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COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE
BUREAU OF PROFESSIONAL AND OCCUPATIONAL AFFAIRS

F I N A L M I N U T E S

MEETING OF:

STATE BOARD OF DENTISTRY

TIME: 11:06 A.M.

Held at

PENNSYLVANIA DEPARTMENT OF STATE

2601 North Third Street

One Penn Center, Board Room C

Harrisburg, Pennsylvania 17110

as well as

VIA MICROSOFT TEAMS

May 12, 2023

State Board of Dentistry
May 12, 2023

BOARD MEMBERS:

Arion R. Claggett, Acting Commissioner, Bureau of
Professional and Occupational Affairs
Shawn M. Casey, D.M.D., Chairman
Jennifer Unis Sullivan, D.M.D., J.D., Vice
Chairperson
Theresa A. Groody, DHSc, EFDA, CDA, Secretary
Brice D. Arndt, D.D.S.
Barbara (Bonnie) L. Fowler, Public Member
Godfrey Joel Funari, M.S., D.M.D.
Joel S. Jaspan, D.D.S.
R. Ivan Lugo, D.M.D., M.B.A.
Andrew S. Matta, D.M.D. - Absent
LaJuan M. Mountain, D.M.D.
Donna L. Murray, RDH, PHDHP, MSDH
Brian Wyant, Public Health Program Director,
Department of Health designee - Absent
Rebecca Zehring, Office of Attorney General

BUREAU PERSONNEL:

Ronald K. Rouse, Esquire, Board Counsel
Carlton Smith, Deputy Chief Counsel, Prosecution
Division
Paul J. Jarabeck, Esquire, Senior Board Prosecutor
and Prosecution Liaison
Timothy J. Henderson, Esquire, Board Prosecutor
Jason T. Anderson, Esquire, Board Prosecutor
Amber Lee Czerniakowski, Board Prosecutor
Kayla R. Bolan, Esquire, Board Prosecutor
Christina Townley, Board Administrator
Andrew LaFratte, MPA, Executive Policy Specialist,
Department of State
Michelle Witmer, Fiscal Management Specialist,
Bureau of Finance and Operations, Department of
State

ALSO PRESENT:

Steve Neidlinger, CAE, Executive Director,
Pennsylvania Academy of General Dentistry
Barbara Reiprich, RDH, PHDHP, Pennsylvania Dental
Hygienists' Association

State Board of Dentistry
May 12, 2023

ALSO PRESENT: (cont.)

Danie Bendesky, Director of Intergovernmental
Affairs, Department of State
Beth Kozen
Caleb Sisak, Government Relations Specialist, Bravo
Group
Darlene Oleski, DMD, The Wright Center for Graduate
Medical Education
Denise Moran, Director of Healthcare Monitoring
Services, Affiliated Monitors, Inc.
Helen
Jessica Babb, Investigative Reporter, WHP CBS 21
Joan Burke, CDA, EFDA, President, Pennsylvania Dental
Assistants Association
James J. Kutz, Esquire, Post & Schell, P.C.
Lia BenYishay, MPH, Program & Evaluation Coordinator,
Pennsylvania Coalition for Oral Health
Lisa Brown, Dental Assisting/ Expanded Function
Dental
Assisting Program Director and Curriculum
Coordinator, YTI Career Institute
Marisa Swarney, Director, Government Relations,
Pennsylvania Dental Association
Marnie Oakley, D.M.D, Senior Associate Dean,
University of Pittsburgh School of Dental Medicine
Megan Crompton, Senior Associate, Allegheny Strategy
Partners
Mike Donahue
Morgan Plant, Pennsylvania Dental Hygienists'
Association
Nicole Payonk, Policy & Advocacy Coordinator,
Pennsylvania Coalition for Oral Health
Kari Orchard, Democratic Executive Director, House
Professional Licensure Committee
Sarah Ostrander, Senior Manager, Dental Education and
Licensure and Coalition for Modernizing Dental
Licensure, American Dental Association
Rebecca Small, RDH, EFDA, BS, Program Director,
Expanded Functions Dental Assisting Harrisburg Area
Community College
Vincent DiCianni, Esquire, President/Founder,
Affiliated Monitors, Inc.
Scott Yeager, Outreach Manager, Pennie

1 State Board of Dentistry

2 May 12, 2023

3 ***

4 [Pursuant to Section 708(a)(5) of the Sunshine Act,
5 at 9:00 a.m. the Board entered into Executive Session
6 with Ronald K. Rouse, Esquire, Board Counsel, to have
7 attorney-client consultations and for the purpose of
8 conducting quasi-judicial deliberations. The Board
9 returned to open session at 10:30 a.m.]

10 ***

11 [Ronald K. Rouse, Esquire, Board Counsel, informed
12 everyone that the meeting of the State Board of
13 Dentistry was being held in a hybrid format of in-
14 person and livestream teleconference pursuant to Act
15 100 of 2021, which requires boards to use a virtual
16 platform to conduct business when a public meeting is
17 held.

18 Mr. Rouse also noted the Board entered into
19 Executive Session with Board Counsel to have
20 attorney-client consultations and for the purpose of
21 conducting quasi-judicial deliberations.]

22 ***

23 The regularly scheduled meeting of the State
24 Board of Dentistry was held on Friday, May 12, 2023.
25 Shawn M. Casey, D.M.D., Chairman, called the meeting

1 to order at 11:06 a.m.

2 Chairman Casey reminded everyone that the meeting
3 was being recorded, and voluntary participation
4 constituted consent to be recorded.

5 Chairman Casey welcomed Rebecca Zehring from the
6 Pennsylvania Office of Attorney General.]

7 ***

8 Roll Call of Board Members

9 [Chairman Casey requested a roll call of Board
10 members. There was a quorum.]

11 ***

12 Introduction of Attendees

13 [Chairman Casey requested an introduction of
14 attendees.]

15 ***

16 Approval of minutes of the March 10, 2023 meeting

17 CHAIRMAN CASEY:

18 Has everyone had a chance and an
19 opportunity to review the minutes from
20 the last meeting on March 10, 2023?

21 Were there any corrections or
22 changes to be made?

23 Do I have a motion to accept the
24 minutes?

25 DR. FUNARI:

1 So moved.

2 CHAIRMAN CASEY:

3 Second?

4 ACTING COMMISSIONER CLAGGETT:

5 Second.

6 CHAIRMAN CASEY:

7 Roll call.

8
9 Claggett, aye; Casey, aye; Sullivan,
10 aye; Groody, aye; Arndt, aye; Fowler,
11 aye; Funari, aye; Jaspán, aye; Lugo,
12 abstain; Mountain, aye; Murray,
13 abstain; Zehring, abstain.

14 [The motion carried. R. Ivan Lugo, Donna Murray, and
15 Rebecca Zehring abstained from voting on the motion.]

16 ***

17 Appointment - Affiliated Monitors, Inc.

18 [Vincent DiCianni, Esq., President/Founder,
19 Affiliated Monitors, Inc., informed Board members
20 that he is the president and founder of Affiliated
21 Monitors and started the company in 2004 to provide
22 an alternative sanction in the form of independent
23 monitoring while working with many boards around the
24 country, including Pennsylvania.

