Wisconsin Department of Safety and Professional Services Division of Policy Development 4822 Madison Yards Way, 2nd Floor PO Box 8366 Madison WI 53708-8366



Phone: 608-266-2112 Web: http://dsps.wi.gov Email: dsps@wisconsin.gov

Tony Evers, Governor Dan Hereth, Secretary

TELECONFERENCE/VIRTUAL DENTISTRY EXAMINING BOARD

Virtual, 4822 Madison Yards Way, 2nd Floor, Madison Contact: Will Johnson, (608) 266-2112 January 8, 2025

The following agenda describes the issues that the Board plans to consider at the meeting. At the time of the meeting, items may be removed from the agenda. Please consult the meeting minutes for a record of the actions of the Board.

AGENDA

9:00 A.M.

OPEN SESSION - CALL TO ORDER - ROLL CALL

- A. Pledge of Allegiance
- B. Adoption of Agenda (1-4)
- C. Approval of Minutes of November 6, 2024 (5-7)
- D. Reminders: Conflicts of Interest, Scheduling Concerns
- E. Introductions, Announcements and Recognition
 - 1) Introduction and Welcome DSPS Secretary Hereth
- F. Administrative Matters (8-31)
 - 1) Department, Staff and Board Updates
 - 2) **2025 Meeting Dates (8)**
 - 3) Annual Policy Review (9-11)
 - 4) Election of Officers, Appointment of Liaisons and Alternates, Delegations of Authorities (12-31)
 - 5) Board Members Term Expiration Dates
 - a. Alton, Troy 7/1/2025
 - b. Bahr, Lisa -7/1/2026
 - c. Bistan, Matthew -7/1/2025
 - d. Fox, Joan 7/1/2025
 - e. Govani, Shaheda -7/1/2026
 - f. Gundersen, David -7/1/2026
 - g. Jorgenson, Linda 7/1/2028
 - h. Kenyon, Chris 7/1/2026
 - i. Kolste, Debra 7/1/2028
 - j. Schrubbe, Katherine 7/1/2026
 - k. Sheild, Peter -7/1/2026

G. 9:00 A.M. Public Hearing on Final Rule Draft for DE 1 to 17 Relating to Dental Therapists (32-60)

H. Administrative Rule Matters – Discussion and Consideration (61-95)

- 1) Discussion of Clearinghouse Report and Public Hearing Comments for DE 1 to 17 Relating to Dental Therapy (62-88)
- 2) Presentation on New Scope Statement for DE 1, 5, and 6 on Unprofessional Advertising (89-90)
- 3) Discussion of Rule Drafting for DE 5, 8, and 14, Relating to Informed Consent (91-94)
- 4) Discussion of Biennial Rules Report Under s. 227.29 (1) Stats., on Board Rules which may be unauthorized, obsolete, or duplicative
- 5) Pending or Possible Rulemaking Projects (95)
- I. Board Statement Regarding Ownership of Dental Practices Status Update
- J. Unlicensed Practice Discussion
- K. Legislative and Policy Matters Discussion and Consideration

L. Expanding Licensure Opportunities – Discussion and Consideration (96)

- M. Discussion and Consideration of Items Added After Preparation of Agenda:
 - 1) Introductions, Announcements and Recognition
 - 2) Administrative Matters
 - 3) Election of Officers
 - 4) Appointment of Liaisons and Alternates
 - 5) Delegation of Authorities
 - 6) Education and Examination Matters
 - 7) Credentialing Matters
 - 8) Practice Matters
 - 9) Legislative and Policy Matters
 - 10) Public Health Emergencies
 - 11) Administrative Rule Matters
 - 12) Liaison Reports
 - 13) Board Liaison Training and Appointment of Mentors
 - 14) Informational Items
 - 15) Division of Legal Services and Compliance (DLSC) Matters
 - 16) Presentations of Petitions for Summary Suspension
 - 17) Petitions for Designation of Hearing Examiner
 - 18) Presentation of Stipulations, Final Decisions and Orders
 - 19) Presentation of Proposed Final Decisions and Orders
 - 20) Presentation of Interim Orders
 - 21) Petitions for Re-Hearing
 - 22) Petitions for Assessments
 - 23) Petitions to Vacate Orders
 - 24) Requests for Disciplinary Proceeding Presentations
 - 25) Motions
 - 26) Petitions
 - 27) Appearances from Requests Received or Renewed
 - 28) Speaking Engagements, Travel, or Public Relation Requests, and Reports

N. Public Comments

CONVENE TO CLOSED SESSION to deliberate on cases following hearing (s. 19.85(1)(a), Stats.); to consider licensure or certification of individuals (s. 19.85(1)(b), Stats.); to consider closing disciplinary investigations with administrative warnings (ss. 19.85(1)(b), and 440.205, Stats.); to consider individual histories or disciplinary data (s. 19.85(1)(f), Stats.); and to confer with legal counsel (s. 19.85(1)(g), Stats.).

O. Credentialing Matters

- 1) Education Review
 - a. M.D.A. Expanded Function Dental Auxiliary (IA 392241) (97-118)
 - b. M.E. Expanded Function Dental Auxiliary (IA 459430) (119)
 - c. C.J.H. Expanded Function Dental Auxiliary (IA 162888) (120-130)
- 2) Application Review
 - a. V.C. Dental Therapist (IA 466143) (**131-144**)
 - b. E.K.R. Dental Therapist (IA 462980) (**145**)

P. Division of Legal Services and Compliance (DLSC) Matters

- 1) Proposed Stipulations, Final Decisions and Orders
 - a. 23 DEN 044 Sarah J. Weber (**146-153**)
 - b. 23 DEN 116 Chad Schultz (**154-159**)
 - c. 23 DEN 130 Matthew J. Oboikovitz (**160-165**)
 - d. 24 DEN 001 Aaron K. Nisley (**166-172**)
- 2) Administrative Warnings
 - a. 23 DEN 206 C.P.M. (173-174)
- 3) Case Closings
 - a. 23 DEN 083 Y.W. (175-182)
 - b. 23 DEN 143 J.P. (**183-194**)
 - c. 24 DEN 0038 J.L.P. (195-200)
 - d. 24 DEN 0097 J.B.T. (201-210)
 - e. 24 DEN 0015 A.A.P. (211-213)

Q. Proposed Final Decision and Orders

- Debora A. Herrick Respondent (DHA Case Number SPS-23-0081/DLSC Case Number 22 DEN 152) (214-293)
- R. Deliberation of Items Added After Preparation of the Agenda
 - 1) Education and Examination Matters
 - 2) Credentialing Matters
 - 3) DLSC Matters
 - 4) Monitoring Matters
 - 5) Professional Assistance Procedure (PAP) Matters
 - 6) Petitions for Summary Suspensions
 - 7) Petitions for Designation of Hearing Examiner
 - 8) Proposed Stipulations, Final Decisions and Order
 - 9) Proposed Interim Orders
 - 10) Administrative Warnings
 - 11) Review of Administrative Warnings
 - 12) Proposed Final Decisions and Orders
 - 13) Matters Relating to Costs/Orders Fixing Costs
 - 14) Case Closings

- 15) Board Liaison Training
- 16) Petitions for Assessments and Evaluations
- 17) Petitions to Vacate Orders
- 18) Remedial Education Cases
- 19) Motions
- 20) Petitions for Re-Hearing
- 21) Appearances from Requests Received or Renewed
- S. Consulting with Legal Counsel

RECONVENE TO OPEN SESSION IMMEDIATELY FOLLOWING CLOSED SESSION

- T. Vote on Items Considered or Deliberated Upon in Closed Session if Voting is Appropriate
- U. Open Session Items Noticed Above Not Completed in the Initial Open Session

ADJOURNMENT

NEXT MEETING: MARCH 5, 2025

MEETINGS AND HEARINGS ARE OPEN TO THE PUBLIC, AND MAY BE CANCELLED WITHOUT NOTICE.

Times listed for meeting items are approximate and depend on the length of discussion and voting. All meetings are held virtually unless otherwise indicated. In-person meetings are typically conducted at 4822 Madison Yards Way, Madison, Wisconsin, unless an alternative location is listed on the meeting notice. In order to confirm a meeting or to request a complete copy of the board's agenda, please visit the Department website at https:\\dsps.wi.gov. The board may also consider materials or items filed after the transmission of this notice. Times listed for the commencement of any agenda item may be changed by the board for the convenience of the parties. The person credentialed by the board has the right to demand that meeting at which final action may be taken against the credential be held in open session. Requests for interpreters for the hard of hearing, or other accommodations, are considered upon request by contacting the Affirmative Action Officer or reach the Meeting Staff by calling 608-267-7213.

VIRTUAL/TELECONFERENCE DENTISTRY EXAMINING BOARD MEETING MINUTES NOVEMBER 6, 2024

PRESENT: Troy Alton, DDS; Lisa Bahr, RDH; Matthew Bistan, DDS; Joan Fox, DDS;

David Gundersen, DDS; Linda Jorgenson, RDH; Christine Kenyon, Debra Kolste;

Katherine Schrubbe, RDH; Peter Sheild, DDS

ABSENT: Shaheda Govani, DDS

STAFF: Will Johnson, Executive Director; Jameson Whitney, Legal Counsel; Jacob

Pelegrin, Administrative Rules Coordinator; Ashley Sarnosky, Board

Administration Specialist; and other Department staff

CALL TO ORDER

Matthew Bistan, Chairperson, called the meeting to order at 9:01 a.m. A quorum was confirmed with ten (10) members present.

ADOPTION OF AGENDA

MOTION: Katherine Schrubbe moved, seconded by Joan Fox, to adopt the Agenda as

published. Motion carried unanimously.

APPROVAL OF MINUTES OF SEPTEMBER 4, 2024

MOTION: Troy Alton moved, seconded by Peter Sheild, to approve the Minutes of

September 4, 2024, as published. Motion carried unanimously.

ADMINISTRATIVE RULE MATTERS

Preliminary Rule Drafting for Dental Therapy Permanent Rule

MOTION: Joan Fox moved, seconded by Lisa Bahr, to authorize the Chair to approve

the Preliminary Rule Draft of DE 1 to 17 relating to Dental Therapists for posting for Economic Impact Analysis comments and submittal to the

Clearinghouse. Motion carried unanimously.

Discussion of Potential New Scope Statement for Dental Specializations

MOTION: Linda Jorgenson moved, seconded by Katherine Schrubbe, to request

DSPS staff draft a new scope statement on rules DE 1, 5 and 6 relating to Definitions, Standards of Conduct, and Unprofessional Advertising.

Motion carried unanimously.

CLOSED SESSION

MOTION: Lisa Bahr moved, seconded by Katherine Schrubbe, to convene to Closed

Session to deliberate on cases following hearing (s. 19.85(1)(a), Stats.); to consider licensure or certification of individuals (s. 19.85(1)(b), Stats.); to

consider closing disciplinary investigations with administrative warnings (ss. 19.85 (1)(b), and 440.205, Stats.); to consider individual histories or disciplinary data (s. 19.85(1)(f), Stats.); and to confer with legal counsel (s. 19.85(1)(g), Stats.). Matthew Bistan, Chairperson, read the language of the motion. The vote of each member was ascertained by voice vote. Roll Call Vote: Troy Alton-yes; Lisa Bahr-yes; Matthew Bistan-yes; Joan Fox-yes; David Gundersen-yes; Linda Jorgenson-yes; Christine Kenyon-yes; Debra Kolste-yes; Katherine Schrubbe-yes; and Peter Sheild-yes. Motion carried unanimously.

The Board convened into Closed Session at 11:57 a.m.

Christine Kenyon left at 12:19p.m.

CREDENTIALING MATTERS

DIVISION OF LEGAL SERVICES AND COMPLIANCE (DLSC) MATTERS

Application Review

D.R.K. - Dentist Applicant

MOTION: Lisa Bahr moved, seconded by Katherine Schrubbe, to approve the Dentist application of D.R.K, once all requirements are met. Motion carried.

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Proposed Stipulations, Final Decisions and Orders

MOTION: Katherine Schrubbe moved, seconded by Lisa Bahr, to adopt the Findings of Fact, Conclusions of Law and Order in the matter of the following cases:

22 DEN 073 – Christopher G. Johnson 22 DEN 170 – Patrick C.W. Kline 23 DEN 038 – Tiffany J. Smalkoski 23 DEN 090 – Supriya K. Shetty 24 DEN 0066 – Ji Won Ma Motion carried unanimously.

Case Closings

MOTION: Matthew Bistan moved, seconded by David Gundersen, to close the

following DLSC Cases for the reasons outlined below:

23 DEN 162 – M.M. – No Violation 23 DEN 091 – D.B. – No Violation

23 DEN 184 & 24 DEN 011 – K.E.A. – Insufficient Evidence

23 DEN 188 – B.J.B. – No Violation 24 DEN 0049 – J.G.P. – No Violation 24 DEN 0053 – N.C. – No Violation

24 DEN 0071 – R.M. – No Violation

Motion carried unanimously.

RECONVENE TO OPEN SESSION

MOTION: Matthew Bistan moved, seconded by Peter Sheild, to reconvene in Open

Session. Motion carried unanimously.

The Board reconvened to Open Session at 12:23 p.m.

VOTE ON ITEMS CONSIDERED OR DELIBERATED UPON IN CLOSED SESSION

MOTION: Matthew Bistan moved, seconded by Linda Jorgenson, to affirm all

motions made and votes taken in Closed Session. Motion carried

unanimously.

(Be advised that any recusals or abstentions reflected in the Closed Session motions stand for the purposes of the affirmation vote.)

ADJOURNMENT

MOTION: Lisa Bahr, seconded by Joan Fox, to adjourn the meeting. Motion carried

unanimously.

The meeting adjourned at 12:25 p.m.

DENTISTRY EXAMINING BOARD 2025 Meeting Dates

Meeting Date	Start time	Location	Agenda Item Deadline
Wednesday, January 8, 2025	9:00 AM	Virtual	12/20/24
Wednesday, March 5, 2025	9:00 AM	Virtual	2/21/25
Wednesday, May 7, 2025	9:00 AM	Hybrid	4/25/25
Wednesday, June 25, 2025	9:00 AM	Virtual	6/13/25
Wednesday, September 3, 2025	9:00 AM	Virtual	8/22/25
Wednesday, November 5, 2025	9:00 AM	Virtual	10/24/25

State of Wisconsin Department of Safety & Professional Services

AGENDA REQUEST FORM

1) Name and title of person submitting the request:				2) Date when reque	st submitted: 12/1/2024
Brenda Taylor, Board Services Supervisor					
3) Name of Board, Committee, Council, Sections: All Boards				3	
4) Meeting Date:	5) Attac	nments:	6) How s	should the item be tit	led on the agenda page?
First Meeting of 2025	⊠ Ye	Administrative Matters: Annual Policy Review			
7) Place Item in:		8) Is an appearance before the Board bein		the Board being	9) Name of Case Advisor(s), if applicable:
		scheduled? ⊠ No)		N/A

Please be advised of the following Policy Items:

- In-Person and Virtual Meetings: Depending on the frequency of scheduled meetings, discussion topics, and member availability, DSPS may host one or more in-person meetings. Virtual connection options are available for all board meetings.
- 2. Attendance/Quorum: Thank you for your service and commitment to meeting attendance. If you cannot attend a meeting or have scheduling conflicts impacting your attendance, please let us know as soon as possible. A quorum is required for Boards, Sections, and Councils to meet pursuant to Open Meetings Law. Connect to / arrive at meetings 10 minutes before posted start time to allow for audio/connection testing, and timely Call to Order and Roll Call. Virtual meetings include viewable onscreen materials and A/V (speaker/microphone/video) connections.
- **3. Walking Quorum:** Board/Section/Council members must not collectively discuss the body's business outside a properly noticed meeting. If several members of a body do so, they could be violating the open meetings law.
- **4. Mandatory Training:** All Board Members must complete Public Records and Ethics Training, annually. Register to set up an account in the Cornerstone LearnCenter online portal or Log in to an existing account.
- **5. Agenda Deadlines:** Please communicate agenda topics to your Executive Director before the agenda submission deadline at 12:00 p.m., eight business days before a meeting. (Attachment: Timeline of a Meeting)
- **6. Travel Voucher and Per Diem Submissions:** Please submit all Per Diem and Reimbursement claims to DSPS within 30 days of the close of each month in which expenses are incurred. (Attachment: Per Diem Form) Travel Vouchers are distributed on travel approval.
- 7. Lodging Accommodations/Hotel Cancellation Policy: Lodging accommodations are available to eligible members for in-person meetings. Standard eligibility: the member must leave home before 6:00 a.m. to attend an inperson meeting by the scheduled start time.
 - a. If a member cannot attend a meeting, they must cancel their reservation with the hotel within the applicable cancellation timeframe.
 - b. If a meeting is changed to occur remotely, is canceled, or rescheduled, DSPS staff will cancel or modify reservations as appropriate.
- **8. Inclement Weather Policy:** In inclement weather, the DSPS may change a meeting from an in-person venue to a virtual/teleconference only.

11) Authorization	
JA	12/02/2024

Directions for including supporting documents:

- 1. This form should be saved with any other documents submitted to the Agenda Items folders.
- 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director

¹⁰⁾ Describe the issue and action that should be addressed: Board SharePoint Site: https://dsps.boards.wisconsin.gov/

Timeline of a Meeting

8 business days prior to the meeting: All agenda materials are due to the Department by 12:00 pm, 8 business days prior to the meeting date.

7 business days prior to the meeting: The draft agenda page is due to the Executive Director. The Executive Director transmits to the Chair for review and approval.

5 business days prior to the meeting: The approved agenda is returned to the Board Administration Specialist for agenda packet production and compilation.

4 business days prior to the meeting: Agenda packets are posted on the DSPS Board SharePoint site and on the Department website.

Agenda Item Examples:

- o Approval of the Agenda and previous meeting Minutes
- Open Session Items
 - Public Hearings (relating to Administrative Rules)
 - Administrative Matters
 - Legislation and Policy Matters
 - Administrative Rules Matters
 - Credentialing Matters
 - Education and Exam Issues
 - Public Agenda Requests
 - Current Issues Affecting the Profession
 - Public Comments
- Closed Session items
 - Deliberations on Proposed Disciplinary Actions
 - Stipulations
 - Administrative Warnings
 - Case Closings
 - Monitoring Matters
 - Professional Assistance Procedure (PAP) Issues
 - Proposed Final Decisions and Orders
 - Orders Fixing Costs/Matters Relating to Costs
 - Credentialing Matters
 - Education and Exam Issues

Thursday of the Week Prior to the Meeting: Agendas are published for public notice on the Public Notices and Meeting Minutes website: publicmeetings.wi.gov.

1 business day after the Meeting: "Action" lists are distributed by staff detailing board actions on closed session business.

5 business days after the Meeting: "To Do" lists are distributed to staff to ensure that board decisions are acted on and/or implemented within the appropriate divisions in the Department. Minutes approved by the board are published on the Public Notices and Meeting Minutes website: **publicmeetings.wi.gov**.

Department of Safety and Professional Services PER DIEM REPORT

INSTRUCTIONS: Record board-related activities by date, indicate relevant purpose code, the duration of time spent in B-code activities, location, and activity description. Only one \$25.00 per diem payment will be issued on any given calendar day. Submit one form per month and within 60 days of the last activity being reported. Send completed forms to your Board's Administrative Specialist.

Purpo	ose C	odes:
Purpo	ose C	oc

A CODE	Official meetings including Board Meetings, Hearings and Examinations and Test Development Sessions
	(automatic day of per diem) Examples: board, committee, board training or screening panels; Senate Confirmation
	hearings, legislative and disciplinary hearings, or informal settlement conferences; test administration, test review or
	analysis events, national testing events, tour of test facilities, etc.

