

DENTAL BOARD OF CALIFORNIA

2005 Evergreen Street, Suite 1550, Sacramento, California 95815

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



NOTICE OF PUBLIC MEETING – Notice is hereby given that a public meeting of the Dental Board of California will be held as follows:

**Dental Board of California
Teleconference Meeting
Wednesday, April 11, 2012
For more information, please contact (916) 263-2300**

One or more Board Member(s) will participate in this meeting at the teleconference sites listed below. Each teleconference location is accessible to the public and the public will be given an opportunity to address the Dental Board of California at each teleconference location. The public teleconference sites for this meeting are as follows:

Dental Board of California Offices and Teleconference Locations:

Fran Burton, Public Member	Judith Forsythe, RDA
Stephen Casagrande, DDS	Steven Morrow, DDS
Rebecca Downing, Public Member	333 S. Anita Drive
2005 Evergreen Street	Basement Conference Room
Lake Tahoe Room	Orange, CA 92780
Sacramento, CA 95815	(714) 923-9725
(916) 263-2300	

Other Teleconference Locations:

Bruce Witcher, DDS	Huong Le, DDS
1428 Oak Street	555 Ralph Appezato Parkway
Paso Robles, CA 93446	Building A, Room 209
(916) 263-2300	Alameda, CA 94501
	(916) 263-2300

Steven Afriat, Public Member	John Bettinger, DDS
4107 Magnolia Blvd.	1304 15 th Street, Suite 100
Burbank, CA 91505	Santa Monica, CA 90404
(916) 263-2300	(916) 263-2300

Luis Dominicus, DDS
8202 Florence Avenue, Suite 101
Downey, CA 90240
(916) 263-2300

Suzanne McCormick, DDS
Thomas Olinger, DDS
8375 University Avenue
La Mesa, CA 91941
(916) 263-2300

*The Board may take action on any item listed on the agenda unless listed as information only. All times are approximate and subject to change. Public comments will be taken on agenda items at the time the specific item is raised. Agenda items may be taken out of order to accommodate speakers and to maintain quorum. The meeting may be cancelled without notice. Time limitations for discussion and comment will be determined by the President. For verification of the meeting, call (916) 263-2300 or access the Board's Web Site at **www.dbc.ca.gov**. This Board meeting is open to the public and is accessible to the physically disabled. A person who needs a disability-related accommodation or modification in order to participate in the meeting may make a request by contacting Richard DeCuir, Executive Officer, at 2005 Evergreen Street, Suite 1550, Sacramento, CA 95815, or by phone at (916) 263-2300. Providing your request at least five business days before the meeting will help to ensure availability of the requested accommodation.*

12:00 NOON DENTAL BOARD OF CALIFORNIA – FULL BOARD - OPEN SESSION

ROLL CALL TO ESTABLISH QUORUM

AGENDA ITEM 1 .. Discussion and Possible Action Regarding:

(A) Consideration of Delegation to the Department of Consumer Affairs the Authority to Receive Sponsoring Entity Registration Forms and to Register Sponsoring Entities for Sponsored Free Health Care Events that Utilize the Services of Dentists; and

(B) Adoption of Proposed Amendments to Cal. Code of Regs., Title 16, Sections 1023.15, 1023.16, 1023.17, and 1023.18 Relevant to Licensure Exemption for Out of State Licensed Dentists to Provide Health Care Services at Sponsored Free Health Care Events.

PUBLIC COMMENT FOR ITEMS NOT ON THE AGENDA

Note: The board may not discuss or take action on any matter raised during the Public Comment section that is not included on this agenda, except whether to decide to place the matter on the agenda of a future meeting. (Government Code Section 11125 and 11125.7(a))

***CLOSED SESSION - FULL BOARD**

Deliberate and Take Action on Disciplinary Matters

**The Board will meet in closed session as authorized by Government Code Section 11126(c)(3) .*

RETURN TO OPEN SESSION

PUBLIC COMMENT

ADJOURNMENT



MEMORANDUM

DATE	April 4, 2012
TO	Dental Board Members Dental Board of California
FROM	Sarah Wallace, Legislative & Regulatory Analyst Dental Board of California
SUBJECT	Agenda Item 1(A): Discussion and Possible Action Regarding Consideration of Delegation to the Department of Consumer Affairs the Authority to Receive Sponsoring Entity Registration Forms and to Register Sponsoring Entities for Sponsored Free Health Care Events that Utilize the Services of Dentists

Background:

At its February 23, 2012 meeting, the Dental Board of California (Board) considered comments received during the 45-day public comment period. The Board voted to modify the text in response to the comments, and directed staff to notice the modified text for 15-day public comment.

