The Maryland State Board of Dental Examiners

In accordance with § 2-1246 of the State Government Article, on the implementation of recommendations of the Department of Legislative Services contained in the Sunset Evaluation Report dated October 2004.

<u>Report required by HB 420/ch. 373(2), 2005</u> (MSAR # 2727)

REPORT OF THE MARYLAND STATE BOARD OF DENTAL EXAMINERS IN RESPONSE TO THE 2004 SUNSET REVIEW

As recommended by the 2004 sunset review of the Maryland State Board of Dental Examiners (the "Board") and enacted by House Bill 420 of the 2005 session of the Maryland General Assembly, the Board is reporting to the Senate Education, Health and Environmental Affairs Committee and the House Health and Government Operations Committee. The Board submits the following report in response to the recommendations of the Department of Legislative Services contained in the Sunset Review: Evaluation of the State Board of Dental Examiners dated October 2004.

• Direct dental hygiene issues to the Dental Hygiene Committee.

The Board has implemented a more regimented system for handling dental hygiene matters and making appropriate referrals to the Dental Hygiene Committee. The Board's Dental Hygiene Committee consists of three registered dental hygienists, one dentist, and one consumer member. The dental hygienist coordinator, a Board employee, staffs the Committee. The dental hygienist coordinator initially reviews dental hygienist's applications for licensure, renewal, reinstatement, and reactivation, performs data entry, and prepares an agenda for the Committee. The Committee reviews submitted documentation and makes recommendations to the Board. The Committee meets once a month. The entire process from initial review by the dental hygienist coordinator through Committee approval takes approximately four to six weeks.

• Promulgate regulations regarding the additional duties of Dental Hygienists.

With the continuing evolution of dental procedures, the Board periodically reviews additional duties it believes dental hygienists may perform. The Scope of Practice Committee and the Rules and Regulations Committee have periodically made recommendations to the board regarding the scope of practice of all licensees. From time to time dental hygiene issues are presented to and considered by the board.

• Reduce backlog in complaints and better handle more complex cases by increasing investigative staff and hiring a Dental Compliance Officer.

On July 3, 2002, the Board hired a licensed dentist to act as dental compliance officer to supervise the Discipline Unit. The Discipline Unit consists of the dental compliance officer, case manager, three investigators, and a compliance secretary. The Board employed only one investigator from July 30, 2003 until March 29, 2006, when a second investigator was hired. On May 3, 2006, a third investigator was hired. The investigative team is now fully staffed. The Board notes that there are presently 15 dentists with varying specialties serving as reviewers and expert witnesses under an annual contract with the Board to review and testify in discipline cases.

The Board receives an average of 21 new complaints each month. Complaint information is entered into the Board's database, a case number is assigned, and a file is opened. The Board's Discipline Review Committee reviews the file and reports its recommendations to the full Board for vote. Typically the Board will vote to close the case without further action, request a response and records, or assign the case to an investigator for investigation. Once the Board has obtained all necessary documents it may close the case, take informal action such as writing an Advisory Letter to the licensee, or refer the case to the Office of the Attorney General for prosecution. If the case is charged by the Board Prosecutor it is usually resolved by a formal Consent Order or Final Order if the matter proceeds to a hearing.

The Board's mission is to protect the citizens of Maryland through its enforcement of the State's dental laws. With a full investigative staff, the Board has made significant progress to better handle its complex cases and curtail additional backlogs. (See DHMH Units of Measurement Chart below).

Disciplinary Activities	FY04 Actual	FY05 Actual	FY06 Actual
Complaints Pending From Previous Year	112	209	167
New Complaints Received	343	278	253
Cases Under Investigation	455	487	50
Cases Referred to Office of the Attorney General	20	54	20
Cases Closed Without Action	129	157	24
Formal Action Taken	5	10	11
Informal Action Taken	92	99	103
Unresolved Complaints Carried to Next Fiscal Year	209	167	126

The Discipline Unit continually evaluates its complaint handling procedures to improve efficiency. In addition, the Board is presently arranging to have public orders entered within the previous three years accessible on its website by the end of the calendar year.

• Review complaint and disciplinary process promulgate regulations.

The Board outlined procedures and licensee rights. The regulations specify such issues as confidentiality standards, right to counsel, discovery procedures, permitted motions, burden of proof, and appellate rights. In its Spring 2006 Newsletter the Board outlined specific areas of concern and provided recommendations to dentists to avoid complaints. In addition, the Board's Winter 2005 Newsletter was devoted entirely to a detailed discussion of the Board's discipline process.