25 Denise Moran, Director of Healthcare Monitoring

1 Services, Affiliated Monitors, Inc., noted that she
2 had been Legal Counsel and Executive Director of the
3 State Board of Tennessee and utilized AMI's services.
4 She stated Affiliated Monitors, Inc. (AMI) was
5 uniquely qualified to assist practitioners that had
6 been put on probation or allowed a second chance to
7 prove themselves to partner with both the board and
8 the practitioner in order to bring the practitioner's
9 skills up to speed.

10 Mr. DiCianni explained that independent
11 monitoring provides oversight of a practitioner or
12 practice the Board determines could stay in practice
13 but needs to be overseen to fulfill the obligations
14 of a settlement agreement or plea agreement in terms
15 of a resolution. He noted that monitoring is done by
16 local practitioners to serve as monitors on the
17 ground but AMI coordinates all of the monitoring
18 activities.

19 Mr. DiCianni informed Board members that there is
20 no cost to the Board for services and AMI works with
21 a variety of boards in about 43 states. He stated
22 the services of independent monitoring really are an
23 opportunity for a practitioner to improve their
24 practice through the identification of deficiencies
25 the Board has made in a settlement agreement. He

1 explained that the monitor takes the settlement
2 agreement and addresses those areas through their
3 monitoring technique.

4 Mr. DiCianni stated all monitors are vetted to
5 make sure they are qualified and have the requisite
6 experience to be a monitor and then submit the name
7 and the curriculum vitae (CV) of the practitioner to
8 the board for approval.

9 Mr. DiCianni addressed the monitoring process
10 through the healthcare team who reviews everything on
11 the order and puts it into a checklist, the monitor
12 does the fieldwork, information is put into PROS and
13 sent back to the monitor for approval, and then the
14 report is submitted to the board. He provided sample
15 board orders from other states.

16 Ms. Moran stated AMI partners with enforcement
17 staff and provides reports to the board or designee,
18 practitioner, and practitioner's monitor with the
19 goal of taking them from where they were standing
20 before and move forward.

21 Ms. Moran noted AMI reviews documentation
22 standards, clinical decision-making, and others,
23 along with partnering with the enforcement team to do
24 a deeper dive to make sure the professional comes
25 back before the board as a better practitioner. She

1 also expressed the importance of reducing recidivism.

2 Ms. Moran stated the reports are issued usually
3 on a quarterly basis. She noted the monitor meets
4 and mentors the licensee and reports are reviewed to
5 measure success and note deficiencies.

6 Mr. DiCianni mentioned that AMI is a remedial
7 type of approach and have done about 900 mentorships
8 for over 19 years with very few failures to complete
9 their program and/or return back to the boards.

10 Mr. DiCianni discussed practitioners who are
11 repeat offenders, where sometimes they are good
12 practitioners but terrible businessmen and help them
13 along with that as well. He noted having compliance
14 programs to make sure that their practices conform
15 with regulatory and best practice standards.

16 Mr. DiCianni addressed working with private
17 insurance networks and discipline regarding Medicaid
18 and Medicare fraud. He stated AMI is very reliant on
19 the terms of the settlement agreement because the
20 work they do comes through the boards and what they
21 want to be addressed, including the length of time
22 and scope of monitoring.

23 Ms. Moran informed Board members that AMI also
24 handles specialists, dental hygienists, and
25 assistants.

1 Dr. Funari asked how many state boards AMI is
2 currently working with.

3 Mr. DiCianni explained that AMI works with a lot
4 of different boards in about 43 states.

5 Dr. Lugo asked who pays AMI for their work and
6 whether they have any competitors. He also asked how
7 they validate the clinical part for dentistry.

8 Mr. DiCianni explained that the practitioner pays
9 for their services and is the model for independent
10 monitoring around the world. He stated AMI not only
11 does a lot of monitoring in the healthcare space but
12 also for the Department of Defense, Federal Trade
13 Commission, and Federal Communications Commission.
14 He noted the model is always the same, where the
15 terms of the monitoring are in that agreement and the
16 individual or company being monitored pays for the
17 services but reports are provided to the boards.

18 Mr. DiCianni mentioned being very reliant on
19 their practitioners on the ground for purposes of
20 looking at the clinical practice for behavioral
21 issues, practice standards, and business operations.

22 Ms. Moran stated most of their staff have worked
23 with boards and have an innate history with them,
24 along with recruiting practitioners who are very
25 well-heelled in the profession as consultants who

1 understand and know the profession. She noted AMI
2 likes having prior board members as monitors because
3 they already understand the issues that come before
4 the board and practice dynamics.

5 Dr. Funari asked whether AMI's service is on a
6 case-by-case basis or contract for an X amount of
7 time.

8 Mr. DiCianni explained that the AMI's service is
9 on a case-by-case basis and does not have any
10 contracts with any states. He mentioned that AMI has
11 a lot of experience and the integrity to make sure
12 they are helping the practitioners and boards, along
13 with maintaining the highest standards of quality in
14 their reporting and monitoring.

15 Mr. DiCianni noted attending the Federation of
16 State Medical Boards Meeting and having conversations
17 with board members and staff. He thanked the Board
18 for their public service and the effort they are
19 making in protecting public health, safety, and
20 welfare.

21 Dr. Jaspan asked whether states sign an agreement
22 with AMI and then present it to the people who need
23 monitoring. He also asked how someone selects what
24 monitoring service they use.

25 Mr. DiCianni explained that there are competitors

1 in some states and some fields and offered to provide
2 material as to the work they do.

3 Ms. Moran further explained that the order would
4 require someone to select a board-approved or
5 preapproved monitoring company and then that would be
6 put into the order, where they would contact the
7 probation officer or enforcement officer in order to
8 get those names and contact information.

9 Ms. Moran mentioned that some boards put their
10 names on the order or Affiliated Monitors Inc. or
11 another corporation in order to provide options.

12 Chairman Casey thanked Mr. DiCianni and Ms. Moran
13 for their presentation.]

14

15 Appointment - Pennsylvania Insurance Department -

16 Pennie Health Insurance Presentation

17 [Scott Yeager, Outreach Manager, Pennie, provided
18 information to benefit communities and individuals
19 who may have lost their health insurance or do not
20 have access to health insurance through an employer
21 or qualify for Medical Assistance.

22 Mr. Yeager stated Pennie is Pennsylvania's
23 official health insurance marketplace that sells
24 health and dental insurance with some plans that
25 cover medical, dental, and vision. He provided a

1 history of Pennie, noting it was established from
2 unanimous bipartisan legislation signed into law on
3 July 2, 2019. He noted it launched as Pennsylvania's
4 official health insurance exchange on November 1,
5 2020, to provide high-quality health insurance
6 options for individuals who may not have health
7 insurance through an employer, access to Medical
8 Assistance, or access to Medicare.

9 Mr. Yeager explained that Pennie is different
10 from other carriers because it provides financial
11 assistance through Pennsylvania's marketplace. He
12 noted that Pennie assists individuals and families
13 without employer-sponsored health and dental coverage
14 and individuals who make a little too much to qualify
15 for Medical Assistance. He also noted that 36
16 percent of Pennie customers are those who retire
17 early or start a business.

18 Mr. Yeager reported 1 in 20 Pennsylvanians do not
19 have health insurance and noted the importance of
20 reaching those individuals. He mentioned that Pennie
21 has a close relationship with the Department of Human
22 Services by exchanging data and operating a no wrong
23 door policy. He explained that Pennie is not part of
24 Medical Assistance, the Children's Health Insurance
25 Program (CHIP), or Medicare but are an option for

1 those who think they have no option.

