



DENTAL BOARD OF CALIFORNIA

2005 Evergreen St., Suite 1550, Sacramento, CA 95815

P (916) 263-2300 | F (916) 263-2140 | www.dbc.ca.gov



DENTAL BOARD OF CALIFORNIA

NOTICE OF MEETING

August 17-18, 2023

Board Members

Alan Felsenfeld, MA, DDS, President
Joanne Pacheco, RDH, MAOB, Vice President
Lilia Larin, DDS, Secretary
Steven Chan, DDS
Joni Forge, DDS
Meredith McKenzie, Esq., Public Member
Angelita Medina, MHS, Public Member
Sonia Molina, DMD, MPH
Rosalinda Olague, RDA, BA
Yogita Thakur, DDS, MS
James Yu, DDS, MS

Action may be taken on any item listed on the agenda.

The Dental Board of California (Board) will meet approximately at, but no earlier than, 11:00 a.m., on Thursday, August 17, 2023, and 8:30 a.m., on Friday, August 18, 2023, at the following location:

Department of Consumer Affairs
1747 N. Market Blvd., Hearing Room #186
Sacramento, CA 95834

AGENDA

11:00 a.m., Thursday, August 17, 2023

1. Call to Order/Roll Call/Establishment of a Quorum
2. Public Comment on Items Not on the Agenda **[6]**
Note: The Board may not discuss or take action on any matter raised during this Public Comment section, except to decide whether to place the matter on the agenda of a future meeting. (Government Code sections 11125 and 11125.7(a).)
3. Discussion and Possible Action on May 18-19, 2023 Board Meeting Minutes **[7-40]**
4. Board President Report **[41]**
5. Executive Officer Report **[42]**
 - a. Introduction of Board Staff

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- b. Update on the Board's 2022-2025 Strategic Plan
- 6. Report on Department of Consumer Affairs Activities, which may include updates on the Department's Administrative Services, Human Resources, Enforcement, Information Technology, Communications and Outreach, as well as Legislative, Regulatory, and Policy Matters **[43]**
- 7. Budget Report **[44-49]**
- 8. Enforcement
 - a. Review of Statistics and Trends **[50-57]**
 - b. Presentation on the Enforcement Process **[58-79]**
- 9. Substance Use Awareness
 - a. Diversion Program Report and Statistics **[80-81]**
 - b. Presentation by Maximus **[82]**
 - c. Controlled Substance Utilization Review and Evaluation System Report **[83-92]**
- 10. Licensing, Certifications, and Permits
 - a. Update on Dental Licensure and Permit Statistics **[93-107]**
- 11. Report on July 26, 2023 Meeting of the Elective Facial Cosmetic Surgery (EFCS) Permit Credentialing Committee; Board Discussion and Possible Action on EFCS Permit Application **[108-109]**
- 12. Discussion and Possible Action on the Access to Care Committee Report **[110-111]**
- 13. Anesthesia and Sedation **[112-130]**
 - a. General Anesthesia and Sedation Permits: Inspections and Evaluations Statistics
 - b. Update Regarding Board Implementation of Senate Bill (SB) 501 (Glazer, Chapter 929, Statutes of 2018)
 - c. Discussion and Possible Action Regarding Appointment of General Anesthesia, Medical General Anesthesia, and Moderate Sedation Permit Evaluators
- 14. Discussion and Possible Action Regarding 2024 Meeting Dates **[131-137]**
- 15. Recess Open Session Until August 18, 2023, at 8:30 a.m.

CLOSED SESSION (WILL NOT BE WEBCAST)

16. Convene Closed Session

17. Pursuant to Government Code Section 11126(e)(1) and (2)(A), the Board will Confer with and Receive Advice from Legal Counsel and Deliberate Regarding *Sulitzer, et al. v. Tippins, et al.*, United States District Court, Central District of California, Western Division, Case No. 2:19-cv-08902-GW-MAA

18. Pursuant to Government Code Section 11126(c)(3), the Board Will Meet in Closed Session to Deliberate and Vote on Disciplinary Matters, Including Stipulations and Proposed Decisions

19. Adjourn Closed Session

8:30 a.m., Friday, August 18, 2023

20. Reconvene Open Session – Call to Order/Roll Call/Establishment of a Quorum

21. Board President’s Report on Closed Session Items **[138]**

22. Dental Assisting Council Meeting Report **[139]**

23. Update, Discussion, and Possible Action on Proposed Regulations

- a. Status Update on Pending Regulations **[140-141]**
- b. Consideration of Previously Approved Proposed Regulations and Possible Recommendation to Form an Advisory Working Group to Review the Dental Assisting Comprehensive Rulemaking Regulations (California Code of Regulations, Title 16, Sections 1067-1081.3) **[142-143]**

24. Examinations

- a. Report on Commission on Dental Competency Assessment, Western Regional Examining Board, and The Council of Interstate Testing Agencies (CDCA-WREB-CITA) **[144]**
- b. Presentation, Discussion, and Possible Action on the Portfolio Examination Report by the Office of Professional Examination Services **[145-151]**

25. Update Regarding Board Sunset Review **[152-153]**

26. Legislative Proposals

- a. Discussion and Possible Action on Revisions to Previously Approved Recommendation on Legislative Proposal to Amend Business and Professions Code (BPC) Sections 1601.1 and 1740 and Repeal BPC Section 1742 Regarding Board Composition and Dental Assisting Council **[154-157]**
- b. Discussion and Possible Action on Legislative Proposal to Amend BPC Section 1638.1 Regarding Elective Facial Cosmetic Surgery Permit and Credentialing Committee **[158-169]**
- c. Discussion and Possible Action on Legislative Proposal to Amend BPC Section 1718.3 Regarding Issuance of New License in Event of Failure to Renew Within Five Years After Expiration **[170-177]**
- d. Discussion and Possible Action on Legislative Proposal to Amend BPC Section 1628.7 Regarding Probationary License **[178-183]**
- e. Discussion and Possible Action Regarding Penalties for Fraudulent Advertising and Misinformation of Dental Assistant Educational Programs and Courses **[184-185]**

27. Update, Discussion, and Possible Action on 2023/2024 Legislation Impacting the Board, the Department of Consumer Affairs, and/or the Dental Profession
- a. 2023 Tentative Legislative Calendar – Information Only **[186-190]**
 - b. Legislation of Interest **[191-216]**
 - i. [ACR 10](#) (Weber, Chapter 16, Statutes of 2023) Children’s Dental Health Month.
 - ii. [AB 481](#) (Wendy Carrillo, 2023) Dentistry: dental assistants.
 - iii. [AB 795](#) (Flora, 2023) Unlawful sale of equipment, supplies, or services.
 - iv. [AB 883](#) (Mathis, 2023) Business licenses: United States Department of Defense SkillBridge program.
 - v. [AB 936](#) (Wood, 2023) Dentistry: exemptions.
 - vi. [AB 996](#) (Low, 2023) Department of Consumer Affairs: continuing education: conflict-of-interest policy.
 - vii. [AB 1028](#) (McKinnor, 2023) Reporting of crimes: mandated reporters.
 - viii. [AB 1257](#) (Berman, 2023) Dentistry: Dental Hygiene Board of California: Dental hygienists: Examinations and licensure.
 - ix. [AB 1395](#) (Garcia, 2023) Licensed Physicians and Dentists from Mexico Pilot Program: requirements.
 - x. [AB 1396](#) (Garcia, 2023) Licensed Physicians and Dentists from Mexico Pilot Program: requirements.
 - xi. [AB 1398](#) (Ramos, 2023) California Dental Corps Loan Repayment Program.
 - xii. [AB 1552](#) (Reyes, 2023) Healing arts: foreign dental schools.
 - xiii. [SB 372](#) (Menjivar, 2023) Department of Consumer Affairs: licensee and registrant records: name and gender changes.
 - xiv. [SB 544](#) (Laird, 2023) Bagley-Keene Open Meeting Act: teleconferencing.
 - xv. [SB 802](#) (Roth, 2023) Licensing boards: disqualification from licensure: criminal conviction.
 - xvi. [SB 818](#) (Roth, 2023) Department of Consumer Affairs: terms of office: fingerprinting.

28. Discussion of Prospective Legislative Proposals **[217]**

Stakeholders are encouraged to submit proposals in writing to the Board before or during the meeting for possible consideration by the Board at a future meeting.

29. Adjournment

Information regarding the meeting is available by contacting the Board at (916) 263-2300 or (877) 729-7789, email: DentalBoard@dca.ca.gov, or send a written request to the Dental Board of California, 2005 Evergreen Street, Suite 1550, Sacramento, CA 95815. This agenda can be found on the Dental Board of California website at dbc.ca.gov. The time and order of agenda items are subject to change at the discretion of the Board President and may be taken out of order. Items scheduled for a particular day may be moved to an earlier or later day to facilitate the effective transaction of business. In accordance with the Bagley-Keene Open Meeting Act, all meetings of the Board are open to the public.

The meeting will be webcast, provided there are no unforeseen technical difficulties or limitations. To view the webcast, please visit thedcapage.wordpress.com/webcasts/. The meeting will not be cancelled if webcast is not available. Meeting adjournment may not be webcast if it is the only item that occurs after a closed session. Members of the public may, but are not obligated to, provide their names or personal information as a condition of observing or participating in the meeting. (Government Code section 11124.)

Government Code section 11125.7 provides the opportunity for the public to address each agenda item during discussion or consideration by the Board prior to the Board taking any action on said item. Members of the public will be provided appropriate opportunities to comment on any issue before the Board, but the Board President may, at their discretion, apportion available time among those who wish to speak. Individuals may appear before the Board to discuss items not on the agenda; however, the Board can neither discuss nor take official action on these items at the time of the same meeting (Government Code sections 11125, 11125.7(a)).

This meeting location is accessible to the physically disabled. A person who needs disability-related accommodations or modifications to participate in the meeting may make a request by contacting Tracy Montez, Executive Officer, at Dental Board of California, 2005 Evergreen Street, Suite 1550, Sacramento, CA 95815, or by phone at (916) 263-2300. Providing your request at least five (5) business days prior to the meeting will help ensure availability of the requested accommodations. TDD Line: (877) 729-7789



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MEMORANDUM

DATE	July 25, 2023
TO	Members of the Dental Board of California
FROM	Mirela Taran, Administrative Analyst Dental Board of California
SUBJECT	Agenda Item 2.: Public Comment on Items Not on the Agenda

Notes



**DENTAL BOARD OF CALIFORNIA
MEETING MINUTES
May 18-19, 2023**

The Dental Board of California (Board) met on May 18-19, 2023, with the following location available for Board and public member participation:

Hilton Anaheim
777 W. Convention Way
Anaheim, CA 92802

Members Present:

Alan Felsenfeld, MA, DDS, President
Joanne Pacheco, RDH, MAOB, Vice President
Lilia Larin, DDS, Secretary
Steven Chan, DDS
Joni Forge, DDS
Meredith McKenzie, Esq., Public Member
Sonia Molina, DMD, MPH
Rosalinda Olague, RDA, BA
Yogita Thakur, DDS, MS

Members Absent:

Angelita Medina, MHS, Public Member
James Yu, DDS, MS

Staff Present:

Tracy A. Montez, Ph.D., Executive Officer
Carlos Alvarez, Chief of Enforcement Field Offices
Paige Ragali, Chief of Dental Programs and Customer Support
Jessica Olney, Anesthesia Unit Manager
Wilbert Rumbaoa, Administrative Services Unit Manager
Patrick Morrissey, Supervisory Investigator
David Bruggeman, Legislative and Regulatory Specialist
Paul De La Cruz, Investigator
Jeanette De Lira, Investigator
Bernice Santa Ana, Investigator
Mirela Taran, Administrative Analyst
Thomas Tortorici, Investigator
Melissa Gear, Deputy Director, Board and Bureau Relations, Department of Consumer Affairs (DCA)
Alex Cristescu, Office of Public Affairs, DCA

DRAFT - Dental Board of California
May 18-19, 2023 Meeting Minutes

Kristy Schieldge, Regulatory Counsel, Attorney IV, Legal Affairs Division, DCA (via telephone)
Tara Welch, Board Counsel, Attorney IV, Legal Affairs Division, DCA

10:30 a.m., Thursday, May 18, 2023

Agenda Item 1: Call to Order/Roll Call/Establishment of a Quorum

The Board President, Dr. Alan Felsenfeld, called the meeting to order at 11:05 p.m. The Board Secretary, Dr. Lilia Larin, called the roll; eight Board Members were present, and a quorum was established. Board Members Angelita Medina, MHS, and James Yu, DDS, MS, were absent. Board Member Rosalinda Olague joined the meeting after roll call at 11:26 a.m.

Agenda Item 2: Public Comment on Items Not on the Agenda

There were no public comments made on items not on the agenda.

Agenda Item 3: Discussion and Possible Action on February 9-10, 2023 Board Meeting Minutes

Motion/Second/Call (M/S/C) (Chan/Molina) to adopt the February 9-10, 2023 meeting minutes.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Pacheco, Thakur.

Nays: None.

Abstentions: None.

Absent: Medina, Olague, Yu.

Recusals: None.

The motion passed.

Agenda Item 4: Board President Report

President Felsenfeld reported that he continually works with Dr. Tracy Montez on a regular basis to get through some of the issues that the Board has to deal with and voiced that he attended the Board Member Orientation Training (BMOT) with Board Vice President, Joanne Pacheco, in February. President Felsenfeld noted that he has had the opportunity in March of 2023 to present at the California Dental Society of Anesthesiology (CDSA) to speak on anesthesia changes of Senate Bill (SB) 501. During his presentation, he expressed that the Board is in need more anesthesia evaluators and noted that since then, there has been a list of individuals willing to help.

President Felsenfeld requested public comment on this item. There were no public comments made on this item.

Board Member Sonia Molina verbalized that there is an error on the anesthesia portion of the newsletter where only two of the following methods were mentioned where it states any dentist with patients who are undergoing deep sedation or general anesthesia need to do at least three of the two following methods. President Felsenfeld replied that that will be looked at and corrected.

Agenda Item 5: Executive Officer Report

Dr. Tracy Montez shared that she has weekly calls with President Felsenfeld to inform him of Board operations and items for future agendas and that she meets both with President Felsenfeld and Vice President Pacheco prior to Board meetings to review agenda items and discuss them in preparation for the meeting. She voiced that she also meets with DCA director, chief deputy director, and Board and Bureau Relations deputy director and keeps them apprised of activities as well as seeking their guidance. Dr. Montez noted that Board staff presented at the California Dental Assistants Association (CDAA) and California Association of Dental Assisting Teachers (CADAT) Conference on April 21, 2023 and attended a community resource fair in Fresno, organized by Assembly Member Arambula, on April 25, 2023, to help educate the public about dental services and how to file complaints if necessary. She communicated that the Board is back on Twitter and that staff is working closely with DCA Communications Division to assist with tweets and help with monitoring that so that it is done in a professional and appropriate manner. She provided a report on the Board's 2022-2025 Strategic Plan, the Board's newsletter which was released in May, and staffing updates.

President Felsenfeld requested public comment on this item. There were no public comments made on this item.

Agenda Item 6: Report on Department of Consumer Affairs Activities, which may include updates on the Department's Administrative Services, Human Resources, Enforcement, Information Technology, Communications and Outreach, as well as Legislative, Regulatory, and Policy Matters

Melissa Gear provided a departmental update. She expressed that since 2017 the state of California has participated in Public Service Recognition Week to express appreciation for civil servants and the essential work they do. DCA celebrated from May 13 through 17 with a department-wide appreciation message to staff, highlighted staff testimonials via social media, and ended the week with a video highlighting employee service. She thanked the Board and their dedicated staff for their daily hard work and everything they do throughout. She disclosed that legislation passed last year amending provisions of Bagley-Keene Open Meeting Act to extend the ability of state bodies such as DCA's Boards and Bureaus to conduct public meetings virtually through July 1, 2023. Absent the passing of new legislation to extend these provisions, DCA Boards and Bureaus will not be allowed to conduct meetings virtually after this date. DCA is aware of legislation recently introduced, SB 544 (Laird, 2023), which removes certain

teleconference requirements from the Open Meeting Act. The bill, taking effect on January 1, 2024, was recently amended to do the following: 1) require members of a state body participating remotely to disclose whether any individuals 18 years of age or older are present in the room at the remote location and if there is such an individual, the relationship with that individual must also be disclosed and 2) require state bodies to enter or adjourn a meeting upon discovering that a means of remote participation required by the bill has failed and cannot be restored. She noted that boards and bureaus should be prepared to conduct public meetings in person in the interim beginning July 1, 2023. Ms. Gear voiced that on January 5, 2023, a new federal law took effect that enables service members and their spouses who hold professional licenses in a different state to practice in California within the same professional discipline and at a similar scope of practice if they are required to relocate to California due to their military orders. Since becoming aware of the new law, DCA has been collaborating with Agency on how best to implement it. Ms. Gear addressed required Board Member trainings, travel expense claims, recent DCA Diversity, Equity, and Inclusion (DEI) efforts, and DCA'S 2021-2022 Annual Report.

Dr. Montez shared that the Board's Assistant Executive Officer, Christy Bell, has staff-wide training for DEI scheduled for June 2023.

President Felsenfeld requested public comment on this item. There were no public comments made on this item.

Agenda Item 7: Report on Dental Hygiene Board of California Activities

Anthony Lum, Executive Officer of the DHBC, provided a verbal report on their activities.

President Felsenfeld requested public comment on this item. There were no public comments made on this item.

Agenda Item 8: Budget Report

Wilbert Rumbaoa provided a report on the State Dentistry Fund, which the Board manages, for fiscal year (FY) 2022-23. Mr. Rumbaoa conveyed that the Board projects revenues of 18.6 million and that approximately 3.1 million is projected from the initial examination and permitting fees and 14.6 million from the renewal fees. In terms of the Board's expenditures for this FY, as of Fiscal Month 9, which is through March 2023, is projected to be 18.5 million. Mr. Rumbaoa disclosed that expenditure predictions as with revenue projections may change with actual returns in the remaining fiscal months. Based on reports received by DCA, the Board is projected to revert approximately 1.2 million by the end of FY 22/23. This has changed from previous reports as the Board has been filling vacancies and there are increased attorney general costs. He noted that the Board in conjunction with the Budget Office will continue to monitor these expenditures and revenues and report back to the Board with monthly projection as the future fiscal months close.

President Felsenfeld requested public comment on this item. There were no public comments made on this item.

Agenda Item 9: Enforcement

Agenda Item 9.a.: Review of Statistics and Trends

Carlos Alvarez provided the report, which is available in the meeting materials.

President Felsenfeld noted that it is phenomenal that the statistics show that in six months about 660 complaints have come through and that 80-97% of them were dealt with only few trickling up the ladder. Mr. Alvarez replied that the Board's Complaint and Compliance Unit (CCU) and Chief of CCU, Owen Dudley, have contributed to this percentage. He mentioned that the supervisors and chiefs meet frequently to bring consistency to the enforcement program and improve timelines in order to protect consumers. To provide consistency, Mr. Alvarez voiced that Board staff is updating its letters that are being sent out to consumers and subject matter experts (SMEs).

Board Member Molina thanked Mr. Alvarez for the presentation that he gave to Los Angeles Dental Society. She voiced that it was enlightening and appreciated as a substantial amount of the dentists did not understand the process.

President Felsenfeld noted that as the Board's highest priority is protection of the health of the public, this would make enforcement the highest priority as that is what is going to protect the health of the public.

Mr. Alvarez disclosed in May of 2023, he was invited to do a presentation for the Los Angeles Dental Society to speak on the Board's enforcement program, which begins in the CCU Unit. He went over the process, how many complaints are received, how complaints are recorded, how staff receives these complaints, origin of the complaint, and the Board Member's involvement in the complaint process. He mentioned that when the enforcement or investigative staff go out into the field, their primary duty is to merely collect evidence and also help the physicians.

Board Member Yogita Thakur voiced that it would be a great idea to record presentations and have it available on the Board's webpage for the public to refer to.

President Felsenfeld requested public comment on this item. The Board received public comment.

Shari Becker, representing herself, voiced that it would be helpful to know some of the breakdown of the categories of the complaints, such as if they were more administratively or clinically based, and who was involved with the complaints.

Agenda Item 9.b.: Update from Enforcement Committee – Ms. Pacheco, RDH, MAOB

Vice President Pacheco provided the report, which is available in the meeting materials.

President Felsenfeld requested public comment on this item. There were no public comments made on this item.

Agenda Item 10: Substance Use Awareness

Agenda Item 10.a.: Diversion Program Report and Statistics

Mr. Alvarez provided the report, which is available in the meeting materials. He indicated that a new participant was accepted into the program and one participant was terminated for non-compliance and that the next Diversion Evaluation Committee (DEC) meeting was scheduled for July 12, 2023 which will take place in Orange County.

Secretary Larin asked what kind of prescriptions constitute Prescription Positive Tests for FY 21/22. Mr. Alvarez responded that he would find that information out.

Board Member Steven Chan asked whether it is relevant to include in the report the financial impact of what the Board's costs are for the Diversion Program. Dr. Montez asked for clarification on whether Board Member Chan is referring to dental program costs, the cost to administer the program, or to have the committee. Board Member Chan disclosed that a few years ago the Board went through the request for a proposal for different companies to administer this program and that the Board incurs a cost for it. He suggested that if the operating cost exceeds the participants, the Board needs to re-look at the program. Dr. Montez replied that Board staff will do some research and work with budgets to get an assessment of that.

President Felsenfeld requested public comment on this item. There were no public comments made on this item.

Agenda Item 10.b.: Controlled Substance Utilization Review and Evaluation System Report

Mr. Alvarez provided the report, which is available in the meeting materials. He communicated that one of the new things that is in the report is the number of Inbound Interstate Searches, which is a great tool to help reduce the misuse of opioids. Currently, the states who are involved in this are Oregon, Nevada, and Arizona. The platform is up but currently is not being collected and the Department of Justice (DOJ) is waiting to see if other states are going to participate in the Inbound Interstate Searches for Controlled Substance Utilization Review and Evaluation System (CURES).

President Felsenfeld requested public comment on this item. There were no public comments made on this item.

Agenda Item 11: Licensing, Certifications, and Permits

Agenda Item 11.a.: Update on Dental Licensure and Permit Statistics

Paige Ragali provided the report, which is available in the meeting materials. She pointed out that Board staff have determined that the number of applications received for Western Regional Examining Board (WREB) and American Board of Dental

Examiners (ADEX) may change for the current quarter as staff have noticed applicants are submitting applications via the WREB pathway that are actually intended for ADEX.

President Felsenfeld requested public comment on this item. There were no public comments made on this item.

Agenda Item 12: Report on April 26, 2023 Meeting of the Elective Facial Cosmetic Surgery Permit Credentialing Committee

Ms. Ragali provided the report, which is available in the meeting materials. A brief background on the Elective Facial Cosmetic Surgery (EFCS) Permit and EFCS Committee was provided.

President Felsenfeld requested public comment on this item. There were no public comments made on this item.

Agenda Item 13: Dental Assisting Council Meeting Report

(Agenda Item 13 was presented out of order on May 19, 2023. The order of business conducted herein follows the publicly noticed Board meeting Agenda.)

Traci Reed-Espinoza, Chair of the Dental Assisting Council (DAC), provided a verbal report on the May 18, 2023 DAC meeting.

Ms. Welch noted additional issues regarding Assembly Bill (AB) 481 (Wendy Carrillo, 2023) that were raised during the DAC meeting, such as concern for staff time spent reviewing certificates showing 300 hours of courses and dental assisting related topics for the preceptee pathway. She stated that California Code of Regulations (CCR), title 16, section 1016 subsection (g), authorizes continuing education (CE) credits to be issued in half hour increments, so Board staff could have to review 600 CE certificates to ensure that the applicant has eligibility under this requirement. She also raised concern of how the staff time for this review would be covered by the application fees for this pathway. Therefore, Board staff felt that for this particular pathway, the application fee should be higher than the application fee for the other types of pathways. She stated that change would need to be made in Business and Professions Code (BPC) Section 1725, with a corresponding regulation change in CCR, title 16, section 1022 for the RDA application. Ms. Welch expressed that as regulations are currently taking at least two years to implement, until a fee is set for that RDA pathway, the Board would not be able to issue licenses for that pathway. She stated that an alternative would be to set the fee in the statute for that pathway, so that the license could be issued upon the effective date of the bill. She noted another concern was authorizing scanning and imaging in proposed BPC Section 1750.1, subdivision (a). She stated that currently, intraoral impressions performed by unlicensed dental assistants require direct supervision of a dentist. This bill would change that and move intraoral impressions to be effectively performed through digital scanning under general supervision. She voiced that there is a consumer protection concern there of whether it is appropriate for unlicensed dental assistants to be performing digital intraoral impressions for

orthodontic appliances. She also noted that proposed BPC section 1750.1, subdivision (a)(1) contradicted itself because it would authorize an unlicensed dental assistant to perform the scanning and imaging for orthodontic records only. She explained that if a dental assist performed the scan, it typically would be a diagnostic tool to be used for the dentist to diagnose, create a written treatment plan, then use that written treatment plan for fabrication and manufacture of the orthodontic appliance. Ms. Welch stated that this duty was really important because it sets up the ultimate orthodontic appliance that would be placed in the patient's mouth. She reported that Mary McCune, with the California Dental Association (CDA), indicated that the bill was going to be amended to completely strike the provisions for scanning and imaging.

Dr. Montez clarified that the Board does 30 audits per month and that the number of site visits is to be determined.

President Felsenfeld requested public comment on this item. The Board received public comment.

Ms. Becker, representing the Dental Assisting Alliance (Alliance), consisting of CDAA, CADAT, and the California Association of Extended Functions (CAEF), expressed that in regard to Agenda Item 8 from the May 18, 2023 DAC meeting regarding the proposed repeal of BPC section 1742, as the current Council structure requires Board staff to schedule Council meetings, coordinate Council member travel, and prepare Council meeting agendas and associated materials all separate from the quarterly Board meetings, it was said that these actions are burdensome and costly. In addressing that, she indicated that this is the Board's charge to coordinate meetings. If the cost was the main issue, they suggested raising the fees, as the fees have not been raised since 2016. Additionally, she noted that the DAC was formed to replace the Committee on Dental Auxiliaries (COMDA) and to have representation for all dental assisting to include the unlicensed dental assistant, Registered Dental Assistants (RDAs), Registered Dental Assistants in Extended Functions (RDAEFs), Orthodontic Assistants (OAs), Dental Sedation Assistants (DSAs), and educators. She stated the proposed language to have two RDAs on the Board would not adequately represent all areas of dental assisting and fulfill the duties of the seven-person DAC. She noted that an appointed two-person committee representing dental assisting potentially introduces lack of transparency, especially with no public notice, effective communication, and lack of expertise, including the breadth of experience. The Alliance strongly opposed this change. However, it supported the motion presented by the DAC to retain the DAC and add the two additional RDAs to the Board.

Esther Cruz, representing herself as an RDA, commented that she would like to add language to proposed BPC section 1750.1 in radiology dental assistant allowable topics, radiology proper technique, extraoral, and 3D imaging, with an addition of CE requirement added to the regulation. She stated that currently, there is no radiology CE, and there was an increase in missed diagnostic areas of concern in California. She stated that the proper role in meeting the standard of care for proper interpretation of

imaging includes either transcribing the dentist finding or transferring the images. Ms. Cruz continued that the practice is responsible for assuring Health Insurance Portability and Accountability Act (HIPAA) compliance in all correspondence via web portal, including 45 Code of Federal Regulations (CFR) 164.50(e) of the Privacy regulations, and 45 CFR 164.314 (a), HIPAA of 1996. She stated that all data collected by the equipment must be encrypted and securely stored to prevent unauthorized access, and AB 481 should require all dental professionals and staff to be properly trained on data security protocols to ensure the safety of patient data. Additionally, she stated AB 481 provided a clear process for reporting and addressing any potential data breaches including timely notification and affected parties; the bill should further ensure that no data will be transferred without the user's consent as required by HIPAA regulations. She stated the dental radiology equipment bill should be dedicated to ensuring the privacy and security of user data and hold accountable any individuals and organizations found violating these provisions.

Agenda Item 14: Update, Discussion, and Possible Action on Appointment to Dental Assisting Council

Dr. Montez provided the report, which is available in the meeting materials.

(M/S/C) (Molina/Olague) to reappoint Jeri Fowler, RDAEF, OA, as the Dental Assisting Council (DAC) member employed as a faculty member of an RDA educational program approved by the Board for a term of four years expiring in March 2027.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco, Thakur.

Nays: None.

Abstentions: None.

Absent: Medina, Yu.

Recusals: None.

The motion passed.

Agenda Item 15: Anesthesia and Sedation

Agenda Item 15.a.: General Anesthesia and Sedation Permits: Inspections and Evaluations Statistics

Jessica Olney provided the report, which is available in the meeting materials. She disclosed that Board staff have been contacting newly licensed moderate sedation permit holders to schedule evaluations and that statistics will be provided at the August Board meeting. Since the memorandum was finalized, the Board did have one

moderate sedation permit evaluation which resulted in a failure. The candidate has been notified and has not requested a reevaluation thus far.

Board Member Molina mentioned that the newsletter discloses the number of units that are required per permit type and lists seven units for Oral Conscious Sedation – Adult (OCS-A) permit. She voiced that that it is no longer effective. Ms. Olney responded that the Oral Conscious Sedation for Adults permit is still in effect and was not impacted by SB 501 and that it is the Oral Conscious Sedation for Minors permit that was repealed.

President Felsenfeld requested public comment on this item. There were no public comments made on this item.

Agenda Item 15.b.: Update Regarding Board Implementation of Senate Bill (SB) 501 (Glazer, Chapter 929, Statutes of 2018)

Ms. Olney provided the report, which is available in the meeting materials. She pointed out that at the February 2023 Board meeting, President Felsenfeld requested additional information on the expiration of existing permits. She acclaimed that on page 93 of the meeting materials there is a table that identifies the expiration of permits for calendar years 2023 and 2024 and noted that Board staff can provide updates at future Board meetings.

President Felsenfeld indicated that as we have individuals applying for the pediatric endorsements in the area of general anesthesia and deep sedation, there is a large number of applications that are incomplete and asked what type of required items are missing from the application. Ms. Olney replied that deficiencies typically include individual records as a lot of times applicants will submit the application and the additional forms but will forget to include pediatric records. She pointed out that staff are receiving those applications from the cashier and in most cases processing them the exact same day or within two days and that they are reaching out to those applicants by phone or email to attempt to get those issues resolved.

President Felsenfeld requested public comment on this item. The Board received public comment.

Dr. Bruce Whitcher, representing himself, voiced that he had some feedback regarding implementation of the pediatric endorsement that he was asked to convey by a California Association of Oral and Maxillofacial Surgeons (CALAOMS) member who applied for the pediatric endorsement and sent in his 20 cases. The cases were reviewed and a number of them were denied because they underwent expert review, and the expert felt that they did not meet the definition of general anesthesia. He verbalized that that is highly subjective going on a paper record. Dr. Whitcher suggested the Board look at that and think about calibrating the experts to ensure that they are all going by the same standards.

Agenda Item 15.c.: Discussion and Possible Action Regarding Appointment of General Anesthesia, Medical General Anesthesia, and Moderate Sedation Permit Evaluators
Ms. Olney provided the report, which is available in the meeting materials.

Board Member Joni Forge asked how long the process takes from applying to being accepted or rejected. Ms. Olney replied that when the applications are received, Board staff review them and ensure that applicants have held the permit for at least three years, or in this case for the moderate sedation permit holders that they previously held a conscious sedation permit. Board staff also review and make sure that there are no pending enforcement actions. Unfortunately, Board staff does have to wait until the next Board meeting to be able to present them for approval by the full Board.

Board Member Molina asked whether a Board member would need to recuse themselves from voting if they know one of the candidates. Ms. Welch recommended refusal; there are conflicts of interest, financial or personal, and perceived conflicts where some may argue that if you have a personal relationship with a candidate, you may have a particular bias for or against that person. She recommended recusing oneself from the vote if a Board member had a personal relationship with one of the candidates.

Dr. Montez pointed out that contacting newly approved permit holders to become evaluators was a recommendation made at the last Board meeting.

President Felsenfeld requested public comment on this item.

Dr. Whitcher thanked President Felsenfeld for acknowledging this issue in his President's report and Dr. Montez for her acknowledgment as well. He reminded everybody that prior to SB 501, there were 150 moderate sedation or conscious sedation evaluators, so the Board has a long way to go to make up the backlog. He noted the Board's proposed legislative amendments to address that.

(M/S/C) (Felsenfeld/McKenzie) to appoint Dr. Rachelle Kim as an evaluator for the general anesthesia and moderate sedation onsite inspection and evaluation program.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Olague, Pacheco, Thakur.

Nays: None.

Abstentions: Molina.

Absent: Medina, Yu.

Recusals: None.

The motion passed.

(M/S/C) (Felsenfeld/Chan) to appoint Dr. Christine Son as an evaluator for the general anesthesia and moderate sedation onsite inspection and evaluation program.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco, Thakur.
Nays: None.
Abstentions: None.
Absent: Medina, Yu.
Recusals: None.

The motion passed.

(M/S/C) (Chan/Forge) to appoint Dr. Rajiv Bhagat as an evaluator for the moderate sedation onsite inspection and evaluation program.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco, Thakur.
Nays: None.
Abstentions: None.
Absent: Medina, Yu.
Recusals: None.

The motion passed.

(M/S/C) (Thakur/Felsenfeld) to appoint Dr. Ryan Kearbey as an evaluator for the moderate sedation onsite inspection and evaluation program.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco, Thakur.
Nays: None.
Abstentions: None.
Absent: Medina, Yu.
Recusals: None.

The motion passed.

(M/S/C) (Molina/Olague) to appoint Dr. Michael Moreno as an evaluator for the moderate sedation onsite inspection and evaluation program.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco, Thakur.
Nays: None.
Abstentions: None.
Absent: Medina, Yu.
Recusals: None.

The motion passed.

(M/S/C) (Pacheco/Olague) to appoint Dr. Joan Otomo-Corge as an evaluator for the moderate sedation onsite inspection and evaluation program.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Larin, McKenzie, Olague, Pacheco, Thakur.
Nays: None.
Abstentions: Forge, Molina.
Absent: Medina, Yu.
Recusals: Felsenfeld.

The motion passed.

Agenda Item 16: Discussion and Possible Action Regarding Executive Officer Salary

Dr. Montez provided the report, which is available in the meeting materials. She disclosed that the exempt level increase for the Executive Officer (EO) position did clear DCA and Agency in January of 2023 and is sitting at California Department of Human Resources (CalHR). She hopes to get some resolution soon so that perhaps in August the Board can discuss this further.

President Felsenfeld mentioned that he was very proud to have written a letter of recommendation on Dr. Montez's behalf and that it is moving through.

President Felsenfeld requested public comment on this item. There were no public comments made on this item.

Agenda Item 17: Recess Open Session Until May 19, 2023, at 8:00 a.m.

President Felsenfeld recessed Open Session at 12:32 p.m.

Agenda Item 18: Convene Closed Session

At 1:45 p.m., the Board convened Closed Session.

Agenda Item 19: Pursuant to Government Code Section 11126(e)(1) and (2)(A), the Board will Confer with and Receive Advice from Legal Counsel and Deliberate Regarding Sulitzer, et al. v. Tippins, et al., United States District Court, Central District of California, Western Division, Case No. 2:19-cv-08902-GW-MAA

The Board convened in Closed Session to discuss a pending litigation matter.

Agenda Item 20: Pursuant to Government Code Section 11126(c)(3), the Board Will Meet in Closed Session to Deliberate and Vote on Disciplinary Matters, Including Stipulations and Proposed Decisions

The Board convened in Closed Session to discuss disciplinary matters.

Agenda Item 21: Adjourn Closed Session

President Felsenfeld adjourned Closed Session at 3:32 p.m.

8:00 a.m., Friday, May 19, 2023

Agenda Item 22: Reconvene Open Session – Call to Order/Roll Call/Establishment of a Quorum

President Felsenfeld called the meeting to order at 8:04 a.m. Secretary Larin called the roll; 8 Board Members were present, and a quorum was established. Board Members Medina and Yu were absent. Board Member Thakur joined the meeting after roll call at 8:05 a.m.

Agenda Item 23: President's Report on Closed Session Items

President Felsenfeld provided a verbal report to the Board regarding Closed Session items. He reported that the Board adopted a proposed decision on the petition for early

termination of probation of petitioner J.D., and discussed and took action on a decision after reconsideration regarding respondent M.P. Additionally, President Felsenfeld reported that the Board heard an update on a pending litigation matter.

Agenda Item 24: Examinations

Agenda Item 24.a.: Report on Commission on Dental Competency Assessment, Western Regional Examining Board, and The Council of Interstate Testing Agencies (CDCA-WREB-CITA)

Shayna Overfelt, Senior Advisor to CDCA-WREB-CITA, provided a verbal report on their activities.

President Felsenfeld asked whether it is correct that failure rates are no longer five percent but are dropping down to 20 and 30 percent. Ms. Overfelt replied that it depends on how you look at the examination data. CDCA-WREB-CITA takes it by procedure instead of by the entire exam. However, schools will take the entire exam and if they have a student who is unsuccessful in the single component, they get tallied into this section of unsuccessful. However, we are not seeing a huge drop in procedure based as we look at it across the country. The one procedure that has shown a little bit of deficiency is the posterior restoration which is attributed to the CompeDont tooth. Our technology has somewhat become a process where each candidate is getting a tooth that we have deemed has appropriate carries, that it is no longer a small incipient lesion that warrants the removal of carries. They are actually doing a diagnosis of the tooth and determining if carries has been removed based on the treatment they have rendered that day in the clinic chair.

President Felsenfeld stated that if 100 individuals take this exam, how many of them actually get their license right then and there within that exam period. Ms. Overfelt replied that CDCA-WREB-CITA have integrated the examination process into their educational platform. Once they take that first component and if they are unsuccessful and the scheduling has been done properly, they will take that second attempt before they graduate. If they needed a retake that allows time for remediation, CDCA-WREB-CITA does not believe at this moment in doing on-site retakes. If you are unsuccessful during that first exam, faculty has an opportunity to remediate if necessary. If remediation was not necessary and it was a bad day, students still have an opportunity to retake at our next exam at no cost. Once we get through that second process, we are seeing our numbers up into the well 90 percent range. With some examinations if you are unsuccessful on Saturday, they will retest you on Sunday and then they give you the results all joined together on Monday. If we were to do the same thing, our numbers would look the same; we just divide it up based on examination. She conveyed that we are seeing 90 percent to 95-96 percent pass rate after a remediation if necessary.

Secretary Larin asked what the procedure is for California to become a member state. Ms. Overfelt replied that it is as simple as sending an email stating that California would like to become a member state and CDCA-WREB-CITA representatives would then gather the Board's information and get California into their system.

Board Member Chan asked how many candidates come from outside of California that are successfully passing the exam. Ms. Overfelt replied that she does not have that data at the top of her head and added that when students are taking the ADEX exam due to portability, they often state that California, Texas, and Florida are their highlights of where they may be looking to practice and why ADEX is valuable to them.

President Felsenfeld requested public comment on this item. There were no public comments made on this item.

Agenda Item 25: Discussion and Possible Action on Office of Professional Examination Services (OPES) Survey Results Regarding the Use of Local Anesthesia and Nitrous Oxide in Procedures Performed by Registered Dental Assistants in Extended Functions (RDAEFs)

Dr. Montez provided the report, which is available in the meeting materials

Board Member Rosalinda Olague recalled that, five years ago, this issue was on the table for conversation. She voiced surveys had been reviewed and presented at the DAC and at the Board, but in her outlook, there has been little movement forward. Board Member Olague suggested that the Board consider revisiting this topic in 2024.

Dr. Montez noted that she would like to package this issue with the dental assisting regulations that had been tabled, so that when the Board takes a global look at things, it can add this to part of the pieces for consideration.

Ms. Welch noted that Joan Greenfield brought this issue to the DAC in 2018 for support to expand the duties of RDAEFs in the administration of nitrous oxide, and stated that the Board typically does not sponsor legislation for expansion of scope of duties. Ms. Welch added that one of the things that was discussed was to take a survey to see if professionals wanted this ability; that survey had been completed, and there had been objections to the survey in that it was not large enough in scope of the professionals who were surveyed because it was limited to dentists and RDAEFs. She pointed out that there is information now that stakeholders could utilize to take to legislators and seek a scope expansion bill themselves. Ms. Welch asked for clarification on what meeting materials would need to be prepared so the Board could have a full discussion if this issue was brought back in 2024.

Dr. Montez wanted to look at the dental assisting regulation package that was shelved, look at what was done, what is being done with AB 481, how this may fit into it, and any other pieces of information that are out there. She articulated that she would need some time to sort through projects relating to dental assisting that had been started and tabled and then bring it together. The meeting agenda item would be an update on the dental assisting regulations with this item folded in as possible recommendations; it would go to the DAC first with possible recommendations on next steps.

(M/S/C) (Olague/Chan) to revisit the item in 2024.

President Felsenfeld requested public comment before the Board acted on the motion. The Board received public comment.

Ms. Becker, representing the Alliance, encouraged continued conversation and understood the scope of practice discussion and how it needed to be routed. However, they encouraged continued conversation as it has been part of conversation for quite some time to be able to move forward on this.

Tooka Zokaie, representing CDA, verbalized that they supported the motion and the information Ms. Welch shared in her legal expertise. If the survey did continue to move forward with the package into 2024, they recommended ensuring that it is clear as there were leading and biased questions within the survey that was conducted. She noted that there was a question where RDAEFs were asked about the potential patient benefits that had clear confirmation biased language. As the package moves forward with the questionnaire, they encouraged the Board to keep in mind the way that the questions were asked for the survey results and the biases within them.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco, Thakur.

Nays: None.

Abstentions: None.

Absent: Medina, Yu.

Recusals: None.

The motion passed.

Agenda Item 26: Discussion of Board Approval of Foreign Dental Schools

Dr. Montez provided the report, which is available in the meeting materials.

Board Member Molina thanked Board staff for providing a summary on the foreign schools and clarified that it only took two years for the foreign schools to become Board approved versus six years of De La Salle University School of Dentistry attempting to obtain approval from Commission on Dental Accreditation (CODA) and not being able to do so. Board Member Molina spoke to the issues raised by the flyer advertising State University of Medicine and Pharmacy “Nicolae Testemitanu” of the Republic of Moldova (SUMP). As far as she is concerned, she is advocating for schools to continue to be accredited because she believes that the community is not really being served and that there are not enough dentists. Board Member Molina affirmed that CDA has recently published that a lot of dentists are retiring due to the baby boomer generation and noted that students are graduating with an enormous debt on average of half a million dollars.

Organizations like AltaMed undoubtedly benefit from having these students come back and serve the communities.

President Felsenfeld requested public comment on this item. The Board received public comment.

Dr. Ariane Terlet, speaking on behalf of herself, shared that when she served on the Board, she certified De La Salle University School of Dentistry and agrees with Dr. Montez's comments. She disclosed that the process of accrediting schools is very difficult as is timely and costly and that you have to keep up with all the regulations. When she went down to Mexico originally, the issue was that CODA was not fully prepared to credit foreign schools; they were in the process of it. The Board did not wait for CODA accreditation and moved forward to start the approval process. It has always been the intention that when CODA was able to certify that this process would be turned over to CODA. Dr. Terlet communicated that the other issue is that it does not take 11 years to get CODA accreditation but will take about two years. SUMP started the accreditation, got their results back, found deficiencies, and did not appeal the deficiencies or correct them because they had a change of administration of the president of the university who did not want to move forward with it. Currently, the new president is very much in favor of getting CODA accreditation and the university is moving on it. She voiced that the issue with De La Salle University School of Dentistry is that they want international accreditation of their medical school and their dental school. Therefore, the university has restarted the process. Had they continued the process, there is not a reason to think that they would have been denied. As a dental director for a federally qualified health center, Dr. Terlet disclosed and that not everybody is going to serve the community and that it is not necessarily true that public health is being served.

Secretary Larin voiced that she agrees with Dr. Terlet's comments and that the only issue she has is that students who graduate after 2024 are no longer acceptable. She expressed that that is a short timeframe and requested that the Board give them a couple extra years.

Agenda Item 27.a.: Discussion and Possible Action on Legislative Proposal to Amend Business and Professions Code (BPC) Section 1634.1 Regarding Licensure by Residency Requirements

Ms. Ragali provided the report, which is available in the meeting materials.

(M/S/C) (Chan/Forge) to include in the Board's next Sunset Review Report a recommendation to amend BPC section 1634.1 to clarify the Licensure by Residency requirements.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco, Thakur.