Prior to staff noticing the Board's modified text for 15-day public comment, the Department of Consumer Affairs (DCA) contacted all healing arts boards that have proposed regulations relevant to sponsored free health care events, advising that boards may need to further clarify DCA's role in receiving and registering sponsoring entities. The Medical Board of California (MBC), Board of Occupational Therapy (BOT), and the Board of Vocational Nursing and Psychiatric Technicians (BVNPT) had all submitted their final rulemaking files to the Office of Administrative Law (OAL). On March 13, 2012, OAL issued a Decision of Disapproval of MBC's proposed regulations due to failure to comply with clarity and necessity standards, as well as procedural issues.

OAL's primary clarity concern related to the specific content of MBC's Form 901-A in relation to the content of similar forms proposed by other healing arts boards within the DCA. The BVNPT and BOT used similar forms incorporated by reference, and each form contained language similar to MBC's form indicating that only one registration form per event should be completed and submitted to the DCA. The Office of Administrative Law was concerned that there was not one common form with a uniform set of regulatory requirements which would, with certainty, allow for the filing of a "single, common form" that meets the regulatory requirements of the three agencies. OAL could not easily understand how the "only one form per event" provision on each of the

individual board's forms would work in practice. The differing forms from each board could create the potential for confusion and uncertainty among sponsoring entities legally required to comply with the regulations.

Board Action Requested

Staff recommends the Board adopt the enclosed Resolution to formally delegate authority to the DCA the authority to receive sponsored entity registration forms and to register sponsoring entities for sponsored free health care events that utilize the services of dentists and to direct staff to add the adopted Resolution to the Board's Sponsored Fee Health Care Events rulemaking file.

By delegating authority to the DCA, sponsoring entities will clearly understand that they should submit a single, common form that meets the regulatory requirements of multiple healing arts boards, rather than filing registration forms with each individual healing arts board.



DENTAL BOARD OF CALIFORNIA

RESOLUTION

DELEGATION TO DEPARTMENT OF CONSUMER AFFAIRS FOR THE REVIEW AND REGISTRATION OF SPONSORING ENTITIES

Whereas, Section 901 of the Business and Professions Code (Bus. & Prof. Code § 901), which relates to sponsored health care events, requires that an entity desiring to sponsor such an event must first register with the appropriate board within the Department of Consumer Affairs (Department); and,

Whereas, the Dental Board of California (Board) is the appropriate board to register sponsored health care events utilizing the services of dentists; and ,

Whereas, the Board, to implement the provisions of Bus. & Prof. Code § 901, has adopted regulations that authorize the Board by resolution to delegate to the Department the authority to receive registration forms and register sponsoring entities; and,

Whereas, a sponsored event may utilize many healthcare license disciplines, including physicians, physician assistants, registered nurses, and other professionals; and,

Whereas, the Department would therefore serve as the optimal central point to receive registration forms and to register sponsoring entities;

THEREFORE, BE IT RESOLVED that the Board hereby delegates to the Department the authority to receive sponsored entity registration forms and to register sponsoring entities for sponsored free health care events that utilize the services of dentists.

Adopted this 11th day of April, 2012.

By

Bruce L. Whitcher, DDS
Board President



MEMORANDUM

DATE	April 4, 2012
TO	Dental Board Members Dental Board of California
FROM	Sarah Wallace, Legislative & Regulatory Analyst Dental Board of California
SUBJECT	Agenda Item 1(B): Discussion and Possible Action Regarding Adoption of Proposed Amendments to Cal. Code of Regs., Title 16, Sections 1023.15, 1023.16, 1023.17, 1023.18, and 1023.19 Relevant to Licensure Exemption for Out of State Licensed Dentists to Provide Health Care Services at Sponsored Free Health Care Events

Background:

