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#### https://mn.gov/boards/dentistry/

## AT A GLANCE

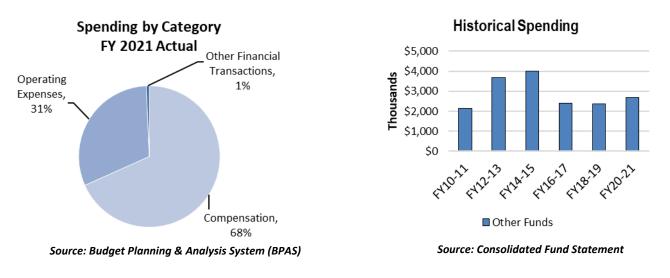
- Regulate over 17,600 dentists, dental therapists, dental hygienists, and dental assistants
- Issue over 700 new licenses each year
- Investigate an average of over 200 complaints each year
- Maintain and monitor requirements for dental professional continuing education
- Conduct professional development audits for compliance
- Maintain a registry of 115 dental laboratories
- Maintain a registry of over 940 dental professional firms
- Recognition for innovation nationally and internationally; including being the first state to license dental therapists and create a licensing path for internationally trained dentists and specialists
- Participate in examining dental and allied dental professional candidates
- Work toward balanced policy to promote health, safety, and access to dental care for Minnesotans
- Serve as the fiscal agent for the Administrative Services Unit (ASU)

#### PURPOSE

The mission of the Minnesota Board of Dentistry is to promote and protect public health and safety and ensure that every licensed dental professional practicing in the state meets the requirements for safe, competent, and ethical practice. We accomplish our mission of public protection through:

- establishing initial licensure standards (education and examinations) and continued competence standards (professional development)
- enforcing regulations and responding to complaints
- providing students and licensees education, resources, and timely information

Beginning in FY 2022, Dentistry has taken over budgetary responsibility as the fiscal agent for the Administrative Services Unit (ASU) from the Board of Executives for Long Terms Services and Supports (BELTSS). FY 2021 ASU expenditures are included in BELTSS' budget information.



BUDGET

The Board is funded by licensure fees and receives no general fund dollars. Minnesota Statutes section 214.06, subdivision 1(a) compels the Board to collect fees in the amount sufficient to cover direct and indirect expenditures. Funds are deposited as non-dedicated revenue into the state government special revenue fund. From this fund, the Board receives a direct appropriation to pay for agency expenses such as salaries, rent, equipment, professional technical experts, inspection processes, and other operating expenditures. It also pays statewide indirect costs through an appropriation.

In addition to Board operations, licensure fees fund activities that proportionately support multiple boards and/or other agencies. Some of these are: Small Agency Resources Team (SMART), Administrative Services Unit (interboard); Health Professionals Services Program (inter-board); Prescription Monitoring Program (Pharmacy Board); Office of the Attorney General for legal services; Criminal Background Check Program (inter-board); and the Voluntary Healthcare Provider Program (inter-board).

**ASU:** Currently, 19 health and non-health related licensing boards fund the operations of Administrative Services Unit.

#### STRATEGIES

The Board accomplishes its mission through services that include: establishing the educational, examination and other qualification standards for initial licensure as dentists, dental hygienists, dental therapists, and dental assistants; determining requirements for license renewal, such as professional development (continuing education); accepting, investigating, and resolving complaints regarding licensed dental professionals and unlicensed practice; infection control and anesthesia inspections; tracking compliance of licensees who are under corrective or disciplinary action of the Board; maintaining professional firm data in compliance with Minn. Statute 319B; disseminating public information; and engaging in policy, law, and rulemaking initiatives to ensure that statutes and rules regulating dental professions remain relevant.