Nays: None.

Abstentions: None.

Absent: Medina, Yu.

Recusals: None.

The motion passed.

At 9:12 a.m., the Board recessed for a break.

At 9:34 a.m., the Board reconvened

Agenda Item 27.b.: Discussion and Possible Action on Legislative Proposal to Amend BPC Sections 1601.1 and 1740 and Repeal BPC Section 1742 Regarding Dental Assisting Council

Ms. Bruggeman provided the report, which is available in the meeting materials.

The Board was asked to consider Board staff's request to include in the Board's Sunset Review Report a legislative proposal to amend sections 1601.1 and 1740, and repeal section 1742 of the BPC. The Board was advised of the DAC recommendation issued on May 18, 2023, to amend BPC section 1601.1 to change the Board composition to increase the number of RDAs from one to three and add a new sentence at the end of subdivision (a) that would establish the following criteria for the three RDA members: one RDA with at least five years of professional experience; one RDAEF with at least five years of professional experience; and one RDA who is a member of the faculty of a Board approved RDA or RDAEF educational program and has at least five years of professional experience. The DAC rejected Board staff's recommendation to repeal the DAC.

Board Member Forge asked what the benefit or non-benefit would be if the Board eliminated the DAC. Dr. Montez replied that the concerns that were raised had to do with the fact that it is very time consuming with regard to staff resources and costs to develop and run the DAC. In an attempt to streamline dental assisting issues, the thought was to make the DAC a standing committee so that they could do different kinds of assignments and work offline, bringing issues to the Board meeting for discussion. Most of the time, items would be discussed at the DAC meeting and then they would be held over so that staff could do further research, develop agenda items, and then bring them to the Board meeting. This causes a delay as there are a lot of dental assisting items that need to be addressed. To not discourage transparency, everything that would be done behind the scenes would be brought to a Board meeting for discussions together. She voiced that there seemed to not be a good flow of

communication in action when the DAC meets first, and then the Board gets bits and pieces of what was discussed.

Ms. Welch added that part of the responsibilities of a potential two-member RDA working group or committee of the Board would be two Board members working together on RDA issues with the ability to engage stakeholders directly and potentially in a more robust process. The two members would be able to set up meetings with stakeholders, hear their issues, work on regulations or legislation, and then bring those concepts and worked through ideas and proposals to the Board for a broader discussion through the public process. Ms. Welch conveyed that it is intended to increase stakeholder engagement behind the scenes while working on issues between meetings and then bringing it to the public and the Board members for discussion on a more vetted proposal.

Board Member Olague voiced that over the five years, recruiting individuals to the DAC had been extremely challenging where even the DAC did not have an established quorum; she had seen it create a bottleneck for movement. Being one of the committee members involved in the recruitment process for DAC members, she is very proud of the DAC and their full engagement, but it did take quite a bit to get there. She asked whether the DAC would be sustainable in the future.

Board Member Molina indicated that she was part of the COMDA committee a few years ago and was happy to see that they had restructured it. By attending the DAC meetings and then the full Board meeting afterwards, she saw the value of having DAC meetings and talking about the issues that pertain to dental assisting specifically. She noted that there was going to be a fine line as to how the Board would have a subcommittee express their concerns and issues and then work with Board staff to ensure that they are not overburdened and are able to do their work. Board Member Molina stated that she could see why the DAC is important and understood that Dr. Montez and staff were concerned about the amount of work that they have to do.

Dr. Montez emphasized that it was not just the burden on staff, but it was the fact that the Board needs the DAC, if it continued, to be very active and to continue to do work to the extent that they cannot outside of those meetings and not rely on Board staff to do the work. She expressed that the standing committee is better because they can go out and work with the stakeholders without having to do the formality that has to be done with the DAC.

Secretary Larin was in favor of eliminating the DAC because as she had been to their meetings, she had seen them work for almost an hour and a half on topics, and when it is brought to the Board, it is rejected.

(M/S/C) (Larin/Olague) to amend BPC section 1740 to remove reference to the DAC and repeal BPC section 1742 which establishes the DAC and include this legislative recommendation in the Board's Sunset Review Report.

President Felsenfeld requested public comment before the Board acted on the motion. The Board received public comment.

Ms. Becker, representing the Alliance, voiced that the Alliance emphatically opposed the elimination of the DAC for representation of all dental assisting.

Ms. Cruz was in favor of keeping the DAC.

Dr. Whitcher, formerly a Board liaison to the DAC, representing CDA, noted that when the Legislature put the DAC together, the goal they saw was to include representation from a diverse profession including practicing RDAs, of which there are three, RDAEFs, of which there are two, and educators, of which there are two. He noted that the reason they did this was that there was a tendency for the educators, and to some extent the RDAEFs, to dominate the discussion, as they were often the most articulate and the loudest voices in the room. Dr. Whitcher indicated that the Board should not forget its goals are diversity, equity, inclusion, and belonging, and that that is the thing that CDA wanted to see on the DAC. He was against the elimination of the DAC, recognized the need for efficiency, and believed there may be other ways to achieve this through the use of electronic meetings. Having served on the DAC, there was a number of two-person subcommittees of which he was a member and supported that, as it was a very efficient way of doing things. Dr. Whitcher stated the goal of government is not always to be efficient but to be fair and to have adequate representation.

Dr. Lori Gagliardi, representing the Foundation for Allied Dental Education (FADE), a non-profit organization that advocates for standards of dental assisting education, quality assurance, and patient safety, concurred with the previous speakers. They understand that although the DAC may take a long time to come to a resolution on a topic and when it comes to the Board there is a short conversation, dental assisting community voices are heard during DAC meetings and are allowed the opportunity to voice their concerns and issues. By having issues presented at the DAC meetings, the Board did not waste a lot of time at their meetings going through those same issues. They encouraged the Board to not get rid of the DAC and support retaining the legislation as currently written.

Claudia Pohl, representing herself, voiced that to have the DAC repealed was taking away the voice of those 30,000 licensed RDAs, RDAEFs, Orthodontic Assistant Permit (OAP) holders, Dental Sedation Assistant (DSA) Permitholders, and the unlicensed dental assistants, and it is very difficult to replicate the diversity, experience, and background that those seven DAC members have with a two-person committee. She asked the Board to not repeal the DAC but to keep it and add in those work groups, which had been done before. She stated that there are other ideas that CDAA and the Alliance had for addressing some of the objections and barriers that were raised in the proposal by the Board.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Thakur.

Nays: None.

Abstentions: Pacheco.

Absent: Medina, Yu.

Recusals: None.

The motion passed.

Mr. Bruggeman stated that the legislative proposal in the meeting materials would maintain the current total number of Board members but would reduce the number of dentist members by one and increase the number of RDA members by one. He stated that the DAC made a recommendation to expand the membership of the Board by two, maintaining the current level of dentist members, and to add two new RDA members with specifics on the qualifications for each of the RDA members.

Board Member Chan offered a substitution concept to maintain the current statutory census of 15 and within the 15, eight dentist members with the two qualifiers (the public health one and the educational one) and seven described as public members. He noted that he would advocate the composition of the described public members as one hygienist, two RDAs, and four public members. He stated that the key word in creating the Board is describing in BPC section 1601 practicing dentist, which is the primary deliverer in that system and also the primary responsibility of that system. Additionally, he noted that optics also plays a role.

Ms. Welch clarified that a public member on a board is not a licensee of that board, and that there are separate provisions, requirements, and conflicts of interest BPC sections specific to public members. She was not sure if the numbers Board Member Chan mentioned took that into account. Ms. Welch clarified who a public member actually is in relation to the Board's licensees and noted that the Board would really have eight licensed dentists, three dental auxiliary licensees, and five public members.

Board Member Chan stated that the proposed increase in RDA members would be to acknowledge some of the arguments for the organizational bottlenecks.

Dr. Montez reminded the Board members that although many of DCA's boards have a majority of professional membership, there is a lot of scrutiny with regard to antitrust concerns. Therefore, that is the reason why there is a balance of public members and professional members. As one of the suggestions was to address the RDAs and the need with regard to educators and specialties, Dr. Montez suggested that the Board think about whether they would want to add an additional RDA member. She stated it was important to keep the public members, and there was wide support for keeping the number of dentists, so the Board could look at increasing the number of RDAs by one

member. There may be concerns about having an even number of Board members for voting purposes, but at least adding an RDA sounded important with an educator background.

President Felsenfeld requested Board counsel comment on the issue of having an even number of 16 members on the Board. Ms. Welch stated that it can matter where there is not a majority of voting members. If that was the situation, the Board members likely would likely continue to have discussion and then additional votes to come up with the appropriate action that the majority of the members agreed with. She stated there are other boards with an even composition. The Board currently has an even number of members since it has three dentist member vacancies, and the Board is able to continue to do the business of the Board with an even composition.

Dr. Molina stated that at the May 18, 2023 DAC meeting, there was mention of suggesting two more members so that representatives such as dental assisting educators, RDAEFs, and RDAs will be represented in the Board. She noted that might take care of not having to have an even number for voting purposes, and the Board would have representation from different specialties and the dental assisting profession. President Felsenfeld replied that if a resolution comes up and there is a tie, that resolution does not pass as the Board needs a majority. To increase the number of Board members would be a little bit contrary to the way boards are supposed to be; larger boards are not needed, but boards that are more functional. In a recommendation such as Board Member Chan had mentioned, the Board would have two RDAs, one RDH, four public members, and eight dentists; it can be an even number.

Dr. Montez clarified the recommendation to reduce the number of public members from five to four.

(M/S/C) (Chan/Olague) to recommend a legislative proposal to amend BPC section 1601.1 for a Board composition of eight practicing dentists, including one educator and one in a public health community setting, two RDAs, with one with five years of professional experience and one RDA educator from a Board approved RDA educational program, one RDH, and four public members.

President Felsenfeld requested public comment before the Board acted on the motion. The Board received public comment.

Ms. Becker, representing the Alliance, expressed support of the DAC recommendation of three RDAs on the Board with the addition of the existing RDA, an additional RDAEF, and the addition of an RDA educator with the stipulations and the qualifications as previously discussed. With this new compromise, the tenor is that dental assisting will still be at a deficit in being represented on the Board.

Dr. Gagliardi, representing FADE, asked for clarification on the recommended RDA educator and asked whether it could be an educator from an RDA or an RDAEF approved program, so that it is not limited to only being an RDA educator.

Dr. Whitcher, CDA representative, suggested the Board keep in mind Dr. Montez's comments about removing one of the Board public members. He did not think that would work because of the question of oversight and balance on the Board. He reminded the Board that this is a legislative proposal that would go into a package and through a public process and then through approval. Coming from the Board, the proposal would carry a lot of weight, but it is not the final version. He noted that when the DAC was put together, it was considered to add an RDA position to the Board. For the very reasons heard that there are concerns about representation from the various members of the dental assisting community, the DAC was substituted for that additional member for all of the right reasons.

In response to public comment, President Felsenfeld said it would be fine to make the RDA educator member from a Board-approved RDA or RDAEF educational program.

Board Member Meredith McKenzie stated that given the balance here, to ensure the process works well and dental assisting voices are included, she was a little bit more inclined to keeping the public members and adding two additional members to eliminate the even number issue. She suggested to have two additional RDAs, including the broader educator and then additional RDA, which would help increase inclusion but also keep discussions altogether. She disclosed that could be a better potential option for balancing both sides.

Ms. Welch clarified the proposed amendment to the motion was to have two RDA members, one with five years of licensed experience and one faculty member of a Board-approved RDA or RDAEF educational program, and reduce the number of public members to four.

Board Member Chan clarified the total number of members with the revised motion would be 15.

Secretary Larin read the amendment to the motion to amend BPC section 1601.1 so that the Board would consist of eight practicing dentists, one RDH, two RDAs, one RDA with at least five years of practice and one educator from a Board-approved RDA or RDAEF educational program, and four public members.

President Felsenfeld called for a vote to amend the motion. Secretary Larin took a roll call vote on the amendment to the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, Molina, Olague, Pacheco, Thakur.
Nays: McKenzie.
Abstentions: None.

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Absent: Medina, Yu.
Recusals: None.

The amendment to the motion passed.

(Amended M/S/C) (Chan/Olague) to recommend a legislative proposal to amend BPC section 1601.1 to change the composition of the Board to have eight practicing dentists, with one educator and one in a public health community setting, two RDAs, with one RDA with five years of professional experience and one RDA educator from a Board-approved RDA or RDAEF educational program, one RDH, and four public members.

President Felsenfeld requested public comment before the Board acted on the motion. The Board received public comment.

Ms. Becker, the Alliance representative, asked for clarification that the Board would be voting on two RDAs, not three RDAs. President Felsenfeld responded that was correct.

Dr. Montez asked, in the order of the motions, where did the comments about maintaining public membership fall, as she heard two Board members, as well as the public, express some concerns about this. President Felsenfeld replied that within the resolution, he believed the motion was for four public members, thereby decreasing it.

Board Member Chan stated that on the California Board of Naturopathic Medicine, there are nine members - five neuropathic physicians, two MDs, and two public members. On the Board of Chiropractic Examiners, there are seven members - five chiropractors and two public members. Therefore, it is not inconsistent with that precedent.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, Molina, Olague, Pacheco, Thakur.
Nays: McKenzie.
Abstentions: None.
Absent: Medina, Yu.
Recusals: None.

The amended motion passed.

Agenda Item 27.c.: Discussion and Possible Action on Legislative Proposal to Modify Statutes Related to General Anesthesia and Sedation Permits

Mr. Bruggeman provided the report, which is available in the meeting materials.

Board Member Chan verbalized that he understands the rhetorical reasons for defining what good standing means and clarified that it is not for someone that is going through an unresolved complaint or going through the process yet. He disclosed that the intent

behind it is justifiable as it is a safeguard for someone continuing doing general anesthesia or sedation. He asked what happens if there is an unrelated action on the good standing and noted that all that is left is the language that is on paper and that there is another variation that needs to be worked out.

Ms. Welch responded that all the definitions for good standing were aimed at a license or permit that is active and unrestricted, and most public reprovals, if they contain a condition, that is not a restricted license. Therefore, a public reprovall being issued would not affect the ability to apply for a permit and largely what is happening is that the existing language requires good standing to administer general anesthesia and sedation. She clarified that good standing should not be required to administer but required to apply for the permit. If the dentist license was on probation or there was a pending disciplinary action, that would allow the Board to hold up that application and not issue a permit pending the consideration of the discipline or the pending restriction of the dentist license. Ms. Welch indicated that the intent behind this proposal was to not allow permits to be issued while there was a pending action on the dentist license. This would allow the licensing unit to hold up an application for a permit when they pull up in the system that an applicant has got some pending discipline. Until that gets resolved, the permit could not be issued. Separately, if a permit already was issued, the licensee could continue to administer.

(M/S/C) (Felsenfeld/Chan) to submit to the California State Legislature in the Board's Sunset Review Report a recommendation to add section 1646.12 to article 2.75 and sections 1647.35, 1647.36, and 1647.37 to article 2.87, amend sections 1646, 1646.1, 1646.2, 1646.3, and 1646.9 of article 2.75, sections 1647.2, 1647.3, and 1647.6 of article 2.84, sections 1647.18, 1647.19, 1647.20, and 1647.22 of article 2.86, sections 1647.30, 1647.31, 1647.35, and 1647.36 of article 2.87, and section 1724 of article 6, of Chapter 4, and repeal section 2079 of article 3 of Chapter 5, of Division 2 of the BPC.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco, Thakur.

Nays: None.

Abstentions: None.

Absent: Medina, Yu.

Recusals: None.

The motion passed.

At 10:48 a.m., the Board recessed for a break.

At 11:06 a.m., the Board reconvened

Agenda Item 28: Update, Discussion, and Possible Action on Proposed Regulations

Agenda Item 28.a.: Status Update on Pending Regulations

Mr. Bruggeman provided the report, which is available in the meeting materials. He disclosed that since the last Board meeting, the rulemaking package concerning the implementation of AB 107, which would establish temporary licensure for military spouses and domestic partners, was with DCA for review, and once their review is completed, Board staff expected to be able to file that package with the Office of Administrative Law (OAL). Regarding the Board's Disciplinary Guidelines, the Board approved that language at the February 2023 Board meeting, and Board staff were working with the Department of Finance and other staff to prepare that package for review by DCA. He expressed that it is anticipated that package will have moved forward by the time there is another update at the August 2023 Board meeting.

Agenda Item 28.b.: Discussion and Possible Action to Initiate a Rulemaking to Amend California Code of Regulations (CCR), Title 16, Sections 1012, 1017.2, and 1021 (Replacement Licenses and Fees, and Inactive Licenses)

Mr. Bruggeman gave the report on this item. He referred to the meeting materials provided to the members including the revised meeting materials for this item. The materials were revised to add a workload analysis and revise the agenda item memo to explain the fee increase needed for replacement of a substitute pocket license or wall certificate (changes proposed to CCR sections 1012 and 1021).

Mr. Bruggeman described the proposed amendments as described in the revised memo in the meeting materials to CCR, title 16, sections 1012, 1017.2, and 1021, which would change the application processes for obtaining a replacement license including increasing the current fee for a replacement pocket license or wall certificate (CCR sections 1012 and 1021) and for changing a license status from active to inactive, or from inactive to active status (CCR section 1017.2).

For CCR section 1012, Mr. Bruggeman explained that the current fingerprint requirement for the replacement license would be eliminated, and the new LIC-9 form would be incorporated into the regulations by reference as the form to complete in order to obtain a replacement license. The fee for the replacement license would be increased from the current \$50 to \$111.

Secretary Larin expressed concerns about the quality of the current paper pocket license and the cost increase under this current proposal. She asked if the fee were to be increased if there were any way to improve the quality of the pocket license issued to licensees and cited the Contractors State License Board's hard plastic pocket license as an example. Mr. Bruggeman stated that these fees have not been changed in almost 20 years, and he believed this proposed increase reflects changes in the cost of staff time to process these requests. On the quality issue, Ms. Montez indicated that the Board could explore that issue with the vendor but reminded the Board that the contract is

DCA-wide. Ms Schieldge added that the fee for replacing a license has not been increased since 2006, and only the DCA has authority under current law to enter into or modify the contract, so the Board is bound to work under that contract at the moment.

Mr. Bruggeman further explained that for the process to change a licensee's status from active to inactive (or vice versa), the current application form would be repealed and replaced by a new one. The proposed changes include eliminating the requirement for inactive licensees to provide evidence of their completion of continuing education credits with application to restore their licenses to active status. They are currently required to provide evidence of completing the required number of credits, and the proposed language would have licensees only certify that they have completed the required credits as specified, which is similar to the current process for renewals. He further explained that if a licensee is selected for an audit, then they would be asked to provide physical evidence at that time, therefore, this proposal would be to provide consistency in processes, and reduce the workload for the staff.

(M/S/C) (Thakur/Pacheco) to approve the proposed regulatory text and incorporated forms for Sections 1012, 1017.2, and 1021 and submit the text to the Director of the Department of Consumer Affairs and the Business, Consumer Services, and Housing Agency for review and if no adverse comments are received, authorize the Executive Officer to take all steps necessary to initiate the rulemaking process, make any non-substantive changes to the text and the package, and set the matter for a hearing if requested. If after the 45-day public comment period, no adverse comments are received, and no public hearing is requested, authorize the Executive Officer to take all steps necessary to complete the rulemaking, and adopt the proposed regulations as noticed for 16 CCR Sections 1012, 1017.2, and 1021.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco, Thakur.

Nays: None

Abstentions: None

Absent: Medina, Yu

Recusals: None

The motion passed.

Agenda Item 29: Update, Discussion, and Possible Action on 2023/2024 Legislation Impacting the Board, the Department of Consumer Affairs, and/or the Dental Profession
Agenda Item 29.a.: 2023 Tentative Legislative Calendar – Information Only

Mr. Bruggeman provided an overview of the 2023 Tentative Legislative Calendar, which is available in the meeting materials. Mr. Bruggeman stated that the relevant deadlines

are April 28, which was the last day for policy committees to hear and report to fiscal committees fiscal bills introduced in their house for this year. This means that any legislation introduced in the Assembly would have had to have passed their appropriate Assembly Committee by that point to become law this year, and the Appropriations Committee had to have heard those bills by May 19, 2023, to move them forward in the legislative process for this year. He voiced that he highlighted this due to the fact that some of the legislation that the Board has been tracking did not meet those deadlines and therefore would not have an option to become law this year barring some exceptional circumstances.

President Felsenfeld requested public comment on this item. There were no public comments made on this item.

Agenda Item 29.b.: Legislation of Interest

Mr. Bruggeman provided the report, which is available in the meeting materials. Board staff identified 16 bills, ACR 10, AB 481, AB 795, AB 883, AB 936, AB 996, AB 1028, AB 1257, AB 1395, AB 1396, AB 1398, AB 1552, SB 372, SB 544, SB 802, and SB 818 of potential interest to the Board.

AB 481

Mr. Bruggeman mentioned that this bill did pass the Assembly Appropriations Committee and was currently on the assembly floor. This bill would make significant changes to the dental assisting chapter of the Dental Practice Act.

Dr. Montez clarified that that once the Board takes a position, a letter can be crafted to the legislature noting what our concerns would be and that if the Board does choose to take a support if amended, she will refer to the comments that were discussed and brought to the Board's attention by the DAC and the concerns that the Board staff have raised and would put that together on behalf of the Board.

(M/S/C) (Felsenfeld/Molina) to support AB 481 if amended.

President Felsenfeld requested public comment before the Board acted on the motion. The Board received public comment.

Ms. McCune, representing CDA, noted that the DAC report was very reflective of the issues and the amendments that CDA was planning on taking once it hits either the Assembly floor or the Senate. She mentioned that CDA did take out two provisions of the bill when it was in Assembly Business and Professions Committee and that was related to changes proposed for the OAP. Specifically, these were around eliminating the PSI Examination for OAP applicants, in addition to a new duty for OAP holders that would allow for the use of a low-speed handpiece when removing directly bonded materials. As there were objections from the Alliance, CDA agreed to remove those provisions, punt it over to the Board to weigh in on it, and if there was agreement or consensus on one or both of those issues, CDA would go forward and move it back in

the bill. She stated that she did want to bring that to the Board and have the Council and staff figure out how to facilitate that conversation if appropriate and then turn it over to the California Association of Orthodontists (CAO), who is the strong proponent for both of those additions.

Dr. Harry Dougherty, president of the CAO, stated that one of the issues they had, at least for eliminating the exam for the OAP program, was that it does not reflect what is being taught, and there are educational guidelines that do not reflect what is going on. He suggested the Board think about changing or reviewing some of the educational guidelines to what was being done in practice now and how the technology reflects that. With regard to removing material with a slow speed handpiece, he noted that this already was being done with scalers and ultrasonics. Dr. Dougherty asked the Board to consider reviewing the educational requirements across the board to see that it reflects and mentioned that was one of the reasons why they wanted to ask that the exam is no longer there, as it does not reflect the educational requirements. They want to make sure that the public interest is protected, they are testing people on what is actually done, and the educational requirements are relevant to dental practice today.

Ms. Welch raised concern about timing because it seemed like CDA was requesting the Board's input on some additional amendments that the Board could not actually provide until the August meeting. While Board staff could facilitate conversations and provide recommendations on proposed amendments to a bill, Board staff could not represent that was a Board action unless the Board actually discussed and took a position.

Ms. McCune clarified that she was proposing that if there were additional amendments that were responsive to those two OAP issues, the Board could include that in its letter, as that would be a better way to work within the confines of the agenda.

Dr. Dougherty explained that what he was proposing was not to make those changes but to inform the Board that the CAO would be more than happy to work with the Board for the educational guidelines.

Ms. Becker, representing the Alliance, voiced appreciation for CDA's openness in working with them on the bill and said that as the current language is published, the Alliance still opposed the bill in regard to the lab for the infection control portion unless amended. She noted that the Alliance continued to work with CDA on amendments and suggestions to hopefully find a compromise.

Dr. Gagliardi, representing FADE, voiced their appreciation of CDA's collaboration on this bill and the inclusiveness and sensitivity for involving multiple stakeholders. FADE had two areas related to the bill that they would like to have their concerns noted, one being that they supported CDA's proposal to add an alternative eight-hour infection control course while ensuring education, training, and public protection are central to the outcome. She stated that employees are required to have annual California Division of Occupational Safety and Health (Cal/OSHA) training, including bloodborne pathogens,

and there are no total course hours, no hands-on elements, and no evidence to suggest the absence of a hands-on lab component would in any way negatively impact the employee's ability to protect themselves or the public. FADE also noted that the Board had concerns regarding the preceptorship and how they would validate their CE or their units to fulfill that. She stated that oftentimes they go to workshops that are multiple days and have one certificate for 80 hours that just lists the content. She suggested that the review of CE certificates might not be quite as strenuous as the Board thinks it will be. The last area Dr. Gagliardi mentioned was on the CDA pathway to licensure for an RDA. She noted that they were not sure whether the information in the Board packet accurately reflected it, as it is an eligibility pathway and not necessarily a pathway to maintain both licenses or credentials. Additionally, they believed this provides for the military dental assisting workforce in California, and mentioned that those teaching CODA accredited programs and those working in a veterans dental clinic who must have a CDA to be employable could also get an RDA and contribute to California's workforce. FADE encouraged the Board to support this bill if amended.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco, Thakur.

Nays: None.

Abstentions: None.

Absent: Medina, Yu.

Recusals: None.

The motion passed.

AB 936

Mr. Bruggeman noted that this bill would extend the eligibility of dental students to participate in sponsored healthcare events from what is currently limited to the final year dental students to students that have entered the clinical training portion of their education. The bill would stipulate that the supervising dentist would be responsible for assessing the ability of these students to address the specific cases that are presented at these health care events. The bill has been designated as an urgency statute which means that it will become effective immediately upon signing.

(M/S/C) (Felsenfeld/Olague) to support AB 936.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco, Thakur.

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Nays: None.
Abstentions: None.
Absent: Medina, Yu.
Recusals: None.

The motion passed.

AB 1552

Mr. Bruggeman declared that this that was amended in March of 2023 and addresses the foreign dental school approval process and the legislation as written would effectively reinstate the process by which the Board used to approve foreign dental schools and essentially set the clock back a few years.

(M/S/C) (McKenzie/Pacheco) to oppose AB 1552.

President Felsenfeld requested public comment before the Board acted on the motion. The Board received public comment.

Ms. McCune, CDA representative, stated that they are in strong support of the staff recommendation for this bill and reminded the public that CDA sponsored a cleanup bill back in 2021 to address some concerns that were brought up by a previous Board member earlier in this meeting. She stated that the students who were enrolled at both SUMP and De La Salle University School of Dentistry at the time of January 1, 2020, will still be eligible to receive licensure and wanted to clarify that CDA cleaned that up after passage of AB 1519.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, McKenzie, Olague, Pacheco, Thakur.
Nays: Molina.
Abstentions: Larin.
Absent: Medina, Yu.
Recusals: None.

The motion passed.

SB 372

Mr. Bruggeman specified that this bill concerned the access to licensee registration records and instances where there were name and/or gender changes.

Dr. Montez emphasized that Board staff would need to establish procedures for removing a licensee's former name and gender from the online verification system and to disclose a licensee's current name in connection with a request linked to enforcement

action or search of a licensee by a previous name. She noted that the concern, expressed by some of the other boards at the department, is enforcement and making sure that there is continued public protection. By taking a position, the Board will be able to engage with the author on discussions about this and join the other boards who have also taken positions and are having these discussions. The intent is good but for consumer protection, we need to ensure that if an individual is looking to use the services of a dentist or a dental assistant, that they can be confident that there is not enforcement action or history decisions there.

Ms. Welch noted that a few boards for which she provides legal counsel had taken a watch position with concerns and submitted a letter stating they were watching the bill and supported the intent behind it, but there was concern about implementation of the bill with respect to disclosure of the licensee's name, in particular with respect to discipline. Ms. Welch stated that BPC section 27 requires the Board to post online disciplinary actions, and this bill seemed to create a conflict with that other statutory requirement to remove the former name from the Board's website. She stated that the other boards expressed the need for some clarification and hoped to work with the author to figure out an appropriate resolution to ensure that consumers are still receiving important information about their health care providers.

(M/S/C) (Felsenfeld/McKenzie) to watch SB 372 and express concerns.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco, Thakur.

Nays: None.

Abstentions: None.

Absent: Medina, Yu.

Recusals: None.

The motion passed.

SB 544

Mr. Bruggeman indicated that this bill would amend provisions of the Bagley-Keene Open Meeting Act to preserve, for the most part, the procedures the Board was able to use to utilize teleconferencing in the Board's meetings during the COVID-19 pandemic. This bill would permit participation via teleconference, and the law would no longer require that all teleconference locations be noticed in the agenda and be available to the public, as long as there was a meeting location that was available for teleconference and accessible to the public.

(M/S/C) (Chan/McKenzie) to support SB 544.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco, Thakur.

Nays: None.

Abstentions: None.

Absent: Medina, Yu.

Recusals: None.

The motion passed.

Agenda Item 30: Discussion on Prospective Legislative Proposals

Mr. Bruggeman introduced the report, which is available in the meeting materials.

President Felsenfeld requested public comment on this item. There were no public comments made on this item.

Agenda Item 31: Adjournment

President Felsenfeld adjourned the meeting at 12:05 a.m.



MEMORANDUM

DATE	July 25, 2023
TO	Members of the Dental Board of California
FROM	Mirela Taran, Administrative Analyst Dental Board of California
SUBJECT	Agenda Item 4.: Board President Report

Background

Dr. Alan Felsenfeld, President of the Dental Board of California, will provide a verbal report.

Action Requested

No action requested.



DENTAL BOARD OF CALIFORNIA

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MEMORANDUM

DATE	July 25, 2023
TO	Members of the Dental Board of California
FROM	Mirela Taran, Administrative Analyst Dental Board of California
SUBJECT	Agenda Item 5.: Executive Officer Report

Background

Dr. Tracy Montez, Executive Officer of the Dental Board of California, will provide a verbal report.

Action Requested

No action requested.

DENTAL BOARD OF CALIFORNIA

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MEMORANDUM

DATE	July 25, 2023
TO	Members of the Dental Board of California
FROM	Mirela Taran, Administrative Analyst Dental Board of California
SUBJECT	Agenda Item 6.: Report on Department of Consumer Affairs Activities, which may include updates on the Department's Administrative Services, Human Resources, Enforcement, Information Technology, Communications and Outreach, as well as Legislative, Regulatory, and Policy Matters

Background

Ms. Yvonne Dorantes, Assistant Deputy Director of Board and Bureau Relations of the Department of Consumer Affairs, will provide a verbal report.

Action Requested

No action requested.

Agenda Item 6.: Report on Department of Consumer Affairs Activities, which may include updates on the Department's Administrative Services, Human Resources, Enforcement, Information Technology, Communications and Outreach, as well as Legislative, Regulatory, and Policy Matters
Dental Board of California Meeting
August 17-18, 2023



MEMORANDUM

DATE	August 2, 2023
TO	Members of the Dental Board of California
FROM	Wilbert Rumbaoa, Administrative Services Unit Manager Dental Board of California
SUBJECT	Agenda Item 7.: Budget Report

Background

The Dental Board of California (Board) administers the State Dentistry Fund (Fund), which derives revenues (primarily) through licensing-related fees to fund the Board's administrative, licensing, and enforcement activities.

The Board receives the legislated annual budget appropriation upon the chaptering of the Budget Act. The Board is statutorily required to remain within its appropriation spending limit and to ensure the Fund's ongoing solvency.

2023-24 Budget Act Summary:

The following chart provides an overview of [SB 101](#), Budget Act of 2023 (Chapter 12, Statutes of 2023) as it pertains to the Dental Board of California.

2023-24 Budget Act		
Fund	Revenue	Expenditures*
State Dentistry Fund	\$18,797,000	\$20,016,000

* \$283,000 (net) reimbursements – probation monitoring and fingerprints

Analysis of Fund Condition Statement (see Attachment 1):

The attached fund condition statement (FCS) is based on the 2023-24 Budget Act and 2022-23 Fiscal Month 11 Revenue and Expenditure projections. It has been updated with 2021-22 prior-year actual revenues and expenditures, which resulted in a fund balance reserve of \$15.8 million or 8.9 months in reserve. Other adjustments for statewide expenditures have also been included.

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Revenues (see Attachment 2) – The Board began 2022-23 with a fund balance of \$13.5 million and collected approximately \$18.9 million in revenues with \$3.4 million from initial license fees and \$14.7 million from license renewals.

The Board notes, [SB 501](#), Dentistry: anesthesia and sedation: report (Chapter 929, Statutes of 2018), created additional anesthesia permit and certificate types and fees. The Office of Administrative Law approved this regulatory action in August of 2022. Permit applicant revenues are estimated at \$141,000 per year, but this could fluctuate based on the workload in the first two years of implementation as existing permit holders transition to the new permit types.

Expenditures (see Attachment 3) – The Board’s 2022-23 prior year appropriation is \$19.1 million, and projects expenditures to be \$17.8 million. The FCS projects ongoing expenditures in the future with a three percent (growth factor) increase per year. The FCS also shows the Board fully expending its appropriation ongoing which has not been the trend in recent years. To the extent the Board does not fully expend its appropriation, any savings remains in the Fund for future use.

Overall expenditures are projected to rise in future years. Personnel services, investigation costs, and statewide contributions make up the largest portion of the increases in out years.

The Board notes, future legislation or other events could require the Board to request additional resources through the annual budget process, which would increase cost pressure on the Fund.

General Fund Loan – Item 1111-011-0741, Budget Act of 2020, authorizes a \$5 million loan transfer from the Fund to the General Fund (GF). The loan is required to be repaid with interest in the event the Board needs the funds, or if the GF no longer needs the funds.

The interest accrued is estimated at \$25,000 per year. The FCS currently indicates repayment in 2024-25.

The Board notes, the \$5 million repayment will be coordinated as part of any future regulatory and/or statutory fee increase proposals.

Dental Assistant Fund (disposition) – [Assembly Bill 1519](#), Healing Arts (Chapter 865, Statutes of 2019) abolished the Dental Assistant Fund, effective July 1, 2022, and any remaining funds shall be deposited into the Fund.

The current projected balance of \$2.9 million has remained in the Dental Assistant Fund since 2020 to ensure any financial obligations are paid. The Budget Office is currently working with the Department of Finance to facilitate the transfer.

Fund Balance Months in Reserve – The fund balance reserve reports the dollar amount remaining in the Fund at the end of any given fiscal year. This is used to calculate the

Months in Reserve balance based on projected expenditures for the next fiscal year. Typically, a healthy fund has about 3 to 6 months in reserve.

The fund balance reserve is currently stable but does show a declining balance in future years due to a structural imbalance caused by the fund's revenues projected to stay stationary, and the fund's expenditures to increase by 3%. The fund should remain healthy through 2026-27, although, unforeseen expenditures can cause this to change.

Structural Imbalance – A structural imbalance occurs when projected revenues are less than anticipated expenditures.

Action Required (future) – The Board will continue to monitor the Fund and work with the DCA Budget Office to ensure solvency.

As previously noted, the Board had significant 2021-22 prior-year savings of approximately \$2.6 million related to vacant positions. However, the Board is actively recruiting to fill these positions and any savings will likely be reduced in the future as the positions are filled.

The Board further notes, most existing license fee types currently being assessed are set below their statutory maximums and may be increased through regulations, which could eliminate the existing structural imbalance. Proposals for regulatory fee changes typically take 18 to 24 months to promulgate.

Board staff will be working with the DCA Budget Office to identify possible actions to reduce or eliminate the structural imbalance to ensure the Board remains solvent and able to fully meet its licensing and enforcement mandates.

Board staff will present the findings and recommendations at future board meetings to allow for public input and Board Member consideration.

Action Requested

No action requested.

Attachment 1

0741 - Dental Board of California Fund Analysis of Fund Condition
(Dollars in Thousands)
2023 Budget Act

Prepared 8.2.2023

PY Based on FM 11 Projections	Actuals	PY	Budget Act		
	2021-22	2022-23	CY	BY	BY +1
	2021-22	2022-23	2023-24	2024-25	2025-26
BEGINNING BALANCE	\$ 12,447	\$ 13,519	\$ 15,837	\$ 13,216	\$ 14,994
Prior Year Adjustment	\$ 290	\$ -	\$ -	\$ -	\$ -
Adjusted Beginning Balance	\$ 12,737	\$ 13,519	\$ 15,837	\$ 13,216	\$ 14,994
 REVENUES, TRANSFERS AND OTHER ADJUSTMENTS					
Revenues					
4121200 - Delinquent fees	\$ 351	\$ 405	\$ 323	\$ 323	\$ 323
4127400 - Renewal fees	\$ 14,990	\$ 14,687	\$ 14,978	\$ 14,978	\$ 14,978
4129200 - Other regulatory fees	\$ 176	\$ 209	\$ 162	\$ 162	\$ 162
4129400 - Other regulatory licenses and permits	\$ 2,880	\$ 3,251	\$ 3,095	\$ 3,095	\$ 3,095
4141200 - Sales of Documents	\$ 1	\$ -	\$ -	\$ -	\$ -
4143500 - Miscellaneous Services to the Public	\$ 19	\$ 12	\$ 48	\$ 48	\$ 48
4163000 - Income from surplus money investments	\$ 61	\$ 297	\$ 174	\$ 147	\$ 170
4171400 - Escheat of unclaimed checks and warrants	\$ 11	\$ 11	\$ 15	\$ 15	\$ 15
4172500 - Miscellaneous revenues	\$ 3	\$ 2	\$ 2	\$ 2	\$ 2
Totals, Revenues	\$ 18,492	\$ 18,874	\$ 18,797	\$ 18,770	\$ 18,793
Transfers to/from Other Funds					
Loan repayment from the General Fund (0001) to the State Dentistry Fund (0741) per Item 1111-011-0741, Budget Act of 2020	\$ -	\$ -	\$ -	\$ 5,026	\$ -
Revenue Transfer from the State Dental Assistant Fund (3142) to the State Dentistry Fund (0741) per Business and Professions Code Section 205.2	\$ -	\$ 2,963	\$ -	\$ -	\$ -
Operating Transfers To General Fund 0001 per EO E 21/22-276 Revised (AB 84)	\$ -716	\$ -	\$ -	\$ -	\$ -
Totals, Transfers and Other Adjustments	\$ -716	\$ 2,963	\$ -	\$ 5,026	\$ -
TOTALS, REVENUES, TRANSFERS AND OTHER ADJUSTMENTS	\$ 17,776	\$ 21,837	\$ 18,797	\$ 23,796	\$ 18,793
TOTAL RESOURCES	\$ 30,513	\$ 35,356	\$ 34,634	\$ 37,012	\$ 33,787
Expenditures:					
1111 Department of Consumer Affairs Regulatory Boards, Bureaus, Divisions (State Operations)	\$ 15,527	\$ 17,815	\$ 20,016	\$ 20,616	\$ 21,235
9892 Supplemental Pension Payments (State Operations)	\$ 318	\$ 351	\$ 351	\$ 351	\$ -
9900 Statewide General Administrative Expenditures (Pro Rata) (State Operations)	\$ 1,149	\$ 1,353	\$ 1,051	\$ 1,051	\$ 1,051
TOTALS, EXPENDITURES AND EXPENDITURE ADJUSTMENTS	\$ 16,994	\$ 19,519	\$ 21,418	\$ 22,018	\$ 22,286
FUND BALANCE					
Reserve for economic uncertainties	\$ 13,519	\$ 15,837	\$ 13,216	\$ 14,994	\$ 11,501
Months in Reserve	8.3	8.9	7.2	8.1	6.2

NOTES:

1. PY based on year-end projections through FM11
2. Assumes workload and revenue projections are realized in BY +1 and ongoing.
3. Expenditure growth projected at 3% beginning BY +1.

Attachment 2

Department of Consumer Affairs

Revenue Projection Report

Fiscal Month: 11

Fiscal Year: 2022 - 2023

Revenue

Line Item	Budget	Year to Date	Projection To Year End
Delinquent Fees	\$317,000	\$372,909	\$404,465
Other Regulatory Fees	\$183,000	\$197,002	\$209,252
Other Regulatory License and Permits	\$3,093,000	\$2,922,554	\$3,250,772
Other Revenue	\$242,000	\$320,785	\$322,356
Renewal Fees	\$14,995,000	\$14,386,289	\$14,687,464
Revenue	\$18,800,000	\$18,199,539	\$18,874,310

Reimbursements

Reimbursements	\$283,000	\$592,308	\$598,308
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Attachment 3

Department of Consumer Affairs

Expenditure Projection Report

Dental Board of California

Fiscal Month: 11

Fiscal Year: 2022 - 2023

Run Date: 06/14/2023

PERSONAL SERVICES

Fiscal Code	Line Item	PY FM13	Budget	YTD + Encumbrance	Projections to Year End	Balance
5100	PERMANENT POSITIONS	\$4,905,694	\$6,966,000	\$4,618,327	\$5,226,956	\$1,739,044
5100	TEMPORARY POSITIONS	\$5,000	\$284,000	\$39,467	\$45,992	\$238,008
5105-5108	PER DIEM, OVERTIME, & LUMP SUM	\$179,433	\$130,000	\$28,938	\$41,500	\$88,500
5150	STAFF BENEFITS	\$2,639,649	\$4,157,000	\$2,866,014	\$3,244,528	\$912,472
	PERSONAL SERVICES	\$7,729,776	\$11,537,000	\$7,552,746	\$8,558,976	\$2,978,024

OPERATING EXPENSES & EQUIPMENT

Fiscal Code	Line Item	PY FM13	Budget	YTD + Encumbrance	Projections to Year End	Balance
5301	GENERAL EXPENSE	\$124,994	\$163,000	\$117,379	\$162,414	\$586
5302	PRINTING	\$113,800	\$85,000	\$180,698	\$183,716	-\$98,716
5304	COMMUNICATIONS	\$65,456	\$47,000	\$31,673	\$66,410	-\$19,410
5306	POSTAGE	\$63,650	\$54,000	\$61,861	\$80,310	-\$26,310
5308	INSURANCE	\$9,312	\$2,000	\$12,638	\$18,700	-\$16,700
53202-204	IN STATE TRAVEL	\$32,775	\$170,000	\$52,714	\$64,840	\$105,160
5322	TRAINING	\$3,023	\$12,000	\$18,328	\$18,328	-\$6,328
5324	FACILITIES	\$677,198	\$855,000	\$697,991	\$741,128	\$113,872
5326	UTILITIES	\$0	\$1,000	\$0	\$0	\$1,000
53402-53403	C/P SERVICES (INTERNAL)	\$2,531,320	\$2,564,000	\$1,655,426	\$2,022,379	\$541,621
53404-53405	C/P SERVICES (EXTERNAL)	\$1,149,637	\$877,000	\$1,824,142	\$2,599,518	-\$1,722,518
5342	DEPARTMENT PRORATA	\$3,110,881	\$3,396,000	\$3,287,000	\$3,287,000	\$109,000
5342	DEPARTMENTAL SERVICES	\$230,940	\$74,000	\$253,783	\$342,366	-\$268,366
5344	CONSOLIDATED DATA CENTERS	\$17,197	\$42,000	\$44,553	\$50,000	-\$8,000
5346	INFORMATION TECHNOLOGY	\$14,443	\$214,000	\$6,047	\$32,347	\$181,653
5362-5368	EQUIPMENT	\$239,888	\$67,000	\$2,597	\$107,900	-\$40,900
5390	OTHER ITEMS OF EXPENSE	\$33,442	\$5,000	\$46,484	\$64,400	-\$59,400
54	SPECIAL ITEMS OF EXPENSE	\$8,679	\$0	\$9,073	\$12,000	-\$12,000
	OPERATING EXPENSES & EQUIPMENT	\$8,426,636	\$8,628,000	\$8,302,387	\$9,853,755	-\$1,225,755

OVERALL TOTALS	\$16,156,412	\$20,165,000	\$15,855,132	\$18,412,731	\$1,752,269
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8.69%

MEMORANDUM

DATE	July 21, 2023
TO	Members of the Dental Board of California
FROM	Carlos Alvarez, Southern California Enforcement Chief Dental Board of California
SUBJECT	Agenda Item 8.a.: Enforcement – Review of Statistics and Trends

The following are the Enforcement Division statistics:

Complaint & Compliance Unit (CCU)

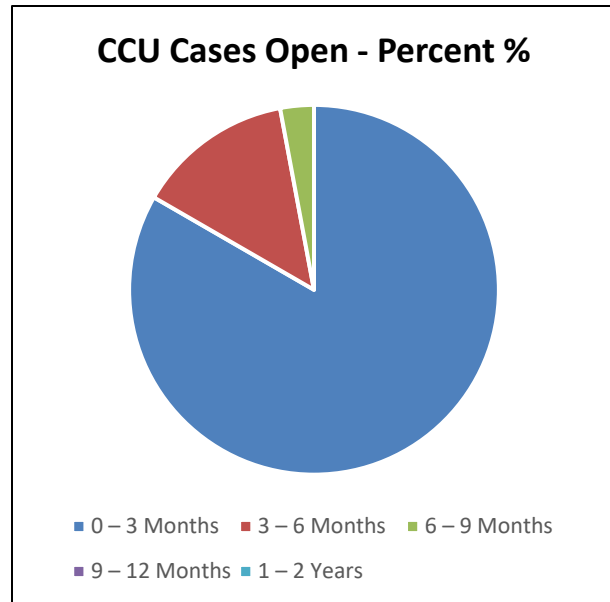
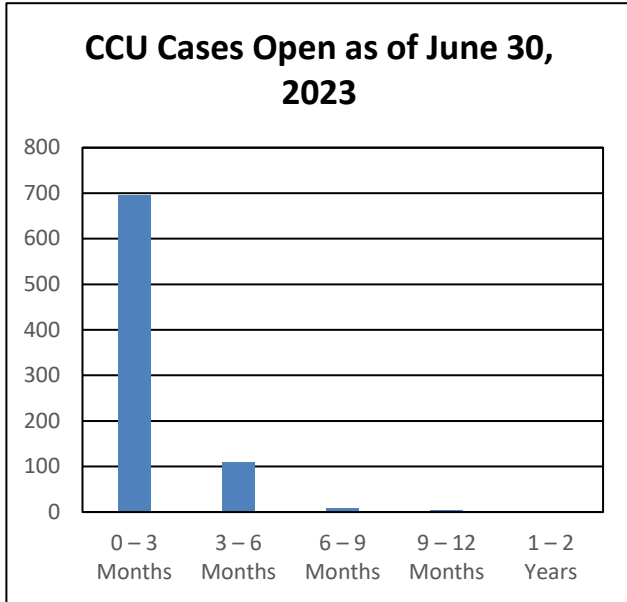
Number of Complaint Cases Received between April 1, 2023 and June 30, 2023

Between April 1, 2023, and June 30, 2023, CCU received **840** complaints. During this time, the monthly average of complaints received was **280**.

