 5. The requirements regarding written denial remain the same. This change is necessary in order to be consistent with other proposed language changes. This provision is reasonable in that it should reduce confusion on the part of licensees, registrants and CDE sponsors.
- Subp. 5. Excluded courses. The repealed language is replaced by the language in part 3100.4200, subpart 5. This change is needed in order to be consistent with other language changes. It is reasonable in that it should serve to reduce confusion on the part of licensees, registrants and CDE sponsors.
- Subp. 6. Written denial. The repealed language is replaced by the language in subpart 4. This change is needed in order to be consistent with other language changes. It is reasonable because it should serve to reduce confusion on the part of licensees, registrants and CDE sponsors.

3100.4400 ESTABLISHING CREDIT HOURS FOR CDE COURSES AND ACTIVITIES

The minor changes in the first paragraph are nonsubstantive and are for the purposes of clarification only. The changes are needed in order to make the rule clearer and more easily understood, and they are reasonable because they are grammatically correct.

- A. The minor changes in this item are nonsubstantive and are for clarification purposes only: the same number of CDE credits will still be granted for multi-day dental conventions. The provision is needed in order to clarify and recognize that dental conventions typically last for more than one day, and it is reasonable because it is consistent with the Board's practice over several years.
- B. Changes made in this item are needed to clarify what is meant by "scientific or educational meetings or courses" by listing the types of meetings or courses for which CDE credit may be granted; CDE credits for such meetings or courses remain the same at an hour-for-hour basis. This provision is reasonable because the types of courses listed are those typically presented by CDE sponsors, and because it will reduce confusion on the part of regulated individuals. The types of continuing dental education are now defined in Minnesota Rules 3100.0100.
- C. Wording changes in this item are nonsubstantive and are needed for clarification purposes only. CDE credit will still be granted for successful completion of self-instructional courses with the number of credits being determined by the Board. The provision is reasonable because it will reduce confusion on the part of regulated individuals who must comply with the rules of the Board.
- **D.** Wording changes in this item are nonsubstantive and are needed for clarification purposes only: CDE credit will remain at one hour for every hour of presentation. The provision is reasonable because it will reduce confusion on the part of regulated individuals.
- E. This item provides that authoring or coauthoring a published scientific article will be awarded five CDE credits per article. The provision replaces the language which was contained in 3100.4500, subpart 2, item E. This provision is needed because previously there was no specific number of CDE credits that would be granted for publication, nor was there language that specified that the article should be "scientific." The previous language stated only that credit would be granted on an individual basis. The proposed change is needed because it brings specificity and uniformity to granting of this type of CDE credit. The Board determined that five credits was reasonable because this represents an increase from the number it had granted in the past. Considering the amount of time and effort that publishing a scientific article typically requires, the Board recognized that it could not reasonably grant such a large number of credits for one activity. This approach also is reasonable because it recognizes that the purpose of CDE credit is to further one's dental education in order to remain current with scientific and practical advances in the field. Those who publish scientific articles are still required to further their dental education in fields other than their own area of expertise.
- F. This new language provides that completion of postgraduate courses will be awarded ten credits per credit hour; previously, the Board had no provision for awarding CDE

credit for postgraduate coursework. This change was needed because postgraduate work in dentistry obviously furthers one's dental education. Because a much greater number of hours is required to actually complete postgraduate courses, CDE credit could not be granted on the typical hour-for-hour basis. Therefore, the provision to grant ten CDE credits for every academic credit hour of postgraduate coursework is reasonable, given the intensity of postgraduate work.

G. This item provides that completion of a jurisprudence examination will be awarded two credits per five-year cycle. This provision is needed because previously the Board did not award credits for completion of a jurisprudence examination, and doing so is justifiable on the grounds that it is imperative for licensees and registrants to have current knowledge and information about the legal requirements of practicing in Minnesota. The provision is reasonable because for several years, the Board has required the jurisprudence examination for some licensees and registrants who receive disciplinary or corrective action as part of the complaint resolution process. Awarding CDE credit for successfully completing the Board's jurisprudence examination would serve as an incentive for regulated individuals to test their knowledge about the dental practice act, perhaps preventing complaints from being filed for unlawful practice.

The Board believes that two credits would be appropriate, and that awarding credit for successful completion of the test should be made only once during any five-year cycle. This provision is needed because allowing credit only one time in each five-year cycle reflects the Board's judgment that the statutes and rules do not change often enough to warrant more frequent crediting. The first five-year cycle is excluded because the licensee or registrant will have been tested on jurisprudence during the initial licensure application process.

