

NEVADA STATE BOARD
of
DENTAL EXAMINERS



CONTINUING EDUCATION
COMMITTEE MEETING

TUESDAY, APRIL 20, 2021

6:00 P.M.

PUBLIC BOOK

Agenda Items (4)(a)-(5)(b)
NAC 631.033 and NAC 631.035

NAC 631.033 Use of laser radiation in practice: Documentation required with application for renewal of license. (NRS 631.190, 631.330) Each licensee who uses or wishes to use laser radiation in his or her practice of dentistry or dental hygiene must include with the application for renewal of his or her license:

1. A statement certifying that each laser used by the licensee in his or her practice of dentistry or dental hygiene has been cleared by the Food and Drug Administration for use in dentistry; and
2. Proof that he or she has successfully completed a course in laser proficiency that:
 - (a) Is at least 6 hours in length; and
 - (b) Is based on the *Curriculum Guidelines and Standards for Dental Laser Education*, adopted by reference pursuant to [NAC 631.035](#).

(Added to NAC by Bd. of Dental Exam'rs by R139-05, eff. 12-29-2005)

NAC 631.035 Use of laser radiation in practice: Adoption by reference of *Curriculum Guidelines and Standards for Dental Laser Education*. (NRS 631.190)

1. The Board hereby adopts by reference the *Curriculum Guidelines and Standards for Dental Laser Education*, adopted by the Academy of Laser Dentistry. The *Curriculum Guidelines and Standards for Dental Laser Education* is available, free of charge, from the Academy of Laser Dentistry:
 - (a) By mail, at P.O. Box 8667, Coral Springs, Florida 33075;
 - (b) By telephone, at (954) 346-3776; or
 - (c) At the Internet address
http://www.laserdentistry.org/prof/edu_curriculumguidelines.cfm.
2. The Board will periodically review the *Curriculum Guidelines and Standards for Dental Laser Education* and determine within 30 days after the review whether any change made to those guidelines and standards is appropriate for application in this State. If the Board does not disapprove a change to an adopted guideline or standard within 30 days after the review, the change is deemed to be approved by the Board.

(Added to NAC by Bd. of Dental Exam'rs by R139-05, eff. 12-29-2005)

Agenda Item (4)(a):

Dental Laser Coaching- Nick Clausen, MBA, PMP



Nevada State Board of Dental Examiners

6010 S. Rainbow Blvd., Bldg. A, Ste. 1
Las Vegas, NV 89118
(702) 486-7044 • (800) DDS-EXAM • Fax (702) 486-7046

Received
JAN 20 2021
NSBDE

PROVIDER APPROVAL APPLICATION: LASER RADIATION PROFICIENCY PROGRAM

Instructor(s) Name: NICK CLAUSEN

Program Title and Objectives [Must relate directly to the practice of dentistry and/or dental hygiene]:

Title, Objectives, Synopsis, Bio, AGD codes, Pre-requisites + Itinerary Attached

Number of Participants: 8

Hours of Actual Instruction (didactic/hands-on): 6

Facility Name and Address

YTBD

Date(s) of Program: YTBD

Entity Submitting Request: NICK CLAUSEN, Dental Laser Coaching

Business Address: 1309 Enterprise Way

City, State & Zip: Carson City, NV 89703

Business Telephone: (816) 506-4368

Date of Request: January 20, 2021

Signature of Person Authorized to Represent Program

PLEASE ATTACH NAME(S) AND CURRICULUM VITAE(S) FOR EACH INSTRUCTOR, THE OUTLINE OF COURSE (including method of presentation), AND A LETTER SIGNED BY THE PERSON(S) WHO HOLD PROPRIETARY RIGHTS TO THE PROGRAM GRANTING THE BOARD PERMISSION TO REVIEW THEIR PROGRAM.

FOR OFFICE USE ONLY - DO NOT WRITE BELOW THIS LINE.

Approved by: _____

Number of Hours Approved: _____

Effective Date of Approval: _____

Disapproved [Explanation]: _____

PAID

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Agenda Item (5)(a)
NAC 631.190

NAC 631.190 Specialties. ([NRS 631.190](#), [631.250](#), [631.255](#)) The only specialties for which the Board will issue licenses are:

1. Oral and maxillofacial pathology;
2. Oral and maxillofacial surgery;
3. Orthodontia;
4. Periodontia;
5. Prosthodontia;
6. Pediatric dentistry;
7. Endodontia;
8. Public health; and
9. Oral and maxillofacial radiology.