Following the Board's consideration of delegating authority to the Department of Consumer Affairs to receive and register sponsoring entities registration forms, the Board may hold discussion and take action to adopt proposed amendments to California Code of Regulations, Title 16, Sections 1023.15, 1023.16, 1023.17, 1023.18, and 1023.19 relevant to licensure exemption for out of state licensed dentists to provide health care services at sponsored free health care events

Board Action Requested:

Staff requests the Board take to following action:

Modify the text in response to staff's recommendations and direct staff to take all steps necessary to complete the rulemaking process, including preparing the modified text for a 15-day public comment period, which includes the amendments accepted by the Board at the meeting. If after the 15-day public comment period, no adverse comments are received, authorize the Executive Officer to make any non-substantive changes to the proposed regulations before completing the rulemaking process, and adopt the proposed amendments to Title 16, Sections 1023.15, 1023.16, 1023.17, 1023.18, and 1023.19 relevant to licensure exemption for out of state licensed dentists to provide health care services at sponsored free health care events as noticed in the modified text.

**TITLE 16. DENTAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS**

MODIFIED TEXT

Changes to the originally proposed language are shown by double underline for new text and double strikeout for deleted text. Changes are highlighted in gray for easy location.

Adopt Article 8 and Sections 1023.15, 1023.16, 1023.17, 1023. 18 and 1023.19 in Chapter 1 of Division 10 of Title 16 of the California Code of Regulations to read:

**DIVISION 10. Dental Board of California
CHAPTER 1. General Provisions Applicable to All Licensees**

Article 8. Sponsored Free Health Care Events – Requirements for Exemption

§1023.15. Definitions

For the purposes of Section 901 of the Code:

(a) “Community-based organization” means a public or private nonprofit organization that is representative of a community or a significant segment of a community, and is engaged in meeting human, educational, environmental, or public safety community needs.

(b) “Out-of-state practitioner” means a person who is not licensed in California to engage in the practice of dentistry but who holds a current, active and valid license or certificate in good standing in another state, district, or territory of the United States to practice dentistry.

(c) “In good standing” means that a person:

- (1) Is not currently the subject of any investigation by any governmental entity or has not been charged with an offense for any act substantially related to the practice of dentistry by any public agency;
- (2) Has not entered into any consent agreement or been subject to an administrative decision that contains conditions placed by an agency upon the person's professional conduct or practice, including any voluntary surrender of license; or,
- (3) Has not been the subject of an adverse judgment resulting from the practice of dentistry that the board determines constitutes evidence of a pattern of incompetence or negligence.

NOTE: Authority cited: Sections 901 and 1614 and 904, Business and Professions Code. Reference: Section 901, Business and Professions Code.

§1023.16. Sponsoring Entity Registration and Recordkeeping Requirements

(a) Registration. A sponsoring entity that wishes to provide, or arrange for the provision of, health care services at a sponsored event under section 901 of the Code shall register with the board not later than 90 calendar days prior to the date on which the sponsored event is scheduled to begin. A sponsoring entity shall register with the board by submitting to the board a completed "Registration of Sponsoring Entity Under Business & Professions Code Section 901," Form 901-A (DCA/2011) ~~DBC 901-A (02/2011)~~, which is hereby incorporated by reference.

(b) Determination of Completeness of Form. The board may, by resolution, delegate to the Department of Consumer Affairs the authority to receive and process "Registration of Sponsoring Entity Under Business & Professions Code Section 901," Form 901-A (DCA/2011) ~~Form DBC 901-A~~ on behalf of the board. The board or its delegatee shall inform the sponsoring entity within 15 calendar days of receipt of Form 901-A (DCA/2011) ~~DBC 901-A~~ in writing that the form is either complete and the sponsoring entity is registered or that the form is deficient and what specific information or documentation is required to complete the form and be registered. The board or its delegatee shall reject the registration if all of the identified deficiencies have not been corrected at least 30 days prior to the commencement of the sponsored event.