B CODE Other (One (1) per diem will be issued for every five (5) hours spent in category B, per calendar month): i.e., review of disciplinary cases, consultation on cases, review of meeting materials, board liaison work, e.g., contacts regarding Monitoring, Professional Assistance Procedure, Credentialing, Education and Examinations

	Monitorin	ig, Professional As	ssistance Procedure, Creden	itialing, Education and Examinations			
Name of Examining Board or Council				Board or Council Member's Name			
Month		Year		Employee ID Number			
Date	Purpose Code	Duration of B activity	Where Performed	Activity			
	A or B	Hours: Minutes	(Home, DSPS, or City, State)	Describe Activity Performed (see purpose codes)			
TOTALC							
TOTALS							
for per dien by law.	NT'S CERTI	FICATION The Bo	oard/Council member named ab claim is for service necessarily i	ove, certifies, in accordance with § 16.53, Wis. Stats., that this account neurred in the performance of duties required by the State, as authorized (Rev.04/24)			
Board Mem	nber Approva	1 & Date:					

Supervisor Approval & Date: _

11

TOTAL DAYS CLAIMED: _____ @ \$25.00 =

DENTISTRY EXAMINING BOARD 2024 Officers and Liaisons

OFFICERS			
Chairperson	Matthew Bistan		
Vice Chairperson	Shaheda Govani		
Secretary	Troy Alton		

LIAISON APPOINTMENTS				
Credentialing Liaisons	Lisa Bahr (Dental Hygiene), Shaheda Govani (Dentistry) Alternate: Troy Alton			
Education and Examination Liaison	Katherine Schrubbe, David Gundersen <i>Alternate:</i> Peter Sheild			
Monitoring Liaison	Peter Sheild Alternate: Debra Kolste			
Professional Assistance Procedure (PAP) Liaison	Peter Sheild, Joan Fox Alternate: Christine Kenyon			
Legislative Liaison	Matthew Bistan Alternate: Shaheda Govani			
Travel Authorization Liaison	Matthew Bistan Alternate: Katherine Schrubbe			
Website Liaison	Matthew Bistan Alternate: Lisa Bahr			
PDMP Liaison/ Appointed to Controlled Substances Board as per Wis. Stats. §15.405(5g)	David Gundersen Alternate: Troy Alton			
Screening Panel Members	Troy Alton, Peter Sheild, Debra Kolste, Katherine Schrubbe Alternate:			
Licensure Forms Committee	Lisa Bahr, Shaheda Govani <i>Alternate:</i> Matthew Bistan			

State of Wisconsin Department of Safety & Professional Services

AGENDA REQUEST FORM

1) Name and title of person submitting the request:				2) Date when request submitted:		
Paralegal Richanda Turner, on behalf of Attorney Jameson		12/19/2024				
Whitney				Items will be considered late if submitted after 12:00 p.m. on the		
				deadline date whic	h is 8 business days before the meeting	
3) Name of Board, Comr	nittee, Co	ouncil, Sections:				
Dentistry Examining Box	ard					
4) Meeting Date:	Meeting Date: 5) Attachments: 6) How should the item be titled on the agenda page?			tled on the agenda page?		
01/08/2025	⊠ Ye	es	Reaffirn	ning 2024 delegation	s and new 2025 delegations	
	□ No	0			•	
7) Place Item in:		8) Is an appearance			9) Name of Case Advisor(s), if applicable:	
☑ Open Session		scheduled? (If yes,			N/A	
☐ Closed Session		Appearance Reques	st tor No	n-DSPS Staff)		
Closed Session		☐ Yes				
		⊠ No				
10) Describe the issue a	nd action	that should be addr	ressed:			
The Board members nee	ed to revi	ew and consider reaf	ffirmina	2024 delegations ar	nd new delegations for 2025.	
				g		
11)	11) Authorization					
Ríchanda Turi	ner				12/19/24	
Signature of person making this request Date			Date			
Supervisor (Only require	ad for no	st agenda deadline it	tome)		Date	
Supervisor (Only required for post agenda deadline items) Date						
Executive Director signature (Indicates approval for post agenda deadline items) Date						
Directions for including						
1. This form should be s						
					ry Development Executive Director.	
meeting.	original (uocuments needing	Doard C	mairperson signatur	re to the Bureau Assistant prior to the start of a	



State of Wisconsin

DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES

CORRESPONDENCE / MEMORANDUM

DATE: January 1, 2025

TO: Board, Council, and Committee Members

FROM: Legal Counsel

SUBJECT: Liaison Definitions and Delegations Explanations

Overall Purpose of Liaison Appointments

Each Board/Section (Board) has inherent authority that is established in our Wisconsin Statutes. This authority may change from Board to Board. Further information on your Board's authority can be found in Wis. Stat. ch. 15. Generally, each Board has authority to grant credentials, discipline credential holders, and set standards for education and examinations. In order to efficiently accomplish these tasks, Boards may appoint Liaisons. Liaisons assist with the operations of the Boards' purpose by weighing in on legislative matters, traveling to national conferences, or communicating with stakeholders.

The Department asks that each year the Boards make Liaison appointments to assist the Board and Department to accomplish these tasks in an efficient manner. Your practical knowledge and experience, as an appointed member of a professional board, are essential in making determinations regularly. The Liaison positions listed below assist the Department to complete operations between Board meetings. In most cases, Liaisons can make decisions for the full Board in their designated area. However, these areas are determined through the delegation process. Please note, a Liaison may also decide to send the delegated matter to the full Board for consideration as appropriate. Delegations assist the Board in defining the roles and authorities of each Liaison and other Board functions.

Liaison Definitions

Credentialing Liaison: The Credentialing Liaison is empowered by the Board to review and make determinations regarding certain credential applications. The Credentialing Liaison may be called on by Department staff to answer questions that pertain to qualifications for licensure, which may include whether a particular degree is suitable for the application requirements, whether an applicant's specific work experience satisfies the requirements in statute or rule for licensure, or

whether an applicant's criminal or disciplinary history is substantially related to the practice of the profession in such a way that granting the applicant a credential would create a risk of harm to the public. Questions will likely be sent by Department staff to the Credentialing Liaison via email and may include application materials. The Credentialing Liaison serves a very important role in the credentialing process.

Monitoring Liaison: The Monitoring Liaison is empowered by the Board to make decisions on any credential that is limited either through a disciplinary order or initial licensure. The Department Monitors will send requests from credential holders to the Monitoring Liaison. These requests vary wildly. A common request could be to remove a limitation that has been placed on a credential or to petition for full licensure. The Monitoring Liaison can review these requests and make decisions on behalf of the Board. The Board has the authority to grant decision making latitude to their liaison to any degree. If the Monitoring Liaison has a question on a request, it is advisable for the Liaison to consult further with Department staff or bring the matter to the full Board for consideration.

Professional Assistance Procedure (PAP) Liaison: PAP is a voluntary program open to credential holders with substance abuse issues who wish to seek help by being held accountable through treatment and monitoring by the Department and Board. As part of PAP, the credential holder enters into an agreement with the Department to undergo testing, counseling, or other rehabilitation. The PAP Liaison's role includes responding to credential holders' requests for modifications and terminations of provisions of the agreement. Similar to the Monitoring Liaison, the Department Monitors will send requests from credential holders to the PAP Liaison for further review.

Education and Examination Liaison: Some Boards are required by statute or rule to approve qualifying education and examinations. The Education and Examination Liaison provides guidance to Department staff to exercise authority of the Board to approve or decline examinations and educational programs. This determination requires a level of professional expertise and should be performed by a professional member of the Board. For some Boards, the Education and Examination Liaison will also be tasked with approving continuing education programs and courses.

Legislative Liaison: The Legislative Liaison is permitted to act and speak on the Board's behalf regarding pending and enacted legislation or actions being considered by the legislature outside of Board meetings. The Legislative Liaison is not the Board's designated lobbyist and should exercise their delegated authority carefully.

Travel Authorization Liaison: The Travel Authorization Liaison is authorized to approve a Board member to travel to events and speak or act on the Board's behalf between Board meetings. The Travel Authorization Liaison is called upon to make decisions when sufficient notice was not received, and the full Board could not determine a representative to travel. The Travel Authorization Liaison is tasked with making determinations if the Board appointed representative is not able to attend or if the Board becomes authorized to send additional members as scholarship and funding streams can be unpredictable.

Communication Liaison: The Communication Liaison responds to questions that arise on behalf of the Board. The Communication Liaison works with the Department to cultivate an appropriate response which will be sent by the Executive Director or Board Counsel. The Communication Liaison can be responsible for all types of communication on behalf of the Board. However, the Board can appoint a separate **Website Liaison** to work with DSPS staff to make changes and ensure the Board webpage contains updated and accurate information. Additionally, for the Boards that are required by statute to produce a newsletter or digest, the Board can appoint a separate **Newsletter/Digest Liaison** to assemble and approve content for those communications.

Screening Panel Members: Screening Panel Members review incoming complaints against credential holders and determine which complaints should be opened for investigation and which complaints should be closed without further action. The complexity and amount of work in this role depends substantially on your Board. As a member of the Screening Panel, you are asked to apply your professional expertise to determine if a complaint alleges unprofessional conduct.

Delegations Explanations

CREDENTIALING DELEGATIONS

The overall purpose of credentialing delegations is to allow the credentialing process to proceed as efficiently and effectively as possible.

Delegation of Authority to Credentialing Liaison (Generic)

MOTION EXAMPLE: to delegate authority to the Credentialing Liaison(s) to serve as a liaison between the Department and the Board and to act on behalf of the Board in regard to credentialing applications or questions presented to them, including the signing of documents related to applications.

PURPOSE: To allow a representative of the Board to assist Department staff with credentialing applications and eliminate the need for the entire Board to convene to consider credential application content or questions. Additionally, it is most efficient to have the designated liaison who has assisted with the credentialing process be able to effectuate decisions which require a signature.

Delegation of Authority to DSPS When Credentialing Criteria is Met

MOTION EXAMPLE: to delegate credentialing authority to the Department to act upon applications that meet all credentialing statutory and regulatory requirements without Board or Board liaison review.

PURPOSE: To permit Department staff to efficiently issue credentials and eliminate the need for Board/Section/Liaison review when all credentialing legal requirements are met in an application. This delegation greatly decreases workload on Board members and cuts down processing time on applications.

Delegation of Authority for Predetermination Reviews

MOTION EXAMPLE: to delegate authority to the Department Attorneys to make decisions regarding predetermination applications pursuant to Wis. Stat. § 111.335(4)(f).

PURPOSE: In general, the Wisconsin Fair Employment Act (codified in Wis. Stat. Ch. 111) prohibits licensing agencies from discriminating against applicants because of their arrest and/or conviction record. However, there are exceptions which permit denial of a license in certain circumstances. Individuals who do not possess a license have a legal right to apply for a determination of whether they are disqualified from obtaining a license due to their conviction record. This process is called "Predetermination." Predetermination reviews must be completed within 30 days. This delegation allows Department Attorneys to conduct predetermination reviews and efficiently make these legal determinations without need for Board/Section/Liaison review.

Delegation of Authority for Conviction Reviews

MOTION EXAMPLE: to delegate authority to the Department Attorneys to review and approve applications with convictions which are not substantially related to the relevant professional practice.

PURPOSE: As used here, "substantially related" is a legal standard that is used in the Wisconsin Fair Employment Act. The concept of what is "substantially related" is informed by case law. This delegation permits Department Attorneys to independently conduct conviction reviews and efficiently approve applications if convictions are not substantially related to the practice of the profession. Applications that contain conviction records that may be substantially related to the practice of a profession will still be submitted to the Credentialing Liaison for input.

Delegation to DSPS When Applicant's Disciplinary History Has Been Previously Reviewed

MOTION EXAMPLE: to delegate authority to Department staff to approve applications where Applicant's prior discipline has been approved for a previous credential and there is no new discipline.

PURPOSE: Some Boards offer progressive levels of credentials. This delegation eliminates the need for a re-review of discipline that has already been considered and approved by the Board/Section/Liaison for a lower-level credential.

Delegation to DSPS When Applicant's Conviction History Has Been Previously Reviewed

MOTION EXAMPLE: to delegate authority to Department staff to approve applications where criminal background checks have been approved for a previous credential and there is no new conviction record.

PURPOSE: Some Boards offer progressive levels of credentials. This delegation eliminates the need for a re-review of conviction history that has already been reviewed and approved for a lower-level credential.

Delegation of Authority for Reciprocity Reviews

MOTION EXAMPLE: to delegate authority to the Department Attorneys to review and approve reciprocity applications in which the out of state license requirements meet Wisconsin license requirements. (specific legal standards are referenced in the motion depending on credential/profession type).

PURPOSE: Applications via reciprocity or endorsement require comparison of Wisconsin licensing requirements to the licensing requirements of another jurisdiction. These reviews consider the legal standard for reciprocity, which varies by profession, as well as the specified legal requirements to obtain licensure in the profession. This delegation permits Department Attorneys to independently conduct reciprocity reviews and efficiently approve applications if legal standards and requirements are met for licensure. Applications for which reciprocity may not be available will still be submitted to the Credentialing Liaison for input.

Delegation of Authority for Military Reciprocity Reviews

MOTION EXAMPLE: to delegate authority to the Department Attorneys to review and approve military reciprocity applications in which the individual meets the requirements of Wis. Stat. § 440.09.

PURPOSE: The law permits service members, former service members, and their spouses to be licensed if they hold licensure in other jurisdictions that qualify them to perform acts authorized by the credential they are seeking in Wisconsin. This is a shortened path to licensure that does not require meeting the specific requirements/standards for licensure/reciprocity in a profession. By law, the Department/Board must expedite the issuance of a reciprocal license via military reciprocity. This delegation permits Department Attorneys to independently conduct military reciprocity reviews and efficiently approve applications if legal standards and requirements are met for licensure. Applications for which reciprocity may not be available will still be submitted to the Credentialing Liaison for input.

Delegation of Authority for Application Denial Reviews

MOTION EXAMPLE: to delegate authority to the Department's Attorney Supervisors to serve as the Board designee for purposes of reviewing and acting on requests for hearing as a result of a denial of a credential.

PURPOSE: When an application is denied, the applicant has a legal right to appeal the denial determination. Applicants must meet a specified legal standard in order to have an appeal granted. Additionally, Wisconsin law sets specific time frames for appeal decisions. This delegation permits Department Attorney Supervisors to independently review and efficiently act on requests for hearing as a result of a denial of a credential.

Delegation to Department Attorneys to Approve Duplicate Legal Issue

MOTION EXAMPLE: to delegate authority to Department Attorneys to approve a legal matter in connection with a renewal application when that same/similar matter was already addressed by the Board and there are no new legal issues for that credential holder.

PURPOSE: The intent of this delegation is to be able to approve prior discipline by the Board for the renewal applicant. This delegation eliminates the need for a re-review of discipline that has already been considered and approved by the Board/Section/Liaison.

Delegation to Department Attorneys to Approve Prior Discipline

MOTION EXAMPLE: to delegate authority to Department Attorneys to approve an applicant's prior professional discipline which resulted in a forfeiture/fine/other monetary penalty, remedial education, and/or reprimand, that is 10 years old or older, and the previously disciplined credential is currently in good standing.

PURPOSE: In order to continue improving processing application legal reviews in a timely matter, this delegation gives Department Attorneys authority to approve prior professional discipline which meets all of the following criteria: (1) it is at least ten years old; (2) it resulted in a monetary penalty, remedial education, and/or reprimand; and (3) the previously disciplined credential is currently in good standing.

MONITORING DELEGATIONS

The overall purpose of monitoring delegations is to be able to enforce the Boards orders and limited licenses as efficiently and effectively as possible. Monitoring delegations have two categories: delegations to the Monitoring Liaison and delegations to the Department Monitor.

Delegation of Authority to Department Monitor

MOTION EXAMPLE: to delegate authority to the Department Monitor:

- a. to grant full reinstatement of licensure if education is the only limitation and credential holder has submitted the required proof of course completion.
- b. to suspend the credential if the credential holder has not completed Board ordered education, paid costs, paid forfeitures, within the time specified by the Board Order.
- c. to lift a suspension when compliance with education and costs provisions have been met.

PURPOSE: These delegations allow for the Department Monitor to automatically act on requests when certain criteria are met or not met without needing to burden the Monitoring Liaison. The Board can set their own criteria for what actions they would like to be handled by the Department, the Monitoring Liaison, and the full Board.

Delegation of Authority to Monitoring Liaison

MOTION EXAMPLE: to delegate authority to the Monitoring Liaison to approve or deny all requests received by the credential holder.

PURPOSE: These delegations allow the Board to set criteria for what decisions can be made by the Board member(s) serving as the Monitoring Liaison and what matters should be decided by the full Board.

Education and Examination Delegations

MOTION EXAMPLE: to delegate authority to the Education and Examination Liaison(s) to address all issues related to qualifying education, continuing education and examinations. Motion carried unanimously. (Differs by Board)

PURPOSE: Some Boards are responsible for approving qualifying educational programs or continuing education courses. A delegation is executed in order for an Education and Examination Liaison to make these determinations on behalf of the Board and with assistance of the Department. Additionally, some Boards review examinations and individual scores to qualify for a credential.

MISCELLANEOUS DELEGATIONS

Document Signature

MOTION EXAMPLE: to delegate authority to the Chairperson (or in absence of the Chairperson, the highest-ranking officer or longest serving board member in that succession) to sign documents on behalf of the Board in order to carry out its duties. Motion carried unanimously.

MOTION EXAMPLE: in order to carry out duties of the Board, the Chairperson (or in absence of the Chairperson, the highest-ranking officer or longest serving board member in that succession) has the ability to delegate signature authority for purposes of facilitating the completion of assignments during or between meetings. The members of the Board hereby delegate to the Executive Director, Board Counsel, or DPD Division Administrator the authority to sign on behalf of a Board member as necessary. Motion carried unanimously.

PURPOSE: To take the action approved at Board meetings, the Department may need to draft correspondence and/or Orders after the meetings have adjourned. These actions then need to be signed by a Board Member. This interaction usually takes place over email and a Board member can authorize the use of his/her signature that is kept on file.

Urgent Matters

MOTION EXAMPLE: in order to facilitate the completion of urgent matters between meetings, the Board delegates its authority to the Chairperson (or, in the absence of the Chairperson, the highest-ranking officer or longest serving Board member in that succession), to appoint liaisons to the Department to act in urgent matters. Motion carried unanimously.

PURPOSE: Allows for quick responses to urgent matters that may need Board approval or for which the Department requires guidance from the Board.

Delegation to Chief Legal Counsel-Due to Loss of Quorum

MOTION EXAMPLE: to delegate the review and authority to act on disciplinary cases to the Department's Chief Legal Counsel due to lack of/loss of quorum after two consecutive meetings. Motion carried unanimously.

PURPOSE: Sometimes Boards can struggle to meet quorum necessary to conduct business. This happens for a multitude of reasons, but this delegation allows for the Boards to have disciplinary cases decided by Chief Legal Counsel if the Board fails to meet quorum for two consecutive meetings.

Delegation to Chief Legal Counsel-Stipulated Resolutions

MOTION EXAMPLE: to delegate to the Department's Chief Legal Counsel (CLC) the authority to act on behalf of the Board concerning stipulated resolutions providing for a surrender, suspension, or revocation of a credential, where the underlying merits involve serious and dangerous behavior, and where the signed stipulation is received between Board meetings. The Board further requests that CLC only act on such matters when the best interests of the Board, Department, and the Public are best served by acting upon the stipulated resolution at the time the signed stipulation is received versus waiting for the next Board meeting. Motion carried unanimously.

PURPOSE: For matters of public safety, it may be necessary to take immediate action on a stipulated agreement rather than allowing a credential holder to continue practicing unencumbered until the next scheduled meeting. This delegation allows CLC to act on behalf of the Board when there is a stipulated agreement. A stipulated agreement is an agreement to which all relevant parties have consented to the terms.

Voluntary Surrenders

MOTION: to delegate authority to the assigned case advisor to accept or refuse a request for voluntary surrender pursuant to Wis. Stat. § 440.19 for a credential holder who has a pending complaint or disciplinary matter.

MOTION: to delegate authority to the Department to accept the voluntary surrender of a credential when there is no pending complaint or disciplinary matter with the Department pursuant to Wis. Stat. § 440.19.

PURPOSE: Credential holders can ask the Boards to accept surrender of their credentials at any time. These delegations are in place for the different situations that arise from those requests. If a credential holder is seeking to surrender their credential because they wish to leave the profession, that can be processed with this delegation by the Department if they have no pending disciplinary complaints. If the credential holder wishes to surrender while they have a pending disciplinary complaint, that request is reviewed by the individual Board member assigned to the case.

DLSC Pre-screening

MOTION EXAMPLE: to delegate pre-screening decision making authority to the DSPS screening attorney for opening cases where the credential holder has failed to respond to allegations contained in the complaint when requested by intake (case will be opened on failure to respond and the merits of the complaint).

PURPOSE: Pre-screening delegations exist so the Board can define specific parameters where the Department can review disciplinary complaints and open those cases if they meet certain criteria. Boards also have the authority to set certain criteria that would allow the Department to review and close a case if the criteria is met.

Delegation to Handle Administrative Rule Matters

MOTION EXAMPLE: to delegate authority to the Chairperson (or, in the absence of the Chairperson, the highest-ranking officer or longest serving Board member in that succession), to act on behalf of the Board regarding administrative rule matters between meetings. Motion carried unanimously.

PURPOSE: In order to advance the administrative rules process, action may need to occur between meetings. This allows for quick responses to urgent matters that may need Board approval or for which the Department requires guidance from the Board.

DENTISTRY EXAMINING BOARD JANUARY 3, 2024 2024 Delegations

All Combined Delegations for 2024

Review and Approval of 2023 Delegations

MOTION: David Gundersen moved, seconded by Matthew Bistan, to reaffirm all

delegation motions from 2023 as reflected in the agenda materials. Motion

carried unanimously.

Document Signature Delegations

MOTION: Peter Sheild moved, seconded by Diana Whalen, to delegate authority to

the Chairperson (or in absence of the Chairperson, the highest-ranking officer or longest serving board member in that succession) to sign documents on behalf of the Board in order to carry out its duties. Motion

carried unanimously.

MOTION: Peter Sheild moved, seconded by Lisa Bahr, in order to carry out duties of

the Board, the Chairperson (or in absence of the Chairperson, the highest-ranking officer or longest serving board member in that succession) has the ability to delegate signature authority for purposes of facilitating the completion of assignments during or between meetings. The members of the Board hereby delegate to the Executive Director, Board Counsel or DPD Division Administrator, the authority to sign on behalf of a Board

member as necessary. Motion carried unanimously.

Delegated Authority for Urgent Matters

MOTION: Matthew Bistan moved, seconded by Troy Alton, that in order to facilitate

the completion of urgent matters between meetings, the Board delegates its authority to the Chairperson (or, in the absence of the Chairperson, the

highest-ranking officer or longest serving Board member in that

succession), to appoint liaisons to the Department to act in urgent matters.

Motion carried unanimously.

Delegation to Chief Legal Counsel Due to Loss of Quorum

MOTION: Matthew Bistan moved, seconded by Debra Kolste, to delegate the review

and authority to act on disciplinary cases to the Department's Chief Legal

Counsel due to lack of/loss of quorum after two consecutive meetings.

Motion carried unanimously.

Delegation to Chief Legal Counsel for Stipulated Resolutions

MOTION:

Matthew Bistan moved, seconded by Peter Sheild, to delegate to DSPS Chief Legal Counsel the authority to act on behalf of the Board concerning stipulated resolutions providing for a surrender, suspension, or revocation of a credential, where the underlying merits involve serious and dangerous behavior, and where the signed stipulation is received between Board meetings. The Board further requests that CLC only act on such matters when the best interests of the Board, Department and the Public are best served by acting upon the stipulated resolution at the time the signed stipulation is received versus waiting for the next Board meeting. Motion carried unanimously.