2 Mr. Yeager reported 371,000 individuals were
3 protected through Pennie as of January 15, 2023, and
4 9 out of 10 customers qualified for financial
5 assistance. He noted Pennie has two forms of
6 financial assistance, including advanced premium tax
7 credits that immediately impact the monthly premium.

8 Mr. Yeager addressed Pennie gold, silver, and
9 bronze health insurance options, noting cost-sharing
10 reductions at the silver level could reduce copays,
11 deductible, and coinsurance. He mentioned that 1 out
12 of 4 Pennie customers pay less than \$1 a day for
13 quality health insurance and 14 percent pay less than
14 \$1 a month.

15 Mr. Yeager reported having at least 2 carriers in
16 67 counties with multiple plan options, along with
17 continually adding insurance carriers to the
18 marketplace to be competitive for consumers. He
19 noted the open enrollment period is from November 1
20 through January 15 with special enrollment periods
21 for qualifying life events throughout the year and
22 provided examples.

23 Mr. Yeager stated a qualifying life event was
24 established at Pennie last year for individuals at or
25 below 150 percent of the federal poverty limit who do

1 not qualify for Medical Assistance, where they could
2 go to Pennie at any time during the year for
3 financial assistance. He noted it includes lawfully
4 present immigrants not eligible for Medical
5 Assistance.

6 Mr. Yeager addressed the Path to Pennie, which is
7 a partnership between Pennie and the Department of
8 Revenue in the Commonwealth of Pennsylvania for
9 uninsured tax filers, where individuals who attach
10 Form REV-1882 to their income tax return receive
11 information about how to claim their Pennie account.

12 Mr. Yeager discussed the ending of the continuous
13 coverage requirement, noting 607,000 individuals are
14 uninsured. He mentioned that between 500,000 and
15 600,000 additional families protected under Medical
16 Assistance will have a redetermination of eligibility
17 between now and 2024. He stated some individuals
18 would retain their coverage under Medical Assistance
19 and CHIP and have gone through the redetermination
20 process but some who may not be eligible and is where
21 Pennie would help provide options.

22 Mr. Yeager addressed individuals who do not
23 respond to the redetermination packet from the
24 Department of Human Services or update information in
25 COMPASS. He noted having an advertising campaign

1 from the Department of Human Services and Pennie to
2 help raise the awareness of Pennie as an option.

3 Mr. Yeager informed everyone that Pennie has a
4 toolkit with educational materials in multiple
5 languages that could be sent directly to their office
6 free of charge, along with resource sites, including
7 a toolkit from the Department of Human Services. He
8 expressed appreciation for any referral the State
9 Board of Dentistry could make on their behalf.

10 Mr. Yeager offered to provide information
11 regarding Pennsylvania's Health Insurance Exchange to
12 groups or organizations that would benefit from a
13 presentation. He encouraged everyone to refer
14 uninsured individuals to Pennie at 844-844-8040 or
15 pennie.com. He also provided his contact information
16 in the chat.

17 Chairman Casey thanked Mr. Yeager for the
18 presentation.]

19 ***

20 Review of Applications

21 MR. ROUSE:

22 Item 19 on the agenda is the
23 Application of Riad Almasri. Regarding
24 that Application, I believe the Chair
25 would entertain a motion to grant the

1 Application for Licensure as a Dentist
2 by Endorsement.

3 DR. FUNARI:

4 I'll make that motion.

5 CHAIRMAN CASEY:

6 Second?

7 ACTING COMMISSIONER CLAGGETT:

8 Second.

9 CHAIRMAN CASEY:

10 Roll call, please.

11

12 Claggett, aye; Casey, aye; Sullivan,
13 aye; Groody, aye; Arndt, aye; Fowler,
14 aye; Funari, aye; Jaspán, aye; Lugo,
15 aye; Mountain, aye; Murray, aye;
16 Zehring, aye.

17 [The motion carried unanimously.]

18

19 MR. ROUSE:

20 Item 20 on the agenda is Albert Aloian
21 Regarding the Application of Albert
22 Aloian, number 20 on the agenda, I
23 believe the Chair would entertain a
24 motion to grant the Application for
25 Licensure as a Dentist by Endorsement.

1 CHAIRMAN CASEY:

2 Do I have a motion?

3 DR. FUNARI:

4 I'll make that motion.

5 CHAIRMAN CASEY:

6 Second?

7 ACTING COMMISSIONER CLAGGETT:

8 Second.

9 CHAIRMAN CASEY:

10 Roll call.

11

12 Claggett, aye; Casey, aye; Sullivan,
13 aye; Groody, aye; Arndt, aye; Fowler,
14 aye; Funari, aye; Jaspán, aye; Lugo,
15 aye; Mountain, aye; Murray, aye;
16 Zehring, aye.

17 [The motion carried unanimously.]

18 ***

19 MR. ROUSE:

20 Item 21 on the agenda is the
21 Application of Elijah Arrington.
22 Regarding that Application, I believe
23 the Chair would entertain a motion to
24 provisionally deny the Application for
25 Licensure as a Dentist.

1 CHAIRMAN CASEY:

2 Do I have a motion?

3 DR. FUNARI:

4 I'll make that motion.

5 CHAIRMAN CASEY:

6 Second, please?

7 ACTING COMMISSIONER CLAGGETT:

8 Second.

9 CHAIRMAN CASEY:

10 Roll call.

11

12 Claggett, aye; Casey, aye; Sullivan,
13 aye; Groody, aye; Arndt, aye; Fowler,
14 aye; Funari, aye; Jaspán, aye; Lugo,
15 aye; Mountain, aye; Murray, aye;
16 Zehring, aye.

17 [The motion carried unanimously.]

18

19 MR. ROUSE:

20 Item 22 on the agenda is the
21 Application of Timothy O'Keefe. I
22 believe the Chair would entertain a
23 motion to provisionally deny the
24 Application for Licensure as a Dentist.

25 CHAIRMAN CASEY:

1 Do I have a motion, please?

2 DR. FUNARI:

3 I'll make that motion.

4 CHAIRMAN CASEY:

5 Second?

6 ACTING COMMISSIONER CLAGGETT:

7 Second.

8 CHAIRMAN CASEY:

9 Roll call.

10

11 Claggett, aye; Casey, aye; Sullivan,
12 aye; Groody, aye; Arndt, aye; Fowler,
13 aye; Funari, aye; Jaspán, aye; Lugo,
14 aye; Mountain, aye; Murray, aye;
15 Zehring, aye.

16 [The motion carried unanimously.]

17

18 MR. ROUSE:

19 Item 23 is Trevor Skinner. I believe
20 the Chair would entertain a motion to
21 grant the Application for Licensure as
22 a Dentist by Endorsement.

23 CHAIRMAN CASEY:

24 Do I have a motion, please?

25 DR. FUNARI:

1 I'll make that motion.

2 CHAIRMAN CASEY:

3 Second?

4 ACTING COMMISSIONER CLAGGETT:

5 Second.

6 CHAIRMAN CASEY:

7 Roll call, please.

8

9 Claggett, aye; Casey, aye; Sullivan,
10 aye; Groody, aye; Arndt, aye; Fowler,
11 aye; Funari, aye; Jaspán, aye; Lugo,
12 aye; Mountain, aye; Murray, aye;
13 Zehring, aye.

14 [The motion carried unanimously.]

15 ***

16 [LaJuan M. Mountain, D.M.D., exited the meeting at
17 12:03 p.m. for recusal purposes.]