3100.4500 CREDIT HOURS FOR EXAMINATION AND ADVANCED EDUCATION PROGRAMS.

- **Subpart 1.** The repealed language in subpart 1 is replaced by the more specific language now contained in part 3100.4200, subpart 5. This provision is needed and reasonable in order to eliminate confusion.
- Subp. 2. Other forms of CDE. This provision is needed in order to provide specificity to the other forms of continuing dental education for which a regulated individual may be granted credit. It is reasonable because it is consistent with types of CDE for which the Board has granted credits in the past.
- A. Changing the words "successfully passing" to "successful completion" is nonsubstantive and is for clarification purposes only. The phrase "except for any specific topic area required by statute or rule" is added to clarify that successful completion of the examination will not satisfy statutorily required continuing education, such as that for infection control. This change is needed in order to ensure that all licensees and registrants meet such additional, specific CDE requirements. This provision is reasonable because it is consistent with existing statutory requirements.
- B. The language change from "successfully passing" to "successful completion" is done for the same purpose in this item as in item A; the need and reasonableness parallel those found in item A. The same phrase, "except for any specific area required by statute or rule" is

added to this item as was added to item A above. The need and reasonableness parallel those described in item A.

- C. The wording change from "successfully passing" to "successful completion" is done for the same purpose in this item as in items A and B; the need and reasonableness are the same as those described in item A. The same phrase, "except for any specific topic area required by statute or rule" is added to this item as was added to items A and B above. The need and reasonableness parallel those described in item A.
- **D.** The same phrase, "except for any specific topic area required by statute or rule," is added to this item as was added to items A, B and C above. The need and reasonableness parallel those described in item A.
- E. The new language gives registered dental assistants CDE credit comparable to that given to dentists in item A and to dental hygienists in item C. This provision is needed in order for the Board to fairly and uniformly grant types of CDE credits for all three professional groups that it regulates, with registered dental assistants being one of those groups. The provision is reasonable because it is consistent with the approach used for dentists and dental hygienists.
- F. The new language gives registered dental assistants CDE credits comparable to that given to dentists in item B and to dental hygienists in item D. This item is needed in order for the Board to fairly and consistently grant types of CDE credits for all three types of dental professionals that it regulates, with registered dental assistants being one of those groups. This provision is reasonable because it is consistent with the approach used with dentists and dental hygienists.

3100.4600 TIME LIMITS FOR NOTICE OF ATTENDANCE.

The repealed language is no longer necessary because this subject is addressed in part 3100.4300, subpart 2a.

STATUTORY REQUIREMENTS

Small Business Considerations

Minnesota Statutes section 14.115, subdivision 2 requires that, when an agency proposes a new or amended rule which may affect small businesses, the agency shall consider methods for reducing the impact of the rule on small businesses and document in its statement of need and reasonableness how it has considered these methods and the results. Subdivision 3 requires the agency to incorporate into the proposed rule any of the methods found to be feasible, unless doing so would be contrary to the statutory objectives of the proposed rule. Finally, subdivision 4 requires an agency to provide an opportunity for small businesses to participate in the rulemaking process, utilizing one or more of the methods specified in subdivision 4.

It is the Board's position that, pursuant to the exemption set forth in subdivision 7(2), the requirements of section 14.115 do not apply to these proposed rules insofar as they do not affect small businesses directly. Any effect these rules may have on dental businesses would be, at most, indirect. While it could be argued that the Board regulates dental businesses insofar as Minnesota

Statutes section 150A.11 makes it unlawful to practice dentistry under the name of a corporation or company, the fact remains that the Board issues licenses to individuals, not to businesses. The licenses issued to individuals by the Board are intended to ensure that dental services are provided in a safe and competent manner; the licenses do not govern the business aspects of dental practices.

To the extent the proposed rules may affect small businesses directly, they are exempt from the requirements of section 14.115 because the businesses affected are "service businesses regulated by government bodies, for standards and costs, such as ... providers of medical care," pursuant to subdivision 7(3). First, dental offices are service businesses insofar as the employees of the office are providing dental treatment to the public. Second, these dental offices and the individuals working in the offices are regulated by government bodies, such as the Board and the Minnesota Department of Human Services (DHS). Third, the services provided in a dental office are regulated by those government bodies for standards and costs, the Board regulates them for standards, and DHS regulates them for costs. Finally, dentists, dental hygienists and registered dental assistants clearly are providers of medical care, under the definition of the practice of dentistry found in Minnesota Statutes, section 150A.05.

