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State of Minnesota
HOUSE OF REPRESENTATIVES

EIGHTY-EIGHTH SESSION

H. F. No. 1463

03/11/2013 Authored by Morgan; Ward, J.A.; Fritz and Albright

The bill was read for the first time and referred to the Committee on Health and Human Services Policy

03/17/2014 Adoption of Report: Amended and re-referred to the Committee on Health and Human Services Finance

1.1 A bill for an act
1.2 relating to health; making changes to dental licensing provisions; amending
1.3 Minnesota Statutes 2012, sections 150A.01, subdivision 8a; 150A.06,
1.4 subdivisions 1, 1a, 1c, 1d, 2, 2a, 2d, 3, 8; 150A.091, subdivisions 3, 8, 16;
1.5 150A.10.

1.6 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.7 Section 1. Minnesota Statutes 2012, section 150A.01, subdivision 8a, is amended to
1.8 read:

1.9 Subd. 8a. **Resident dentist.** "Resident dentist" means a person who is licensed to
1.10 practice dentistry as an enrolled graduate student or student of an advanced education
1.11 program accredited by the ~~American Dental Association~~ Commission on Dental
1.12 Accreditation.

1.13 Sec. 2. Minnesota Statutes 2012, section 150A.06, subdivision 1, is amended to read:

1.14 Subdivision 1. **Dentists.** A person of good moral character who has graduated from
1.15 a dental program accredited by the Commission on Dental Accreditation of the ~~American~~
1.16 ~~Dental Association~~, having submitted an application and fee as prescribed by the board,
1.17 may be examined by the board or by an agency pursuant to section 150A.03, subdivision
1.18 1, in a manner to test the applicant's fitness to practice dentistry. A graduate of a dental
1.19 college in another country must not be disqualified from examination solely because of
1.20 the applicant's foreign training if the board determines that the training is equivalent to or
1.21 higher than that provided by a dental college accredited by the Commission on Dental
1.22 Accreditation of the ~~American Dental Association~~. In the case of examinations conducted
1.23 pursuant to section 150A.03, subdivision 1, applicants shall take the examination prior to
1.24 applying to the board for licensure. The examination shall include an examination of the

2.1 applicant's knowledge of the laws of Minnesota relating to dentistry and the rules of the
2.2 board. An applicant is ineligible to retake the clinical examination required by the board
2.3 after failing it twice until further education and training are obtained as specified by the
2.4 board by rule. A separate, nonrefundable fee may be charged for each time a person applies.
2.5 An applicant who passes the examination in compliance with subdivision 2b, abides by
2.6 professional ethical conduct requirements, and meets all other requirements of the board
2.7 shall be licensed to practice dentistry and granted a general dentist license by the board.

2.8 Sec. 3. Minnesota Statutes 2012, section 150A.06, subdivision 1a, is amended to read:

2.9 Subd. 1a. **Faculty dentists.** (a) Faculty members of a school of dentistry must be
2.10 licensed in order to practice dentistry as defined in section 150A.05. The board may
2.11 issue to members of the faculty of a school of dentistry a license designated as either a
2.12 "limited faculty license" or a "full faculty license" entitling the holder to practice dentistry
2.13 within the terms described in paragraph (b) or (c). The dean of a school of dentistry and
2.14 program directors of a Minnesota dental hygiene or dental assisting school accredited by
2.15 the Commission on Dental Accreditation of the American Dental Association shall certify
2.16 to the board those members of the school's faculty who practice dentistry but are not
2.17 licensed to practice dentistry in Minnesota. A faculty member who practices dentistry as
2.18 defined in section 150A.05, before beginning duties in a school of dentistry or a dental
2.19 hygiene or dental assisting school, shall apply to the board for a limited or full faculty
2.20 license. Pursuant to Minnesota Rules, chapter 3100, and at the discretion of the board,
2.21 a limited faculty license must be renewed annually and a full faculty license must be
2.22 renewed biennially. The faculty applicant shall pay a nonrefundable fee set by the board
2.23 for issuing and renewing the faculty license. The faculty license is valid during the time
2.24 the holder remains a member of the faculty of a school of dentistry or a dental hygiene or
2.25 dental assisting school and subjects the holder to this chapter.