Agenda Item (5)(a)
American Dental Association Dental Specialties



National Commission on Recognition of Dental Specialties and Certifying Boards

Approved and Adopted by the National Commission on Recognition of Dental Specialties and Certifying Boards.

Dental Anesthesiology: Dental anesthesiology is the specialty of dentistry and discipline of anesthesiology encompassing the art and science of managing pain, anxiety, and overall patient health during dental, oral, maxillofacial and adjunctive surgical or diagnostic procedures throughout the entire perioperative period. The specialty is dedicated to promoting patient safety as well as access to care for all dental patients, including the very young and patients with special health care needs. (Adopted March 2019)

Oral Medicine: Oral Medicine is the specialty of dentistry responsible for the oral health care of medically complex patients and for the diagnosis and management of medically-related diseases, disorders and conditions affecting the oral and maxillofacial region. (Adopted September 2020)

Orofacial Pain: Orofacial Pain is the specialty of dentistry that encompasses the diagnosis, management and treatment of pain disorders of the jaw, mouth, face, head and neck. The specialty of Orofacial Pain is dedicated to the evidencedbased understanding of the underlying pathophysiology, etiology, prevention, and treatment of these disorders and improving access to interdisciplinary patient care. (Adopted September 2020)

Agenda Item (5)(a)
Letter From Shanna Kim DDS

Shanna K. Kim, D.D.S.

Diplomate, American Board of Orofacial Pain

Reno, Nevada | [REDACTED] | [REDACTED]

March 23, 2021

Dear Frank DiMaggio,

On March 3, 2020, Orofacial Pain (OFP) was officially recognized as the newest ADA dental specialty by the National Commission on Recognition of Dental Specialties and Certifying Boards. **To maintain alignment with national dental organizations, we respectfully request that the Nevada State Board of Dental Examiners formally recognize orofacial pain as a dental specialty.**

OFP is a branch of dentistry that encompasses the assessment, diagnosis, and management of chronic pain disorders involving structures of the jaw, mouth, and associated head and neck regions. The American Academy of Orofacial Pain (AAOP) attained formal specialty recognition after meeting the American Dental Association (ADA) Requirements for Recognition of Dental Specialties. OFP providers ensure patient access to high quality, evidence-based treatment for a range of debilitating orofacial pain disorders, while also ameliorating issues of chronic pain and opioid abuse, patient disability, and rising healthcare costs.

Background

OFP disorders include, but are not limited to, temporomandibular joint (TMJ) disorders (TMD), jaw movement disorders, neuropathic and neurovascular pain disorders, headache, and sleep disorders. These common and debilitating conditions are highly complex. But because the underlying pathophysiology spans both medicine and dentistry, they are frequently misdiagnosed, undertreated, or incorrectly treated. Moreover, there are very few providers with formal residency training in OFP.

OFP specialists typically undertake 1-3 years of residency training at a Commission of Dental Accreditation (CODA) accredited program. Formally trained OFP specialists become board-certified diplomates by fulfilling the requirements of the American Board of Orofacial Pain (ABOP).

Some dentists without formal OFP training attempt to treat these complex conditions after completion of a rudimentary continuing education course, without a firm background and clinical experience in the treatment of orofacial pain conditions. Due to this lack of expertise, patients frequently suffer from issues of over-treatment and progression of chronic pain conditions.

Dental and medical predoctoral curriculums provide minimal exposure to orofacial pain or sleep disorders. Yet the orofacial region is functionally and neurologically complex and is intimately associated with vital life-sustaining functions such as digestion, verbal and non-verbal communication, appearance, taste, balance, hearing and touch. Ailments in the head and neck can trigger and refer significant pain and dysfunction throughout the vast trigeminal nerve complex. Delays in care or

inappropriate treatment of orofacial pain disorders increases the risk of opioid addiction, mental health disorders, financial strain, and chronic disability. For example, a recent study revealed that full-time employees who suffer from orofacial pain disorders miss more days from work compared to employees who experienced pain in other areas of the body. Since OFP disorders share many known risk factors and medical comorbidities (fibromyalgia, low back pain, depression, hypothyroidism), it is necessary for practitioners to be involved in specialized interdisciplinary collaborative care that orofacial pain specialists provide.