While the question may be raised as to whether the same government body must regulate the service business for both standards and costs for the exemption to apply, the Board believes this could not be what the legislature intended, for two reasons: First, subdivision 7(3) specifically refers to regulation by "governmental bodies," which suggests regulation by more than one government body. Second, and even more significant, some of the examples of exempt service businesses listed in subdivision 7(3) would not, in fact, qualify for the exemption if the same government body had to regulate the business for both standards and costs. For example, nursing homes and hospitals are regulated by the Minnesota Department of Health for standards, but by DHS for costs. If the legislature had intended to exempt only those service businesses regulated by a single government body for both standards and costs, then it could not have included nursing homes and hospitals in its list of exemptions.

If it is determined that section 14.115 does apply to these rules, then it is the Board's position, after having considered the methods for reducing the impact of the rules on small businesses set forth in subdivision 2, that applying any of those methods would not be feasible because it would have an adverse impact on public health, safety or welfare, and would be contrary to the statutory objectives which are the basis for the proposed rulemaking -- namely, to establish minimal standards for the training and education of dentists, dental hygienists and registered dental assistants, and to enforce those standards for the protection of the public.

Pursuant to subdivision 2, here are the results of the Board's consideration of the five methods for reducing the impact of the rule on small businesses:

- (a) The Board has determined that it would not be feasible to establish less stringent compliance or reporting requirements for small businesses, because doing so would mean inconsistency in the quality of CDE courses
- (b) The Board has determined that it would not be feasible to establish less stringent schedules or deadlines for compliance or reporting requirements for small businesses because the proposed requirements, such as completing an application form, are not cumbersome.

- (c) The Board has determined that it would not be feasible to consolidate or simplify compliance or reporting requirements because there is nothing to consolidate and the requirements are simple and straighforward.
- (d) The Board has determined that it would not be feasible to establish performance standards for small businesses to replace design or operational standards required in the rules, because these proposed rules contain no design or operational standards.
- (e) The Board has determined that it would not be feasible to exempt small businesses from any or all requirements of the proposed rules because if small CDE sponsors were exempt from the proposed rules, they would be allowed to produce coursework of lesser quality. Regulated individuals, therefore, would not be assured that all Board-approved CDE sponsors were meeting the same quality standards.

Pursuant to subdivision 4, the Board has provided an opportunity for small businesses to participate in the rulemaking process in the following ways:

- (1) by publishing notices of solicitation of outside information or opinions in the State Register on April 5, 1993; May 8, 1995, and August 21, 1995.
- (2) by publishing notices of the proposed rulemaking in the Board's newsletters dated June 1993, February 1994, August 1994 and October 1995 and mailing these newsletters to all licensees and registrants of the Board;
- (3) by conducting public meetings on these proposed rules on April 17, July 16, and December 3, 1993, and January 7, 1994 for which public notices were mailed to all persons who have registered their names with the Board for rulemaking purposes;
- (4) by mailing the proposed rules and the notices of intent to adopt the proposed rules to all persons who have registered their names with the Board for rulemaking purposes.

Expenditure of Public Money by Local Public Bodies

Minnesota Statutes section 14.11, subdivision 1 requires that if the adoption of a rule by an agency will require the expenditure of public money by local bodies in an amount estimated to exceed \$100,000, the agency's notice of intent to adopt the rule shall be accompanied by a written statement giving the agency's reasonable estimate of the total cost to all local public bodies in the state. It is the Board's position that these proposed rules will not require the expenditure of public money by local public bodies.

Impact on Agricultural Lands

Minnesota Statutes section 14.11, subdivision 2 requires that if an agency's proposed rule may have a direct and substantial adverse impact on agricultural land in the state, the agency shall comply with the requirements of sections 17.80 to 17.84. It is the Board's position that the proposed rules will not have a direct and substantial adverse impact on agricultural land in the state, and therefore the Board need not comply with sections 17.80 to 17.84.

Comments and Recommendations of Commissioner of Finance/Fiscal and Policy Concerns

Pursuant to Minnesota Statutes 14.235 and 16A.1285, the Board is required to include in its Statement of Need and Reasonableness the comments and recommendations of the Commissioner of Finance relating to any proposed fee adjustments. The Commissioner of Finance has approved the fees proposed by these rules, as reflected in Addendum A which is attached and incorporated in this Statement of Need and Reasonableness.

Board's Efforts to Provide Additional Notification

The Board's efforts to provide additional notification of its rulemaking are explained above under "Rule Development Process" and "Small Business Considerations."

Submission of Statement of Need and Reasonableness to Legislative Commission to Review Administrative Rules

Pursuant to Minnesota Statutes, section 14.23, the Board has submitted a copy of the Statement of Need and Reasonableness relating to these proposed rules to the Legislative Commission to Review Administrative Rules.

Conclusion

For the reasons stated above, the Board of Dentistry submits that these proposed rules are both needed and reasonable.