Monitoring Delegations

Delegation of Authorities for Legal Counsel to Sign Monitoring Orders

MOTION:

Matthew Bistan moved, seconded by Diana Whalen, to delegate to Legal Counsel the authority to sign Monitoring orders that result from Board meetings on behalf of the Board Chairperson. Motion carried unanimously.

Delegation to Monitoring Liaison

MOTION:

David Gundersen moved, seconded by Katherine Schrubbe, to delegate authority to the Monitoring Liaison(s) to make any determination on Orders under monitoring and to refer to the Full Board any matter the Monitoring Liaison deems appropriate. Motion carried unanimously.

Delegation to Department Monitor

MOTION: Matthew Bistan moved, seconded by Troy Alton, to delegate authority to the Department Monitor as outlined below:

- 1. to grant reinstatement of licensure if education and/or costs are the sole condition of the order and the credential holder has submitted the required proof of completion for approved courses and paid the costs.
- 2. to suspend the license if the credential holder has not completed Board ordered education and/or paid costs and forfeitures within the time specified by the Board order. The Department Monitor may remove the suspension and issue an order when proof of completion and/or payment has been received.
- 3. to suspend the license (or remove stay of suspension) if a credential holder fails to enroll and participate in an Approved Program for drug and

alcohol testing within 30 days of the order, or if credential holder ceases participation in the Approved Program without Board approval. This delegated authority only pertains to respondents who must comply with drug and/or alcohol testing requirements.

- 4. to grant or deny approval when a credential holder proposes treatment providers, mentors, and supervisors unless the Order specifically requires full-Board or Board designee approval.
- 5. to grant a maximum of one 90-day extension, if warranted and requested in writing by a credential holder, to complete Board ordered continuing, disciplinary, or remedial education.
- 6. to grant a maximum of one 90-day extension or payment plan for proceeding costs and/or forfeitures if warranted and requested in writing by a credential holder.
- 7. to grant a maximum of one 90-day extension, if warranted and requested in writing by a credential holder, to complete a Board ordered evaluation or exam.

Motion carried unanimously.

Pre-Screening Authority Delegations

Delegation to Department Attorney to Open Cases

MOTION:

Troy Alton moved, seconded by Peter Sheild to delegate pre-screening decision-making authority to the Department screening attorney for opening cases as outlined below:

- 1. OWIs of 3 or more that occurred in the last 5 years.
- 2. Reciprocal discipline cases.
- 3. Impairment and/or diversion at work that includes a positive drug/alcohol test or admission by respondent.
- 4. Pending charges, and/or conviction of a misdemeanor or felony that the attorney believes is substantially related and is not otherwise excluded from consideration via Wis. Stat. ch. 111.
- 5. After three requests from intake to provide a response to the allegations, along with patient records and films, the respondent fails to provide all requested information and/or documentation.
- 6. X-rays provided are not of diagnostic quality and/or patient notes and records are not legible.
- 7. Response is provided by someone other than Respondent.
- 8. Complaint based upon a settlement in a dental malpractice case.
- 9. Unlicensed practice occurring during the 5-year right to renew period. Motion carried unanimously.

Delegation to Department Attorney to Close Cases

MOTION:

Matthew Bistan moved, seconded by Debra Kolste, to delegate prescreening decision making authority to the Department screening attorney for closing cases as outlined below:

- 1. One OWI that is non-work related and if AODA assessment completed, assessment does not indicate dependency.
- 2. Complaints that even if allegations are true, do not amount to a violation of law or rules, lack subject matter jurisdiction, and/or lack personal jurisdiction.

Motion carried unanimously.

Credentialing Authority Delegations

Delegation to Department Attorneys to Approve Duplicate Legal Issue

MOTION: Lisa Bahr moved, seconded by Matthew Bistan, to delegate authority to Department Attorneys to approve a legal matter in connection with a renewal application when that same/similar matter was already addressed by the Board and there are no new legal issues for that credential holder. Motion carried unanimously.

Delegation of Authority to Credentialing Liaison

MOTION:

Matthew Bistan moved, seconded by Lisa Bahr, to delegate authority to the Credentialing Liaison(s) to serve as a liaison between the Department and the Board and to act on behalf of the Board in regard to credentialing applications or questions presented to them, including the signing of documents related to applications. Motion carried unanimously.

Delegation of Authority to Department When Credentialing Criteria is Met

MOTION:

Shaheda Govani moved, seconded by Matthew Bistan, to delegate credentialing authority to the Department to act upon applications that meet all credentialing statutory and regulatory requirements without Board or Board liaison review. Motion carried unanimously.

Delegation of Authority for Predetermination Reviews

MOTION:

Matthew Bistan moved, seconded by Peter Sheild, to delegate authority to the Department Attorneys to make decisions regarding predetermination applications pursuant to Wis. Stat. § 111.335(4)(f). Motion carried unanimously.

Delegation of Authority for Conviction Reviews

MOTION: Matthew Bistan moved, seconded by Lisa Bahr, to delegate authority to

the Department Attorneys to review and approve applications with

convictions which are not substantially related to the practice of Dentistry.

Motion carried unanimously.

Delegated Authority for Application Denial Reviews

MOTION: Matthew Bistan moved, seconded by Shaheda Govani, to delegate

authority to the Department's Attorney Supervisors to serve as the Board's designee for purposes of reviewing and acting on requests for hearing as a

result of a denial of a credential. Motion carried unanimously.

Delegation of Authority for Military Reciprocity Reviews

MOTION: Matthew Bistan moved, seconded by Debra Kolste, to delegate authority

to the Department Attorneys to review and approve military reciprocity applications in which the individual meets the requirements of Wis. Stat. §

440.09. Motion carried unanimously.

Delegation to Department When Applicant's Discipline History Has Been Previously Reviewed

MOTION: Shaheda Govani moved, seconded by Matthew Bistan, to delegate

authority to Department staff to approve applications where Applicant's prior discipline has been approved for a previous credential and there is no

new discipline. Motion carried unanimously.

Delegation to Department When Applicant's Conviction History Has Been Previously Reviewed

MOTION: Matthew Bistan moved, seconded by Diana Whalen, to delegate authority

to Department staff to approve applications where criminal background checks have been approved for a previous credential and there is no new

conviction record. Motion carried unanimously.

Voluntary Surrenders

MOTION: Matthew Bistan moved, seconded by Troy Alton, to delegate authority to

the assigned case advisor to accept or refuse a request for voluntary surrender pursuant to Wis. Stat. § 440.19 for a credential holder who has a pending complaint or disciplinary matter. Motion carried unanimously.

Education and Examination Liaison(s) Delegation

MOTION: Shaheda Govani moved, seconded by Matthew Bistan, to delegate

authority to the Education and Examination Liaison(s) to address all issues

related to education and examinations. Motion carried unanimously.

Authorization for Department to Provide Board Member Contact Information to National Regulatory Related Bodies

MOTION: Matthew Bistan moved, seconded by Diana Whalen, to authorize the

Department staff to provide national regulatory related bodies with all board member contact information that the Department retains on file.

Motion carried unanimously.

Optional Renewal Notice Insert Delegation

MOTION: Matthew Bistan moved, seconded by Peter Sheild, to designate the

Chairperson (or, in the absence of the Chairperson, the highest-ranking officer or longest serving board member in that succession) to provide a brief statement or link relating to board-related business within the license renewal notice at the Board's or Board designee's request. Motion carried

unanimously.

Legislative Liaison Delegation

MOTION: Matthew Bistan moved, seconded by Peter Sheild, to delegate authority to

the Legislative Liaisons to speak on behalf of the Board regarding

legislative matters. Motion carried unanimously.

Travel Authorization Liaison Delegation

MOTION: Matthew Bistan moved, seconded by Troy Alton, to delegate authority to

the Travel Authorization Liaison to approve any board member travel to and/or participation in events germane to the Board, and to designate representatives from the Board to speak and/or act on the Board's behalf at

such events. Motion carried unanimously.

Website Liaison(s) Delegation

MOTION: Matthew Bistan moved, seconded by Lisa Bahr, to authorize to the

Website Liaison(s) to act on behalf of the Board in working with

Department staff to identify and execute website updates. Motion carried

unanimously.

Licensure Forms Committee Delegation

MOTION: Lisa Bahr moved, seconded by Matthew Bistan, that in order to facilitate

the completion of its duties between meetings, the Board delegates

authority to the Chairperson to appoint members to the Licensure Forms Committee between meetings as necessary. Motion carried unanimously.

Pre-Screening Authority Delegations, Amended

Delegation to Department Attorney to Open Cases

MOTION:

[Board Member Name] moved, seconded by [Board Member Name] to delegate pre-screening decision-making authority to the Department screening attorney for opening cases as outlined below:

- 1. OWIs of 3 or more that occurred in the last 5 years.
- 2. Reciprocal discipline cases.
- 3. Impairment and/or diversion at work that includes a positive drug/alcohol test or admission by respondent.
- 4. Pending charges, and/or conviction of a misdemeanor or felony that the attorney believes is substantially related and is not otherwise excluded from consideration via Wis. Stat. ch. 111.
- 5. After three requests from intake to provide a response to the allegations, along with patient records and films, the respondent fails to provide all requested information and/or documentation.
- 6. Respondent's response is non-responsive to the complaint and/or does not contain all requested information.
- 7. X-rays provided are not of diagnostic quality and/or patient notes and records are not legible.
- 8. Response is provided by someone other than Respondent.
- 9. Complaint based upon a settlement in a dental malpractice case.
- 10. Unlicensed practice occurring during the 5-year right to renew period.

Delegation to Approve Opioid Abuse Report

MOTION:

[Board member name] moved, seconded by [Board member name], to authorize the Chairperson (or, in the absence of the Chairperson, the highest-ranking officer or longest serving Board member in that succession) to review and approve the opioid abuse report required by Wis. Stat. § 440.035 (2m)(c)1., for filing with the Legislature.

Delegation to Department Attorneys to Approve Prior Discipline

MOTION: [Board member name] moved, seconded by [Board member name], to delegate authority to Department Attorneys to approve an applicant's prior professional discipline which resulted in a forfeiture/fine/other monetary penalty, remedial education, and/or reprimand, that is 10 years old or older, and the previously disciplined credential is currently in good standing. Motion carried [_____].

Delegation to Handle Administrative Rule Matters

MOTION: [Board member name] moved, seconded by [Board member name], to delegate authority to the Chairperson (or, in the absence of the Chairperson, the highest-ranking officer or longest serving Board member in that succession), to act on behalf of the Board regarding administrative rule matters between meetings. Motion carried [10].

Review and Approval of 2024 Delegations including new modifications

MOTION: [Board member name] moved, seconded by [Board member name], to reaffirm all delegation motions made in 2024, as reflected in the January 8, 2025 agenda materials, which were not otherwise modified or amended during the January 8, 2025 meeting. Motion carried [_____].

State of Wisconsin Department of Safety & Professional Services

AGENDA REQUEST FORM

1) Name and title of person submitting the request:		2) Date when request submitted:			
Jake Pelegrin			12/20/24		
Administrative Rules Coordinator		Items will be considered late if submitted after 12:00 p.m. on the deadline			
3) Name of Board, Com	mittee Council Se	ctions	date which is	s 8 business days before the meeting	
Dentistry Examining B		otiono.			
4) Meeting Date:	5)	6) How should th	e item be title	ed on the agenda page?	
1/8/25	Attachments:	O.OO A M. Darkii a	II	Einel Dule Dueft fou DE 1 to 17 volcting to Dontol	
	⊠ Yes	9:00AM Public	nearing on	Final Rule Draft for DE 1 to 17 relating to Dental	
	☐ No	Therapists			
7) Diago Home in .	0) In an annual	b.f the Dec		O) Nove of Occor Advisor/o) if no mains di	
7) Place Item in:		nce before the Boa es, please complete		9) Name of Case Advisor(s), if required:	
		quest for Non-DSPS		N/A	
☐ Closed Session	Yes				
	□ Tes				
10) Describe the issue a		uld be addressed:			
Attachments: -Notice of public hearing and final rule draft for DE 1 to 17 relating to Dental Therapists					
11)		Authoriza	ition		
Jake Pelegrin				12/20/24	
Signature of person ma	king this request			Date	
	3 · · · · · · · · · · · · · · · · · · ·				
Supervisor (if required) Date					
Supervisor (if required) Date					
Executive Director signature (indicates approval to add post agenda deadline item to agenda) Date					
Directions for including supporting documents:					
1. This form should be	1. This form should be attached to any documents submitted to the agenda.				
2. Post Agenda Deadlin	e items must be a	uthorized by a Supe	ervisor and t	he Policy Development Executive Director.	
3. If necessary, provide meeting.	originai documen	ts needing Board C	nairperson s	signature to the Bureau Assistant prior to the start of a	

Notice of Public Hearing

The Dentistry Examining Board announces that it will hold a virtual public hearing on the rule revising DE 1 to 17, relating to Dental Therapists, at the time and place shown below.

Hearing Information

Date: January 8, 2025

Time: 9:00 A.M.

Location: Information concerning the location of the hearing will be available at:

https://dsps.wi.gov/Pages/BoardsCouncils/Dentistry/Meetings.aspx

Appearances at the Hearing and Submittal of Written Comments

The rule may be reviewed and comments submitted at: http://docs.legis.wisconsin.gov/code/chr/hearings.

Comments may also be submitted to Jake Pelegrin, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, P.O. Box 8366, Madison, WI 53708-8366, or by email to DSPSAdminRules@wisconsin.gov.

Comments must be received at or before the public hearing to be included in the record of rulemaking proceedings.

Initial Regulatory Flexibility Analysis

The proposed rule will not have an effect on small businesses, as defined under s. 227.114 (1).

Agency Small Business Regulatory Coordinator

The Department's Regulatory Review Coordinator may be contacted at <u>Jennifer.Garrett@wisconsin.gov</u> or calling (608) 266-2112.

STATE OF WISCONSIN DENTISTRY EXAMINING BOARD

:

IN THE MATTER OF RULEMAKING :

PROPOSED ORDER OF THE

PROCEEDINGS BEFORE THE

DENTISTRY EXAMINING BOARD

DENTISTRY EXAMINING BOARD

ADOPTING RULES (CLEARINGHOUSE RULE

PROPOSED ORDER

A proposed order of the Dentistry Examining Board to **amend** DE 1.01, DE 2.005 (intro.), DE 2.013, DE 2.03 (3), 2.03 (4), DE 2.03 (5) (a), DE 2.03 (5) (b), DE 2.03 (5) (b) 3. b., DE 2.03 (6), DE 2.035 (2) and (2) (e), DE 3.01, DE 3.02 (1) (b), DE 3.02 (1) (c), DE 3.02 (1) (c) 2., DE 3.02 (2) (a) 2., DE 5.02 (intro.), (5), (9), (14), (14m), (15), (20), and (24), DE 6.02 (4) (b), DE 7.04 (3) (b) (Note), DE 8.02 (1), DE 8.035, DE 10.01 (1), DE 10.02 (1) (b), 1., b., and 2., DE 10.02 (2) (c), DE 10.02 (3) (c), DE 10.045, DE 11.10 (3m) (g) (Note), DE 12.01 (intro.), DE 12.02, DE 12.03, DE 13.01, DE 13.02 (3) and (4), DE 14.01 (2), DE 14.02, DE 14.03, DE 14.04, and DE 15.06 (intro.); and to **create** DE 1.02 (4g) and (4r), DE 2.01 (3), DE 2.02 (2m), DE 2.03 (2m), DE 2.04 (3), DE 3.02 (1), (am), (d), and (e), DE 3.04 (2m), (4), (5), and (6), DE 5.02 (21m), DE 5.02 (28), DE 6.03, DE 7.06 (1), (2), (3), and (4), DE 12.04, DE 13.035, DE 13.05 (1m), DE 15.07, and chapter DE 17 relating to Licensure of Dental Therapists.

Analysis prepared by the Department of Safety and Professional Services.

ANALYSIS

Statutes interpreted: Section 447.02 (1) (g), Stats.

Statutory authority: Sections 15.08 (5) (b), 447.02 (1) (a), (1) (b), (1) (g), and 447.02 (2) (a), Stats.

Explanation of agency authority:

Section 15.08 (5) (b), Stats., provides that an examining board "[s]hall promulgate rules for its own guidance and for the guidance of the trade or profession to which it pertains, and define and enforce professional conduct and unethical practices not inconsistent with the law relating to the particular trade or profession."

Section 447.02 (1) (a), Stats., states that the examining board may promulgate rules "[g]overning the reexamination of an applicant who fails an examination specified in s. 447.04 (1) (a) 5., (1m) (e), or (2) (a) 5. The rules may specify additional education requirements for those applicants and may specify the number of times an applicant may be examined."

Section 447.02 (1) (b), Stats., states that the examining board may promulgate rules "[g]overning the standards and conditions for the use of radiation and ionizing equipment in the practice of dentistry or dental therapy."

Section 447.02 (1) (g), Stats., states that the examining board may promulgate rules "Specifying services, treatments, or procedures, in addition to those specified under s. 447.06 (3) (b) 1. to 27., that are included within the practice of dental therapy."

Section 447.02 (2) (a), Stats., states that the examining board shall promulgate rules specifying "[t]he conditions for supervision and the degree of supervision required under ss. 447.03 (3) (a), (am), (b) and (d) 2. and 447.065."

2023 Wisconsin Act 87, Section 65 (2) (a) provides that "The dentistry examining board shall promulgate emergency rules under s. 227.24 that are necessary to implement this act. Notwithstanding s. 227.24 (1) (c) and (2), emergency rules promulgated under this paragraph remain in effect for 2 years, or until the date on which permanent rules take effect, whichever is sooner."

Related statute or rule:

2023 Wisconsin Act 87.

Plain language analysis:

The objective of the proposed rule is to implement the statutory changes from 2023 Wisconsin Act 87, providing for the licensure and regulation of dental therapists in Wisconsin. The rule integrates dental therapists into the current code chapters DE 1 to 16 and creates chapter DE 17. The rule sets the licensure application requirements and continuing education requirements for dental therapists. It clarifies and specifies their scope of practice. It clarifies and specifies the regulations for supervision from a supervising dentist, and the ability of a dental therapist to supervise other staff.

Summary of, and comparison with, existing or proposed federal regulation:

None.

Comparison with rules in adjacent states:

Illinois:

Illinois statutes and codes do not provide for licensure of dental therapists.

Iowa:

Iowa statutes and codes do not provide for licensure of dental therapists.

Michigan:

Michigan law provides for licensure and regulation of dental therapists [MCL 333.16651 to 16659]. Their scope of practice includes a list of 27 dental therapy services including identifying conditions, dispensing medications prescribed by a health care professional, teeth cleaning, and other basic dental procedures. Their dental therapists can practice only under the supervision of a supervising dentist. The supervising dentist and dental therapist must create a written agreement to agree to the services and procedures the dental therapist is allowed to do. This written practice agreement must be fairly detailed and is regulated by a variety of provisions in Michigan law. Essentially, the supervising dentist has a fair amount of authority over what they will allow the dental therapist to do.

Michigan rules further specify a dental therapist's scope of practice and conditions of supervision [Michigan Rules R 338.11415 to 11417]. For supervision, the supervisor does not always need to be physically present in the office, but must be continuously available by telephone or telecommunication, Also, a dental therapist may supervise dental assistants and dental hygienists (to the extent permitted in the written practice agreement).

Minnesota:

Minnesota law provides for licensure and regulation of dental therapists and advanced dental therapists [2023 Minnesota Statutes, parts 150A.105 to 106]. Their scope of practice is limited to a similar list of 30 dental therapy services and procedures. However, in Minnesota's list, 14 of the more intensive procedures are required to be done under a level of supervision where the supervising dentist is physically present in the office (but doesn't need to be in the room). The remaining 16 less-intensive procedures are allowed to be done if the supervising dentist is not present in the office. However, these are minimums and the supervision can be more direct, as agreed on in the collaborative management agreement between the dental therapist and the supervising dentist. Like Michigan, the requirements for their collaborative management agreements specifies a large level of detail to be agreed on in writing between the two parties. Dental therapists may supervise dental assistants, but not dental hygienists.

Advanced dental therapists have increased education requirements but have a slightly wider scope of practice. In addition to the scope of practice described above, they can also perform nonsurgical extractions of permanent teeth. Also, all their services and procedures are allowed to be done under a level of supervision where the supervising dentist is not present in the office.

Minnesota administrative rules further specify licensure requirements for dental therapists but make minimal other additions to the regulations already in Minnesota statute [Minnesota Rules parts 3100.1170 to 1180].

Summary of factual data and analytical methodologies:

The board reviewed code chapters DE 1 to 16 to determine what changes need to be made due to 2023 Wisconsin Act 87. Additionally, the board decided to create chapter DE 17 to further specify practice requirements for dental therapists.

Fiscal Estimate:

The Fiscal Estimate and Economic Impact are attached.

Analysis and supporting documents used to determine effect on small business or in preparation of economic impact analysis:

The proposed rules were posted for a period of 14 days to solicit public comment on economic impact, including how the proposed rules may affect businesses, local government units, and individuals. No comments were received.

Effect on small business:

These proposed rules do not have an economic impact on small businesses, as defined in s. 227.114 (1), Stats. The Department's Regulatory Review Coordinator may be contacted at Jennifer.Garrett@wisconsin.gov or (608) 266-2112.

Agency contact person:

Jake Pelegrin, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, 4822 Madison Yards Way, P.O. Box 8366, Madison, Wisconsin 53708; telephone 608-267-0989; email at DSPSAdminRules@wisconsin.gov.

Place where comments are to be submitted and deadline for submission:

Comments may be submitted to Jake Pelegrin, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, 4822 Madison Yards Way, P.O. Box 8366, Madison, WI 53708-8366, or by email to DSPSAdminRules@wisconsin.gov. Comments must be received on or before the public hearing to be included in the record of rule-making proceedings.