Orofacial Pain and Health Plans

Over the past 40 years, OFP-trained dentists have become an integral part of the healthcare system and reimbursed by medical health plans for effective evidence-based care. Historically, care for orofacial pain disorders has existed in an unrecognized chasm between dentistry and medicine. Several state legislative efforts in the 1980s, mandated all medical health policies, plans, and contracts to specifically include coverage for non-surgical and surgical treatment protocols for orofacial pain disorders, and that all coverage of benefits be the same as that for treatment to any other area of the body. This legislation also mandated coverage of benefits for OFP disorders to equally apply, whether the services and procedures are provided by a licensed physician or dentist. For many years, credentialed OFP specialist providers have utilized the AMA ICD-10/CPT based coding system, employed electronic health records and electronic billing, and have been reimbursed by private sector and government health insurance plans.

On a national level, several efforts have recently clarified the need for increased access to care for orofacial pain disorders.

- *The National Uniform Claim Committee (NUCC)* added the new Taxonomy Code of 1223X22120X to identify OFP Specialist providers on July 1, 2019.
- *The Council on Affordable Quality Healthcare (CAQH)* officially added the OFP Specialty to its recognized list of specialties, contained in its national credentialing system in June 2020.
- *The National Academy of Science, Engineering and Medicine (NASEM)* published a 340-page report in March of 2020, on Temporomandibular Disorders (TMD) and Orofacial Pain (OFP). This consensus report concluded that:
 1. There is a priority need in the US to improve access to care for patients with TMD and OFP disorders, as provided by well-trained dental and medical specialists.
 2. There is a priority need for private sector and government health insurance reimbursement that is consistent with other pain conditions, regardless of whether it is provided by dentists or physicians.
 3. Many providers (including dentists, physicians, and surgeons), continue to rely on high-risk, high-cost invasive dental, medical, or surgical protocols as their first-line treatment, often poorly supported by research. Instead, evidence-based assessment, stabilization and rehabilitation protocols, including intra-oral appliances, physical therapy, health counseling/coaching and self-care training is recommended as the most successful initial approach; this protocol has the least risk and lowest cost.

4. All medical and dental professionals need to improve their recognition, evidence-based assessment, diagnosis, and initial treatment of TMD/OFP disorders, and when indicated, provide referral to Orofacial Pain specialists.
5. Significant increases in National Institutes of Health (NIH) funding for OFP/TMD research and education is recommended to improve understanding, access to care, education and training within the curricula of all medical and dental schools, with expansion of OFP specialty resident/fellowship training programs.

Orofacial Pain in Nevada

While our specialty has received ADA-recognition, OFP specialists still encounter many roadblocks in medical credentialing and reimbursement. We ultimately need assistance and recognition from each state board.

The Nevada State Board of Dental Examiners can serve an important role in improved access to care for patients who suffer from orofacial pain disorders. The recognition of OFP specialists by all state boards is necessary to improve the outcomes of those that suffer from chronic pain conditions. We request that the Nevada State Board of Dental Examiners take the following actions:

- 1) **Recognize orofacial pain as a dental specialty in the state of Nevada.**
 - a) **Issue requirements for OFP specialty education and training for licensure for orofacial pain specialists. These requirements should be consistent with ADA guidelines and include the use of evidence-based assessment, diagnosis, management, and prevention of chronic OFP disorders.**
- 2) **Support professional announcements and marketing by specialists in orofacial pain, consistent with the state board regulations.**
- 3) **Encourage medical health plans that operate in the state to credential orofacial pain specialists.**
 - a) **Require health plans to reimburse covered services and procedures related to the assessment, diagnosis, management, and prevention of orofacial pain disorders, *on an equal basis as physicians.***

In summary, orofacial pain has been an ADA recognized specialty for over a year. We respectfully request that the Nevada State Board of Dental Examiners recognize orofacial pain as a dental specialty in the state of Nevada and assist in insurance credentialing and reimbursement. These actions will allow patients with debilitating chronic orofacial pain disorders access to the most effective, least invasive and most cost-effective interdisciplinary management protocols. Please do not hesitate to contact us if you have any questions.

Sincerely;

A handwritten signature in cursive script that reads "Shanna Kim".

Shanna K. Kim, D.D.S.

Diplomate, American Board of Orofacial Pain

Member, American Board of Orofacial Pain

Member, AAOP Access to Care Committee

Written in collaboration with members and providers of the

American Academy of Orofacial Pain

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