2.26 (b) The board may issue to dentist members of the faculty of a Minnesota school
2.27 of dentistry, dental hygiene, or dental assisting accredited by the Commission on Dental
2.28 Accreditation of the American Dental Association, a license designated as a limited
2.29 faculty license entitling the holder to practice dentistry within the school and its affiliated
2.30 teaching facilities, but only for the purposes of teaching or conducting research. The
2.31 practice of dentistry at a school facility for purposes other than teaching or research is not
2.32 allowed unless the dentist was a faculty member on August 1, 1993.

2.33 (c) The board may issue to dentist members of the faculty of a Minnesota school
2.34 of dentistry, dental hygiene, or dental assisting accredited by the Commission on Dental
2.35 Accreditation of the American Dental Association a license designated as a full faculty

3.1 license entitling the holder to practice dentistry within the school and its affiliated teaching
3.2 facilities and elsewhere if the holder of the license is employed 50 percent time or more by
3.3 the school in the practice of teaching or research, and upon successful review by the board
3.4 of the applicant's qualifications as described in subdivisions 1, 1c, and 4 and board rule.
3.5 The board, at its discretion, may waive specific licensing prerequisites.

3.6 Sec. 4. Minnesota Statutes 2012, section 150A.06, subdivision 1c, is amended to read:

3.7 Subd. 1c. **Specialty dentists.** (a) The board may grant a one or more specialty
3.8 license licenses in the specialty areas of dentistry that are recognized by the ~~American~~
3.9 ~~Dental Association~~ Commission on Dental Accreditation.

3.10 (b) An applicant for a specialty license shall:

3.11 (1) have successfully completed a postdoctoral specialty ~~education~~ program
3.12 accredited by the Commission on Dental Accreditation ~~of the American Dental~~
3.13 ~~Association~~, or have announced a limitation of practice before 1967;

3.14 (2) have been certified by a specialty ~~examining~~ board approved by the Minnesota
3.15 Board of Dentistry, or provide evidence of having passed a clinical examination for
3.16 licensure required for practice in any state or Canadian province, or in the case of oral and
3.17 maxillofacial surgeons only, have a Minnesota medical license in good standing;

3.18 (3) have been in active practice or a postdoctoral specialty education program or
3.19 United States government service at least 2,000 hours in the 36 months prior to applying
3.20 for a specialty license;

3.21 (4) if requested by the board, be interviewed by a committee of the board, which
3.22 may include the assistance of specialists in the evaluation process, and satisfactorily
3.23 respond to questions designed to determine the applicant's knowledge of dental subjects
3.24 and ability to practice;

3.25 (5) if requested by the board, present complete records on a sample of patients
3.26 treated by the applicant. The sample must be drawn from patients treated by the applicant
3.27 during the 36 months preceding the date of application. The number of records shall be
3.28 established by the board. The records shall be reasonably representative of the treatment
3.29 typically provided by the applicant for each specialty area;

3.30 (6) at board discretion, pass a board-approved English proficiency test if English is
3.31 not the applicant's primary language;

3.32 (7) pass all components of the National Board Dental Examinations;

3.33 (8) pass the Minnesota Board of Dentistry jurisprudence examination;

3.34 (9) abide by professional ethical conduct requirements; and

3.35 (10) meet all other requirements prescribed by the Board of Dentistry.

4.1 (c) The application must include:

4.2 (1) a completed application furnished by the board;

4.3 (2) at least two character references from two different dentists for each specialty
 4.4 area, one of whom must be a dentist practicing in the same specialty area, and the other
 4.5 from the director of the each specialty program attended;

4.6 (3) a licensed physician's statement attesting to the applicant's physical and mental
 4.7 condition;

4.8 (4) a statement from a licensed ophthalmologist or optometrist attesting to the
 4.9 applicant's visual acuity;

4.10 (5) a nonrefundable fee; and

4.11 (6) a notarized, unmounted passport-type photograph, three inches by three inches,
 4.12 taken not more than six months before the date of application.

4.13 (d) A specialty dentist holding a one or more specialty license licenses is limited to
 4.14 practicing in the dentist's designated specialty area or areas. The scope of practice must be
 4.15 defined by each national specialty board recognized by the ~~American Dental Association~~
 4.16 Commission on Dental Accreditation.

4.17 (e) A specialty dentist holding a general ~~dentist dental~~ license is limited to practicing
 4.18 in the dentist's designated specialty area or areas if the dentist has announced a limitation
 4.19 of practice. The scope of practice must be defined by each national specialty board
 4.20 recognized by the ~~American Dental Association~~ Commission on Dental Accreditation.