• Newsletter distributed at least twice a year.

In December 2005, the Board hired an executive director to replace the former executive director who resigned in August 2005. The new executive director has made notable progress in addressing administrative issues. He has accomplished the following:

a) Met personally with a number of other health occupation board's executive directors and key personnel at DHMH to discuss shared areas of concern.

- b) Established an on-line licensing system for dentists and dental hygienists, which commenced with the June 30, 2006 biennial renewal. Procedures have been implemented to establish on-line licensure for dental radiation technologists beginning with their March 1, 2007 renewal.
- c) Hired two full time health occupations investigators, a dental assistant coordinator, and an office clerk II. The Board currently has a full staff of 16 employees.
- d) Published the Board's Newsletter distributed to licensees in the Spring 2006. Plans are underway for distributing a Newsletter in the Winter 2007.
- e) Arranged for on site Telephone Training /Customer Relations Enhancement for all Board employees presented through the DHMH Training Division.
- f) Conducts monthly staff meetings to discuss significant issues and maintain efficient operations.
- g) Commencing in September 2006 established procedures for Board staff to present annual reports to the Board. The reports foster accountability and assist Board members in understanding the Board's day to day operations. The presentations were especially helpful for new Board members.

• Licensure Renewal Process Produces Excessive Workload in Summer Months

The Board collaborated with the Board of Physicians, Board of Nursing, Board of Pharmacy, Maryland Health Care Commission (MHCC), Maryland State Archives, Information Technology (IT) Department-DHMH, the Office of Inspector General, the Legislative Auditors, and the State Treasurer's Office to implement on line licensing. On May 1, 2006, the Board met its goal to implement an on line license renewal system, 73% of dentists and 78% of dental hygienists renewed on line. Overall the program was highly successful with 75% of all eligible dentists and dental hygienists renewing on-line. The Board was very pleased that renewal licenses were mailed within 24 to 48 hours after successful completion of the on line application. Dentists and dental hygienists whose renewal period was June 30, 2006 indicated that the on-line renewal instructions and processes adopted by the Board were clear and effective. (see survey below).

License Renewal Evaluation Panel							
QUESTION 1 How clear were the instructions for completing the information requested on the renewal application?							
Excellent 317			Poor 11	Unknown O			
<u>QUESTION 2</u> How well did you understand the need for all of the information requested in the renewal application?							
Excellent 337		Fair 54	Poor 14	Unknown O			
<u>QUESTION 3</u> How easy was the online license renewal web site to use?							

<i>Very</i> 353	Somewhat 236	Not 45	Confusing 13				
<u>QUESTION 4</u> Was the information requested in a logical manner?							
Excellent 356	<i>Good</i> 236		Fair 43	Poor 12	Unknown O		
<u>QUESTION 5</u> Did you experience any technical difficulties using the online renewal application?							
Many 36	<i>Few</i> 255	<i>None</i> 353					
QUESTION 6 How would you rate the efficiency of the renewal process?							
Excellent 293	<i>Good</i> 248		Fair 62	Poor 29	Unknown 8		
QUESTION 7 How would y	ou describe	the tir	meliness of	the renewal	licensure process?		
Excellent 284	<i>Good</i> 237		Fair 68	Poor 31	Unknown 24		
QUESTION 8 How long did it take for you to complete the online application?							
5 min or le 30	ess 15 mi 189	.n	<i>30 min</i> 225	<i>45 min</i> 88	<i>More</i> 114		

• Lag on Timely Issuance of New and Renewal Licenses

The Board purchased License 2000, a software package designed to process licenses, complaints, and disciplinary action. The system streamlines licensure processing when completed applications and appropriate fees are paid. Installation of the on-line licensure renewal system has resulted in drastically less turn around time on the issuance of renewal licenses. Those applications in which payment was made by credit card were processed very swiftly and licenses issued within 24 hours. Applications in which payment was made by check or money order were processed and licenses issued within one to two business days of receipt of payment. The licensing unit has expanded its staff to better address the processing of new licenses. Within the last six months, the dental hygienist coordinator has been given the authority to review new license applications without direct supervisory review. This has resulted in expediting the issuance of new licenses.