Number of Complaint Cases Open

As of June 30, 2023, there are **817** complaint cases open in CCU. A breakdown of the case aging is as follows:

Complaint and Compliance Cases Open		
Complaint Age	As of June 30, 2023	Percent (%)
0 – 3 Months	696	85%
3 – 6 Months	110	14%
6 – 9 Months	8	1%
9 – 12 Months	3	*
1 – 2 Years	0	*
2 Plus Years	0	*
Total	817	100%



Number of Complaint Cases Closed

Between April 1, 2023 and June 30, 2023, a total of **831** complaint cases were closed in CCU. The monthly average of complaints closed during this time was **277**.

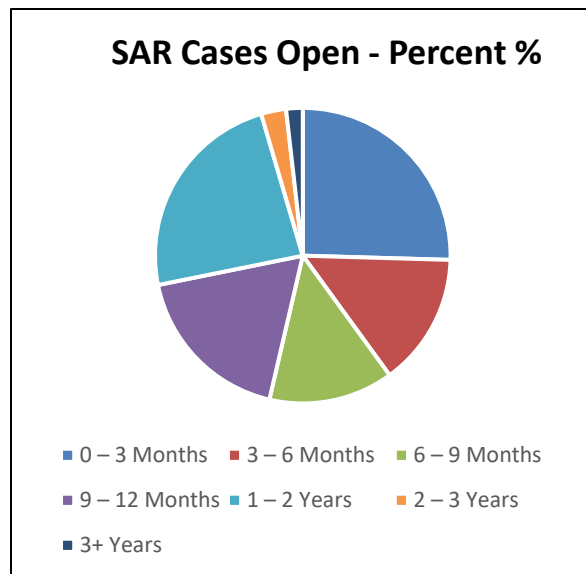
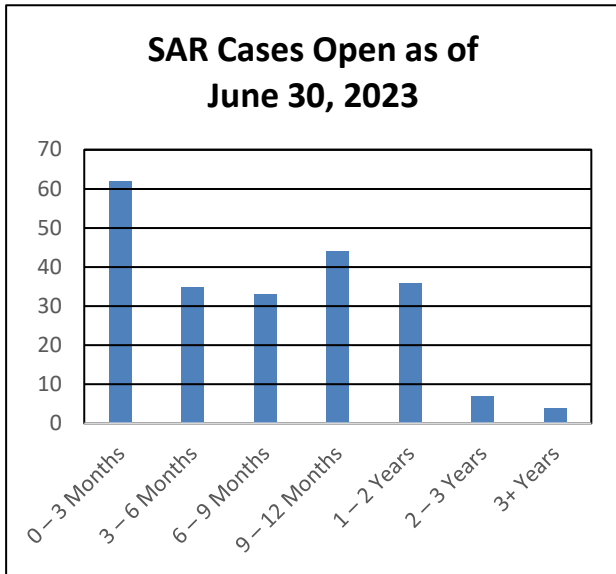
Sacramento Investigative Analysis Unit (IAU)

Number of Subsequent Arrest Report (SAR) Cases Open in IAU

As of June 30, 2023, there are **221** SAR cases are open in the IAU. A breakdown of the case aging is as follows:

*SARS Cases Open		
SAR Age	As of June 30, 2023	Percent (%)
0 – 3 Months	62	28%
3 – 6 Months	35	16%
6 – 9 Months	33	15%
9 – 12 Months	44	20%
1 – 2 Years	36	16%
2 – 3 Years	7	3%
3+ Years	4	2%
Total	221	100%

***SARS are classified as investigative cases once all records requested are received and have been recommended for investigation by either Supervising Investigator or Enforcement Chief**



Number of SAR Cases Closed

Between April 1, 2023 and June 30, 2023, a total of **77** SAR cases were closed in IAU.

Enforcement Units

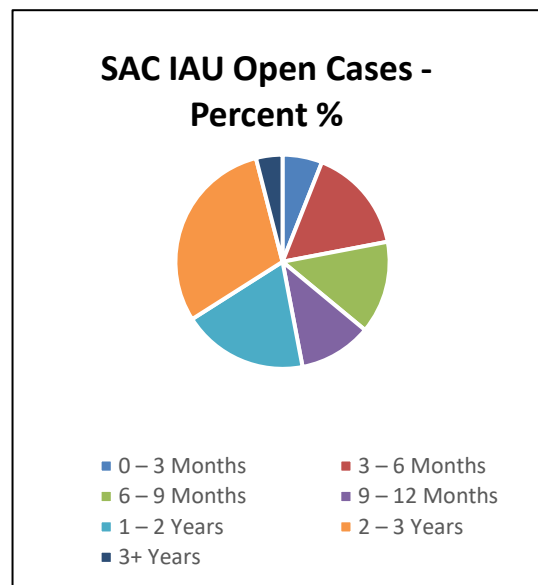
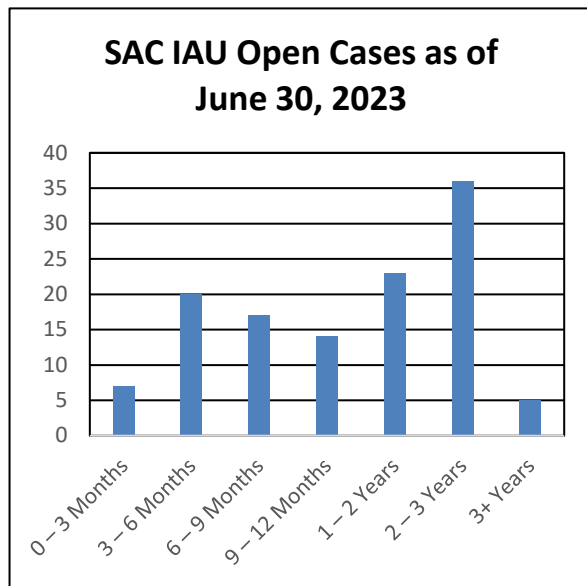
As of June 30, 2023, there **823** investigative cases open in the Board's Enforcement Units. A breakdown of the cases is as follows:

Enforcement Cases Open	
Enforcement Units	As of June 30, 2023
Sacramento IAU (Non-Sworn)	122
Orange IAU (Non-Sworn)	46
Sacramento Field Office (SFO) (Sworn)	64
Orange Field Office (OFO) (Sworn)	153
Pending Assignment	438
Total	823

Number of Investigative Cases Open Sacramento IAU

As of June 30, 2023, there are **122** investigative cases open in the Sacramento IAU. A breakdown of the cases is as follows:

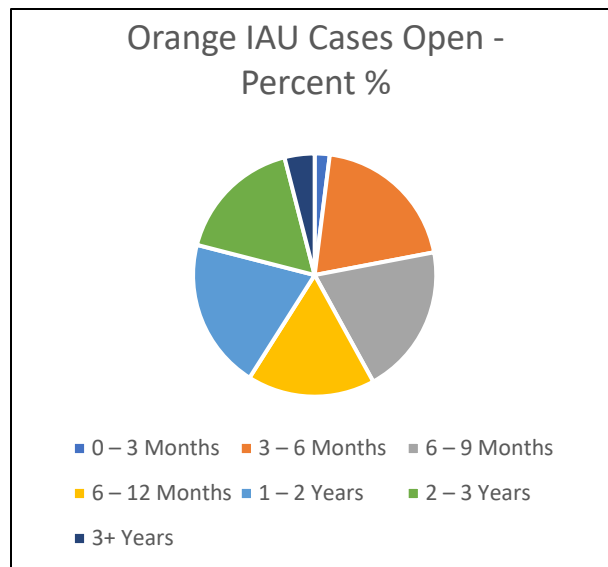
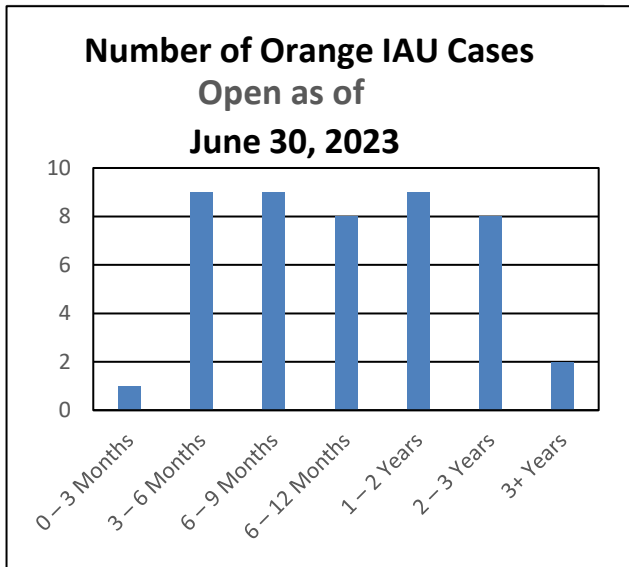
Sacramento IAU Cases Open		
Investigation Age	As of June 30, 2023	Percent (%)
0 – 3 Months	7	6%
3 – 6 Months	20	16%
6 – 9 Months	17	14%
9 – 12 Months	14	11%
1 – 2 Years	23	19%
2 – 3 Years	36	30%
3+ Years	5	4%
Total	122	100%



Number of Investigative Cases Open in the Orange IAU

As of June 30, 2023, there are **46** investigative cases open in the Orange IAU. A breakdown of the case aging is as follows:

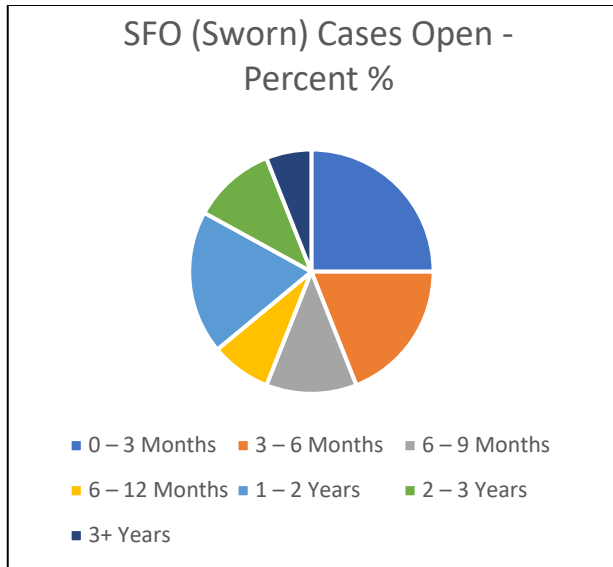
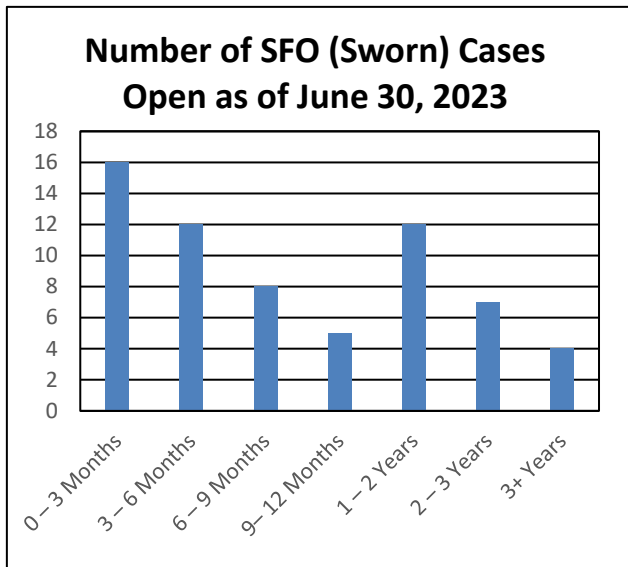
Orange IAU Cases Open		
Investigation Age	As of June 30, 2023	Percent (%)
0 – 3 Months	1	2%
3 – 6 Months	9	20%
6 – 9 Months	9	20%
9 – 12 Months	8	17%
1 – 2 Years	9	20%
2 – 3 Years	8	17%
3+ Years	2	4%
Total	46	100%



Number of Investigative Cases Open in the Sacramento Field Office (Sworn)

As of June 30, 2023, there are **64** investigative cases open in the Sacramento Field Office (Sworn). A breakdown of the case aging is as follows:

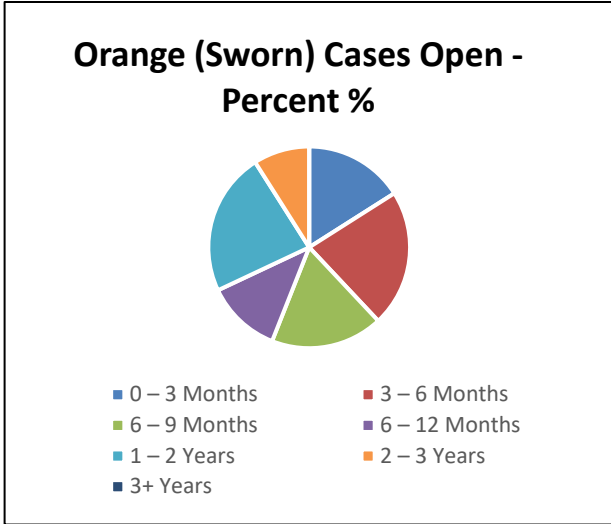
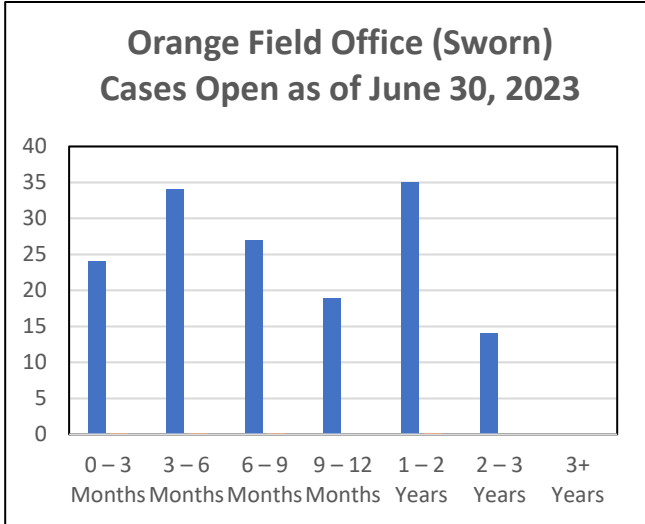
Sacramento Field Office (Sworn) Cases Open		
Investigation Age	As of June 30, 2023	Percent (%)
0 – 3 Months	16	25%
3 – 6 Months	12	19%
6 – 9 Months	8	12%
9 – 12 Months	5	8%
1 – 2 Years	12	19%
2 – 3 Years	7	11%
3+ Years	4	6%
Total	64	100%



Number of Investigative Cases Open in the Orange Field Office (Sworn)

As of June 30, 2023, there are **153** investigative cases open in the Orange Field Office (Sworn). A breakdown of the case aging is as follows:

Orange Field Office (Sworn) Cases Open		
Investigation Age	As of June 30, 2023	Percent (%)
0 – 3 Months	24	16%
3 – 6 Months	34	22%
6 – 9 Months	27	18%
9 – 12 Months	19	12%
1 – 2 Years	35	23%
2 – 3 Years	14	9%
3+ Years	0	-
Total	153	100%



Number of Investigation Cases Closed

Between April 1, 2023 and June, 30, 2023, a total of **349** investigative cases were closed in IAU, the Sacramento Field Office and the Orange Field Office.

Number of Inspection Cases Open

As of June 30, 2022, there are **67** Inspection Cases open in the Sacramento and Orange Field Offices. A breakdown is as follows:

Field Office	Number of Cases
Sacramento IAU	27
Orange IAU	40
Total	67

Number of Inspection Cases Closed

Between April 1, 2023, to June 30, 2023, a total of **77** inspection cases were closed in the Sacramento Field Office and the Orange Field Office.

Administrative and Disciplinary Action

As of June 30, 2023, there are **139** open cases in the Board's Discipline Coordination Unit.

There are **2** cases returned by the Office of the Attorney General (AG) pending resolution of criminal cases.

There are **3** cases in which a Petition for Reinstatement has been submitted and is pending referral to the AG Office.

There is **1** case in which a Petition for Early Termination has been submitted and is pending referral to the AG Office.

The above-mentioned cases have not been referred to the AG Office for disciplinary action, therefore, they are not counted in the total pending cases with the AG.

Accusations

Between April 1, 2023, and June 30, 2023, there were **13** accusations filed with the AG.

Cases Assigned to the Office of the Attorney General

Between April 1, 2023 and June 30, 2023, there were **39** cases transmitted to the AG.

As of June 30, 2023, there are **133** cases pending at the AG.

Citations

Between April 1, 2023 and June 30, 2023, there were **19** citations issued.

Number of Probation Cases Open

As of June 30, 2023, there are **123** probationer cases being monitored. Of those, **116** are active probationers and **7** are tolling. A breakdown of the probation cases is as follows:

Field Office	Active Probationers	Tolling Probationers
Sacramento Investigative Analysis Unit	24	0
Sacramento Field Office	11	3
Orange Investigative Analysis Unit	49	3
Orange Field Office	32	1
Total	116	7



DENTAL BOARD OF CALIFORNIA

2005 Evergreen St., Suite 1550, Sacramento, CA 95815

P (916) 263-2300 | F (916) 263-2140 | www.dbc.ca.gov



MEMORANDUM

DATE	July 11, 2023
TO	Members of the Dental Board of California
FROM	Carlos Alvarez, Southern California Enforcement Chief Dental Board of California
SUBJECT	Agenda Item 8.b.: Presentation on the Enforcement Process

Background

This presentation will be provided verbally via PowerPoint. This presentation is an abbreviated version of the Enforcement Process PowerPoint used at outreach events.

Action Requested

No action requested.

Enforcement Program

Presented by:

Carlos Alvarez, Southern California
Enforcement Chief



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Mission Statement

The Dental Board of California's mission is to protect and promote the health and safety of consumers of the State of California.

Vision Statement

The Dental Board of California will be the leader in public protection, promotion of oral health, and access to care.



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Enforcement Program

- Complaint and Compliance Unit (CCU)
- Inspections/Probation Section
- Investigations
 - ❖ Investigation Unit: Sworn Investigators
 - ❖ Investigative Analysis Unit (IAU): Non-Sworn
- Discipline Coordination Unit (DCU)



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Complaint and Compliance Unit (CCU)

- CCU receives approximately 4,000 pieces of correspondence each year. Complaints, subsequent arrest reports, insurance settlements, and reports of hospitalization or death all come through the CCU.
- CCU receives correspondence by web portal, physical mail, email, and telephone.
- A complaint can be filed by anyone who believes that a licensee of the Board has engaged in illegal activities that violate the Dental Practice Act (BPC § 1680):
 - ❖ Consumers
 - ❖ Insurance companies
 - ❖ Dental practitioners
 - ❖ Law enforcement



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Complaint and Compliance Unit

Common reasons for complaints

- ❖ Quality of Care
- ❖ Substance use/abuse
- ❖ Improper advertising
- ❖ Fraud
- ❖ Sexual misconduct
- ❖ Infection control
- ❖ False or fictitious name use
- ❖ Unlicensed activity



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Complaint and Compliance Unit

- Collects all dental records related to the complaint from dentists and physicians.
- Obtains the opinion of a dental consultant to determine if a violation of the Dental Practice Act occurred.
- Forwards substantiated cases to Investigations.
- Closes unsubstantiated cases.



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Inspection Program

Provide a response to conditions affecting the health, safety, and welfare of the dental consumer.

Per California Code of Regulations, title 16, section 1005, “Minimum Standards for Infection Control,” subdivision (a)(1)



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Inspection Program

Business and Professions Code (BPC) section 1611.5:

(a) The board may inspect the books, records, and premises of any dentist . . . in response to a complaint.

(b) Failure to allow an inspection . . . shall be grounds for suspension or revocation of the license or permit in accordance with Section 1670.



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Inspection Program

Complaints may concern:

- Unsanitary conditions
- Auxiliary staff working out of their scope of duties
- Failure to file an address change
- Working with an expired license
- Operating without a fictitious name permit
- Owning more than one office without additional permits



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Inspection Program

What can Inspectors do?

- Issue written warnings (Notice to Correct)
- Issue Citations
- Refer to Attorney General's Office for discipline



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Inspection Program

BEFORE

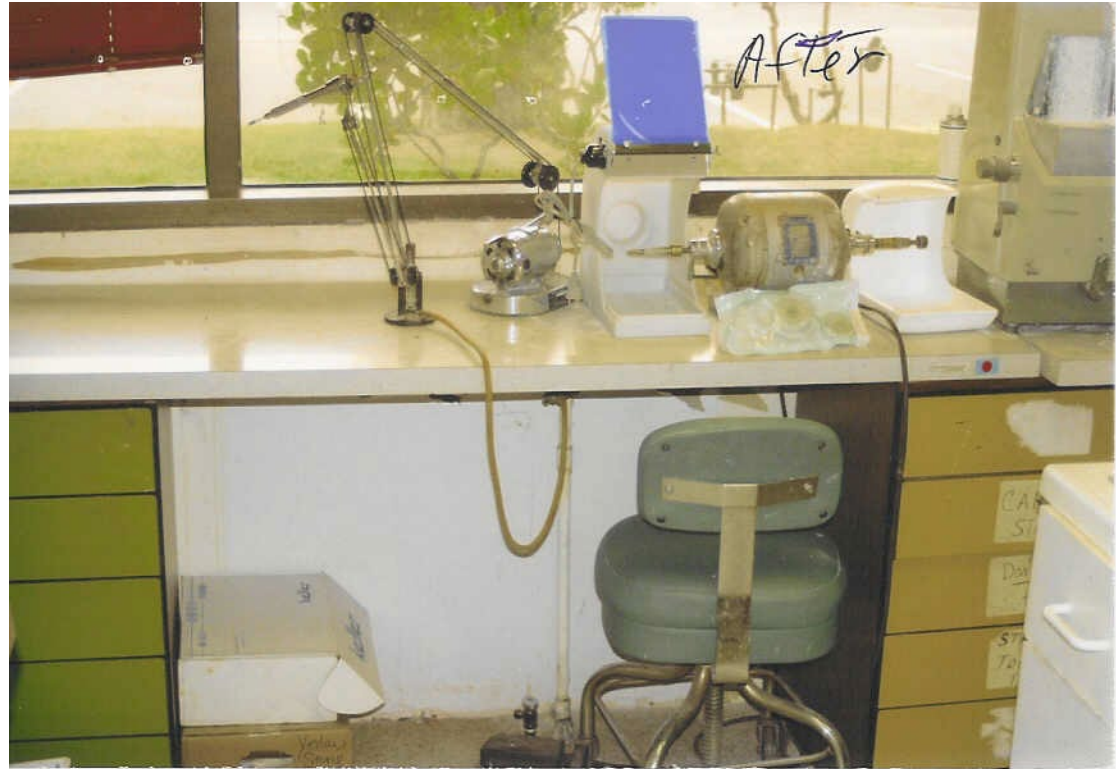


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Inspection Program

AFTER



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CALIFORNIA DEPARTMENT OF
CONSUMER
AFFAIRS

Investigations



Investigation Unit: Highly trained team of investigators who are sworn peace officers. This team provides law enforcement investigative services and develops information for criminal or administrative filings.

IAU: Highly trained team of civilian investigators. This team investigates general unprofessional conduct or general negligence / incompetence resulting in no injury or minor patient harm, in addition to appeals for denials of licenses/permits (SOIs).



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Investigation Unit



What does an investigator do?

- Gathers facts, records, and evidence
- Interviews witnesses
- Evaluates and sends reports to experts for review
- Makes arrests (Sworn Investigators)
- Serves search warrants (Sworn Investigators)
- Drafts and serves Administrative Subpoenas
- Issues Administrative Citations
- Files with the Attorney General (AG) or District Attorney



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Investigation Unit

Case outcomes

- Close as no violation
- Request criminal filing
- Transmit to the AG's Office
 - ❖ Public Reprimand
 - ❖ Probation
 - ❖ Revocation/surrender of a license



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Discipline Coordination Unit (DCU)



Responsibilities:

- Transmits investigative cases that require formal disciplinary action to the AG's Office.
- Acts as a liaison between the Executive Officer (EO) of the Board and the AG's Office.



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Discipline Coordination Unit

Three categories of initial administrative actions:

- **Accusation:** A pleading that is filed when an agency (Board) wants to discipline a license that has already been issued.
- **Statement of Issues (SOI):** A pleading that is filed when the agency determines that an applicant for licensure should not be issued a license. The SOI is filed when an applicant has been denied a license through the agency and is appealing that denial.
- **Petition to Revoke Probation (PTR):** A pleading that is filed when a probationary licensee violates a term or condition of probation. This can also be filed alongside an Accusation because conduct that violates probation is often conduct that forms an independent basis to discipline a license.



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Discipline Coordination Unit

After a case is referred to the AG's Office, and a pleading is filed, the case can result in one of the following decisions:

- **Stipulated Settlement:** This results from discussion between the DAG, the Board EO, and the Respondent, and it can include probation, public reproof, or surrender.
- **Proposed Decision:** This results from a hearing, and it is issued by an ALJ within 30 days after a hearing concludes.
- **Default Decision:** This results from the failure of a Respondent to file a Notice of Defense within 15 days after a pleading is filed and served on the Respondent.



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Probation Unit



Board may discipline a licensee by placing their license on probation.

- Probation results from an accusation filed against the licensee.
- Probation is for a specified time period with terms and conditions.
- The probation order is based on a stipulated agreement or upon a proposed decision rendered by an ALJ.

Authority: BPC § 1670



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Probation Unit

Responsibilities:

- Monitor licensees whose licenses are on probation due to sustained administrative discipline.
- The Board's probation monitors verify that the public is protected and that dental probationers are complying with the terms and conditions of their probation.
- Dental probationers who violate their probation orders may have their licenses revoked.



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For More Information

Email us at:

DentalBoard@dca.ca.gov

DentalBoardComplaints@dca.ca.gov



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MEMORANDUM

DATE	July 13, 2023
TO	Members of the Dental Board of California
FROM	Owen Dudley, Chief of Regulatory Compliance and Discipline Dental Board of California
SUBJECT	Agenda Item 9.a.: Diversion Program Report and Statistics

Background

The Diversion Evaluation Committee (DEC) program statistics for the quarter ending on June 30, 2023 are provided below. These statistics reflect the participant activity in the Diversion (Recovery) Program and are presented for informational purposes only.

These statistics were derived from reports received from MAXIMUS.

Diversion	FY 2022/2023												Totals	FY 21/22	FY 20/21	FY 19/20
	Quarter 1			Quarter 2			Quarter 3			Quarter 4						
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	March	Apr	May	June				
New Participants	0	1	1	0	0	0	1	0	0	0	0	0	2	3	3	1
Total Participants (Close of Qtr/FY)	7	8	9	7	7	7	8	7	7	7	7	7	7	12	12	15
<i>Self-Referral</i>	2	2	3	3	3	3	3	3	3	3	3	3	3	5	5	3
<i>Enforcement Referral</i>	1	1	1	1	0	0	1	1	1	1	1	1	1	2	2	5
<i>Probation Referral</i>	4	5	5	5	4	4	4	4	3	3	3	3	3	5	5	7
Total Completed Cases	0	0	0	0	0	0	0	0	0	0	0	0	0	4	3	6
<i>Successful Completions</i>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	3
<i>Terminations</i>	0	0	0	2	0	0	0	1	0	0	0	0	3	4	1	23
<i>Terminations for Public Threat</i>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Drug Tests Ordered	31	26	35	29	22	29	29	26	26	25	25	31	334	352	415	498
Positive Drug Tests	0	0	0	0	0	0	0	0	0	0	0	0	0	3	1	0
<i>Prescription Positive Tests</i>	0	0	0	0	0	1	0	0	0	1	1	3	6	29	4	0

Of the seven (7) participants, there were three (3) self-referrals, three (3) probation referrals, and one (1) enforcement referral.

Responses to Board Member Questions

At the May 18-19, 2023 Board meeting, Dr. Lilia Larin asked what kind of prescriptions constitute prescription positive tests on the Diversion statistics and Dr. Steven Chan asked what is the annual cost of the Diversion Program.

1. Prescription Positive Tests
 - a. Prescription positive tests mean that a Diversion Program participant is approved to take a prescription drug while in the program. These prescriptions must be declared to, and approved by, the committee as part of the rehabilitation process. MAXIMUS addresses every positive drug test on a case-by-case basis, to ensure non-compliant participants are held accountable and compliant participants are not inappropriately penalized.

2. Annual cost of the Diversion Program
 - a. Over the past few fiscal years, the annual cost of the Diversion Program was between \$30,000 and \$40,000. The cost of the Diversion Program varies from year to year based on how many participants are enrolled in the program and how many in-person meetings are held. The Board pays MAXIMUS per participant. The more participants, the greater the cost. DEC members receive a \$100 per diem for each meeting they attend whether in-person or via teleconference. When DEC meetings are held in-person, the Board also pays for the committee members' travel and accommodations related to the meeting.

Action Requested

No action requested.



MEMORANDUM

DATE	July 25, 2023
TO	Members of the Dental Board of California
FROM	Mirela Taran, Administrative Analyst Dental Board of California
SUBJECT	Agenda Item 9.b.: Presentation by Maximus

Background

Virginia Matthews, Maximus representative, will provide a presentation to the Board on MAXIMUS, Inc.

Action Requested

No action requested.



MEMORANDUM

DATE	July 19, 2023
TO	Members of the Dental Board of California
FROM	Carlos Alvarez, Southern California Enforcement Chief Dental Board of California
SUBJECT	Agenda Item 9.c.: Controlled Substance Utilization Review and Evaluation System Report

Background

The Controlled Substance Utilization Review and Evaluation System (CURES 2.0) is a database of Schedule II, III, and IV controlled substance and prescriptions dispensed in California. The goal of the CURES 2.0 system is the reduction of prescription drug abuse and diversion without affecting the legitimate medical practice or patient care. Prescribers were required to apply before July 1, 2016, or upon receipt of a federal Drug Enforcement Administration (DEA) registration, whichever occurs later. Registration requirements are not based on dispensing, prescribing, or administering activities but on possession of a Drug Enforcement Administration Controlled Substance Registration Certificate and valid California licensure as a Dentist, or other prescribing medical provider.

The Dental Board of California (Board) currently has 34,710 licensed dentists as of June 30, 2023.

Registration statistics for the Board as of June 30, 2023 are:

Month 2022	Number of Registered DDS/DMD Users
January	16,824
February	16,867
March	16,913
April	16,945
May	16,978
June	17,027
July	17,075
August	17,104
September	17,177
October	17,238
November	17,286
December	17,330

Month 2023	Number of Registered DDS/DMD Users
January	17,396
February	17,451
March	17,518
April	17,554
May	17,618
June	17,656

Search statistics for the Board as of June 30, 2023 are:

Month 2022	Search Statistics
January	17,047
February	19,609
March	24,086
April	17,058
May	16,564
June	16,630
July	14,362
August	20,001
September	18,256
October	18,869
November	15,986
December	16,294
Month 2023	Search Statistics
January	20,136
February	21,858
March	27,173
April	25,723
May	25,902
June	24,658

Number of Outbound Searches

Month 2023	Outbound Interstate Search Statistics
April	0
May	0
June	138

Number of Inbound Interstate Searches

Month 2023	Inbound Interstate Search Statistics
January	0
February	0
March	0
April	0

May	0
June	0

System accessed statistics for the Board as of March 2022 are:

Month 2022	Times System was Accessed (total number of web application and information exchange web services)
January	3,747
February	3,661
March	4,433

Note: This data has not been available since March 2022 due to a CURES software update. Statistics for **Times System was Accessed** is no longer being tracked.

Help Desk statistics for the Board as of June 30, 2023 are:

Month 2022	Help Desk Statistics (total number of email and telephone inquiries)
January	289
February	204
March	220
April	54
May	23
June	26
July	128
August	98
September	92
October	115
November	77
December	81
Month 2023	Help Desk Statistics (total number of email and telephone inquiries)
January	78
February	80
March	89
April	72
May	175
June	82

The number of prescriptions filled by schedule for the months of April, May, and June 2023 are:

DCA Number of Prescriptions Filled by Schedule for April – June 2023

	<u>April</u>	<u>May</u>	<u>June</u>
Schedule II	1,175,516	1,236,024	1,183,235
Schedule III	214,121	226,108	222,141
Schedule IV	993,490	1,055,058	1,030,447
Schedule V	134,462	139,460	135,871
R	3,114	870	24
Over-the-Counter Product	77,678	68,420	64,125
Total:	2,598,381	2,725,940	2,635,843

Notes:

1. Each component of a compound is submitted as a separate prescription record. The number of distinct prescriptions rolls compound prescriptions into a single count.
2. The number of distinct prescriptions and the number of prescriptions filled by schedule will not be equal because a compound can consist of multiple drugs with varying schedules.
3. R=Not classified under the Controlled Substances Act; includes all other prescription drugs.
4. Over-the-counter product.

Action Requested

No action requested

Registered Users

		April 2023	May 2023	June 2023
Clinical Roles				
	Prescribers	182,307	182,980	183,739
	Non-DEA Practitioner	13,621	13,738	13,735
	Pharmacists	51,000	51,106	51,185
	Clinical Roles	246,928	247,824	248,659
License Type				
	Doctor of Dental Surgery/Dental Medicine	17,554	17,618	17,656
	Doctor of Optometry	704	705	707
	Doctor of Podiatric Medicine	1,678	1,682	1,688
	Doctor of Veterinary Medicine	3735	3757	3,772
	Medical Doctor	124,664	125,022	125,386
	Naturopathic Doctor	518	520	524
	Osteopathic Doctor	9703	9763	9,837
	Physician Assistant	13837	13924	14,016
	Registered Nurse Practitioner/Nurse Midwife	22,938	23,125	23,283
	(Out of State) Prescribers	597	602	605
	Pharmacists	50,244	50,340	50,396
	(Out of State) Pharmacists	756	766	789
	Breakdown by license type	246,928	247,824	248,659
Other Roles				
	LEAs	1,680	1,686	1,694
	Delegates	3,749	4,043	4,161
	DOJ Admin	63	63	66
	DOJ Analyst	92	93	92
	Regulatory Board	243	247	253
	Other Roles	5,827	6,132	6,266
Total Registered Users		252,755	253,956	254,925

NOTE:

Clinical Roles = Breakdown by license type

Clinical Roles + Other Roles = Total Registered Users

Stats are from the 1st of the month to the last day of the month

Search Statistics

April 2023

	Web Application	IEWS	Interstate Outbound	Totals	
Clinical Roles					
		Delegate			
Prescribers	1,008,570	47,670	6,321,753	N/A	7,377,993
Non-DEA Practitioner	1,074	40	5,999	N/A	7,113
Pharmacists	1,174,163	7,072	3,115,015	N/A	4,296,250
Clinical Roles	2,183,807	54,782	9,442,767	N/A	11,681,356
License Type					
Doctor of Dental Surgery/Dental Medicine	7,765	185	17,773		25,723
Doctor of Optometry	2	0	1,927		1,929
Doctor of Podiatric Medicine	1,528	12	45,648		47,188
Doctor of Veterinary Medicine	78	0	0		78
Medical Doctor	585,356	28,194	4,838,248		5,451,798
Naturopathic Doctor	1,221	298	120		1,639
Osteopathic Doctor	85,863	2,747	466,726		555,336
Physician Assistant	119,165	8,580	437,234		564,979
Registered Nurse Practitioner/Nurse Midwife	206,199	7,579	520,053		733,831
(Out of State) Prescribers	2,467	115	23		2,605
Pharmacists	1,164,822	7,003	3,091,313		4,263,138
(Out of State) Pharmacists	9,341	69	23,702		33,112
License Type	2,183,807	54,782	9,442,767	0	11,681,356
Other Roles					
LEAs	162	N/A	N/A	N/A	162
DOJ Administrators	175	N/A	N/A	N/A	175
DOJ Analysts	23	N/A	N/A	N/A	23
Regulatory Board	962	N/A	N/A	N/A	962
Other Roles	1,322	N/A	N/A	N/A	1,322
Total Search Counts					11,682,678

Note:

Search Counts is defined as searches performed in the system without generating the report.

Clinical Roles = License Type

Total Search Count = Clinical Roles + Other Roles

Search Statistics

May 2023

	Web Application	Delegate	IEWS	Interstate Outbound	Totals
Clinical Roles					
Prescribers	1,149,959	56,566	8,000,486	32,093	9,239,104
Non-DEA Practitioner	945	14	3,678	39	4,676
Pharmacists	1,261,359	9,239	3,574,058	22,607	4,867,263
Clinical Roles	2,412,263	65,819	11,578,222	54,739	14,111,304
License Type					
Doctor of Dental Surgery/Dental Medicine	9,530	195	16,177	154	26,056
Doctor of Optometry	44	0	1,732	1	1,777
Doctor of Podiatric Medicine	1,620	27	45,428	51	47,126
Doctor of Veterinary Medicine	244	10	0	0	254
Medical Doctor	680,528	32,889	6,471,416	18,884	7,203,717
Naturopathic Doctor	1,555	375	115	16	2,061
Osteopathic Doctor	97,883	3,224	466,530	2,177	569,814
Physician Assistant	122,558	10,196	456,567	3,457	592,778
Registered Nurse Practitioner/Nurse Midwife	234,204	9,591	546,156	7,392	797,343
(Out of State) Prescribers	2,738	73	43	0	2,854
Pharmacists	1,250,561	9,136	3,552,532	22,350	4834579
(Out of State) Pharmacists	10,798	103	21,526	257	32,684
License Type	2,412,263	65,819	11,578,222	54,739	14,111,304
Other Roles					
LEAs	213	N/A	N/A	N/A	213
DOJ Administrators	123	N/A	N/A	N/A	123
DOJ Analysts	18	N/A	N/A	N/A	18
Regulatory Board	896	N/A	N/A	N/A	896
Other Roles	1,250				1,250
Total Search Counts					14,112,293

Note:

Search Counts is defined as searches performed in the system without generating the report.

Clinical Roles = License Type

Total Search Count = Clinical Roles + Other Roles



Search Statistics

June 2023

	Web Application	Delegate	IEWS	Interstate Outbound	Totals
Clinical Roles					
Prescribers	1,114,830	58,204	6,515,424	36,737	7,725,195
Non-DEA Practitioner	731	21	2,536	41	3,329
Pharmacists	1,291,807	9,705	3,760,437	28,173	5,090,122
Clinical Roles	2,407,368	67,930	10,278,397	64,951	12,818,646
License Type					
Doctor of Dental Surgery/Dental Medicine	8,577	279	15,802	138	24,796
Doctor of Optometry	3	0	880	0	883
Doctor of Podiatric Medicine	1,497	16	29,211	33	30,757
Doctor of Veterinary Medicine	57	0	0	N/A	57
Medical Doctor	652,881	32,462	5,269,347	22,255	5,976,945
Naturopathic Doctor	1,771	329	138	9	2,247
Osteopathic Doctor	98,791	3,012	367,442	2,149	471,394
Physician Assistant	120,489	9,835	387,750	4,115	522,189
Registered Nurse Practitioner/Nurse Midwife	228,797	12,196	447,384	8,079	696,456
(Out of State) Prescribers	2,698	96	6	N/A	2,800
Pharmacists	1,280,743	9,035	3,739,142	27,723	5,056,643
(Out of State) Pharmacists	11,064	670	21,295	450	33,479
License Type	2,407,368	67,930	10,278,397	64,951	12,818,646
Other Roles					
LEAs	121	N/A	N/A	N/A	121
DOJ Administrators	124	N/A	N/A	N/A	124
DOJ Analysts	2	N/A	N/A	N/A	2
Regulatory Board	789	N/A	N/A	N/A	789
Other Roles	1,036				1,036
Total Search Counts					12,819,682

Note:

Search Counts is defined as searches performed in the system without generating the report.

Clinical Roles = License Type

Total Search Count = Clinical Roles + Other Roles



Help Desk Statistics

April – June 2023

		April		May		June	
Clinical Roles		Phone	E-mail	Phone	E-mail	Phone	E-mail
	Prescribers/Non-DEA Practitioners	1,179	707	1,648	1,007	1,146	553
	Pharmacists	375	143	480	189	499	143
	Clinical Roles	1,554	850	2,128	1,196	1,645	696
License Type							
	Doctor of Dental Surgery/Dental Medicine	56	16	98	77	47	35
	Doctor of Optometry	1	0	3	3	0	2
	Doctor of Podiatric Medicine	3	4	7	5	9	3
	Doctor of Veterinary Medicine	19	9	37	39	20	6
	Medical Doctor	792	488	1,091	683	729	347
	Naturopathic Doctor	1	1	6	3	1	1
	Osteopathic Doctor	55	41	77	29	67	26
	Physician Assistant	68	43	112	63	80	51
	Registered Nurse Practitioner/Nurse Midwife	184	105	217	105	193	82
	Pharmacists	375	143	480	189	499	143
	(Out of State) Pharmacists	0	0	0	0	0	0
	License Type	1,554	850	2,128	1,196	1,645	696
Other Roles							
	LEAs	8	31	5	18	9	24
	Delegates	45	17	47	32	46	27
	DOJ Administrators	0	0	0	0	0	0
	DOJ Analysts	0	0	0	0	0	0
	Regulatory Board	2	9	0	13	3	14
	Other Roles	55	57	52	63	58	65
Totals		1,609	907	2,180	1,259	1,703	761

Note:

Clinical Roles = License Type

Total Calls = Clinical Roles + Other Roles



Prescriptions Filled by Schedule

January 2023 – June 2023

	April 2023	May 2023	June 2023
Number of Distinct Prescriptions	2,596,636	2,724,139	2,633,975
Number of Prescriptions Filled by Schedule			
Schedule II	1,175,516	1,236,024	1,183,235
Schedule III	214,121	226,108	222,141
Schedule IV	993,490	1,055,058	1,030,447
Schedule V	134,462	139,460	135,871
R	3,114	870	24
Over-the-counter product	77,678	68,420	64,125
TOTAL	2,598,381	2,725,940	2,635,843

NOTE:

1. Each component of a compound is submitted as a separate prescription record. The number of distinct prescriptions rolls compound prescriptions into a single count
2. The number of distinct prescriptions and the number of prescriptions filled by schedule will not be equal because a compound can consist of multiple drugs with varying schedules
3. R = Not classified under the Controlled Substances Act; includes all other prescription drugs



MEMORANDUM

DATE	July 17, 2023
TO	Members of the Dental Board of California
FROM	Paige Ragali, Chief of Dental Programs and Customer Support Dental Board of California
SUBJECT	Agenda Item 10.a.: Update on Dental Licensure and Permit Statistics

Dental License Application Statistics

The following are monthly dental license application statistics by pathway for fiscal year 2019–20, 2020–21, 2021–22 and 2022–23 as of June 30, 2023.