TEXT OF RULE

SECTION 1. DE 1.01 is amended to read:

DE 1.01 Authority. The provisions in chs. DE 1 to $\frac{1617}{2}$ are adopted pursuant to authority in ss. 15.08 (5) and 227.11 (2) (a), Stats., and ch. 447, Stats.

SECTION 2. DE 1.02 (4g) is created to read:

DE 1.02 (4g) "Dental therapist" means an individual who practices dental therapy.

SECTION 3. DE 1.02 (4r) is created to read:

DE 1.02 (4r) "Dental therapy" means the limited practice of dentistry, consisting of the services, treatments, and procedures specified in s. 447.06 (3) (b), Stats., and s. DE 17.02 (1).

SECTION 4. DE 2.005 (intro.) is amended to read:

DE 2.005 Dental testing service and dental hygiene testing Testing service requirements. A dental therapy, testing service or dental hygiene testing service may be approved if all the testing service's exams meet all of the following requirements:

SECTION 5. DE 2.01 (3) is created to read:

- **DE 2.01 (3)** An applicant for license as a dental therapist shall meet the requirements in sub. (1) (a) and (c) and shall also submit to the board:
- (a) Evidence satisfactory to the board that the applicant has graduated from an accredited dental therapy education program, or other requirements in s. 447.04 (1m) (c), Stats.

Note: For all acceptable education requirements, see s. 447.04 (1m) (c), Stats.

- **(b)** Evidence satisfactory to the board that the applicant has passed a national board dental therapy examination and a dental therapy clinical examination administered by a regional testing service that has been approved by the board to administer clinical examinations for dental professionals. If a national board examination or a regional testing service examination for dental therapy does not exist, the board shall accept evidence of passing an alternative examination administered by another entity or testing service that is approved by the board.
- (c) Evidence of successful completion of an examination administered by the board on the statutes and rules relating to dental therapy.
- (d) Evidence satisfactory to the board the applicant has current proficiency in cardiopulmonary resuscitation, including the use of an automated external defibrillator achieved through instruction provided by an individual, organization, or institution of higher education approved under s. 46.03 (38), Stats., to provide such instruction.
- (e) If applicable, information relating to the applicant's licensure in other jurisdictions as required by the examining board.

SECTION 6. DE 2.013 is amended to read:

DE 2.013 Student supervision. A dental student under s. 447.03 (3) (a), Stats., <u>a dental therapy student under s. 447.03 (3) (am), Stats.</u>, or a dental hygiene student under s.

447.03 (3) (b), Stats., is required to practice under the supervision of a dentist who is present in the facility in which the practice occurs.

SECTION 7. DE 2.02 (2m) is created to read:

DE 2.02 (2m) Every person granted a license as a dental therapist shall be deemed licensed for the current biennial license period.

SECTION 8. DE 2.03 (2m) is created to read:

DE 2.03 (2m) REQUIREMENTS FOR RENEWAL; DENTAL THERAPISTS. A dental therapist shall by October 1 of the odd-numbered year following initial licensure and every 2 years thereafter, meet the requirements for renewal specified in sub. (1) (a) to (d).

SECTION 9. DE 2.03 (3) is amended to read:

DE 2.03 (3) FAILURE TO MEET REQUIREMENTS. A dentist, dental therapist, or dental hygienist who fails to meet the requirements under subs. (1) (a) to (d), and (2), and (2m) by the renewal date shall cease and desist from dental, dental therapy, or dental hygiene practice.

SECTION 10. DE 2.03 (4) is amended to read:

DE 2.03 (4) NEW LICENSEES. Dentists, dental therapists, and dental hygienists are not required to satisfy the continuing education requirements under sub. (1) (d) for the first renewal period following the issuance of their initial licenses.

SECTION 11. DE 2.03 (5) (a) is amended to read:

DE 2.03 (5) (a) A dentist, dental therapist, or dental hygienist who files an application for renewal of a license within 5 years after the renewal date may renew his or her license by filing with the board all of the following:

SECTION 12. DE 2.03 (5) (b) is amended to read:

DE 2.03 (5) (b) This paragraph does not apply to dentists, dental therapists, or dental hygienists who have unmet disciplinary requirements. A dentist, dental therapist, or dental hygienist renewing the license after 5 years shall do all of the following:

SECTION 13. DE 2.03 (5) (b) 3. b. is amended to read:

DE 2.03 (5) (b) 3. b. If a dentist <u>or dental therapist</u>, successful completion of a board approved testing service examination within one year of renewal.

SECTION 14. DE 2.03 (6) is amended to read:

DE 2.03 (6) REINSTATEMENT. A dentist, dental therapist, or dental hygienist who has unmet disciplinary requirements and failed to renew the license within 5 years or whose license has been denied at renewal, surrendered or revoked may apply to have the license reinstated following submission of all of the following:

SECTION 15. DE 2.035 (2) and (2) (e) are amended to read:

- **DE 2.035 (2)** Each applicant for reciprocal licensure as a dentist, dental therapist, or dental hygienist shall submit all of the following:
- **(e)** Evidence that the applicant is in good standing with the governmental authorities in every jurisdiction outside this state that have granted the applicant a license, certification, registration, or permit that qualifies the individual to perform acts authorized under a dentist, dental therapist, or dental hygienist license granted by the board.

SECTION 16. DE 2.04 (3) is created to read:

- **DE 2.04 (3)** The board may grant a license as a dental therapist to an applicant who holds a valid license in good standing issued by the proper authorities of any other jurisdiction of the United States or Canada upon payment of the fee as determined by the department under s. 440.03 (9) (a), Stats., and submission of evidence satisfactory to the board that all of the following conditions are met:
- (a) The applicant has graduated from an accredited dental therapy education program.
- **(b)** The applicant submits a certificate from each jurisdiction in which the applicant is or has ever been licensed stating that no disciplinary action is pending against the applicant or the license, and detailing all discipline, if any, which has ever been imposed against the applicant or the license.
- (c) The applicant has successfully completed a licensing examination that, in the board's judgment, is substantially equivalent to an examination administered by a board approved testing service.
- (d) The applicant has successfully completed a jurisprudence examination on the provisions of Wisconsin statutes and administrative rules relating to dental therapy.
- (e) The applicant possesses a current certificate of proficiency in cardiopulmonary resuscitation from a course provider approved by the Wisconsin department of health services.
- (f) The applicant has disclosed all discipline which has ever been taken against the applicant in any jurisdiction shown in reports from the national practitioner data bank and the American Association of Dental Boards.

(g) The applicant has presented satisfactory responses during any personal interview with the board which may be required to resolve conflicts between the licensing standards and the applicant's application.

SECTION 17. DE 3.01 is amended to read:

DE 3.01 Supervision. A dental hygienist shall practice under the supervision of a licensed dentist <u>or dental therapist</u> in a dental facility or a facility specified in s. 447.06 (2), Stats., if applicable.

SECTION 18. DE 3.02 (1) (b) is amended to read:

DE 3.02 (1) (b) A dental hygienist may practice dental hygiene or perform remediable procedures only as authorized by a licensed dentist <u>or dental therapist</u> who is present in the facility in which those practices or procedures are performed, except as provided in par. (c).

SECTION 19. DE 3.02 (1) (c) is amended to read:

DE 3.02 (1) (c) A dental hygienist may practice dental hygiene or perform remediable procedures if a licensed dentist <u>or dental therapist</u> is not present in the facility in which those practices or procedures are performed only if all of the following conditions are met:

SECTION 20. DE 3.02 (1) (c) 2. is amended to read:

DE 3.02 (1) (c) 2. The dentist <u>or dental therapist</u> who made the written or oral prescription has examined the patient at least once during the 12-month period immediately preceding all of the following:

SECTION 21. DE 3.02 (1) (am), (d), and (e) are created to read:

DE 3.02 (1) (am) In this subsection:

- 1. "Direct supervision" has the meaning given in s. DE 17.01 (2).
- **2.** "Supervising dentist" has the meaning given in s. DE 17.01 (6).
- **DE 3.02 (1) (d)** Pursuant to the requirements under s. 447.065 (2), Stats., and subject to the requirements under this subsection, a dental therapist may delegate to a dental hygienist the performance of remediable procedures only if all of the following conditions are met:
- 1. The supervising dentist has allowed the dental therapist to perform the specific remediable procedure within the dental therapist's collaborative management agreement, pursuant to the requirements under s. 447.06 (3) (d) 1., Stats.

- 2. The supervising dentist has expressly allowed the dental therapist to delegate the specific remediable procedure within the dental therapist's collaborative management agreement, pursuant to the requirements under s. 447.06 (3) (d) 1., Stats.
- **3.** The dental therapist has the authority to perform the specific remediable procedure personally, pursuant to the requirements under s. 447.06 (3) (bm) 1. and 2., Stats.
- **4.** The dental hygienist remains under the direct supervision of the dental therapist for the duration of the procedure.
- (e) The dental therapist and the dental therapist's supervising dentist shall be responsible for any services, treatments, or procedures delegated and performed under par. (d).

SECTION 22. DE 3.02 (2) (a) 2. is amended to read:

DE 3.02 (2) (a) 2. For a school for the education of dentists, dental therapists, or dental hygienists.

SECTION 23. DE 3.04 (2m), (4), (5), and (6) are created to read:

- **DE 3.04 (2m)** In this section, "supervising dentist" has the meaning given in s. DE 17.01 (6).
- **DE 3.04 (4)** Pursuant to the requirements under ss. 447.06 (2) (e) and 447.065 (2), Stats., a dental therapist may delegate to a dental hygienist the administration of oral systemic premedications and subgingival sustained release chemotherapeutic agents to patients only if all of the following conditions are met:
- (a) The administration is performed pursuant to a treatment plan for the patient approved by a dentist.
- **(b)** A dentist remains on the premises in which the administration is performed and is available to the patient throughout the completion of the appointment.
- (c) The dental therapist has the authority to perform the activity personally, pursuant to the requirements under s. 447.06 (3) (bm) 1. and 2., Stats.
- (d) The dental therapist remains under the supervision of the supervising dentist for the duration of the procedure.
- (e) The supervising dentist has allowed the dental therapist to perform the administration personally within the dental therapist's collaborative management agreement, pursuant to the requirements under s. 447.06 (3) (d) 1., Stats.

- (f) The supervising dentist has expressly allowed the dental therapist to delegate the administration within the dental therapist's collaborative management agreement, pursuant to the requirements under s. 447.06 (3) (d) 1., Stats.
- (5) In sub. (4), the dentist who approves the treatment plan and remains available to the patient may be a different dentist than the supervising dentist for the dental therapist.
- (6) The dental therapist and the dental therapist's supervising dentist shall be responsible for any services, treatments, or procedures delegated and performed under sub. (4).

SECTION 24. DE 5.02 (intro.), (5), (9), (14), (14m), (15), (20), and (24) are amended to read:

- **DE 5.02 Unprofessional conduct.** Unprofessional conduct by a dentist, dental therapist, dental hygienist, or expanded function dental auxiliary includes:
- (5) Practicing in a manner which substantially departs from the standard of care ordinarily exercised by a dentist, <u>dental therapist</u>, dental hygienist, or expanded function dental auxiliary which harms or could have harmed a patient.
- (9) Impersonating another dentist, <u>dental therapist</u>, dental hygienist, or expanded function dental auxiliary.
- (14) Having a license, certificate, permit, or registration granted by another state to practice as a dentist, dental therapist, or dental hygienist limited, suspended or revoked, or subject to any other disciplinary action.
- (14m) Surrendering, while under investigation, a license, certificate, permit, or registration granted by another state to practice as a dentist, dental therapist, dental hygienist, or expanded function dental auxiliary.
- (15) Violating any law or being convicted of a crime the circumstances of which substantially relate to the practice of a dentist, dental therapist, or dental hygienist.
- (20) Violating, or aiding or abetting the violation of any law substantially related to the practice of dentistry, <u>dental therapy</u>, dental hygiene, or the practice of an expanded function dental auxiliary.
- (24) Failing to hold a current certificate in cardiopulmonary resuscitation unless the licensee or certified individual credential holder has obtained a waiver from the board based on a medical evaluation documenting physical inability to comply. A waiver shall be issued by the board only if it is satisfied that another person with current certification in CPR is immediately available to the licensee credential holder when patients are present.

SECTION 25. DE 5.02 (21m) is created to read:

DE 5.02 (21m) Aiding or abetting or permitting unlicensed persons in the practice of dental therapy, as defined in s. 447.01 (6r), Stats.

SECTION 26. DE 5.02 (28) is created to read:

DE 5.02 (28) A dental therapist practicing outside of a practice area or setting described in s. 447.06 (3) (e), Stats., and s. DE 17.04 (3).

SECTION 27. DE 6.02 (4) (b) is amended to read:

DE 6.02 (4) (b) A name of a dentist <u>or dental therapist</u> who has not been associated with the advertising dentist <u>or dental therapist</u> for the past year or longer,

SECTION 28. DE 6.03 is created to read:

DE 6.03 Advertising limitations for dental therapists. (1) A dental therapist may not advertise as a dentist or as providing services other than dental therapy.

(2) A dentist supervising a dental therapist under a collaborative management agreement retains full responsibility for advertising by the dental therapist.

SECTION 29. DE 7.04 (3) (b) (Note) is amended to read:

Note: Applications are available upon request to the board office at 1400 East Washington Avenue, P.O. Box 8935, Madison, Wisconsin 53708. Instructions for applications are available on the department of safety and professional services' website at http://dsps.wi.gov or by calling (608) 266-2112.

SECTION 30. DE 7.06 (1), (2), (3), and (4) are created to read:

DE 7.06 (1) In this section, "supervising dentist" has the meaning given in s. DE 17.01 (6).

- (2) Pursuant to the requirements under ss. 447.06 (2) (e) and 447.065 (2), Stats., a dental therapist may delegate to a dental hygienist the administration of local anesthetic only if all of the following conditions are met:
- (a) The administration is performed pursuant to a treatment plan for the patient approved by a dentist.
- **(b)** The dentist remains on the premises in which the administration is performed and is available to the patient throughout the completion of the appointment.
- (c) The dental therapist has the authority to perform the activity personally, pursuant to the requirements under s. 447.06 (3) (bm) 1. and 2., Stats.

- (d) The dental therapist remains under the supervision of the supervising dentist for the duration of the procedure.
- (e) The supervising dentist has allowed the dental therapist to administer local anesthetic within the dental therapist's collaborative management agreement, pursuant to the requirements under s. 447.06 (3) (d) 1., Stats.
- (f) The supervising dentist has expressly allowed the dental therapist to delegate the administration of local anesthetic within the dental therapist's collaborative management agreement, pursuant to the requirements under s. 447.06 (3) (d) 1., Stats.
- (3) In sub. (2), the dentist who approves the treatment plan and remains available to the patient may be a different dentist than the supervising dentist for the dental therapist.
- (4) The dental therapist and the dental therapist's supervising dentist shall be responsible for any services, treatments, or procedures delegated and performed under sub. (2).

SECTION 31. DE 8.02 (1) is amended to read:

DE 8.02 (1) "Patient" means a person who receives dental services from a licensed dentist, dental therapist, or dental hygienist.

SECTION 32. DE 8.035 is amended to read:

DE 8.035 Preservation of patient health care records. A person who manages or controls a business that offers dental, dental therapy, or dental hygiene services, including management or control of a business through which the person allows another person to offer dental, dental therapy, or dental hygiene services, shall preserve patient health care records for at least 10 years from the date of the last entry.

SECTION 33. DE 10.01 (1) is amended to read:

DE 10.01 (1) "Mobile dentistry program" means a program providing dental hygiene as defined by s. 447.01 (3), Stats., <u>dental therapy as defined by s. 447.01 (6r)</u>, Stats., or dentistry as defined by s. 447.01 (8), Stats., excluding a health practitioner practicing within the scope of a license not governed by ch. 447, Stats., in one of the following:

SECTION 34. DE 10.02 (1) (b), 1., b., and 2. are amended to read:

- **DE 10.02 (1) (b)** A program providing dental, dental therapy, or dental hygiene care is not required to register if one of the following requirements is satisfied:
- **1.** The dental, dental therapy, or dental hygiene care is provided within a 50 mile radius of their main or satellite facility and all of the following:

- **b.** The dentist, dental therapist, or dental hygienist provides any necessary follow-up care to the patient.
- 2. The dental, dental therapy, or dental hygiene care is being provided to a new or established patient of record of the main or satellite dental facility and no more than 2 patients per day are being treated using portable equipment or a self-contained, intact facility that can be moved.

SECTION 35. DE 10.02 (2) (c) is amended to read:

DE 10.02 (2) (c) A list of all employees, contractors, or volunteers who are providing dental, <u>dental therapy</u>, or dental hygiene care in Wisconsin. The list shall include the Wisconsin license number for each person providing dental, <u>dental therapy</u>, or dental hygiene care.

SECTION 36. DE 10.02 (3) (c) is amended to read:

DE 10.02 (3) (c) A list of all employees, contractors or volunteers who are providing dental, dental therapy, or dental hygiene care in Wisconsin. The list shall include the Wisconsin license number for each person providing dental care.

SECTION 37. DE 10.045 is amended to read:

DE 10.045 Notification to department. The mobile dentistry program shall notify the department within 30 days of new employees, contractors or volunteers providing dental, dental therapy, or dental hygiene services in Wisconsin.

SECTION 38. DE 11.10 (3m) (g) (Note) is amended to read:

Note: Forms are available <u>on the department of safety and professional services' website</u> <u>at http://dsps.wi.gov or</u> at the office of the Dentistry Examining Board located at 1400 <u>East Washington Avenue</u> <u>4822 Madison Yards Way</u>, <u>P.O. Box 8935</u>, Madison, WI 537085.

SECTION 39. DE 12.01 (intro.) is amended to read:

DE 12.01 Nondelegated functions. A dentist <u>or dental therapist</u> may not delegate any dental procedure of any description to an unlicensed person if the procedure or function to be delegated is any of the following:

SECTION 40. DE 12.02 is amended to read:

DE 12.02 Training. A dentist <u>or dental therapist</u> who delegates any remediable dental procedure or function to an unlicensed person shall first provide training to or verify competency of the person in the performance of the procedure or function.

SECTION 41. DE 12.03 is amended to read:

- **DE 12.03 Reporting violations. (1)** A licensee shall report to the board any dentist <u>or dental therapist</u> who is improperly delegating the performance of any dental <u>or dental therapy</u> procedure or function to an unlicensed person, or is delegating to a person performing any dental <u>or dental therapy</u> procedure or function in a manner which is less than minimally competent.
- (2) A licensee who fails to report the circumstances as specified in sub. (1) constitutes aiding and abetting the violation of a law substantially related to the practice of dentistry, dental therapy, or dental hygiene, and shall be in violation of s. DE 5.02 (20), (21), (21m), or (22).

SECTION 42. DE 12.04 is created to read:

DE 12.04 Dental therapist delegation to unlicensed persons. (1) In this section:

- (a) "Direct supervision" has the meaning given in s. DE 17.01 (2).
- (b) "Supervising dentist" has the meaning given in s. DE 17.01 (6).
- (2) A dental therapist may delegate to an unlicensed person only the performance of remediable procedures, and only if all of the following conditions are met:
- (a) The unlicensed individual performs the remediable procedures in accordance with a treatment plan approved by the dentist or dental therapist.
- **(b)** The unlicensed individual remains under the direct supervision of the dental therapist for the duration of the procedure.
- (c) The unlicensed individual's performance of the remediable procedures is subject to inspection by the dentist or dental therapist.
- (d) The dental therapist has the authority to perform the activity personally, pursuant to the requirements under s. 447.06 (3) (bm) 1. and 2., Stats.
- (e) The supervising dentist has allowed the dental therapist to perform the specific remediable procedure within the dental therapist's collaborative management agreement, pursuant to the requirements under s. 447.06 (3) (d) 1., Stats.
- (f) The supervising dentist has expressly allowed the dental therapist to delegate the specific remediable procedure within the dental therapist's collaborative management agreement, pursuant to the requirements under s. 447.06 (3) (d) 1., Stats.

- (3) In sub. (2), the dentist who approves the treatment plan and may inspect the performance of the remediable procedures may be a different dentist than the supervising dentist for the dental therapist.
- (4) The dental therapist and the dental therapist's supervising dentist shall be responsible for any services, treatments, or procedures delegated and performed under sub. (2).

SECTION 43. DE 13.01 is amended to read:

DE 13.01 Authority. The rules in this chapter are adopted by the dentistry examining board under the authority of ss. 227.11 (2), 447.02 (1) (f), 447.055, and 447.056, and 447.057, Stats.

SECTION 44. DE 13.02 (3) and (4) are amended to read:

- **DE 13.02 (3)** "Professional organization" means an organization that seeks to further the dental, <u>dental therapy</u>, dental hygiene, or medical professions, the interests of licensees engaged in those professions, and the public interests. "Professional organization" includes a study group, as defined in sub. (4).
- (4) "Study group" means a group of 2 or more dentists, dental therapists, or dental hygienists who discuss continuing education topics relating to the practice of dentistry, dental therapy, or medicine, or the clinical practice of dental hygiene, and that satisfies all of the following:

SECTION 45. DE 13.035 is created to read:

- **DE 13.035 Continuing education requirements for dental therapists. (1)** COMPLETION OF CONTINUING EDUCATION CREDIT HOURS. Except as provided under sub. (5), during the 2-year period immediately preceding the renewal date specified under s. 440.08 (2) (a), Stats., a dental therapist shall complete 12 credit hours of continuing education related to the practice of dental therapy. No more than 2 of the 12 credit hours may be satisfied by training related to basic life support or cardiopulmonary resuscitation. Not less than 2 of the 12 credit hours shall include training in infection control.
- (2) PRESCRIBING CONTROLLED SUBSTANCES CONTINUING EDUCATION. If a dental therapist has a federal drug enforcement administration registration number, the 12 credit hours of continuing education shall include 2 hours in the topic of prescribing of controlled substances for the treatment of dental pain.
- (3) CREDIT FOR COLLEGE LEVEL COURSES. One credit hour of a college level course is equivalent to 6 credit hours of continuing education. A licensee may substitute credit hours of college level courses related to the practice of dentistry, dental therapy, or medicine for the required continuing education credit hours.