4.21 (f) All specialty dentists who have fulfilled the specialty dentist requirements and
 4.22 who intend to limit their practice to a particular specialty area or areas may apply for
 4.23 a one or more specialty license licenses.

4.24 Sec. 5. Minnesota Statutes 2012, section 150A.06, subdivision 1d, is amended to read:

4.25 Subd. 1d. **Dental therapists.** A person of good moral character who has graduated
 4.26 with a baccalaureate degree or a master's degree from a dental therapy education program
 4.27 that has been approved by the board or accredited by the ~~American Dental Association~~
 4.28 Commission on Dental Accreditation or another board-approved national accreditation
 4.29 organization may apply for licensure.

4.30 The applicant must submit an application and fee as prescribed by the board and a
 4.31 diploma or certificate from a dental therapy education program. Prior to being licensed,
 4.32 the applicant must pass a comprehensive, competency-based clinical examination that is
 4.33 approved by the board and administered independently of an institution providing dental
 4.34 therapy education. The applicant must also pass an examination testing the applicant's
 4.35 knowledge of the Minnesota laws and rules relating to the practice of dentistry. An

5.1 applicant who has failed the clinical examination twice is ineligible to retake the clinical
5.2 examination until further education and training are obtained as specified by the board. A
5.3 separate, nonrefundable fee may be charged for each time a person applies. An applicant
5.4 who passes the examination in compliance with subdivision 2b, abides by professional
5.5 ethical conduct requirements, and meets all the other requirements of the board shall
5.6 be licensed as a dental therapist.

5.7 Sec. 6. Minnesota Statutes 2012, section 150A.06, subdivision 2, is amended to read:

5.8 Subd. 2. **Dental hygienists.** A person of good moral character, who has graduated
5.9 from a dental hygiene program accredited by the Commission on Dental Accreditation of
5.10 ~~the American Dental Association~~ and established in an institution accredited by an agency
5.11 recognized by the United States Department of Education to offer college-level programs,
5.12 may apply for licensure. The dental hygiene program must provide a minimum of two
5.13 academic years of dental hygiene education. The applicant must submit an application and
5.14 fee as prescribed by the board and a diploma or certificate of dental hygiene. Prior to being
5.15 licensed, the applicant must pass the National Board of Dental Hygiene examination and a
5.16 board approved examination designed to determine the applicant's clinical competency. In
5.17 the case of examinations conducted pursuant to section 150A.03, subdivision 1, applicants
5.18 shall take the examination before applying to the board for licensure. The applicant must
5.19 also pass an examination testing the applicant's knowledge of the laws of Minnesota relating
5.20 to the practice of dentistry and of the rules of the board. An applicant is ineligible to retake
5.21 the clinical examination required by the board after failing it twice until further education
5.22 and training are obtained as specified by board rule. A separate, nonrefundable fee may
5.23 be charged for each time a person applies. An applicant who passes the examination in
5.24 compliance with subdivision 2b, abides by professional ethical conduct requirements, and
5.25 meets all the other requirements of the board shall be licensed as a dental hygienist.

5.26 Sec. 7. Minnesota Statutes 2012, section 150A.06, subdivision 2a, is amended to read:

5.27 Subd. 2a. **Licensed dental assistant.** A person of good moral character, who has
5.28 graduated from a dental assisting program accredited by the Commission on Dental
5.29 Accreditation of ~~the American Dental Association~~, may apply for licensure. The applicant
5.30 must submit an application and fee as prescribed by the board and the diploma or
5.31 certificate of dental assisting. In the case of examinations conducted pursuant to section
5.32 150A.03, subdivision 1, applicants shall take the examination before applying to the board
5.33 for licensure. The examination shall include an examination of the applicant's knowledge
5.34 of the laws of Minnesota relating to dentistry and the rules of the board. An applicant is

6.1 ineligible to retake the licensure examination required by the board after failing it twice
6.2 until further education and training are obtained as specified by board rule. A separate,
6.3 nonrefundable fee may be charged for each time a person applies. An applicant who
6.4 passes the examination in compliance with subdivision 2b, abides by professional ethical
6.5 conduct requirements, and meets all the other requirements of the board shall be licensed
6.6 as a dental assistant.