(c) Recordkeeping Requirements. Regardless of where it is located, a sponsoring entity shall maintain at a physical location in California a copy of all records required by section 901 as well as a copy of the authorization for participation issued by the board to an out-of-state practitioner. The sponsoring entity shall maintain these records for a period of at least five years after the date on which a sponsored event ended. The records may be maintained in either paper or electronic form. The sponsoring entity shall notify the board at the time of registration as to the form in which it will maintain the records. In addition, the sponsoring entity shall keep a copy of all records required by section 901(g) of the Code at the physical location of the sponsored event until that event has ended. These records shall be available for inspection and copying during the operating hours of the sponsored event upon request of any representative of the board. In addition, the sponsoring entity shall provide copies of any record required to be maintained by section 901 of the Code to any representative of the board within fifteen (15) calendar days of the request.

(d) Requirement for Prior Board Approval of Out-of-State Practitioner. A sponsoring entity shall not permit an out-of-state practitioner to participate in a sponsored event unless and until the sponsoring entity has received written approval of such practitioner from the board.

(e) Report. Within fifteen (15) calendar days after a sponsored event has concluded, the sponsoring entity shall file a report with the board summarizing the details of the sponsored event. This report may be in a form of the sponsoring entity's choosing, but shall include, at a minimum, the following information:

- (1) The date(s) of the sponsored event;
- (2) The location(s) of the sponsored event;
- 3) The type(s) and general description of all health care services provided at the sponsored event; and
- (4) A list of each out-of-state practitioner granted authorization pursuant to this article who participated in the sponsored event, along with the license number of that practitioner.

NOTE: Authority cited: Sections 1614 and 901, Business and Professions Code.
Reference: Section 901, Business and Professions Code.

§1023.17. Out-of-State Practitioner Authorization to Participate in Sponsored Event

(a) Request for Authorization to Participate. An out-of-state practitioner (“applicant”) may request authorization from the board to participate in a sponsored event and provide such health care services at the sponsored event as would be permitted if the applicant were licensed by the board to provide those services. Authorization shall be obtained for each sponsored event in which the applicant seeks to participate.

(1) An applicant shall request authorization by submitting to the board a completed “Request for Authorization to Practice Without a License at a Registered Free Health Care Event,” Form DBC-901-B (~~02/2014~~New 02/2012), which is hereby incorporated by reference, accompanied by a non-refundable processing fee of ~~\$100~~\$30.

(2) The applicant shall also furnish either a full set of fingerprints or submit a Live Scan inquiry to establish the identity of the applicant and to permit the board to conduct a criminal history record check. The applicant shall pay any costs for furnishing the fingerprints and conducting the criminal history record check. This requirement shall apply only to the first application for authorization that is submitted to the board by the applicant.

(b) Response to Request for Authorization to Participate. Within 20 calendar days of receiving a completed request for authorization, the board shall notify the sponsoring entity and the applicant whether that request is approved or denied.

(c) Denial of Request for Authorization to Participate.

(1) The board shall deny a request for authorization to participate if:

(A) The submitted Form DBC-901-B (New 02/2012) is incomplete and the applicant has not responded within 7 calendar days to the board's request for additional information;

(B) The applicant does not possess a current, active and valid license in good standing;

~~(C) The applicant has not completed 50 units of continuing education within two years of the date of his or her application.~~

~~(D)~~(C) The applicant has had his or her permission from the federal Drug Enforcement Administration (DEA) to prescribe controlled substances suspended, revoked or denied;

~~(E)~~(D) The applicant has failed to comply with a requirement of this article or has committed any act that would constitute grounds for denial under Section 480 of the Code of an application for licensure by the board;

~~(F)~~(E) The applicant has a current physical or mental impairment related to drugs or alcohol;

~~(G)~~(F) The applicant has been adjudicated by a court to be mentally incompetent or is under a conservatorship, so that the person is unable to undertake the practice of dentistry in a manner consistent with the safety of a patient or the public; or,

(G) The board has been unable to obtain a timely report of the results of the criminal history check.

(2) The board may deny a request for authorization to participate if:

(A) The request is received less than 20 calendar days before the date on which the sponsored event will begin;

(B) The applicant has been previously denied a request for authorization by the board to participate in a sponsored event;

(C) The applicant has previously had an authorization to participate in a sponsored event terminated by the board; or,

(D) The applicant has participated in three (3) sponsored events during the 12 month period immediately preceding the current application.

(d) Appeal of Denial. An applicant requesting authorization to participate in a sponsored event may appeal the denial of such request by following the procedures set forth in Section 1023.18.