- (4) CREDIT FOR DISTANCE EDUCATION. The credit hours required under sub. (1) may be satisfied by independent study, correspondence, or internet programs or courses.
- (5) EXEMPTION FOR NEW LICENSEES. Subsection (1) does not apply to an applicant for renewal of a license that expires on the first renewal date after the date on which the applicant is licensed.
- (6) CERTIFICATION STATEMENT. At the time of each renewal, each licensee shall sign a statement certifying that, within the 2 years immediately preceding the renewal date specified under s. 440.08 (2) (a), Stats., he or she has completed the continuing education credit hours required under sub. (1).
- (7) FAILURE TO COMPLETE CONTINUING EDUCATION HOURS. A licensee who fails to complete the continuing education requirements by the renewal date specified under s. 440.08 (2) (a), Stats., shall not practice dental therapy until his or her license is restored under s. DE 2.03 (5).
- (8) TIME LIMITS ON OBTAINING CREDITS. Credit hours completed before the 2-year period immediately preceding renewal of a license to practice dental therapy may not be applied to fulfill the credit hours required under sub. (1).
- (9) RECORDKEEPING. Every licensee shall maintain a written record of the continuing education hours required under sub. (1) for not less than 6 years after completion of each credit.
- (10) WAIVER OF CONTINUING EDUCATION HOURS. The board may waive the continuing education requirements under sub. (1) if it finds that exceptional circumstances such as prolonged illness, disability, or other similar circumstances have prevented a licensee from meeting the requirements.

SECTION 46. DE 13.05 (1m) is created to read:

- **DE 13.05 (1m)** DENTAL THERAPISTS. The board accepts continuing education programs for dental therapists that satisfy the following criteria:
- (a) The subject matter of the continuing education program relates to the practice of dental therapy or the practice of medicine.
- **(b)** The continuing education program is one of the following:
- 1. Sponsored or recognized by a local, state, regional, national, or international dental, dental therapy, dental hygiene, dental assisting, or medical related professional organization.

- **2.** A college level course that is offered by a postsecondary institution accredited by the American Dental Association Commission on Dental Accreditation or a successor agency, or by another recognized accrediting body.
- **3.** A study group as specified in s. DE 13.02 (4).

SECTION 47. DE 14.01 (2) is amended to read:

DE 14.01 (2) PURPOSE. The purpose of the rules is to define the obligation of a dentist <u>or dental therapist</u> to communicate alternate modes of treatment to a patient.

SECTION 48. DE 14.02 is amended to read:

DE 14.02 Informed consent. Any dentist <u>or dental therapist</u> who treats a patient shall inform the patient about the availability of reasonable alternate modes of treatment and about the benefits and risks of these treatments prior to treating the patient. The reasonable dentist standard is the standard for informing a patient under this section. The reasonable dentist standard requires disclosure only of information that a reasonable dentist would know and disclose under the circumstances.

SECTION 49. DE 14.03 is amended to read:

DE 14.03 Recordkeeping. A dentist's <u>or dental therapist's</u> patient record shall include documentation that alternate modes of treatment have been communicated to the patient and informed consent has been obtained from the patient.

SECTION 50. DE 14.04 is amended to read:

DE 14.04 Exceptions to communication of alternate modes of treatment. A dentist <u>or dental therapist</u> is not required to disclose the types of information listed in ss. 447.40 (1) to (6), Stats.

Note: Section 447.40, Stats., reads: "Any dentist <u>or dental therapist</u> who treats a patient shall inform the patient about the availability of reasonable alternate modes of treatment and about the benefits and risks of these treatments. The reasonable dentist standard is the standard for informing a patient under this section. The reasonable dentist standard requires disclosure only of information that a reasonable dentist would know and disclose under the circumstances. The dentist's <u>or dental therapist's</u> duty to inform the patient under this section does not require disclosure of any of the following: (1) Detailed technical information that in all probability a patient would not understand. (2) Risks apparent or known to the patient. (3) Extremely remote possibilities that might falsely or detrimentally alarm the patient. (4) Information in emergencies where failure to provide treatment would be more harmful to the patient than treatment. (5) Information in cases where the patient is incapable of consenting. (6) Information about alternate modes of treatment for any condition the dentist or dental therapist has not included in his or her

diagnosis, assessment, or treatment plan at the time the dentist or dental therapist informs the patient.

SECTION 51. DE 15.06 (intro.) is amended to read:

DE 15.06 Dentist responsibility for the administration of nitrous oxide inhalation analgesia. A <u>dentist may delegate to a</u> dental hygienist <u>may administer the administration</u> of nitrous oxide inhalation analgesia only if all of the following requirements are met:

SECTION 52. DE 15.07 is created to read:

- **DE 15.07 Dental therapist delegation of the administration of nitrous oxide inhalation analgesia. (1)** In this section, "supervising dentist" has the meaning given in s. DE 17.01 (6).
- (2) Pursuant to the requirements under ss. 447.06 (2) (e) and 447.065 (2), Stats., a dental therapist may delegate to a dental hygienist the administration of nitrous oxide inhalation analgesia only if all of the following requirements are met:
- (a) The nitrous oxide inhalation analgesia is administered pursuant to a treatment plan approved by the dentist.
- **(b)** The dentist remains on the premises.
- (c) The dentist is available to the patient throughout the completion of the appointment.
- (d) The dental therapist has the authority to perform the activity personally, pursuant to the requirements under s. 447.06 (3) (bm) 1. and 2., Stats.
- (e) The dental therapist remains under the supervision of the supervising dentist for the duration of the procedure.
- (f) The supervising dentist has allowed the dental therapist to administer nitrous oxide inhalation analgesia within the dental therapist's collaborative management agreement, pursuant to the requirements under s. 447.06 (3) (d) 1., Stats.
- **(g)** The supervising dentist has expressly allowed the dental therapist to delegate the administration of nitrous oxide inhalation analgesia within the dental therapist's collaborative management agreement, pursuant to the requirements under s. 447.06 (3) (d) 1., Stats.
- (3) In sub. (2), the dentist who approves the treatment plan and remains available to the patient may be a different dentist than the supervising dentist for the dental therapist.
- (4) The dental therapist and the dental therapist's supervising dentist shall be responsible for any services, treatments, or procedures delegated and performed under sub. (2).

Chapter DE 17

PRACTICE OF DENTAL THERAPY

DE 17.01 Definitions. In this chapter:

- (1) "Dental health shortage area" has the meaning given in s. 36.60 (1) (ad), Stats.
- (2) "Direct supervision" means that the supervising dentist or supervising dental therapist is present in the dental office or other practice setting, personally diagnoses the condition to be treated, personally authorizes each procedure, and before dismissal of the patient, evaluates the performance of the supervised dental personnel.
- (3) "General supervision" means that the supervising dentist is not present in the dental office or other practice setting or on the premises at the time tasks or procedures are being performed by the supervised dental personnel, but that the tasks or procedures performed by the supervised dental personnel are being performed with the prior knowledge and consent of the dentist.
- (4) "Indirect supervision" means that the supervising dentist is present in the dental office or other practice setting, authorizes each procedure, and remains in the office while the procedures are being performed by the supervised dental personnel.
- (5) "Medical Assistance patient" means a patient who is a recipient of services under the Medical Assistance program under subch. IV of ch. 49, Stats.
- (6) "Supervising dentist" means a licensed dentist supervising a dental therapist under a collaborative management agreement described in s. DE 17.03 (5).
- (7) "Uninsured patient" means a patient who lacks dental health coverage, either through a public health care program or private insurance, and has an annual gross family income equal to or less than 200 percent of the federal poverty guidelines.
- **DE 17.02 Scope of Practice. (1)** The scope of practice of a dental therapist shall, subject to the terms of a collaborative management agreement, be limited to providing the following services, treatments, and procedures:
- (a) Oral evaluation and assessment of dental disease and formulation of an individualized treatment plan.
- (aa) Identification of oral and systemic conditions requiring evaluation or treatment by dentists, physicians, or other health care providers and managing referrals.

- **(b)** Comprehensive charting of the oral cavity.
- **(bb)** Oral health instruction and disease prevention education, including nutritional counseling and dietary analysis.
- (c) Exposure and evaluation of radiographic images.
- (d) Dental prophylaxis, including subgingival scaling and polishing procedures.
- **(e)** Dispensing and administration via the oral or topical route of nonnarcotic analgesic, anti-inflammatory, and antibiotic medications as prescribed by a licensed health care provider.
- **(f)** Application of topical preventive or prophylactic agents, including fluoride varnish, antimicrobial agents, caries arresting medicaments, and pit and fissure sealants.
- (g) Pulp vitality testing.
- **(h)** Application of desensitizing medications or resins.
- (i) Fabrication of athletic mouth guards and soft occlusal guards.
- (j) Changing of periodontal dressings.
- (k) Administration of local anesthetic and nitrous oxide.
- (I) Simple extraction of erupted primary teeth.
- (m) Nonsurgical extraction of periodontally diseased permanent teeth with tooth mobility of +3 to +4 to the extent authorized in the dental therapist's collaborative management agreement, except for the extraction of a tooth that is unerupted, impacted, or fractured or that needs to be sectioned for removal.
- (n) Emergency palliative treatment of dental pain limited to the procedures in this paragraph.
- (o) Preparation and placement of direct restoration in primary and permanent teeth.
- (p) Fabrication and placement of single-tooth temporary crowns.
- (q) Preparation and placement of preformed crowns on primary teeth.
- (r) Indirect and direct pulp capping on permanent teeth.
- (s) Indirect pulp capping on primary teeth.

- (t) Intraoral suture placement and removal.
- (u) Minor adjustment and repair of removable prostheses.
- (v) Placement and removal of space maintainers.
- (w) Pulpotomy on primary teeth.
- (x) Tooth reimplantation and stabilization.
- (y) Recementing of a permanent crown.
- (z) The performance of dental hygiene, as defined in s. 447.01 (3), Stats.
- (2) Notwithstanding sub. (1), a dental therapist shall, except as provided in sub. (3), limit his or her practice of dental therapy to providing the services, treatments, and procedures covered by his or her dental therapy education program.
- (3) If any service, treatment, or procedure under sub. (1) was not covered by a dental therapist's dental therapy education program, the dental therapist may provide that service, treatment, or procedure if the dental therapist has subsequently received additional dental therapy educational training to provide that service, treatment, or procedure.
- **DE 17.03 Dentist supervision of dental therapists. (1)** Except as provided in sub. (2), a dental therapist licensed under ch. DE 2 may provide dental therapy services in this state only under the direct supervision or indirect supervision of a supervising dentist.
- (2) (a) Once a dental therapist licensed under ch. DE 2 has provided dental therapy services for at least 2,000 hours under direct supervision or indirect supervision, the dental therapist may be eligible to provide dental therapy services in this state under the general supervision of a supervising dentist, subject to the terms of a collaborative management agreement described in s. DE 17.03 (5).
- (b) For purposes of the 2,000 hours requirement under par. (a), hours may include hours of providing dental therapy services in this state under direct supervision or indirect supervision of a supervising dentist as described in sub. (1) or hours of providing dental therapy services under direct supervision or indirect supervision while licensed as a dental therapist outside this state, but may not include any hours completed prior to graduating from the dental therapy education program.
- (3) Notwithstanding subs. (1) and (2), the level of supervision for a dental therapist may be further limited under the terms of a collaborative management agreement under sub. (5).

- (4) A supervising dentist shall accept responsibility for all services performed by a dental therapist pursuant to a collaborative management agreement described in sub. (5). If services needed by a patient are beyond the dental therapist's scope of practice or authorization under the collaborative management agreement, the dental therapist shall, to the extent required under the collaborative management agreement, consult with the supervising dentist as needed to arrange for those services to be provided by a dentist or another qualified health care provider.
- (5) Prior to providing any dental therapy services, a dental therapist shall enter into a written collaborative management agreement with a licensed dentist who will serve as a supervising dentist under the requirements of this chapter. The dentist must be licensed in this state and must be actively involved in direct patient care in this state, to the satisfaction of the board. The agreement must be signed by the dental therapist and the supervising dentist and address all of the following:
- (a) The practice settings where services may be provided and the patient populations that may be served.
- **(b)** Consistent with and subject to s. DE 17.02 and subs. (1) to (4), any conditions or limitations on the services that may be provided by the dental therapist, the level of supervision required, and any circumstances requiring consultation with the supervising dentist prior to performing services.
- (c) Age-specific and procedure-specific practice protocols.
- (d) Dental record-keeping procedures.
- (e) Plans for managing dental or medical emergencies.
- (f) A quality assurance plan for monitoring care provided by the dental therapist.
- (g) Protocols for administering and dispensing medications.
- (h) Criteria or protocols relating to the provision of care to patients with specific medical conditions, treatments, or medications.
- (i) Policies relating to supervision of dental hygienists and other staff.
- (j) A plan for the referral of patients to other dental or health care providers or clinics when services needed are beyond the scope of practice or authorization of the dental therapist.
- (k) Whether and to what extent the dental therapist may perform services described in s. DE 17.02 (1) (m).

- (6) A collaborative management agreement shall be limited to covering one supervising dentist and one dental therapist.
- (7) A dental therapist may enter into multiple collaborative management agreements.
- (8) No supervising dentist may have collaborative management agreements with more than 4 dental therapists at any time.
- **DE 17.04 Dental therapist employment. (1)** A dental therapist may, subject to sub. (3), provide dental therapy services only as an employee of one or more of the following that satisfies sub. (2):
- (a) A dentist with whom the dental therapist has entered into a collaborative management agreement.
- **(b)** A dental practice.
- (c) A school district or the operator of a private school, as defined in s. 115.001 (3r), Stats., or a tribal school, as defined in s. 115.001 (15m), Stats.
- (d) The operator of a school for the education of dentists or dental hygienists.
- (e) A state or federal prison, a county jail, or other federal, state, county, or municipal correctional or detention facility, or a facility established to provide care for terminally ill patients.
- (f) A local health department, as defined in s. 250.01 (4), Stats.
- **(g)** A charitable institution open to the general public or to members of a religious sect or order.
- **(h)** A nonprofit home health care agency.
- (i) The operator of a nonprofit dental care program serving primarily indigent, economically disadvantaged, or migrant worker populations.
- (j) A health care employer, as defined in s. 440.094 (1) (b), Stats.
- (2) A dentist may not enter into a collaborative management agreement with a dental therapist unless the dentist directly employs the dental therapist as provided in sub. (1) (a) or the dentist is employed by or contracts with the dental therapist's employer described in sub. (1) (b) to (j).
- (3) A dental therapist shall at all times comply with at least one of the following:

(a) Limit his or her practice to practicing in one or more dental health shortage areas. If a dental therapist begins practicing in a dental health shortage area, and that area loses its designation as a dental health shortage area while the dental therapist continues to practice in that area, the dental therapist is considered to satisfy this paragraph as long as the dental therapist continues to practice in that area.

Note: "Dental health shortage area" has the meaning given in s. 36.60 (1) (ad), Stats.

- **(b)** Practice in one or more settings in which at least 50 percent of the total patient base of the dental therapist consists of patients who are any of the following:
- 1. Medical Assistance patients.
- 2. Uninsured patients.
- **3.** Patients receiving dental care at free and charitable clinics.

Note: Free and charitable clinics can be found at: <u>Find a Clinic - Wisconsin Association</u> of Free & Charitable Clinics (wafcelinics.org).

4. Patients receiving dental care at federally qualified health centers.

Note: Federally qualified health centers can be found at: <u>Find a Community Health</u> Center | WPHCA | Wisconsin Primary Health Care Association.

- **5.** Patients who reside in long-term care facilities.
- **6.** Veterans.
- 7. Patients who are members of a federally recognized Indian tribe or band.
- **8.** Patients receiving dental care at clinics or facilities located on tribal lands.
- **9.** Patients with medical disabilities or chronic conditions that create barriers of access to dental care.
- (4) A dental therapist is responsible for verifying and proving that his or her practice areas comply with the practice areas and settings described in sub. (3).

DE 17.05 Dental therapist supervision of other dental staff. (1) Dental therapist supervision of dental hygienists.

(a) A dental therapist may authorize a dental hygienist to practice dental hygiene under the requirements of s. 447.06 (2), Stats., and ch. DE 3.

- **(b)** A dental therapist may delegate to a dental hygienist the performance of remediable procedures under the requirements of ss. 447.06 (2) and 447.065 (2), Stats., and ch. DE 3 only if all of the following conditions are met:
- 1. The supervising dentist has allowed the dental therapist to perform the specific remediable procedure within the dental therapist's collaborative management agreement, pursuant to the requirements under s. 447.06 (3) (d) 1., Stats.
- 2. The supervising dentist has expressly allowed the dental therapist to delegate the specific remediable procedure within the dental therapist's collaborative management agreement, pursuant to the requirements under s. 447.06 (3) (d) 1., Stats.
- **3.** The dental therapist has the authority to perform the specific remediable procedure personally, pursuant to the requirements under s. 447.06 (3) (bm) 1. and 2., Stats.
- **4.** The dental hygienist remains under the direct supervision of the dental therapist for the duration of the procedure.
- (c) The dental therapist and the dental therapist's supervising dentist shall be responsible for any services, treatments, or procedures delegated and performed under par. (b).
- (d) A dental therapist may delegate to a dental hygienist the administration of oral systemic premedications, local anesthesia, subgingival sustained release chemotherapeutic agents, and nitrous oxide inhalation analgesia under the requirements of ss. 447.06 (2) (e) and 447.065 (2), Stats., and chs. DE 3, DE 7, and DE 15 only if all of the following conditions apply:
- 1. The administration is performed pursuant to a treatment plan for the patient approved by a dentist.
- **2.** The dentist remains on the premises in which the administration is performed and is available to the patient throughout the completion of the appointment.
- **3.** The dental therapist has the authority to perform the activity personally, pursuant to the requirements under s. 447.06 (3) (bm) 1. and 2., Stats.
- **4.** The dental therapist remains under the supervision of the supervising dentist for the duration of the procedure.
- **5.** The supervising dentist has allowed the dental therapist to perform the administration personally within the dental therapist's collaborative management agreement, pursuant to the requirements under s. 447.06 (3) (d) 1., Stats.
- **6.** The supervising dentist has expressly allowed the dental therapist to delegate the administration within the dental therapist's collaborative management agreement, pursuant to the requirements under s. 447.06 (3) (d) 1., Stats.

- (e) In par. (d), the dentist who approves the treatment plan and remains available to the patient may be a different dentist than the supervising dentist for the dental therapist.
- (f) The dental therapist and the dental therapist's supervising dentist shall be responsible for any services, treatments, or procedures delegated and performed under par. (d).
- (2) DENTAL THERAPIST SUPERVISION OF UNLICENSED STAFF. (a) A dental therapist may delegate to an unlicensed person the performance of remediable procedures under the requirements of s. 447.065 (1), Stats., and ch. DE 12 only if all of the following conditions apply:
- **1.** The unlicensed individual performs the remediable procedures in accordance with a treatment plan approved by the dentist or dental therapist.
- **2.** The unlicensed individual remains under the direct supervision of the dental therapist for the duration of the procedure.
- **3.** The unlicensed individual's performance of the remediable procedures is subject to inspection by the dentist or dental therapist.
- **4.** The dental therapist has the authority to perform the activity personally, pursuant to the requirements under s. 447.06 (3) (bm) 1. and 2., Stats.
- **5.** The supervising dentist has allowed the dental therapist to perform the specific remediable procedure within the dental therapist's collaborative management agreement, pursuant to the requirements under s. 447.06 (3) (d) 1., Stats.
- **6.** The supervising dentist has expressly allowed the dental therapist to delegate the specific remediable procedure within the dental therapist's collaborative management agreement, pursuant to the requirements under s. 447.06 (3) (d) 1., Stats.
- **(b)** In par. (a), the dentist who approves the treatment plan and may inspect the performance of the remediable procedures may be a different dentist than the supervising dentist for the dental therapist.
- (c) The dental therapist and the dental therapist's supervising dentist shall be responsible for any services, treatments, or procedures delegated and performed under par. (a).
- (3) DENTAL THERAPIST SUPERVISION OF EXPANDED FUNCTION DENTAL AUXILIARIES. Pursuant to the requirements under s. 447.035, Stats., a dental therapist may not supervise or delegate procedures to expanded function dental auxiliaries.
- (4) LIMITATION BY COLLABORATIVE MANAGEMENT AGREEMENT. Notwithstanding subs. (1) and (2), a dental therapist's authorization to supervise or delegate procedures to other

dental staff is subject to further limitation by the collaborative management agreement described in s. DE 17.03 (5).

(5) DENTAL THERAPIST RESPONSIBILITY FOR DELEGATED PROCEDURES. A dental therapist who delegates to another individual the performance of any practice or procedure is responsible for that individual's performance of that delegated practice or procedure.

SECTION 54. EFFECTIVE DATE. The rules adopted in this order shall take effect on the first day of the month following publication in the Wisconsin Administrative Register, pursuant to s. 227.22 (2) (intro.), Stats.

(END OF TEXT OF RULE)

This Proposed Order of the Dentistry Examining Board is approved for submission to the Governor and Legislature.