6.7 Sec. 8. Minnesota Statutes 2012, section 150A.06, subdivision 2d, is amended to read:

6.8 Subd. 2d. **Continuing education and professional development waiver.** (a) The
6.9 board shall grant a waiver to the continuing education requirements under this chapter for
6.10 a licensed dentist, licensed dental therapist, licensed dental hygienist, or licensed dental
6.11 assistant who documents to the satisfaction of the board that the dentist, dental therapist,
6.12 dental hygienist, or licensed dental assistant has retired from active practice in the state
6.13 and limits the provision of dental care services to those offered without compensation
6.14 in a public health, community, or tribal clinic or a nonprofit organization that provides
6.15 services to the indigent or to recipients of medical assistance, general assistance medical
6.16 care, or MinnesotaCare programs.

6.17 (b) The board may require written documentation from the volunteer and retired
6.18 dentist, dental therapist, dental hygienist, or licensed dental assistant prior to granting
6.19 this waiver.

6.20 (c) The board shall require the volunteer and retired dentist, dental therapist, dental
6.21 hygienist, or licensed dental assistant to meet the following requirements:

6.22 (1) a licensee seeking a waiver under this subdivision must complete and document
6.23 at least five hours of approved courses in infection control, medical emergencies, and
6.24 medical management for the continuing education cycle; and

6.25 (2) provide documentation of current CPR certification from completion of the
6.26 American Heart Association healthcare provider course; or the American Red Cross
6.27 professional rescuer course; ~~or an equivalent entity.~~

6.28 Sec. 9. Minnesota Statutes 2012, section 150A.06, subdivision 3, is amended to read:

6.29 Subd. 3. **Waiver of examination.** (a) All or any part of the examination for
6.30 dentists or dental hygienists, except that pertaining to the law of Minnesota relating to
6.31 dentistry and the rules of the board, may, at the discretion of the board, be waived for an
6.32 applicant who presents a certificate of having passed all components of the National Board
6.33 Dental Examinations or evidence of having maintained an adequate scholastic standing

7.1 as determined by the board, in dental school as to dentists, or dental hygiene school as
 7.2 to dental hygienists.

7.3 (b) The board shall waive the clinical examination required for licensure for any
 7.4 dentist applicant who is a graduate of a dental school accredited by the Commission on
 7.5 Dental Accreditation ~~of the American Dental Association~~, who has passed all components
 7.6 of the National Board Dental Examinations, and who has satisfactorily completed a
 7.7 Minnesota-based postdoctoral general dentistry residency program (GPR) or an advanced
 7.8 education in general dentistry (AEGD) program after January 1, 2004. The postdoctoral
 7.9 program must be accredited by the Commission on Dental Accreditation ~~of the American~~
 7.10 ~~Dental Association~~, be of at least one year's duration, and include an outcome assessment
 7.11 evaluation assessing the resident's competence to practice dentistry. The board may require
 7.12 the applicant to submit any information deemed necessary by the board to determine
 7.13 whether the waiver is applicable. ~~The board may waive the clinical examination for an~~
 7.14 ~~applicant who meets the requirements of this paragraph and has satisfactorily completed an~~
 7.15 ~~accredited postdoctoral general dentistry residency program located outside of Minnesota.~~

7.16 Sec. 10. Minnesota Statutes 2012, section 150A.06, subdivision 8, is amended to read:

7.17 Subd. 8. **Licensure by credentials.** (a) Any dental assistant may, upon application
 7.18 and payment of a fee established by the board, apply for licensure based on an evaluation
 7.19 of the applicant's education, experience, and performance record in lieu of completing a
 7.20 board-approved dental assisting program for expanded functions as defined in rule, and
 7.21 may be interviewed by the board to determine if the applicant:

7.22 (1) has graduated from an accredited dental assisting program accredited by the
 7.23 Commission ~~of~~ on Dental Accreditation ~~of the American Dental Association~~, or is
 7.24 currently certified by the Dental Assisting National Board;

7.25 (2) is not subject to any pending or final disciplinary action in another state or
 7.26 Canadian province, or if not currently certified or registered, previously had a certification
 7.27 or registration in another state or Canadian province in good standing that was not subject
 7.28 to any final or pending disciplinary action at the time of surrender;

7.29 (3) is of good moral character and abides by professional ethical conduct
 7.30 requirements;

7.31 (4) at board discretion, has passed a board-approved English proficiency test if
 7.32 English is not the applicant's primary language; and

7.33 (5) has met all expanded functions curriculum equivalency requirements of a
 7.34 Minnesota board-approved dental assisting program.