18 ***

19 Report of Board Counsel - Motion to Enter Default and
20 Deem Facts Admitted

21 MR. ROUSE:

22 Item 10 is the matter of BPOA v. Ashley
23 M. Garcia Ruiz, Case No. 21-46-006703.

24 I believe the Chair would entertain
25 a motion to grant a Motion to Deem

1 Facts Admitted and to direct Board
2 Counsel to prepare the Adjudication and
3 Order in accordance with discussions in
4 Executive Session.

5 CHAIRMAN CASEY:

6 Do I have a motion?

7 DR. FUNARI:

8 So moved.

9 CHAIRMAN CASEY:

10 Second?

11 ACTING COMMISSIONER CLAGGETT:

12 Second.

13 CHAIRMAN CASEY:

14 Roll call.

15

16 Claggett, aye; Casey, aye; Sullivan,
17 aye; Groody, aye; Arndt, aye; Fowler,
18 aye; Funari, aye; Jaspán, aye; Lugo,
19 aye; Murray, aye; Zehring, aye.

20 [The motion carried. LaJuan Mountain recused herself
21 from deliberations and voting on the motion.]

22

23 MR. ROUSE:

24

Item 11 is the matter of BPOA v.

25

Jennifer Nicole Miller, Case No. 22-46-

1 011315.

2 I believe the Chair would entertain
3 a motion to grant a Motion to Deem
4 Facts Admitted and to direct Board
5 Counsel to prepare the Adjudication and
6 Order in accordance with discussions in
7 Executive Session.

8 CHAIRMAN CASEY:

9 Do I have a motion?

10 DR. FUNARI:

11 So moved.

12 CHAIRMAN CASEY:

13 Second?

14 ACTING COMMISSIONER CLAGGETT:

15 Second.

16 CHAIRMAN CASEY:

17 Roll call, please.

18
19 Claggett, aye; Casey, aye; Sullivan,
20 aye; Groody, aye; Arndt, aye; Fowler,
21 aye; Funari, aye; Jaspán, aye; Lugo,
22 aye; Murray, aye; Zehring, aye.

23 [The motion carried. LaJuan Mountain recused herself
24 from deliberations and voting on the motion.]

25 ***

1 [LaJuan M. Mountain, D.M.D., reentered the meeting at
2 12:05 p.m.]

3 ***

4 MR. ROUSE:

5 Item 12 on the agenda is the matter of
6 BPOA v. Stuart Jay Danzig, Case No. 18-
7 46-007390.

8 I believe the Chair would entertain
9 a motion to grant the Motion to Deem
10 Facts Admitted and to direct Board
11 Counsel to prepare the Adjudication and
12 Order in accordance with the discussion
13 in Executive Session.

14 CHAIRMAN CASEY:

15 Do I have a motion?

16 DR. FUNARI:

17 So moved.

18 CHAIRMAN CASEY:

19 Second?

20 ACTING COMMISSIONER CLAGGETT:

21 Second.

22 CHAIRMAN CASEY:

23 Roll call, Christina.

24

25 Claggett, aye; Casey, aye; Sullivan,

1 aye; Groody, aye; Arndt, aye; Fowler,
2 aye; Funari, aye; Jaspan, aye; Lugo,
3 aye; Mountain, aye; Murray, aye;
4 Zehring, aye.

5 [The motion carried unanimously.]

6 ***

7 [Shawn M. Casey, D.M.D., Chairman, exited the meeting
8 at 12:06 p.m. for recusal purposes.]

9 ***

10 VICE CHAIR SULLIVAN ASSUMED THE CHAIR

11 ***

12 MR. ROUSE:

13 Item 13 is the matter of BPOA v.
14 Blanche Durand Grube, Case Nos. 18-46-
15 012074 & 18-46-02952.

16 I believe the Chair would entertain
17 a motion to direct Board Counsel to
18 draft a Response and Order regarding
19 the Respondent's objection to the
20 commonwealth's Motion to Deem Facts
21 Admitted as discussed in Executive
22 Session.

23 VICE CHAIR SULLIVAN:

24 Do we have a motion?

25 DR. FUNARI:

1 So moved.

2 ACTING COMMISSIONER CLAGGETT:

3 Second.

4 MS. TOWNLEY:

5 Claggett, aye; Sullivan, aye; Groody,
6 aye; Arndt, aye; Fowler, aye; Funari,
7 aye; Jaspan, aye; Lugo, aye; Mountain,
8 aye; Murray, aye; Zehring, aye.

9 [The motion carried. Shawn Casey recused himself
10 from deliberations and voting on the motion.]

11 ***

12 [Shawn M. Casey, D.M.D., Chairman, reentered the
13 meeting at 12:07 p.m. for recusal purposes.]

14 ***

15 CHAIRMAN CASEY RESUMED THE CHAIR

16 ***

17 [Jennifer Unis Sullivan, D.M.D., J.D., Vice
18 Chairperson, exited the meeting at 12:08 p.m. for
19 recusal purposes.]

20 ***

21 Report of Board Counsel - Final Adjudication and
22 Order

23 MR. ROUSE:

24 Item 14 is the matter of BPOA v.
25 Christine Schaub, Case No. 21-46-

1 008332.

2 I believe the Chair would entertain
3 a motion to adopt the Adjudication and
4 Order as presented by Board Counsel and
5 to direct Board Counsel to prepare the
6 Board's Final Order.

7 CHAIRMAN CASEY:

8 Do I have a motion, please?

9 DR. FUNARI:

10 So moved.

11 CHAIRMAN CASEY:

12 Second?

13 ACTING COMMISSIONER CLAGGETT:

14 Second.

15 CHAIRMAN CASEY:

16 Claggett, aye; Casey, aye; Groody, aye;
17 Arndt, aye; Fowler, aye; Funari, aye;
18 Jaspan, aye; Lugo, aye; Mountain, aye;
19 Murray, aye; Zehring, aye.

20 [The motion carried. Jennifer Sullivan recused
21 herself from deliberations and voting on the motion.]

22 ***

23 [Jennifer Unis Sullivan, D.M.D., J.D., Vice
24 Chairperson, reentered the meeting at 12:10 p.m.]

25 ***

1 Appointment - Bureau of Finance and Operations

2 Annual Budget Presentation

3 [Michelle Witmer, Fiscal Management Specialist,
4 Bureau of Finance and Operations, Department of
5 State, presented the annual budget for the State
6 Board of Dentistry. She provided a 7-year overview
7 of the Board's license count with a breakdown of the
8 past 4 years by license class.

9 Ms. Witmer noted renewals are in March of odd
10 years and compared FY20-21 to FY22-23, showing a
11 significant decrease of 2,257 licensees from the
12 previous renewal period to the current one. She
13 reported an increase this morning of 148 licensees.

14 Ms. Witmer addressed revenue, noting the main
15 source is renewals and applications. She noted other
16 categories add to the Board's bottom line but are not
17 a consistent form of income.

18 Ms. Witmer mentioned that the Board is in the
19 first stage of a three-stage fee increase, which
20 began with the March 2023 renewal and would end with
21 the March 2027 renewal.

22 Ms. Witmer addressed expenses, including direct
23 costs, timesheet-based costs, and distribution. She
24 reported expenses as of April 26 were \$1,589,728.05,
25 noting the Bureau of Finance and Operations (BFO) is

1 projecting the Board finish the year around
2 \$2,353,000. She noted the Board would start to come
3 back out of the deficit in FY25-26. She informed
4 Board members that BFO would continue to monitor the
5 deficit.

