

OREGON BOARD OF DENTISTRY

2015 - 2017 BUDGET PRESENTATION

**Joint Ways and Means Subcommittee on Education
February 19, 2015**

Presented by:

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2015-2017 Budget Presentation**

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AGENCY OVERVIEW

The Board of Dentistry was established in 1887 to regulate the practice of Dentistry. In 1946, Dental Hygiene was established as a licensed profession in Oregon and added to the purview of the Board.

There are ten members appointed to this policymaking Board and seven permanent full-time staff. The ten Board members include six dentists, one of whom must be a specialist, two dental hygienists and two public members. Members of the Board are appointed by the Governor and confirmed by the Senate.

The Board's highest priorities are the enforcement, monitoring, licensing and examination of Dentists and Dental Hygienists in Oregon.

The Board's identified goal is to protect the public from unsafe, incompetent or fraudulent practitioners; encourage licensees to practice safely and competently in the best interests of their patients; and educate the public on acceptable and appropriate dental practices.

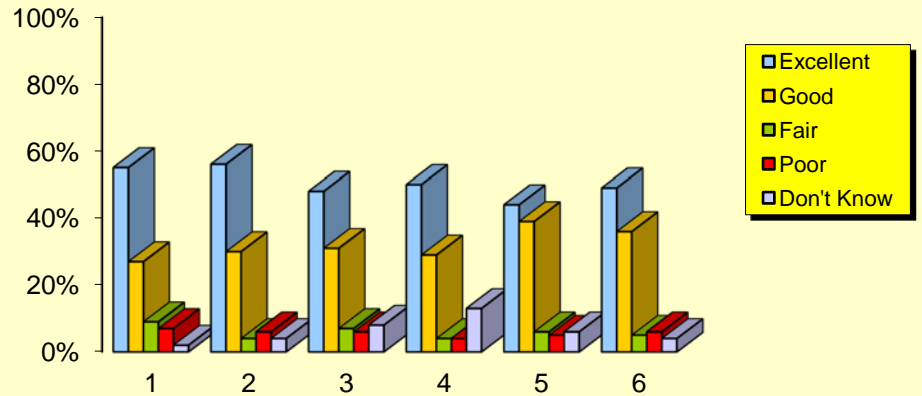
The Board is supported solely from application and license renewal fees, permit fees, miscellaneous receipts, penalty fees for late renewals and civil penalties. 95% of this revenue is from licensee and permit fees. The Board last raised fees in 2009.

AGENCY PERFORMANCE OVERVIEW

**OREGON BOARD OF DENTISTRY
ANNUAL PERFORMANCE PROGRESS REPORT 2014**

Performance Measure Definition	2014 Goal	2014 Performance
#1 Percent of licensees in compliance with continuing education requirements	100%	100%
#2 Average time from receipt of a new complaint to completed investigation (ready to be submitted to the Board)	3.5 months	Cases opened and investigations completed during the period 7/1/2013 through 6/30/2014. 10.0 months
#3 Average Number of working days for the receipt of completed paperwork to issuance of license (new or renewal)	7 Days	7 Days
#4 Agency Overall Satisfaction – Percent of customers rating their overall satisfaction with the agency above average or excellent.	85% Positive Response	85% Positive Response
#5 Board Best Practices – Percent of total of best practices met by Board.	100%	100%

Oregon Board of Dentistry Customer Service Survey July 1, 2013 - June 30, 2014



1 How do you rate the timeliness of the services provided by the OBD?

E= 55% G= 27% F= 9% P= 7% DK= 2%

2 How do you rate the ability of the OBD to provide services correctly the first time?

E= 56% G= 30% F= 4% P= 6% DK= 4%

3 How do you rate the helpfulness of the OBD?

E= 48% G= 31% F= 7% P= 6% DK= 8%

4 How do you rate the knowledge and expertise of the OBD?

E= 50% G= 29% F= 4% P= 4% DK= 13%

5 How do you rate the availability of information at the OBD?

E= 44% G= 39% F= 6% P= 5% DK= 6%

6 How do you rate the overall quality of services provided by the OBD?

E= 49% G= 36% F= 5% P= 6% DK= 4%

PROGRAM PRIORITIES

The Board's three major areas of service are:

- **Licensing and Examination**

The Board licenses dentists and dental hygienists, conducts examination for eight different specialties, establishes standards for the use of anesthesia in dental offices, issues four levels of anesthesia permits, and certifies dental assistants. Background checks are conducted on all new applicants. As described previously, applicants must pass a written national examination; a clinical examination conducted by a dental testing agency recognized by the Board, and passes the Board's Jurisprudence examination. 15% of all licensees renewing their licenses each year are audited for compliance with the Board's Continuing Education requirements.

There are currently approximately 3804 licensed dentists and 4226 licensed dental hygienists. We anticipate issuing about 800 new licenses this biennium almost equally divided between dentists and dental hygienists. However, this increase does not translate into a lot more practitioners available to serve the public because of retirements, licenses that are allowed to lapse for any number of reasons and practitioners moving out of state. The Board offers licensure through examination; by credential; and for dental specialists, the ability to be examined by the Board in the particular specialty and then the license is limited to that special area of expertise; i.e., Oral and Maxillofacial Surgery, or Pediatric Dentistry. Applicants for a general dental license or a dental hygiene license must pass a written examination, called the "National Boards," which is conducted by the American Dental Association, Commission on Dental Education. Applicants must also pass a clinical examination conducted by any state or regional testing agency.

The table below shows the historical and projected workload for the agency in this activity.

Licensing and Examination Workload	2003-05 Actual	2005-07 Actual	2007-09 Actual	2009-11 Actual	2011-13 Actual	2013 – 2015 Est.
Licenses Issued:						
Dental	311	350	355	305	340	360
Dental Hygiene	294	335	375	434	450	550
Total New Licenses Issued:	616	685	731	739	790	910
Licenses Renewed:						
Dental	3254	3300	3325	3389	3400	3556
Dental Hygiene	3180	3265	3386	3613	3700	3684
Total Licenses Renewed:	6434	6595	6712	7002	7100	7240
Specialty Examinations Conducted	9	5	3	3	3	3
Candidates Examined	7	5	3	5	3	3
Anesthesia Permits Issued/Renewed	3795	3969	3750	4359	4400	4534
Dental Assistants Certified	1751	2260	2449	2638	2650	2500
Dental Assisting Instructor Permits Issued/Renewed	102	124	106	110	125	83
Limited Access Dental Hygiene Permits Issued/Renewed	59	67	84	171	300	40

- Enforcement and Monitoring

The Board conducts investigations of complaints filed with the Board alleging unacceptable patient care or other issues ranging from unprofessional conduct, improper prescribing practices, substance abuse, unauthorized use of auxiliaries, advertising or disciplinary action in another state. The majority of cases involve allegations of unacceptable patient care. Investigations are also conducted based on reports of malpractice claims that are submitted by insurance companies. Disciplinary actions are reported to the National Practitioners Data Bank and to the Healthcare Integrity and Protection Data Bank. Licensees under disciplinary sanction are actively monitored to assure their compliance with the terms of their Order including licensees with substance abuse issues who have long-term treatment and recovery needs.

There are usually 50 licensees being monitored on a regular basis. During calendar year 2014 the Board received 249 complaints closed 228 case investigations. Disposition of those cases are shown in the table below:

Dismissed	125	55%
Letter of Concern	63	28%
Disciplinary Actions	40	18%

Disciplinary actions in 2014 included:

- Revocation – 0
- Voluntary resignation – 0
- Suspension – 2
- Restrictions on practice – 1
- Reprimand – 29
- Civil Penalty/Restitution – 13
- Education/Training – 9
- Evaluation/Treatment Monitoring – 0

(There is typically more than one type of discipline incorporated in a disciplinary action; i.e. reprimand, civil penalty and community service is the standard discipline for working without a current license or allowing a person to perform duties for which they do not hold the appropriate license or permit.)