Dental Applications Received by Month													
	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Totals
WREB 19/20	110	61	24	25	55	132	30	11	18	35	103	185	789
WREB 20/21	140	156	99	66	29	20	28	27	26	78	158	217	1,044
WREB 21/22	138	85	75	22	28	27	38	31	71	83	109	123	830
WREB 22/23	71	58	42	35	29	28	38	26	31	41	48	80	527
Residency 19/20	64	8	7	4	3	10	11	6	8	11	13	33	178
Residency 20/21	42	15	8	5	2	2	5	7	4	8	20	29	147
Residency 21/22	93	23	12	5	1	6	3	8	8	6	3	14	182
Residency 22/23	13	5	1	2	4	1	2	4	4	6	3	12	57
Credential 19/20	16	9	6	21	14	15	16	18	22	21	20	28	206
Credential 20/21	15	19	22	27	16	16	18	13	16	19	20	22	223
Credential 21/22	45	51	44	20	8	17	19	19	23	14	19	27	306
Credential 22/23	20	17	18	20	12	20	28	17	30	20	28	20	250
Portfolio 18/19	3	0	0	0	0	0	0	0	0	0	0	4	7
Portfolio 19/20	0	0	0	0	0	0	0	0	0	0	0	0	0
Portfolio 20/21	0	0	0	0	0	0	0	0	0	0	3	1	4
Portfolio 21/22	0	0	0	0	0	1	0	0	0	0	1	1	3
Portfolio 22/23	0	0	0	0	0	0	0	0	1	0	0	1	2
ADEX 19/20	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	1	1	17	19
ADEX 20/21	22	28	9	16	4	5	9	3	17	41	112	87	353
ADEX 21/22	82	34	17	11	5	9	17	20	19	22	78	117	431
ADEX 22/23	69	51	23	22	17	12	30	18	55	118	137	188	740

Agenda Item 10.a.: Update on Dental Licensure and Permit Statistics
Dental Board of California Meeting
August 17-18, 2023

Dental Applications Approved by Month													
	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Totals
WREB 19/20	250	121	52	32	32	156	32	8	11	5	8	46	753
WREB 20/21	135	199	140	100	37	61	38	41	16	14	14	150	945
WREB 21/22	367	128	98	29	12	48	44	35	21	20	29	48	879
WREB 22/23	79	134	135	58	18	43	35	39	17	20	25	18	621
Residency 19/20	46	35	11	8	4	9	4	5	4	1	1	9	137
Residency 20/21	25	49	16	8	5	4	3	4	1	3	2	5	125
Residency 21/22	110	54	27	12	6	7	2	4	0	1	7	5	235
Residency 22/23	2	18	14	5	1	1	3	2	3	1	4	1	55
Credential 19/20	16	13	11	10	7	18	13	10	14	14	12	13	151
Credential 20/21	9	25	25	20	16	14	24	10	23	22	16	16	220
Credential 21/22	36	60	38	20	9	19	9	13	14	4	24	5	251
Credential 22/23	11	18	24	21	13	29	13	28	13	17	16	12	215
Portfolio 19/20	3	1	0	0	0	0	0	0	0	0	0	0	4
Portfolio 20/21	0	0	0	0	0	0	0	0	0	0	0	4	4
Portfolio 21/22	0	0	0	0	0	0	0	0	0	0	0	0	0
Portfolio 22/23	0	0	0	0	0	0	0	0	0	0	0	0	0
ADEX 19/20	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	0	1	0	1
ADEX 20/21	2	24	17	19	10	6	6	4	2	7	10	93	200
ADEX 21/22	189	79	43	21	4	7	13	5	3	5	16	31	416
ADEX 22/23	43	95	98	40	14	23	23	25	16	22	34	52	485
Dental Licenses Issued by Month													
	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Totals
WREB 19/20	246	123	52	40	31	140	39	20	12	8	13	45	769
WREB 20/21	133	190	140	90	41	59	39	38	23	21	16	115	905
WREB 21/22	198	71	48	35	14	42	35	28	22	20	24	51	588
WREB 22/23	71	127	131	58	27	39	30	40	18	16	32	20	609
Residency 19/20	42	39	9	8	3	5	9	2	5	0	2	9	133
Residency 20/21	27	49	16	9	6	3	3	2	2	5	1	7	130
Residency 21/22	51	30	15	12	6	5	4	2	1	3	7	5	141
Residency 22/23	3	15	12	6	2	2	3	2	1	1	3	2	52
Credential 19/20	15	15	11	12	7	13	16	8	11	12	17	16	153
Credential 20/21	9	22	24	22	19	11	20	11	20	20	17	16	211
Credential 21/22	8	16	22	19	10	19	11	9	9	4	18	10	155
Credential 22/23	8	19	23	23	12	18	18	25	12	16	18	18	210
Portfolio 19/20	3	1	0	0	0	0	0	0	0	0	0	0	4
Portfolio 20/21	0	0	0	0	0	0	0	0	0	0	0	4	4

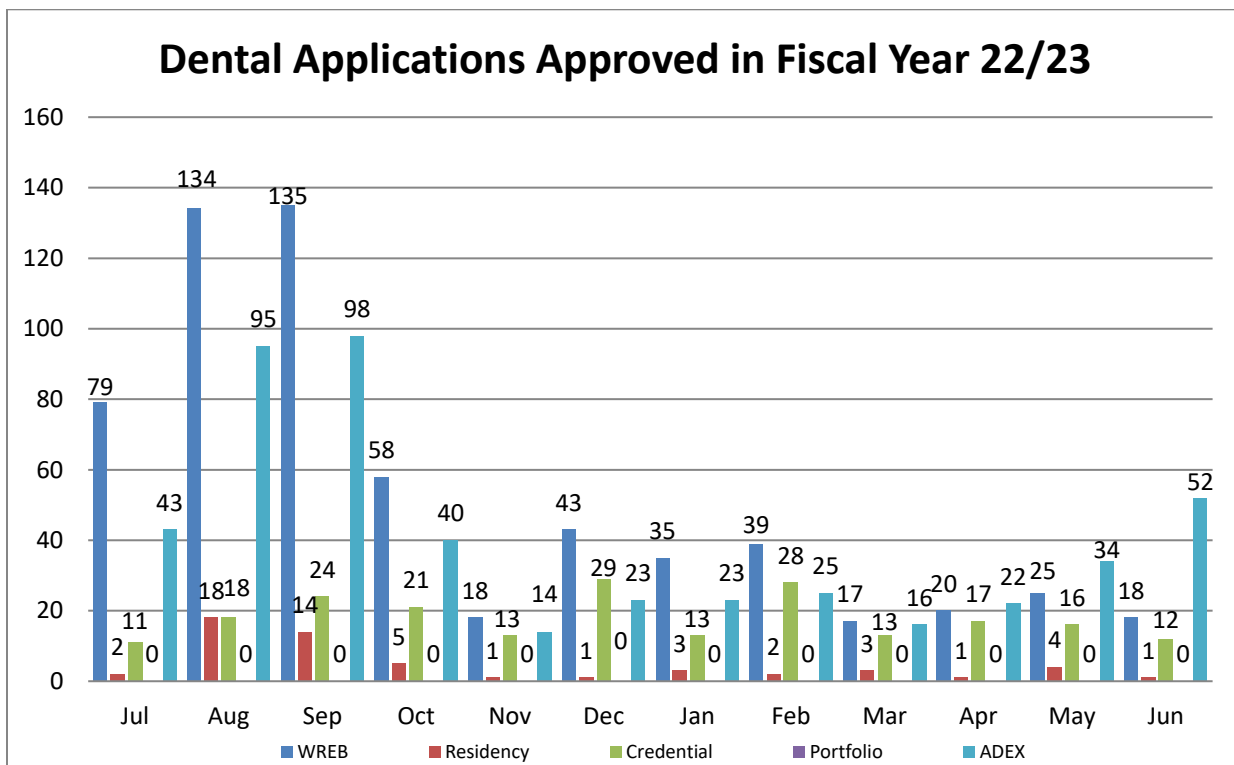
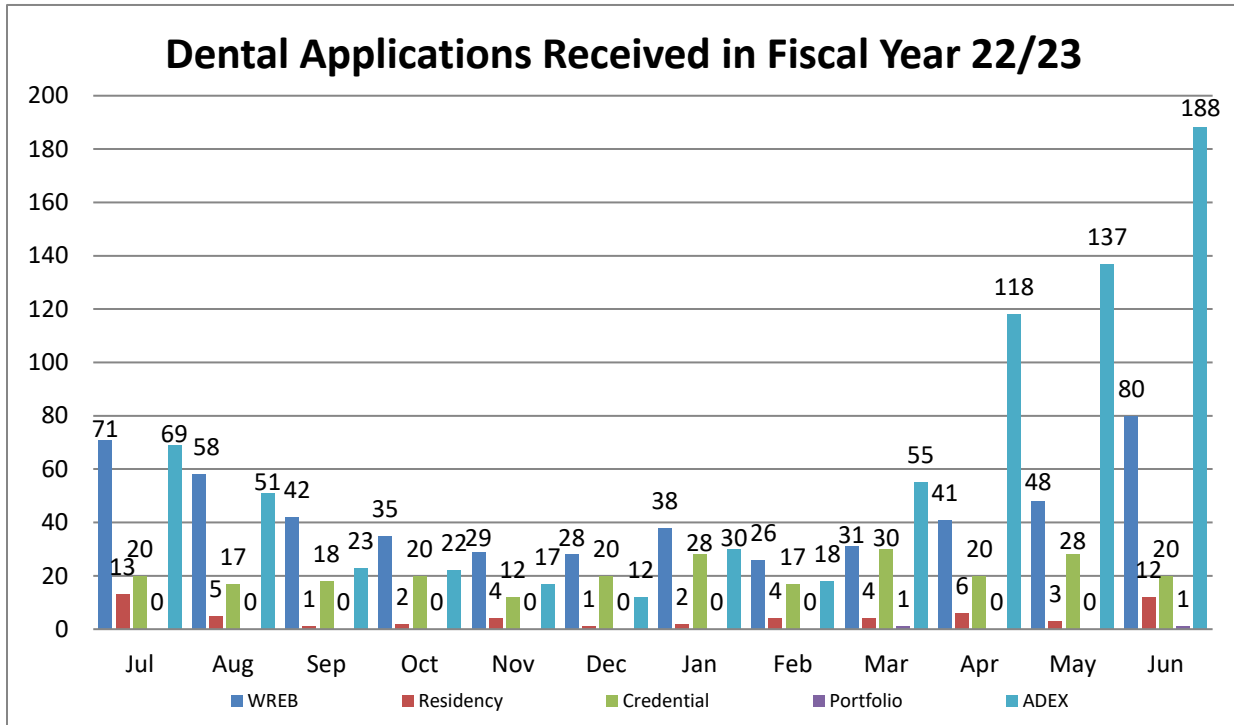
Portfolio 21/22	0	0	0	0	0	0	0	0	0	0	0	0	0
Portfolio 22/23	0	0	0	0	0	0	0	0	0	0	0	0	0
ADEX 19/20	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	0	1	0	1
ADEX 20/21	2	25	17	17	10	5	4	3	4	7	11	75	180
ADEX 21/22	107	40	22	23	6	7	9	5	5	5	17	26	272
ADEX 22/23	39	94	96	40	20	22	19	24	17	23	33	53	480
Cancelled Dental Applications by Month													
	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Totals
WREB 19/20	23	6	1	2	2	129	4	5	1	6	22	41	242
WREB 20/21	38	31	3	2	2	0	1	1	0	1	3	0	82
WREB 21/22	1	1	0	0	1	2	0	1	0	0	0	0	6
WREB 22/23	0	2	1	1	0	0	0	1	0	0	0	0	5
Residency 19/20	12	3	1	1	0	17	3	1	1	4	3	5	51
Residency 20/21	8	0	0	0	2	0	1	0	0	0	1	1	13
Residency 21/22	0	0	0	0	0	1	0	1	0	0	0	0	2
Residency 22/23	0	0	0	0	0	0	0	0	0	0	0	0	0
Credential 19/20	1	1	2	0	0	4	1	0	0	0	0	0	9
Credential 20/21	0	2	1	1	0	0	1	0	0	0	1	0	6
Credential 21/22	2	0	0	2	1	0	1	0	0	0	0	0	6
Credential 22/23	0	0	1	2	0	0	0	0	0	1	0	1	5
Portfolio 19/20	0	0	0	0	0	0	0	0	0	0	0	0	0
Portfolio 20/21	0	0	0	0	0	0	0	0	0	0	0	0	0
Portfolio 21/22	0	0	0	0	0	0	0	0	0	0	0	0	0
Portfolio 22/23	0	0	0	0	0	0	0	0	0	0	0	0	0
ADEX 19/20	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	0	1	2	3
ADEX 20/21	8	2	0	0	0	0	0	0	1	0	0	1	12
ADEX 21/22	0	0	0	0	0	0	0	1	0	0	0	0	1
ADEX 22/23	0	0	0	0	0	0	2	0	3	0	0	0	5
Withdrawn Dental Applications by Month													
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Totals
WREB 19/20	4	1	3	0	2	35	0	2	0	0	1	2	50
WREB 20/21	8	17	30	20	8	6	6	13	8	35	28	45	224
WREB 21/22	34	11	12	78	7	13	19	7	15	6	1	20	223
WREB 22/23	23	15	12	12	2	3	3	2	3	4	5	3	87
Residency 19/20	1	0	0	0	0	9	0	0	1	0	1	0	12
Residency 20/21	1	4	2	3	2	0	2	1	1	0	5	7	28
Residency 21/22	13	5	0	24	2	3	16	0	4	1	3	1	72
Residency 22/23	0	4	3	1	0	0	0	1	0	0	1	1	11

Credential 19/20	1	1	0	0	1	1	0	0	0	0	0	0	4
Credential 20/21	1	4	2	3	0	0	0	0	3	0	0	5	18
Credential 21/22	5	2	1	1	2	0	0	0	0	2	2	2	17
Credential 22/23	0	1	1	0	0	1	1	0	0	0	0	2	6
Portfolio 19/20	0	0	0	0	0	0	0	0	0	0	0	0	0
Portfolio 20/21	0	0	0	0	0	0	0	0	0	0	0	1	1
Portfolio 21/22	0	0	0	0	0	0	0	0	1	0	0	0	1
Portfolio 22/23	0	0	1	0	0	0	0	0	0	0	0	0	1
ADEX 19/20	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
ADEX 20/21	2	4	5	2	0	1	0	4	2	10	23	26	79
ADEX 21/22	16	2	5	17	0	2	6	0	0	5	0	11	64
ADEX 22/23	12	12	1	6	1	0	4	1	1	3	2	4	47
Denied Dental Applications by Month													
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Totals
WREB 19/20	0	0	0	0	0	0	0	0	0	0	0	0	0
WREB 20/21	1	0	0	0	0	0	0	2	0	0	0	0	3
WREB 21/22	0	0	0	0	0	0	0	0	0	0	0	0	0
WREB 22/23	0	0	0	0	0	0	1	0	0	0	0	0	1
Residency 19/20	0	0	0	0	0	0	0	0	0	0	0	0	0
Residency 20/21	0	0	0	0	0	0	0	0	0	0	0	0	0
Residency 21/22	0	0	0	0	0	0	0	0	0	0	0	0	0
Residency 22/23	0	0	0	0	0	0	0	0	0	0	0	0	0
Credential 19/20	0	0	0	0	0	0	0	0	0	0	0	0	0
Credential 20/21	2	0	0	1	0	0	1	0	0	0	0	0	4
Credential 21/22	0	0	0	0	0	0	0	0	0	0	0	0	0
Credential 22/23	0	0	0	0	0	0	1	0	0	0	0	0	1
Portfolio 19/20	0	0	0	0	0	0	0	0	0	0	0	0	0
Portfolio 20/21	0	0	0	0	0	0	0	0	0	0	0	0	0
Portfolio 21/22	0	0	0	0	0	0	0	0	0	0	0	0	0
Portfolio 22/23	0	0	0	0	0	0	0	0	0	0	0	0	0
ADEX 19/20	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
ADEX 20/21	N/A	N/A	N/A	N/A	N/A	N/A	0	0	0	0	0	0	0
ADEX 21/22	0	0	0	0	0	0	0	0	0	0	0	0	0
ADEX 22/23	0	0	0	0	0	0	0	0	0	0	0	0	0

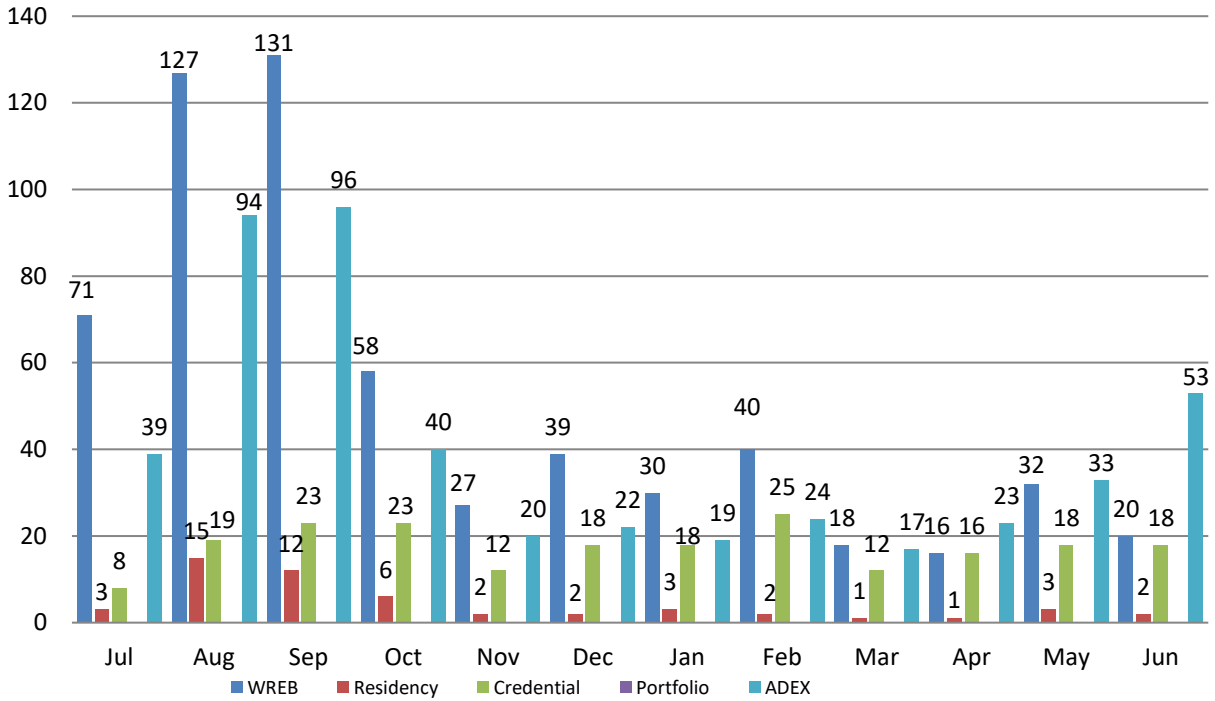
Application Definitions	
Received	Application submitted in physical form or digitally through Breeze system.
Approved	Application for eligibility of licensure processed with all required documentation.
License Issued	Application processed with required documentation and paid prorated fee for initial license.
Cancelled	Board requests staff to remove application (i.e., duplicate).
Withdrawn	Applicant requests Board to remove application
Denied	The Board denies an application on the on the grounds that the applicant has been convicted of a crime or has been subject to formal discipline; in accordance with Business and Professions Code, Division 1.5, Chapter 2, Denial of Licenses.

Dental License Application Statistic Graphs

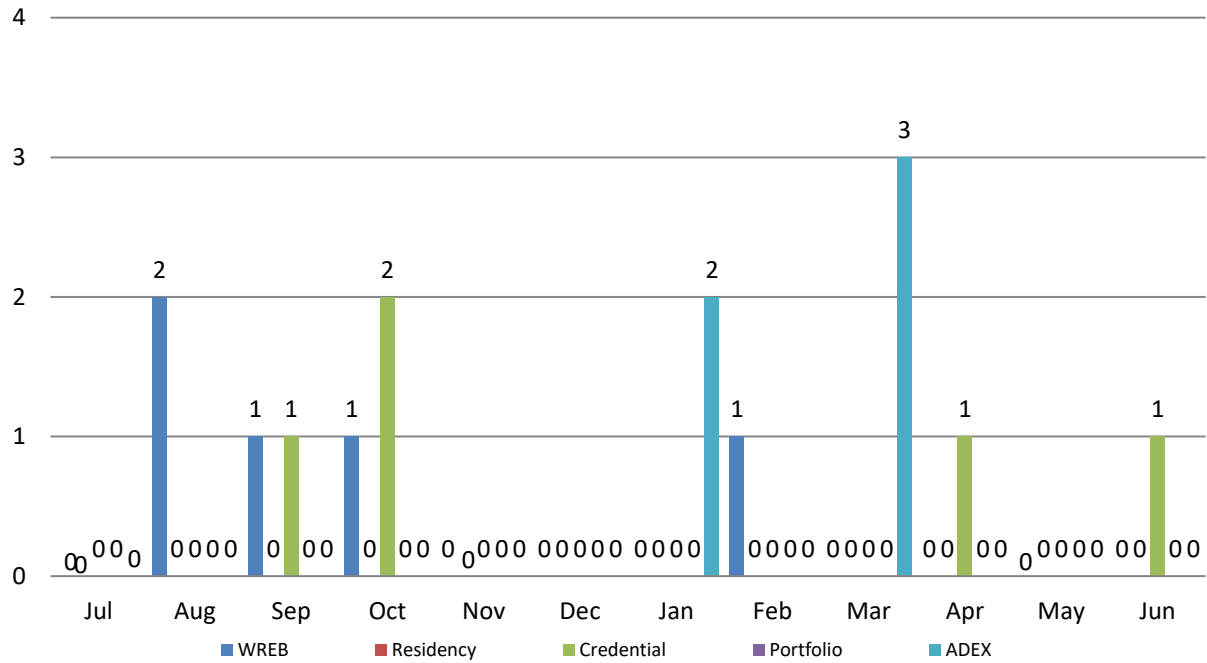
The following graphs represent monthly dental license application statistics by pathway for fiscal year 2022/23 as of June 30, 2023.



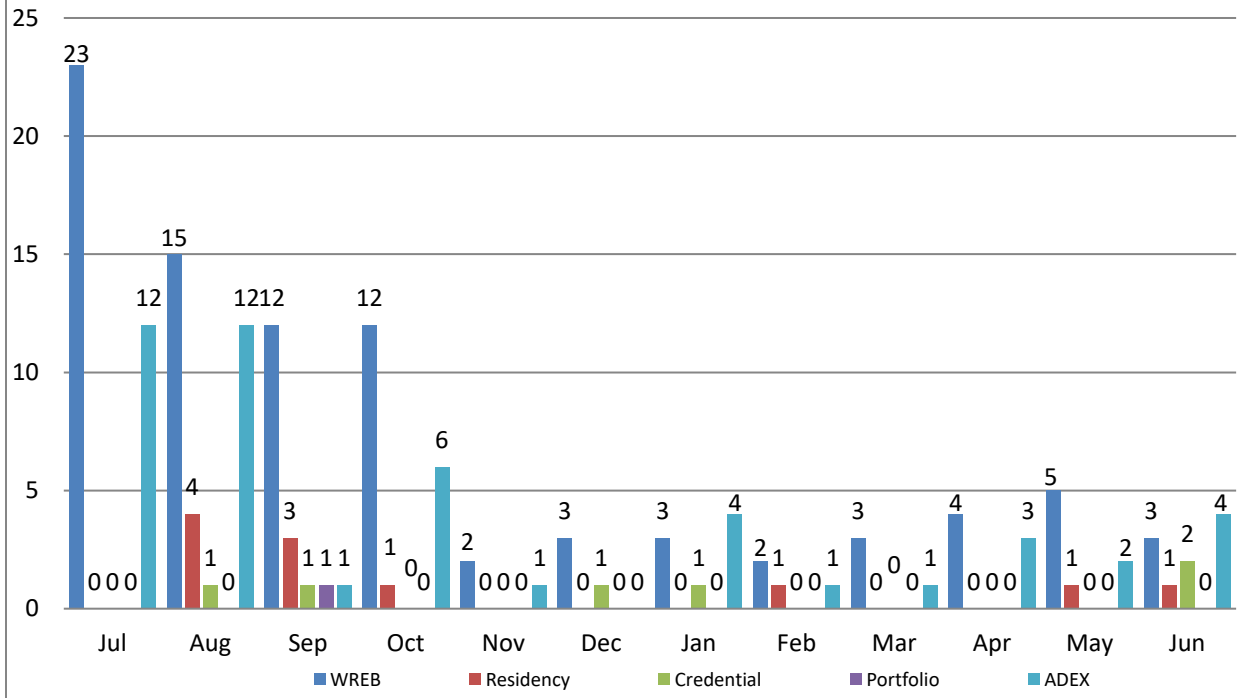
Dental Licenses Issued in Fiscal Year 22/23



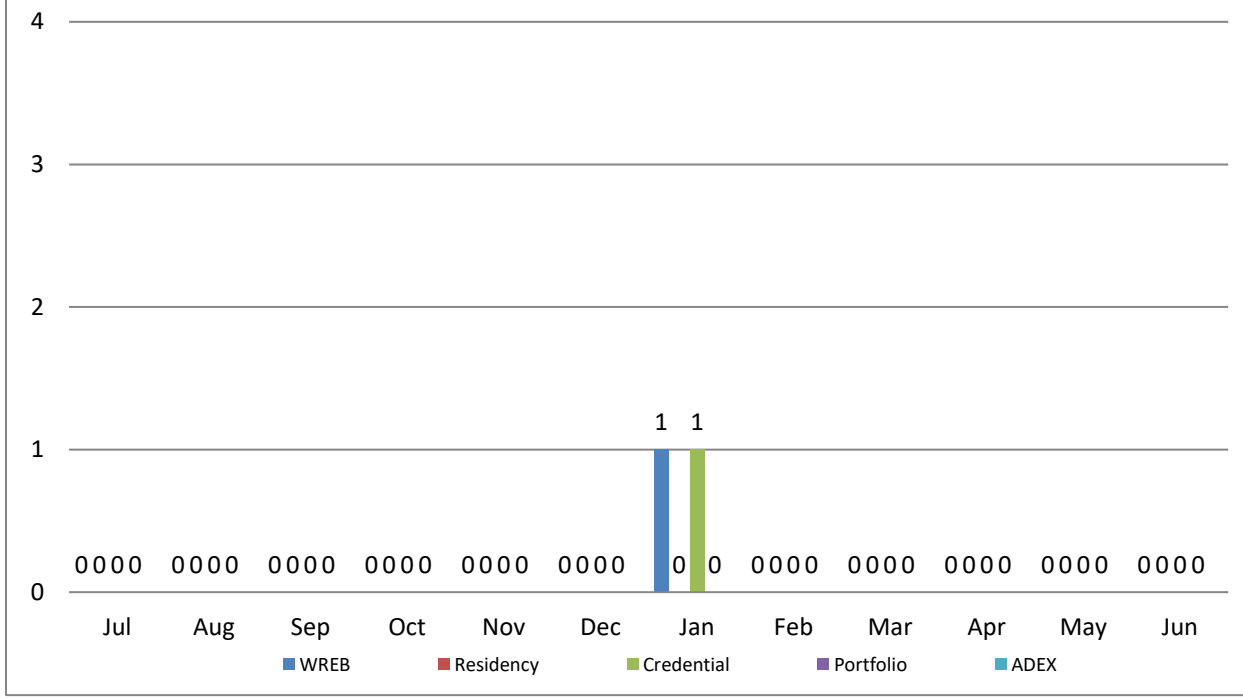
Cancelled Dental Applications in Fiscal Year 22/23



Withdrawn Dental Applications in Fiscal Year 22/23



Denied Dental Applications in Fiscal Year 22/23



Dental Law and Ethics Written Examination Statistics

The following table provides statistics as of March 30, 2023.

License Type	DDS				
Exam Title	Dental Law and Ethics Examination				
Licensure Pathway		WREB	LBR	PORT	ADEX
2019/20	# of 1 st Time Candidates	698	105	N/A	5
	Pass %	94.13%	95.24%	N/A	100.00%
2020/21	# of 1 st Time Candidates	824	89	4	232
	Pass %	86.89%	91.01%	50.00%	82.33%
2021/22	# of 1 st Time Candidates	326	61	0	164
	Pass %	72.70%	77.05%	N/A	79.88%
2022/23	# of 1 st Time Candidates	247	21	N/A	230
	Pass %	77.67%	91.30%	N/A	82.73%
Date of Last Occupational Analysis: 2018					
Name of Developer: Office of Professional Examination Services					
Target Occupational Analysis Date: 2025					

Dental License and Permits Statistics

The following table provides statistics on dental licenses issued by pathway to licensure by fiscal year 2019–20, 2020–21, 2021–22 and 2022–23 as of June 30, 2023.

Dental Licenses Issued via Pathway	Total Issued in 19/20	Total Issued in 20/21	Total Issued in 21/22	Total Issued 22/23	Total Issued to Date	Date Pathway Implemented
WREB Exam	769	905	588	609	12,671	January 1, 2006
Licensure by Residency	133	130	141	52	2,371	January 1, 2007
Licensure by Credential	153	211	155	210	3,644	July 1, 2002
(LBC Clinic Contract)	9	14	14	13	65	July 1, 2002
(LBC Faculty Contract)	5	6	1	5	22	July 1, 2002
Portfolio	4	4	0	0	79	November 5, 2014
ADEX	1	180	272	480	933	November 15, 2019
Total	1,060	1,430	1,156	1,351	19,785	

The following table provides statistics on dental license and permit status statistics by fiscal year 2019–20, 2020–21, 2021–22 and 2022–23 as of June 30, 2023.

License Type	License Status	FY 19/20	FY 20/21	FY 21/22	FY 22/23
Dental License	Active	34,586	34,922	34,619	34,710
	Inactive	1,784	1,751	1,727	1,691
	Retired/ReducedFee	1,274	1,297	1,251	1,168
	Disabled	106	98	95	87
	Delinquent	5,445	5,540	6,002	6,180
	Cancelled	17,602	18,720	19,604	20,703
License Type	License Status	FY 19/20	FY 20/21	FY 21/22	FY 22/23
Additional Office Permit	Active	2,717	2,750	2,556	2,375
	Delinquent	890	992	1,204	1,390
	Cancelled	6,926	7,181	7,418	7,726
License Type	License Status	FY 19/20	FY 20/21	FY 21/22	FY 22/23
Conscious Sedation	Active	535	543	554	380
	Delinquent	38	43	63	219
	Cancelled	552	586	606	625
License Type	License Status	FY 19/20	FY 20/21	FY 21/22	FY 22/23
Continuing Education Registered Provider Permit	Active	901	854	744	746
	Delinquent	810	744	776	660
	Cancelled	2,185	2,344	2,471	2,663

License Type	License Status	FY 19/20	FY 20/21	FY 21/22	FY 22/23
Elective Facial Cosmetic Surgery Permit	Active	29	30	29	27
	Delinquent	5	5	6	6
	Cancelled	1	2	3	4
License Type	License Status	FY 19/20	FY 20/21	FY 21/22	FY 22/23
Extramural Facility Registration*	Active	186	203	205	60
	Delinquent	N/A	N/A	N/A	N/A
	Cancelled	N/A	N/A	N/A	N/A
License Type	License Status	FY 19/20	FY 20/21	FY 21/22	FY 22/23
Fictitious Name Permit	Active	7,099	7,250	6,782	6,485
	Delinquent	1,706	1,782	2,394	2,855
	Cancelled	6,802	7,361	7,808	8,350
License Type	License Status	FY 19/20	FY 20/21	FY 21/22	FY 22/23
General Anesthesia Permit	Active	897	918	925	949
	Delinquent	22	31	38	41
	Cancelled	1,008	1,042	1,067	1,095
License Type	License Status	FY 19/20	FY 20/21	FY 21/22	FY 22/23
Mobile Dental Clinic Permit	Active	45	55	44	45
	Delinquent	43	29	44	39
	Cancelled	52	78	81	88
License Type	License Status	FY 19/20	FY 20/21	FY 21/22	FY 22/23
Medical General Anesthesia	Active	111	136	156	153
	Delinquent	27	30	27	32
	Cancelled	203	211	226	242
License Type	License Status	FY 19/20	FY 20/21	FY 21/22	FY 22/23
Moderate Sedation Permit	Active	N/A	N/A	N/A	192
	Delinquent	N/A	N/A	N/A	1
	Cancelled	N/A	N/A	N/A	3
License Type	License Status	FY 19/20	FY 20/21	FY 21/22	FY 22/23
Oral Conscious Sedation Certification (Adult Only 1,160; Adult & Minors 811)	Active	2,402	2,391	2,352	1,971
	Delinquent	647	638	702	386
	Cancelled	930	1,096	1,185	1,960
License Type	License Status	FY 19/20	FY 20/21	FY 21/22	FY 22/23
Oral and Maxillofacial Surgery Permit	Active	96	93	94	96
	Delinquent	4	10	10	9
	Cancelled	22	22	25	27
License Type	License Status	FY 19/20	FY 20/21	FY 21/22	FY 22/23

Pediatric Minimal Sedation Permit	Active	N/A	N/A	N/A	102
	Delinquent	N/A	N/A	N/A	1
	Cancelled	N/A	N/A	N/A	0
License Type	License Status	FY 19/20	FY 20/21	FY 21/22	FY 22/23
Referral Service Registration*	Active	157	159	161	7
	Delinquent	N/A	N/A	N/A	0
	Cancelled	N/A	N/A	N/A	2
License Type	License Status	FY 19/20	FY 20/21	FY 21/22	FY 22/23
Special Permit	Active	37	35	35	34
	Delinquent	9	9	7	6
	Cancelled	184	190	195	203
Status Definitions					
Active	Current and can practice without restrictions (<i>BPC §1625</i>)				
Inactive	Current but cannot practice, continuing education not required (<i>CCR §1017.2</i>)				
Retired/Reduced Fee	Current, has practiced over 20 years, eligible for Social Security and can practice with restrictions (<i>BPC §1716.1a</i>)				
Disabled	Current with disability but cannot practice (<i>BPC §1716.1b</i>)				
Delinquent	Renewal fee not paid within one month after expiration date (<i>BPC §163.5</i>)				
Cancelled	Renewal fee not paid 5 years after its expiration and may not be renewed (<i>BPC §1718.3a</i>) Total number of licenses / permits cancelled to date.				

The following table provides statistics on population (Pop.), current & active dental licenses by County, and population (Pop.) per dental license by County in 2020/21, 2021/22 and 2022/23 as of March 31, 2023.

County	DDS per County in 2020/21	Pop. in 2020/21	Pop. Per DDS in 2020/21	DDS per County in 2021/22	Pop. in 2021/22	Pop. per DDS in 2021/22	DDS per County in 2022/23	Pop. in 2022/23	Pop. per DDS in 2022/23
Alameda	1,497	1,670,834	1,116	1,492	1,651,979	1,107	1,485	1,651,979	1,112
Alpine	1	1,142	1,142	1	1,200	1,200	0	1,200	0
Amador	23	37,676	1,638	22	40,297	1,831	21	40,297	1,918
Butte	126	210,291	1,668	124	201,608	1,666	124	201,608	1,625
Calaveras	18	45,023	2,501	18	45,049	2,516	21	45,049	2,145
Colusa	6	21,902	3,650	6	21,807	3,639	6	21,807	3,634
Contra Costa	1,123	1,153,561	1,027	1,098	1,156,555	1,065	1,103	1,156,555	1,048
Del Norte	15	27,298	1,819	13	27,218	1,981	11	27,218	2,474
El Dorado	161	193,227	1,200	157	190,465	1,213	152	190,465	1,253
Fresno	622	1,023,358	1,645	613	1,011,273	1,649	620	1,011,273	1,631
Glenn	10	29,400	2,940	6	28,750	4,791	7	28,750	4,107
Humboldt	68	133,302	1,960	64	135,168	2,099	63	135,168	2,145
Imperial	38	188,777	4,967	38	179,329	4,719	39	179,329	4,598
Inyo	9	18,584	2,064	8	18,978	2,372	5	18,978	3,795
Kern	350	917,553	2,621	340	909,813	2,605	341	909,813	2,668
Kings	64	153,608	2,400	49	152,023	2,209	61	152,023	2,492
Lake	45	64,040	1,423	26	67,407	1,450	39	67,407	1,728
Lassen	24	28,833	1,201	23	30,274	1,363	22	30,274	1,376
Los Angeles	8,502	10,172,951	1,196	8,418	9,861,224	1,184	8,416	9,861,224	1,171
Madera	43	158,147	3,677	45	157,396	3,720	44	157,396	3,577
Marin	304	260,831	857	308	257,135	860	290	257,135	886
Mariposa	7	18,067	2,581	7	17,045	2,435	7	17,045	2,435
Mendocino	52	87,946	1,691	54	89,999	1,666	49	89,999	1,836
Merced	91	283,521	3,115	97	284,338	3,023	92	284,338	3,090

County	DDS per County in 2020/21	Pop. in 2020/21	Pop. Per DDS in 2020/21	DDS per County in 2021/22	Pop. in 2021/22	Pop. per DDS in 2021/22	DDS per County in 2022/23	Pop. in 2022/23	Pop. per DDS in 2022/23
Modoc	5	9,570	1,914	3	8,690	1,740	3	8,690	2,896
Mono	3	13,464	4,488	5	13,379	2,675	5	13,379	2,675
Monterey	259	441,143	1,703	257	433,716	1,669	248	433,716	1,748
Napa	113	139,088	1,230	112	136,179	1,215	110	136,179	1,237
Nevada	77	98,114	1,274	77	101,242	1,294	72	101,242	1,406
Orange	4,005	3,194,332	797	4,059	3,162,245	788	4,073	3,162,245	776
Placer	471	403,711	857	466	409,025	879	472	409,025	866
Plumas	15	18,260	1,217	14	18,942	1,353	13	18,942	1,457
Riverside	1,111	2,442,304	2,198	1,122	2,435,525	2,170	1,142	2,435,525	2,132
Sacramento	1,159	1,555,365	1,341	1,175	1,576,618	1,344	1,176	1,576,618	1,340
San Benito	23	62,353	2,711	24	65,479	3,057	23	65,479	2,846
San Bernardino	1,381	2,180,537	1,578	1,370	2,187,665	1,572	1,398	2,187,665	1,564
San Diego	2,779	3,343,355	1,203	2,764	3,287,306	1,187	2,820	3,287,306	1,165
San Francisco	1,225	897,806	732	1,175	842,754	730	1,151	842,754	732
San Joaquin	371	773,632	2,085	371	784,298	2,114	376	784,298	2,085
San Luis Obispo	225	277,259	1,232	207	280,721	1,357	210	280,721	1,336
San Mateo	858	773,244	901	853	744,662	900	843	744,662	883
Santa Barbara	324	451,840	1,394	312	445,164	1,436	307	445,164	1,450
Santa Clara	2,292	1,961,969	856	2,284	1,894,783	848	2,289	1,894,783	827
Santa Cruz	170	271,233	1,595	166	255,564	1,651	168	255,564	1,586
Shasta	115	178,045	1,548	107	180,531	1,718	100	180,531	1,805
Sierra	1	3,201	3,201	0	3,229	0	0	3,229	0
Siskiyou	24	44,461	1,852	21	43,830	2,003	23	43,830	1,905
Solano	287	440,224	1,533	282	447,241	1,574	279	447,241	1,603
Sonoma	393	492,980	1,254	383	482,404	1,256	382	482,404	1,262
Stanislaus	273	557,709	2,042	271	549,466	2,017	274	549,466	2,005
Sutter	56	100,750	1,799	52	99,145	1,879	51	99,145	1,944

Agenda Item 10.a.: Update on Dental Licensure and Permit Statistics
Dental Board of California Meeting
August 17-18, 2023

County	DDS per County in 2020/21	Pop. in 2020/21	Pop. per DDS in 2020/21	DDS per County In 2021/22	Pop. In 2021/22	Pop. per DDS in 2021/22	DDS per County in 2022/23	Pop. In 2022/23	Pop. per DDS in 2022/23
Tehama	29	65,129	2,245	31	65,052	2,194	31	65,052	2,098
Trinity	4	13,548	3,387	3	16,023	5,341	3	16,023	5,341
Tulare	227	479,977	2,114	218	475,014	2,131	217	475,014	2,189
Tuolumne	47	54,917	1,168	48	55,291	1,209	47	55,291	1,176
Ventura	666	842,886	1,265	666	833,652	1,265	627	833,652	1,329
Yolo	114	221,705	1,944	118	221,165	1,874	122	221,165	1,812
Yuba	7	78,887	11,269	6	82,275	11,653	7	82,275	11,753
Out of State/Country	2,614	N/A	N/A	2,369	N/A	N/A	2,343	N/A	N/A
Total	34,922	39,782,870	N/A	32,049	39,185,605	N/A	34,168	39,185,605	N/A

*Population data obtained from Department of Finance, Demographic Research Unit as of 7/1/2022.

*The counties with the highest Population per DDS are:	Yuba County (1:11,753)	*The counties with the lowest Population per DDS are:	Sierra County (No DDS)
	Trinity County (1:5,341)		Alpine County (No DDS)
	Imperial County (1:4,598)		San Francisco County (1:732)
	Glenn County (1:4,107)		Orange County (1:776)
	Inyo County (1:3,795)		Santa Clara (1:827)

Action Requested

No action is requested.



MEMORANDUM

DATE	August 1, 2023
TO	Members of the Dental Board of California
FROM	Paige Ragali, Elective Facial Cosmetic Surgery Permit Program Coordinator Dental Board of California
SUBJECT	Agenda Item 11.: Report on July 26, 2023 Meeting of the Elective Facial Cosmetic Surgery (EFCS) Permit Credentialing Committee; Board Discussion and Possible Action on EFCS Permit Application

Elective Facial Cosmetic Surgery Permit Credentialing Committee Report

The Elective Facial Cosmetic Surgery (EFCS) Permit Credentialing Committee (Committee) met on July 26, 2023, via teleconference, with two noticed public locations. Four members of the Committee were present at the meeting, and a quorum was established. Anil Punjabi, MD, DDS, was absent for meeting.

Committee Chair Robert Gramins, DDS, requested public comment on items not on the agenda. There were no members of the public present for the meeting.

The Committee discussed the April 26, 2023 Meeting Minutes. Committee Member Peter Scheer, DDS, moved to adopt the April 26, 2023 Meeting Minutes, and Committee Member Louis Gallia, DMD, MD, seconded the motion. Before a vote on the motion, public comment was requested, and no public comment was made on the motion. The motion passed on a vote of 4-0.

The Committee recessed open session and convened in closed session pursuant to Government Code section 11126, subdivision (c)(2), to consider one elective facial cosmetic surgery permit application seeking privileges to perform cosmetic contouring of the osteocartilaginous facial structure (Category I) and cosmetic soft tissue contouring or rejuvenation (Category II).

The Committee reconvened in open session, and Committee Chair Gramins reported that one application was considered by the Committee in closed session. The Committee recommended approval of the application contingent upon Dental Board of California (Board) staff receiving additional clarifying documentation to support the application; if no supplemental documentation is received, then the Committee recommended denial of the application.

Agenda Item 11.: Report on July 26, 2023 Meeting of the Elective Facial Cosmetic Surgery (EFCS) Permit Credentialing Committee; Board Discussion and Possible Action on EFCS Permit Application
Dental Board of California Meeting
August 17-18, 2023

The Committee meeting adjourned at 3:53 p.m.

Discussion of Application Recommendation

Applicant Samuel Liu, DDS, requested unlimited privileges for a permit issued under Business and Professions Code section 1638.1, subdivision (c)(2)(A)(iii)(I) and (II), which would authorize the applicant to perform cosmetic contouring of the osteocartilaginous facial structure, which may include, but is not limited to, rhinoplasty and otoplasty (Category I), and cosmetic soft tissue contouring or rejuvenation, which may include, but is not limited to, facelift, blepharoplasty, facial skin resurfacing, or lip augmentation (Category II).