6 Dr. Arndt asked whether anything is in the works
7 to evaluate the reduction in the licensees and
8 measures to keep dental students who graduate within
9 the state rather than going somewhere else. He also
10 asked what programs are being done legislatively and
11 from the executive branch.

12 Acting Commissioner Claggett stated they are
13 having conversations to retain individuals and
14 attempting to find ways to attract more dentists in
15 Pennsylvania.

16 Dr. Arndt also asked whether there was a decrease
17 in medical licenses and other professions.

18 Ms. Witmer noted other boards had a decrease in
19 licensees and also saw a decrease in revenue. She
20 informed Board members that BFO would continue to
21 monitor the budget and review everything at next
22 year's meeting.

23 Chairman Casey thanked Ms. Witmer for the
24 presentation.]

25

1 Report of Prosecutorial Division

2 [Jason T. Anderson, Esquire, Board Prosecutor,
3 presented the Consent Agreement for Case No. 22-46-
4 015814.

5 Dr. Funari requested additional information
6 regarding whether Respondent is aware of the
7 penalties and has taken any steps to start corrective
8 action. He also asked whether they know if
9 Respondent is not currently practicing since her
10 license has expired.

11 Mr. Anderson stated that respondent was not
12 practicing at the time her license expired but would
13 have to ask her attorney. He noted respondent has a
14 healthcare practice monitor but is required to have
15 that practice monitor approved by the Board or find
16 one the Board approves. He mentioned that she has
17 undergone treatment but cannot submit requests to the
18 Board to approve her monitor until the Consent
19 Agreement has been approved. He also noted she has
20 not yet sold the practice.]

21 ***

22 [Kayla R.B. Bolan, Esquire, Board Prosecutor,
23 presented the Consent Agreement for Case No. 20-46-
24 010470.

25 Dr. Jaspan asked where the upgrade of equipment

1 stands.

2 Ms. Bolan explained that there was not an issue
3 with equipment itself but newer models would
4 alleviate their concern and respondent is starting
5 that process but has not been completed.

6 Dr. Funari requested clarification, where the
7 respondent has not accepted new patients since 2018,
8 and asked whether that was all ages or just pediatric
9 patients.

10 Ms. Bolan stated respondent has not accepted any
11 new patients since 2018.]

12 ***

13 MR. ROUSE:

14 Regarding item 3 on the agenda at Case
15 No. 20-46-010470, I believe the Chair
16 would entertain a motion to adopt the
17 Consent Agreement.

18 CHAIRMAN CASEY:

19 Do I have a motion?

20 DR. FUNARI:

21 I'll make that motion.

22 CHAIRMAN CASEY:

23 Second?

24 ACTING COMMISSIONER CLAGGETT:

25 Second.

1 CHAIRMAN CASEY:

2 Roll call, please.

3

4 Claggett, aye; Casey, aye; Sullivan,
5 aye; Groody, aye; Arndt, aye; Fowler,
6 aye; Funari, aye; Jaspan, aye; Lugo,
7 aye; Mountain, aye; Murray, nay;
8 Zehring, nay.

9 [The motion carried. Donna Murray and Rebecca
10 Zehring opposed the motion. This was the matter of
11 BPOA v. Robert Grant McCracken, D.M.D., Case No. 20-
12 46-010470.]

13

14 [LaJuan M. Mountain, D.M.D., exited the meeting at
15 12:34 p.m. for recusal purposes.]

16

17 [Amber Lee Czerniakowski, Esquire, Board Prosecutor,
18 presented the Consent Agreement for Case No. 22-46-
19 007573.]

20

21 MR. ROUSE:

22 Regarding the Consent Agreement at item
23 4 on the agenda, Case No. 22-46-007573,
24 I believe the Chair would entertain a
25 motion to adopt the Consent Agreement.

1 CHAIRMAN CASEY:

2 Do I have a motion?

3 DR. FUNARI:

4 So moved.

5 CHAIRMAN CASEY:

6 Second?

7 ACTING COMMISSIONER CLAGGETT:

8 Second.

9 CHAIRMAN CASEY:

10 Roll call.

11

12 Claggett, aye; Casey, aye; Sullivan,
13 aye; Groody, aye; Arndt, aye; Fowler,
14 aye; Funari, aye; Jaspán, aye; Lugo,
15 aye; Murray, aye; Zehring, aye.

16 [The motion carried. LaJuan Mountain recused herself
17 from deliberations and voting on the motion. This
18 was the matter of BPOA v. William Henry Schrock,
19 D.M.D., Case No. 22-46-007573.]

20

21 [LaJuan M. Mountain, D.M.D., reentered the meeting at
22 12:37 p.m.]

23

24 [Timothy J. Henderson, Esquire, Board Prosecutor,
25 presented the Consent Agreement for Case No. 21-46-

1 014982.]

2

3 MR. ROUSE:

4

Regarding the Consent Agreement at item

5

5 on the agenda, Case No. 21-46-014982,

6

I believe the Chair would entertain a

7

motion to adopt the Consent Agreement.

8 CHAIRMAN CASEY:

9

Do I have a motion?

10 DR. FUNARI:

11

So moved.

12 CHAIRMAN CASEY:

13

Second?

14 ACTING COMMISSIONER CLAGGETT:

15

Second.

16 CHAIRMAN CASEY:

17

Roll call.

18

19

Claggett, aye; Casey, aye; Sullivan,

20

aye; Groody, aye; Arndt, aye; Fowler,

21

aye; Funari, aye; Jaspán, aye; Lugo,

22

aye; Mountain, aye; Murray, aye;

23

Zehring, aye.

24

[The motion carried unanimously. That is the matter

25

of BPOA v. Russel Schaeffer Bleiler, III, D.M.D.,

1 Case No. 21-46-014982.]

2 ***

3 [Brice D. Arndt, D.D.S., exited the meeting for
4 recusal purposes at 12:40 p.m.]

5 ***

6 [Timothy J. Henderson, Esquire, Board Prosecutor,
7 presented the Consent Agreement for Case No. Case No.
8 22-46-005354.

9 James J. Kutz, Esquire, Post & Schell, P.C.,
10 counsel for the respondent, was present.]

11 MR. ROUSE:

12 Regarding item 6 on the agenda, Case
13 No. 22-46-005354, I believe the Chair
14 would entertain a motion to adopt the
15 Consent Agreement.

16 CHAIRMAN CASEY:

17 Do I have a motion?

18 DR. FUNARI:

19 So moved.

20 CHAIRMAN CASEY:

21 Second?

22 ACTING COMMISSIONER CLAGGETT:

23 Second.

24 CHAIRMAN CASEY:

25 Roll call, please.

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Claggett, aye; Casey, aye; Sullivan,
aye; Groody, aye; Fowler, nay; Funari,
aye; Jaspan, aye; Lugo, aye; Mountain,
aye; Murray, aye; Zehring, aye.

[The motion carried. Brice Arndt recused himself
from deliberations and voting on the motion. Barbara
Fowler opposed the motion. This is the matter of
BPOA v. Michael B. Damgaard, D.M.D., Case No. 22-46-
005354.]

[Brice D. Arndt, D.D.S., reentered the meeting at
12:43 p.m.]