NOTE: Authority cited: Sections 144, 901, and 1614, and 901, Business and Professions Code. Reference: Section 144, 480 and 901, Business and Professions Code.

§1023.18. Termination of Authorization and Appeal.

(a) Grounds for Termination. The board may terminate an out-of-state practitioner's authorization to participate in a sponsored event for any of the following reasons:

(1) The out-of-state practitioner has failed to comply with any applicable provision of this article, or any applicable practice requirement or regulation of the board.

(2) The out-of-state practitioner has committed an act that would constitute grounds for discipline if done by a licensee of the board.

(3) The board has received a credible complaint indicating that the out-of-state practitioner is unfit to practice at the sponsored event or has otherwise endangered consumers of the practitioner's services.

(b) Notice of Termination. The board shall provide both the sponsoring entity and the out-of-state practitioner with a written notice of the termination, including the basis for the termination. If the written notice is provided during a sponsored event, the board may provide the notice to any representative of the sponsored event on the premises of the event.

(c) Consequences of Termination. An out-of-state practitioner shall immediately cease his or her participation in a sponsored event upon receipt of the written notice of termination.

Termination of authority to participate in a sponsored event shall be deemed a disciplinary measure reportable to the national practitioner data banks. In addition, the board shall provide a copy of the written notice of termination to the licensing authority of each jurisdiction in which the out-of-state practitioner is licensed.

(d) Appeal of Termination. An out-of-state practitioner may appeal the board's decision to terminate an authorization in the manner provided by section 901(j)(2) of the Code. The request for an appeal shall be considered a request for an informal hearing under the Administrative Procedure Act (commencing with Section 11445.10 of the Government Code).

(e) Informal Conference Option. In addition to requesting a hearing, the out-of-state practitioner may request an informal conference with the executive officer regarding the reasons for the termination of authorization to participate. The executive officer shall, within 30 days from receipt of the request, hold an informal conference with the out-of-

state practitioner. At the conclusion of the informal conference, the executive officer may affirm or dismiss the termination of authorization to participate. The executive officer shall state in writing the reasons for his or her action and mail a copy of his or her findings and decision to the out-of-state practitioner within ten days from the date of the informal conference. The out-of-state practitioner does not waive his or her request for a hearing to contest a termination of authorization by requesting an informal conference. If the termination is dismissed after the informal conference, the request for a hearing shall be deemed to be withdrawn.

NOTE: Authority cited: Sections 901 and 1614 and 904, Business and Professions Code. Reference: Section 901, Business and Professions Code.

§1023.19. Additional Practice Requirements for Out-of-State Practitioners Authorized to Participate in Sponsored Free Health Care Events.

(a) Each out-of-state practitioner authorized to participate in a sponsored event and provide dental services at the sponsored event pursuant to Section 1023.17 shall provide a written notice to each patient or prospective patient prior to performing any services. This notice may be in a form of the out-of-state practitioner's choosing, but shall be in at least 12 point font and include, at a minimum, the following information:

- (1) The state, district, or territory where the out-of-state practitioner is licensed in good standing;
- (2) The name of each governmental agency that has issued the out-of-state practitioner a license to practice dentistry and the effective dates of each license;
- (3) The out-of-state practitioner's license number(s);
- (4) The dates the out-of-state practitioner is authorized to practice by the board; and,
- (5) A disclosure that states: "The Dental Board of California has only authorized me to provide services under my license from another state and only at this free health care event for a period not to exceed ten (10) days."

(b) This notice required by this Section shall be provided separate and apart from all other notices or authorizations that a patient may be given or required to sign and shall be retained by the patient.

NOTE: Authority cited: Sections 901 and 1614 and 904, Business and Professions Code. Reference: Section 901, Business and Professions Code.