Dated ______ Agency _____ Chairperson
Dentistry Examining Board

State of Wisconsin Department of Safety & Professional Services

AGENDA REQUEST FORM

1) Name and title of person submitting the request:			2) Date when request submitted:		
Jake Pelegrin			12/20/24		
Administrative Rules Coordinator			Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting		
3) Name of Board, Committee, Council, Sections:					
Dentistry Examining Board					
4) Meeting Date:	5) 6) How should the item be titled on the agenda page?				
1/8/25	Attachments: Administrative Rule Matters – Discussion and Consideration			s – Discussion and Consideration	
	⊠ Yes	1. Discussion of Clearinghouse Report and public hearing comments for DE 1 to 17			
	☐ No	rule on Dental Therapy			
			2. Presentation of new scope statement for DE 1, 5, and 6 on Unprofessional Advertising		
		3. Discussion of rule drafting for DE 5, 8, and 14 rule on Informed Consent			
		4. Discussion of Biennial Rules Report under s. 227.29 (1) Stats., on board rules			
		5. which may be unauthorized, obsolete, or duplicative			
7) Place Item in:) Place Item in: 8) Is an appearance before the Board b			ing projects 9) Name of Case Advisor(s), if required:	
,	scheduled? (If yes, please complete		, , , ,		
Open Session	Appearance Request for Non-DSPS			N/A	
☐ Closed Session ☐ Yes					
	☐ Tes ⊠ No				
10) Describe the issue and action that should be addressed:					
Attachments: -Clearinghouse Report and Final Rule Draft for Dental Therapy -Proposed new scope statement for DE 1, 5, and 6 on Unprofessional Advertising -Preliminary rule draft for DE 5, 8, and 14 on Informed Consent -Dentistry Rules Chart					
11) Authorization					
Jake Pelegrin				12/20/24	
Signature of person making this request				Date	
Supervisor (if required)				Date	
Executive Director signature (indicates approval to add post agenda deadline item to agenda) Date					
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda.					
 Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. If necessary, provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting. 					

STATE OF WISCONSIN DENTISTRY EXAMINING BOARD

IN THE MATTER OF RULEMAKING

PROPOSED ORDER OF THE

PROCEEDINGS BEFORE THE

: DENTISTRY EXAMINING BOARD

DENTISTRY EXAMINING BOARD

ADOPTING RULES

(CLEARINGHOUSE RULE

PROPOSED ORDER

A proposed order of the Dentistry Examining Board to **amend** DE 1.01, DE 2.005 (intro.), DE 2.013, DE 2.03 (3), 2.03 (4), DE 2.03 (5) (a), DE 2.03 (5) (b), DE 2.03 (5) (b) 3. b., DE 2.03 (6), DE 2.035 (2) and (2) (e), DE 3.01, DE 3.02 (1) (b), DE 3.02 (1) (c), DE 3.02 (1) (c) 2., DE 3.02 (2) (a) 2., DE 5.02 (intro.), (5), (9), (14), (14m), (15), (20), and (24), DE 6.02 (4) (b), DE 7.04 (3) (b) (Note), DE 8.02 (1), DE 8.035, DE 10.01 (1), DE 10.02 (1) (b), 1., b., and 2., DE 10.02 (2) (c), DE 10.02 (3) (c), DE 10.045, DE 11.10 (3m) (g) (Note), DE 12.01 (intro.), DE 12.02, DE 12.03, DE 13.01, DE 13.02 (3) and (4), DE 14.01 (2), DE 14.02, DE 14.03, DE 14.04, and DE 15.06 (intro.); and to **create** DE 1.02 (4g) and (4r), DE 2.01 (3), DE 2.02 (2m), DE 2.03 (2m), DE 2.04 (3), DE 3.02 (1), (am), (d), and (e), DE 3.04 (2m), (4), (5), and (6), DE 5.02 (21m), DE 5.02 (28), DE 6.03, DE 7.06 (1), (2), (3), and (4), DE 12.04, DE 13.035, DE 13.05 (1m), DE 15.07, and chapter DE 17 relating to Licensure of Dental Therapists.

Analysis prepared by the Department of Safety and Professional Services.

ANALYSIS

Statutes interpreted: Section 447.02 (1) (g), Stats.

Statutory authority: Sections 15.08 (5) (b), 447.02 (1) (a), (1) (b), (1) (g), and 447.02 (2) (a), Stats.

Explanation of agency authority:

Section 15.08 (5) (b), Stats., provides that an examining board "[s]hall promulgate rules for its own guidance and for the guidance of the trade or profession to which it pertains, and define and enforce professional conduct and unethical practices not inconsistent with the law relating to the particular trade or profession."

Section 447.02 (1) (a), Stats., states that the examining board may promulgate rules "[g]overning the reexamination of an applicant who fails an examination specified in s. 447.04 (1) (a) 5., (1m) (e), or (2) (a) 5. The rules may specify additional education requirements for those applicants and may specify the number of times an applicant may be examined."

Section 447.02 (1) (b), Stats., states that the examining board may promulgate rules "[g]overning the standards and conditions for the use of radiation and ionizing equipment in the practice of dentistry or dental therapy."

Section 447.02 (1) (g), Stats., states that the examining board may promulgate rules "Specifying services, treatments, or procedures, in addition to those specified under s. 447.06 (3) (b) 1. to 27., that are included within the practice of dental therapy."

Section 447.02 (2) (a), Stats., states that the examining board shall promulgate rules specifying "[t]he conditions for supervision and the degree of supervision required under ss. 447.03 (3) (a), (am), (b) and (d) 2. and 447.065."

2023 Wisconsin Act 87, Section 65 (2) (a) provides that "The dentistry examining board shall promulgate emergency rules under s. 227.24 that are necessary to implement this act. Notwithstanding s. 227.24 (1) (c) and (2), emergency rules promulgated under this paragraph remain in effect for 2 years, or until the date on which permanent rules take effect, whichever is sooner."

Related statute or rule:

2023 Wisconsin Act 87.

Plain language analysis:

The objective of the proposed rule is to implement the statutory changes from 2023 Wisconsin Act 87, providing for the licensure and regulation of dental therapists in Wisconsin. The rule integrates dental therapists into the current code chapters DE 1 to 16 and creates chapter DE 17. The rule sets the licensure application requirements and continuing education requirements for dental therapists. It clarifies and specifies their scope of practice. It clarifies and specifies the regulations for supervision from a supervising dentist, and the ability of a dental therapist to supervise other staff.

Summary of, and comparison with, existing or proposed federal regulation:

None.

Comparison with rules in adjacent states:

Illinois:

Illinois statutes and codes do not provide for licensure of dental therapists.

Iowa:

Iowa statutes and codes do not provide for licensure of dental therapists.

Michigan:

Michigan law provides for licensure and regulation of dental therapists [MCL 333.16651 to 16659]. Their scope of practice includes a list of 27 dental therapy services including identifying conditions, dispensing medications prescribed by a health care professional, teeth cleaning, and other basic dental procedures. Their dental therapists can practice only under the supervision of a supervising dentist. The supervising dentist and dental therapist must create a written agreement to agree to the services and procedures the dental therapist is allowed to do. This written practice agreement must be fairly detailed and is regulated by a variety of provisions in Michigan law. Essentially, the supervising dentist has a fair amount of authority over what they will allow the dental therapist to do.

Michigan rules further specify a dental therapist's scope of practice and conditions of supervision [Michigan Rules R 338.11415 to 11417]. For supervision, the supervisor does not always need to be physically present in the office, but must be continuously available by telephone or telecommunication, Also, a dental therapist may supervise dental assistants and dental hygienists (to the extent permitted in the written practice agreement).

Minnesota:

Minnesota law provides for licensure and regulation of dental therapists and advanced dental therapists [2023 Minnesota Statutes, parts 150A.105 to 106]. Their scope of practice is limited to a similar list of 30 dental therapy services and procedures. However, in Minnesota's list, 14 of the more intensive procedures are required to be done under a level of supervision where the supervising dentist is physically present in the office (but doesn't need to be in the room). The remaining 16 less-intensive procedures are allowed to be done if the supervising dentist is not present in the office. However, these are minimums and the supervision can be more direct, as agreed on in the collaborative management agreement between the dental therapist and the supervising dentist. Like Michigan, the requirements for their collaborative management agreements specifies a large level of detail to be agreed on in writing between the two parties. Dental therapists may supervise dental assistants, but not dental hygienists.

Advanced dental therapists have increased education requirements but have a slightly wider scope of practice. In addition to the scope of practice described above, they can also perform nonsurgical extractions of permanent teeth. Also, all their services and procedures are allowed to be done under a level of supervision where the supervising dentist is not present in the office.

Minnesota administrative rules further specify licensure requirements for dental therapists but make minimal other additions to the regulations already in Minnesota statute [Minnesota Rules parts 3100.1170 to 1180].

Summary of factual data and analytical methodologies:

The board reviewed code chapters DE 1 to 16 to determine what changes need to be made due to 2023 Wisconsin Act 87. Additionally, the board decided to create chapter DE 17 to further specify practice requirements for dental therapists.

Fiscal Estimate:

The Fiscal Estimate and Economic Impact are attached.

Analysis and supporting documents used to determine effect on small business or in preparation of economic impact analysis:

The proposed rules were posted for a period of 14 days to solicit public comment on economic impact, including how the proposed rules may affect businesses, local government units, and individuals. No comments were received.

Effect on small business:

These proposed rules do not have an economic impact on small businesses, as defined in s. 227.114 (1), Stats. The Department's Regulatory Review Coordinator may be contacted at Jennifer.Garrett@wisconsin.gov or (608) 266-2112.

Agency contact person:

Jake Pelegrin, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, 4822 Madison Yards Way, P.O. Box 8366, Madison, Wisconsin 53708; telephone 608-267-0989; email at DSPSAdminRules@wisconsin.gov.

Place where comments are to be submitted and deadline for submission:

Comments may be submitted to Jake Pelegrin, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, 4822 Madison Yards Way, P.O. Box 8366, Madison, WI 53708-8366, or by email to DSPSAdminRules@wisconsin.gov. Comments must be received on or before the public hearing to be included in the record of rule-making proceedings.

TEXT OF RULE

SECTION 1. DE 1.01 is amended to read:

DE 1.01 Authority. The provisions in chs. DE 1 to $\frac{1617}{2}$ are adopted pursuant to authority in ss. 15.08 (5) and 227.11 (2) (a), Stats., and ch. 447, Stats.

SECTION 2. DE 1.02 (4g) is created to read:

DE 1.02 (4g) "Dental therapist" means an individual who practices dental therapy.

SECTION 3. DE 1.02 (4r) is created to read:

DE 1.02 (4r) "Dental therapy" means the limited practice of dentistry, consisting of the services, treatments, and procedures specified in s. 447.06 (3) (b), Stats., and s. DE 17.02 (1).

SECTION 4. DE 2.005 (intro.) is amended to read:

DE 2.005 Dental testing service and dental hygiene testing Testing service requirements. A dental therapy, testing service or dental hygiene testing service may be approved if all the testing service's exams meet all of the following requirements:

SECTION 5. DE 2.01 (3) is created to read:

- **DE 2.01 (3)** An applicant for license as a dental therapist shall meet the requirements in sub. (1) (a) and (c) and shall also submit to the board:
- (a) Evidence satisfactory to the board that the applicant has graduated from an accredited dental therapy education program, or other requirements in s. 447.04 (1m) (c), Stats.

Note: For all acceptable education requirements, see s. 447.04 (1m) (c), Stats.

- **(b)** Evidence satisfactory to the board that the applicant has passed a national board dental therapy examination and a dental therapy clinical examination administered by a regional testing service that has been approved by the board to administer clinical examinations for dental professionals. If a national board examination or a regional testing service examination for dental therapy does not exist, the board shall accept evidence of passing an alternative examination administered by another entity or testing service that is approved by the board.
- (c) Evidence of successful completion of an examination administered by the board on the statutes and rules relating to dental therapy.
- (d) Evidence satisfactory to the board the applicant has current proficiency in cardiopulmonary resuscitation, including the use of an automated external defibrillator achieved through instruction provided by an individual, organization, or institution of higher education approved under s. 46.03 (38), Stats., to provide such instruction.
- (e) If applicable, information relating to the applicant's licensure in other jurisdictions as required by the examining board.

SECTION 6. DE 2.013 is amended to read:

DE 2.013 Student supervision. A dental student under s. 447.03 (3) (a), Stats., <u>a dental therapy student under s. 447.03 (3) (am), Stats.</u>, or a dental hygiene student under s.

447.03 (3) (b), Stats., is required to practice under the supervision of a dentist who is present in the facility in which the practice occurs.

SECTION 7. DE 2.02 (2m) is created to read:

DE 2.02 (2m) Every person granted a license as a dental therapist shall be deemed licensed for the current biennial license period.

SECTION 8. DE 2.03 (2m) is created to read:

DE 2.03 (2m) REQUIREMENTS FOR RENEWAL; DENTAL THERAPISTS. A dental therapist shall by October 1 of the odd-numbered year following initial licensure and every 2 years thereafter, meet the requirements for renewal specified in sub. (1) (a) to (d).

SECTION 9. DE 2.03 (3) is amended to read:

DE 2.03 (3) FAILURE TO MEET REQUIREMENTS. A dentist, dental therapist, or dental hygienist who fails to meet the requirements under subs. (1) (a) to (d), and (2), and (2m) by the renewal date shall cease and desist from dental, dental therapy, or dental hygiene practice.

SECTION 10. DE 2.03 (4) is amended to read:

DE 2.03 (4) NEW LICENSEES. Dentists, dental therapists, and dental hygienists are not required to satisfy the continuing education requirements under sub. (1) (d) for the first renewal period following the issuance of their initial licenses.

SECTION 11. DE 2.03 (5) (a) is amended to read:

DE 2.03 (5) (a) A dentist, dental therapist, or dental hygienist who files an application for renewal of a license within 5 years after the renewal date may renew his or her license by filing with the board all of the following:

SECTION 12. DE 2.03 (5) (b) is amended to read:

DE 2.03 (5) (b) This paragraph does not apply to dentists, dental therapists, or dental hygienists who have unmet disciplinary requirements. A dentist, dental therapist, or dental hygienist renewing the license after 5 years shall do all of the following:

SECTION 13. DE 2.03 (5) (b) 3. b. is amended to read:

DE 2.03 (5) (b) 3. b. If a dentist <u>or dental therapist</u>, successful completion of a board approved testing service examination within one year of renewal.

SECTION 14. DE 2.03 (6) is amended to read:

DE 2.03 (6) REINSTATEMENT. A dentist, dental therapist, or dental hygienist who has unmet disciplinary requirements and failed to renew the license within 5 years or whose license has been denied at renewal, surrendered or revoked may apply to have the license reinstated following submission of all of the following:

SECTION 15. DE 2.035 (2) and (2) (e) are amended to read:

- **DE 2.035 (2)** Each applicant for reciprocal licensure as a dentist, dental therapist, or dental hygienist shall submit all of the following:
- **(e)** Evidence that the applicant is in good standing with the governmental authorities in every jurisdiction outside this state that have granted the applicant a license, certification, registration, or permit that qualifies the individual to perform acts authorized under a dentist, dental therapist, or dental hygienist license granted by the board.

SECTION 16. DE 2.04 (3) is created to read:

- **DE 2.04 (3)** The board may grant a license as a dental therapist to an applicant who holds a valid license in good standing issued by the proper authorities of any other jurisdiction of the United States or Canada upon payment of the fee as determined by the department under s. 440.03 (9) (a), Stats., and submission of evidence satisfactory to the board that all of the following conditions are met:
- (a) The applicant has graduated from an accredited dental therapy education program.
- **(b)** The applicant submits a certificate from each jurisdiction in which the applicant is or has ever been licensed stating that no disciplinary action is pending against the applicant or the license, and detailing all discipline, if any, which has ever been imposed against the applicant or the license.
- (c) The applicant has successfully completed a licensing examination that, in the board's judgment, is substantially equivalent to an examination administered by a board approved testing service.
- (d) The applicant has successfully completed a jurisprudence examination on the provisions of Wisconsin statutes and administrative rules relating to dental therapy.
- (e) The applicant possesses a current certificate of proficiency in cardiopulmonary resuscitation from a course provider approved by the Wisconsin department of health services.
- (f) The applicant has disclosed all discipline which has ever been taken against the applicant in any jurisdiction shown in reports from the national practitioner data bank and the American Association of Dental Boards.

(g) The applicant has presented satisfactory responses during any personal interview with the board which may be required to resolve conflicts between the licensing standards and the applicant's application.

SECTION 17. DE 3.01 is amended to read:

DE 3.01 Supervision. A dental hygienist shall practice under the supervision of a licensed dentist <u>or dental therapist</u> in a dental facility or a facility specified in s. 447.06 (2), Stats., if applicable.

SECTION 18. DE 3.02 (1) (b) is amended to read:

DE 3.02 (1) (b) A dental hygienist may practice dental hygiene or perform remediable procedures only as authorized by a licensed dentist <u>or dental therapist</u> who is present in the facility in which those practices or procedures are performed, except as provided in par. (c).

SECTION 19. DE 3.02 (1) (c) is amended to read:

DE 3.02 (1) (c) A dental hygienist may practice dental hygiene or perform remediable procedures if a licensed dentist <u>or dental therapist</u> is not present in the facility in which those practices or procedures are performed only if all of the following conditions are met:

SECTION 20. DE 3.02 (1) (c) 2. is amended to read:

DE 3.02 (1) (c) 2. The dentist <u>or dental therapist</u> who made the written or oral prescription has examined the patient at least once during the 12-month period immediately preceding all of the following:

SECTION 21. DE 3.02 (1) (am), (d), and (e) are created to read:

DE 3.02 (1) (am) In this subsection:

- 1. "Direct supervision" has the meaning given in s. DE 17.01 (2).
- **2.** "Supervising dentist" has the meaning given in s. DE 17.01 (6).
- **DE 3.02 (1) (d)** Pursuant to the requirements under s. 447.065 (2), Stats., and subject to the requirements under this subsection, a dental therapist may delegate to a dental hygienist the performance of remediable procedures only if all of the following conditions are met:
- 1. The supervising dentist has allowed the dental therapist to perform the specific remediable procedure within the dental therapist's collaborative management agreement, pursuant to the requirements under s. 447.06 (3) (d) 1., Stats.

- 2. The supervising dentist has expressly allowed the dental therapist to delegate the specific remediable procedure within the dental therapist's collaborative management agreement, pursuant to the requirements under s. 447.06 (3) (d) 1., Stats.
- **3.** The dental therapist has the authority to perform the specific remediable procedure personally, pursuant to the requirements under s. 447.06 (3) (bm) 1. and 2., Stats.
- **4.** The dental hygienist remains under the direct supervision of the dental therapist for the duration of the procedure.
- (e) The dental therapist and the dental therapist's supervising dentist shall be responsible for any services, treatments, or procedures delegated and performed under par. (d).

SECTION 22. DE 3.02 (2) (a) 2. is amended to read:

DE 3.02 (2) (a) 2. For a school for the education of dentists, dental therapists, or dental hygienists.

SECTION 23. DE 3.04 (2m), (4), (5), and (6) are created to read:

- **DE 3.04 (2m)** In this section, "supervising dentist" has the meaning given in s. DE 17.01 (6).
- **DE 3.04 (4)** Pursuant to the requirements under ss. 447.06 (2) (e) and 447.065 (2), Stats., a dental therapist may delegate to a dental hygienist the administration of oral systemic premedications and subgingival sustained release chemotherapeutic agents to patients only if all of the following conditions are met:
- (a) The administration is performed pursuant to a treatment plan for the patient approved by a dentist.
- **(b)** A dentist remains on the premises in which the administration is performed and is available to the patient throughout the completion of the appointment.
- (c) The dental therapist has the authority to perform the activity personally, pursuant to the requirements under s. 447.06 (3) (bm) 1. and 2., Stats.
- (d) The dental therapist remains under the supervision of the supervising dentist for the duration of the procedure.
- (e) The supervising dentist has allowed the dental therapist to perform the administration personally within the dental therapist's collaborative management agreement, pursuant to the requirements under s. 447.06 (3) (d) 1., Stats.

- (f) The supervising dentist has expressly allowed the dental therapist to delegate the administration within the dental therapist's collaborative management agreement, pursuant to the requirements under s. 447.06 (3) (d) 1., Stats.
- (5) In sub. (4), the dentist who approves the treatment plan and remains available to the patient may be a different dentist than the supervising dentist for the dental therapist.
- (6) The dental therapist and the dental therapist's supervising dentist shall be responsible for any services, treatments, or procedures delegated and performed under sub. (4).

SECTION 24. DE 5.02 (intro.), (5), (9), (14), (14m), (15), (20), and (24) are amended to read:

- **DE 5.02 Unprofessional conduct.** Unprofessional conduct by a dentist, dental therapist, dental hygienist, or expanded function dental auxiliary includes:
- (5) Practicing in a manner which substantially departs from the standard of care ordinarily exercised by a dentist, <u>dental therapist</u>, dental hygienist, or expanded function dental auxiliary which harms or could have harmed a patient.
- (9) Impersonating another dentist, <u>dental therapist</u>, dental hygienist, or expanded function dental auxiliary.
- (14) Having a license, certificate, permit, or registration granted by another state to practice as a dentist, dental therapist, or dental hygienist limited, suspended or revoked, or subject to any other disciplinary action.
- (14m) Surrendering, while under investigation, a license, certificate, permit, or registration granted by another state to practice as a dentist, dental therapist, dental hygienist, or expanded function dental auxiliary.
- (15) Violating any law or being convicted of a crime the circumstances of which substantially relate to the practice of a dentist, dental therapist, or dental hygienist.
- (20) Violating, or aiding or abetting the violation of any law substantially related to the practice of dentistry, <u>dental therapy</u>, dental hygiene, or the practice of an expanded function dental auxiliary.
- (24) Failing to hold a current certificate in cardiopulmonary resuscitation unless the licensee or certified individual credential holder has obtained a waiver from the board based on a medical evaluation documenting physical inability to comply. A waiver shall be issued by the board only if it is satisfied that another person with current certification in CPR is immediately available to the licensee credential holder when patients are present.

SECTION 25. DE 5.02 (21m) is created to read:

DE 5.02 (21m) Aiding or abetting or permitting unlicensed persons in the practice of dental therapy, as defined in s. 447.01 (6r), Stats.