The Board achieves its mission by continuous learning and engagement with dental professionals, dental students, and dental professional educational institutions. The Board strives to address complaints in a timely and efficient manner. The Board continues to look for new methods of communication to engage the public in what we do and how we work to ensure safe dental care is provided to the citizens of Minnesota. The Board has implemented an engagement plan to engage the public and professionals. This plan includes social media, newsletters, instructional videos. The Board maintain consistency, integrity, and understanding of our licensing process by providing transparency in our requirements for education and consistency in the application and criminal background check processes. The board is has recently done a large rulemaking project to remove some of the undue burdens in the license by credentials process for dentists and dental hygienists. We recently established a streamlined process for dental therapy license by credentialing, and currently have initiatives to streamline the dental assisting by credential process. These support the process of candidate integrity during licensing and furthers our mission to protect the public by ensuring that Minnesota citizens receive quality dental health care from competent dental health care professionals. We have streamlined fees section of our statutes to make the fees associated with licensure more understandable. We are working with information technology to improve the quality and quantity measures for licensing and the complaint/ compliance process, including reporting. We have overall had a reduction in the length of time spent for complaint resolution for standard complaints. We work with national testing agencies to ensure the integrity of the dental and allied dental professional examination process. We have been able to lower our total costs per licensee by employing paperless renewal methods, electronic notifications and reduce postage costs. We plan on implementing a new Salesforce database, working with the Minnesota Information Technology Salesforce team within the year. We are also seeking technology to issue electronic license badges to provide further convenience for licensees, public transparency (ease of look up and access to public data), to further conserve integrity, and prevent fraud in licensure.

**ASU:** The Administrative Services Unit is the centralized business office and facilitates the coordination of financial, human resource, contracting, and other common office services. This allows each board to focus their staff resources on public safety and board specific practices.

### RESULTS

The Board continues to stay current on expectations, opportunities and standards for regulating dental professionals. We have become more effective and efficient in the way we process complaints. The last fiscal year has brought fewer total complaints, but more complex and multi-faceted complaints. FY2020 was one of the highest years for complaints to the board. We have improved our licensing procedures while maintaining high standards and keeping operating costs low. We have not raised licensing fees for several years and do not intend on raising fees in the next biennium.

Type of Measure	Name of Measure	Previous	Current	Years
Quantity	Number of Dental Therapy Licenses* Number of Advanced Dental Therapy Certifications Issued*	116 76	132 96	FY2020 and FY2022
Quantity & Quality	New Licenses Issued (Goal: under 4 weeks from completion of application)	682	770	FY2020 and FY2022
Quantity & Quality	Complaints Opened Complaints Remaining Open at the End of the Fiscal Year	266 57	170 39	FY2020 and FY2022
	Age of Complaints < 1 year Age of complaints >1 year	53	37 2	

\*Dental Therapy (DT) is a newer dental profession, with the first licensure beginning in 2011 and the first eligible DT to receive Advanced Dental Therapy (ADT) Certification was in 2013. We have recently now established a process for dental therapy by credential candidates (to be consistent with other license by credential processes) by bringing forward legislation last session.

Minnesota Statutes Chapter 214 (enabling statute) <u>https://www.revisor.mn.gov/statutes/?id=214</u> Minnesota Statutes Chapter 150A (Dental Practice Act) <u>https://www.revisor.mn.gov/statutes/?id=150A</u>

# Agency Expenditure Overview

	Actual	Actual	Actual	Estimate	Forecast B	Base
	FY20	FY21	FY22	FY23	FY24	FY25
Expenditures by Fund						
1201 - Health Related Boards	1,231	1,401	2,752	6,573	3,753	3,753
2000 - Restrict Misc Special Revenue	20	35	27	34	25	25
2001 - Other Misc Special Revenue			21	35	35	35
Total	1,250	1,436	2,800	6,642	3,813	3,813
Biennial Change				6,756		(1,816
Biennial % Change				252		(19)
Expenditures by Program						
Dentistry Board	1,250	1,436	2,800	6,642	3,813	3,813
Total	1,250	1,436	2,800	6,642	3,813	3,813
Expenditures by Category		1				
Compensation	953	981	1,505	1,998	1,551	1,590
Operating Expenses	297	444	1,289	4,637	2,255	2,216
Other Financial Transaction		10	6	7	7	7
Total	1,250	1,436	2,800	6,642	3,813	3,813
Full-Time Equivalents	10.57	10.64	16.60	16.30	17.30	17.30

# Agency Financing by Fund

	Actual	Actual	Actual	Estimate	Forecast B	ase
	FY20	FY21	FY22	FY23	FY24	FY25
1201 - Health Related Boards						
Balance Forward In		308		2,819	2	2
Direct Appropriation	1,514	1,450	4,228	3,756	3,753	3,753
Receipts			1			
Transfers In			1,464			
Transfers Out			122			
Cancellations		357				
Balance Forward Out	283		2,819	2	2	2
Expenditures	1,231	1,401	2,752	6,573	3,753	3,753
Biennial Change in Expenditures				6,693		(1,819)
Biennial % Change in Expenditures				254		(20)
Full-Time Equivalents	10.57	10.64	16.60	16.30	17.30	17.30
2000 - Restrict Misc Special Revenue	2					
Balance Forward In	4	9	10	9		
Receipts	24	31	26	25	25	25
Balance Forward Out	9	4	9			
Expenditures	20	35	27	34	25	25
Biennial Change in Expenditures				6		(11)
Biennial % Change in Expenditures				12		(18)
		·				
2001 - Other Misc Special Revenue						
Balance Forward In			0			