8.1 (b) The board, at its discretion, may waive specific licensure requirements in
8.2 paragraph (a).

8.3 (c) An applicant who fulfills the conditions of this subdivision and demonstrates the
8.4 minimum knowledge in dental subjects required for licensure under subdivision 2a must
8.5 be licensed to practice the applicant's profession.

8.6 (d) If the applicant does not demonstrate the minimum knowledge in dental subjects
8.7 required for licensure under subdivision 2a, the application must be denied. If licensure is
8.8 denied, the board may notify the applicant of any specific remedy that the applicant could
8.9 take which, when passed, would qualify the applicant for licensure. A denial does not
8.10 prohibit the applicant from applying for licensure under subdivision 2a.

8.11 (e) A candidate whose application has been denied may appeal the decision to the
8.12 board according to subdivision 4a.

8.13 Sec. 11. Minnesota Statutes 2012, section 150A.091, subdivision 3, is amended to read:

8.14 Subd. 3. **Initial license or permit fees.** Along with the application fee, each of the
8.15 following applicants shall submit a separate ~~prorated~~ initial license or permit fee. The
8.16 ~~prorated~~ initial fee shall be established by the board ~~based on the number of months of the~~
8.17 ~~applicant's initial term as described in Minnesota Rules, part 3100.1700, subpart 1a,~~ not to
8.18 exceed the following monthly nonrefundable fee amounts:

8.19 (1) dentist or full faculty dentist, ~~\$14 times the number of months of the initial~~
8.20 ~~term~~ \$168;

8.21 (2) dental therapist, ~~\$10 times the number of months of the initial term~~ \$120;

8.22 (3) dental hygienist, ~~\$5 times the number of months of the initial term~~ \$60;

8.23 (4) licensed dental assistant, ~~\$3 times the number of months of the initial term~~
8.24 \$36; and

8.25 (5) dental assistant with a permit as described in Minnesota Rules, part 3100.8500,
8.26 subpart 3, ~~\$1 times the number of months of the initial term~~ \$12.

8.27 Sec. 12. Minnesota Statutes 2012, section 150A.091, subdivision 8, is amended to read:

8.28 Subd. 8. **Duplicate license or certificate fee.** Each applicant shall submit, with
8.29 a request for issuance of a duplicate of the original license, or of an annual or biennial
8.30 renewal certificate for a license or permit, a fee in the following amounts:

8.31 (1) original dentist, full faculty dentist, dental therapist, dental hygiene, or dental
8.32 assistant license, \$35; and

8.33 (2) annual or biennial renewal certificates, \$10; and

8.34 (3) wallet-sized license and renewal certificate, \$15.

9.1 Sec. 13. Minnesota Statutes 2012, section 150A.091, subdivision 16, is amended to
9.2 read:

9.3 Subd. 16. **Failure of professional development portfolio audit.** A licensee shall
9.4 submit a fee as established by the board not to exceed the amount of ~~\$250~~ \$1,000 after
9.5 failing two ~~consecutive~~ professional development portfolio audits and, thereafter, for each
9.6 failed professional development portfolio audit under Minnesota Rules, part 3100.5300.
9.7 In addition to the fee, the board may initiate the complaint process to address multiple
9.8 failed audits.

9.9 Sec. 14. Minnesota Statutes 2012, section 150A.10, is amended to read:

9.10 **150A.10 ALLIED DENTAL PERSONNEL.**

9.11 Subdivision 1. **Dental hygienists.** Any licensed dentist, licensed dental therapist,
9.12 public institution, or school authority may obtain services from a licensed dental hygienist.
9.13 The licensed dental hygienist may provide those services defined in section 150A.05,
9.14 subdivision 1a. The services provided shall not include the establishment of a final
9.15 diagnosis or treatment plan for a dental patient. All services shall be provided under
9.16 supervision of a licensed dentist. Any licensed dentist who shall permit any dental service
9.17 by a dental hygienist other than those authorized by the Board of Dentistry, shall be deemed
9.18 to be violating the provisions of sections 150A.01 to 150A.12, and any unauthorized dental
9.19 service by a dental hygienist shall constitute a violation of sections 150A.01 to 150A.12.