• Applications Pending for More Then 30 Days not Followed Up Routinely

Managing for Results (MFR) is a planning, performance measurement, and budgeting process that emphasizes use of resources to achieve measurable results, accountability, efficiency, and continuous improvement in State government programs. Currently, the Board is fully staffed. The licensing unit consists of the following staff members: licensing coordinator, dental hygienist coordinator, dental assistant coordinator, verifications coordinator and an office clerk II. The dental assistant coordinator and an office clerk II were hired in FY2006, after a vacancy of over one year. Those vacancies adversely affected the licensing unit's ability to process license applications in a timely fashion. Corrective action has been taken. The licensing unit is fully staffed and processing delays have decreased.

Incomplete dental radiation technologist applications are returned to the applicant 30 days after additional documentation is requested and not received. Dental radiation technologists renew biennially during the odd year; nonetheless, in FY2006, the Board issued 511 new certificates and renewed 24. Beginning with the 2007 renewal period, the Board will offer on-line license renewal to dental radiation technologists. A total of 4,112 certifications are due to expire by March 1, 2007. On September 5, 2006, the licensing unit had one dental and six dental hygiene applications pending from the June 30, 2006 renewal that required review and processing. All others have been properly processed. Utilizing the reporting capabilities in License 2000 to identify applications pending for more than 30 days, or licensees who failed to submit renewal applications, the licensing unit mailed a total of 284 cease and desist letters (209 to dentists and 75 to dental hygienists).

Results of Cease and Desist Letters		
Renewed Dentists	10	
Deceased Dentists	6	
Deceased Dental Hygienists	2	
Retired Dentists	23	
Retired Dental Hygienists	10	
Voluntary Non-Renewed Dentists	80	
Voluntary Non-Renewed Dental Hygienists	37	
Voluntary Non-Renewed Dental Teacher	2	
Volunteer Dental License Renewal	1	
Volunteer Dental License: Voluntary Non-Renewal	1	
No Response to Cease and Desist Letter	95	
Response to Cease and Desist Letter: No Action Requested	7	
Reinstatement 40/\$400 – Dentists (40 hrs. Pro-bono/Fine)	7	
Customary Reinstatement – Dentists	1	
Reinstatement 20/\$200 – Dental Hygienists (20 hrs. Pro-bono/Fine)	1	
Customary Reinstatement – Dental Hygienists	1	

As a result of the cease and desist letters the Board received the following responses from July 1, 2006 through September 7, 2006:

• Late Renewal Applications Have Become Problematic

The Board will continue to expand its on-line licensure renewal process. The Board strictly imposes sanctions for late renewals, including the issuance of cease and desist letters soon after the 30-day licensure renewal grace period. In upcoming editions of its Newsletter the Board will continue to notify licensees of the importance of timely renewal of their licenses, and the intent of the Board to strictly enforce sanctions against those who don't. The Board notes that during the previous June 30, 2006 renewal period, 37 dentists and 11 dental hygienists renewed in July 2006 and incurred a late fee in addition to the renewal fee.

• The Board Lacks Sufficient Staff to Provide Effective Customer Service

The Board's website is now conducive to making inquiries to the board. In collaboration with The IT Department of DHMH and the Maryland Health Care Commission the website has been enhanced to accommodate our customers' needs with anticipated additions in the future. A customer relation's team of five staff members was created, and a mandatory telephone training course was provided on site by the DHMH-Training Division. All Board employees received caller ID telephones, several received headsets, and in collaboration with Spring Grove Hospital Center's Tech Support employee phone lines were set up to rollover to a backup staff member for response. To further assist the public the executive director, dental compliance officer, dental compliance secretary and licensing unit staff have their e-mail addresses posted on the website. Fully staffed, the Board is determined to provide dedicated service to its customers.

Backlog Hinders the Disciplinary Process

The Board recently hired two additional full-time investigators which should reduce the number of open cases. With a full investigative staff the Board has made a concerted effort to adjudicate complaints in a timely manner. At the end of fiscal year 2006, the Board had 126 backlogged discipline cases. With the additional investigators the board Anticipates reducing that number by the end of fiscal year 2007. While most cases are resolved within 90 days, those that require more detailed investigation may take longer to adjudicate.

• Making Significant Progress in Expediting Complaint Resolution Until Fiscal 2004

The Board made significant progress in reducing its case backlog through fiscal year 2003. This trend ended in fiscal year 2004 with the loss of two full time investigators. Typically, cases referred to the Board for charges or prosecution by the Attorney General are more complex and require additional investigation. The three full-time investigators are working to reduce the current backlog.

• Limited Investigative Staff Contributes to Delays in Complaint Investigation

During FY 2006, the Board hired two additional full time investigators. The executive

director and the legal assistant met with representatives of the Maryland Insurance Administration, Fraud Division, to review procedures for the Board's referral of significant insurance fraud cases to the MIA and the Office of the Attorney General.

