The most recent session of the Nevada Legislature brought changes to the operations of the State Board of Dental Examiners, as well as to the practices and duties of the Board's licensees. The changes will impact licensure, penalties for practicing without a license, insurance reimbursement and billing, the provision of care in public health settings and other areas.

**Licensing and Board Documents**

Existing law requires that a healthcare provider notify appropriate authorities if they know or have reason to believe that a patient or other child they know in their professional capacity has been abused or neglected. All licensees, upon initial licensure at a minimum, will have to attest to their acknowledgement of this law, and the Board will keep that acknowledgement for the duration that the licensee is licensed in Nevada.

Under SB 236, the Board will be required to make all of its forms accessible for completion electronically on the internet. SB 21 requires the Board to provide a list of all licensees to the State Controller to be checked against the list of persons owing an outstanding debt to the State. If delinquent, the Board will be required to withhold renewal of licensure pending settlement of the debt with the State Controller.

**Public Health Settings**

AB 277 clarifies the circumstances under which a dental hygienist with a public health endorsement may operate a clinic without a dental director, and the Board will continue to establish, by regulation, the types of services an endorsed hygienist may provide.

AB 228 will provide a limited ability for healthcare professionals licensed in other states to provide uncompensated, volunteer care at no cost to patients in certain health fair and related settings.

**Individual Practice and Patient Relations**

State law requires that licensed professionals provide dental services. The penalties and enforcement options available to regulatory boards and law enforcement have varied widely in different parts of the statutes. SB 199 and SB 220 make the fraudulent provision of healthcare where injury results in a felony, and gives regulatory boards some consistent, albeit narrow, ability to cite and fine and/or seek an injunction against such persons.

AB 456 requires that an advertisement for health care services that names a health care professional must identify the type of license or certificate held by the health care professional and must not contain any deceptive or misleading information. Licensees must also post a sign or other notification of their specific license prominently in the office, and all must wear a nametag specifying their specific license.

AB 331 requires that any provider collecting insurance information from a patient must retain that information, and if they do not bill the insurer in the specified time limits, the provider is barred from attempting to collect the covered amounts from the patient.

SB 497 prohibits a dental care insurer from requiring a provider to offer discounts on non-covered services. Additionally, the law requires that covered services be billed at the covered rate if a patient has exceeded their yearly coverage limit.
PATIENT SAFETY REMAINS A TOP PRIORITY

Permit Requirements for Conscious Sedation, Deep Sedation and General Anesthesia

by Jade A. Miller, DDS
NSBDE Member

Dentistry has long been at the forefront at making patient comfort and safety a priority during invasive procedures. We probably all remember during our education, learning that Dr. Horace Wells, a dentist, pioneered the use of general anesthesia. Today anesthesia techniques and agents have advanced since 1846 and patient safety has gotten to the point that serious negative outcomes are exceedingly rare events.

Many dentists offer advanced levels of pain management and anxiety control within a continuum of anesthesia services from sedation through general anesthesia. Most have received their training in postgraduate specialty or general practice residencies. For those who have not received training in that area, there are increasing opportunities to receive it in structured continuing education programs.

The responsibility of the Nevada State Board of Dental Examiners (NSBDE) is to protect the public, which encompasses patient anesthesia safety. The NSBDE administers a permitting process for providers who offer sedation and general anesthesia. In Nevada, it is required by law to have the following:

- It is required to hold a site permit for each specific location that sedation/general anesthesia services are delivered.
- The site permit verifies a minimal requirement related to the operatory/surgical suite, equipment, monitoring and emergency equipment, records and emergency medications.
- It is required to hold an administrator permit for those providers directly delivering those services. This process requires the provider’s demonstration of their sedation/general anesthesia technique and also assesses the ability to manage a variety of medical emergencies.

One area that prepares all dentists whether you are a sedation/general anesthesia provider or not are is in the area of medical emergency simulation. Simulation labs and courses are becomingly widely available that utilize high tech computerized simulated manikins to train attendees in responding to medical emergencies. It is the next closest training to a medical emergency happening live. We would encourage all dentists, especially sedation/general anesthesia provider’s, to participate in one of these simulation courses.

If you utilize any medication that could alter the level of consciousness of your patients make sure your read the anesthesia regulation on the Board of Dental examiners website to assure your are in compliance. Do not hesitate to contact the Board office for more information. We welcome our licensees’ input and comments.

INFECTION CONTROL REFRESHER FOR OFFICE STAFF

by Heather Rogers, BSDH
CEU Educator

In an answer to the call made by the Department of Health and Human Services, our board of dental examiners has asked that we educate ourselves in infection control for four hours every bi-annual renewal cycle. Even though we’ve all done the coursework already, we can all use a refresher course, myself included.

The requirements can be found in the outline at the end of the MMWR published by the CDC. You don’t have to read the entire document to know that there are some areas of infection control that you may not remember. I believe the most important point is that the CDC recommends your office staff receive training at least one hour per year.