Dated: 12-21-95

PATRICIA H. GLASRUD Executive Director

STATE OF MINNESOTA

Department:

of Finance

Office Memorandum

Date:

December 5, 1995

To:

Patricia Glasrud, Executive Director

MN Board of Dentistry

From:

Michelle Harper

Budget Operations

Phone:

296-7838

Subject:

Departmental Earnings Rate Change Response-Continuing Ed. Sponsor Fees

Pursuant to provisions of M.S. 16A.1285, the Department of Finance has reviewed and approved the attached departmental earnings proposal submitted by MN Board of Dentistry on 11/22/95. If you have any questions or concerns, please call me at the above number.

Bruce Reddemann cc Dwight Pederson

FI-00399-02

Department of Finance

Departmental Earnings: Reporting/Approval

Part A: Explanation

emines Title: Double Complete				
Board of Dentistry	Fees	Statutory Authority:	150A.04, subd.5; 214.06, subd.1	Date: 11-22-95
iel Description of Itam:				
The proposed rules increase for those sponsors from \$95.00 ev	the initial application fee ery four years to \$50.00 ann	for continuing dental educatio	n sponsors, and change	s th e annual renewal fee
cominge Classification (check enel: Service/User 2 Special Tax/Assessment	, -	3. <u>x</u> Occupational Lic	onsure	
Submission Purpose (check enel: 1. X Chep. 14 Review and Come 3. Reporting of Agency Initiate				
Y reporting an agency initiated action Y yes, cite partinent statutes:	n (option 3 sheve), does ager	scy have explicit authority to ret	nin and spand receipts	Yes No
Impact of Proposed Change (For rete	e changes included in the bier	nniel budget, reference page nur	nber. For rate change	s not included in the biennial
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•	•			
Departmental Earnings Re	•			
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budget, reference authority to make Departmental Earnings Re	•		•	
	•		· · · · · · · · · · · · · · · · · · ·	

Department of Finance

Departmental Earnings: Reporting/Approval (Cont.)

(\$1,000,000 = 1,000)

Part B: Fiscal Detail

APID:		AID:	Rev. Source Cr	Rev. Source Code(s):		Dedicated <u>k</u> Non-Dedicated Bo		
	F.Y. 1993	F.Y. 1994	F.Y. 1995	F.Y. 1996	F.Y. 1997	F.Y. 1996	F.Y. 1997	1
Ite m		•		As Shown in Biennial Budget	As Shown in Blennisi Budget	As Currently Proposed	As Currently Proposed	
	REVENUES:							
				1,123	1,123	1,123	1,160	
				+ 37	+ 37	+ 37	+ 7	Subse
Total Revenues	869	976	973	1,160	1,160	1,160	1,167	Appri
							+ 3	This
							1,170	7
								7
								7
	EXPENDITURE	≟8:						_
Direct	536	559	625	698	708	698	708	7
Indirect	240	360	526	479	486	479	486	7
Total	776	919	1,151	1,177	1,194	1,177	1,194	
Current Deficit/Excess	9,3	57	(178)	(17)	(34)	(17)	(24)	
Accumulated Excess/Deficit®	121	178	0	(17)	(34)	(17)	(24)	
	·.	Agency Sign	Agency Signature: Patricia & Glassid			Executive Budget Officer: Approval Date: Dian Z ledum		

^{*} F.Y. 1993 beginning accumulated balance to include amount of accumulated excess/deficit (if any) carried forward from F.Y. 1992. As necessary, attach detailed schedule/listing of proposed changes in departmental earnings rates.



Board of Dentistry

EXECUTIVE OFFICE

2700 UNIVERSITY AVENUE WEST • SUITE 70 ST. PAUL, MINNESOTA 55114-1055 (612) 642-0579

MN RELAY SERVICE FOR HEARING IMPAIRED (612) 297-5353 OR (800) 627-3529

November 22, 1995

TO:

Dwight Pederson

Executive Budget Officer

FROM:

Patricia Glasrud

Executive Director

RE:

Proposed Rules

Attached please find a copy of Parts A and B of the Reporting/Approval form. The proposed rules require an increase in the initial application fee for continuing dental education sponsors from \$75.00 to \$100.00. The rules also require a change in the renewal fee for continuing dental education sponsors from \$95.00 every four years to \$50.00 annually.

As shown on Part B, we anticipate that these changes will result in an increase in the board's revenues by approximately \$3,000, beginning in fiscal year 1997.

This increase--even in combination with the recent changes in some of the other fees for this board (referred to in my October 20, 1995 memo to you)—is not expected to significantly over recover the \$1,160,000 approved by the legislature and the Governor.

I would appreciate your prompt attention to this matter so I can include the necessary documentation in the statement of need and reasonableness. Thanks.