- Administration

Administrative activities include implementation of Board policy, communication and collaboration with the professional associations, the School of Dentistry and other educational programs, related licensing agencies such as the Board of Pharmacy, the Board of Medical Examiners and the Board of Denture Technology in addition to State Boards of Dentistry in other states. Administration also includes legislative activities, budget development and monitoring, and staffing. A major component of Administration is carrying out the Board's primary goal of communicating with licensees and the public. This includes maintenance of a web site, production of two newsletters per year, and scheduling and presenting information to students, licensees and the public about the Board and its activities.

Agency plans for accomplishment of its goals for 2015-2017 include:

- Continue to promote and encourage participation in the Statewide HPSP diversion program for licensees with substance abuse addictions.
- Continue to promote and encourage participation in the volunteer Dentist/Dental Hygienist program to increase access to quality dental care.
- Continue to use OBD/OAGD Mentoring Program as one avenue to resolve disciplinary cases.
- Continue to promote the Oregon Prescription Drug Monitoring Program to all licensees.
- Review Specialty Examination process to assure exams are valid and reliable.
- Utilize the website, newsletter and personal presentations to communicate Board policies and expectations.
- Refine On-line renewal process.
- Fully implement use of electronic forms of Payments.
- Continue to collect data on the ethnic and racial makeup of licensees and work with policy makers, educators, and students to encourage a representative diversity in the dental workforce.
- Refine participation in the Health Care Workforce Initiative project to address the issues of health care workforce shortages and access to care.
- Continue the implementation of more electronic media for communication and Board functions.

POLICY OPTION PACKAGES:

Package 100 Increase in O/S Travel Limitation for National Meetings

\$30,000

- The purpose of this package is to rectify and accounting issue that was presented by the OBD Accountants at the Department of Administrative Services.

How Achieved: National Organizations have in the past reimbursed the OBD for travel expenses and per diem for staff and board members and the money was recorded as a return of expenses, the accountants have now required since this is an ongoing expense and reimbursement that it should be budgeted as a revenue and expense item.

Staffing Impact: None

Services and Supplies: Increased by \$30,000.00

Revenue Source: National Organizations that Reimburse the OBD for travel expenses and per diem.

Package 101 Dental Health Investigator Position

\$273,481

- The purpose of this package is to allow the Board to hire an additional 1.0 FTE Dental Investigator. For the past 20 years the Board has hired independent contractor dental consultant investigators on a part-time basis to assist with the investigation of dental cases, this process has simply not been able to keep up with the number of complaints as well as the complexity of those complaints. The current Board Dental Investigator who is the Chief Investigator has been with the Board for 24 years and is expected to retire within the next few years and a new person will need to be brought in and be trained so that a seasoned dental investigator will be available.

How Achieved: The Oregon Board of Dentistry will promulgate rules to raise fees effective July 1, 2015: Dental License fees will be increased from \$315.00 to \$390.00 and Dental Hygiene License Fees will be increased from \$155.00 to \$230.00

Staffing Impact: 1.0 FTE increased.

Services and Supplies: None

Revenue Source: License Fees for Dentists and Dental Hygienists will be increased by \$75.00 per licensee.

Package 103 Fee Increase

\$586,260.00

- The purpose of this package is to provide for the funding to cover the cost of hiring an additional Dental Investigator.

How Achieved: The Oregon Board of Dentistry will promulgate rules to raise fees effective July 1, 2015: Dental License fees will be increased from \$315.00 to \$390.00 and Dental Hygiene License Fees will be increased from \$155.00 to \$230.00.

Staffing Impact: None

Services and Supplies: None

Revenue Source: License Fees for Dentists and Dental Hygienists will be increased by \$75.00 per licensee.

AGENCY CHALLENGES For 2015 – 2017 and Beyond:

- Reducing the complaint investigation backlog.
- Filling the vacant Executive Director position.
- Filling the new full time dentist investigator position with a competent candidate and then training that new individual.
- Fulfilling the already scheduled Board outreach events.
- Staffing changes within the next few years – (four of the seven positions are within retirement).