SPONSORED FREE HEALTH CARE EVENTS

REGISTRATION OF SPONSORING ENTITY UNDER BUSINESS & PROFESSIONS CODE SECTION 901

In accordance with California Business and Professions Code section 901(d), a non-government organization administering an event to provide health-care services to uninsured and underinsured individuals at nocost, may include participation by certain health-care practitioners licensed outside of California if the organization registers with the California licensing authorities having jurisdiction over those professions. This form shall be completed and submitted by the sponsoring organization **at least 90 calendar days prior to the sponsored event.** *Note that the information required by Business and Professions Code section 901(d) must also be provided to the county health department having jurisdiction in each county in which the sponsored event will take place.*

PART 1 – ORGANIZATIONAL INFORMATION

1. Organization Name: _____

2. Organization Contact Information (*use principal office address*):

 Address Line 1

 Phone Number of Principal Office

 Address Line 2

 Alternate Phone

 City, State, Zip

 Website

 County

Organization Contact Information in California (*if different*):

 Address Line 1

 Phone Number

 Address Line 2

 Alternate Phone

 City, State, Zip

 County

3. Type of Organization:

Is the organization operating pursuant to section 501(c)(3) of the Internal Revenue Code? Yes No

If not, is the organization a community-based organization*?

____ Yes ____ No

Organization's Tax Identification Number _____

If a community-based organization, please describe the mission, goals, and activities of the organization (*attach separate sheet(s) if necessary*): _____

* A "community-based organization" means a public or private nonprofit organization that is representative of a community or a significant segment of a community, and is engaged in meeting human, educational, environmental, or public safety community needs.

PART 2 – RESPONSIBLE ORGANIZATION OFFICIALS
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Please list the following information for each of the principal individual(s) who is the officer(s) or official(s) of the organization responsible for operation of the sponsoring entity.

Individual 1:

Name

Address Line 1

Address Line 2

City, State, Zip

County

Title

Phone

Alternate Phone

E-mail address

Individual 2:

Name

Address Line 1

Address Line 2

City, State, Zip

County

Title

Phone

Alternate Phone

E-mail address

Individual 3:

Name

Address Line 1

Address Line 2

City, State, Zip

County

Title

Phone

Alternate Phone

E-mail address

(Attach additional sheet(s) if needed to list additional principal organizational individuals)

PART 3 – EVENT DETAILS

1. Name of event, if any: _____

2. Date(s) of event (not to exceed ten calendar days): _____

3. Location(s) of the event (be as specific as possible, including address):

4. Describe the intended event, including a list of all types of healthcare services intended to be provided (*attach additional sheet(s) if necessary*): _____

5. Attach a list of all out-of-state health-care practitioners who you currently believe intend to apply for authorization to participate in the event. The list should include the name, profession, and state of licensure of each identified individual.

___ *Check here to indicate that list is attached.*

Note:

- Each individual out-of-state practitioner must request authorization to participate in the event by submitting an application to the applicable licensing Board or Committee.
- The organization will be notified in writing whether authorization for an individual out-of-state practitioner has been granted.

This form, any attachments, and all related questions shall be submitted to:

Department of Consumer Affairs
Attn: Sponsored Free Health-Care Events
Legislative and Policy Review Division
1625 North Market Blvd., Ste. S-204
Sacramento, CA 95834

Tel: (916) 574-7800
Fax: (916) 574-8655
E-mail: lprdivision@dca.ca.gov

- I understand that I must maintain records in either electronic or paper form both at the sponsored event and for five (5) years in California, per the recordkeeping requirements imposed by California Business and Professions Code section 901 and the applicable sections of Title 16, California Code of Regulations, for the regulatory bodies with jurisdiction over the practice to be engaged in by out-of-state practitioners
- I understand that our organization must file a report with each applicable Board or Committee within fifteen (15) calendar days of the completion of the event.

I certify under penalty of perjury under the laws of the State of California that the information provided on this form and any attachments is true and current, and that I am authorized to sign this form on behalf of the organization:

Name Printed

Title

Signature

Date

PERSONAL INFORMATION COLLECTION, ACCESS AND DISCLOSURE

Disclosure of your personal information is mandatory. The information on this form is required pursuant to Business and Professions Code section 901. Failure to provide any of the required information will result in the form being rejected as incomplete. The information provided will be used to determine compliance with the requirements promulgated pursuant to Business and Professions Code section 901. The information collected may be transferred to other governmental and enforcement agencies. Individuals have a right of access to records containing personal information pertaining to that individual that are maintained by the applicable Board or Committee, unless the records are exempted from disclosure by section 1798.40 of the Civil Code. An individual may obtain information regarding the location of his or her records by contacting the Deputy Director of the Legislative and Policy Review Division at the address and telephone number listed above.