The Legislative Commission to Review Administrative Rules

MAR 1 5 1993

STATE OF MINNESOTA

COUNTY OF RAMSEY

BEFORE THE MINNESOTA

BOARD OF DENTISTRY

In the Matter of Proposed Amendment ot the Board of Dentistry Rules, Chapter 3100. STATEMENT OF NEED AND REASONABLENESS

Pursuant to Minnesota Statute 14.23 (1992), the Minnesota Board of Dentistry (hereinafter "Board"), hereby affirmatively presents the need for and facts establishing the reasonableness of the proposed amendments to Minnesota Rules, Chapter 3100 relating to definitions and continuing dental education.

Minnesota Statutes, section 214.12, mandates that the Boards of Chiropractic Examiners, Dentistry, Medical Practice, Nursing, and Podiatric Medicine require by rule that their licensees "obtain instruction or continuing education in the subject of infection control including bloodborne diseases."

Working together, and seeking the advice of numerous outside individuals and groups, the boards affected by the legislation reached consensus on three vital components of the mandate: 1) a definition of "bloodborne diseases"; a definition of "infection control"; and the "per year equivalent" of the number of continuing education hours in infection control would be the same for all boards, irrespective of differences in lengths of continuing education and/or renewal cycles. A list of participants in the process of developing the rules is appended to this statement.

In order to adopt the proposed amendments, the Board must demonstrate that it has complied with all the procedural and substantive requirements of rulemaking. Those requirements are as follows: 1) there is statuatory authority to adopt a rule; 2) the rules are needed; 3) the rules are reasonable; 4) all necessary procedural steps have been taken; and 5) any additional requirements imposed by law have been satisfied. This statement demonstrates that the Board has met these requirements.

I. STATUTORY AUTHORITY

The statutory authority of the Board to adopt these rules is as follows:

- 1. Minnesota Statutes 150A.04, subdivision 5 (1992), authorizes the Board to promulgate rules necessary to carry out the provisions and purposes of the Minnesota Dental Practices Act, Minnesota Statutes 150A.
- 2. Minnesota Statutes 214.12, subdivision 2 (1992), authorizes the Board to require by rule that licensees obtain instruction or continuing education in the subject of infection control including bloodborne diseases.
- 3. Minnesota Statutes 214.24, subdivision 4 (1992), authorizes the board to adopt rules setting standards for infection control procedures and requires the board to engage in joint rulemaking for this purpose.

II. COMPLIANCE WITH PROCEDURAL RULEMAKING REQUIREMENTS

A. Requirements in General.

The Board, at its meeting on September 26, 1992 determined that the above-captioned rules are noncontroversial and

has elected to follow the procedures set forth in Minnesota Statutes 14.05 to 14.12 and 14.22 to 14.28 (1992), which provide for the adoption of noncontroversial rules without the holding of a public hearing.

Pursuant to Minnesota Statutes 14.23 (1992), the Board prepared this Statement of Need and Reasonableness and made it available to the public.

The Board will publish in the <u>State Register</u> the proposed rules and the Notice of Intent to Adopt Rules Without a Public Hearing. The Board will also mail copies of the notice to persons registered with the Board pursuant to Minnesota Statutes 14.22 (1992), as well as to others whom the Board believes will have an interest in the rules. The notice will comply with the requirements of Minnesota Statutes 14.22 (1992) and Minnesota Rules 2010.0300 E (1992).

These rules will become effective five working days after publication of a notice of adoption in the <u>State Register</u> pursuant to Minnesota Statutes 14.27 (1992).

B. Notice on Intent To Solicit Information From Non-Agency Sources.

Minnesota Statutes 14.10 (1992) requires an agency, which seeks information or opinions from sources outside the agency in preparing to propose the amendment of rules, to publish a notice of its action in the <u>State Register</u> and afford all interested persons an opportunity to submit data or comments on the subject of concern in writing or orally. In the <u>State Register</u> issue of September 28, 1992, the Board published a notice entitled "Notice of Intent to

Solicit Outside Opinion Regarding Proposed Amendments for Continuing Education Requirements".

After publication of the notice, the affected boards met and sought advice from numerous outside individuals and groups. As a result of that process, the affected boards drafted a specific proposal amending exising rules to each affected board. The affected boards developed a final proposal which is addressed in this Statement of Need Reasonableness.

III. COMPLIANCE WITH OTHER RULEMAKING REQUIRMENTS

A. <u>Miscellaneous Requirements</u>

These rules do not incorporate by reference text from any other law, rule or available text or book. See Minnesota Statutes 14.07, subdivision 4 (1992). The adoption of these rules will not require expenditure of public money greater than \$100,000 by local public bodies in either of the two years following promulgation, nor do the rules have any impact on agricultural land. See Minnesota Statutes 14.11 (1992).

