

# Minnesota Board of Dentistry

## BIENNIAL REPORT\* July 1, 2000 to June 30, 2002

### I. GENERAL INFORMATION

#### A. Board Mission and Major Functions

**Mission:** "To ensure that Minnesota citizens receive quality dental care from competent dental health care professionals"

#### ***Major Functions***

##### Licensure and Registration:

- Establish minimum standards for entry to the professions of dentistry, dental hygiene and registered dental assisting
- Provide initial licensure of dentists and dental hygienists and registration of dental assistants who meet the minimum requirements for entry to the profession; applications must include successful completion of the National Dental Board Examination or the National Dental Hygiene Board Examination, successful completion of a clinical examination, and other requirements
- Design the Minnesota Dental Assistant Registration Examination (which is administered by an outside entity; successful completion of this exam is required prior to registration)
- Design and administer the Minnesota Jurisprudence Examination (successful completion of which is required of all applicants prior to licensure/registration)
- Provide annual renewal of licenses and registrations for the approximately 14,000 dental professionals regulated by this Board
- Provide an objective, rule-based, timely process of licensure-by-credentials for dentists and dental hygienists who are licensed in other jurisdictions; similarly, provide a process of curricula and credentials review for dental assistants seeking Minnesota registration
- Provide official affidavits of licensure and verification of licenses and registrations for individuals, institutions, third party payers, and others.
- Establish licensure considerations for international (foreign-trained) applicants seeking dental licensure, and ensure that those individuals who are granted licenses have educations that are equivalent to or greater than graduates of accredited US and Canadian programs.

\*Pursuant to Minnesota Statute 3.197, the cost of preparing this report was approximately \$1,500 (staff time).

#### Complaint Resolution:

- Respond to the public's questions about how to file complaints against dental professionals regulated by the Board; provide Internet information to the public about the complaint resolution process
- Maintain a computer tracking record of 100% of all complaints filed with the Board
- Investigate 100% of all jurisdictional complaints filed with the Board against dental professionals regulated by the Board. Investigations are conducted by Board staff, contracted consultants, and by investigators from the Attorney General's Office.

Investigative methods include:

1. Letter of Inquiry to the licensee/registrant;
2. Informational Conference with the licensee/registrant and one of the Board's two Complaint Committees; or
3. Disciplinary Conference with the licensee/registrant (and their legal counsel); legal counsel from the Attorney General's Office (representing the Complaint Committee), and one of the two Complaint Committees of the Board.

Dispute resolution methods to arrive at equitable settlements are used in order to avoid prolonged, costly litigation--without compromising public protection from unsafe dental practitioners. Mediation and contested case hearings with the Office of Administrative Hearings are occasionally used to resolve disputes.

- Take corrective or disciplinary action when warranted, pursuant to statute and rule.
- Disseminate public information to the public, dental professionals and national databases accurately and in a timely manner. The full texts of recent Stipulations and Orders are now available on demand on the Board's web site.
- The Board's two Complaint Committees meet jointly throughout the year to calibrate for consistency across the committees.

#### Tracking Compliance with Corrective Actions and Disciplinary Orders:

- All licensees/registrants currently under an Agreement for Corrective Action or a Stipulation and Order are tracked regarding compliance. Non-compliance is reported to the appropriate Complaint Committee, which could result in further disciplinary action.
- General reports are generated and disseminated at public Board meetings regarding Complaint Committee meetings and activities (without disclosure of confidential or private data).

#### Continuing Dental Education:

- Establish continuing education requirements as a measure of professional competence.
- Record continuing dental education credits earned by all Minnesota licensed dentists, dental hygienists and registered dental assistants;
- Provide computer-generated CDE transcripts annually to all Minnesota licensed dentists, dental hygienists and registered dental assistants;
- Review and approve continuing dental education sponsor (pre-approved instructional programs) applications;
- Review and renew continuing dental education sponsor applications every four years for those who meet Board rule requirements.



Professional Firms:

- Register dental professional firms upon initial application and annually renew those registrations (about 837 per year).

Dissemination of Public Information:

- Maintain a Board web site to provide information on such topics as (1) how to file a complaint; (2) names of dentists, dental hygienists and registered dental assistants who have had disciplinary actions taken against their license/registration; (3) current Board-approved continuing dental education sponsors; (4) statutes and rules relating to dental practice in Minnesota; (5) the Health Professional Services Program (HPSP), etc.
- Maintain official records and minutes of public Board and committee meetings; provide copies of public data upon request.
- Mail meeting notices and rulemaking notices upon request
- Publish and distribute a quarterly Board newsletter

Legislation and Rulemaking:

- Periodically review and update statutes and rules relating to dental practice in Minnesota
- Respond in a timely manner either to support, remain neutral or oppose pending legislation initiated by entities other than the Board
- Act as an objective resource to the legislature with regard to public protection through regulation of the dental professions.