Balance Forward In	0			
Receipts	21	35	35	35
Expenditures	21	35	35	35
Biennial Change in Expenditures		56		14
Biennial % Change in Expenditures				25

# Agency Change Summary

	FY23	FY24	FY25	Biennium 2024-25
Direct				
Fund: 1201 - Health Related Boards				
FY2023 Appropriations	3,756	3,756	3,756	7,512
Base Adjustments				
All Other One-Time Appropriations		(3)	(3)	(6)
Forecast Base	3,756	3,753	3,753	7,506
Dedicated				
Fund: 2000 - Restrict Misc Special Revenue				
Planned Spending	34	25	25	50
Forecast Base	34	25	25	50
Fund: 2001 - Other Misc Special Revenue				
Planned Spending	35	35	35	70
Forecast Base	35	35	35	70
Revenue Change Summary				
Dedicated				
Fund: 2000 - Restrict Misc Special Revenue				
Forecast Revenues	25	25	25	50
Fund: 2001 - Other Misc Special Revenue				
Forecast Revenues	35	35	35	70
Non-Dedicated				
Fund: 1201 - Health Related Boards				
Forecast Revenues	1,846	1,846	1,846	3,692

# **Dentistry Board**

# Activity Expenditure Overview

	Actual	Actual	Actual	Estimate	Forecast Ba	ase
	FY20	FY21	FY22	FY23	FY24	FY25
Expenditures by Fund						
1201 - Health Related Boards	1,231	1,401	1,241	1,742	1,490	1,490
2000 - Restrict Misc Special Revenue	20	35	27	34	25	25
Total	1,250	1,436	1,268	1,776	1,515	1,515
Biennial Change				358		(14)
Biennial % Change				13		(0)
Expenditures by Category						
Compensation	953	981	922	969	987	1,011
Operating Expenses	297	444	344	807	528	504
Other Financial Transaction		10	2			
Total	1,250	1,436	1,268	1,776	1,515	1,515
Full-Time Equivalents	10.57	10.64	10.48	9.80	9.80	9.80

# **Dentistry Board**

# Activity Financing by Fund

	Actual	Actual	Actual	Estimate	Forecast	Base
	FY20	FY21	FY22	FY23	FY24	FY25
1201 - Health Related Boards						
Balance Forward In		308		249		
Direct Appropriation	1,514	1,450	1,490	1,493	1,490	1,490
Cancellations		357				
Balance Forward Out	283		249			
Expenditures	1,231	1,401	1,241	1,742	1,490	1,490
Biennial Change in Expenditures				352		(3)
Biennial % Change in Expenditures				13		(0)
Full-Time Equivalents	10.57	10.64	10.48	9.80	9.80	9.80
2000 - Restrict Misc Special Revenue						
Balance Forward In	4	9	10	9		
Receipts	24	31	26	25	25	25
Balance Forward Out	9	4	9			
Expenditures	20	35	27	34	25	25
Biennial Change in Expenditures				6		(11)
Biennial % Change in Expenditures				12		(18)

## **Board of Dentistry**

## Program: Board of Dentistry Activity: Administrative Services Unit (ASU)

https://mn.gov/boards/asu/

## AT A GLANCE

- Serves 19 heath and non-health related licensing boards, their employees, and appointed board members
- Registered 16 Volunteer Health Care Provider Program facilities
- Registered 103 Volunteer Health Care Provider Program volunteers
- Processed 27,797 criminal background checks

## PURPOSE AND CONTEXT

The Administrative Services Unit (ASU) provides centralized planning and coordination of operational activities to 16 health-related licensing boards and 3 non-health licensing boards – the Board of Barber Examiners, Board of Cosmetologist Examiners, and the Emergency Medical Services Regulatory Board. The services provided include administrative services and facilities management, Continuity of Operations Plan (COOP) planning and coordination, fiscal and legislative assistance, and liaison between the boards and various state agencies and departments. The purpose of the ASU is to:

- Provide technical assistance on state policies and procedures to ensure sound fiscal practices.
- Assist in the establishment of a consortium of boards to cooperate on matters of common interest.
- Register individuals and organizations for the Volunteer Health Care Provider Program (VHCPP).
- Process criminal background checks on new applicants for the health-related licensing boards through the Criminal Background Checks Program (CBCP).