On July 31, 2023, Board staff received the requested supplemental documentation of the operative reports. As such, the applicant has satisfied the Committee's request, and the Board is asked to consider the Committee's recommendation to approve the EFCS permit application for unlimited Category I and II privileges.

Action Requested

If the Board agrees with the Committee's recommendation, the Board is asked to move to approve the EFCS permit application of Samuel Liu, DDS, for unlimited Category I and II privileges.



MEMORANDUM

DATE	July 6, 2023
TO	Members of the Dental Board of California
FROM	Access to Care Committee Lilia Larin, DDS Yogita Thakur, DDS, MS
SUBJECT	Agenda Item 12.: Discussion and Possible Action on the Access to Care Committee Report

Background

In early 2023, the Dental Board of California (Board) reestablished the Access to Care Committee (Committee). The Board President appointed Dr. Lilia Larin and Dr. Yogita Thakur to the Committee.

Recent Committee Actions

To generate ideas on improving access to dental service care across California, Drs. Larin and Thakur met with the State Dental Director on June 20, 2023. The State Dental Director, Dr. Jayanth Kumar, directs the Oral Health Program at the California Department of Public Health (CDPH), where he is responsible for the [California Oral Health Plan](#).

Committee Recommendation

Based on its work, the Committee requests that the Board discuss and consider authorizing the Committee to take the following actions:

1. Explore strategies to improve licensure examination transparency. For example, add more content to candidate information bulletins to assist with examination preparation.
2. Evaluate the impact of examination administration time on candidates whose second language is English.
3. Survey candidates to determine how they study for examinations and why they are failing them.
4. Analyze the pathways to licensure for Registered Dental Assistants to determine if the pathways are facilitating access to practice in a fair and valid manner.

Agenda Item 12.: Discussion and Possible Action on the Access to Care Committee Report
Dental Board of California Meeting
August 17-18, 2023

Page 1 of 2

Action Requested

The Committee is requesting that the Board move to authorize the Committee to take the four actions listed above so that the Committee can work with Board staff and provide status reports at future Board meetings.



MEMORANDUM

DATE	July 21, 2023
TO	Members of the Dental Board of California
FROM	John Tran, Associate Governmental Program Analyst Dental Board of California
SUBJECT	Agenda Item 13.a.: General Anesthesia and Sedation Permits: Inspections and Evaluations Statistics

Background

General Anesthesia (GA), Medical General Anesthesia (MGA), and Moderate Sedation (MS) permitholders are subject to an onsite inspection and evaluation prior to the issuance or renewal of a permit at the discretion of the Dental Board of California (Board). The Board must conduct an inspection and evaluation for GA and MGA permitholders at least once every five years, and for MS permitholders at least once every six years. An inspection and evaluation are required to keep a permit active and in good standing.

Effective January 1, 2022, Senate Bill (SB) 501 (Glazer, Chapter 929, Statutes of 2018) repealed Business and Professions Code (BPC) sections 1647–1647.9.5 (Conscious Sedation). As a result, the Board no longer issues or renews Conscious Sedation (CS) permits. To implement SB 501, the Board promulgated a rulemaking that became effective on August 16, 2022. Among other things, the rulemaking amended California Code of Regulations (CCR), title 16, sections 1043.2–1043.7 (concerning inspections and evaluations) to remove and replace each mention of conscious sedation with moderate sedation.

After enactment of SB 501 and the implementing regulations, the Board may no longer conduct onsite inspections and evaluations for CS permitholders. In September 2022, Board staff stopped scheduling and conducting inspections and evaluations of CS permitholders. A CS permitholder who was issued a permit before January 1, 2022 may follow the terms of that existing permit until it expires, even if the CS permitholder was due to complete an inspection and evaluation. As the CS permits expire, Board staff will continue to monitor and investigate grievances related to permitting for the administration of conscious sedation.

The first MS permit (MS 1) was issued on September 15, 2022. Onsite inspections and evaluations may be conducted within one year of issuance of a new MS permit, and new permit holders are allowed to practice within the scope of their permit until the inspection and evaluation. Between September 2022 and March 2023, Board staff contacted newly licensed MS permit holders to schedule their inspections and evaluations. The first series of MS inspections and evaluations were conducted during April 2023.

Onsite Inspection and Evaluation Statistics

This memo provides a statistical overview of onsite inspections and evaluations administered by the Board for GA, MGA, and MS permits.

General Anesthesia Evaluation Statistics for Fiscal Year 2022–23

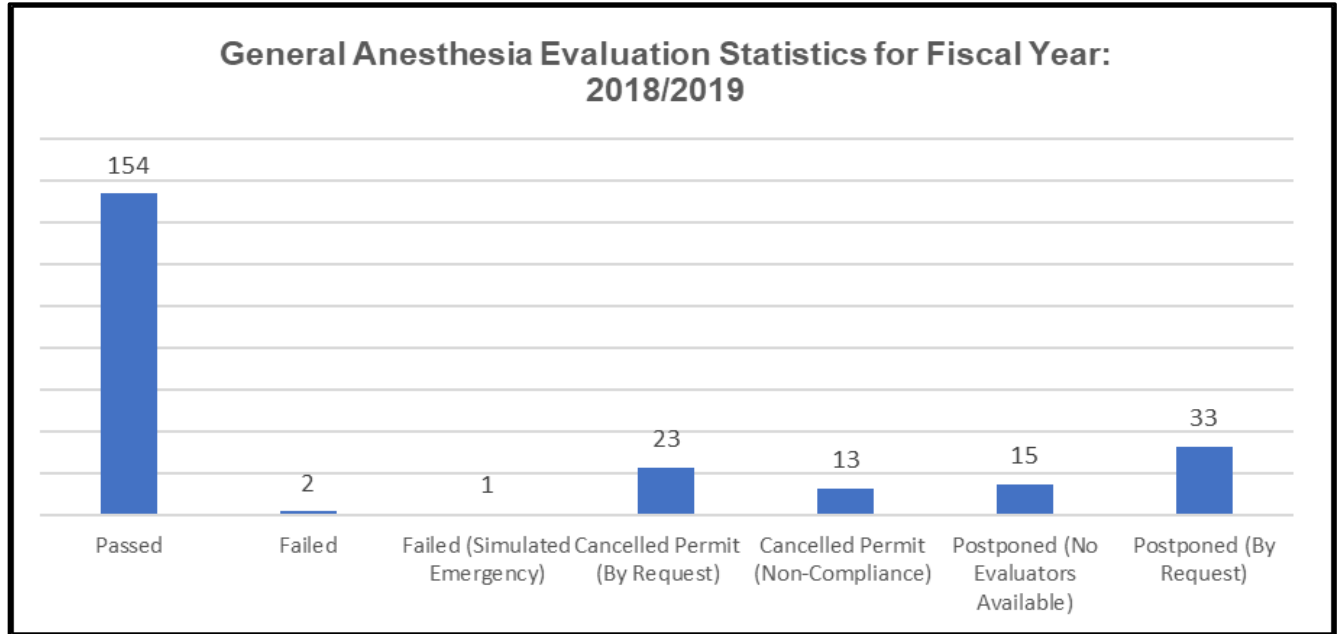
	Passed Evaluation	Failed Evaluation	Failed Simulated Emergency	Cancelled Permit by Request	Cancelled Permit for Non-compliance	Postponed (No Evaluators Available)	Postponed (By Request)
Jul 2022	9	0	0	2	0	11	1
Aug 2022	10	0	0	2	1	5	1
Sep 2022	18	0	0	0	1	12	1
Oct 2022	12	0	0	4	3	7	3
Nov 2022	17	0	0	2	0	13	2
Dec 2022	20	0	0	1	0	8	2
Jan 2023	13	0	0	0	1	7	1
Feb 2023	14	1	0	1	0	2	3
Mar 2023	21	0	0	1	2	2	1
Apr 2023	19	0	1	0	3	2	1
May 2023	23	0	1	1	0	2	0
Jun 2023	21	0	0	0	0	0	4
Total	196	1	2	14	11	71	20

* Approximate number of GA evaluations scheduled for June 2023.

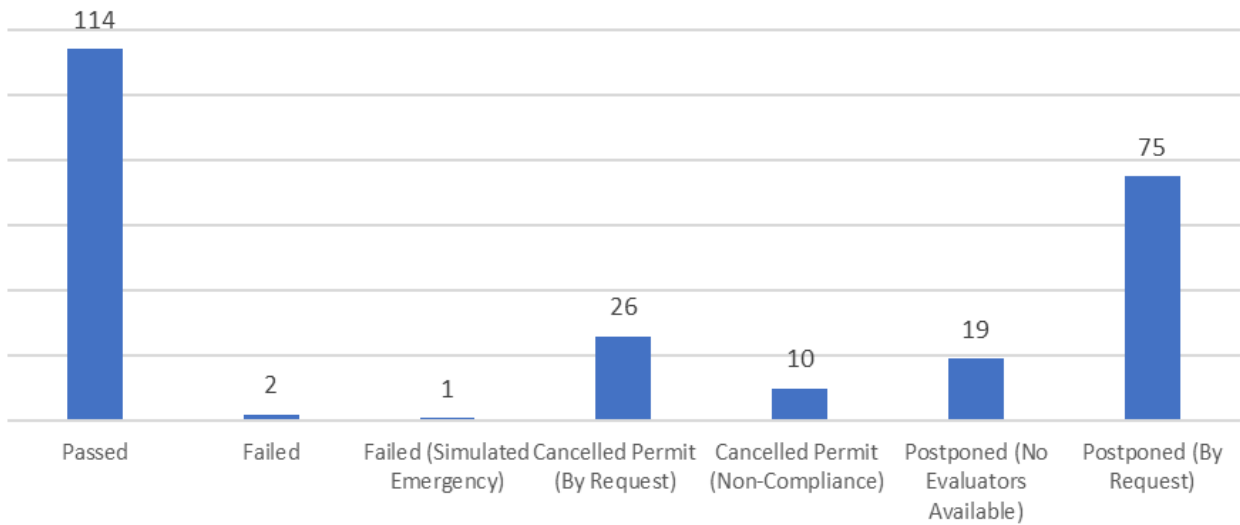
General Anesthesia Evaluation Statistics for Fiscal Years 2018–19, 2019–20, 2020–21, 2021–22, and 2022–23

	18–19	19–20	20–21	21–22	22–23*
Passed Evaluation – Permitholder met all required components of the onsite evaluation.	154	114	147	160	196
Failed Evaluation – Permitholder failed due to multiple deficient components that were required for the onsite evaluation.	2	2	2	0	1
Failed Simulated Emergency – Permitholder failed one or more simulated emergency scenarios required for the onsite evaluation.	1	1	1	2	2
Cancelled Permit by Request – Permitholder no longer wanted permit.	23	26	21	12	14
Cancelled Permit for Noncompliance – Permitholder did not complete required onsite evaluation.	13	10	6	6	11
Postponed (No Evaluators Available) – Permitholder evaluation was postponed due to no available evaluators.	15	19	57	27	71
Postponed (By Request) – Permitholder requested postponement due to scheduling conflict, emergencies, or COVID-related issues.	33	75	66	37	20

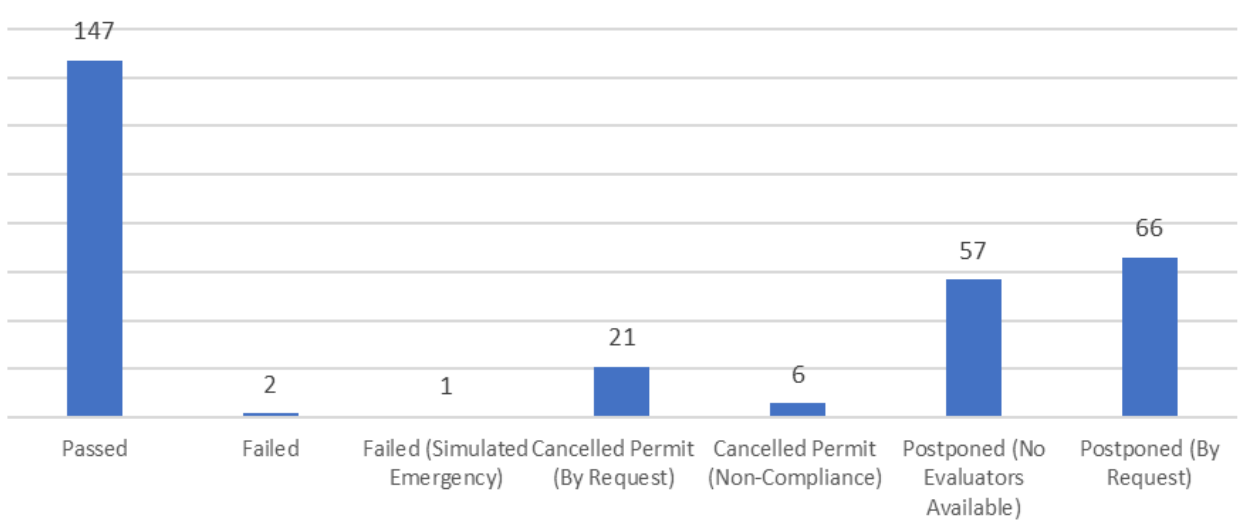
* Approximate number of evaluations scheduled for 2022–23.



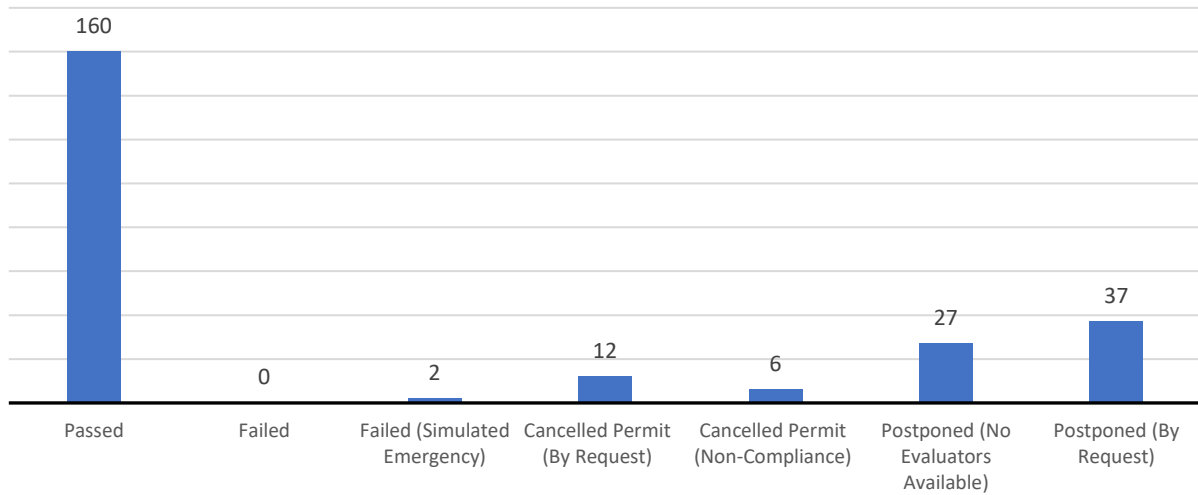
**General Anesthesia Evaluation Statistics for Fiscal Year:
2019/2020**



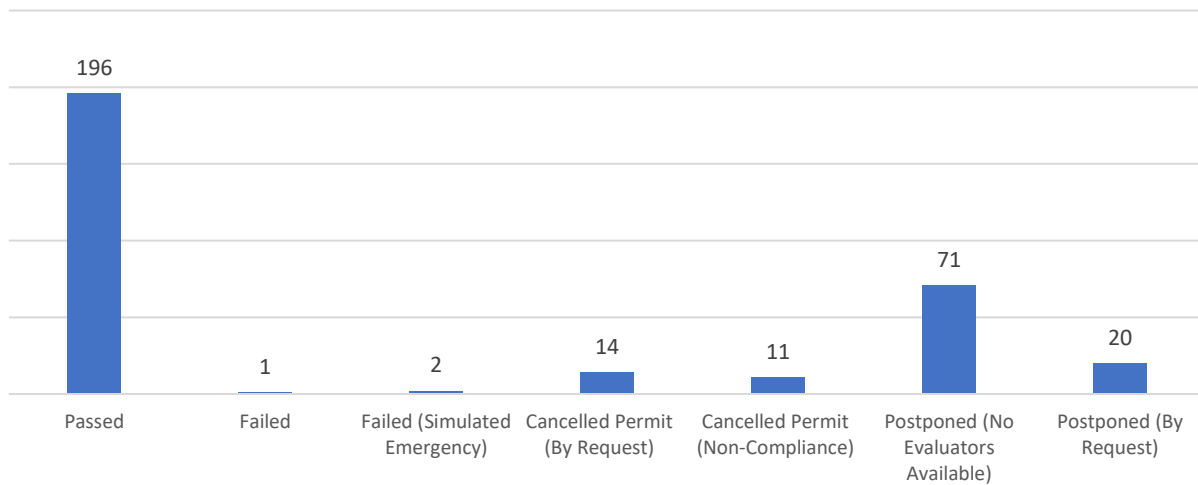
**General Anesthesia Evaluation Statistics for Fiscal Year:
2020/2021**



**General Anesthesia Evaluation Statistics for Fiscal Year:
2021/2022**



General Anesthesia Evaluation Statistics for Fiscal Year: 2022/2023*



Medical General Anesthesia Evaluation Statistics for Fiscal Year 2022–23

	Passed Evaluation	Failed Evaluation	Failed Simulated Emergency	Cancelled Permit by Request	Cancelled Permit for Non-Compliance	Postponed (No Evaluators Available)	Postponed (By Request)
Jul 2022	0	0	0	1	0	1	0
Aug 2022	0	0	0	1	0	2	0
Sep 2022	1	1	0	0	2	0	0
Oct 2022	2	0	0	0	2	0	0
Nov 2022	0	0	0	0	2	0	0
Dec 2022	1	0	0	1	1	0	0
Jan 2023	0	0	0	2	0	0	0
Feb 2023	0	0	0	2	0	0	0
Mar 2023*	0	0	0	1	1	0	0
Apr 2023	0	0	0	1	0	0	1
May 2023	1	0	0	1	0	0	0
Jun 2023	0	0	0	1	1	0	0
Total	5	1	0	11	9	3	1

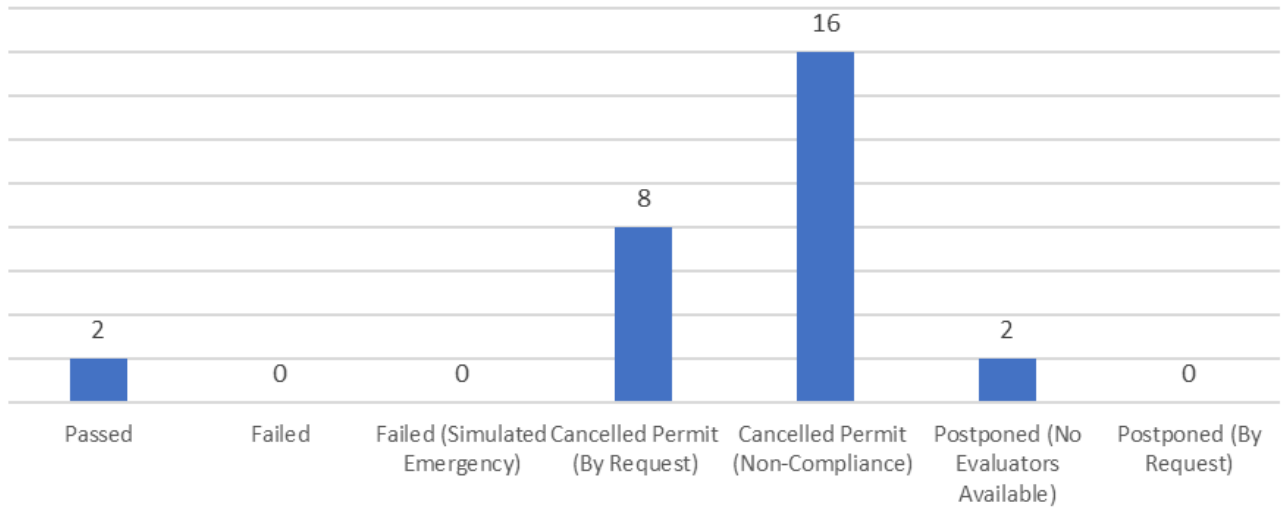
* Approximate number of MGA evaluations scheduled for June 2023.

Medical General Anesthesia Evaluation Statistics for Fiscal Years 2018–19, 2019–20, 2020–21, 2021–22, and 2022–23

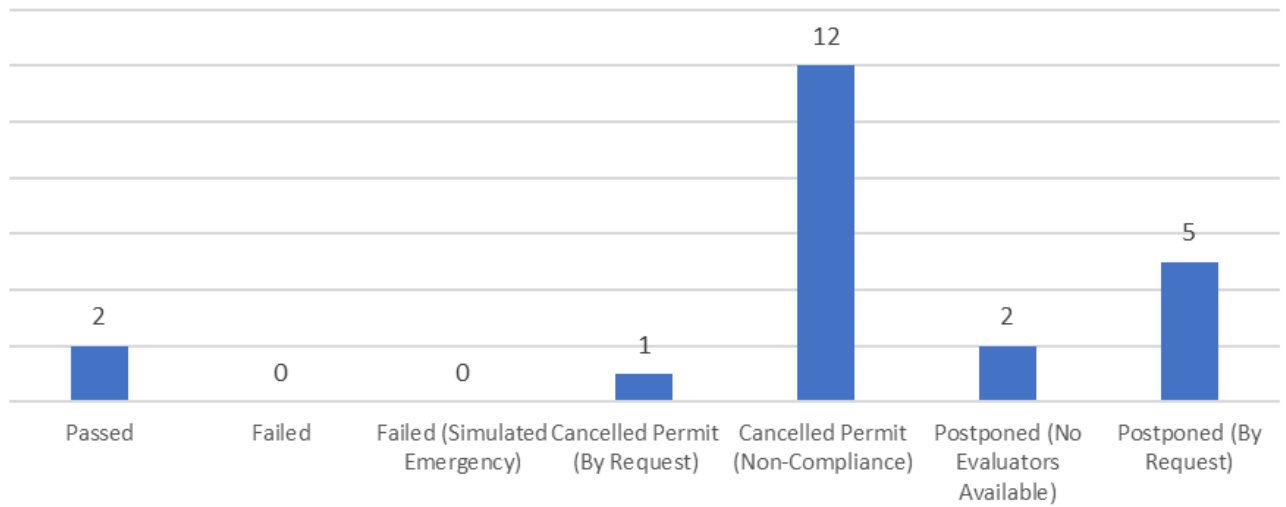
	18–19	19–20	20–21	21–22	22–23*
Passed Evaluation – Permitholder met all required components of the onsite evaluation.	2	2	1	3	5
Failed Evaluation – Permitholder failed due to multiple deficient components that were required for the onsite evaluation.	0	0	0	0	1
Failed Simulated Emergency – Permitholder failed one or more simulated emergency scenarios required for the onsite evaluation.	0	0	0	0	0
Cancelled Permit by Request – Permitholder no longer wanted permit.	8	1	3	2	11
Cancelled Permit for Non-Compliance – Permitholder did not complete required onsite evaluation.	16	12	0	15	9
Postponed (No Evaluators Available) – Permitholder evaluation was postponed due to no available evaluators.	2	2	5	11	3
Postponed (By Request) – Permitholder requested postponement due to scheduling conflict, emergencies, or COVID-related issues.	0	5	3	4	1

* Approximate number of MGA evaluations scheduled for 2022–23.

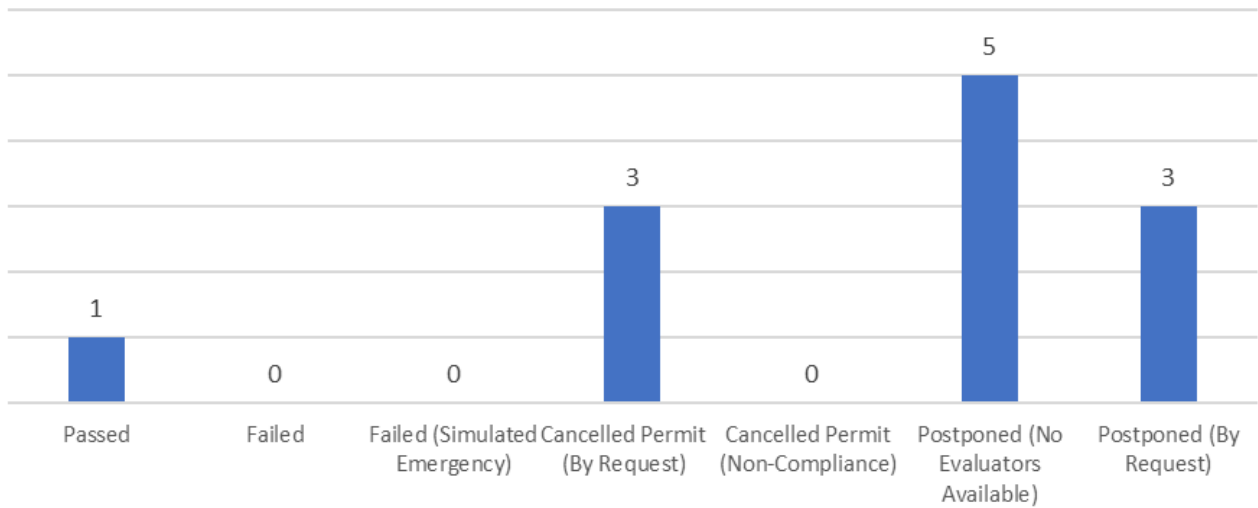
**Medical General Anesthesia Evaluation Statistics for Fiscal Year:
2018/2019**



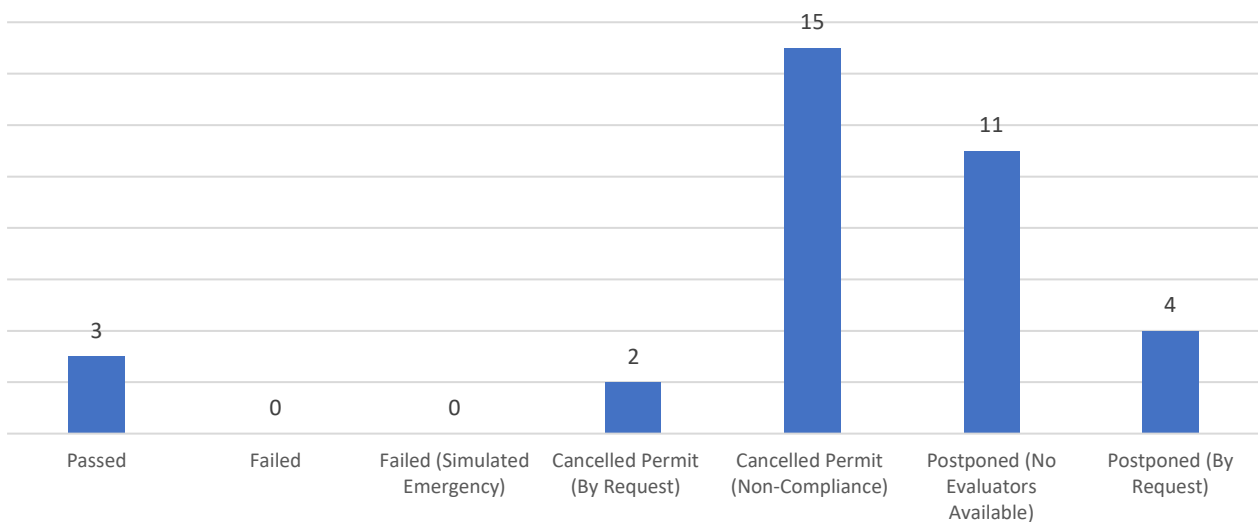
**Medical General Anesthesia Evaluation Statistics for Fiscal Year:
2019/2020**

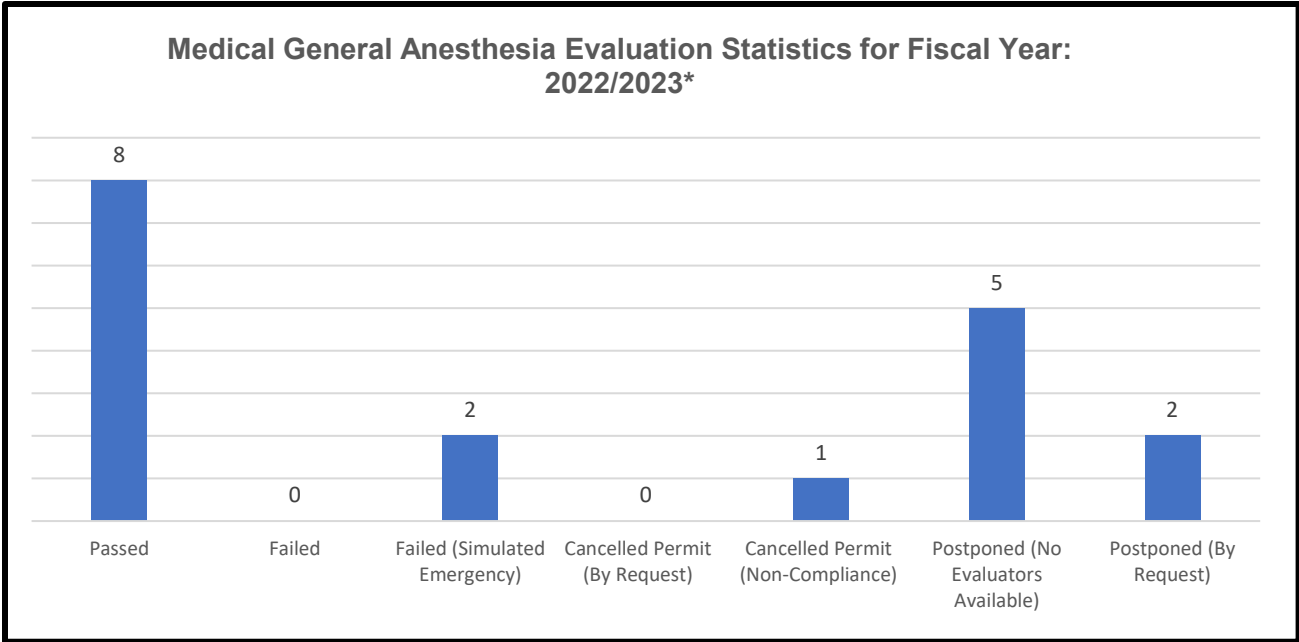


**Medical General Anesthesia Evaluation Statistics for Fiscal Year:
2020/2021**



**Medical General Anesthesia Evaluation Statistics for Fiscal Year:
2021/2022**





Moderate Sedation Evaluation Statistics for Fiscal Year 2022–23

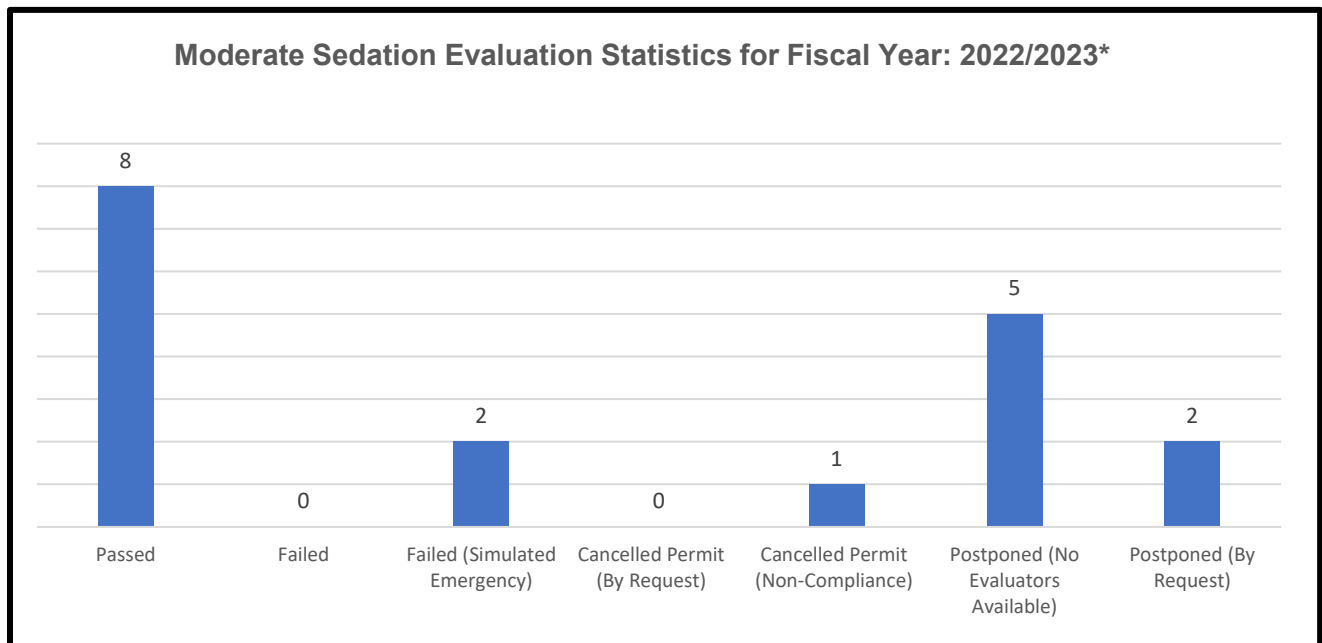
	Passed Evaluation	Failed Evaluation	Failed Simulated Emergency	Cancelled Permit by Request	Cancelled Permit for Non-Compliance	Postponed (No Evaluators Available)	Postponed (By Request)
Apr 2023	3	0	1	0	0	3	0
May 2023	1	0	0	0	0	0	0
Jun 2023*	4	0	1	0	1	2	2
Total	8	0	2	0	1	5	2

* Approximate number of MS evaluations scheduled for June 2023.

Moderate Sedation Evaluation Statistics for Fiscal Year 2022–23

	18–19	19–20	20–21	21–22	22–23*
Passed Evaluation – Permitholder met all required components of the onsite evaluation.	N/A	N/A	N/A	N/A	8
Failed Evaluation – Permitholder failed due to multiple deficient components that were required for the onsite evaluation.	N/A	N/A	N/A	N/A	0
Failed Simulated Emergency – Permitholder failed one or more simulated emergency scenarios required for the onsite evaluation.	N/A	N/A	N/A	N/A	2
Cancelled Permit by Request – Permitholder no longer wanted permit.	N/A	N/A	N/A	N/A	0
Cancelled Permit for Non-Compliance – Permitholder did not complete required onsite evaluation.	N/A	N/A	N/A	N/A	1
Postponed (No Evaluators Available) – Permitholder evaluation was postponed due to no available evaluators.	N/A	N/A	N/A	N/A	5
Postponed (By Request) – Permitholder requested postponement due to scheduling conflict, emergencies, or COVID-related issues.	N/A	N/A	N/A	N/A	2

* Approximate number of MS evaluations scheduled for 2022–23.



Current Evaluators Per Region

Region	GA	MGA	MS
Northern California	124	19	2
Southern California	158	18	2

Action Requested

No action is requested.



MEMORANDUM

DATE	July 19, 2023
TO	Members of the Dental Board of California
FROM	Jessica Olney, Staff Services Manager I Dental Board of California
SUBJECT	Agenda Item 13.b.: Update Regarding Board Implementation of Senate Bill (SB) 501 (Glazer, Chapter 929, Statutes of 2018)

Background

On September 29, 2018, Governor Brown signed SB 501 (Glazer, Chapter 929, Statutes of 2018). SB 501 became fully effective on January 1, 2022. Among other things, SB 501 significantly changed requirements for existing anesthesia and sedation permits, created new permits and pediatric endorsements, and changed patient monitoring requirements.

SB 501 repealed Business and Professions Code (BPC) sections 1646–1646.10 (General Anesthesia), 1647–1647.9.5 (Conscious Sedation), and 1647.10–1647.17.5 (Oral Conscious Sedation for Pediatric Patients). As a result, the Dental Board of California (Board) no longer issues or renews Conscious Sedation (CS) and Oral Conscious Sedation for Minors (OCS-M) permits. SB 501 also added BPC sections 1601.8, 1646–1646.13 (Deep Sedation and General Anesthesia), 1647–1647.12 (Moderate Sedation), and 1647.30–1647.36 (Pediatric Minimal Sedation). As a result, the Board implemented significant changes to the anesthesia and sedation permit program. These changes include:

- New patient monitoring requirements when administering anesthesia or sedation to pediatric patients.
- A new Moderate Sedation (MS) permit required to administer or order the administration of moderate sedation.
- A new Pediatric Minimal Sedation (PMS) permit required to administer or order the administration of pediatric minimal sedation on a patient under the age of 13.
- A new pediatric endorsement for General Anesthesia (GA), Medical General Anesthesia (MGA), and MS permit holders who administer deep sedation, general anesthesia, or moderate sedation to pediatric patients.

Agenda Item 13.b.: Update Regarding Board Implementation of Senate Bill (SB) 501
(Glazer, Chapter 929, Statutes of 2018)
Dental Board of California Meeting
August 17-18, 2023

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Regulations to Implement SB 501

In 2020–2022, Board staff worked with subject matter experts and Legal Counsel to develop regulations to implement SB 501. These regulations became effective on August 16, 2022. The timeline below summarizes this work:

November 19, 2021: Approval of proposed regulatory language by the Board.

December 31, 2021: Initiation of 45-day public comment period on the proposed regulations after submittal by the Board of the initial rulemaking file and necessary materials to the Office of Administrative Law (OAL) for publication in the California Regulatory Notice Register.

February 15, 2022: Closure of the 45-day public comment period, during which Board staff received several written public comments and four requests for a public hearing.

February 16, 2022: Public hearing held through WebEx teleconferencing, at which seven members of the public offered public comment.

March 14, 2022: Board meeting at which staff presented a summary of the comments received and proposed Board responses. Board staff presented additional clean-up modifications to the proposed regulations. The Board accepted Board staff recommendations on the comments received. The Board approved the modified text and documents added to the rulemaking file and directed Board staff to take all steps necessary to complete the rulemaking process. These steps included sending out the modified text and notice of the addition of documents added to the rulemaking file for an additional 15-day comment period. If no adverse comments were received by the close of the 15-day public comment period, the Board authorized the Executive Officer to make any non-substantive changes to the proposed regulations and to adopt the proposed regulations as described in the modified text notice.

March 18, 2022: Notice of the amended rulemaking file and modified text, and posting of the file to the Board's website.

April 4, 2022: Close of the 15-day public comment period; Board staff received one adverse comment that was subsequently withdrawn.

May 2, 2022: Submission of amended rulemaking package to OAL and Department of Finance.

June 8, 2022: Initiation of discussions between Board staff and OAL staff regarding items identified in the proposed text that would require substantive changes and approval from the Board.

June 14, 2022: Withdrawal of the rulemaking file by Board staff to make the changes to the proposed text necessary for final approval.

Agenda Item 13.b.: Update Regarding Board Implementation of Senate Bill (SB) 501
(Glazer, Chapter 929, Statutes of 2018)
Dental Board of California Meeting
August 17-18, 2023

June 28, 2022: Board meeting at which Board staff presented the additional modifications to the proposed regulations that were identified in the review conducted by OAL. The Board approved the second modified text and forms and directed Board staff to take all steps necessary to complete the rulemaking process. These steps included sending out the second modified text notice with these modifications for an additional 15-day comment period. If no adverse comments were received by the close of the 15-day comment period, the Board authorized the Executive Officer to make any non-substantive changes to the proposed regulations and to adopt the proposed regulations as described in the second modified text notice.

June 29, 2022: Notice of the second amended rulemaking file and second modified text and posting of the file to the Board’s website.

July 14, 2022: Close of the 15-day public comment period; adverse comments were received but were found to be not related to the second modified text and were not considered.

July 21, 2022: Submission of final rulemaking package to OAL.

August 16, 2022: Proposed regulatory language became effective after OAL approval.

Implementation of SB 501 Permits

BreEZe was reconfigured to incorporate the statutory and regulatory requirements for issuing and renewing the new SB 501 permits. A simplified version of BreEZe to implement SB 501 was put into production on August 19, 2022. Board staff continue to encounter system fixes, and the configuration and maintenance of the BreEZe system is ongoing. Board staff continue to work with the Department of Consumer Affairs, Office of Information Services (OIS) staff and the vendor to configure online transactions to begin accepting applications online.

On August 23, 2022, an email notification was sent to stakeholders, and an [Alert](#) was posted to the Board’s website to announce the approval of the regulations implementing SB 501. The email included information and links to new websites created for each of the permits. The first applications were received on August 26, 2022. The table below shows the number of applications received and processed (i.e., deficient or approved) for licensure by Board staff since August 2022.

Permit/Application Type	Deficient Applications Received	Approved Applications Received	Total Applications Received
GA Permit Initial Application	4	43	47
GA Permit Application for Pediatric Endorsement	5	33	38

Permit/Application Type	Deficient Applications Received	Approved Applications Received	Total Applications Received
MGA Permit Initial Application	4	15	19
MGA Permit Application for Pediatric Endorsement	5	29	34
MS Permit Initial Application	19	202	221
MS Permit Application for Pediatric Endorsement	1	9	10
PMS Permit Initial Application	12	109	121

Legislative Amendments

After the implementation of SB 501, Board staff and Legal Counsel identified additional areas in current law that would benefit from legislative amendments. Legislative proposals in these areas have been presented to the Board and approved at the November 2021, August 2022, November 2022, February 2023, and May 2023 Board meetings. The legislative proposals will be submitted to the California State Legislature in the Board’s Sunset Review Report.

Existing Permit Expiration

In November 2021, Board staff worked with OIS to reconfigure the BreEZe system to allow existing permitholders whose permits were to expire in 2022 to renew by December 31, 2021 (i.e., before the changes implemented by SB 501 on permitholders became effective). Such renewal would enable a permitholder to continue to practice under the existing terms of their permit until it expires. This strategy was done to minimize the impact of SB 501 and allow changes to be applied steadily through 2023 and 2024. Board staff identified 1,414 permitholders who were eligible to renew, and as of January 3, 2022, 1,107 permitholders have successfully renewed.

Existing permits will expire steadily in 2023–24. The table below shows the number of permits expiring each month as of July 3, 2023.

Number of GA, MGA, CS, and OCS-M Permits Expiring between January 31, 2023 and December 31, 2024													
GA	1/23	2/23	3/23	4/23	5/23	6/23	7/23	8/23	9/23	10/23	11/23	12/23	TOTAL
	0	0	2	3	1	6	22	24	42	35	43	33	372
	1/24	2/24	3/24	4/24	5/24	6/24	7/24	8/24	9/24	10/24	11/24	12/24	TOTAL
	43	26	48	47	40	44	33	43	49	27	30	38	468
MGA	1/23	2/23	3/23	4/23	5/23	6/23	7/23	8/23	9/23	10/23	11/23	12/23	TOTAL
	1	1	3	2	3	0	5	2	11	3	8	8	73
	1/24	2/24	3/24	4/24	5/24	6/24	7/24	8/24	9/24	10/24	11/24	12/24	TOTAL
	5	7	12	5	4	6	4	5	6	7	6	3	70
CS	1/23	2/23	3/23	4/23	5/23	6/23	7/23	8/23	9/23	10/23	11/23	12/23	TOTAL
	24	31	26	26	23	18	23	32	28	15	14	17	277
	1/24	2/24	3/24	4/24	5/24	6/24	7/24	8/24	9/24	10/24	11/24	12/24	TOTAL
	27	24	16	14	17	27	18	19	23	21	24	21	251
OCS-M	1/23	2/23	3/23	4/23	5/23	6/23	7/23	8/23	9/23	10/23	11/23	12/23	TOTAL
	53	43	42	47	50	55	47	42	65	40	62	54	607
	1/24	2/24	3/24	4/24	5/24	6/24	7/24	8/24	9/24	10/24	11/24	12/24	TOTAL
	43	35	34	41	37	42	43	35	60	42	46	44	502

Action Requested

No action is requested.



MEMORANDUM

DATE	July 24, 2023
TO	Members of the Dental Board of California
FROM	Jessica Olney, Staff Services Manager I Dental Board of California
SUBJECT	Agenda Item 13.c.: Discussion and Possible Action Regarding Appointment of General Anesthesia, Medical General Anesthesia, and Moderate Sedation Permit Evaluators

Background

Business and Professions Code (BPC) sections 1646.4, 1646.9, and 1647.7 authorize the Dental Board of California (Board) to conduct onsite inspections and evaluations of existing General Anesthesia (GA) and Medical General Anesthesia (MGA) permitholders, as well as of new Moderate Sedation (MS) permitholders. Onsite inspections and evaluations are conducted by a team of one or more evaluators, who are contracted by the Board as subject matter experts. The evaluators provide an independent evaluation and recommend a grade on a pass-fail system per California Code of Regulations (CCR), title 16, section 1043.6.