REQUEST FOR AUTHORIZATION TO PRACTICE WITHOUT A LICENSE AT A REGISTERED FREE HEALTH CARE EVENT

In accordance with California Business and Professions Code Section 901 any dentist licensed/certified and in good standing in another state, district, or territory in the United States may request authorization from the Dental Board of California (Board) to participate in a free health care event offered by a sponsoring entity, registered with the Board pursuant to Section 901, for a period not to exceed ten (10) days. The Board may deny requests for authorization received less than twenty (20) calendar days before the date on which the sponsored event will begin.

Note: If you are submitting fingerprint cards to the Board ("Ink on Cards") along with your application, the Board recommends that you submit your completed application package to the Board at least 60 days prior to the scheduled event to assist in the timely processing of your fingerprint submissions through the California Department of Justice and Federal Bureau of Investigation.

PART 1 - APPLICATION INSTRUCTIONS

An application must be complete and must be accompanied by all of the following:

- A processing fee of \$~~100~~30, made payable to the Dental Board of California. If submitting fingerprint cards instead of using Live Scan, please submit an additional \$51 fee, payable to the Dental Board of California, to process your fingerprint cards for a total fee of \$~~151~~81. See additional details below.
- A copy of each current, active and valid and current license and/or certificate authorizing the applicant to engage in the practice of dentistry issued by any state, district, or territory of the United States.
- A copy of a valid photo identification of the applicant issued by one of the jurisdictions in which the applicant holds a license or certificate to practice.
- ~~Copies of Certificates of Completion showing at least 50 units of continuing education within two years of the date of this application.~~
- Any documents or statements requested on this application.
- Fingerprints. Fingerprints can be done with electronic Live Scan or ink on cards.

Live Scan is available only in California, for either residents or visitors, and is far speedier. The California Department of Justice (DOJ) has the form you need to complete and take to the Live Scan service location in California, and a list of the locations where it is obtainable (see ag.ca.gov/fingerprints). The procedure is that you take the completed form to the service location, pay a fee and your fingerprints are taken on a glass without ink. The fingerprints are then transmitted electronically to the DOJ, and the DOJ sends the report to the Dental Board. Usually the report is received within two days. There is a low rate of rejections with this method.

PART 3 – LICENSURE INFORMATION

1. Do you hold a current, active, and valid license, ~~certification, or registration~~ issued by a state, district, or territory of the United States authorizing the unrestricted practice of dentistry in your jurisdiction(s)?

No If no, you are not eligible to participate as an out-of-state practitioner in the sponsored event.

Yes If yes, list every license, certificate, and registration authorizing you to engage in the practice of dentistry in the following table. If there are not enough boxes to include all the relevant information please attach an addendum to this form. Please also attach a copy of each of your current licenses, certificates, and registrations.

State/ Jurisdiction	Issuing Agency/Authority	License Number	Expiration Date

~~2. CONTINUING EDUCATION. Provide copies of certificates of completion. Do not send originals.~~

~~32.~~ Are you currently the subject of any investigation by any governmental entity? Yes
No

If yes, provide a detailed explanation of the circumstances surrounding the investigation.

~~43.~~ Have you ever had charges filed against a dental license that you currently hold or held in the past, including charges that are still pending? Yes No

If yes, provide a detailed explanation and a copy of the documents relating to the filing of charges.

~~54.~~ Have you ever had any disciplinary action taken against a dental license or other healing arts license? Yes No

Disciplinary action includes, but is not limited to, suspension, revocation, probation, confidential discipline, consent order, letter of reprimand or warning, or any other restriction or action taken against a dental license. If yes, provide a detailed explanation and a copy of all documents relating to the disciplinary action.

~~65.~~ Have you ever surrendered a dental license, either voluntary or otherwise? Yes No

If yes, provide a detailed explanation and a copy of all documents relating to the surrender.

~~76~~. Have you ever been the subject of a malpractice settlement or judgment? Yes No

If yes, provide a detailed explanation of the circumstances and outcome relating to the malpractice settlement or judgment. You may be required to provide additional information after review of your explanation.