## SERVICES PROVIDED

In 1995 the Health Licensing Boards (HLB) voluntarily and informally created the ASU to increase efficiencies among the Boards in performing their duties. The ASU was formalized in statute in 2011 (Minnesota Statutes Chapter 214.107).

The ASU initially performed common administrative, financial, and management functions, such as payroll, accounts payable, accounts receivable, purchasing, contracting, budgeting, and human resources. In 2019, many of those functions transitioned through interagency agreement to the Department of Administration, Small Agency Resource Team (SmART). ASU continues to reconcile receipts, maintain fixed assets, manage shared projects, coordinate facility management, and lead the Continuity of Operations Planning.

Additionally, ASU manages the Voluntary Health Care Provider Program, which provides malpractice coverage for physicians, physician assistants, dentists, dental hygienists, dental therapists, advanced dental therapists, and nurses serving in a voluntary capacity at a charitable organization. The ASU provides fiscal oversight to the Criminal Background Check Program, which was created in FY 2015 to process criminal background checks for all new health-related licensing board applicants. Operational oversight of the program is managed by the Board of Occupational Therapy.

The ASU is funded by all the independent boards and now consists of 2 full-time staff members who perform shared administrative and business services for all the boards. CBC consists of 4 full-time staff members. ASU's annual budget is determined by the Executive Directors' Forum. Starting in Fiscal Year 2022, the ASU oversight

board changed from the Minnesota Board for Long Term Services and Supports to the Minnesota Board of Dentistry. ASU is managed by the Management Committee of the Executive Directors' Forum.

Type of Measure	Name of Measure	Previous	Current	Dates
Quantity	Number of Registered VHCPP Facilities	17	16	2020 & 2022
Quantity	Number of Registered VHCPP Volunteers	87	103	2020 & 2022
Quantity	Number of Criminal Background Checks	18,148	27,797	FY20 & FY22

## RESULTS

The authorizing Minnesota statute for Administrative Services Unit is found at: <u>https://www.revisor.mn.gov/statutes/?id=214.107&view=chapter#stat.214.107</u>

The authorizing Minnesota statute for Volunteer Health Care Provider Program is found at: <u>https://www.revisor.mn.gov/statutes/?id=214.40&view=chapter#stat.214.40</u>

The authorizing Minnesota statute for Criminal Background Checks Program is found at: <u>https://www.revisor.mn.gov/statutes/?id=214.075&view=chapter#stat.214.075</u>

# **Administrative Services Unit**

# **Activity Expenditure Overview**

	Actual	Actual	Actual	Estimate	Forecast	Base
	FY20	FY21	FY22	FY23	FY24	FY25
Expenditures by Fund						
1201 - Health Related Boards			1,511	4,831	2,263	2,263
2001 - Other Misc Special Revenue			21	35	35	35
Total			1,532	4,866	2,298	2,298
Biennial Change				6,398		(1,802)
Biennial % Change						(28)
Expenditures by Category						
Compensation			583	1,029	564	579
Operating Expenses			945	3,830	1,727	1,712
Other Financial Transaction			4	7	7	7
Total			1,532	4,866	2,298	2,298
Full-Time Equivalents			6.12	6.50	7.50	7.50

# Activity Financing by Fund

#### (Dollars in Thousands)

	Actual	Actual	Actual	Estimate	Forecast	t Base
	FY20	FY21	FY22	FY23	FY24	FY25
1201 - Health Related Boards						
Balance Forward In				2,570	2	2
Direct Appropriation			2,738	2,263	2,263	2,263
Receipts			1			
Transfers In			1,464			
Transfers Out			122			
Balance Forward Out			2,570	2	2	2
Expenditures			1,511	4,831	2,263	2,263
Biennial Change in Expenditures				6,342		(1,816)
Biennial % Change in Expenditures						(29)
Full-Time Equivalents			6.12	6.50	7.50	7.50

### 2001 - Other Misc Special Revenue

Balance Forward In	0			
Receipts	21	35	35	35
Expenditures	21	35	35	35
Biennial Change in Expenditures		56		14
Biennial % Change in Expenditures				25