9.20 Subd. 1a. **Limited authorization for dental hygienists.** (a) Notwithstanding
9.21 subdivision 1, a dental hygienist licensed under this chapter may be employed or retained
9.22 by a health care facility, program, or nonprofit organization to perform dental hygiene
9.23 services described under paragraph (b) without the patient first being examined by a
9.24 licensed dentist if the dental hygienist:

9.25 (1) has been engaged in the active practice of clinical dental hygiene for not less than
9.26 2,400 hours in the past 18 months or a career total of 3,000 hours, including a minimum of
9.27 200 hours of clinical practice in two of the past three years;

9.28 (2) has entered into a collaborative agreement with a licensed dentist that designates
9.29 authorization for the services provided by the dental hygienist;

9.30 (3) has documented participation in courses in infection control and medical
9.31 emergencies within each continuing education cycle; and

9.32 (4) maintains current CPR certification from completion of the American Heart
9.33 Association healthcare provider course, or the American Red Cross professional rescuer
9.34 course, ~~or an equivalent entity.~~

10.1 (b) The dental hygiene services authorized to be performed by a dental hygienist
10.2 under this subdivision are limited to:

- 10.3 (1) oral health promotion and disease prevention education;
10.4 (2) removal of deposits and stains from the surfaces of the teeth;
10.5 (3) application of topical preventive or prophylactic agents, including fluoride
10.6 varnishes and pit and fissure sealants;
10.7 (4) polishing and smoothing restorations;
10.8 (5) removal of marginal overhangs;
10.9 (6) performance of preliminary charting;
10.10 (7) taking of radiographs; and
10.11 (8) performance of scaling and root planing.

10.12 The dental hygienist may administer injections of local anesthetic agents or nitrous
10.13 oxide inhalation analgesia as specifically delegated in the collaborative agreement with
10.14 a licensed dentist. The dentist need not first examine the patient or be present. If the
10.15 patient is considered medically compromised, the collaborative dentist shall review the
10.16 patient record, including the medical history, prior to the provision of these services.
10.17 Collaborating dental hygienists may work with unlicensed and licensed dental assistants
10.18 who may only perform duties for which licensure is not required. The performance of
10.19 dental hygiene services in a health care facility, program, or nonprofit organization as
10.20 authorized under this subdivision is limited to patients, students, and residents of the
10.21 facility, program, or organization.

10.22 (c) A collaborating dentist must be licensed under this chapter and may enter into
10.23 a collaborative agreement with no more than four dental hygienists unless otherwise
10.24 authorized by the board. The board shall develop parameters and a process for obtaining
10.25 authorization to collaborate with more than four dental hygienists. The collaborative
10.26 agreement must include:

10.27 (1) consideration for medically compromised patients and medical conditions for
10.28 which a dental evaluation and treatment plan must occur prior to the provision of dental
10.29 hygiene services;

10.30 (2) age- and procedure-specific standard collaborative practice protocols, including
10.31 recommended intervals for the performance of dental hygiene services and a period of
10.32 time in which an examination by a dentist should occur;

10.33 (3) copies of consent to treatment form provided to the patient by the dental hygienist;

10.34 (4) specific protocols for the placement of pit and fissure sealants and requirements
10.35 for follow-up care to assure the efficacy of the sealants after application; and

11.1 (5) a procedure for creating and maintaining dental records for the patients that are
11.2 treated by the dental hygienist. This procedure must specify where these records are
11.3 to be located.

11.4 The collaborative agreement must be signed and maintained by the dentist, the dental
11.5 hygienist, and the facility, program, or organization; must be reviewed annually by the
11.6 collaborating dentist and dental hygienist; and must be made available to the board
11.7 upon request.

11.8 (d) Before performing any services authorized under this subdivision, a dental
11.9 hygienist must provide the patient with a consent to treatment form which must include a
11.10 statement advising the patient that the dental hygiene services provided are not a substitute
11.11 for a dental examination by a licensed dentist. If the dental hygienist makes any referrals
11.12 to the patient for further dental procedures, the dental hygienist must fill out a referral form
11.13 and provide a copy of the form to the collaborating dentist.

11.14 (e) For the purposes of this subdivision, a "health care facility, program, or
11.15 nonprofit organization" is limited to a hospital; nursing home; home health agency; group
11.16 home serving the elderly, disabled, or juveniles; state-operated facility licensed by the
11.17 commissioner of human services or the commissioner of corrections; and federal, state, or
11.18 local public health facility, community clinic, tribal clinic, school authority, Head Start
11.19 program, or nonprofit organization that serves individuals who are uninsured or who are
11.20 Minnesota health care public program recipients.