**B. Major Activities During the 2000-2002 Biennium**

Major activities engaged in by the Board of Dentistry are have included:

- The Board's "Continuing Education/Professional Development Task Force" continued to meet several times a year. The Board has been working to make significant, positive changes in its rules related to continuing education to shift the responsibility *for keeping track* of CDE activities to each individual dental professional. The Minnesota Board of Dentistry was the first state to mandate continuing dental education credits in order to renew licensure or registration, and we now recognize that the CDE tracking method is very outdated. The Board's proposals for change are consistent with other states, i.e. allowing individuals to report their CDE activities on the annual license/registration renewal form, and use of a "random audit" system.
- The Board delegated the responsibility to review international dental applications to the Credentials Committee. The Committee has been reviewing applications on a case by case basis while it has been gaining the experience to establish licensure guidelines. Formal rules will be proposed after the Committee and the Board have developed a process that can be standardized for all applicants.

- The legislature passed a bill relating to mandatory reporting of impaired dental professionals. The legislation requires licensees and registrants to report fellow dental professionals who are believed to have a mental, physical, or chemical dependency problem to the Health Professionals Services Program (which is confidential), or to the Board. Mandatory reporting will help to secure assistance for dental practitioners in need of care, while protecting the public from those who may be unsafe to practice.
- The Board has implemented many of the recommendations from the 2000 strategic plan, a document which provides the framework for providing improved services to the public and to licensees.
- A Board web site is being maintained by Board staff, providing public information in a timely manner.
- The Board officially supported proposed legislation during the 2000-2002 Legislative sessions that would have changed the credential of "registration" to "licensure" for dental assistants. The proposed legislation did not pass, but will be supported when it is reintroduced.
- The Board continued to use two complaint committees to ensure prompt processing of complaints filed against regulated dental professionals. Those two committees held a total of 48 individual meetings during the biennium, as well as 6 joint meetings.
- The Board has had a representative serving on the Department of Human Services' Dental Access Advisory Committee, and has participated in access forums presented by the Minnesota Association of Community Dentists and other groups.
- The Board remodeled its offices to create two additional workstations to accommodate staff growth and meet the need for testing carrels. The Board has restructured personnel to create the position of Licensing Coordinator, and plans to hire a Legal Analyst to better meet the increasingly complex needs of the licensing and disciplinary processes.
- Guest Licensure was enacted by the Legislature allowing dental professionals from bordering states the ability to receive a special license that allows them to work at a public health site in Minnesota to ease the access to care problems. The Red River Valley dental access project was the first group to take advantage of this opportunity.
- The Board's first specialty license was issued in 2002 to an Oral and Maxillofacial Surgeon. The Board has subsequently been involved in extensive discussions and plans regarding how to implement specialty licensure more broadly for qualified individuals.



### **C. Emerging Issues Regarding Regulation of Dental Professionals**

- Ensuring access to dental health services for all Minnesota citizens remains an issue that the Board is exploring ways to address. The Board has been working with many government organizations, community groups and professional associations to address access from a regulatory perspective.
- Exploring more contemporary methods of tracking continuing dental education credits earned by regulated dental professionals is an area to which the Board has devoted a great deal of time during the biennium. The Board has used a "card system" for at least the past 20 years which is proving to be inefficient. Many other states rely on a self-reporting system in conjunction with random auditing. Changing the existing, long-established system will require time, effort, and education of licensees to achieve acceptance of a different tracking method.
- Rulemaking has been initiated to expand the scope of practice (allowable duties) for hygienists and registered dental assistants. The proposed rules would also change the level of supervision required for various procedures.
- Providing easy and timely access to accurate public data is an area that the Board is committed to by upgrading its computer database, software and hardware. The Board plans to make its web site interactive, which would include on-line renewals, license verifications, and disciplinary tracking.

## **II. BOARD MEMBERS, STAFF AND BUDGET**

### **A. Board Composition**

The Board is statutorily required to have five licensed dentists, one licensed dental hygienist, one registered dental assistant and two consumer members, all of whom must be appointed by the Governor. Each member is appointed for a four-year term, and may be re-appointed to serve a second four-year term.