Senate Bill (SB) 501 (Glazer, Chapter 929, Statutes of 2018) changed existing provisions that govern the administration of minimal, moderate, and deep sedation and general anesthesia on dental patients. The subsequent SB 501 rulemaking, which implemented SB 501 provisions and became operative on August 16, 2022, amended CCR, title 16, section 1043.2 regarding the composition of teams performing onsite inspection and evaluation of GA, MGA, and MS permits. That section now provides that the onsite inspection and evaluation team consist of two or more persons for the first evaluation, or if an applicant has failed an evaluation. For each subsequent evaluation, only one evaluator is required. In addition, the evaluators must meet the following criteria:

1. The evaluators must meet one of the listed criteria in the Application for General Anesthesia Permit (Form GAP-1 New 05/2021) for general anesthesia, or the criteria in BPC 1647.3 for moderate sedation, and must have utilized general anesthesia, deep sedation, or moderate sedation in a dental practice setting for a minimum of three years immediately preceding their application to be an evaluator, exclusive of any training.
2. At least one of the evaluators must have experience in evaluation of dentists administering general anesthesia, deep sedation, or moderate sedation. At least one

Agenda Item 13.c.: Discussion and Possible Action Regarding Appointment of General Anesthesia, Medical General Anesthesia, and Moderate Sedation Permit Evaluators
Dental Board of California Meeting
August 17-18, 2023

Page 1 of 2

member of the evaluation team must have substantial experience in the administration of the method of delivery of general anesthesia, deep sedation, or moderate sedation used by the dentist being evaluated.

3. Evaluators shall possess a current, active, and unrestricted license from the Board or the Medical Board of California for applicants qualifying under BPC section 1646.9. "Unrestricted" means not subject to any disciplinary action such as revocation, suspension, or probation.
4. The Board may appoint a licensee member of the Board to serve as a consultant at any evaluation.

To implement SB 501, amendments were made to the terms for onsite inspections (CCR, title 16, section 1043.3). Pursuant to BPC section 1646.11, a holder of a GA or MGA permit issued or renewed on or before January 1, 2022, may follow the terms of that existing permit until it expires, and any permit issued or renewed on or after January 1, 2022, requires the permitholder to follow the new statutory requirements. Therefore, holders of GA and MGA permits issued or renewed on or after January 1, 2022, are required to comply with the amended terms for onsite inspections.

To increase the pool of available evaluators for the onsite inspection and evaluation program, Board staff post a continuous recruitment notice on the Board's website.

To increase the number of available evaluators specifically for the MS permit program, Board staff contacted MS permitholders who previously held Conscious Sedation (CS) permits for at least three years to assess their interest in becoming evaluators.

Appointment of Onsite Inspection and Evaluation Program Evaluators

The permitholder below has applied to become evaluator for the moderate sedation onsite inspection and evaluation program. Board staff have reviewed the application and recommend approval of their appointment as an evaluator.

1. Dr. James Snow, Dental License No. 40730, and Moderate Sedation Permit No. 192. Dr. Snow has held an active MS permit since June 30, 2023, and previously served as an evaluator for Conscious Sedation (CS) permits. Dr. Snow practices as a general dentist in Encinitas, CA. If approved, Dr. Snow will conduct evaluations in southern California for MS permits.

Action Requested

The Board is asked to consider Board staff's recommendation and make a motion to appoint the applicant as an evaluator for the onsite inspection and evaluation program.

GENERAL ANESTHESIA / MODERATE SEDATION EVALUATOR APPLICATION

QUALIFICATIONS AS AN EVALUATOR	EVALUATION PREFERENCES	TYPE OF PRACTICE
<p>Have you utilized general anesthesia, deep sedation, or moderate sedation in a dental practice setting for a minimum of 3 years preceding the date of this application? If YES, indicate the type of sedation utilized.</p> <p><input type="checkbox"/> NO <input type="checkbox"/> General Anesthesia (GA) <input type="checkbox"/> Deep Sedation (DS) <input checked="" type="checkbox"/> Moderate Sedation (MS)</p> <p>Do you have substantial experience in the administration of methods of delivery of general anesthesia, deep sedation, or moderate sedation?</p> <p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p>	<p>In which California region are you able to conduct evaluations?</p> <p><input type="checkbox"/> North <input checked="" type="checkbox"/> South <input type="checkbox"/> BOTH</p> <p>What kind of cases would you like to evaluate?</p> <p><input type="checkbox"/> GA/DS <input checked="" type="checkbox"/> MS <input type="checkbox"/> BOTH</p>	<p><input type="checkbox"/> Anesthesia <input type="checkbox"/> Endodontics <input type="checkbox"/> Prosthodontics <input type="checkbox"/> Oral Pathology <input type="checkbox"/> Orthodontics <input type="checkbox"/> Public Health <input type="checkbox"/> Pedodontics <input type="checkbox"/> Periodontology <input checked="" type="checkbox"/> General Dentist <input type="checkbox"/> OMS <input type="checkbox"/> Other</p>

APPLICANT NAME: James Snow	LICENSE NO.: 40730
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PERMIT HELD: MS	PERMIT NO.: MS192
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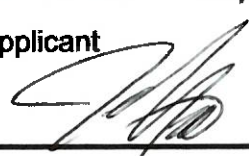
MAILING ADDRESS:
[REDACTED]

EMAIL ADDRESS:
[REDACTED]

TELEPHONE (INCLUDING AREA CODE):
[REDACTED]

Certification

I certify under penalty of perjury under the laws of the State of California that the foregoing and any attachments are true and correct, and I hereby request appointment as an Evaluator for the General Anesthesia / Moderate Sedation program.

Signature of Applicant  Date 7/10/2023



MEMORANDUM

DATE	July 25, 2023
TO	Members of the Dental Board of California
FROM	Mirela Taran, Administrative Analyst Dental Board of California
SUBJECT	Agenda Item 14.: Discussion and Possible Action Regarding 2024 Meeting Dates

Background

The Board needs to establish the 2024 meeting schedule to provide adequate time to negotiate contracts for meeting space locations. A 2024 calendar is attached for your reference. The calendar includes dates for holidays and association meetings.

Pursuant to Business and Professions Code, section 1607, the Board shall meet regularly once each year in the San Francisco Bay area and once each year in southern California, and at such other times and places as the Board may designate, for the purpose of transacting its business. Historically, the Board meets quarterly.

Proposed Board Meeting Dates for 2024 Locations are yet to be determined	
February 8-9, 2023	May 2-3, 2023 May 9-10, 2023
August 15-16, 2023	November 7-8, 2023

Action Requested

The Board is asked to select specific Board meeting dates for 2024.

January 2024

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1 New Year's Day	2	3	4	5	6
7	8	9	10	11	12	13 CSA Board Planning Session CalAOMS Anesthesia Meeting Zoom Webinar
14 CSA 2024 Board Planning Session	15 M L King Day	16	17	18	19	20
21	22	23	24	25	26	27
28	29 CSA Winter Anesthesia Conference Grand WaileaResort Maui, HI	30 CSA Winter Anesthesia Conference Grand WaileaResort Maui, HI	31 CSA Winter Anesthesia Conference Grand WaileaResort Maui, HI			

February 2024

Sun	Mon	Tue	Wed	Thu	Fri	Sat
				1 CSA Winter Anesthesia Conference Grand WaileaResort Maui, HI	2 CSA Winter Anesthesia Conference Grand WaileaResort Maui, HI	3 CSA Winter Anesthesia Conference Grand WaileaResort Maui, HI
4 CSA Winter Anesthesia Conference Grand WaileaResort Maui, HI	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19 President's Day	20	21	22	23	24
25	26	27	28	29		

March 2024

Sun	Mon	Tue	Wed	Thu	Fri	Sat
					1	2
3	4	5	6	7	8	9 ADEA Annual Meeting New Orleans Ernest N. Morial Convention Center New Orleans, LA
10 ADEA Annual Meeting New Orleans Ernest N. Morial Convention Center New Orleans, LA	11 ADEA Annual Meeting New Orleans Ernest N. Morial Convention Center New Orleans, LA	12 ADEA Annual Meeting New Orleans Ernest N. Morial Convention Center New Orleans, LA	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

April 2024

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1	2	3	4 CSA Annual Meeting & Board Meeting Disneyland Hotel Anaheim, CA	5 CSA Annual Meeting & Board Meeting Disneyland Hotel Anaheim, CA	6 CSA Annual Meeting & Board Meeting Disneyland Hotel Anaheim, CA
7 CSA Annual Meeting & Board Meeting Disneyland Hotel Anaheim, CA	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

May 2024

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4 CalAOMS 24th Annual Meeting The Westin Hotel Long Beach
5 CalAOMS 24th Annual Meeting The Westin Hotel Long Beach	6	7	8	9	10	11
12	13	14	15	16 CDA Presents Anaheim	17 CDA Presents Anaheim	18 CDA Presents Anaheim
19	20	21	22	23	24	25
26	27 Memorial Day	28	29	30	31	

June 2024

Sun	Mon	Tue	Wed	Thu	Fri	Sat
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16 Father's Day	17	18	19 Juneteenth	20	21	22
23	24	25	26	27	28	29
30						

July 2024

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1	2	3	4 Independence Day	5	6
7	8	9	10	11	12	13
14	15 CSA Summer Anesthesia Conference Ko'Olina, Oahu	16 CSA Summer Anesthesia Conference Ko'Olina, Oahu	17 CSA Summer Anesthesia Conference Ko'Olina, Oahu	18 CSA Summer Anesthesia Conference Ko'Olina, Oahu	19 CSA Summer Anesthesia Conference Ko'Olina, Oahu	20
21	22	23	24	25	26	27
28	29	30	31			

August 2024

Sun	Mon	Tue	Wed	Thu	Fri	Sat
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

September 2024

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2 Labor Day	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

October 2024

Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31 Halloween		

November 2024

Sun	Mon	Tue	Wed	Thu	Fri	Sat
					1	2
3	4 CSA Anesthesia Conference Fairmont Orchid Kohala Coast, HI	5 CSA Anesthesia Conference Fairmont Orchid Kohala Coast, HI	6 CSA Anesthesia Conference Fairmont Orchid Kohala Coast, HI	7 CSA Anesthesia Conference Fairmont Orchid Kohala Coast, HI	8 CSA Anesthesia Conference Fairmont Orchid Kohala Coast, HI	9 CSA Anesthesia Conference Fairmont Orchid Kohala Coast, HI
10	11 Veteran's Day	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28 Thanksgiving Day	29 Day after Thanksgiving	30

December 2024

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25 Christmas	26	27	28
29	30	31				



MEMORANDUM

DATE	July 25, 2023
TO	Members of the Dental Board of California
FROM	Mirela Taran, Administrative Analyst Dental Board of California
SUBJECT	Agenda Item 21.: Board President's Report on Closed Session Items

Background

Dr. Alan Felsenfeld, President of the Dental Board of California, will provide a verbal report on closed session items.

Action Requested

No action requested.



MEMORANDUM

DATE	July 25, 2023
TO	Members of the Dental Board of California
FROM	Mirela Taran, Administrative Analyst Dental Board of California
SUBJECT	Agenda Item 22.: Dental Assisting Council Meeting Report

Background

Ms. Traci Reed-Espinoza, Chair of the Dental Assisting Council (Council), will provide a verbal report on the August 17, 2023 meeting of the Council.

Action Requested

No action requested.



MEMORANDUM

DATE	July 21, 2023
TO	Members of the Dental Board of California
FROM	David Bruggeman, Legislative and Regulatory Specialist Dental Board of California
SUBJECT	Agenda Item 23.a.: Status Update on Pending Regulations

Background

This memo addresses those rulemaking packages that have either moved forward in the rulemaking process since the last Dental Board of California (Board) meeting or will be presented at the next Board meeting.

Temporary Licensure for Military Spouses and Partners (Cal. Code of Regs., Title 16, Section 1006)

Update: The official Notice for this rulemaking will be published in the California Regulatory Notice Register (CRNR) on July 28, 2023. Publication in the CRNR will coincide with posting of the Notice on the Board website and distribution to subscribers to the Board's general and licensee listservs. Publication also starts the 45-day Notice Period, which will end at 5 p.m. on September 12, 2023. Any adverse comments received during the Notice Period will be brought before the Board at a subsequent meeting for review and response.

Summary of Proposed Changes: This rulemaking would establish the procedures and application requirements for qualified individuals to seek temporary licensure from the Board as permitted by AB 107 (Chapter 693, Statutes of 2021). Effective July 1, 2023, qualified spouses or domestic partners of active-duty military personnel assigned to a duty station in California under official active-duty military orders would be able to apply for a temporary license from the Board. The temporary license would last for no more than 12 months or until a permanent license is granted, or the Board revokes the license.

Updates to the Board's Disciplinary Guidelines (Cal. Code of Regs., Title 16, Section 1018)

Update: The rulemaking package is currently with the Department of Consumer Affairs (DCA) for review prior to filing with OAL.

Summary of Proposed Changes: An update to the Board's Disciplinary Guidelines requires the Board to update the regulations that incorporate the Disciplinary Guidelines by reference.

Lost, Destroyed or Mutilated Licenses (Cal. Code of Regs, Title 16 Section 1012 and 1021) and Inactive Licenses (Cal. Code of Regs., Title 16 Section 1017.2)

Update: Board staff are working with the Board's Regulations Attorney and Department of Finance Staff to finalize the supporting documents for this rulemaking. Once that is complete the package will be forwarded to the Department of Consumer Affairs for review.

Summary of Proposed Changes: This proposed rulemaking would amend section 1012 to change the form used for an applicant to both place their license on inactive status and to restore their license to active status. The proposed amendments would also change how an applicant complies with the required continuing education requirements when seeking active status from providing evidence to simply self-certifying. Section 1021 would need to be amended to include the Pocket License in the fee for replacement certificates in subsection 1021(i). The proposed rulemaking would amend section 1017.2 to require licensees seeking a replacement license to submit a form and to eliminate the requirement for providing fingerprints with their application.

Action Requested

No Board action is requested on this update. Any new rulemaking packages or other rulemaking proposals for Board review and possible action will be brought as separate items.



DENTAL BOARD OF CALIFORNIA

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MEMORANDUM

DATE	July 25, 2023
TO	Members of the Dental Board of California
FROM	Mirela Taran, Administrative Analyst Dental Board of California
SUBJECT	Agenda Item 24.a.: Report on Commission on Dental Competency Assessment, Western Regional Examining Board, and The Council of Interstate Testing Agencies (CDCA-WREB-CITA)

Background

Representatives from Commission on Dental Competency Assessment, Western Regional Examining Board, and The Council of Interstate Testing Agencies will provide a verbal report.

Action Requested

No action requested.

Agenda Item 24.a.: Report on Commission on Dental Competency Assessment, Western Regional Examining Board, and The Council of Interstate Testing Agencies (CDCA-WREB-CITA)
Dental Board of California Meeting
August 17-18, 2023



MEMORANDUM

DATE	July 24, 2023
TO	Members of the Dental Board of California
FROM	Tracy A. Montez, Ph.D., Executive Officer Dental Board of California
SUBJECT	Agenda Item 24.b.: Presentation, Discussion, and Possible Action on the Portfolio Examination Report by the Office of Professional Examination Services

Background

Licensing boards and bureaus within the California Department of Consumer Affairs (DCA) are required to ensure that examination programs used in California licensure comply with psychometric and legal standards. To become a licensed dentist in California, a candidate must have the requisite education and experience, pass the Integrated National Board Dental Examination and the California Dental Law and Ethics Examination, and complete one of the following four pathways:

1. Pass the Dental Board of California Dental Portfolio Examination
2. Pass the CDCA-WREB-CITA Dental ADEX Examination (ADEX)
3. Obtain Licensure by Credential
4. Obtain Licensure by Residency

The Dental Board of California (Board) requested that DCA's Office of Professional Examination Services (OPES) review the Dental Board of California Dental Portfolio Examination (Portfolio) for continued use in California licensure of dentists.

OPES reviewed information provided by the Board, which included documents regarding practices and procedures used to develop and validate the Portfolio. OPES conducted a comprehensive evaluation of these documents to determine whether the following Portfolio components met professional guidelines and technical standards: (a) occupational analysis (OA), (b) examination development and scoring, (c) passing scores and passing rates, (d) test administration, and (e) test security procedures.

Although the Portfolio appears to meet professional guidelines and technical standards, and links to the California dentist description of practice, OPES has concerns about its continued use for California licensure of dentists. OPES recognizes that the Portfolio was

Agenda Item 24.b.: Presentation, Discussion, and Possible Action on the Portfolio Examination Report by the Office of Professional Examination Services
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an innovative and novel concept at the time of its development and implementation in 2014. The original objectives of the Portfolio were 1) to offer candidates an alternative pathway to a standalone examination and 2) to eliminate the need for candidates to obtain patients for an examination. However, most candidates opt to take a standalone examination rather than the Portfolio, possibly due to scheduling logistics and the lack of reciprocity with other states. Additionally, because standalone examinations have incorporated innovations and have now moved to manikin-based examinations, candidates are no longer required to obtain patients. As a result, the Portfolio does not appear to serve its intended purpose, and it does not provide the level of standardization and reciprocity provided by the ADEX.

A more significant concern, however, is the lack of examination development, lack of psychometric evaluation, and lack of examiner audits that have occurred since the Portfolio launched in 2014. If the Board continues offering the Portfolio, additional development work is required to bring it up to date. Updating the Portfolio will require an extensive investment of time, staffing, and fiscal resources from the Board and the industry. If the Board is willing to invest the necessary resources to perform the required development work, there is no assurance that candidates will choose this pathway to licensure given the other alternatives available, i.e., passing the ADEX, licensure by credential, licensure by residency.

For these reasons, continuing to offer the Portfolio in its current form is inadvisable. OPES recommends that the Board initiate a process to eliminate the Portfolio as a pathway to licensure.

Board staff concur with the recommendation from OPES to eliminate the Portfolio as a pathway to licensure.

Action Requested

The Board is asked to discuss the findings from review of the Dental Board of California Dental Portfolio Examination for continued use in California licensure of dentists. If the Board agrees with both staff and OPES' recommendation, staff is requesting that the Board move forward to include a legislative proposal to eliminate the Portfolio examination in the Board's Sunset Review Report submitted to the California State Legislature. Provided below are the Board's options.

Suggested Motions

Option 1 (support the recommendation): Move to recommend inclusion in the Board's Sunset Review Report the legislative proposal to amend Business and Professions Code sections 1632, 1632.5 and 1632.55 and repeal section 1632.1.

Option 2 (offer a revised directive): Move to direct Board staff to take another action as discussed during this meeting [insert specific revisions].

Option 3 (No motion): If the Board does not wish to act on this proposal, no motion is necessary.

Attachment

Review of the Dental Board of California Dentist Portfolio Examination
Proposed Legislative Proposal text amending Business and Professions Code sections 1632, 1632.5, and 1632.55, and repeal section 1632.1

DENTAL BOARD OF CALIFORNIA
LEGISLATIVE PROPOSAL TO AMEND
BUSINESS AND PROFESSIONS CODE SECTIONS 1632, 1632.5, AND 1632.55,
AND REPEAL SECTION 1632.1 REGARDING ELECTIVE FACIAL COSMETIC
SURGERY PERMIT AND CREDENTIALING COMMITTEE

Additions are indicated in *blue text and italics*.

Deletions are indicated in ~~red strikethrough text~~.

1632 (a) The board shall require each applicant to successfully complete the written examination of the National Board Dental Examination of the Joint Commission on National Dental Examinations.

(b) The board shall require each applicant to successfully complete an examination in California law and ethics developed and administered by the board. The board shall provide a separate application for this examination. The board shall ensure that the law and ethics examination reflects current law and regulations, and ensure that the examinations are randomized. Applicants shall submit this application and required fee to the board in order to take this examination. In addition to the aforementioned application, the only other requirement for taking this examination shall be certification from the dean of the qualifying dental school or the dean's delegate attended by the applicant that the applicant has graduated, or will graduate, or is expected to graduate. Applicants who submit completed applications and certification from the dean at least 15 days prior to a scheduled examination shall be scheduled to take the examination. Successful results of the examination shall, as established by board regulation, remain valid for two years from the date that the applicant is notified of having passed the examination.

(c) Except as otherwise provided in Section 1632.5, the board shall require each applicant to have taken and received a passing score on one of the following:

~~(1) (A) A portfolio examination of the applicant's competence to enter the practice of dentistry. This examination shall be conducted while the applicant is enrolled in a dental school program at a board-approved school located in California. This examination shall utilize uniform standards of clinical experiences and competencies, as approved by the board pursuant to Section 1632.1. The applicant shall pass a final assessment of the submitted portfolio at the end of the applicant's dental school program. Before any portfolio assessment may be submitted to the board, the applicant shall remit the required fee to the board to be deposited into the State Dentistry Fund, and a letter of good standing signed by the dean of the applicant's dental school or the dean's delegate stating that the applicant has graduated or will graduate with no pending ethical issues.~~

~~(B) The board shall provide a report on how many other states have recognized licensure by portfolio examination at the time of its sunset review pursuant to subdivision (d) of Section 1601.1. The report shall be submitted in compliance with Section 9795 of the Government Code.~~

~~(2) Either one of the following examinations:~~

~~(1A) A clinical and written examination administered by the Western Regional Examining Board within five years prior to the date of their application for a license under this section.~~

~~(2B) The clinical and written examination developed by the American Board of Dental Examiners, Inc., within five years prior to the date of their application for a license under this section.~~

(d) Notwithstanding subdivision (b) of Section 1628, the board is authorized to do either of the following:

(1) Approve an application for examination from, and to examine an applicant who is enrolled in, but has not yet graduated from, a reputable dental school approved by the board.

(2) Accept the results of an examination described in ~~paragraph (2)~~ of subdivision (c) submitted by an applicant who was enrolled in, but had not graduated from, a reputable dental school approved by the board at the time the examination was administered.

In either case, the board shall require the dean of that school or the dean's delegate to furnish satisfactory proof that the applicant will graduate within one year of the date the examination was administered or as provided in paragraph (1) of subdivision (c).

(e) The board may determine the testing format, as related to patients, for the examination provided pursuant to ~~subparagraph (B) of~~ paragraph (2) of subdivision (c).

~~1632.1 (a) With regard to the portfolio examination specified in paragraph (1) of subdivision (c) of Section 1632, the board shall independently monitor and audit the standardization and calibration of dental school competency instructors at least biennially to ensure standardization and an acceptable level of calibration in the grading of the examination. Each dental school's competency examinations shall be audited biennially by the board.~~

~~(b) The board shall oversee all aspects of the portfolio examination process specified in paragraph (1) of subdivision (c) of Section 1632 and under this section, but shall not interfere with the dental school authority to establish and deliver an accredited curriculum. The board shall determine an end-of-year deadline, in consultation with the~~

~~current board-approved dental schools, to determine when the portfolio examinations shall be completed and submitted to the board for review by the board's examiners.~~

~~(c) The board, in consultation with the current board-approved dental schools, shall approve portfolio examination competencies and the minimum number of clinical experiences required for successful completion of the portfolio examination.~~

~~(d) The board shall require and verify successful completion of competency examinations that were performed on a patient of record of a board-approved dental school, including, but not limited to, the following:~~

~~(1) Comprehensive oral diagnosis and treatment planning.~~

~~(2) Periodontics.~~

~~(3) Direct restorations.~~

~~(4) Indirect restorations.~~

~~(5) Removable prosthodontics.~~

~~(6) Endodontics.~~

1632.5 (a) Prior to implementation of ~~paragraph (2) of~~ subdivision (c) of Section 1632, the department's Office of Professional Examination Services shall review the Western Regional Examining Board examination to ensure compliance with the requirements of Section 139 and to certify that the examination process meets those standards. If the department determines that the examination process fails to meet those standards, ~~paragraph (2) of~~ subdivision (c) of Section 1632 shall not be implemented. The review of the Western Regional Examining Board examination shall be conducted during or after the Dental Board of California's occupational analysis scheduled for the 2004-05 fiscal year, but not later than September 30, 2005. However, an applicant who successfully completes the Western Regional Examining Board examination on or after January 1, 2005, shall be deemed to have met the requirements of subdivision (c) of Section 1632 if the department certifies that the Western Regional Examining Board examination meets the standards set forth in this subdivision.

(b) The Western Regional Examining Board examination process shall be regularly reviewed by the department pursuant to Section 139.

(c) The Western Regional Examining Board examination shall meet the mandates of subdivision (a) of Section 12944 of the Government Code.

(d) As part of its next scheduled review by the Joint Committee on Boards, Commissions, and Consumer Protection, the Dental Board of California shall report to that committee and the department on the pass rates of applicants who sat for the Western Regional Examining Board examination, compared with the

pass rates of applicants who sat for the state clinical and written examination administered by the Dental Board of California. This report shall be a component of the evaluation of the examination process that is based on psychometrically sound principles for establishing minimum qualifications and levels of competency.

1632.55 (a) Prior to implementation of ~~subparagraph (B) of paragraph (2) of~~ subdivision (c) of Section 1632, the department's Office of Professional Examination Services shall review the American Board of Dental Examiners, Inc. examination to ensure compliance with the requirements of Section 139 and to certify that the examination process meets those standards, and deliver this review to the Dental Board of California. If the department determines that the examination process fails to meet those standards, does not deliver the review to the Dental Board of California, or if the American Board of Dental Examiners, Inc. fails to pay the costs and expenses the board incurs, as described in subdivision (d), ~~subparagraph (B) of paragraph (2) of subdivision (c) of~~ Section 1632 shall not be implemented.

(b) The American Board of Dental Examiners, Inc. examination process shall be regularly reviewed by the department pursuant to Section 139.

(c) The American Board of Dental Examiners, Inc. examination shall meet the mandates of subdivision (a) of Section 12944 of the Government Code.

(d) The American Board of Dental Examiners, Inc. shall pay all reasonable costs and expenses the board incurs for the purposes of implementing this section.

(e) The American Board of Dental Examiners, Inc. examination may only be accepted for licensure by a candidate after it is determined that the examination has met the requirements of this section. Examinations taken prior to that date may not be used for licensure.



MEMORANDUM

DATE	July 26, 2023
TO	Members of the Dental Board of California
FROM	Tracy A. Montez, Ph.D., Executive Officer Dental Board of California
SUBJECT	Agenda Item 25.: Update Regarding Board Sunset Review

Background

Every Board and Bureau in the Department of Consumer Affairs is subject to oversight by the relevant policy committees of the California State Legislature. Every few years, each Board and Bureau goes through what is called the Sunset Review process. It is called “sunset” review because the authority of each Board expires, or sunsets, on a specified date in law. However, the Sunset Review is typically completed several months prior to that date.

The Dental Board of California (Board) has started its Sunset Review process because its authority is set to sunset on January 1, 2025. Board staff is drafting a report for the Board to review and approve at the October 12, 2023 meeting. That draft report will be available online as part of the materials for that meeting. The report will be finalized and submitted to the Legislature by the end of this year.

The Board will go before the Assembly Committee on Business and Professions and the Senate Committee on Business, Professions and Economic Development during the spring of 2024. The Board President and Executive Officer will both present testimony and answer questions from the members of the Legislature, and the public will have an opportunity to provide public comment. The public can provide comment during the hearing, and they can also submit their comments in writing through the Position Letter Portal (<https://calegislation.lc.ca.gov/Advocates/faces/index.xhtml>).

As part of this hearing process, the Committees will prepare a background paper concerning the Board, its operations, and other issues. The Board will prepare a response to that paper. The hearing, the background paper, and the Board’s response will inform a “sunset bill” introduced by the Committees. The sunset bill, among other things, sets the next sunset date for the Board (most likely four years after the current

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sunset date, or January 1, 2029). The Board will submit recommended legislative proposals (discussed and approved at prior meetings) that could be part of this sunset bill.

Action Requested

This item is informational only. No action is requested. The Board will meet in October to consider the draft sunset review report.



MEMORANDUM

DATE	July 26, 2023
TO	Members of the Dental Board of California
FROM	David Bruggeman, Legislative and Regulatory Specialist Dental Board of California
SUBJECT	Agenda Item 26.a.: Discussion and Possible Action on Revisions to Previously Approved Recommendation on Legislative Proposal to Amend Business and Professions Code (BPC) Sections 1601.1 and 1740 and Repeal BPC Section 1742 Regarding Board Composition and Dental Assisting Council

Background

The Dental Board of California (Board) is comprised of 15 members consisting of the following: eight practicing dentists, one registered dental hygienist, one registered dental assistant, and five public members (Business and Professions Code (BPC), § 1601.1, subd. (a).). To consider matters relating to dental assistants and make recommendations to the Board, the Board appoints seven members of the Dental Assisting Council (Council) (BPC, § 1742, subd. (a).).

At the Board's May 2023, the Board considered a legislative proposal to repeal the Council for improving Board efficiency and reducing expenses related to the Council. To ensure continued participation in Board matters by registered dental assistants (RDAs) and registered dental assistants in extended functions (RDAEFs), Board staff proposed revising the Board composition to decrease the number of practicing dentists to seven and increase the number of RDAs to two, maintaining the existing number of 15 members on the Board. After discussion and public comment, the Board approved a legislative proposal for inclusion in the next Sunset Review Report recommending that the Council in its current form be dissolved, and the Board composition be amended to maintain the number of eight practicing dentists, increase the number of RDAs to two, with one RDA with five years of professional experience and one RDA who is an educator from a Board-approved RDA or RDAEF educational program, and decrease the number of public members from five to four.

Agenda Item 26.a.: Discussion and Possible Action on Revisions to Previously Approved Recommendation on Legislative Proposal to Amend Business and Professions Code (BPC) Sections 1601.1 and 1740 and Repeal BPC Section 1742 Regarding Board Composition and Dental Assisting Council
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Discussion

In response to stakeholder feedback and public comment about the Board's action to dissolve the Council, Board staff researched options to retain and improve the efficiency of the Council.

As stated in BPC section 1742.

(a) There is hereby created a Dental Assisting Council of the Dental Board of California, which shall consider all matters relating to dental assistants in this state, on its own initiative or upon the request of the board, and make appropriate recommendations to the board and the standing committees of the board, including, but not limited to, the following areas:

- (1) Requirements for dental assistant examination, licensure, permitting, and renewal.
- (2) Standards and criteria for approval of dental assisting educational programs, courses, and continuing education.
- (3) Allowable dental assistant duties, settings, and supervision levels.
- (4) Appropriate standards of conduct and enforcement for dental assistants.
- (5) Requirements regarding infection control.

Board staff met with the Council's Chair and Vice Chair to discuss how best to address stakeholder feedback and the areas demanding attention as outlined above. Further, Board staff confirmed that the Council may meet in conjunction with other Board committees, and at other times as deemed necessary (BCP section 1742. (f)). However, the Council is not required to meet quarterly with the Board.

Based on feedback and discussion, Board staff believe there is renewed energy in carrying out the intent of the Council.

Further, following the Board's approval of the legislative proposal recommendation to decrease the number of public Board members from five to four, Board staff noted that the California State Legislature increased the number of public members on the Board from four to five, effective January 1, 2012, with the passage of Senate Bill (SB) 540 (Price, Chapter 385, Statutes of 2011). This legislation was the Board's sunset bill and also established the Council.

Also pertinent, in *North Carolina Board of Dental Examiners v. Federal Trade Commission* (2015) 574 U.S. 494, the United States Supreme Court held that state-action antitrust immunity does not apply to a state board that places restraints on an occupation when a majority of its decision-makers, elected by others in the occupation, are active market participants in the occupation, and the state does not actively supervise the board nor has the board acted pursuant to a clearly articulated and affirmatively expressed state policy. While the Board is overseen by the California State Legislature, implements statutes promulgated by the Legislature and signed into law by the Governor, and all Board regulatory proposals are reviewed by the Department of Consumer Affairs, Business, Consumer Services, and Housing Agency, and Office of Administrative Law, the Board is mindful of the need for public participation on the Board and in Board matters.

Given these two points, Board staff believe it would be detrimental to reduce the number of public members.

Recommendation

Given the discussion above, Board staff recommend that the Board withdraw its legislative proposal to repeal the Council.

Further, since Board staff recommend withdrawing the legislative proposal to dissolve the Council and reducing the number of public Board members appears contrary to the legislative intent of public representation on the Board following enactment of SB 540, the Board is being asked to reconsider its prior action to recommend to the California State Legislature a reduction in the number of public Board members and a repeal of the Council.

Action Requested

The Board is asked to discuss the information presented in this memo and consider Board staff's recommendation. If the Board agrees, suggested motions are listed below.

Suggested Motions

Option 1 (support the proposed recommendation): Move to withdraw the approved legislative proposal for inclusion in the Board's Sunset Review Report to amend sections 1601.1 and 1740, and repeal section 1742 of the Business and Professions Code.

Agenda Item 26.a.: Discussion and Possible Action on Revisions to Previously Approved Recommendation on Legislative Proposal to Amend Business and Professions Code (BPC) Sections 1601.1 and 1740 and Repeal BPC Section 1742 Regarding Board Composition and Dental Assisting Council
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Option 2 (support proposed recommendation as revised during this meeting): Move to substitute a revised legislative proposal for inclusion in the Board's Sunset Review Report, as discussed during this meeting [insert specific revisions].

Option 3 (no motion): If the Board does not wish to act on the recommendation, no motion is necessary.



MEMORANDUM

DATE	August 1, 2023
TO	Members of the Dental Board of California
FROM	Paige Ragali, Chief of Dental Programs and Customer Support Dental Board of California
SUBJECT	Agenda Item 26.b.: Discussion and Possible Action on Legislative Proposal to Amend BPC Section 1638.1 Regarding Elective Facial Cosmetic Surgery Permit and Credentialing Committee

Identification of Issues

Pursuant to Business and Professions Code (BPC) section 1638.1, a person licensed pursuant to Section 1634 who wishes to perform elective facial cosmetic surgery (EFCS) shall apply for and receive a permit from the Dental Board of California (Board). BPC section 1638.1 also establishes a credentialing committee to review the qualifications of EFCS applicants and make recommendations to the Board whether to issue or not issue an EFCS permit to the applicant.

Board staff have identified issues with the following provisions in BPC section 1638.1: (1) permit application requirements; (2) renewal requirements; and (3) barriers to licensure associated with EFCS Permit Credentialing Committee (Committee) review. Board staff recommend making clarifying and non-substantive changes to BPC section 1638.1 described below and reflected in the attached legislative proposal. With the clarified application requirement amendments, Board staff also recommend repealing the Committee to reduce barriers to issuance of EFCS permits, improve efficiency in application review and permit issuance, and reduce Board costs associated with Committee meetings.

Background

Senate Bill (SB) 438 (Migden, Chapter 909, Statutes of 2006) enacted BPC section 1638.1 to require a California licensed dentist who is not a physician and surgeon to apply for, as specified, and receive a permit to perform EFCS. The Assembly Committee on Business and Professions June 27, 2006 hearing analysis (Analysis) explained the need for the bill to respond to the Board's interpretation of the Dental Practice Act that licensed dentists could only perform oral and maxillofacial surgery

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when the surgery was related to and part of treatment for a dental condition. The Analysis further explained that, as part of oral and maxillofacial surgical educational programs, students completed:

. . . a four-plus year, hospital-based, surgical residency involving reconstructive surgery, orthognathic procedures (complete restructuring of the shape of the jaw and face, including repair of congenital defects), cleft lip and palate, craniofacial procedures, treatment of trauma victims who are in critical condition in emergency rooms (including follow-up surgery and reconstruction), as well as procedures more commonly viewed as "oral surgery." Cosmetic and esthetic results are significant components of many of these procedures, as returning a patient victimized by facial trauma, or who is having a congenital defect repaired, to an esthetically satisfactory condition is not merely desired - it is the standard of care that is expected of these surgeons. (Analysis, p. 9.)

The Analysis noted that proponents of SB 438 believed that dentists should not be unfairly restricted from performing procedures for which they were trained and recognized as capable of performing in a hospital setting, when may oral surgeons were allowed to perform surgical procedures in a complex and traumatic hospital environment but not permitted to perform the same or similar procedures in a non-trauma setting on an elective basis. (Analysis, p. 10.)

BPC section 1638.1, subdivision (c)(2)(A)(iii)(I) and (II), sets forth two categories in which the permitholder may perform EFCS surgery: cosmetic contouring of the osteocartilaginous facial structure, which may include, but is not limited to, rhinoplasty and otoplasty (Category I); and cosmetic soft tissue contouring or rejuvenation, which may include, but is not limited to, facelift, blepharoplasty, facial skin resurfacing, or lip augmentation (Category II). An EFCS permitholder can only perform EFCS at a general acute care hospital, as specified. (BPC, § 1638, subd. f.)

In addition to establishing the EFCS permit, SB 438 also established the Committee to review EFCS permit applications. (BPC, § 1638.1, subd. (e)(1).) The Committee is comprised of five members who are appointed by the Board; two members are physicians and surgeons, each with a unique specialty, and three are oral and maxillofacial surgeons licensed by the Board and certified by the American Board of Oral and Maxillofacial Surgeons (ABOMS). (BPC, § 1638.1, subd. (e)(2).) There are no established term limits for these members.

The Committee meets as needed to review and discuss EFCS permit applications. (BPC, § 1638.1, subd. (e)(4).) Upon completion of review of the application, the Committee makes a recommendation to the Board on whether to issue or not issue a permit to the applicant. (BPC, § 1638.1, subd. (e)(1).) The EFCS permit issued to the applicant may be unlimited, entitling the permitholder to perform any facial cosmetic

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procedures in Category I and/or Category II, or it may contain limitations if the Committee is not satisfied that the applicant has the training or competence to perform certain classes of procedures, or if the applicant has not requested to be permitted for all procedures authorized in Category I or Category II. (*Id.*)

The Committee will recommend to the Board to grant an EFCS permit to an applicant if the Committee finds to its satisfaction that:

- (a) The applicant is certified or is a candidate for certification by the American Board of Oral and Maxillofacial Surgery.
- (b) The applicant submits a letter from the program director of the accredited residency program or from the director of a postresidency fellowship accredited by the Commission on Dental Accreditation of the American Dental Association (CODA).
- (c) The applicant submits documentation of at least 10 operative reports from residency training or proctored surgical procedures that are representative of procedures the licensee intends to perform from both category I and category II.
- (d) The applicant provides documentation showing surgical privileges at any licensed general acute care hospital and any licensed outpatient surgical facility in California.
- (e) The applicant provides proof of privileges at a licensed general acute care hospital to perform the surgical procedures at that hospital.
- (f) The applicant provides proof of being on active status on the staff of a general acute care hospital and maintains the necessary privileges to maintain that status.
- (g) The applicant submits the fee required for an initial permit. (BPC, § 1638.1, subds. (c), (d).

The EFCS permit is valid for two years and is required to be renewed biennially at the time of their license renewal. (BPC, § 1638.1, subd. (a)(2).) Every six years, the permitholder is required to submit evidence acceptable to the Committee that they have maintained continued competence to perform the procedures authorized by the permit. (*Ibid.*)

Discussion And Recommendations

The Committee has raised concerns regarding the lack of specificity in the requirements for EFCS permit applicants. Specifically, BPC section 1638.1, subdivision (c)(2)(A)(iii), lacks clarity in the number of operative reports required to be submitted by permit

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applicants and the level of participation required in the operation. In addition, BPC section 1638.1, subdivision (e)(1), lacks clarity as to the limitations that may be imposed on an EFCS permit, such as whether the permit may be issued for only one category of procedures, even though the applicant requested a permit for both categories, or whether the “limitation” means limiting to types of procedures under a category (e.g., limited to performing Botox injections but no other soft tissue procedure under Category I).

After consideration of the current application process, the concerns raised, and review of the statutory provisions, Board staff propose amending BPC section 1638.1 to establish more efficient requirements for EFCS permit application processing, streamlined renewal requirements, including continuing education, repeal of the Committee, and make other non-substantive changes. Board staff anticipate the proposed statutory amendments will benefit licensees, consumers, and Board staff by better identifying clear expectations of EFCS permit applicants. The promulgation of regulations may not be necessary if the issues can be clarified through statute.

A. EFCS Permit Application Process and Requirements

As noted above, licensees who wish to perform EFCS shall apply for and receive a permit from the Board. (BPC, § 1638.1.) After review of the current requirements and discussion at various Committee meetings, Board staff recommend clarifying the requirements for the EFCS permit to improve Board review and clarify the requirements for licensees. The proposed amendments are as follows:

- Restructure statutory provisions to conform with new permit structure used for general anesthesia and sedation permits enacted in SB 501 (Glazer, Chapter 929, Statutes of 2018).
- Require a current dentist license in good standing, as defined, to perform EFCS. (Prop. BPC, § 1638.1, subds. (a), (o).)
- Move existing subdivision (a)(2) (permit renewal) to new subdivision (k) with technical revisions.
- Clarify the categories (Category I, Category II, or Category I and II) of an EFCS permit that may be issued. (Prop. BPC, § 1638.1, subd. (b)(1-3).) The proposed language would assist Board staff in their review of submitted applications and documentation and applicants seeking an EFCS for specific categories and remove the ambiguous “limited” permit language.
- Clarify the requirements for operative reports submitted by the permit applicant, including the information that must be identified in each report (name of the

licensee, category of procedure and specific type of procedure performed, date of the procedure, and role in which the licensee participated in the procedure), establish the required level of participation of the applicant in the procedure performed (at minimum in the role of surgical first assistant), clarify the number of reports (10) that must be submitted for each category in which the applicant seeks a permit, and a five-year timeframe in which the procedure must be performed to satisfy the operative report requirement. (Prop. BPC, § 1638.1, subd. (c)(2)(A)(iii).) These changes will assist the permit applicant by identifying clear requirements for operative reports and ensure the operative reports reflect recent surgical procedures for consumer protection. The proposed amendments also will assist Board staff in review of the applications by being able to easily identify if the reports meet the requirements specified.

- Remove the six-year Committee review of permit holder continued competency and replace it with 24 hours of continuing education in elective facial cosmetic surgery continuing education for permit renewal. (Prop. BPC, § 1638.1, subd. (l).) The number of hours is based on the continuing education requirement to renew a general anesthesia or deep sedation permit. (See BPC, § 1646.5.)
- Due to the clarified limits on EFCS permits that may be issued, the proposal would require non-renewal of old permits previously issued with a procedure type limitation under a general procedure category (e.g., the permit holder was authorized under Category II only to perform Botox injections), so that all permits issued would either be Category I, Category II, or Categories I and II. (Prop. BPC, § 1638.1, subd. (m).) Staff notes that the legislative history of the EFCS permit recognized the education and training of an oral maxillofacial surgeon, which was comprehensive and provided instruction to the surgeon on a variety of procedures. The proposed amendments would establish the procedure for the old permit to be reissued under the new Category I, Category II, or Categories I and II authority. Staff further notes that if a permit holder performed a procedure negligently, the permit holder may be disciplined by the Board, regardless of a heightened statutory authority to issue a permit with specific procedure limitations; the permit holder, using their comprehensive education and training to qualify for ABOMS certification and completion of a CODA-accredited residency or postresidency fellowship program, would determine their own ability to perform EFCS procedures under the category of permit issued and consistent with standards of practice.

B. Repeal Committee

With the clarified EFCS permit application requirements proposed in BPC section 1638.1, subdivisions (b) and (c), and continuing education requirements for permit renewal in subdivision (l), the documentation submitted to the Board could be

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processed and reviewed efficiently by Board staff, and potentially a Board expert, as needed. If the applicant submitted the required documentation, the permit could be issued without the current significant delay of Committee review and subsequent Board approval. Board staff recommend repealing the Committee to reduce barriers to obtaining EFCS permits caused by the significant application review delays, reduce Board costs in Committee member travel and attendance to review permit applications, and improve Board staff efficiency. (Prop. repeal of current BPC, § 1638, subds. (e), (k)(2), (3).) Board staff also note that it has been difficult to locate individuals willing to participate on the Committee. By utilizing subject matter experts to review the EFCS permit applications and supporting documents without the additional burden of traveling to and attending Committee meetings, more individuals may be willing to participate in the application review on their own schedule.

The Board may also wish to propose repeal of the EFCS applicant report required to be submitted to the Legislature under existing BPC section 1638.1, subdivision (k).

Operational/Fiscal Impact

Board staff have made an initial determination that the proposed statutory amendments would not have a significant operational impact regarding the demand of more staff, or higher expectancy of licensees applying for EFCS permits. It has been determined that the statutory amendments would have minimal fiscal impact on updating the online system to reflect new language for permit requirements.