B. Small Business Considerations

It is the position of the Board that Minnesota Statutes 14.115 (1992), relating to small business considerations in rulemaking does not apply to the rules it promulgates. Minnesota Statutes 14.115, subdivision 7(2) (1992), states that section 14.115 does not apply to "agency rules that do not affect small businesses directly." The Board's authority relates only to dentists and not to the dental businesses they operate. While somone cannot operate a dental business without being licensed as a dentist by the board, the license runs primarily to the technical ability to provide

dental services for the purposes of public protection and not to the business aspects. This is graphically illustrated in recent dealings with nondentists who are involved with dental franchise offices. The Board has not taken the position prohibiting nondentist involvement in operating a dental business. Instead, the Board's position is that nondentists may not interfere with or have any control over the dentists when it comes to any aspect of the practice which could affect the providing of professional services to patients. Thus, the Board regulates the provision of dental services and not the dental business per se. As such, it is exempt from Minnesota Statutes 14.115, subdivision 7(2) (1992).

The Board is also exempt from the provisions of Minnesota Statutes, subdivision 7(3) (1992) which does not apply to "service businesses regulated by government bodies, for standards and costs, such as . . . providers of medical care." Dentists provide medical care and are regulated for standards and costs. The Board regulates dentists for standards and the Minnesota Department of Human Services regulates them for costs.

The question might be raised as to whether the same government body has to regulate the service business for standards and costs in order for the exemption to apply. The Board's position is that the questions should be answered in negative. First, the provision specifically refers to regulation by "government bodies." Second, and most significantly, some of the examples listed in subdivision 7(3) of service businesses exempt from the conditions of section 14.115 actually would not qualify for the exemption if the same government body had to regulate for

standards and costs. For example, nursing homes and hospitals are regulated by different government bodies for standards and costs. The Minnesota Department of Health regulates them for standards and the Minnesota Department of Human Services regulates them for costs. If the legislature had intended to exempt from the scope of section 14.115 only those rules addressing service businesses regulated by one government body for standards and costs, then it could have included nursing homes and hospitals in its list of exemptions.

Based on the foregoing, it is clear that section 14.115 is not intended to apply to rules promulgated by the Board.

IV. NEED FOR AND REASONABLENESS OF THE PROPOSED RULES

In order to amend administrative rules, an agency must demonstrate that the proposed rules are needed and reasonable. The proposed changes more clearly delineate the provisions of the Minnesota Dental Practices Act and have a rational basis in law and dentistry as is detailed below.

Part 3100.0100 DEFINITIONS.

Bloodborne diseases. This is a new subpart Subpart 5a. The definition is needed defines "bloodborne diseases". because the term is used in Minnesota Statutes 214.12, subdivision 2 (1992) but is not defined. The definition is also needed because term is sufficiently vague and subject to multiple interpretation that, left undefined, licensees, registrants, vendors of continuing education programs, and the boards would have difficulty determining whether a given program in infection control fulfills the statutory requirement. The definition is reasonable

because it is the product of consensus reached by all affected boards after consultation with the Minnesota Department of Health, professional associations, representatives of knowledgeable about the state of the art in infection control procedures , particularly as they relate to transmission of human immunodeficiency virus (HIV) and hepatitis B virus (HBV). Eileen Hanlon, the Rules Writer employed by the affected boards for the purpose of carrying out the infection control provisions of Chapter 559, met individually with representatives of the interested parties and other individuals on the attached list over a period of about six months, performing as liaison between the board and interested parties as the definitions and number of continuing Suggestions from various education hours evolved. interested parties were helpful to the affected boards, particularly with respect to avoiding definitions that would appear to narrow or restrict the perceived intention of the legislation.

It is reasonable to employ a definition that is uniformly applicable to all affected boards and persons regulated by those boards to avoid confusion.

In developing the definition of "bloodborne diseases", the following dictionaries were consulted: Webster's Third New International Dictionary, 1981 (Merriam-Webster Unabridged Dictionary of the English Language); New Webster's Expanded Dictionary, 1992 Edition; and the American Heritage Dictionary of the English Language, 1980 Edition.

It is reasonable to include in the definition of "bloodborne diseases" the means of spreading the diseases

(inoculation of or injection of blood or exposure to blood contained in body fluids, tissues, or organs) because "bloodborne" means "blood transported", and "transported" means "carried from one place to another". Stated another way, the definition would be incomplete without addressing the method of transmitting the diseases from one person to another.