[Pursuant to Section 708(a)(5) of the Sunshine Act,
at 12:43 p.m. the Board entered into Executive
Session with Ronald K. Rouse, Esquire, Board Counsel,
to have attorney-client consultations and for the
purpose of conducting quasi-judicial deliberations.
The Board returned to open session at 12:58 p.m.]

MR. ROUSE:

Item 2 on the agenda is Case No. 22-46-
015814. That was the Consent Agreement
presented by the prosecutorial

1 division.

2 After discussions in Executive
3 Session, I believe the Chair would
4 entertain a motion to adopt the Consent
5 Agreement.

6 CHAIRMAN CASEY:

7 Do I have a motion?

8 DR. FUNARI:

9 So moved.

10 CHAIRMAN CASEY:

11 Second?

12 ACTING COMMISSIONER CLAGGETT:

13 Second.

14 CHAIRMAN CASEY:

15 Roll call, please.

16
17 Claggett, aye; Casey, aye; Sullivan,
18 aye; Groody, aye; Arndt, aye; Fowler,
19 aye; Funari, aye; Jaspan, aye; Lugo,
20 aye; Mountain, aye; Murray, aye;
21 Zehring, aye.

22 [The motion carried unanimously. This is the matter
23 of BPOA v. Maria Helena Barboza, D.M.D., Case No. 22-
24 46-015814.]

25 ***

1 [R. Ivan Lugo, D.M.D., M.B.A., noted the list of
2 monitors is probably limited, but since they had the
3 presentation, it might be a good suggestion to
4 identify where the resource list is and whether the
5 Board has to approve those resources. He mentioned
6 that there now seems to be more availability of those
7 types of resources and asked how they close the loop
8 moving forward.

9 Mr. Jarabeck stated the Board had a Consent
10 Agreement that utilized Affiliated Monitors today.
11 He noted the Board previously utilized Physicians
12 Health Program (PHP) and the LifeGuard Program. He
13 mentioned that it would always be on a case-by-case
14 basis and the Board would be guided by counsel when
15 making a decision and set a course the respondent
16 would follow.

17 Mr. Jarabeck noted part of their negotiation is
18 the program, whether they utilize the LifeGuard
19 Program, Physicians' Health Program, or Affiliated
20 Monitors, because a lot of times there is an issue
21 with the actual cost and becomes an issue of the
22 Board to look at the facts against the proposed
23 discipline.

24 Mr. Jarabeck stated prosecution would continue to
25 work with outside partners and utilize organizations

1 that are available. He commented that it is
2 difficult to get somebody to make an agreement if
3 they cannot afford it during negotiations.

4 Dr. Lugo commented that the point was to make
5 sure the Board is not recommending somebody because
6 all of that is covered through prosecution, and if
7 the Board knows of any other monitoring service, it
8 would be good to also let prosecution know.]

9

10 Report of Board Counsel - Miscellaneous

11 [Ronald K. Rouse, Esquire, Board Counsel, addressed
12 the American Association of Dental Boards (AADB)
13 Dentist and Dental Hygienist Compact. He noted the
14 model language was issued in January 2023 and the
15 purpose of the compact is to facilitate interstate
16 practice of dentistry and dental hygiene by providing
17 a licensee of a participating compact state a way to
18 apply for and gain compact privileges in a remote
19 compact state.

20 Mr. Rouse explained that a state must
21 legislatively enact a compact and be admitted to the
22 Dental and Dental Hygienist Commission in order to
23 join the compact. He mentioned that there cannot be
24 any substantive changes to the model language when a
25 state legislatively enacts the compact and may

1 jeopardize a state's participation in the compact.

2 Mr. Rouse reported that seven states have to
3 legislatively enact the compact in order to activate
4 the Dental and Dental Hygienist Commission, noting
5 Washington State, Tennessee, and Iowa have already
6 enacted the compact.

7 Mr. Rouse stated the American Dental Association
8 has been tracking data showing more than 12 states
9 have shown interest in enacting the legislation for
10 the compact. He explained that states would have one
11 representative for their state placed on the
12 commission who would be considered a commissioner.

13 Ms. Murray requested information regarding fees
14 that would normally go to Pennsylvania from the
15 licensee. She also wanted clarification concerning
16 the Western Regional Examining Board (WREB)-Council
17 of Interstate Testing Agencies (CITA) criteria that
18 they look at for the examination for somebody coming
19 from New York because there is more of a process and
20 asked whether the compact would allow them to come
21 into Pennsylvania.

22 Mr. Rouse explained that there seems to be
23 payment in a central location for compact privileges
24 but also that a state can impose a fee for the
25 privilege. He mentioned that there may be some

1 rulemaking by the commission once it is up and
2 running. He noted any state that is part of the
3 commission would have compact privileges, where it
4 would be compact versus Pennsylvania issuing a
5 license for states that are not part of the compact.

6 Dr. Funari referred to third-party licensing that
7 theoretically could impact their ability to
8 discipline somebody practicing in their state and
9 having a violation in their state because the
10 licensing is through the compact, not with the state
11 of Pennsylvania.

12 Mr. Rouse explained that Board regulations are
13 still applicable but it is on the issue of their
14 compact privilege as opposed to their license in the
15 other state. He noted still having questions about
16 the compact because it does not talk about
17 Pennsylvania giving a license because they are giving
18 a compact privilege as opposed to the board giving a
19 license by endorsement or a regular license.

20 Dr. Lugo commented that is confusing for the
21 Board and the public and asked whether the Board
22 could get an analysis or review of the policy impact.

23 He suggested obtaining feedback from the policy
24 office or resources from the three states that have
25 done legislative work and resolved issues to educate

1 the Board to help solve issues in Pennsylvania.

2 Dr. Funari mentioned that the Board has different
3 ways of getting people through and giving them a
4 Pennsylvania license with maintaining the ability to
5 enforce and adjudicate any violations. He could not
6 envision the compact making it easier and may lose
7 some regulatory control.

8 Barbara Reiprich, RDH, PHDHP, President,
9 Pennsylvania Dental Hygienists' Association addressed
10 her attendance at lectures concerning the compact.
11 She stated the compact is being funded by the
12 Department of Defense and reminded her of
13 reciprocity. She informed Board members that someone
14 who lives in Ohio and wanted to work in Pennsylvania
15 and are part of the compact would come into
16 Pennsylvania with their Ohio license but must work
17 under the regulations of Pennsylvania's scope of
18 practice. She explained that it would work the same
19 way for someone from Pennsylvania who wanted to work
20 in Ohio, where they would follow Ohio's regulations.

21

22 Ms. Reiprich noted that it was introduced for
23 members of the military and their spouses, where they
24 would not have to go through the process of applying
25 for a license. She explained that individuals would

1 be following the regulations of the state where they
2 work. She informed Board members that the
3 Association of Dental Support Organizations is
4 backing the compact.

5 Ms. Reiprich noted the compact would help with
6 military personnel coming into the state that are not
7 licensed in Pennsylvania. She stated it has to go
8 through legislation and then come before the Board to
9 decide whether or not it would go through.

10 Dr. Groody commented that anybody coming to
11 Pennsylvania would be operating under Pennsylvania's
12 regulations and seems to be expediting Act 41.

13 Ms. Reiprich stated that is very similar to Act
14 41. She believed the American Dental Association
15 (ADA) and American Dental Hygienists' Association
16 (ADHA) are also working in collaboration with this,
17 along with ADSO and Department of Defense. She noted
18 the compact could be downloaded from the ADA website.