As of June 30, 2002, the following were members of the Board:

| <u>Board Member</u>                          | <u>2002 Officer</u> | <u>Residence</u> | <u>Term Expires</u> |
|--|---------------------|------------------|---------------------|
| Lewis Pierce, D.D.S.                         | Roseville, MN       |                  | 2003                |
| Ronald King, D.D.S.                          |                     | Minneapolis, MN  | 2003                |
| Gerald McCoy, Consumer (appointed Fall 2002) |                     | Eden Prairie, MN | 2003                |
| Ann Stone Thelen, D.D.S.                     | Vice President      | Cold Spring, MN  | 2004                |
| Marguerite Rheinberger, Consumer             | Secretary           | Stillwater, MN   | 2004                |
| Susan Gross, D.D.S.                          | Past President      | Plymouth, MN     | 2005                |
| Nadene Bunge, D.H.                           |                     | Rochester, MN    | 2005                |
| Freeman Rosenblum, D.D.S.                    | President           | Burnsville, MN   | 2006                |
| Linda Boyum, R.D.A.                          |                     | Minnetonka, MN   | 2006                |

## **B. Board Staff**

The Board staff consists of a full-time executive director appointed by the Board, and the following 7 full-time employees hired by the executive director: 1 office manager; 1 administrative assistant; 1 licensing coordinator; 1 complaint unit supervisor; 1 complaint analyst; 1 compliance officer, and 1 continuing dental education program administrator. The director also has hired temporary, student clerical workers to assist at various times throughout the year, as needed. Plans are in place to hire a legal analyst both to reduce reliance on the Attorney General's Office and to coordinate the rulemaking process.

## **C. Receipts, Disbursements and Major Fees Assessed by the Board.**

| <u>Item</u>  | <u>FY 2001</u>     | <u>FY 2002</u>     |
|--|--------------------|--------------------|
| Receipts   | \$1,118,735        | \$1,111,139        |
| Disbursements  | \$1,293,020        | \$1,138,963        |
| <br><u>Fees: Dentists (including Faculty Dentists)</u> | <br><u>FY 2001</u> | <br><u>FY 2002</u> |
| Initial Application                                    | \$140              | \$140              |
| Annual Renewal Application*                            | \$155              | \$155              |
| Credential Application                                 | \$725              | \$725              |
| <br><u>Fees: Dental Hygienists</u>                     |                    |                    |
| Initial Application                                    | \$55               | \$55               |
| Annual Renewal Application*                            | \$50               | \$50               |
| Credential Application                                 | \$175              | \$175              |
| <br><u>Fees: Registered Dental Assistants</u>          |                    |                    |
| Initial Application                                    | \$35               | \$35               |
| Annual Renewal Application*                            | \$35               | \$35               |
| <br><u>Fees: Resident Dentists</u>                     |                    |                    |
| Initial Application                                    | \$55               | \$55               |
| Annual Renewal Application                             | \$59               | \$50               |
| <br><u>Fees: Guest Licensure (DDS, DH, RDA)</u>        |                    |                    |
| Initial Application                                    | N/A                | \$50               |

*\*Those who fail to renew their credential by December 31 are subject to a 50% late fee.*