It is reasonable to incldue "exposure to blood contained in body fluids, tissues, or organs" in the definition of "bloodborne diseases" as a means of spreading becuase it has been demonstrated that blood in fluid form (that is, not dried), whether pure blood or blood mixed with other body fluids, is capable of transmitting agents of infection from one person to another. Living tissues and organs can be described as being fluid or semi-fluid in nature.

It is reasonable to include the agents of infection in the definition of "bloodborne diseases" because both are life-threatening agents of infection, because it has been established that they are transmitted by blood, and because Laws of Minnesota, 1992 Chapter 559, was specifically designed to reduce the likelihood of regulated persons and their patients becoming infected with these viruses.

Subpart 12b. Infection Control. This is a new subpart that defines "infection control". The definition is needed because the term is used in Minnesota Statutes 214.12, subdivision (1992).Minnesota Statutes 214.19 , subdivision 4 (1992) Minnesota 214.20 Statutes (1992)and Minnesota Statutes 214.24 (1992) but is not defined. The definition is also needed because the term is sufficiently vague and subject to multiple interpretation that, left undefined, licensees, registrants, vendors of continuing education programs, and the boards would have difficulty determining whether a given program in infection control fulfills the statutory requirement. The definition is reasonable because it is the product of consensus reached by all affected boards after consultation with the Minnesota Department of Health, representatives of professional associations, and knowledgeable about the state of the art in infection control procedures, particularly as they relate to transmission of human immunodeficiency virus (HIV) and hepatitis B virus (HBV). Hanlon, the Rules Writed employed by the affected boards for the purpose of carrying out the infection control provisions of Chapter 559, met individually with representatives of the interested parties and other indivuduals on the attached list over a period of about six months, performing as liaison between the board and interested parties as the definitions and number of continuing education hours evolved. Suggestions from various interested parties were helpful to the affected boards, particularly with respect to avoiding definitions that would appear to narrow or restrict the perceived intention of the legislation.

It is reasonable to employ a definition that is uniformly applicable to all affected boards and persons regulated by those boards to avoid confusion.

In developing the definition of "infection control", the following dictionaries were consulted: Webster's Third New International Dictionary, 1981 (Merriam-Webster Unabridged Dictionary of the English Language); New Webster's Expanded Dictionary, 1992 Edition; and the American Heritage Dictionary of the English Language, 1980 Edition.

is reasonable for the definition of "infection It control" to include the words "programs, procedures, and methods" to reduce transmission of agents of infection because inclusion of any one of the terms alone may appear to narrow the scope infection control to a degree not anticipated or intended by the statute. Chapter 559 employs both the word "procedures" and the word "techniques". References to these terms occur in sections 214.19, subdivision 4; 214.20; and 214.24, subdivisions 1, 2, 3, and 4. Dictionary definitions of "technique" include "method of manipulation", and "technical method of accomplishing a desired It is, therefore, reasonable to use the term "methods" in aim". the definition, because of the term being somewhat broader than, but inclusive of, the term "technique".

Dictionary definitions of the term "program" include "plan of procedure", "agenda, draft, plan, outline"; "a schedule or system under which action may be taken toward a desired goal"; and "an organized list of procedures". The term is therefore, broader in application than the term "procedure" and clearly implies a set

of directions established prior to putting procedures into practice. It is, therefore, reasonable to use the term "programs" to ensure that the intention of the legislation is carried out by rule to the greatest degree possible.

Use of the term "procedures" is reasonable in the definition because the term is used in Chapter 559. Its dictionary definitions include "a particular course of action"; "a particular way of going about or accomploshing something"; and "a way of performing or effecting something".

It is reasonable to include the purpose of infection control in its definition because there would be no need to employ the term "infection control" if the term itself had no desired outcome. The stated purpose (to reduce the transmission of agents of infection for the purpose of preventing or decreasing the incidence of infectious diseases) is also reasonable because the intention of sections 214.12 and 214.17 to 214.25 is to promote the health and wellbeing of patients and regulated persons. It is also reasonable to state the purpose (as well as the methods) of infection control so that regulated persons, continuing education program vendors, and the affected boards will all be aware of the reason why infection control is mandated by the statutes.

Part 3100.4100 CONTINUING DENTAL EDUCATION

Subpart 1. Evidence of Attendance. This subpart has been reworded for clarity only.

Subpart 2. Required credit hours. The language referencing required credit hours has been reworded for clarity only. The language referencing clinical subjects and nonclinical

subjects have been reworded to make it clear to licensees and registrants what types of continuing education courses are considered "clinical" and what types of continuing education courses are considered "non-clinical". The language referencing subjects not eligible for credit has been reworded for clarity only.