SECTION 26. DE 5.02 (28) is created to read:

DE 5.02 (28) A dental therapist practicing outside of a practice area or setting described in s. 447.06 (3) (e), Stats., and s. DE 17.04 (3).

SECTION 27. DE 6.02 (4) (b) is amended to read:

DE 6.02 (4) (b) A name of a dentist <u>or dental therapist</u> who has not been associated with the advertising dentist <u>or dental therapist</u> for the past year or longer,

SECTION 28. DE 6.03 is created to read:

DE 6.03 Advertising limitations for dental therapists. (1) A dental therapist may not advertise as a dentist or as providing services other than dental therapy.

(2) A dentist supervising a dental therapist under a collaborative management agreement retains full responsibility for advertising by the dental therapist.

SECTION 29. DE 7.04 (3) (b) (Note) is amended to read:

Note: Applications are available upon request to the board office at 1400 East Washington Avenue, P.O. Box 8935, Madison, Wisconsin 53708. Instructions for applications are available on the department of safety and professional services' website at http://dsps.wi.gov or by calling (608) 266-2112.

SECTION 30. DE 7.06 (1), (2), (3), and (4) are created to read:

DE 7.06 (1) In this section, "supervising dentist" has the meaning given in s. DE 17.01 (6).

- (2) Pursuant to the requirements under ss. 447.06 (2) (e) and 447.065 (2), Stats., a dental therapist may delegate to a dental hygienist the administration of local anesthetic only if all of the following conditions are met:
- (a) The administration is performed pursuant to a treatment plan for the patient approved by a dentist.
- **(b)** The dentist remains on the premises in which the administration is performed and is available to the patient throughout the completion of the appointment.
- (c) The dental therapist has the authority to perform the activity personally, pursuant to the requirements under s. 447.06 (3) (bm) 1. and 2., Stats.

- (d) The dental therapist remains under the supervision of the supervising dentist for the duration of the procedure.
- (e) The supervising dentist has allowed the dental therapist to administer local anesthetic within the dental therapist's collaborative management agreement, pursuant to the requirements under s. 447.06 (3) (d) 1., Stats.
- (f) The supervising dentist has expressly allowed the dental therapist to delegate the administration of local anesthetic within the dental therapist's collaborative management agreement, pursuant to the requirements under s. 447.06 (3) (d) 1., Stats.
- (3) In sub. (2), the dentist who approves the treatment plan and remains available to the patient may be a different dentist than the supervising dentist for the dental therapist.
- (4) The dental therapist and the dental therapist's supervising dentist shall be responsible for any services, treatments, or procedures delegated and performed under sub. (2).

SECTION 31. DE 8.02 (1) is amended to read:

DE 8.02 (1) "Patient" means a person who receives dental services from a licensed dentist, dental therapist, or dental hygienist.

SECTION 32. DE 8.035 is amended to read:

DE 8.035 Preservation of patient health care records. A person who manages or controls a business that offers dental, <u>dental therapy</u>, or dental hygiene services, including management or control of a business through which the person allows another person to offer dental, <u>dental therapy</u>, or dental hygiene services, shall preserve patient health care records for at least 10 years from the date of the last entry.

SECTION 33. DE 10.01 (1) is amended to read:

DE 10.01 (1) "Mobile dentistry program" means a program providing dental hygiene as defined by s. 447.01 (3), Stats., <u>dental therapy as defined by s. 447.01 (6r)</u>, Stats., or dentistry as defined by s. 447.01 (8), Stats., excluding a health practitioner practicing within the scope of a license not governed by ch. 447, Stats., in one of the following:

SECTION 34. DE 10.02 (1) (b), 1., b., and 2. are amended to read:

- **DE 10.02 (1) (b)** A program providing dental, dental therapy, or dental hygiene care is not required to register if one of the following requirements is satisfied:
- **1.** The dental, dental therapy, or dental hygiene care is provided within a 50 mile radius of their main or satellite facility and all of the following:

- **b.** The dentist, dental therapist, or dental hygienist provides any necessary follow-up care to the patient.
- 2. The dental, dental therapy, or dental hygiene care is being provided to a new or established patient of record of the main or satellite dental facility and no more than 2 patients per day are being treated using portable equipment or a self-contained, intact facility that can be moved.

SECTION 35. DE 10.02 (2) (c) is amended to read:

DE 10.02 (2) (c) A list of all employees, contractors, or volunteers who are providing dental, <u>dental therapy</u>, or dental hygiene care in Wisconsin. The list shall include the Wisconsin license number for each person providing dental, <u>dental therapy</u>, or dental hygiene care.

SECTION 36. DE 10.02 (3) (c) is amended to read:

DE 10.02 (3) (c) A list of all employees, contractors or volunteers who are providing dental, dental therapy, or dental hygiene care in Wisconsin. The list shall include the Wisconsin license number for each person providing dental care.

SECTION 37. DE 10.045 is amended to read:

DE 10.045 Notification to department. The mobile dentistry program shall notify the department within 30 days of new employees, contractors or volunteers providing dental, dental therapy, or dental hygiene services in Wisconsin.

SECTION 38. DE 11.10 (3m) (g) (Note) is amended to read:

Note: Forms are available <u>on the department of safety and professional services' website at http://dsps.wi.gov or</u> at the office of the Dentistry Examining Board located at 1400 East Washington Avenue <u>4822 Madison Yards Way</u>, P.O. Box 8935, Madison, WI 537085.

SECTION 39. DE 12.01 (intro.) is amended to read:

DE 12.01 Nondelegated functions. A dentist <u>or dental therapist</u> may not delegate any dental procedure of any description to an unlicensed person if the procedure or function to be delegated is any of the following:

SECTION 40. DE 12.02 is amended to read:

DE 12.02 Training. A dentist <u>or dental therapist</u> who delegates any remediable dental procedure or function to an unlicensed person shall first provide training to or verify competency of the person in the performance of the procedure or function.

SECTION 41. DE 12.03 is amended to read:

- **DE 12.03 Reporting violations. (1)** A licensee shall report to the board any dentist <u>or dental therapist</u> who is improperly delegating the performance of any dental <u>or dental therapy</u> procedure or function to an unlicensed person, or is delegating to a person performing any dental <u>or dental therapy</u> procedure or function in a manner which is less than minimally competent.
- (2) A licensee who fails to report the circumstances as specified in sub. (1) constitutes aiding and abetting the violation of a law substantially related to the practice of dentistry, dental therapy, or dental hygiene, and shall be in violation of s. DE 5.02 (20), (21), (21m), or (22).

SECTION 42. DE 12.04 is created to read:

DE 12.04 Dental therapist delegation to unlicensed persons. (1) In this section:

- (a) "Direct supervision" has the meaning given in s. DE 17.01 (2).
- (b) "Supervising dentist" has the meaning given in s. DE 17.01 (6).
- (2) A dental therapist may delegate to an unlicensed person only the performance of remediable procedures, and only if all of the following conditions are met:
- (a) The unlicensed individual performs the remediable procedures in accordance with a treatment plan approved by the dentist or dental therapist.
- **(b)** The unlicensed individual remains under the direct supervision of the dental therapist for the duration of the procedure.
- (c) The unlicensed individual's performance of the remediable procedures is subject to inspection by the dentist or dental therapist.
- (d) The dental therapist has the authority to perform the activity personally, pursuant to the requirements under s. 447.06 (3) (bm) 1. and 2., Stats.
- (e) The supervising dentist has allowed the dental therapist to perform the specific remediable procedure within the dental therapist's collaborative management agreement, pursuant to the requirements under s. 447.06 (3) (d) 1., Stats.
- (f) The supervising dentist has expressly allowed the dental therapist to delegate the specific remediable procedure within the dental therapist's collaborative management agreement, pursuant to the requirements under s. 447.06 (3) (d) 1., Stats.

- (3) In sub. (2), the dentist who approves the treatment plan and may inspect the performance of the remediable procedures may be a different dentist than the supervising dentist for the dental therapist.
- (4) The dental therapist and the dental therapist's supervising dentist shall be responsible for any services, treatments, or procedures delegated and performed under sub. (2).

SECTION 43. DE 13.01 is amended to read:

DE 13.01 Authority. The rules in this chapter are adopted by the dentistry examining board under the authority of ss. 227.11 (2), 447.02 (1) (f), 447.055, and 447.056, and 447.057, Stats.

SECTION 44. DE 13.02 (3) and (4) are amended to read:

- **DE 13.02 (3)** "Professional organization" means an organization that seeks to further the dental, <u>dental therapy</u>, dental hygiene, or medical professions, the interests of licensees engaged in those professions, and the public interests. "Professional organization" includes a study group, as defined in sub. (4).
- (4) "Study group" means a group of 2 or more dentists, dental therapists, or dental hygienists who discuss continuing education topics relating to the practice of dentistry, dental therapy, or medicine, or the clinical practice of dental hygiene, and that satisfies all of the following:

SECTION 45. DE 13.035 is created to read:

- **DE 13.035 Continuing education requirements for dental therapists. (1)** COMPLETION OF CONTINUING EDUCATION CREDIT HOURS. Except as provided under sub. (5), during the 2-year period immediately preceding the renewal date specified under s. 440.08 (2) (a), Stats., a dental therapist shall complete 12 credit hours of continuing education related to the practice of dental therapy. No more than 2 of the 12 credit hours may be satisfied by training related to basic life support or cardiopulmonary resuscitation. Not less than 2 of the 12 credit hours shall include training in infection control.
- (2) PRESCRIBING CONTROLLED SUBSTANCES CONTINUING EDUCATION. If a dental therapist has a federal drug enforcement administration registration number, the 12 credit hours of continuing education shall include 2 hours in the topic of prescribing of controlled substances for the treatment of dental pain.
- (3) CREDIT FOR COLLEGE LEVEL COURSES. One credit hour of a college level course is equivalent to 6 credit hours of continuing education. A licensee may substitute credit hours of college level courses related to the practice of dentistry, dental therapy, or medicine for the required continuing education credit hours.

- (4) CREDIT FOR DISTANCE EDUCATION. The credit hours required under sub. (1) may be satisfied by independent study, correspondence, or internet programs or courses.
- (5) EXEMPTION FOR NEW LICENSEES. Subsection (1) does not apply to an applicant for renewal of a license that expires on the first renewal date after the date on which the applicant is licensed.
- (6) CERTIFICATION STATEMENT. At the time of each renewal, each licensee shall sign a statement certifying that, within the 2 years immediately preceding the renewal date specified under s. 440.08 (2) (a), Stats., he or she has completed the continuing education credit hours required under sub. (1).
- (7) FAILURE TO COMPLETE CONTINUING EDUCATION HOURS. A licensee who fails to complete the continuing education requirements by the renewal date specified under s. 440.08 (2) (a), Stats., shall not practice dental therapy until his or her license is restored under s. DE 2.03 (5).
- (8) TIME LIMITS ON OBTAINING CREDITS. Credit hours completed before the 2-year period immediately preceding renewal of a license to practice dental therapy may not be applied to fulfill the credit hours required under sub. (1).
- (9) RECORDKEEPING. Every licensee shall maintain a written record of the continuing education hours required under sub. (1) for not less than 6 years after completion of each credit.
- (10) WAIVER OF CONTINUING EDUCATION HOURS. The board may waive the continuing education requirements under sub. (1) if it finds that exceptional circumstances such as prolonged illness, disability, or other similar circumstances have prevented a licensee from meeting the requirements.

SECTION 46. DE 13.05 (1m) is created to read:

- **DE 13.05 (1m)** DENTAL THERAPISTS. The board accepts continuing education programs for dental therapists that satisfy the following criteria:
- (a) The subject matter of the continuing education program relates to the practice of dental therapy or the practice of medicine.
- **(b)** The continuing education program is one of the following:
- 1. Sponsored or recognized by a local, state, regional, national, or international dental, dental therapy, dental hygiene, dental assisting, or medical related professional organization.

- **2.** A college level course that is offered by a postsecondary institution accredited by the American Dental Association Commission on Dental Accreditation or a successor agency, or by another recognized accrediting body.
- **3.** A study group as specified in s. DE 13.02 (4).

SECTION 47. DE 14.01 (2) is amended to read:

DE 14.01 (2) PURPOSE. The purpose of the rules is to define the obligation of a dentist <u>or dental therapist</u> to communicate alternate modes of treatment to a patient.

SECTION 48. DE 14.02 is amended to read:

DE 14.02 Informed consent. Any dentist <u>or dental therapist</u> who treats a patient shall inform the patient about the availability of reasonable alternate modes of treatment and about the benefits and risks of these treatments prior to treating the patient. The reasonable dentist standard is the standard for informing a patient under this section. The reasonable dentist standard requires disclosure only of information that a reasonable dentist would know and disclose under the circumstances.

SECTION 49. DE 14.03 is amended to read:

DE 14.03 Recordkeeping. A dentist's <u>or dental therapist's</u> patient record shall include documentation that alternate modes of treatment have been communicated to the patient and informed consent has been obtained from the patient.

SECTION 50. DE 14.04 is amended to read:

DE 14.04 Exceptions to communication of alternate modes of treatment. A dentist <u>or dental therapist</u> is not required to disclose the types of information listed in ss. 447.40 (1) to (6), Stats.

Note: Section 447.40, Stats., reads: "Any dentist <u>or dental therapist</u> who treats a patient shall inform the patient about the availability of reasonable alternate modes of treatment and about the benefits and risks of these treatments. The reasonable dentist standard is the standard for informing a patient under this section. The reasonable dentist standard requires disclosure only of information that a reasonable dentist would know and disclose under the circumstances. The dentist's <u>or dental therapist's</u> duty to inform the patient under this section does not require disclosure of any of the following: (1) Detailed technical information that in all probability a patient would not understand. (2) Risks apparent or known to the patient. (3) Extremely remote possibilities that might falsely or detrimentally alarm the patient. (4) Information in emergencies where failure to provide treatment would be more harmful to the patient than treatment. (5) Information in cases where the patient is incapable of consenting. (6) Information about alternate modes of treatment for any condition the dentist or dental therapist has not included in his or her

diagnosis, assessment, or treatment plan at the time the dentist or dental therapist informs the patient.

SECTION 51. DE 15.06 (intro.) is amended to read:

DE 15.06 Dentist responsibility for the administration of nitrous oxide inhalation analgesia. A <u>dentist may delegate to a</u> dental hygienist <u>may administer the administration</u> of nitrous oxide inhalation analgesia only if all of the following requirements are met:

SECTION 52. DE 15.07 is created to read:

- **DE 15.07 Dental therapist delegation of the administration of nitrous oxide inhalation analgesia. (1)** In this section, "supervising dentist" has the meaning given in s. DE 17.01 (6).
- (2) Pursuant to the requirements under ss. 447.06 (2) (e) and 447.065 (2), Stats., a dental therapist may delegate to a dental hygienist the administration of nitrous oxide inhalation analgesia only if all of the following requirements are met:
- (a) The nitrous oxide inhalation analgesia is administered pursuant to a treatment plan approved by the dentist.
- **(b)** The dentist remains on the premises.
- (c) The dentist is available to the patient throughout the completion of the appointment.
- (d) The dental therapist has the authority to perform the activity personally, pursuant to the requirements under s. 447.06 (3) (bm) 1. and 2., Stats.
- (e) The dental therapist remains under the supervision of the supervising dentist for the duration of the procedure.
- (f) The supervising dentist has allowed the dental therapist to administer nitrous oxide inhalation analgesia within the dental therapist's collaborative management agreement, pursuant to the requirements under s. 447.06 (3) (d) 1., Stats.
- (g) The supervising dentist has expressly allowed the dental therapist to delegate the administration of nitrous oxide inhalation analysis within the dental therapist's collaborative management agreement, pursuant to the requirements under s. 447.06 (3) (d) 1., Stats.
- (3) In sub. (2), the dentist who approves the treatment plan and remains available to the patient may be a different dentist than the supervising dentist for the dental therapist.
- (4) The dental therapist and the dental therapist's supervising dentist shall be responsible for any services, treatments, or procedures delegated and performed under sub. (2).

Chapter DE 17

PRACTICE OF DENTAL THERAPY

DE 17.01 Definitions. In this chapter:

- (1) "Dental health shortage area" has the meaning given in s. 36.60 (1) (ad), Stats.
- (2) "Direct supervision" means that the supervising dentist or supervising dental therapist is present in the dental office or other practice setting, personally diagnoses the condition to be treated, personally authorizes each procedure, and before dismissal of the patient, evaluates the performance of the supervised dental personnel.
- (3) "General supervision" means that the supervising dentist is not present in the dental office or other practice setting or on the premises at the time tasks or procedures are being performed by the supervised dental personnel, but that the tasks or procedures performed by the supervised dental personnel are being performed with the prior knowledge and consent of the dentist.
- (4) "Indirect supervision" means that the supervising dentist is present in the dental office or other practice setting, authorizes each procedure, and remains in the office while the procedures are being performed by the supervised dental personnel.
- (5) "Medical Assistance patient" means a patient who is a recipient of services under the Medical Assistance program under subch. IV of ch. 49, Stats.
- (6) "Supervising dentist" means a licensed dentist supervising a dental therapist under a collaborative management agreement described in s. DE 17.03 (5).
- (7) "Uninsured patient" means a patient who lacks dental health coverage, either through a public health care program or private insurance, and has an annual gross family income equal to or less than 200 percent of the federal poverty guidelines.
- **DE 17.02 Scope of Practice. (1)** The scope of practice of a dental therapist shall, subject to the terms of a collaborative management agreement, be limited to providing the following services, treatments, and procedures:
- (a) Oral evaluation and assessment of dental disease and formulation of an individualized treatment plan.
- (aa) Identification of oral and systemic conditions requiring evaluation or treatment by dentists, physicians, or other health care providers and managing referrals.

- **(b)** Comprehensive charting of the oral cavity.
- **(bb)** Oral health instruction and disease prevention education, including nutritional counseling and dietary analysis.
- (c) Exposure and evaluation of radiographic images.
- (d) Dental prophylaxis, including subgingival scaling and polishing procedures.
- **(e)** Dispensing and administration via the oral or topical route of nonnarcotic analgesic, anti-inflammatory, and antibiotic medications as prescribed by a licensed health care provider.
- **(f)** Application of topical preventive or prophylactic agents, including fluoride varnish, antimicrobial agents, caries arresting medicaments, and pit and fissure sealants.
- (g) Pulp vitality testing.
- **(h)** Application of desensitizing medications or resins.
- (i) Fabrication of athletic mouth guards and soft occlusal guards.
- (j) Changing of periodontal dressings.
- (k) Administration of local anesthetic and nitrous oxide.
- (I) Simple extraction of erupted primary teeth.
- (m) Nonsurgical extraction of periodontally diseased permanent teeth with tooth mobility of +3 to +4 to the extent authorized in the dental therapist's collaborative management agreement, except for the extraction of a tooth that is unerupted, impacted, or fractured or that needs to be sectioned for removal.
- (n) Emergency palliative treatment of dental pain limited to the procedures in this paragraph.
- (o) Preparation and placement of direct restoration in primary and permanent teeth.
- (p) Fabrication and placement of single-tooth temporary crowns.
- (q) Preparation and placement of preformed crowns on primary teeth.
- (r) Indirect and direct pulp capping on permanent teeth.
- (s) Indirect pulp capping on primary teeth.

- (t) Intraoral suture placement and removal.
- (u) Minor adjustment and repair of removable prostheses.
- (v) Placement and removal of space maintainers.
- (w) Pulpotomy on primary teeth.
- (x) Tooth reimplantation and stabilization.
- (y) Recementing of a permanent crown.
- (z) The performance of dental hygiene, as defined in s. 447.01 (3), Stats.
- (2) Notwithstanding sub. (1), a dental therapist shall, except as provided in sub. (3), limit his or her practice of dental therapy to providing the services, treatments, and procedures covered by his or her dental therapy education program.
- (3) If any service, treatment, or procedure under sub. (1) was not covered by a dental therapist's dental therapy education program, the dental therapist may provide that service, treatment, or procedure if the dental therapist has subsequently received additional dental therapy educational training to provide that service, treatment, or procedure.
- **DE 17.03 Dentist supervision of dental therapists. (1)** Except as provided in sub. (2), a dental therapist licensed under ch. DE 2 may provide dental therapy services in this state only under the direct supervision or indirect supervision of a supervising dentist.
- (2) (a) Once a dental therapist licensed under ch. DE 2 has provided dental therapy services for at least 2,000 hours under direct supervision or indirect supervision, the dental therapist may be eligible to provide dental therapy services in this state under the general supervision of a supervising dentist, subject to the terms of a collaborative management agreement described in s. DE 17.03 (5).
- **(b)** For purposes of the 2,000 hours requirement under par. (a), hours may include hours of providing dental therapy services in this state under direct supervision or indirect supervision of a supervising dentist as described in sub. (1) or hours of providing dental therapy services under direct supervision or indirect supervision while licensed as a dental therapist outside this state, but may not include any hours completed prior to graduating from the dental therapy education program.
- (3) Notwithstanding subs. (1) and (2), the level of supervision for a dental therapist may be further limited under the terms of a collaborative management agreement under sub. (5).

- (4) A supervising dentist shall accept responsibility for all services performed by a dental therapist pursuant to a collaborative management agreement described in sub. (5). If services needed by a patient are beyond the dental therapist's scope of practice or authorization under the collaborative management agreement, the dental therapist shall, to the extent required under the collaborative management agreement, consult with the supervising dentist as needed to arrange for those services to be provided by a dentist or another qualified health care provider.
- (5) Prior to providing any dental therapy services, a dental therapist shall enter into a written collaborative management agreement with a licensed dentist who will serve as a supervising dentist under the requirements of this chapter. The dentist must be licensed in this state and must be actively involved in direct patient care in this state, to the satisfaction of the board. The agreement must be signed by the dental therapist and the supervising dentist and address all of the following:
- (a) The practice settings where services may be provided and the patient populations that may be served.
- **(b)** Consistent with and subject to s. DE 17.02 and subs. (1) to (4), any conditions or limitations on the services that may be provided by the dental therapist, the level of supervision required, and any circumstances requiring consultation with the supervising dentist prior to performing services.
- (c) Age-specific and procedure-specific practice protocols.
- (d) Dental record-keeping procedures.
- (e) Plans for managing dental or medical emergencies.
- (f) A quality assurance plan for monitoring care provided by the dental therapist.
- (g) Protocols for administering and dispensing medications.
- **(h)** Criteria or protocols relating to the provision of care to patients with specific medical conditions, treatments, or medications.
- (i) Policies relating to supervision of dental hygienists and other staff.
- (j) A plan for the referral of patients to other dental or health care providers or clinics when services needed are beyond the scope of practice or authorization of the dental therapist.
- (k) Whether and to what extent the dental therapist may perform services described in s. DE 17.02 (1) (m).