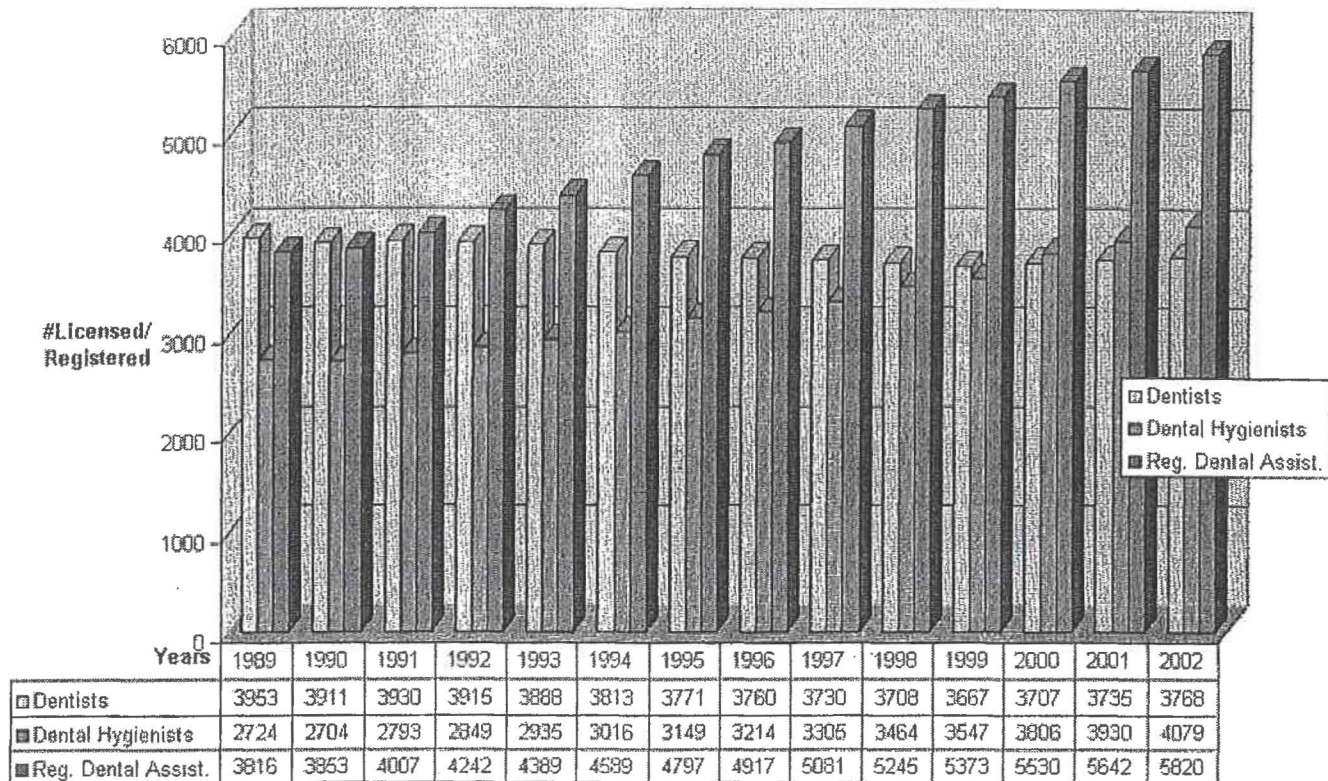
*Note: The annual renewal fees were **reduced** in 1999 to the levels indicated above.*



### III. LICENSING AND REGISTRATION

1989 - 2002

Licensed Dentists and Dental Hygienists and Registered Dental Assistants



Active Dentists  
 Active Hygienists  
 Active Registered Dental Assistants  
 Faculty Dentists  
 Resident Dentists

FY2001

3,375

3,930

5,642

FY2002

3,768

4,079

5,820

## IV. COMPLAINTS AND DISCIPLINE

### A. NEW complaints received during each year of the biennium

|  | <u>FY 01</u> | <u>FY02</u> |
|--|--------------|-------------|
|  | <u>#</u>     | <u>#</u>    |
| 1. Total <u>new</u> complaints received  | 213          | 234         |
| 2. Complaints categorized by occupation  |              |             |
| a) D.D.S.  | 197          | 209         |
| b) D.H.  | 2            | 8           |
| c) R.D.A.  | 11           | 12          |
| d) non-licensed  | 3            | 5           |
| 3. Complaints per 1,000 regulated individuals:<br><i>(Not analyzed according to type of<br/>    dental professional)</i> | 16           | 17          |
| 4. Complaints categorized by type (primary allegation):  | <u>FY 01</u> | <u>FY02</u> |
|  | <u>#</u>     | <u>#</u>    |
| a) competency  | 104          | 101         |
| b) licensure   | 12           | 8           |
| c) prescription or drugs   | 11           | 13          |
| d) sexual misconduct   | 1            | 2           |
| e) auxiliary misuse  | 1            | 12          |
| f) sanitary/safety   | 11           | 11          |
| g) advertising   | 5            | 3           |
| h) unprofessional conduct  | 55           | 67          |
| i) fraud   | 8            | 16          |
| j) failure to cooperate w/Board  | 0            | 0           |
| k) unconscionable fees   | 5            | 0           |
| l) disability  | 0            | 1           |
| TOTALS:  | 213          | 234         |



**B. All Open Complaints on June 30 of each fiscal year of the biennium**

*[Note: The numbers below include complaints that were open previous to the biennium. The numbers cannot be compared to the number of complaints listed under part A, above.]*

|  | <u>FY 01</u> | <u>FY02</u> |
|--|--------------|-------------|
|  | <u>#</u>     | <u>#</u>    |
| 1. All complaints open on 6/30/01, 6/30/02     | 91           | 139         |
| 2. Open less than 3 months                     |              |             |
| 3. Open more than 3 mos., but less than 6 mos. |              |             |
| 4. Open more than 6 mos., but less than 9 mos. |              |             |
| 5. Open for more than 1 year                   |              |             |