19 Steve Neidlinger, CAE, Executive Director,
20 Pennsylvania Academy of General Dentistry, asked what
21 safeguards are in the compact to make sure that this
22 cannot be used by somebody in another compact state
23 to receive a license in Pennsylvania if they have a
24 disciplinary history in the other state. He
25 expressed concern with the compact being a backdoor

1 to licensure for somebody who may not normally be
2 able to do so.

3 Mr. Rouse explained that it does not allow
4 someone to obtain compact privileges if they have an
5 encumbered license.

6 Mr. Rouse addressed the document provided to
7 Board members, where enacted legislation has to be
8 substantially similar and any substantive changes
9 would not allow participation as part of the compact
10 and wanted the Board's input on issues.

11 Chairman Casey mentioned that some of the issues
12 addressed were fee concerns, licensing state
13 concerns, and regulations and disciplinary action.

14 Ms. Murray informed Board members of an article
15 from the ADA regarding the compact that provides
16 links for additional information.

17 Dr. Funari suggested putting the compact on the
18 agenda for the next meeting because there may be a
19 need for Board voice if it is a legislative action.
20 He commented that their continuing education (CE)
21 requirements would not hold because it is with
22 whoever they hold the license with as far as CE. He
23 referred to a line that says it does not interfere
24 with licensure requirements by the participating
25 state but does not expound on that. He noted the

1 Board needs to understand what the compact is to be
2 able to develop a list of concerns.

3 Ms. Murray requested clarification as to why the
4 Federal Bureau of Investigation (FBI) piece is a
5 barrier with the compact.

6 Acting Commissioner Claggett explained that it is
7 concerning the authority to accept fingerprints for
8 licensees. He offered to share any concerns up the
9 chain and suggested the Board give Mr. Rouse more
10 time than the next meeting to look into some of the
11 Board concerns.]

12 ***

13 Report of Board Counsel - Regulations - Regulation
14 16A-4621

15 [Ronald K. Rouse, Esquire, Board Counsel, provided a
16 Regulatory Report for the Board's review. He
17 referred to 16A-4621 regarding anesthesia. He
18 addressed comments from stakeholders regarding the
19 proposed annex. He noted a comment from Helen
20 Hawkey, the executive director of Pennsylvania
21 Coalition for Oral Health, noting there were no
22 substantive comments but pointed out an editorial
23 error on page 1 and 2 of the draft, where it states
24 Pennsylvania health dental hygienist practitioner and
25 should read public health dental hygiene practitioner

1 and would be amended.

2 Mr. Rouse addressed a comment from Nancy
3 Rosenthal at the Pennsylvania Dental Association
4 referred to § 33.115(a) and § 33.340 encouraging the
5 Board to consider adding an age or weight requirement
6 for situations in which a supervising dentist
7 delegates the monitoring of children who receive
8 nitrous oxide/oxygen analgesia to a licensed dental
9 hygienist with the proper permit. He noted both
10 sections have an age classification but no weight.

11 Mr. Rouse referred to § 33.115 on page 5, where
12 it is unclear whether an out of state dental
13 hygienist applying for a permit must have completed a
14 course that included the monitoring of 10 live
15 patients. He noted PDA recommended the board
16 consider regulations that do not require an out of
17 state hygienist to comply with a requirement to
18 monitor 10 live patients during the course of their
19 education and while practicing as a dental hygienist
20 in addition to having monitored patients while
21 practicing in another state or jurisdiction.

22 Dr. Sullivan commented that if the testing and
23 requirements are substantially similar to the
24 Board's, they can accept them and have someone
25 incorporate that. The Board proposed amended

1 language.

2 Mr. Rouse referred to § 33.337 on page 17, where
3 PDA questioned the necessity for dentists with a
4 permit level II to administer nitrous oxide to
5 complete 2 hours of related coursework each biennial
6 period and there have not been any adverse incidents
7 reported related to the administration of nitrous
8 oxide/oxygen analgesia.

9 Dr. Funari believed dentists should stay current
10 on identification of the proper patients and proper
11 use of nitrous oxide now that they are going to be
12 delegating that to a dental hygienist.

13 Dr. Jaspan referred to page 24 paragraph 10,
14 where it reads that the permit holder should be
15 conducting the evaluation but then reads, conducted
16 by an approved peer evaluation organization and
17 mentioned that it appears to say the permit holder is
18 responsible if they travel.

19 Dr. Funari explained that it is not the intent
20 and was in the original document.

21 Dr. Jaspan commented that the dental hygiene
22 requirement to take the pulse and oxygen saturation
23 on 5-minute intervals may be too much.

24 Dr. Funari noted that having a machine with a
25 printer is the way to go for everyone's protection,

1 especially for anyone investing in a hygienist doing
2 this. He mentioned that other states are doing this
3 and guidance from states around Pennsylvania were
4 utilized for best practices and how to implement
5 this.

6 Dr. Arndt noted the current law states that he
7 would not need anesthesia CE credits if he did not
8 have a Restricted I or II license for someone else to
9 be able to do that in his office.

10 Dr. Funari explained that he would not be
11 required to take credits in anesthesia but CRNAs in
12 the state of Pennsylvania have to be monitored, where
13 the practice has to be monitored by a licensed
14 physician and would need the license and CE.

15 Mr. Rouse referred to a comment of support from
16 Dr. Courtney Archbold from Hammerlee Dental Care for
17 the addition of § 33.115(a) regarding the monitoring
18 permit for dental hygienists, where she mentioned
19 that hygiene is the first appointment for new
20 patients and could help high anxiety patients because
21 dental fear is a major reason why patients skip
22 appointments.

23 Mr. Rouse addressed a comment from Dr. H. Scott
24 Ayle regarding Regulation 16A-4621, who believed it
25 should be accepted into practice.

1 Mr. Rouse referred to a comment from Dr. Carl
2 Jenkins, President of the Pennsylvania Academy of
3 General Dentistry (PAGD), who noted that allowing
4 hygienists to monitor adult patients receiving
5 nitrous oxide under the supervision of a properly
6 permitted dentist adds to the overall efficiency of
7 the dental office without jeopardizing patient safety
8 but feels that establishing a permit to do so is
9 unnecessary.

10 Mr. Rouse informed Board members that PAGD
11 requested the Board consider adding hygienist
12 monitoring of nitrous oxide under the direct
13 supervision of the dentist to be added to the
14 hygienist scope of practice without the obstacle of a
15 permitting process.

16 Dr. Funari noted there is a permit for local
17 anesthesia and there needs to be some way to control
18 it.

19 Mr. Rouse also questioned whether the 10-hour
20 didactic educational requirement for the permit can
21 be fulfilled for those more than 5 years
22 postgraduation.

23 Dr. Arndt explained that just because they have
24 been out 5 years does not mean they have ever
25 monitored a patient and years has nothing to do with

1 it.

2 Dr. Funari referred to the letter from the
3 Pennsylvania Academy of Pediatric Dentistry, where
4 subchapter B seems to imply that dental hygienists
5 and expanded function dental assistants may be
6 proposed to monitor the nitrous oxide application.
7 He commented that everything refers to dental
8 hygienist.

9 Mr. Rouse explained that parts of the regulation
10 not being touched are not put as part of the annex,
11 but Subchapter B concerns issues regarding dentists,
12 dental hygienists, and expanded function dental
13 assistant (EFDAs) but depends on the section of the
14 regulation.