- (6) A collaborative management agreement shall be limited to covering one supervising dentist and one dental therapist.
- (7) A dental therapist may enter into multiple collaborative management agreements.
- (8) No supervising dentist may have collaborative management agreements with more than 4 dental therapists at any time.
- **DE 17.04 Dental therapist employment. (1)** A dental therapist may, subject to sub. (3), provide dental therapy services only as an employee of one or more of the following that satisfies sub. (2):
- (a) A dentist with whom the dental therapist has entered into a collaborative management agreement.
- **(b)** A dental practice.
- (c) A school district or the operator of a private school, as defined in s. 115.001 (3r), Stats., or a tribal school, as defined in s. 115.001 (15m), Stats.
- (d) The operator of a school for the education of dentists or dental hygienists.
- (e) A state or federal prison, a county jail, or other federal, state, county, or municipal correctional or detention facility, or a facility established to provide care for terminally ill patients.
- (f) A local health department, as defined in s. 250.01 (4), Stats.
- **(g)** A charitable institution open to the general public or to members of a religious sect or order.
- **(h)** A nonprofit home health care agency.
- (i) The operator of a nonprofit dental care program serving primarily indigent, economically disadvantaged, or migrant worker populations.
- (j) A health care employer, as defined in s. 440.094 (1) (b), Stats.
- (2) A dentist may not enter into a collaborative management agreement with a dental therapist unless the dentist directly employs the dental therapist as provided in sub. (1) (a) or the dentist is employed by or contracts with the dental therapist's employer described in sub. (1) (b) to (j).
- (3) A dental therapist shall at all times comply with at least one of the following:

(a) Limit his or her practice to practicing in one or more dental health shortage areas. If a dental therapist begins practicing in a dental health shortage area, and that area loses its designation as a dental health shortage area while the dental therapist continues to practice in that area, the dental therapist is considered to satisfy this paragraph as long as the dental therapist continues to practice in that area.

Note: "Dental health shortage area" has the meaning given in s. 36.60 (1) (ad), Stats.

- **(b)** Practice in one or more settings in which at least 50 percent of the total patient base of the dental therapist consists of patients who are any of the following:
- 1. Medical Assistance patients.
- 2. Uninsured patients.
- **3.** Patients receiving dental care at free and charitable clinics.

Note: Free and charitable clinics can be found at: <u>Find a Clinic - Wisconsin Association</u> of Free & Charitable Clinics (wafcelinics.org).

4. Patients receiving dental care at federally qualified health centers.

Note: Federally qualified health centers can be found at: <u>Find a Community Health</u> Center | WPHCA | Wisconsin Primary Health Care Association.

- **5.** Patients who reside in long-term care facilities.
- **6.** Veterans.
- 7. Patients who are members of a federally recognized Indian tribe or band.
- **8.** Patients receiving dental care at clinics or facilities located on tribal lands.
- **9.** Patients with medical disabilities or chronic conditions that create barriers of access to dental care.
- (4) A dental therapist is responsible for verifying and proving that his or her practice areas comply with the practice areas and settings described in sub. (3).

DE 17.05 Dental therapist supervision of other dental staff. (1) Dental therapist supervision of dental hygienists.

(a) A dental therapist may authorize a dental hygienist to practice dental hygiene under the requirements of s. 447.06 (2), Stats., and ch. DE 3.

- **(b)** A dental therapist may delegate to a dental hygienist the performance of remediable procedures under the requirements of ss. 447.06 (2) and 447.065 (2), Stats., and ch. DE 3 only if all of the following conditions are met:
- 1. The supervising dentist has allowed the dental therapist to perform the specific remediable procedure within the dental therapist's collaborative management agreement, pursuant to the requirements under s. 447.06 (3) (d) 1., Stats.
- 2. The supervising dentist has expressly allowed the dental therapist to delegate the specific remediable procedure within the dental therapist's collaborative management agreement, pursuant to the requirements under s. 447.06 (3) (d) 1., Stats.
- **3.** The dental therapist has the authority to perform the specific remediable procedure personally, pursuant to the requirements under s. 447.06 (3) (bm) 1. and 2., Stats.
- **4.** The dental hygienist remains under the direct supervision of the dental therapist for the duration of the procedure.
- (c) The dental therapist and the dental therapist's supervising dentist shall be responsible for any services, treatments, or procedures delegated and performed under par. (b).
- (d) A dental therapist may delegate to a dental hygienist the administration of oral systemic premedications, local anesthesia, subgingival sustained release chemotherapeutic agents, and nitrous oxide inhalation analgesia under the requirements of ss. 447.06 (2) (e) and 447.065 (2), Stats., and chs. DE 3, DE 7, and DE 15 only if all of the following conditions apply:
- **1.** The administration is performed pursuant to a treatment plan for the patient approved by a dentist.
- **2.** The dentist remains on the premises in which the administration is performed and is available to the patient throughout the completion of the appointment.
- **3.** The dental therapist has the authority to perform the activity personally, pursuant to the requirements under s. 447.06 (3) (bm) 1. and 2., Stats.
- **4.** The dental therapist remains under the supervision of the supervising dentist for the duration of the procedure.
- **5.** The supervising dentist has allowed the dental therapist to perform the administration personally within the dental therapist's collaborative management agreement, pursuant to the requirements under s. 447.06 (3) (d) 1., Stats.
- **6.** The supervising dentist has expressly allowed the dental therapist to delegate the administration within the dental therapist's collaborative management agreement, pursuant to the requirements under s. 447.06 (3) (d) 1., Stats.

- (e) In par. (d), the dentist who approves the treatment plan and remains available to the patient may be a different dentist than the supervising dentist for the dental therapist.
- (f) The dental therapist and the dental therapist's supervising dentist shall be responsible for any services, treatments, or procedures delegated and performed under par. (d).
- (2) DENTAL THERAPIST SUPERVISION OF UNLICENSED STAFF. (a) A dental therapist may delegate to an unlicensed person the performance of remediable procedures under the requirements of s. 447.065 (1), Stats., and ch. DE 12 only if all of the following conditions apply:
- **1.** The unlicensed individual performs the remediable procedures in accordance with a treatment plan approved by the dentist or dental therapist.
- **2.** The unlicensed individual remains under the direct supervision of the dental therapist for the duration of the procedure.
- **3.** The unlicensed individual's performance of the remediable procedures is subject to inspection by the dentist or dental therapist.
- **4.** The dental therapist has the authority to perform the activity personally, pursuant to the requirements under s. 447.06 (3) (bm) 1. and 2., Stats.
- **5.** The supervising dentist has allowed the dental therapist to perform the specific remediable procedure within the dental therapist's collaborative management agreement, pursuant to the requirements under s. 447.06 (3) (d) 1., Stats.
- **6.** The supervising dentist has expressly allowed the dental therapist to delegate the specific remediable procedure within the dental therapist's collaborative management agreement, pursuant to the requirements under s. 447.06 (3) (d) 1., Stats.
- **(b)** In par. (a), the dentist who approves the treatment plan and may inspect the performance of the remediable procedures may be a different dentist than the supervising dentist for the dental therapist.
- (c) The dental therapist and the dental therapist's supervising dentist shall be responsible for any services, treatments, or procedures delegated and performed under par. (a).
- (3) DENTAL THERAPIST SUPERVISION OF EXPANDED FUNCTION DENTAL AUXILIARIES. Pursuant to the requirements under s. 447.035, Stats., a dental therapist may not supervise or delegate procedures to expanded function dental auxiliaries.
- (4) LIMITATION BY COLLABORATIVE MANAGEMENT AGREEMENT. Notwithstanding subs. (1) and (2), a dental therapist's authorization to supervise or delegate procedures to other

dental staff is subject to further limitation by the collaborative management agreement described in s. DE 17.03 (5).

(5) DENTAL THERAPIST RESPONSIBILITY FOR DELEGATED PROCEDURES. A dental therapist who delegates to another individual the performance of any practice or procedure is responsible for that individual's performance of that delegated practice or procedure.

SECTION 54. EFFECTIVE DATE. The rules adopted in this order shall take effect on the first day of the month following publication in the Wisconsin Administrative Register, pursuant to s. 227.22 (2) (intro.), Stats.					
	(END OF TEXT (OF RULE)			
This Proposed Order o Governor and Legislat	,	Board is approved for submission to the			
Dated	Agency				
		Chairperson			
		Dentistry Examining Board			

STATEMENT OF SCOPE

DENTISTRY EXAMINING BOARD

Rule No.:	_DE 1, 5, and 6
Relating to:	Unprofessional Advertising
Rule Type:	Permanent

1. Finding/nature of emergency (Emergency Rule only):

N/A

2. Detailed description of the objective of the proposed rule:

The objective of the proposed rule is to clarify and add detail to the regulations on unprofessional advertising for dentists, which may include revisions to DE 1, 5, and 6.

3. Description of the existing policies relevant to the rule, new policies proposed to be included in the rule, and an analysis of policy alternatives:

The Board has identified a need to clarify the rules on unprofessional advertising for dentists. Current rules are unclear if it is allowed for a general dentist to advertise as having a credential for a dental specialty, such as orthodontist or oral surgeon. The Board will consider updating the code to clarify whether this is allowed.

An alternative would be not to revise the code, which would leave the requirements unclear and can create confusion for licensees, patients, and regulators.

4. Detailed explanation of statutory authority for the rule (including the statutory citation and language):

Section 15.08 (5) (b), Stats., provides that an examining board "[s]hall promulgate rules for its own guidance and for the guidance of the trade or profession to which it pertains, and define and enforce professional conduct and unethical practices not inconsistent with the law relating to the particular trade or profession."

Section 227.11 (2) (a), Stats., provides that "[e]ach agency may promulgate rules interpreting the provisions of any statute enforced or administered by the agency, if the agency considers it necessary to effectuate the purpose of the statute, but a rule is not valid if the rule exceeds the bounds of correct interpretation."

Section 447.07 (3), Stats: "...the examining board may make investigations and conduct hearings in regard to any alleged action of any dentist, dental therapist, dental hygienist, or expanded function dental auxiliary, of a mobile dentistry program registrant, or of any other person it has reason to believe is engaged in or has engaged in the practice of dentistry, dental therapy, or dental hygiene, or the operation of a mobile dentistry program, in this state, and may, on its own motion, or upon complaint in writing, reprimand any dentist, dental therapist, dental hygienist, or expanded function dental auxiliary who is licensed or certified under this subchapter or who holds a compact privilege, or any mobile dentistry program registrant, or deny, limit, suspend, or revoke his or her license, certificate, or compact privilege, or the registration of the mobile dentistry program registrant, if it finds that the dentist, dental therapist, dental hygienist, expanded function dental auxiliary, or mobile dentistry program registrant has done any of the following:

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447.07 (3) (m) Made a substantial misrepresentation in the course of practice that was relied upon by a client.

447.07 (3) (o) Advertised by using a statement that tends to deceive or mislead the public."

5. Estimate of amount of time that state employees will spend developing the rule and of other resources necessary to develop the rule:

Approximately 80 hours.

6. List with description of all entities that may be affected by the proposed rule:

Licensed dentists and their patients.

7. Summary and preliminary comparison with any existing or proposed federal regulation that is intended to address the activities to be regulated by the proposed rule:

None.

8. Anticipated economic impact of implementing the rule (note if the rule is likely to have a significant economic impact on small businesses):

The proposed rule will have minimal to no economic impact on small businesses and the state's economy as a whole.

Contact Person: Jake Pelegrin, Administrative Rule Coordinator, DSPSAdminRules@wisconsin.gov, (608) 267-0989.

Approved for publication:	Approved for implementation:		
Authorized Signature	Authorized Signature		
Date Submitted	Date Submitted		

STATE OF WISCONSIN DENTISTRY EXAMINING BOARD

IN THE MATTER OF RULEMAKING PROPOSED ORDER OF THE PROCEEDINGS BEFORE THE : DENTISTRY EXAMINING BOARD

DENTISTRY EXAMINING BOARD **ADOPTING RULES**

(CLEARINGHOUSE RULE

PROPOSED ORDER

A proposed order of the Dentistry Examining Board to amend DE 5, 8, and 14 relating to informed consent.

Analysis prepared by the Department of Safety and Professional Services.

ANALYSIS

Statutes interpreted: Section 447.40, Stats.

Statutory authority: Sections 15.08 (5) (b), 227.11 (2) (a), 447.02 (2), 447.02 (2) (i), and 447.40, Stats.

Explanation of agency authority:

Section 15.08 (5) (b), Stats., provides that an examining board "[s]hall promulgate rules for its own guidance and for the guidance of the trade or profession to which it pertains, and define and enforce professional conduct and unethical practices not inconsistent with the law relating to the particular trade or profession."

Section 227.11 (2) (a), Stats., provides that "[e]ach agency may promulgate rules interpreting the provisions of any statute enforced or administered by the agency, if the agency considers it necessary to effectuate the purpose of the statute, but a rule is not valid if the rule exceeds the bounds of correct interpretation."

Sections 447.02 (2) and 447.02 (2) (i), Stats.: "The examining board shall promulgate rules specifying all of the following: (i) Provisions implementing s. 447.40."

Section 447.40, Stats.: "Informed consent. Any dentist or dental therapist who treats a patient shall inform the patient about the availability of reasonable alternate modes of treatment and about the benefits and risks of these treatments. The reasonable dentist standard is the standard for informing a patient under this section. The reasonable dentist standard requires disclosure only of information that a reasonable dentist would know and disclose under the circumstances. The dentist's or dental therapist's duty to inform the patient under this section does not require disclosure of any of the following:

(1) Detailed technical information that in all probability a patient would not understand.

- (2) Risks apparent or known to the patient.
- (3) Extremely remote possibilities that might falsely or detrimentally alarm the patient.
- (4) Information in emergencies where failure to provide treatment would be more harmful to the patient than treatment.
- (5) Information in cases where the patient is incapable of consenting.
- (6) Information about alternate modes of treatment for any condition the dentist or dental therapist has not included in his or her diagnosis, assessment, or treatment plan at the time the dentist or dental therapist informs the patient."

Related statute or rule: None.

Plain language analysis:

The objective of the proposed rule is to clarify the regulations on informed consent for dental patients, which may include revisions to DE 5, 8, and 14. The Board has identified a need to clarify the rules on informed consent for dental patients. Current rules are unclear on whether a verbal informed consent or a written, signed informed consent is required for various procedures. The Board will consider updating the code to clarify when a signed informed consent is required, and when a verbal informed consent is acceptable.

Summary of, and comparison with, existing or proposed federal regulation: None.

Summary of public comments received on statement of scope and a description of how and to what extent those comments and feedback were taken into account in drafting the proposed rule: N/A

Comparison with rules in adjacent states:

Illinois: In Illinois, medical patients have "The right of each patient to care consistent with sound nursing and medical practices, to be informed of the name of the physician responsible for coordinating his or her care, to receive information concerning his or her condition and proposed treatment, to refuse any treatment to the extent permitted by law, and to privacy and confidentiality of records except as otherwise provided by law" [410 Illinois Compiled Statutes 50/3(a)]. This applies to dental patients.

Iowa: Iowa law requires informed consent as follows: "*Informed consent*. Dental records shall include, at a minimum, documentation of informed consent that includes discussion of procedure(s), treatment options, potential complications and known risks, and patient's consent to proceed with treatment" [650 Iowa Administrative Code 27.11 (1) (e)]. It does not specify whether verbal or written informed consent is required, so it is presumed that verbal informed consent is allowed.

Michigan: In Michigan, at the inception of care for a patient, both of the following must occur: "Each dentist, dental therapist, dental assistant, registered dental assistant, and registered dental hygienist shall identify himself or herself to the patient as a dentist, dental therapist, dental assistant, registered dental assistant, or registered dental hygienist," and "the patient shall be provided with a written consent for treatment" [Michigan Administrative Rules R 338.11103].

Minnesota: In Minnesota, the dental records for each patient must include a notation that: "the dentist, advanced dental therapist, dental therapist, dental hygienist, or licensed dental assistant discussed with the patient the treatment options and the prognosis, benefits, and risks of each treatment that is within the scope of practice of the respective licensee" and "the patient has consented to the treatment chosen" [Minnesota Administrative Rules 3100.9600]. It does not specify whether verbal or written informed consent is required, so it is presumed that verbal informed consent is allowed.

Summary of factual data and analytical methodologies: The Board reviewed Wisconsin Administrative Code chapters DE 5, 8, and 14 to determine where changes were needed to update regulations on informed consent.

Analysis and supporting documents used to determine effect on small business or in preparation of economic impact analysis:

The proposed rules will be posted for a period of 14 days to solicit public comment on economic impact, including how the proposed rules may affect businesses, local government units, and individuals.

Fiscal Estimate and Economic Impact Analysis:

The Fiscal Estimate and Economic Impact Analysis will be attached upon completion.

Effect on small business:

These proposed rules do not have an economic impact on small businesses, as defined in s. 227.114 (1), Stats. The Department's Regulatory Review Coordinator may be contacted by email at Jennifer.Garrett@wisconsin.gov, or by calling (608) 266-2112.

Agency contact person:

Jake Pelegrin, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, 4822 Madison Yards Way, P.O. Box 8366, Madison, Wisconsin 53708; telephone 608-267-0989; email at DSPSAdminRules@wisconsin.gov.

TEXT OF RULE

SECTION 1. DE 14.02 (1) is created to read:

DE 14.02 (1) For tooth extraction procedures, the dentist shall present to the patient a written informed consent document for the patient's informed consent to the procedure

and containing the information required under this section. The patient shall sign the document.

OR

SECTION 1. DE 14.02 (1) is created to read:

DE 14.02 (1) For all treatment plans, the dentist shall present to the patient a written informed consent document for the patient's informed consent to the treatment plan and containing the information required under this section. The patient shall sign the document.

SECTION 2. DE 14.03 (1) is created to read:

DE 14.03 (1) A dentist's patient record shall include the written, signed informed consent document for any tooth extraction procedures.

OR

SECTION 2. DE 14.03 (1) is created to read:

DE 14.03 (1) A dentist's patient record shall include the written, signed informed consent document for all treatment plans.

SECTION 3. DE 14.03 is amended to read:

DE 14.03 Recordkeeping. A dentist's patient record shall include documentation that alternate modes of treatment have been communicated to the patient in writing and documentation that the patient has signed the document to indicate their informed consent has been obtained from the patient.

SECTION 3. EFFECTIVE DATE. The rules adopted in this order shall take effect on the first day of the month following publication in the Wisconsin Administrative Register, pursuant to s. 227.22 (2) (intro.), Stats.

(END OF TEXT OF RULE)

This Proposed Order of the Dentistry Examining Board is approved for submission to the Governor and Legislature.

Dated	
	Chair
	Dentistry Examining Board

Dentistry Examining Board Rule Projects

Clearinghouse Rule Number	Scope #	Scope Implementation	Scope Expiration	Code Chapter Affected	Relating clause	Current Stage	Next Step
EmR 2410	031-24	3/29/2024	9/18/2026	DE 1 to 17	Dental Therapists (Emergency)	Emergency rule effective on 7/26/24, first published in the Register on 8/12/24.	Emergency rule effective.
	031-24	3/29/2024	9/18/2026	DE 1 to 17	Dental Therapists	Board discussion of Clearinghouse comments and public comments.	Board approval of final rule draft.
	053-24	7/16/2024	11/20/2026	DE 1 to 17	Dentist and Dental Hygienist Compact	Rule drafting.	Board approval of prelim rule draft.
	054-24	7/16/2024	11/20/2026	DE 5, 8, and 14	Informed Consent	Rule drafting.	Board approval of prelim rule draft.
				DE 1, 5, and 6	Unprofessional Advertising	Presentation of new scope statement to the board.	Approval of scope statement and next steps for scope implementation.

State of Wisconsin Department of Safety & Professional Services

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request:		2) Date When Request Submitted: 12/20/2024			
Dr. Bistan, Chair					
					red late if submitted after 4:30 p.m. and less than: ays before the meeting for Medical Board
					ays before the meeting for all others
3) Name of Board, Com	mittee, Co	ouncil, Sections:			
Dentistry Examin	ing Boa	ırd			
4) Meeting Date:	5) Attac	hments:	6) How	should the item be ti	tled on the agenda page?
		anding Licensum Onneutonities Discussion and			
01/06/2024	Expanding Licensure Opportunities – Discussion and Consideration				Opportunities – Discussion and
7) Place Item in:		8) Is an appearan			9) Name of Case Advisor(s), if required:
		scheduled?			
☐ Closed Session		☐ Vee /Fill out	Doord Ar	oneerenee Demueet)	
□ Both □ Yes (Fill out Board Appearanc			opearance Request)		
10) Describe the issue a	nd action		drooped:		
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11)		A	Authoriza	tion	
Signature of person making this request				Date	
Supervisor (if required)			Date		
For Configuration (Configuration Linear Land Land Land Land Land Land Land Land					
Executive Director signature (indicates approval to add post agenda deadline item to agenda) Date					
Directions for including supporting documents:					
1. This form should be					y Development Executive Director.
					e to the Board Admin Specialist prior to the
start of a meeting	29				The second secon