Subpart 2a. Required credit hours on infection control. is a new subpart that requires licensees and registrants to complete a minimum of five clinical hours of continuing dental education in the subject of infection control during each five year This subpart is needed to implement the requirement in CDE cycle. section 214.12, subdivision 2. The requirement of five hours during each five year CDE cycle provides a "per year equivalent" of The requirement is reasonable because it provides same per year equivalent as agreed upon for regulated persons of all the affected boards. At the present time courses on infection control are readily available to licensees and registrants. expected that adoption of a rule requiring continuing education infection control will prompt sponsors to offer even more courses infection control. Five hours of continuing education infection control are, therefore, reasonable because licensees and registrants are unlikely to find the requirement unduly burdensome.

Subpart 2a provides a starting date of July 1, 1993 and for prorating the number of hours of continuing education in infection control for CDE cycles with less than five years remaining. A starting date is needed so that licensees and registrants will have a clear understanding of the time period for

completing the infection control requirements. The prorating is necessary to avoid placing an unnecessary burden on licensees and registrants with less than five years remaining on a CDE cycle.

A starting date of July 1, 1993 is reasonable because it is the beginning date for CDE cycles.

Subpart 3. Five-year cycles. This subpart has been reworded for clarity to ensure that licensees and registrants understand how five-year CDE cycles are established, including the fact that after initial licensure or registration CDE cycles remain the same regardless of the licensee or registrants license status.

Subpart 4. Exemptions. This subpart has been reworded to clarify to licensees and registrants that by filing an affidavit for exemption they are exempt from having to report CDE credits during the five-year cycles that Minnesota has established, not from earning CDE credits.

Subpart 5. Removal of exemption. This subpart has been reworded to clarify to licensees and registrants what must be done to have the exemption removed to resume practice within the state or for any other reason. The subpart has also been changed to require a licensee or registrant upon requesting removal of the exemption to submit evidence of having completed CDE credit hours equivalent to what the total credit hours would have been if the licensee or registrant had not claimed the exemption. This requirement is reasonable because had the licensee or registrant not claimed the exemption, they would have been required to earn

the CDE credits. The requirement in this subpart that any CDE credits taken to have the exemption removed shall not count towards meeting the requirement of the current five year cycle is reasonable because credits taken to have the exemption removed are for that purpose only.

It is the Board's judgement that all of the proposed amendments are both needed and reasonable and in the best interest of the dental profession and the public.

Dated: 1993

STATE OF MINNESOTA BOARD QF DENTISTRY

Richard W. Diercks Executive Director Anderson, Robert - affiliation not specified

Barrett, Michelle - Minnesota Podiatric Medical Association

Beck, Diane - Association of Practitioners in Infection Control

Bennett, Mary Ellen - Association of Practitioners in Infection Control

Bergum, Bill - Care Providers of Minnesota: Long-Term

Bonnicksen, Gloria - Association of Practitioners in Infection Control

Cunningham, Marilyn - Minnesota Nurses Association

Danila, Richard - Minnesota Department of Health

Dickson, Gail - Minnesota Aids Project

Harder, Bob - Minnesota Dental Association

Hayes, David - Mayo Clinic

Hedberg, Craig - Minnesota Department of Health

Horeish, Ag - Association of Practitioners in Infection Control

Jurcich, Walter - Minnesota Podiatric Medical Association

Kaba, Gail - Seniors Long-term Health Care

Kroweck, Kris - Association of Practitioners in Infection Control

Lamendola, Frank - Journeywell

Leitheiser, Aggie - Minnesota Department of Health

Loveland, Jim - Minnesota Department of Health

Lundquist, Rhonda - Minnesota Aids Project

McDonald, Cynthia - Ombudsman

McKenzie, Sandy - Board of Nursing

Melrose, Holly - St. Paul-Ramsey Medical Center

Mitchell, Peter - Riverside Medical Center

Moen, Mike - Minnesota Department of Health

Nelson, Annette - Minnesota Dental Hygienists Association

Nemmers, Katie - Minnesota Chiropractic Association

O'Brien, Terry - Minnesota Department of Health

Osterholm, Mike - Minnesota Department of Health

Ouren, Dede - Association of Practitioners in Infection Control

Ouren, Deloris - Riverside Medical Center

Prentnieks, Mary - Minnesota Medical Association

Reier, Dorothy - Minnesota Department of Health

Simonson, Jay - Cardiovascular Consultants

Stout, Susan - Minnesota Nurses Association

Sutherland, Linda - Minnesota Department of Health

Teel, Lorraine - Minnesota Aids Project

Tripple, Mike - Minnesota Department of Health

Van Drunen, Nancy - Association of Practitioners in Infection Control

Von Alman, Debbie - Minnesota Dental Assistants Association

Von Ruder, Karen - affiliation not specified

Winter, Suzanne - Memorial Blood Center of Minneapolis