11.21 (f) For purposes of this subdivision, a "collaborative agreement" means a written
11.22 agreement with a licensed dentist who authorizes and accepts responsibility for the
11.23 services performed by the dental hygienist. The services authorized under this subdivision
11.24 and the collaborative agreement may be performed without the presence of a licensed
11.25 dentist and may be performed at a location other than the usual place of practice of the
11.26 dentist or dental hygienist and without a dentist's diagnosis and treatment plan, unless
11.27 specified in the collaborative agreement.

11.28 Subd. 2. **Dental assistants.** Every licensed dentist and dental therapist who uses the
11.29 services of any unlicensed person for the purpose of assistance in the practice of dentistry
11.30 or dental therapy shall be responsible for the acts of such unlicensed person while engaged
11.31 in such assistance. The dentist or dental therapist shall permit the unlicensed assistant to
11.32 perform only those acts which are authorized to be delegated to unlicensed assistants
11.33 by the Board of Dentistry. The acts shall be performed under supervision of a licensed
11.34 dentist or dental therapist. A licensed dental therapist shall not supervise more than four
11.35 ~~registered~~ licensed or unlicensed dental assistants at any one practice setting. The board
11.36 may permit differing levels of dental assistance based upon recognized educational

12.1 standards, approved by the board, for the training of dental assistants. The board may also
12.2 define by rule the scope of practice of licensed and unlicensed dental assistants. The
12.3 board by rule may require continuing education for differing levels of dental assistants,
12.4 as a condition to their license or authority to perform their authorized duties. Any
12.5 licensed dentist or dental therapist who permits an unlicensed assistant to perform any
12.6 dental service other than that authorized by the board shall be deemed to be enabling an
12.7 unlicensed person to practice dentistry, and commission of such an act by an unlicensed
12.8 assistant shall constitute a violation of sections 150A.01 to 150A.12.

12.9 Subd. 3. **Dental technicians.** Every licensed dentist and dental therapist who uses
12.10 the services of any unlicensed person, other than under the dentist's or dental therapist's
12.11 supervision and within the same practice setting, for the purpose of constructing, altering,
12.12 repairing or duplicating any denture, partial denture, crown, bridge, splint, orthodontic,
12.13 prosthetic or other dental appliance, shall be required to furnish such unlicensed person
12.14 with a written work order in such form as shall be prescribed by the rules of the board. The
12.15 work order shall be made in duplicate form, a duplicate copy to be retained in a permanent
12.16 file of the dentist or dental therapist at the practice setting for a period of two years, and
12.17 the original to be retained in a permanent file for a period of two years by the unlicensed
12.18 person in that person's place of business. The permanent file of work orders to be kept
12.19 by the dentist, dental therapist, or unlicensed person shall be open to inspection at any
12.20 reasonable time by the board or its duly constituted agent.

12.21 Subd. 4. **Restorative procedures.** (a) Notwithstanding subdivisions 1, 1a, and
12.22 2, a licensed dental hygienist or licensed dental assistant may perform the following
12.23 restorative procedures:

12.24 (1) place, contour, and adjust amalgam restorations;

12.25 (2) place, contour, and adjust glass ionomer;

12.26 (3) adapt and cement stainless steel crowns; ~~and~~

12.27 (4) place, contour, and adjust class I and class V supragingival composite restorations
12.28 where the margins are entirely within the enamel; and

12.29 (5) place, contour, and adjust class II and class V supragingival composite
12.30 restorations on primary teeth.

12.31 (b) The restorative procedures described in paragraph (a) may be performed only if:

12.32 (1) the licensed dental hygienist or licensed dental assistant has completed a
12.33 board-approved course on the specific procedures;

12.34 (2) the board-approved course includes a component that sufficiently prepares the
12.35 licensed dental hygienist or licensed dental assistant to adjust the occlusion on the newly
12.36 placed restoration;

13.1 (3) a licensed dentist or licensed advanced dental therapist has authorized the
13.2 procedure to be performed; and

13.3 (4) a licensed dentist or licensed advanced dental therapist is available in the clinic
13.4 while the procedure is being performed.

13.5 (c) The dental faculty who teaches the educators of the board-approved courses
13.6 specified in paragraph (b) must have prior experience teaching these procedures in an
13.7 accredited dental education program.