Critical Timeframes

The proposed statutory changes do not impose any critical timeframes.

Action Requested

The Board is asked to discuss and consider the above-described legislative proposal. If the Board approves of the legislative proposal, the Board is asked to include in the Board's next Sunset Review Report a recommendation to amend Business and Professions Code section 1638.1 to clarify the EFCS Permit application process and requirements.

Attachment

Legislative Proposal to Amend Business and Professions Code Section 1638.1
Regarding Elective Facial Cosmetic Surgery Permit

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DENTAL BOARD OF CALIFORNIA
LEGISLATIVE PROPOSAL TO AMEND
BUSINESS AND PROFESSIONS CODE SECTION 1638.1 REGARDING
ELECTIVE FACIAL COSMETIC SURGERY PERMIT

Additions are indicated in underline text.

Deletions are indicated in ~~striketrough text~~.

An act to amend section 1638.1 of the Business and Professions Code.

Section 1638.1 of the Business and Professions Code is amended to read:

1638.1. (a)~~(1)~~ A dentist shall possess a current license in good standing and an elective facial cosmetic surgery permit person licensed pursuant to Section 1634 who wishes to perform elective facial cosmetic surgical procedures authorized by this section ~~surgery shall first apply for and receive a permit to perform elective facial cosmetic surgery from the board.~~

~~(2) A permit issued pursuant to this section shall be valid for a period of two years and must be renewed by the permitholder at the time his or her license is renewed. Every six years, prior to renewal of the permitholder's license and permit, the permitholder shall submit evidence acceptable to the credentialing committee that he or she has maintained continued competence to perform the procedures authorized by the permit. The credentialing committee may limit a permit consistent with paragraph (1) of subdivision (e) if it is not satisfied that the permitholder has established continued competence.~~

~~(b) The board may adopt regulations for the issuance of the permit that it deems necessary to protect the health, safety, and welfare of the public. The board may issue an elective facial cosmetic surgery permit to perform one of the following categories of elective facial cosmetic surgical procedures:~~

(1) Cosmetic contouring of the osteocartilaginous facial structure, which may include, but is not limited to, rhinoplasty and otoplasty.

(2) Cosmetic contouring or rejuvenation of the facial soft tissue, which may include, but is not limited to, facelift, blepharoplasty, facial skin resurfacing, or lip augmentation.

(3) Procedures under both paragraphs (1) and (2).

~~(c) A licensee who desires may obtain a permit to perform elective facial cosmetic surgery shall apply to the board by furnishing all of the following information on an application form approved prescribed by the board and submit all of the following:~~

(1) Proof of successful completion of an oral and maxillofacial surgery residency program accredited by the Commission on Dental Accreditation of the American Dental Association.

(2) Proof that the ~~applicant~~ licensee has satisfied all of the criteria specified in either subparagraph (A) or (B):

(A) (i) ~~The licensee is~~ is certified, or is a candidate for certification, by the American Board of Oral and Maxillofacial Surgery.

(ii) ~~Submits to the board a~~ A letter from the program director of the accredited residency program, or from the director of a postresidency fellowship program accredited by the Commission on Dental Accreditation of the American Dental Association, stating that the licensee has the education, training, and competence necessary to perform the surgical procedures set forth in paragraphs (1) through (3) of subdivision (b) that the licensee has notified the board ~~he or she~~ the licensee intends to perform.

(iii) ~~Submits d~~ Documentation to the board of at least 10 operative reports from residency training or proctored surgical procedures performed at minimum in the role of surgical first assistant within five years from the date of application for each category of permit set forth in paragraphs (1) or (2) of subdivision (b) for which the licensee seeks a permit. If the licensee seeks a permit set forth in paragraph (3) of subdivision (b), the licensee shall submit 10 operative reports for each category specified in paragraphs (1) and (2) of subdivision (b) that are representative of procedures that the licensee intends to perform from both of the following categories: Each operative report shall indicate all of the following:

(I) Name of the licensee.

(II) Category of procedure and specific type of procedure performed.

(III) Date of the procedure.

(IV) The role in which the licensee participated in the procedure.

~~(I) Cosmetic contouring of the osteocartilaginous facial structure, which may include, but is not limited to, rhinoplasty and otoplasty.~~

~~(II) Cosmetic soft tissue contouring or rejuvenation, which may include, but is not limited to, facelift, blepharoplasty, facial skin resurfacing, or lip augmentation.~~

(iv) ~~Submits d~~ Documentation to the board showing the surgical privileges the ~~applicant~~ licensee possesses at any licensed general acute care hospital and any licensed outpatient surgical facility in this state.

(B) (i) The licensee hHas been granted privileges by the medical staff at a licensed general acute care hospital to perform the surgical procedures set forth in paragraphs (1) through (3) of subdivision (b)(A) at that hospital.

(ii) ~~Submits to the board the d~~Documentation described in clause (iii) of subparagraph (A).

(3) Proof that the applicantlicensee is on active status on the staff of a general acute care hospital and maintains the necessary privileges based on the bylaws of the hospital to maintain that status.

(d) The application shall be accompanied by an application fee required by the board for an initial permit. The fee to renew a permit shall not exceed the maximum amount prescribed in Section 1724.

(e) The board may adopt regulations for the issuance of the permit that it deems necessary to protect the health, safety, and welfare of the public.

~~(e)(1) The board shall appoint a credentialing committee to review the qualifications of each applicant for a permit. Upon completion of the review of an applicant, the committee shall make a recommendation to the board on whether to issue or not issue a permit to the applicant. The permit may be unqualified, entitling the permit holder to perform any facial cosmetic surgical procedure authorized by this section, or it may contain limitations if the credentialing committee is not satisfied that the applicant has the training or competence to perform certain classes of procedures, or if the applicant has not requested to be permitted for all procedures authorized by this section.~~

~~(2) The credentialing committee shall be comprised of five members, as follows:~~

~~(A) A physician and surgeon with a specialty in plastic and reconstructive surgery who maintains active status on the staff of a licensed general acute care hospital in this state.~~

~~(B) A physician and surgeon with a specialty in otolaryngology who maintains active status on the staff of a licensed general acute care hospital in this state.~~

~~(C) Three oral and maxillofacial surgeons licensed by the board who are board certified by the American Board of Oral and Maxillofacial Surgeons, and who maintain active status on the staff of a licensed general acute care hospital in this state, at least one of whom shall be licensed as a physician and surgeon in this state. Two years after the effective date of this section, any oral and maxillofacial surgeon appointed to the committee who is not licensed as a physician and surgeon shall hold a permit pursuant to this section.~~

~~(3) The board shall solicit from the following organizations input and recommendations regarding members to be appointed to the credentialing committee:~~

~~(A) The Medical Board of California.~~

~~(B) The California Dental Association.~~

~~(C) The California Association of Oral and Maxillofacial Surgeons.~~

~~(D) The California Medical Association.~~

~~(E) The California Society of Plastic Surgeons.~~

~~(F) Any other source that the board deems appropriate.~~

~~(4) The credentialing committee shall meet at a time and place directed by the board to evaluate applicants for permits. A quorum of three members shall be required for the committee to consider applicants and make recommendations to the board.~~

(f) A licensee may not perform any elective, facial cosmetic surgical procedure except at a general acute care hospital, a licensed outpatient surgical facility, or an outpatient surgical facility accredited by ~~the~~ The Joint Commission on Accreditation of Healthcare Organizations (JCAHO), the American Accreditation Association for Ambulatory Health Care (AAAHC), the Medicare program, or an accreditation agency approved by the Medical Board of California pursuant to subdivision (g) of Section 1248.1 of the Health and Safety Code.

(g) For purposes of this section, the following terms shall have the following meanings:

(1) "Elective cosmetic surgery" means any procedure defined as cosmetic surgery in subdivision (d) of Section 1367.63 of the Health and Safety Code, and excludes any procedure that constitutes reconstructive surgery, as defined in subdivision (c) of Section 1367.63 of the Health and Safety Code.

(2) "Facial" means those regions of the human body described in Section 1625 and in any regulations adopted pursuant to that section by the board.

(h) A holder of a permit issued pursuant to this section shall not perform elective facial cosmetic surgical procedures unless ~~he or she~~ the permit holder has malpractice insurance or other financial security protection that would satisfy the requirements of Section 2216.2 and any regulations adopted thereunder.

(i) A holder of a permit shall comply with the requirements of subparagraph (D) of paragraph (2) of subdivision (a) of Section 1248.15 of the Health and Safety Code, and the reporting requirements specified in Section 2240, with respect to any surgical procedure authorized by this section, in the same manner as a physician and surgeon.

(j) Any violation of this section constitutes unprofessional conduct and is grounds for the revocation or suspension of the person's permit, license, or both, or the person may be reprimanded or placed on probation. Proceedings initiated by the board under this section shall be conducted in accordance with Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code, and the board shall have all the powers granted therein.

(k) A permit issued pursuant to this section shall be valid for a period of two years and must be renewed by the permitholder at the time the dentist license is renewed.

(l) A permitholder shall be required to complete 24 hours of approved courses of study related to elective cosmetic surgery as a condition of renewal of a permit. Those courses of study shall be credited toward the total continuing education hours required by the board pursuant to Section 1645.

(m) Permits issued prior to January 1, 2025, that limit the type of procedure under the general permit category provided under paragraph (1) or (2) of subdivision (b) authorized to be performed by the permitholder shall not be renewed. This subdivision shall not apply to a permit that authorized the permitholder to practice any procedure under the general permit category specified under paragraph (1) or (2) of subdivision (b). The permitholder who seeks to continue performing the procedure previously limited by the permit shall submit an application to the Board for issuance of a new permit under paragraph (1), (2), or (3) of subdivision (b), and the Board may request the permitholder to submit additional documentation demonstrating the permitholder's competency for issuance of such permit. The application shall be treated as a renewal application for purposes of subdivision (m) of section 1724.

~~(nk) On or before January 1, 20252009, and every four years thereafter, the board shall report to the Joint Sunset Review Committee on Boards, Commissions and Consumer Protection on all of the following:~~

~~(1) The number of persons licensed pursuant to Section 1634 who apply to receive a permit to perform elective facial cosmetic surgery from the board pursuant to subdivision (a)this section.~~

~~(2) The recommendations of the credentialing committee to the board.~~

~~(3) The board's action on recommendations received by the credentialing committee.~~

~~(24) The number of persons receiving a permit from the board to perform elective facial cosmetic surgery.~~

~~(35) The number of complaints filed by or on behalf of patients who have received elective facial cosmetic surgery by persons who have received a permit from the board to perform elective facial cosmetic surgery.~~

~~(46) Action taken by the board resulting from complaints filed by or on behalf of patients who have received elective facial cosmetic surgery by persons who have received a permit from the board to perform elective facial cosmetic surgery.~~

(o) As used in this section, "good standing" means the license is active and unrestricted by disciplinary action taken pursuant to Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code, is not the subject of an

unresolved complaint or review procedure, and is not the subject of any unresolved disciplinary proceeding.



MEMORANDUM

DATE	July 24, 2023
TO	Members of the Dental Board of California (Board)
FROM	Paige Ragali, Chief of Dental Programs and Customer Support Dental Board of California
SUBJECT	Agenda Item 26.c.: Discussion and Possible Action on Legislative Proposal to Amend BPC Section 1718.3 Regarding Issuance of New License in Event of Failure to Renew Within Five Years After Expiration

Identification Of Issues

Pursuant to Business and Professions Code (BPC) section 1718.3, a license that is not renewed within five years after its expiration shall not be renewed, restored, reinstated, or reissued thereafter, but the holder of the license may apply for and obtain a new license if they can satisfy the requirements listed within BPC 1718.3. As it is currently written, this section requires licensees who have allowed their license to go into a cancelled status to pay past due renewal and delinquency fees that have accrued since the license was last renewed and pay all applicable fees as if applying for an initial license. In addition, the current section states they must pass an exam or provide satisfaction that they can practice within the profession and apply using an available pathway, which are the five pathways to licensure provided under BPC sections 1632, 1634.1, and 1635.5: licensure by Western Regional Examination Board examination (WREB); licensure by American Board of Dental Examiners, Inc. examination (ADEX); licensure by credential (LBC); licensure by residency; (LBR) and portfolio examination.

Board staff have identified implementation and process issues with BPC section 1718.3 and recommend making clarifying and other non-substantive amendments described below and reflected in the attached legislative proposals.

Background

Pursuant to Assembly Bill 1281 (Quackenbush, Chapter 607, Statutes of 1989), BPC section 1718.3 allowed license holders whose licenses had cancelled due to non-renewal to apply for and obtain a new license if, among other things, the individual paid all past due renewal and delinquency fees since the license was last renewed, and the

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individual took and passed the examination, if any, that would be required if they were applying for the license for the first time, or otherwise established to the satisfaction of the Board that with due regard for the public interest, they were qualified to practice the profession or activity in which they again sought to be licensed. The Board's process was then to have the applications reviewed in closed session by a Licensing and Examination Committee that either approved issuance of the license or requested conditions be met prior to issuance, such as taking and passing a licensure examination or the law and ethics examination.

Assembly Bill (AB) 1519 (Low, Chapter 865, Statutes of 2019) amended BPC section 1718.3 during the Board's last Sunset review, and added to the existing licensure requirements a new provision requiring the license holder to apply for licensure, as a new applicant, through one of the available licensing pathways under Dental Practice Act and meet all the requirements for licensure outlined therein. The intent of that amendment was to allow those with cancelled licenses to utilize the current process or apply for licensure through one of the available pathways, WREB, ADEX, LBC, LBR or Portfolio. Board staff believed this would allow those who did qualify through an available pathway to gain access to licensure without the barriers of waiting on quarterly board meetings for review and significantly decrease the amount of cancelled license applications received and reviewed during closed session. By allowing those with cancelled licenses to apply through an available pathway, Board staff believed this would also ensure all licensees seeking to practice in California established that they were qualified to safely practice and ensuring competency in current standards of the profession.

DISCUSSION AND RECOMMENDATIONS

Board staff have concerns regarding the interpretation of the current statute as it is written and the ability to allow license holders to return to practice after extended periods of time, without sufficiently establishing that they are competent and safe to practice with the current standards. Board staff also have concerns regarding the time spent reviewing and communicating with license holders about the requirements in BPC section 1718.3 that lack clarity and uniformity. Specifically, paragraph (3) of subdivision (a) authorizes the license holder to otherwise establish to the satisfaction of the board the license holder is qualified to practice, even though paragraph (4) of that subdivision already requires the license holder to apply for licensure as a new applicant. To some license holders, paragraph (3) appears to create a separate pathway whereby the Board could review their experience and authorize the new license, without reapplying pursuant to paragraph (4).

After consideration of the current process, the concerns raised, and review of the statutory provisions, Board staff propose amending BPC section 1718.3 to strike the confusing provisions in paragraph (3), so that all license holders seeking to obtain a

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new license after cancellation would apply for license through an available pathway. This proposed change is in alignment with the Board's mission of consumer protection and better reflects the efforts in the Board's last Sunset review that established stricter requirements for licensure pathways to ensure competency in current professional standards. Board staff anticipate the proposed statutory amendments will benefit licensees, consumers, and Board staff by better identifying clear expectations of license holders with cancelled licenses wanting to gain licensure in California again.

Board staff also acknowledge that there are certain licensing populations who may not qualify for licensure under the current requirements and proposed amendments contained in the initial legislative proposal and therefore, has drafted two proposals, discussed further below. While the second option includes an exemption based on license holders who were previously eligible for examination pursuant to subdivision (e) of Section 1628. This option will allow them to be eligible to take a licensure examination as required by Section 1632 pursuant to the terms of subdivision (e) of section 1628.

Legislative Proposal Option A

As noted above, license holders who wish to gain licensure in California after their license has cancelled must qualify for licensure pursuant to BPC section 1718.3. After review of the current requirements and various discussion, Board staff recommend clarifying the requirements for obtaining licensure after having a cancelled license and requiring all license holders to qualify and apply for licensure under one of the available pathways. The proposed amendments are as follows:

- Clarify the fees due when a license holder is applying for licensure after allowing their license to cancel. (Prop. BPC, § 1718.3, subd. (b).) This would establish that the license holder only pays delinquency fees accrued prior to the license cancelling and all fees required for new licensure, depending on the pathway the license holder applies for.
- Strike BPC section 1718.3, subdivision (a)(3), which requires a license holder to take an examination or provide satisfactory proof that they are safe to practice. (Prop. BPC, § 1718.3, subd. (c).) Since all license holders are required to reapply for licensure as a new applicant, paragraph (3) of subdivision (a) is no longer needed and otherwise conflicts with paragraph (4) of that subdivision.

Additionally, Board staff propose making other clarifying, non-substantive amendments, including renumbering the subdivisions and removing outdated language.

Legislative Proposal Option B

License applicants issued a dental diploma from a foreign dental school that has not, at the time of the applicant's graduation from the school, been approved by the Board shall not be eligible for examination until the applicant has successfully completed a minimum of two academic years of education at a Board-approved dental college and issued a degree, as specified. (BPC, § 1628, subd. (e).) Exempt from that requirement are applicants who had successfully completed the licensure requirements on or before January 1, 2004, or December 31, 2008, as specified. Applicants who are not specifically eligible to take an examination through one of the pathways in BPC section 1632 or by exemption under BPC section 1628, subdivision (e), must complete the additional two-year education.

As noted above, license holders who wish to gain licensure in California after their license has cancelled must qualify for licensure pursuant to BPC section 1718.3. After review of the current requirements and various discussion, Board staff recommend clarifying the requirements for obtaining licensure after having a cancelled license and allow an exemption for those license holders who were previously eligible for licensure examination to be allowed take a licensure examination as required by BPC section 1632 pursuant to the terms of BPC section 1628, subdivision (e). The proposed amendments are as follows:

- Clarify the fees due when a license holder is applying for licensure after allowing their license to cancel. (Prop. BPC, § 1718.3, subd. (b).) This would establish that the license holder only pays delinquency fees accrued prior to the license cancelling and all fees required for new licensure depending on the pathway the license holder applies for.
- Strike BPC section 1718.3, subdivision (a)(3), which requires a license holder to take an examination or provide satisfactory proof that they are safe to practice. (Prop. BPC, § 1718.3, subd. (c).) Since all license holders are required to reapply for licensure as a new applicant, paragraph (3) of subdivision (a) is no longer needed and otherwise conflicts with paragraph (4) of that subdivision.
- Add language to allow for those license holders who had graduated from a non-Board approved foreign dental school but were previously eligible to take a licensure examination. (Prop. BPC, § 1718.3, subd. (d).) This proposed section would ensure the license holders shall be eligible to take the examination required by Section 1632.

Additionally, Board staff propose making other clarifying, non-substantive amendments, including renumbering the subdivisions and removing outdated language.

Operational/Fiscal Impact

Board staff have made an initial determination that the proposed statutory amendments would not have a significant operational impact in regard to the demand of more staff, or higher expectancy of license holders applying for licensure. It has been determined that the statutory amendments would have minimal fiscal impact in regard to updating the online system to reflect new language for permit requirements.

Critical Timeframes

The proposed statutory changes do not impose any critical timeframes.

Action Requested

The Board is asked to discuss and consider the above-described legislative proposals. If the Board approves of the legislative proposal, the Board is asked to include in the Board's next Sunset Review Report a recommendation to amend Business and Professions Code section 1718.3 to clarify the cancelled license application process and requirements.

Attachments

1. Option A - Legislative Proposal to Amend Business and Professions Code Section 1718.3 Regarding Cancelled License
2. Option B - Legislative Proposal to Amend Business and Professions Code Section 1718.3 Regarding Cancelled License

DENTAL BOARD OF CALIFORNIA
LEGISLATIVE PROPOSAL TO AMEND
BUSINESS AND PROFESSIONS CODE SECTION 1718.3 REGARDING
CANCELLED LICENSE

Option A

Additions are indicated in underline text.

Deletions are indicated in ~~strikethrough text~~.

An act to amend section 1718.3 of the Business and Professions Code.

Section 1718.3 of the Business and Professions Code is amended to read:

1718.3. ~~(a)~~ A license that is not renewed within five years after its expiration shall not be renewed, restored, reinstated, or reissued thereafter, but the holder of the license may apply for and obtain a new license if the following requirements are satisfied:

~~(a1)~~ No fact, circumstance, or condition exists which would justify denial of licensure under Section 480.

~~(b2)~~ The licenseholder pays all of the fees that would be required if the licenseholder were then applying for the license for the first time and all ~~renewal and delinquency fees, if any,~~ that have accrued since the date on which the licenseholder last renewed the license.

~~(3)~~ ~~The licenseholder takes and passes the examination, if any, that would be required if the licenseholder were then applying for the license for the first time, or otherwise establishes to the satisfaction of the board that with due regard for the public interest, the licenseholder is qualified to practice the profession or activity in which the licenseholder again seeks to be licensed.~~

~~(c4)~~ The licenseholder applies for licensure, as a new applicant, through one of the available licensing pathways under this division and meets all the requirements for licensure outlined therein.

~~(b)~~ ~~The board may impose conditions on any license issued pursuant to this section, as it deems necessary.~~

~~(c)~~ ~~The board may by regulation provide for the waiver or refund of all or any part of the examination fee in those cases in which a license is issued without an examination under this section.~~

DENTAL BOARD OF CALIFORNIA
LEGISLATIVE PROPOSAL TO AMEND
BUSINESS AND PROFESSIONS CODE SECTION 1718.3 REGARDING
CANCELLED LICENSE

Option B

Additions are indicated in underline text.

Deletions are indicated in ~~strikethrough text~~.

Section 1718.3 of the Business and Professions Code is amended to read:

1718.3. ~~(a)~~ A license that is not renewed within five years after its expiration shall be cancelled and shall not be renewed, restored, reinstated, or reissued thereafter, but the holder of the license may apply for and obtain a new license if the following requirements are satisfied:

~~(a1)~~ No fact, circumstance, or condition exists which would justify denial of licensure under Section 480.

~~(b2)~~ The licenseholder pays all of the fees that would be required if the licenseholder were then applying for the license for the first time and all ~~renewal and delinquency fees, if any,~~ that have accrued since the date on which the licenseholder last renewed the license. Delinquency fees shall not accrue after the license has been cancelled pursuant to this section.

~~(3)~~ ~~The licenseholder takes and passes the examination, if any, that would be required if the licenseholder were then applying for the license for the first time, or otherwise establishes to the satisfaction of the board that with due regard for the public interest, the licenseholder is qualified to practice the profession or activity in which the licenseholder again seeks to be licensed.~~

~~(c4)~~ The licenseholder applies for licensure, as a new applicant, through one of the available licensing pathways under this division and meets all the requirements for licensure outlined therein.

~~(d)~~ For purposes of subdivision (c), a licenseholder who was previously eligible for examination pursuant to subdivision (e) of Section 1628 shall be eligible to take the examination required by Section 1632 pursuant to the terms of subdivision (e) of section 1628.

~~(b)~~ ~~The board may impose conditions on any license issued pursuant to this section, as it deems necessary.~~

~~(c) The board may by regulation provide for the waiver or refund of all or any part of the examination fee in those cases in which a license is issued without an examination under this section.~~



MEMORANDUM

DATE	July 24, 2023
TO	Members of the Dental Board of California
FROM	Paige Ragali, Chief of Dental Programs and Customer Support Dental Board of California
SUBJECT	Agenda Item 26.d.: Discussion and Possible Action on Legislative Proposal to Amend BPC Section 1628.7 Regarding Probationary License

Identification of Issues

Pursuant to Business and Professions Code (BPC) section 1628.7, the Dental Board of California (Board) may, upon an applicant's successful completion of the Board examination, in its sole discretion, issue a probationary license to an applicant for licensure as a dentist or dental auxiliary. The probation is required to be a term of three years and allows the Board to include terms and conditions of probation. Issuance of a probationary license is intended to authorize the Board to settle the matter of license issuance more efficiently for an applicant who would not otherwise qualify for an unrestricted license but may be safe to practice under specified terms and conditions.

As it is currently written, this section requires that the probationary licensure proceedings be conducted in accordance with the Administrative Procedures Act (APA) (Gov. Code, § 11500 et seq.), which requires a formal statement of issues (SOI) to first be filed using the Office of the Attorney General (OAG) before the Board can settle the license application matter. Since the original intent of the probationary license statute was to make issuance of a probationary license more efficient and avoid the delay and expense of filing a formal SOI, the Board is unable to use the statute as intended. Accordingly, Board staff have prepared the attached legislative proposal for the Board's consideration to resolve these issues.

Background

When a license applicant is denied a license, for something such as a criminal conviction related to the practice of dentistry, the normal process is the applicant will be advised of the license denial and informed of their ability to appeal the license denial. If the license applicant submits a request to appeal the denial, a case is opened and transmitted to the OAG for preparation of an SOI that describes the grounds for license

Agenda Item 26.d.: Discussion and Possible Action on Legislative Proposal to Amend BPC Section 1628.7 Regarding Probationary License
Dental Board of California Meeting
August 17-18, 2023

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denial. Once the SOI has been served on the license applicant, the OAG may enter discussions with the license applicant to settle the matter through a stipulated settlement that would issue the license with terms and conditions of probation. Once the terms and conditions of the stipulated settlement are finalized by the Board's Executive Officer, OAG, and license applicant, it is signed by the parties and submitted to the Board for consideration. The Board may adopt the stipulated settlement to issue the license on probation, deny the stipulated settlement, or deny the stipulated settlement and propose a counteroffer, which may contain revised terms and conditions of probation.

If the matter is not settled by stipulation, the case will go before an administrative law judge (ALJ) to receive evidence and testimony regarding whether to issue the license. After a hearing on the matter, the ALJ will prepare a proposed decision, which is submitted to the Board for consideration of whether to adopt the proposed decision, adopt the proposed decision with reduced penalties (lessen the terms and conditions of probation, if appropriate), or reject the proposed decision and decide the matter.

Cases that are transmitted for formal hearing are costly and time-consuming for both the Board and the license applicant. Accordingly, Senate Bill (SB) 511 (Leslie, Chapter 492, Statutes of 1996) enacted BPC section 1628.7 to authorize the Board to issue probationary licenses. Notably, the Assembly Business and Professions Committee analysis for the May 7, 1996 hearing of SB 511 stated the bill was modeled after provisions similar to those contained in the Medical Practice and Pharmacy Acts. BPC section 2064.7 authorizes issuance of a probationary postgraduate training license to an applicant that does not require compliance with the ADA to issue the probationary license but authorizes an ALJ to hear a petition to modify or terminate the terms of the probation. Similarly, BPC section 2221 authorizes issuance of a probationary physician's and surgeon's certificate without ADA process.

BPC section 1628.7 was intended to provide an efficient and cost-effective path to allow the Board to review license applications and offer probationary licenses to applicants without the lengthy APA process. However, it was recently brought to Board staff's attention that BPC section 1628.7 still requires the APA process before a probationary license can be issued.

Discussion And Recommendations

As noted above, the Medical Board of California (MBC) is authorized to issue a probationary license without having to first file an SOI and process the license denial through the APA process. (BPC, §§ 2064.7, 2221.) Further, the legislative history of BPC section 1628.7 indicates the Board's probationary license statute was supposed to be modeled after the MBC's probationary license statutes. As such, Board staff recommend amendments to BPC section 1628.7 to better align with the MBC's statutes,

improve licensure efficiency, increase the number of licensees, and allow the issuance of Board licenses without having to follow APA processes.

The proposed amendments would better align with the MBC's statutory authority to issue probationary licenses and:

- Clarify requirements for licensure and add a sentence identifying the Board's ability to deny licensure based on unprofessional conduct.
- Add language to advise the decision shall be posted on the Board's website.
- Remove subdivision (c), removing the requirement to follow APA processes to issue a probationary license.
- Add language to advise that a new application cannot be submitted until at least one year has passed from the denial of the application.
- Add language to clarify that an unrestricted license would be issued to the licensee once the probationary term is completed or upon termination of the probationary term.
- Remove subdivision (d), which requires the Board to adopt written guidance regarding probationary assignments, as it is not relevant to the issuance of probationary licenses. The Board's Disciplinary Guidelines With Model Language and Uniform Standards Related to Substance-Abusing Licensees with Standard language for Probationary Orders incorporated by reference in California Code of Regulations, title 16, sections 1018 and 1018.01, respectively, provide appropriate guidance regarding probationary terms and conditions.
- Add language to ensure the statute's intent is clear, and issuance of a probationary license under this statute would not require adjudication under the APA.

Additionally, Board staff propose making other clarifying, non-substantive amendments, including renumbering the subdivisions and removing outdated language.

Operational/Fiscal Impact

Board staff have made an initial determination that the proposed statutory amendments would not have a significant operational impact regarding the demand of more staff, or higher expectancy of license holders applying for licensure. It has been determined that the statutory amendments would have minimal fiscal impact on updating the online system to reflect new language for permit requirements.

Critical Timeframes

The proposed statutory changes do not impose any critical timeframes.

Action Requested

The Board is asked to discuss and consider the above-described legislative proposal. If the Board approves of the legislative proposal, the Board is asked to include in the Board's next Sunset Review Report a recommendation to amend Business and Professions Code section 1628.7 to clarify the probationary license process and requirements.

Attachment

Legislative Proposal to Amend Business and Professions Code Section 1628.7
Regarding Probationary Licenses

DENTAL BOARD OF CALIFORNIA
LEGISLATIVE PROPOSAL TO AMEND
BUSINESS AND PROFESSIONS CODE SECTION 1628.7 REGARDING
PROBATIONARY LICENSE

Additions are indicated in underline text.

Deletions are indicated in ~~striketrough text~~.

An act to amend section 1628.7 of the Business and Professions Code.

Section 1628.7 of the Business and Professions Code is amended to read:

1628.7. (a) The board may deny licensure to any applicant guilty of unprofessional conduct or of any cause that would subject a licensee to revocation or suspension of their license. The board may, upon an applicant's successful completion of the ~~board examination;~~ board's licensure requirements, in its sole discretion, issue a probationary license to an applicant for licensure as a dentist or dental auxiliary. The board may require, as a term or condition of issuing the probationary license, the applicant to do any of the following, including, but not limited to:

- (1) Successfully complete a professional competency examination.
- (2) Submit to a medical or psychological evaluation.
- (3) Submit to continuing medical or psychological treatment.
- (4) Abstain from the use of alcohol or drugs.
- (5) Submit to random fluid testing for alcohol or controlled substance abuse.
- (6) Submit to continuing participation in a board approved rehabilitation program.
- (7) Restrict the type or circumstances of practice.
- (8) Submit to continuing education and coursework.
- (9) Comply with requirements regarding notification to employer and changes of employment.
- (10) Comply with probation monitoring.
- (11) Comply with all laws and regulations governing the practice of dentistry.
- (12) Limit practice to a supervised structured environment in which the licensee's activities shall be supervised by another dentist.
- (13) Submit to total or partial restrictions on drug prescribing privileges.

(b) The board shall provide the decision placing the applicant on probation in plain view on the board's internet website.

(b)(c) Unless otherwise specified by the board, ~~the~~ term of probation shall be for three years and the licensee may petition the board for early termination, or modification of a condition of, the probation in accordance with subdivision (b) of Section 1686.

~~(c) The proceeding under this section shall be conducted in accordance with the provisions of Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code, and the board shall have all the powers granted therein.~~

(d) An applicant shall not be eligible to reapply for licensure for a minimum of one year from the effective date of the denial of their application.

(e) Upon successful completion of all terms and conditions of probation or termination of the probationary terms and conditions pursuant to subdivision (c), the board may issue an unrestricted license to the licensee.

~~(d) The board shall adopt written guidelines on how to make probation assignments for licensees and shall ensure that probationary and evaluation reports are conducted consistently and regularly.~~

(f) Adjudication under the Administrative Procedure Act (Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code) shall not be required to issue a probationary license pursuant to subdivision (a).



MEMORANDUM

DATE	July 26, 2023
TO	Members of the Dental Board of California
FROM	Tracy A. Montez, Ph.D., Executive Officer Dental Board of California
SUBJECT	Agenda Item 26.e.: Discussion and Possible Action Regarding Penalties for Fraudulent Advertising and Misinformation of Dental Assistant Educational Programs and Courses

Background

Through communications with professional associations and stakeholder groups, the Dental Board of California (Board) staff have become aware of fraudulent advertising and misinformation distributed by dental assistant educational programs and courses. Examples of these issues are programs and courses including false statements on their websites that they are Board accredited (i.e., the Board does not accredit any program or course), completing the program or course satisfies Board requirements for licensure, or that the course or program is Board approved when it is not.

Fraudulent advertising and misinformation lures prospective students to pay for these programs or courses that do not satisfy the educational requirements for registered dental assistant or registered dental assistant in extended functions licensure, causing the students to pay additional money to take Board-approved programs and courses and delays the student's licensure.

Existing Board Authority

Currently, the Board has authority to approve educators to offer courses and programs. However, since no license, registration, or permit is issued to Board-approved dental assistant educational programs or courses, the Board does not have robust enforcement over these course and program providers and cannot discipline any license, registration, or permit held by the educational program or course for non-compliance with regulatory requirements. The Board may only withdraw or deny program and course approvals due to failure to comply with program and course requirements. (California Code of Regulations (CCR), tit. 16, § 1070, subs. (a)(2), (4).)

Agenda Item 26.e.: Discussion and Possible Action Regarding Penalties for Fraudulent Advertising and Misinformation of Dental Assistant Educational Programs and Courses
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Business and Professions Code (BPC) section 17500 prescribes a penalty for false advertising; a violation is a misdemeanor punishable by six months in jail or a \$2,500 fine, or both. However, the Board does not file criminal actions and has no authority to cite educators for false advertising.

One option would be to establish, via statute or regulation, that a violation of BPC section 17500 would constitute unprofessional conduct. The Medical Board of California has something like this in BPC section 2271.

“Any advertising in violation of section 17500, relating to false or misleading advertising, constitutes unprofessional conduct.”

This language could be entered as a separate statute or added to the current unprofessional conduct language in section 1680 (which applies to all dental licensees).

Such language would permit the Board to pursue the licenses and/or permits of individuals associated with programs, or licenses and/or permits held by the programs themselves.

Alternately, the Board may decide to request that violations of section 17500 would be subject to disciplinary action and determine the appropriate sanctions for such violations.

Staff Recommendation

Board staff recommend including this issue in the Board’s Sunset Review Report and requesting that the California State Legislature create a clear enforcement action statute, with prescribed Board administrative enforcement actions, to combat fraudulent advertising and misinformation distributed by educational programs and course providers.

Action Requested

The Board is asked to discuss this request, and then move to include this issue in the Board’s Sunset Review Report.



DENTAL BOARD OF CALIFORNIA

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MEMORANDUM

DATE	July 21, 2023
TO	Members of the Dental Board of California
FROM	David Bruggeman, Legislative and Regulatory Specialist Dental Board of California
SUBJECT	Agenda Item 27.a.: 2023 Tentative Legislative Calendar – Information Only

Background

The 2023 Tentative Legislative Calendars for the Assembly and the Senate are attached.

Action Requested

No Board action is requested.

2023 TENTATIVE LEGISLATIVE CALENDAR

COMPILED BY THE OFFICE OF THE ASSEMBLY CHIEF CLERK AND THE OFFICE OF THE SECRETARY OF THE SENATE
Revised 11-4-22

DEADLINES

JANUARY							
	S	M	T	W	TH	F	S
	1	2	3	4	5	6	7
Wk. 1	8	9	10	11	12	13	14
Wk. 2	15	16	17	18	19	20	21
Wk. 3	22	23	24	25	26	27	28
Wk. 4	29	30	31				

- Jan. 1** Statutes take effect (Art. IV, Sec. 8(c)).
- Jan. 4** Legislature reconvenes (J.R. 51(a)(1)).
- Jan. 10** Budget must be submitted by Governor (Art. IV, Sec. 12(a)).
- Jan. 16** Martin Luther King, Jr. Day.
- Jan. 20** Last day to submit **bill requests** to the Office of Legislative Counsel.

FEBRUARY							
	S	M	T	W	TH	F	S
Wk. 4				1	2	3	4
Wk. 1	5	6	7	8	9	10	11
Wk. 2	12	13	14	15	16	17	18
Wk. 3	19	20	21	22	23	24	25
Wk. 4	26	27	28				

- Feb. 17** Last day for bills to be **introduced** (J.R. 61(a)(1), J.R. 54(a)).
- Feb. 20** Presidents' Day.

MARCH							
	S	M	T	W	TH	F	S
Wk. 4				1	2	3	4
Wk. 1	5	6	7	8	9	10	11
Wk. 2	12	13	14	15	16	17	18
Wk. 3	19	20	21	22	23	24	25
Wk. 4	26	27	28	29	30	31	

- Mar. 30** **Spring Recess** begins upon adjournment (J.R. 51(a)(2)).
- Mar. 31** Cesar Chavez Day observed.

APRIL							
	S	M	T	W	TH	F	S
Wk. 4							1
Spring Recess	2	3	4	5	6	7	8
Wk. 1	9	10	11	12	13	14	15
Wk. 2	16	17	18	19	20	21	22
Wk. 3	23	24	25	26	27	28	29
Wk. 4	30						

- Apr. 10** Legislature reconvenes from **Spring Recess** (J.R. 51(a)(2)).
- Apr. 28** Last day for **policy committees** to hear and report to fiscal committees **fiscal bills** introduced in their house (J.R. 61(a)(2)).

MAY							
	S	M	T	W	TH	F	S
Wk. 4		1	2	3	4	5	6
Wk. 1	7	8	9	10	11	12	13
Wk. 2	14	15	16	17	18	19	20
Wk. 3	21	22	23	24	25	26	27
No Hrgs.	28	29	30	31			

- May 5** Last day for **policy committees** to hear and report to the Floor **nonfiscal bills** introduced in their house (J.R. 61(a)(3)).
- May 12** Last day for **policy committees** to meet prior to June 5 (J.R. 61(a)(4)).
- May 19** Last day for **fiscal committees** to hear and report to the Floor bills introduced in their house (J.R. 61(a)(5)).
Last day for **fiscal committees** to meet prior to June 5 (J.R. 61(a)(6)).
- May 29** Memorial Day.
- May 30-June 2** **Floor session only.** No committee may meet for any purpose except Rules Committee, bills referred pursuant to A.R. 77.2, and Conference Committees (J.R. 61(a)(7)).

*Holiday schedule subject to final approval by Rules Committee.

2023 TENTATIVE LEGISLATIVE CALENDAR

COMPILED BY THE OFFICE OF THE ASSEMBLY CHIEF CLERK AND THE OFFICE OF THE SECRETARY OF THE SENATE
Revised 11-4-22

JUNE							
	S	M	T	W	TH	F	S
No Hrgs.					1	2	3
Wk. 4	4	5	6	7	8	9	10
Wk. 1	11	12	13	14	15	16	17
Wk. 2	18	19	20	21	22	23	24
Wk. 3	25	26	27	28	29	30	

- June 2** Last day for each house to pass bills introduced in that house (J.R. 61(a)(8)).
- June 5** Committee meetings may resume (J.R. 61(a)(9)).
- June 15** Budget Bill must be passed by midnight (Art. IV, Sec. 12(c)(3)).

JULY							
	S	M	T	W	TH	F	S
Wk. 3							1
Wk. 4	2	3	4	5	6	7	8
Wk. 1	9	10	11	12	13	14	15
Summer Recess	16	17	18	19	20	21	22
Summer Recess	23	24	25	26	27	28	29
Summer Recess	30	31					

- July 4** Independence Day.
- July 14** Last day for **policy committees** to meet and report bills (J.R. 61(a)(10)).
- Summer Recess** begins upon adjournment, provided Budget Bill has been passed (J.R. 51(a)(3)).

AUGUST							
	S	M	T	W	TH	F	S
Summer Recess			1	2	3	4	5
Summer Recess	6	7	8	9	10	11	12
Wk. 2	13	14	15	16	17	18	19
Wk. 3	20	21	22	23	24	25	26
Wk. 4	27	28	29	30	31		

- Aug. 14** Legislature reconvenes from Summer Recess (J.R. 51(a)(3)).

SEPTEMBER							
	S	M	T	W	TH	F	S
Wk. 4						1	2
No Hrgs.	3	4	5	6	7	8	9
No Hrgs.	10	11	12	13	14	15	16
Interim Recess	17	18	19	20	21	22	23
Interim Recess	24	25	26	27	28	29	30

- Sept. 1** Last day for **fiscal committees** to meet and report bills (J.R. 61(a)(11)).
- Sept. 4** Labor Day.
- Sept. 5-14** **Floor session only.** No committees may meet for any purpose, except Rules Committee, bills referred pursuant to Assembly Rule 77.2, and Conference Committees (J.R. 61(a)(12)).
- Sept. 8** Last day to **amend** on the Floor (J.R. 61(a)(13)).
- Sept. 14** Last day for each house to pass bills. (J.R. 61(a)(14)).
- Interim Recess** begins upon adjournment (J.R. 51(a)(4)).

IMPORTANT DATES OCCURRING DURING INTERIM RECESS

2023

Oct. 14 Last day for Governor to sign or veto bills passed by the Legislature on or before Sept. 14 and in the Governor's possession on or after Sept. 14 (Art. IV, Sec. 10(b)(1)).

2024

Jan. 1 Statutes take effect (Art. IV, Sec. 8(c)).

Jan. 3 Legislature reconvenes (J.R. 51(a)(4)).

*Holiday schedule subject to final approval by Rules Committee.

2023 TENTATIVE LEGISLATIVE CALENDAR

COMPILED BY THE OFFICE OF THE SECRETARY OF THE SENATE AND THE OFFICE OF THE ASSEMBLY CHIEF CLERK
Revised 11/4/2022

DEADLINES

JANUARY						
S	M	T	W	TH	F	S
<u>1</u>	2	3	<u>4</u>	5	6	7
8	9	<u>10</u>	11	12	13	14
15	<u>16</u>	17	18	19	<u>20</u>	21
22	23	24	25	26	27	28
29	30	31				

- [Jan. 1](#) Statutes take effect (Art. IV, Sec. 8(c)).
- [Jan. 4](#) Legislature **reconvenes** (J.R. 51(a)(1)).
- [Jan. 10](#) Budget must be submitted by Governor (Art. IV, Sec. 12(a)).
- [Jan. 16](#) Martin Luther King, Jr. Day
- [Jan. 20](#) Last day to submit **bill requests** to the Office of Legislative Counsel

FEBRUARY						
S	M	T	W	TH	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	<u>17</u>	18
19	<u>20</u>	21	22	23	24	25
26	27	28				

- [Feb. 17](#) Last day for bills to **be introduced** (J.R. 61(a),(1)(J.R. 54(a)).
- [Feb. 20](#) Presidents' Day.

MARCH						
S	M	T	W	TH	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	<u>30</u>	<u>31</u>	

- [Mar. 30](#) **Spring recess** begins upon adjournment of this day's session (J.R. 51(a)(2)).
- [Mar. 31](#) Cesar Chavez Day.

APRIL						
S	M	T	W	TH	F	S
						1
2	3	4	5	6	7	8
9	<u>10</u>	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	<u>28</u>	29
30						

- [Apr. 10](#) Legislature reconvenes from **Spring recess** (J.R. 51(a)(2)).
- [Apr. 28](#) Last day for **policy committees** to hear and report to **fiscal committees** **fiscal bills** introduced in their house (J.R. 61(a)(2)).

MAY						
S	M	T	W	TH	F	S
	1	2	3	4	<u>5</u>	6
7	8	9	10	11	<u>12</u>	13
14	15	16	17	18	<u>19</u>	20
21	22	23	24	25	26	27
28	<u>29</u>	<u>30</u>	<u>31</u>			

- [May 5](#) Last day for **policy committees** to hear and report to the floor **non-fiscal bills** introduced in their house (J.R. 61(a)(3))
- [May 12](#) Last day for **policy committees** to meet prior to June 5 (J.R. 61(a)(4)).
- [May 19](#) Last day for **fiscal committees** to hear and report to the Floor bills introduced in their house (J.R. 61(a)(5)).

Last day for **fiscal committees** to meet prior to June 5 (J.R. 61(a)(6)).
- [May 29](#) Memorial Day.
- [May 30-June 2](#) **Floor Session Only.** No committees, other than conference or Rules committees, may meet for any purpose (J.R. 61(a)(7)).