• Tracking Final Order Compliance is Difficult and Inconsistent

The Board must track a licensee's compliance with final orders to ensure that all conditions of the orders are satisfied. The case manager's tracking system has recently been adequately updated with the help of the IT Department of DHMH.

• Board Regulation of Dental Hygienists/Trend in General Supervision Statutes For Dental Hygienists.

The Scope of Practice Committee and the Rules and Regulations Committee periodically make recommendations to the Board regarding the scope of practice of all licensees. Dental hygiene issues are regularly considered by the board. The dental hygienist's primary role is to provide prophylactic care to patients, including patient assessment, cleaning, application of prophylactic fluoride treatments, and preventive oral health education. The Board will continue to monitor national general supervision trends and consider whether the current dental hygiene statute is too restrictive, thereby limiting access to care.

Board Adequately Addresses Dental Hygienist Issues

The Board will continue to regulate the practice of dental hygiene. The Board is mindful of taking full consideration of dental hygiene related matters. Dental Hygienist representation was increased by the Maryland General Assembly in 2005 from 3 to 4 members in order to give dental hygienists greater representation on the Board.

• Board's Fund Balance is Excessive

In the summer of 2006, the Board's executive director and fiscal analyst met with the Department of Legislative Services Office of Policy Analysis to develop a licensing/certificate fee reduction plan to reduce the Board's current fund balance in Fiscal Year 2008.

• Board Is Examining Alternatives to Reduce Its Fund Balance

The Board's executive director and fiscal analyst met with the Department of Legislative Services Office of Policy Analysis to develop reduction measures for maintaining fund balances. The Board has assessed computer communication and automation needs, and has used monies from its current fund balance to make necessary hardware and software purchases. The Board recently hired two health occupation investigators, a dental assistant coordinator and an office clerk II (contractual) to help decrease the Board's workload and response time. Expenditures for expert witness fees will increase as the number of files referred for investigation increase. The Board has increased its payment from \$125 to \$200 to dentists under contract with the Board to perform general anesthesia and parenteral sedation site evaluations. The Board has 15 evaluators under contract at \$200.00 per evaluation with approximately six (per evaluator) performed a year. The Board has appointed a sub-committee to recruit additional site evaluators in light of an anticipated amendment to its general anesthesia and parenteral sedation regulations which will require additional permits. The Board has also encouraged its staff to utilize the State's free college tuition program (which includes a service obligation). In addition, the Board participates in dental industry conferences and educational training programs for Board members and staff.

• Dental Hygienist Licensure Fees Are Disproportionately High

The Board is investigating the reduction of licensure fees to reduce its excessive fund balance with consultation from the Department of Legislative Services Office of Policy Analysis.

• Accounting Records Are Inconsistent

The executive director met with representatives from the Office of Legislative Auditors and the Office of the Inspector General to review the Board's accounting practices. The Board established adequate accountability and control over cash collections. In accordance with the prior audit's recommendations, the Board has implemented a separation of duties regarding cash receipt process (checks/money orders) and the issuance of licenses. The process agreed upon during a meeting with the boards under Boards & Commission in conjunction with OLA and OIG is listed below.

- a) Office Clerk #1 accounts for collections and restrictively endorses all checks immediately upon receipt; records checks on the second log and prints accountability report.
- b) Administrative Specialist is solely responsible for issuing licenses. Only the Administrative Specialist has access to the automated database to enter, process, approve, and issue a license. The board believes that it has established adequate accountability and control over check/money order collections by eliminating the Administrative Specialist and the Executive Director's access to process checks/money order receipts.
- c) Office Secretary III reconciles the bank deposits to the license accountability report.
- d) Fiscal Analyst reconciles the recorded licenses to the fees deposited and the monthly FMIS report.

Immediately following the 2004 audit, improvements were made to address the accountability of pre-numbered licenses. Specifically, the administrative specialist II is responsible for the issuance of licenses and maintenance of license inventory. The fiscal analyst, independent of the check/money order receipts and licensing functions, performs all reconciliation's and the periodic accounting of all monetary and permit

transactions.

In conclusion, the Board's primary mission is to protect the public by ensuring that its licensees provide quality dental care to the citizens of Maryland. This goal will be accomplished through the effective use of the Board's licensing and disciplinary processes. The Board and its executive director continue to review the Board's procedures to improve customer service. In addition, the Board will actively work toward steadily increasing the number of dentists and dental hygienists who renew their licenses on line.

October 1, 2006