IMPORTANT REQUIREMENT: If a disciplinary action is filed against any license you currently hold pending the Board's decision on this application for authorization, you must notify the Board in writing within 48 hours.

~~87~~. With the exception of conviction of an infraction resulting in a fine of less than \$1,000, have you ever been convicted of any crime, including an infraction, misdemeanor or felony? Yes No

"Conviction" includes a plea of no contest and any conviction that has been set aside pursuant to Section 1203.4 of the Penal Code. Therefore, you must disclose any convictions in which you entered a plea of no contest and any convictions that were subsequently set aside pursuant to Section 1203.4 of the Penal Code.

~~98~~. Do you have a permit to prescribe controlled substances from the Federal Drug Enforcement Agency (DEA)? If Yes, enter DEA number: _____ Yes No

~~109~~. Has permission from the DEA to prescribe controlled substances ever been suspended, revoked or denied? Yes No

If yes, provide a detailed explanation of the circumstances and a copy of the document(s).

~~112~~. Do you have a current physical or mental impairment related to drugs or alcohol? Yes No

~~1211~~. Have you been adjudicated by a court to be mentally incompetent or are you currently under a conservatorship? Yes No

If yes, provide a detailed explanation of the circumstances, date and time of the court order or the duration of the conservatorship.

PART 4 – SPONSORED EVENT

1. Name of non-profit or community-based organization hosting the free healthcare event (the "sponsoring entity"): _____

2. Name of event: _____

3. Date(s) & location(s) of the event: _____

4. Date(s) & location(s) applicant will be performing healthcare services (if different):

5. Please specify the healthcare services you intend to provide: _____

6. Name and phone number of contact person with sponsoring entity: _____

PART 5 – ACKNOWLEDGMENT/CERTIFICATION

I, the undersigned, declare under penalty of perjury under the laws of the State of California and acknowledge that:

- I will comply with all applicable practice requirements required of licensed dentists and all regulations of the Board.
- In accordance with Business and Professions Code Section 901(i), I will only practice within the scope of my licensure and/or certification and within the scope of practice for California-licensed dentists.
- I will provide the services authorized by this request and Business and Professions Code Section 901 to uninsured and underinsured persons only and shall receive no compensation for such services.
- I will provide the services authorized by this request and Business and Professions Code Section 901 only in association with the sponsoring entity listed herein and only on the dates and at the locations listed herein for a period not to exceed 10 calendar days.
- I will provide a written notice to each patient or prospective patient prior to performing any services pursuant to Cal, Code of Regs., Title 16, Section 1023.19
- I am responsible for knowing and complying with California law and practice standards while participating in a sponsored event located in California.
- Practice of a regulated profession in California without proper licensure and/or authorization may subject me to potential administrative, civil and/or criminal penalties.
- The Board may notify the licensing authority of my home jurisdiction and/or other appropriate law enforcement authorities of any potential grounds for discipline associated with my participation in the sponsored event.
- I have read the questions in the foregoing application and that all information provided by me in this application is true and complete to the best of my knowledge. By submitting this application and signing below, I am granting permission to the Board to verify the information provided and to perform any investigation pertaining to the information I have provided as the Board deems necessary.

My signature on this application, or copy thereof, authorizes the National Practitioner Data Bank and the Federal Drug Enforcement Agency to release any and all information required by the Dental Board of California.

Signature

Date

Name Printed: _____

NOTE: Authorization will not be issued until clearance has been received from the California Department of Justice and the Federal Bureau of Investigation.

NOTICE OF COLLECTION OF PERSONAL INFORMATION

Disclosure of your personal information is mandatory. The information on this application is required pursuant to Title 16, California Code of Regulations Section 1023.17 and Business and Professions Code section 901. Failure to provide any of the required information will result in the form being rejected as incomplete or denied. The information provided will be used to determine compliance with Article 8 of Division 10 of Title 16 of the California Code of Regulations (beginning at Section 1023.15). The information collected may be transferred to other governmental and enforcement agencies. Individuals have a right of access to records containing personal information pertaining to that individual that are maintained by the Board, unless the records are exempted from disclosure by Section 1798.40 of the Civil Code. Individuals may obtain information regarding the location of his or her records by contacting the Executive Officer at the Board at the address and telephone number listed above.