*Holiday schedule subject to Senate Rules committee approval

2023 TENTATIVE LEGISLATIVE CALENDAR

COMPILED BY THE OFFICE OF THE SECRETARY OF THE SENATE AND THE OFFICE OF THE ASSEMBLY CHIEF CLERK
Revised 11/4/2022

JUNE						
S	M	T	W	TH	F	S
				<u>1</u>	<u>2</u>	3
4	<u>5</u>	6	7	8	9	10
11	12	13	14	<u>15</u>	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

June 2 Last day for each house to pass bills introduced in that house (J.R. 61(a)(8)).

June 5 Committee meetings may resume (J.R. 61(a)(9)).

June 15 Budget must be passed by **midnight** (Art. IV, Sec. 12(c)(3)).

JULY						
S	M	T	W	TH	F	S
						1
2	3	<u>4</u>	5	6	7	8
9	10	11	12	13	<u>14</u>	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

July 4 Independence Day.

July 14 Last day for **policy committees** to meet and report bills (J.R. 61(a)(10)).

Summer Recess begins upon adjournment of session provided Budget Bill has been passed (J.R. 51(a)(3)).

AUGUST						
S	M	T	W	TH	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	<u>14</u>	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

Aug. 14 Legislature reconvenes from **Summer Recess** (J.R. 51(a)(3)).

SEPTEMBER						
S	M	T	W	TH	F	S
					<u>1</u>	2
3	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	9
10	<u>11</u>	<u>12</u>	<u>13</u>	<u>14</u>	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

Sept. 1 Last day for **fiscal committees** to meet and report bills to Floor (J.R. 61(a)(11)).

Sept. 4 Labor Day.

Sept. 5-14 **Floor session only.** No committees, other than conference or Rules committees, may meet for any purpose (J.R. 61(a)(12)).

Sept. 8 Last day to **amend** on the floor (J.R. 61(a)(13)).

Sept. 14 Last day for **each house to pass bills** (J.R. 61(a)(14)). **Interim Study Recess** begins at the end of this day's session (J.R. 51(a)(4)).

*Holiday schedule subject to Senate Rules committee approval

IMPORTANT DATES OCCURRING DURING INTERIM STUDY RECESS

2023

Oct. 14 Last day for Governor to sign or veto bills passed by the Legislature on or before Sept. 14 and in his possession after Sept. 14 (Art. IV, Sec.10(b)(1)).

2024

Jan. 1 Statutes take effect (Art. IV, Sec. 8(c)).

Jan. 3 Legislature reconvenes (J.R. 51(a)(4)).



MEMORANDUM

DATE	July 21, 2023
TO	Members of the Dental Board of California
FROM	David Bruggeman, Legislative and Regulatory Specialist Dental Board of California
SUBJECT	Agenda Item 27.b.: Legislation of Interest

Background

The Dental Board of California (Board) has been tracking bills that impact the Board, the Department of Consumer Affairs (DCA), healing arts boards and their respective licensees, and all licensing boards. This memorandum includes information regarding each bill's status, location, date of introduction, date of last amendment, and a summary. The bills are listed in numerical order, with the Assembly Bills (AB XXX) first, followed by the Senate Bills (SB XXX). Staff will be presenting updates on the following bills that may have a direct impact on the Board for discussion and possible action at the August meeting:

[ACR 10](#) (Weber, Chapter 16, Statutes of 2023) Children's Dental Health Month.

[AB 481](#) (Wendy Carrillo, 2023) Dentistry: dental assistants.

[AB 795](#) (Flora, 2023) Unlawful sale of equipment, supplies, or services.

[AB 883](#) (Mathis, 2023) Business licenses: United States Department of Defense SkillBridge program.

[AB 936](#) (Wood, 2023) Dentistry: exceptions.

[AB 996](#) (Low, 2023) Department of Consumer Affairs: continuing education: conflict-of-interest policy.

[AB 1028](#) (McKinnor, 2023) Reporting of crimes: mandated reporters.

[AB 1257](#) (Committee on Business and Professions, 2023) Dentistry: Dental Hygiene Board of California.

[AB 1395](#) (Garcia, 2023) Licensed Physicians and Dentists from Mexico Pilot Program: requirements.

[AB 1396](#) (Garcia, 2023) Licensed Physicians and Dentists from Mexico Pilot Program: requirements.

[AB 1398](#) (Ramos, 2023) California Dental Corps Loan Repayment Program.

[AB 1552](#) (Reyes, 2023) Healing arts: foreign dental schools. (Bill was amended on 3/23 to address this topic.)

[SB 372](#) (Menjivar, 2023) Department of Consumer Affairs: licensee and registrant records: name and gender changes.

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[SB 544](#) (Laird, 2023) Bagley-Keene Open Meeting Act: teleconferencing.
[SB 802](#) (Roth, 2023) Licensing boards: disqualification from licensure: criminal conviction.
[SB 818](#) (Roth, 2023): Department of Consumer Affairs: terms of office: fingerprinting.

At the May 2023 Board meeting, the Board took official positions on the following bills:

AB 481 – Support if Amended
AB 936 – Support
AB 1552 – Oppose
SB 372 – Watch
SB 544 – Support

Official position letters were submitted to the Legislature on AB 481, AB 936, AB 1552, and SB 544.

Based on amendments made to AB 481 on July 3rd the Board's Executive Committee (President and Vice-President) changed the Board's position on this bill from Support if Amended to Support.

The following bills have been identified by staff as being of potential interest to Board but do not require discussion at this time. Staff will continue to watch these bills and report on their progression at a future Board meeting. Information regarding each of these bill's status, location, date of introduction, date of last amendment, and a summary has been included in this memorandum. Please note staff will not be presenting these bills; should a Board member desire to discuss one of these bills they may present the bill at the meeting and provide arguments for the Board to take a position.

[AB 477](#) (Waldron, 2023) Legislative review of state boards.
[AB 567](#) (Ting, 2023) Criminal Records: relief.
[AB 669](#) (Dixon, 2023) Administrative regulations.
[AB 677](#) (Addis, 2023) Confidentiality of Medical Information Act.
[AB 749](#) (Irwin, 2023) State agencies: information security: uniform standards.
[AB 952](#) (Wood, 2023) Dental coverage disclosures.
[AB 1048](#) (Wicks, 2023) Dental benefits and rate review.
[AB 1751](#) (Gipson, 2023) Opioid prescriptions: information: nonpharmacological treatments for pain.
[SB 73](#) (Seyarto, 2023) Employment policy: voluntary veterans' preference.
[SB 259](#) (Seyarto, 2023) Reports submitted to legislative committees.
[SB 279](#) (Niello, 2023) Administrative regulations: public participation.
[SB 887](#) (Business, Professions and Economic Development Committee, 2023) Consumer affairs.

If you would like additional information on any of these bills, the following web sites are resources for viewing proposed legislation and finding additional information:

<https://leginfo.legislature.ca.gov>

<https://assembly.ca.gov>

<https://senate.ca.gov>

Action Requested

If desired, the Board may take one of the following actions regarding each bill:

Support

Support if Amended

Oppose

Oppose unless Amended

Watch

Neutral

No Action

AB Legislation Tracked by DBC Staff – 2023-2024 Legislative Session

[ACR 10](#) (Weber, 2023) Children’s Dental Health Month.

Introduced: February 1, 2023
Last Amended: N/A
Disposition: Chaptered (16, Statutes of 2023)
Location: Secretary of State
Status: March 27, 2023: Chaptered by the Secretary of State.

Summary: The Resolution declares the month of February to be Children’s Dental Health Month in the State of California.

Board Impact: None but would be of interest to licensees.

Recommended Board Position: N/A

[AB 477](#) (Waldron, 2023) Legislative review of state boards.

Introduced: February 7, 2023
Last Amended: N/A
Disposition: In Committee
Location: Assembly
Status: February 17, 2023: Referred to Assembly Business and Professions Committee.

Summary: The bill would amend Government Code section 9148.52 to require the Joint Sunset Review Committee of the Legislature to post online its reports on state boards that it reviews.

Board Impact: The last two sunset review reports issued by the Board are available on the Board website. The Joint Sunset Review Committee responsible for review of DCA boards and bureaus current puts the background papers it prepares online. This bill would make the committee’s report also available online.

Recommended Board Position: Watch

[AB 481](#) (Wendy Carrillo, 2023) Dentistry: dental assistants.

Introduced: February 7, 2023
Last Amended: July 12, 2023
Disposition: In Committee
Location: Senate
Status: July 10, 2023: Passed Senate Committee on Business, Professions and Economic Development and referred to Senate Committee on Appropriations.

Summary: As introduced, the bill would have made a non-substantive change to Business and Professions Code section 1740, which expresses the intent of the

Legislature concerning dental assistants. The change would replace a reference to 'pursuant to' with 'by'.

At the February 2023 Board meeting, representatives from the California Dental Association indicated that they had a legislative proposal and that it would be included in AB 481.

The bill was significantly amended on March 23, 2023 to include language from a legislative proposal offered by the California Dental Association. Additional amendments were made on April 10 and again on April 20. As currently written, the bill is a significant overhaul of the Dental Practice Act article on Dental Assisting. The changes include:

- Adding definitions for several terms into statute
- Changes the number of pathways to licensure from three (graduation from a Registered Dental Assistant (RDA) educational program, work experience, and a combination of work experience and education) to five. The bill would add an hourly requirement to the current 15-month work experience pathway. Unlicensed dental assistants would have to have at least 1,280 hours of 'satisfactory work experience' as certified by the employer dentist. All pathways, except graduation from an RDA education program, would also require, in addition to pathway-specific requirements, passing courses in radiation safety, coronal polishing, and the new mandatory course requirements described below. The existing combination education and work experience pathway would be removed. The three new pathways are:
 - A 'preceptorship' combining work experience (at least 500 hours) and coursework (at least 300 hours, including mandatory courses) and supervised by an employer-dentist designated as 'preceptor' who would evaluate competency, teach critical reasoning, ensure the coursework is from a Board-approved provider and document progress.
 - Graduation from an alternative dental assisting program (at least 500 hours of coursework) as defined by the bill, plus 300 hours work experience verified by the employer-dentist
 - Holding a current Certified Dental Assistant certificate from the Dental Assisting National Board and completing a course in pit and fissure sealants
- Revises the obligations of the employer-dentist of an unlicensed dental assistant to also require the employer-dentist to inform the unlicensed dental assistants about pathways to licensure and mandatory education requirements.
- Amends the mandatory course requirements for unlicensed dental assistants to require the following courses (in addition to basic life support certification) from Board-approved providers (the courses would not require Board approval) within one year of initial employment:
 - Eight-hour course in infection control (completed prior to any procedures where there could be exposure to infectious material)
 - Two-hour course in Dental Practice Act

- Two-hour course in Division of Occupational Safety and Health bloodborne pathogen training.
- Orthodontic Assistant (OA) permit holders whose permits were issued on or after January 1, 2026 would be allowed to perform additional duties, and OA permit holders who are RDA or Registered Dental Assistant in Extended Functions (RDAEF) licensees could perform certain placements as well.
- Revises the requirements for dental sedation assistant permit applicants depending on whether they are unlicensed or an RDA or RDAEF. Unlicensed applicants will need to take a longer course than RDA or RDAEF applicants and would have to comply with the mandatory education requirements for unlicensed dental assistants before sitting for the exam.
- Revises the list of permitted duties for unlicensed dental assistants.
- Revises the list of permitted duties for RDA.
- Revises the list of permitted duties for RDA in Extended Functions.
- Establishes criteria for courses in interim therapeutic restorations and radiographic decision making as well as infection control.
- Requires licenses, permit holders and radiation safety certificate holders to display those credentials in the treatment facility where the dental assistant, RDA or RDAEF is performing the associated duties.

The Board voted at its May 2023 meeting to take a Support if Amended position, outlining several concerns it had with the bill. Many of those concerns were addressed in amendments to the bill on July 3. Considering these changes, the Board President and Vice-President, as the Board's Executive Committee, revised the Board's position to Support.

The July 3 amendments revised several definitions to address feedback from the Board and other stakeholders. Portions of the bill were reorganized and the implementation dates for the new permitted duties for orthodontic assistant and dental sedation assistant permit holders were moved from January 1, 2026 to June 30, 2024. The July 12 amendments made further clarifying changes to the bill.

Board Impact: The bill as currently written makes significant changes to several aspects of the dental assisting provisions of the Dental Practice Act. Board staff would need to revise current forms and processes and develop new forms and processes for the new licensure pathways detailed in the bill.

The bill would require the development of new forms and processes to address the new pathways. This would include changes to the BreZze system. New regulations would need to be developed, and existing regulations would need to be reviewed and amended to reflect the bill

The Board anticipates needing additional staff positions to address the new pathways established by the legislation. With much of the bill's provisions (as of this writing) going

into effect in the first six months of 2024, staff believes it likely that there will be some implementation challenges having the necessary new processes in place and functional in 2024.

Recommended Board Position: Support

[AB 567](#) (Ting, 2023) Criminal Records: relief.

Introduced: February 8, 2023

Last Amended: June 27, 2023

Disposition: In Committee

Location: Senate

Status: July 3, 2023: Senate Appropriations Committee placed the bill on the suspense calendar.

Summary: The bill would amend Penal Code section 1203.425 which requires the Department of Justice to review the state criminal records database monthly to identify individuals with convictions who would qualify for conviction records relief. The bill would eliminate the requirement that these searches would be done subject to an appropriation by the Legislature.

The March 16 amendments added language that would make any new criminal records related to the subject of the record that was granted relief have no bearing on the relief already granted. The amendments also require the Department to provide written confirmation, upon request from the subject of the record, that record relief was granted.

The March 29 amendments removed the language added on March 16 that would make any new criminal records related to the subject of the record that was granted have no bearing on the relief already granted.

The June 27 amendments state that the provisions for relief do not (rather than shall not) limit petitions for relief under any other provision of law or petitions for a pardon or certificate of rehabilitation.

Board Impact: Conviction records placed under relief by existing law are not accessible, even for Board enforcement staff. This bill would make the monthly search process easier for the Department of Justice to conduct as it is not dependent on a specific appropriation. It is possible that would mean more records would be placed in relief after passage of the bill than is currently the case.

Recommended Board Position: Watch

[AB 669](#) (Dixon, 2023) Administrative regulations.

Introduced: February 13, 2023

Last Amended: N/A

Disposition: Pending

Location: Assembly

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Status: February 13, 2023: Introduced.

Summary: The bill would make non-substantive revisions to Section 11340 of the Government Code, concerning the intent of the Legislature with respect to administrative regulations.

Board Impact: None, as currently written.

Recommended Board Position: Watch

[AB 677](#) (Addis, 2023) Confidentiality of Medical Information Act.

Introduced: February 13, 2023

Last Amended: N/A

Disposition: Pending

Location: Assembly

Status: February 13, 2023: Introduced.

Summary: The bill would make non-substantive revisions to the title provision of the Confidentiality of Medical Information Act, section 56 of the Civil Code.

Board Impact: None, as currently written.

Recommended Board Position: Watch

[AB 749](#) (Irwin, 2023) State agencies: information security: uniform standards.

Introduced: February 13, 2023

Last Amended: April 25, 2023

Disposition: In Committee

Location: Senate

Status: July 11, 2023: Passed by Senate Committee on Governmental Organization and referred to Senate Appropriations Committee.

Summary: The bill would amend the Government Code to require all state agencies to implement specified computer security practices by January 1, 2026 (initially 2025). The bill would also require the Chief of the Office of Information Security Officer to implement uniform policies, standards and procedures on Zero Trust Architecture and two-factor authentication by January 1, 2025 (initially 2024).

Amendments on March 14 made minor changes to some of the language specifying Zero-Trust Architecture and other non-substantive changes.

Amendments on April 13 pushed specified deadlines back one year.

Amendments on April 25 added language expressing the intent of the Legislature for the bill's implementation to preserve the state's ability to meet requirements for the receipt of federal funds.

Amendments on July 3 revised the deadlines for implementing specified computer practices. The bill would now require agencies to meet certain levels of maturity according to the Cybersecurity and Infrastructure Security Agency between the date of passage and June 1, 2030. The amendments also specify certain practices that will be part of the implementation of Zero Trust Architecture.

Board Impact: The required updates to computer practices and procedures would be across all state agencies.

Recommended Board Position: Watch

[AB 795](#) (Flora, 2023) Unlawful sale of equipment, supplies, or services.

Introduced: February 13, 2023
Last Amended: N/A
Disposition: Pending
Location: Assembly
Status: February 13, 2023: Introduced.

Summary: The bill would amend the Business and Professions Code section 128, which makes it a misdemeanor to sell equipment, supplies, or services to an individual with knowledge that the goods or services sold will be used in violation of the licensing requirements of the Code. The bill would raise the minimum value to qualify as a violation to \$200, and the minimum fine for violations of the law to \$2,000. The bill also makes non-substantive changes to the section.

Board Impact: To the extent violations of this section involve licensees regulated by the Board, some cases might no longer qualify as a violation.

Recommended Board Position: Watch

[AB 820](#) (Reyes, 2023) State boards and commissions: seniors.

Introduced: February 13, 2023
Last Amended: N/A
Disposition: In Committee
Location: Assembly
Status: April 11, 2023: Hearing with Assembly Committee on Aging and Long Term Care.

Summary: This is a spot bill that expresses the intent of the Legislature to enact legislation to encourage more representation on state boards and commissions from older adults.

Amendments on March 20 revised the bill to focus on specific boards and commissions that do not include the Board.

Board Impact: None, as currently written.

Recommended Board Position: Watch

[AB 883](#) (Mathis, 2023) Business licenses: United States Department of Defense SkillBridge program.

Introduced: February 14, 2023

Last Amended: May 18, 2023

Disposition: In Committee

Location: Senate

Status: August 14, 2023: Hearing with Senate Appropriations Committee.

Summary: The bill would amend Business and Professions Code section 115.4 to require DCA Boards to expedite processing for applicants who are enrolled in the Department of Defense SkillBridge program. This section currently requires expedited processing for honorably discharged former active-duty service members.

The March 23 amendments added clarifying language that applicants would be active-duty members of the armed services.

The May 18 amendments set the effective date of the changes made by this law to July 1, 2024.

Board Impact: The Board currently receives an average of six applicants for expedited processing per year under this section. Board staff anticipates some increase in applicants for expedited processing should the bill pass and would need to update its applications to address the changes from this bill.

Recommended Board Position: Watch

[AB 913](#) (Petrie-Norris, 2023) Professions and vocations.

Introduced: February 13, 2023

Last Amended: March 16, 2023

Disposition: Pending

Location: Assembly

Status: February 14, 2023: Introduced.

Summary: The bill would make a non-substantive change to section 9 of the Business and Professions Code, concerning the intent of the names of sections in statute.

The March 16 amendments changed the bill to focus on pharmacy benefit managers and is no longer of interest.

Board Impact: None as currently written.

Recommended Board Position: Watch

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[AB 936](#) (Wood, 2023) Dentistry: exceptions.

Introduced: February 14, 2023

Last Amended: May 11, 2023

Disposition: Floor

Location: Senate

Status: June 26, 2023: Senate Committee on Appropriations passed the bill to second reading pursuant to Senate Rule 28.8.

Summary: The bill would amend Business and Professions Code section 1626.6 to exempt all dental students from violations of section 1626 (practice of dentistry without a license) for services provided under supervision at a sponsored event. As currently written this exemption only applies to final year students (which includes students of advanced education programs). The bill defines dental students as those students who have started clinical training at a dental school approved by the Board.

Amendments to the bill on April 13 added a requirement that for any clinical procedures, the designated supervising faculty will be responsible for assessing the patient treated by a student and determining if the assigned student has the skill level necessary to provide the patient care.

The bill was amended again on May 11 to be an urgency statute, which would require a 2/3 majority in each house to pass and would take effect immediately on signing, rather than on January 1st of the year following signing.

Board Impact: As the bill would expand the number of dental students who could provide dental services at sponsored events, there may be an increase in complaints related to actions by dental students at sponsored events.

Recommended Board Position: Support

[AB 952](#) (Wood, 2023) Dental coverage disclosures.

Introduced: February 14, 2023

Last Amended: June 6, 2023

Disposition: Engrossing and Enrolling

Location: Legislature

Status: July 13, 2023: Bill passed Legislature.

Summary: The bill would add new sections to the Health and Safety Code and to the Insurance Code. The section would require that in communications from a health care provider to a health care service provider (HSC language) or an insurer (IC language) it must be disclosed whether the enrollee's (HSC language) or insured's (IC language) dental coverage is subject to regulation. Any coverage cards or similar documents showing evidence of coverage must contain this disclosure.

Amendments on June 6 modified the disclosure requirements to be through either a provider portal or by request.

Board Impact: No impact to the Board, but the passage of the law would affect licensees.

Recommended Board Position: Watch

[AB 996](#) (Low, 2023) Department of Consumer Affairs: continuing education: conflict-of-interest policy.

Introduced: February 15, 2023

Last Amended: March 27, 2023

Disposition: Floor

Location: Senate

Status: July 3, 2023: Senate Appropriations ordered the bill to the Senate floor per rule 28.8.

Summary: The bill would require entities that are approving continuing education providers to have a conflict-of-interest policy. The policy would have to discourage approval of providers that have a direct or indirect interest in a product promoted in their courses.

The March 27 amendments added language requiring that conflicts of interest must be disclosed at the beginning of each course.

Board Impact: Implementing a conflict-of-interest policy would likely add workload to Board staff responsible for approving continuing education providers.

Recommended Board Position: Watch

[AB 1028](#) (McKinnor, 2023) Reporting of crimes: mandated reporters.

Introduced: February 15, 2023

Last Amended: June 28, 2023

Disposition: In Committee

Location: Senate

Status: July 11, 2023: Passed Senate Public Safety Committee and referred to Senate Appropriations Committee.

Summary: The bill would change the reporting requirements for health care practitioners (including dentists) when they know or reasonably suspect based on their expert knowledge that a patient has suffered a wound or injury that has been self-inflicted, was due to a firearm, or was a result of 'assaultive or abusive conduct'. Current law (Penal Code section 11160) requires that a report be made to a local law enforcement agency for each of those categories of injury. The bill would remove the reporting requirements for injuries due to 'assaultive or abusive conduct' If a health care

practitioner who knows or has reason to believe that a patient has suffered from or is suffering from any domestic or sexual violence, the practitioner must provide, as medically possible, counseling and/or education and a referral to relevant support agencies.

Amendments on June 27 and 28 retain the law enforcement reporting requirements for injuries resulting from child abuse or from abuse of an elder or dependent adult. They also add language indicating that someone whose injuries result from domestic, sexual, or other nonaccidental violent injury requests a report be sent to law enforcement that it be done consistent with the procedures in place for injuries requiring mandatory reporting to law enforcement.

Board Impact: No impact to the Board, but the passage of the law would affect licensees.

Recommended Board Position: Watch

[AB 1048](#) (Wicks, 2023) Dental benefits and rate review.

Introduced: February 15, 2023

Last Amended: July 3, 2023

Disposition: In Committee

Location: Senate

Status: July 10, 2023: Senate Committee on Appropriations and placed the bill on the suspense file.

Summary: The bill would include insurance policies and managed care plans (including specialized policies and plans) that provide dental services in the rate increase review processes administered by the Department of Insurance and the Department of Health Care Access and Information. Starting January 1, 2024, such plans could not have a waiting period for dental services or a pre-existing conditions provision.

The March 27 amendments changed the bill to no longer require disclosure to a patient whether the insurance plan is subject to regulation by the relevant department.

The May 2 amendments added language requiring health service plan and insurance providers that provide dental services file specified information on rates and costs annually with the Department of Health Care Access and Information or the Department of Insurance (as appropriate).

Amendments on June 28 added to the list of information that insurance and managed care companies would need to submit about their plans to the appropriate department.

Board Impact: No impact to the Board, but the passage of the law would affect licensees.

Recommended Board Position: Watch

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[AB 1070](#) (Low, 2023) Department of Consumer Affairs: vacancies.

Introduced: February 15, 2023
Last Amended: N/A
Disposition: Pending
Location: Assembly
Status: March 23, 2023: Introduced.

Summary: The bill would make a non-substantive change to Business and Professions Code section 308, which details the responsibilities of the Director of the Department of Consumer Affairs to notify relevant legislative committees of any vacancies in the executive officer or equivalent position of the Department's boards and bureaus.

The March 23 amendments shifted the focus of the bill to postgraduate training for physicians and surgeons, so the bill is no longer relevant to the Board.

Board Impact: No impact to the Board.

Recommended Board Position: Watch

[AB 1101](#) (Flora, 2023) Department of Consumer Affairs.

Introduced: February 15, 2023
Last Amended: March 16, 2023
Disposition: Pending
Location: Assembly
Status: February 15, 2023: Introduced.

Summary: The bill would make a non-substantive change to Business and Professions Code section 462, which concerns the ability of a Board to establish an inactive category of licensure.

The March 16 amendments shifted the focus of the bill to building inspections.

Board Impact: No impact to the Board as currently written.

Recommended Board Position: Watch

[AB 1257](#) (Committee on Business and Professions, 2023) Dentistry: Dental Hygiene Board of California.

Introduced: February 16, 2023
Last Amended: July 3, 2023
Disposition: In Committee
Location: Senate
Status: August 14, 2023: Hearing before Senate Committee on Appropriations.

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Summary: The bill would amend section 1903 of the Business and Professions Code to allow for any Dental Hygiene Board of California (DHBC) member to be removed by their appointing authority per Code section 106. Current law allows for the Governor to remove any DHBC member through that process.

The bill was amended on April 19 to affect additional sections of the Dental Practice Act related to dental hygienists. The bill would now extend the sunset date of the DHBC to January 1, 2026. It would also amend the requirements for Registered Dental Hygienists licensure to include certification in basic life support and would allow graduation from a California approved dental hygiene college in lieu of passing the WREB or another examination approved by the DHBC (the National Board Dental Hygiene Examination is still required). The bill also raises the cap on mandatory continuing education hours to 10.

The bill was amended on April 24 to extend the DHBC's sunset date to January 1, 2028.

The bill was amended on July 3 to change what who can provide dental hygiene training to staff at long-term health care facilities. Health and Safety Code section 1315 permits a registered dental hygienist in alternative practice, and the bill would also permit registered dental hygienists to provide the training.

Board Impact: No impact to the Board. The proposed change would make the removal authority for the DHBC consistent with the removal authority for the Board stated in Code section 1605.

Recommended Board Position: Watch

[AB 1369](#) (Bauer-Kahan, 2023) Healing arts licensees.

Introduced: February 17, 2023

Last Amended: March 23, 2023

Disposition: Pending

Location: Assembly

Status: February 17, 2023: Introduced.

Summary: The bill would make non-substantive changes to Business and Professions Code section 683 concerning notifications to the Department of Health Care Services about licensees who have had their license revoked, suspended, or otherwise placed in a status where they cannot practice.

The March 23 amendments changed the focus of the bill to the provision of telehealth by physicians and surgeons licensed outside the state of California.

Board Impact: No impact to the Board.

Recommended Board Position: Watch

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[AB 1395](#) (Garcia, 2023) Licensed Physicians and Dentists from Mexico Pilot Program: requirements.

Introduced: February 17, 2023
Last Amended: N/A
Disposition: Floor
Location: Senate
Status: June 26, 2023: Passed Senate Appropriations Committee.

Summary: The bill would amend Section 853 of the Business and Professions Code to require the Medical Board of California to issue a 3-year nonrenewable license to an applicant who has not yet provided a taxpayer identification number or social security number and can only qualify for a license under the Pilot Program, if the applicant meets other conditions. The bill also makes some non-substantive changes to other portions of this section. The author seeks to have this bill considered an urgency statute, which would take effect immediately on passage.

Board Impact: No impact to the Board, as the proposed changes do not affect the dental provisions of the pilot program.

Recommended Board Position: Watch

[AB 1396](#) (Garcia, 2023) Licensed Physicians and Dentists from Mexico Pilot Program: requirements.

Introduced: February 17, 2023
Last Amended: N/A
Disposition: In Committee
Location: Assembly
Status: May 10, 2023: Hearing postponed with Assembly Appropriations Committee.

Summary: This bill is like AB 1395 and comes from the same author. It is not designated as an urgency statute and may have been introduced to cover the possibility that AB 1395 would not be deemed an urgency statute and would not go forward.

Like AB 1395, this bill would amend section 853 of the Business and Professions Code to require the Medical Board of California to issue a 3-year nonrenewable license to an applicant who has not yet provided a taxpayer identification number or social security number and can only qualify for a license under the Pilot Program, if the applicant meets other conditions. The bill also makes some non-substantive changes to other portions of this section.

This bill, unlike AB 1395, would permit the Medical Board of California to extend the term of the 3-year nonrenewable license because of an inability to provide medical services under certain circumstances.

Board Impact: No impact to the Board, as the proposed changes to the law do not affect the dental provisions of the pilot program.

Recommended Board Position: Watch

[AB 1398](#) (Ramos, 2023) California Dental Corps Loan Repayment Program.

Introduced: February 17, 2023

Last Amended: N/A

Disposition: Pending

Location: Assembly

Status: February 17, 2023: Introduced.

Summary: The bill would make a non-substantive change to Business and Professions Code section 1976, which describes the Board's reporting obligations to the Legislature with respect to this program's effectiveness in expanding access to care for underserved populations.

Board Impact: No impact to the Board.

Recommended Board Position: Watch

[AB 1552](#) (Reyes, 2023) Healing arts: foreign dental schools.

Introduced: February 17, 2023

Last Amended: March 23, 2023

Disposition: In Committee

Location: Assembly

Status: March 23, 2023: Re-referred to the Assembly Committee on Business and Professions.

Summary: The bill was amended on March 23 to cover foreign dental schools.

The bill would amend sections 1634.1, and 1636.4 and repeal the section 1636.4 that would be implemented on January 1, 2024. These changes would remove the pathway for national accreditation bodies to approve foreign dental schools and would retain the pathway for the Board to approve foreign dental schools.

Board Impact: The bill as currently written would revert the current approval process for foreign dental schools to the process in place prior to January 1, 2020. The Board would be the sole authority that could approve foreign dental schools and Board members and staff would resume taking applications and reviewing foreign dental schools prior to deciding whether to approve those schools. This would represent a significant commitment of time and resources for the Board.

Recommended Board Position: Oppose

[AB 1646](#) (Stephanie Nguyen, 2023) Healing arts boards.

Introduced: February 17, 2023

Last Amended: March 23, 2023

Disposition: Pending

Location: Assembly

Status: March 23, 2023: Amended and re-referred to Assembly Committee on Business and Professions.

Summary: The bill would make a non-substantive change to Business and Professions Code section 10, which permits healing arts board to enact regulations to require the display of licenses and related information by licensees in the place of practice.

The March 23 amendments shifted the focus of the bill to postgraduate training for physicians and surgeons and is no longer relevant to the Board.

Board Impact: No impact to the Board.

Recommended Board Position: Watch

[AB 1751](#) (Gipson, 2023) Opioid prescriptions: information: nonpharmacological treatments for pain.

Introduced: February 17, 2023

Last Amended: N/A

Disposition: Pending

Location: Assembly

Status: April 18, 2023: Pulled from hearing with Assembly Committee on Health.

Summary: The bill would amend Health and Safety Code section 11158.1, which currently requires a discussion between prescribers of controlled substances that contain an opioid and their minor patients.

The bill would require this conversation take place between prescribers of these substances and all patients. The discussion would also include nonpharmacological alternative to pain and require signed written consent from the patient or their guardian or other representative.

Board Impact: No impact to the Board, but of interest to licensees, especially if they are prescribers.

Recommended Board Position: Watch

[SB 73](#) (Seyarto, 2023) Employment policy: voluntary veterans' preference.

Introduced: January 11, 2023

Last Amended: May 18, 2023

Disposition: In Committee

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Location: Assembly
Status: June 20, 2023: Passed by Assembly Committees on Military and Veterans' Affairs and referred to Assembly Committee on the Judiciary.

Summary: The bill amends the Government Code to authorize a private employer to establish a written veterans' preference employment policy. It requires employers with such a policy to apply it uniformly and to report annually to the state Civil Rights Department on the number of veterans hired under the policy. Having such a policy does not permit discrimination in hiring based on any other protected classification under the law.

The March 22 amendments clarified that the policy established by the private employer must not permit either purposeful or unintentional unlawful hiring discrimination.

The May 18 amendments added a requirement that the Civil Rights Division report the information it collects from participating employers to relevant committees of the Legislature. The amendments also add a sunset date of January 1, 2029 to the bill.

Board Impact: No direct impact on the Board, but the bill may be of interest to licensees with employees and licensees with veterans' status.

Recommended Board Position: Watch

[SB 247](#) (Wilk, 2023) Department of Consumer Affairs.

Introduced: January 26, 2023
Last Amended: February 28, 2023
Disposition: In Committee
Location: Senate
Status: February 28, 2023: Amended and re-referred to Senate Rules Committee.

Summary: As introduced, the bill would make a non-substantive change to Business and Professions Code section 108, concerning the status of boards within the Department of Consumer Affairs.

The February 28 amendments switched the subject of the bill to alcoholic beverages.

Board Impact: None as currently written

Recommended Board Position: Watch

[SB 259](#) (Seyarto, 2023) Reports submitted to legislative committees.

Introduced: January 30, 2023
Last Amended: June 13, 2023
Disposition: Floor

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Location: Senate
Status: July 3, 2023: Concurrence in amendments pending

Summary: The bill amends the Government Code to require a state agency to post on its website any report it submits to a committee of the Legislature.

The bill was amended on June 13 to also cover reports identified in the Legislative Analyst's Supplemental Report of the Budget Act, and to clarify that reports covered by the bill are those submitted to legislative committees and/or to members of either house of the Legislature, as a whole.

Board Impact: Boards are already required to post on their website reports that are required or requested by law to be submitted to Members of the Legislature. This law would add a minimal burden to Board staff and resources.

Recommended Board Position: Watch

[SB 279](#) (Niello, 2023) Administrative regulations: public participation: comment process.

Introduced: February 1, 2023
Last Amended: March 21, 2023
Disposition: In Committee
Location: Senate
Status: May 18, 2023: Held by Senate Appropriations Committee.

Summary: The bill amends the Government Code to make a non-substantive change to the Administrative Practice Act.

The March 21 amendments revised the bill to amend the process for approving major regulations, defined by Government Code section 11342.548 as having an estimated economic impact on businesses and individuals in excess of \$50 million.

Board Impact: Board regulations do not typically qualify as major regulations, so no impact to the Board is expected.

Recommended Board Position: Watch

[SB 358](#) (Nguyen, 2023) Professional licenses: military service.

Introduced: February 8, 2023
Last Amended: March 22, 2023
Disposition: In Committee
Location: Senate
Status: March 22, 2023: Amended and re-referred to Senate Rules Committee.

Summary: The bill would make a non-substantive change to Business and Professions Code section 114.3, which addresses waivers of the renewal fee, continuing education requirements and other renewal requirements for licensees called to active duty.

The March 22 amendments shifted the focus of the bill to renewal fees for podiatrists.

Board Impact: None.

Recommended Board Position: Watch

[SB 372](#) (Menjivar, 2023) Department of Consumer Affairs: licensee and registrant records: name and gender changes.

Introduced: February 9, 2023

Last Amended: June 28, 2023

Disposition: In Committees

Location: Assembly

Status: June 27, 2023: Passed Assembly Committee on the Judiciary and referred to the Assembly Appropriations Committee.

Summary: The bill would add Business and Professions Code section 27.5, which would require Department of Consumer Affairs boards to update their licensee and/or registrant records to reflect name and/or gender changes by licensees and/or registrants.

Barring any other provision of law, if licensees or registrants provide appropriate government-issued identification as detailed in the bill, then boards would need to update their records, including any records maintained in an online records system. If licensees and/or registrants request it, boards must reissue requested documents bearing the licensee or registrants updated legal name or gender information. Board may charge a fee for reissuing these documents, but that fee cannot be higher than what it charges for reissuing documents with other updated information.

The amendments on March 20 added language requiring Boards to establish processes for disclosing a licensee's former name and gender in connection with a complaint against a licensee. The amendments also added language requiring Boards to remove a licensee's former name and gender from an online license verification system.

The amendments on April 20 revised the language on the process for disclosing a licensee's former name and gender in connection with a complaint against a licensee. The amendments would change the process to providing a licensee or registrant's current name or enforcement action record linked to a former name on receipt of a request related to an enforcement action against the licensee/registrant or a search of a licensee by a previous name. The process shall be implemented in compliance with the California Public Records Act and the request must be completed in 10 business days.

The amendments on June 12 revised the process for linking a licensee to enforcement actions handled under their former name and/or gender. Those records would not be posted online but be substituted with a notice to contact the relevant board for additional information about those enforcement actions. Requests for that additional information will be handled in a way consistent with the California Public Records Act. The amendments also separate the acceptable documents for documenting a gender change from those acceptable for a name change that would qualify under this bill.

The amendments on June 28 add clarifying language to the process for addressing enforcement actions handled under a licensee's former name and/or gender. The amendments also make any documents connected to a request for updating records pursuant to this bill confidential and not subject to public inspection or disclosure.

Board Impact: The bill would slightly increase the number of requests for reissuing Board-issued documents. Board staff would need to establish procedures for removing a licensee's former name and gender from the online verification system and to disclose a licensee's current name in connection with a request linked to an enforcement action or search of a licensee by a previous name. This is a Department-wide bill, so there may be some assistance from the Department of Consumer Affairs in developing and implementing these processes.

Recommended Board Position: Watch

[SB 544](#) (Ramos, 2023) Bagley-Keene Open Meeting Act: teleconferencing.

Introduced: February 15, 2023

Last Amended April 27, 2023

Disposition: In Committee

Location: Assembly

Status: July 12, 2023: Passed by Committee on Government Organization and referred to Committee on Appropriations.

Summary: The bill was amended on March 20 to focus on the Bagley-Keene Open Meeting Act.

The bill would amend the provisions of the Bagley-Keene Open Meeting Act with respect to meetings held by teleconference. The changes would mostly reflect the teleconferencing procedures permitted during the COVID-19 pandemic. The bill would remove the requirement that all teleconference locations must be noticed in the agenda and available to the public. Meetings held by teleconference would have to provide to the public a means to access the meeting by audio, by video, and at least one in-person location. At least one member or staff must be physically present at the location specified in the meeting notice. There must be a process in place for addressing requests for reasonable accommodations pursuant to the federal Americans with Disabilities Act, and that process must be advertised any time a meeting is noticed.

Amendments on April 27 added language noting that the bill does not affect the laws around posting meeting notices and agendas, though they shall not disclose information regarding any remote location where a member is participating. However, if any member is participating from a remote location – a location other than any physical location noticed in the meeting – they must disclose whether anyone 18 years or older are present in the room at the remote location with the member, and the general nature of their relationship. If the meeting is adjourned or ended due to the failure of a means of remote participation, that must be noticed on the agency’s website and emailed to anyone who requested notice of meetings by email. If the meeting is to be resumed that day, notice shall be provided by an automated phone message from a phone line posted on the agency’s website or meeting agenda.

Board Impact: Passage would permit the Board to conduct its meetings using teleconference and online meeting tools like how it did during the COVID-19 pandemic. It would provide continued cost savings and flexibility to the Board.

Recommended Board Position: Support

[SB 764](#) (Padilla, 2023) Department of Consumer Affairs: removal of board members.

Introduced: February 17, 2023
Last Amended: March 22, 2023
Disposition: In Committee
Location: Senate
Status: March 22, 2023: Amended and re-referred to Senate Rules Committee.

Summary: The bill would amend Business and Professions Code section 106.5 to permit the appointing authority to remove a board member who has knowledge of licensing examination questions and who directly or indirectly discloses those questions in advance of or during an examination. Current law restricts that authority to the Governor.

The March 22 amendments shifted the focus of the bill to social media platforms and the bill no longer affects the Board.

Board Impact: No impact based on the March 22 amendments.

Recommended Board Position: Watch

[SB 770](#) (Weiner, 2023) State boards and commissions.

Introduced: February 17, 2023
Last Amended: March 20, 2023
Disposition: Senate Rules
Location: Senate
Status: March 1, 2023: Referred to Senate Rules Committee.

Summary: The bill would make a non-substantive change to Government Code section 11140, concerning the policy of the Legislature that state boards and commissions should broadly reflect the general public and include ethnic minorities and women.

The amendments on March 20 revised the topic of the bill to a unified health care financing system.

Board Impact: No impact as currently written.

Recommended Board Position: Watch

[SB 802](#) (Roth, 2023) Licensing boards: disqualification from licensure: criminal conviction.

Introduced: February 17, 2023

Last Amended: N/A

Disposition: In Committee

Location: Assembly

Status: July 11, 2023: Hearing before Assembly Committee on Business and Professions (Cancelled).

Summary: The bill would amend Business and Professions Code section 480 which in part requires that if a board denies a license application based solely or in part on conviction history, that board must notify the applicant of the decision in writing. The bill would require that this notice must take place within 30 days of the date the decision is made

Board Impact: The addition of the 30-day deadline would require adding the deadline to Board staff procedures. The impact is estimated to be minimal.

Recommended Board Position: Watch

[SB 815](#) (Roth, 2023): Healing arts.

Introduced: February 17, 2023

Last Amended: July 12, 2023

Disposition: In Committee

Location: Assembly

Status: July 11, 2023: Passed Assembly Committee on Business and Professions and referred to Assembly Appropriations Committee.

Summary: The bill serves as the sunset review bill for the Medical Board of California.

Amendments to the bill on April 27 revised certain requirements for postgraduate training for physicians and surgeons who are trained in oral and maxillofacial surgery. Current law permits applicants with 12 months of oral and maxillofacial surgery postgraduate training from a combined medical and dental degree program approved by CODA to sit for licensure. The amendments would remove that language and add

language requiring licensees who have received credit for 24 months of postgraduate training in oral and maxillofacial surgery to provide evidence of this training prior to license renewal.

Amendments on May 8 and May 25 did not affect the language with respect to training in oral and maxillofacial surgery.

Amendments on July 12 effectively added the text of AB 1396 to the bill. AB 1396 is the non-urgency bill that would modify the Licensed Physicians and Dentists from Mexico program to permit the Medical Board of California to issue 3-year nonrenewable physician and surgeon licenses to individuals under certain specified circumstances.

Board Impact: None, the changes address the requirements for licensure and/or renewal for physicians and surgeons and would be addressed by the Medical Board of California. The bill would affect those who hold an Oral and Maxillofacial Surgery permit from the Board, but the Board itself would not be affected by changes to the license requirements.

Recommended Board Position: Watch

[SB 818](#) (Roth, 2023): Department of Consumer Affairs: terms of office: fingerprinting.

Introduced: February 17, 2023

Last Amended: N/A

Disposition: In Committee

Location: Assembly

Status: July 11, 2023: Hearing before Assembly Committee on Business and Professions (Cancelled).

Summary: The bill would amend Business and Professions Code sections 130 and 144 to reflect name changes in two boards in the Department of Consumer Affairs.

Board Impact: None, the changes are non-substantive and do not include the Board.

Recommended Board Position: Watch

[SB 820](#) (Alvarado-Gill, 2023): Consumer complaints.

Introduced: February 17, 2023

Last Amended: N/A

Disposition: In Committee

Location: Senate

Status: March 1, 2023: Referred to Senate Rules Committee.

Summary: The bill would make non-substantive changes to Business and Professions Code section 326 concerning the responsibilities of the Director of the Department of Consumer Affairs related to consumer complaints.

The March 21 amendments revised the bill to focus on cannabis.

Board Impact: None.

Recommended Board Position: Watch

[SB 887](#) (Business, Professions and Economic Development Committee, 2023):
Consumer affairs.

Introduced: March 14, 2023

Last Amended: April 20, 2023

Disposition: In Committee

Location: Assembly

Status: July 11, 2023: Passed by Assembly Committee on Business and Professions and referred to Assembly Appropriations Committee, with a recommendation for the consent calendar.

Summary: The bill would make changes to several sections of the Business and Professions Code and the Education Code.

Amendments on April 20 changed the bill to have some impact on Board staff. The bill now amends Business and Professions Code section 115.8 to change the Department of Consumer Affairs reporting requirements on military and spouse licensure. Most of the changes are to the reporting period, which would be on the fiscal year rather than the calendar year.

Board Impact: Board staff would need to adjust their reporting on military and spouse licensure, the impact would be minimal.

Recommended Board Position: Watch



DENTAL BOARD OF CALIFORNIA

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MEMORANDUM

DATE	July 25, 2023
TO	Members of the Dental Board of California
FROM	Mirela Taran, Administrative Analyst Dental Board of California
SUBJECT	Agenda Item 28.: Discussion of Prospective Legislative Proposals

Background

Stakeholders are encouraged to submit proposals in writing to the Board before, during or after the meeting for possible consideration by the Board at a future Board meeting.

Action Requested

No action requested.