Although dentists and hygienists are required to go through many hours of clinical experience to ensure proper infection control techniques, we frequently work with staff members that need to be reminded of proper infection control. The best way to ensure that all dental office staff members abide by infection control guidelines is to provide employees a comprehensive form of training.

I recommend the whole office attend at least one live infection control continuing education course as a group in order to receive, interpret and implement the information in your office. It’s also a great idea to make every office member become a part of the infection control team. Each member of the staff has something to contribute to patient and practitioner safety.
Top 3 Patient Complaints

by Debra Shaffer-Kugel
Executive Director

The Nevada State Board of Dental Examiners receives approximately 350-400 complaints per year. These complaints vary from patient to patient and no complaint is exactly the same. However, there seems to be a similarity in the issues.

1. The Cost of Dental Records - Pursuant to Chapter 629, a health care provider has five working days, from receipt of a request, to make copies of dental records or to disseminate the dental records to the patient. The health care provider may charge a duplication fee of .60 cents at most, per page and may ONLY charge a reasonable duplication fee for x-rays (your actual cost to duplicate). No other administrative fees may be added. Patients who have a balance on account with your office cannot be denied a copy of the dental records based on their financial standing with your office.

2. Rushing Through a Treatment & No Periocharting: Root planing and scaling in less than an hour and no periodontal charting are other hot issues. The Disciplinary Screening Officers are noticing there is no periodontal charting in the patients dental records, or the pocket depths do not warrant root planing and scaling. To avoid such a complaint, make sure to periochart. It not only protects the practitioner, but it establishes a baseline for the patient.

3. Misdiagnosing & Over-diagnosing - Patients trust their dental professionals and believe they have their best interest when treating their dental needs. Patients trust when practitioners advise them they have multiple cavities only to find out with a second opinion the treatment received was not necessary or even worse not the appropriate remedy. The economic challenges facing dental professionals today is not easy but over diagnosing a patient and providing unnecessary treatment is a violation.

STAYING ON TRACK FOR LICENSURE

Tips to a quick turnaround to get

by Lisa Marie Wall, MBA
Newsletter Editor & NSBDE Public Member

If you are a dental or dental hygiene student, obtaining your license in Nevada can take months if you don’t start the application process well in advance. Understandably, many students are focused on passing their board exam and graduation rather than starting the license application process in advance to prevent a lengthy downtime of waiting to practice. While the wait can be frustrating and costly for the graduates, it has also created concern for clinical educational programs, such as the University of Nevada Las Vegas School of Dental Medicine (UNLV SDM).

Associate Deans of Clinical Services at UNLV SDM Wendy Woodall, DDS and Rick Thiriot, DDS both expressed concern for the students who are saddled with student loan debt that needs to be repaid upon graduation. Dr. Woodall explains, “Our students finish their program in mid-April and graduate in May. They receive their transcripts within two weeks, and then apply for licensure... It can end up being about 3-4 months before they get a license and start practicing.”

Watching the best and brightest of their students move to another state because of Nevada’s lengthy licensure process is unsettling. Dr. Thiriot points out, “Who can afford to wait four months to start practicing? This has become such a deterrent we are now seeing our graduates move to other states in the western region like Arizona where the turnaround time for licensing of a completed application is about 2-4 weeks.” So what is causing the disparity in turn-around time?

State legislation and boards have different requirements for applications that affect the timing of licensure approval. For example, both Oregon and Nevada state boards request background checks as part of their licensure application process and both find that it takes applicants 6-8 weeks to complete the application. While, the Arizona State Board of Dental Examiners does not require background checks, a query for the national practitioner data bank may be required if the applicant was licensed in another state or as another healthcare professional. Continued on page 4
Staying on Track For Licensure

Continued from page 3

In Nevada, certain application requirements are listed in the NRS 631.220. It requires among other items that every applicant, who is applying for a license to practice dental hygiene or dentistry, must submit a complete set of fingerprints and background check. The Statute also requests applicants to file their application with the Board at least 45 days before their examination. For Nevada applicants, it is imperative that they start the application process in the timeframe the Statute recommends to prevent a lengthy wait time. To view NRS 631.220 in its entirety, please visit the NSBDE website. Regulation that outlines required documentation for dental and dental hygiene licensure please view NAC 631.030.

The Nevada Dental Board of Examiners members make it a point to not only listen to concerns and suggestions from our dental community, academia, and Nevadans but to also take action and address them. Within its purview, the Board has made substantial progress in its attempt to streamline licensure approval by doing the following:

1. The Board has created a checklist for licensure applications, which is listed on the Nevada State Board of Dental Examiners (NSBDE) website.
2. The NSBDE offers an online Jurisprudence exam for applicants.
3. The Board offers workshops for senior students on the application process.
4. The NSBDE public meetings are scheduled around licensure approvals.
5. Reminders of deadlines of when to start background checks will be posted on the website starting in the Spring, 2014.

If you have questions or suggestions that you would like to present to the Board, please join us during our Public Meetings and you will get a chance to weigh in during Public Comment. The Public Meetings schedule is posted on our website.

2013 BOARD ACTION INFORMATION:

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