**C. Closed Complaints**

*Note: Subparts 2.e. and 2.h., below, are not included in the total number of cases closed. Civil penalties and referrals to HPSP are not considered separate disciplinary actions, but rather, they are included as part of disciplinary board orders.*

|   | <u>FY 01</u> | <u>FY02</u> |
|---|--------------|-------------|
|   | <u>#</u>     | <u>#</u>    |
| 1. Number of complaints closed            | 135          | 100         |
| 2. Disposition by type:                   | --           | --          |
| a) revocation                             | 0            | 0           |
| b) voluntary surrender                    | 2            | 4           |
| c) suspension with or without stay        | 2            | 2           |
| d) restricted/limited/conditional license | 9            | 5           |
| e) <i>civil penalties</i>                 | 5            | 3           |
| f) reprimand                              | 0            | 0           |
| g) agreement for corrective action        | 14           | 14          |
| h) <i>referral to HPSP</i>                | 2            | 6           |
| i) dismissal or closure                   | 110          | 75          |

3. Number of cases closed that were open  
    for more than 1 year: *(information not available as of 12/19/2002)*

## V. TREND DATA AS OF JUNE 30, 2002

For each year of the previous five biennia:

A. Number of persons licensed or registered:

| <b>Fiscal<br/>Year</b> | <b>DDS</b> | <b>DH</b> | <b>RDA</b> |
|------------------------|------------|-----------|------------|
| 2002                   | 3768       | 4079      | 5820       |
| 2001                   | 3735       | 39370     | 5642       |
| 2000                   | 3707       | 3806      | 5530       |
| 1999                   | 3667       | 3547      | 5373       |
| 1998                   | 3708       | 3464      | 5245       |
| 1997                   | 3730       | 3305      | 5081       |
| 1996                   | 3760       | 3214      | 4917       |
| 1995                   | 3771       | 3149      | 4797       |
| 1994                   | 3813       | 3016      | 4589       |
| 1993                   | 3888       | 2935      | 4389       |
| 1992                   | 3915       | 2849      | 4242       |
| 1991                   | 3930       | 2793      | 4007       |

B. Number of complaints received, categorized by type of occupation:

| <b>Fiscal<br/>Year</b> | <b>DDS</b> | <b>DH</b> | <b>RDA</b> | <b>Non-<br/>lic/reg</b> | <b><u>Total</u></b> |
|------------------------|------------|-----------|------------|-------------------------|---------------------|
| 2002                   | 209        | 8         | 12         | 5                       | 234                 |
| 2001                   | 197        | 2         | 11         | 3                       | 213                 |
| 2000                   | 220        | 5         | 13         | 2                       | 240                 |
| 1999                   | 200        | 3         | 3          | 3                       | 209                 |
| 1998                   | 166        | 4         | 3          | 6                       | 179                 |
| 1997                   | 208        | 2         | 3          | 0                       | 213                 |
| 1996                   | 239        | 4         | 6          | 0                       | 249                 |
| 1995                   | 243        | 4         | 1          | 3                       | 251                 |
| 1994                   | 280        | 0         | 1          | 2                       | 283                 |
| 1993                   | 307        | 0         | 0          | 3                       | 310                 |
| 1992                   | 254        | 0         | 0          | 1                       | 255                 |
| 1991                   | 243        | 0         | 11         | 5                       | 259                 |



C. Number of complaints received each year per 1,000 persons of each occupation:

| Fiscal Year | DDS | DH   | RDA  |
|-------------|-----|------|------|
| 2002        | 55  | 1.96 | 2.06 |
| 2001        | 53  | 0.51 | 1.94 |
| 2000        | 60  | 1.30 | 2.35 |
| 1999        | 55  | 0.85 | 0.56 |
| 1998        | 45  | 1.15 | 0.57 |
| 1997        | 56  | 0.61 | 0.59 |
| 1996        | 64  | 1.24 | 1.22 |
| 1995        | 64  | 1.27 | 0.21 |
| 1994        | 73  | 0    | 0.22 |
| 1993        | 79  | 0    | 0    |
| 1992        | 65  | 0    | 0    |
| 1991        | 62  | 0    | 2.75 |

D. Total number of all cases remaining open at the end of each biennium (June 30):

(NOTE: Includes cases opened before and during the biennium)

| Biennium | DDS | DH  | RDA |
|----------|-----|-----|-----|
| 01-02    | 134 | 1   | 4   |
|          |     |     |     |
| 99-00    | 138 | 2   | 0   |
|          |     |     |     |
| 97-98    | 153 | N/A | N/A |
|          |     |     |     |
| 95-96    | 265 | N/A | N/A |
|          |     |     |     |
| 93-94    | 282 | N/A | N/A |
|          |     |     |     |
| 91-92*   | N/A | N/A | N/A |

\*Data were reported differently for the Biennial Reports of these years and, thus, cannot be interpreted as trend data for this Report.