15 Mr. Rouse addressed another comment, where use of
16 the term active monitoring permit or monitoring
17 permit seems to imply consent to use nitrous oxide
18 upon completion of the requirements of monitoring
19 nitrous oxide. The commenter would prefer a dental
20 hygienist receive a certificate for monitoring and
21 not a permit.

22 Dr. Funari explained that a certificate would not
23 do anything because they need CE requirements and
24 discipline and enforcement.

25 Mr. Rouse addressed another comment, where active

1 monitoring or monitoring nitrous oxide should be
2 better defined and should not imply changes in
3 nitrous oxide concentrations can be made by the
4 dental hygienist except during an emergency to switch
5 to 100 percent oxygen.

6 Dr. Funari stated it is very clearly laid out in
7 the document, where it cannot go up and could only go
8 down in the case of an emergency.

9 Mr. Rouse addressed a comment, where any
10 applicant for renewal after 2 years shall comply with
11 the same CE requirements as a holder of an Anesthesia
12 Restricted Permit II as outlined in § 33.337 and
13 believed monitoring skills need to be renewed as the
14 Basic Life Support Certificate is renewed.

15 Mr. Rouse read a comment, noting that any dentist
16 with a sedation permit should be allowed to supervise
17 a dental hygienist monitoring a pediatric patient or
18 patient with special needs receiving nitrous
19 oxide/oxygen analgesia.

20 Dr. Funari referred to page 2, where a
21 supervising dentist who possesses, at minimum, a
22 Restrictive II Permit may delegate.

23 Mr. Rouse referred to a comment from Katherine
24 Landsberg, the director of government relations at
25 the Dental Assisting National Board (DANB), wanting

1 the Board to consider DANB's Certified Preventive
2 Functions Dental Assistant (CPFDA) certification and
3 Certified Restorative Functions Dental Assistant
4 (CRFDA) certification as an alternative pathway to
5 EFDA certification

6 Dr. Groody commented that DANB has coronal
7 polishing, sealants, and restorative functions and
8 were looked at very briefly when they adopted PSI as
9 their vendor, noting that Pearson VUE is now their
10 vendor. She mentioned that it would have to be
11 adapted to Pennsylvania's restorative because DANB's
12 exam does not have all of Pennsylvania's restorative
13 functions and thanked Ms. Landsberg for the
14 submission.

15 Dr. Lugo suggested keeping the DANB door open
16 while working through the very long process of
17 changing the exam to ensure that at some point in the
18 future EFDAs have a way and a national exam as an
19 alternative pathway.

20 Dr. Lugo noted that there was no option of DANB
21 when the EFDA exam was developed in Pennsylvania but
22 now there is a national exam the Board could count
23 on. He commented that strategically thinking about
24 this in the future might benefit this part of the
25 skill set of EFDAs in Pennsylvania and may be

1 something to consider and start the process as an
2 alternative but continuing the process of the
3 national exam in this state.

4 Dr. Groody agreed with leaving the door open.

5 Mr. Rouse noted Dr. Ismail informed him that
6 the deans of the three major dental schools would be
7 submitting several recommendations but the comment
8 was more relevant to the general revisions and would
9 be discussed in the general revision packet review.

10 Chairman Casey stated the minor corrections
11 discussed today could be submitted and then put back
12 on the agenda.]

13

14 Report of Board Counsel - Regulations - Regulation
15 16A-4628 (General Revisions)

16 [Ronald K. Rouse, Esquire, Board Counsel, addressed a
17 letter from Dr. Carl Jenkins from PAGD regarding
18 § 33.211, where the definition of professional conduct
19 is expanded to include engaging in or permitting a
20 pervasive pattern of refusal to accept patients into
21 their practice or denying dental service to patients
22 because of a patient's actual or perceived
23 disability.

24 Mr. Rouse noted PAGD is concerned that many
25 offices may not be equipped to safely serve patients

1 with certain disabilities and could be investigated,
2 reported, and penalized for refusing care. He also
3 noted concern that this could add to the
4 investigative workload of the Bureau of Enforcement
5 and Investigation (BEI) when there are already
6 redundant agencies, both state and federal, to serve
7 this purpose.

8 Mr. Rouse stated PAGD recommended the Board
9 consider changing the language to consider a
10 substantiated claim by the Pennsylvania Human
11 Relations Commission or Equal Opportunity Employment
12 Commission for a finding of disability discrimination
13 in a court of law as substantiation of unprofessional
14 conduct. He noted the Board received other comments
15 on that issue and suggested waiting to hear all of
16 the comments.

17 Mr. Rouse referred to another PAGD comment under
18 § 33.211 as the failure to comply with the act of
19 November 19, 2004, pertaining to the permanent
20 marking of removable upper and lower dentures,
21 removable partial dentures, dental prosthesis, and
22 removable acrylic orthodontic appliances as
23 unprofessional conduct. He noted, while PAGD agrees
24 that the failure to comply with the act falls short
25 of the standard of care, they feel that the inclusion

1 of this provision with other conduct definitions
2 could result in substantial harm to the patient is
3 excessive.

4 Mr. Rouse noted PAGD recommended that if the
5 Board feels the act is unable to stand on its own,
6 failure to comply with the act should be added
7 separate from the definition of unprofessional
8 conduct.

9 Mr. Rouse informed Board members that the issues
10 presented by the three deans was regarding the
11 restricted faculty license under Section 11.1 of The
12 Dental Law.

13 Marnie Oakley, D.M.D, Interim Dean, University of
14 Pittsburgh School of Dental Medicine, discussed
15 leveling the playing field concerning recruitment,
16 especially of foreign-trained dentists who might have
17 either foreign-trained DMD degrees or DDS degrees, as
18 well as foreign-trained specialty certificates. She
19 noted pulling a recruit from the state of Florida who
20 did not have any of the Pennsylvania restrictions.

21 Dr. Oakley mentioned that it is difficult to get
22 someone interested when the restrictions to find out
23 whether or not they would receive a restricted
24 teaching license takes so long. She offered to have
25 further discussion about any of the specific items

1 within the deans' letter and thanked the Board.

2 Mr. Rouse informed Dr. Oakley that those are
3 legislative issues because it speaks to amendments to
4 The Dental Law as opposed to amendments to the
5 regulations. He explained that they had general
6 revisions to their regulations because the Board has
7 the authority to address proposed regulatory
8 amendments and obtain stakeholder comment.

9 Mr. Rouse referred to Dr. Oakley's bullet point
10 to remove restrictions on granting restricted faculty
11 licenses by relying on the dental schools and
12 Commission on Dental Accreditation-accredited
13 specialty and clinical educational programs to
14 evaluate the equivalency of basic dental education
15 for the first dental degree and the good standing of
16 the faculty candidates in all previous states and
17 countries where they have worked or practiced.

18 Mr. Rouse noted the second bullet point was to
19 allow graduates from advanced education in general
20 dentistry and graduate practice residency programs to
21 be granted restricted teaching licenses. He stated
22 the third bullet point was allow to faculty with
23 restricted licenses to practice in their specialty or
24 clinical area at the main dental school building and
25 all clinics operated by the dental school.

1 Mr. Rouse stated the fourth bullet point was to
2 amend Section 2(g) of The Dental Law to allow dental
3 schools to provide yearlong clinical training for
4 dentists from other states and countries who do not
5 have unrestricted or restricted dental licenses in
6 the Commonwealth of Pennsylvania. He noted the last
7 bullet point was to consider applications from dental
8 schools to grant restricted teaching licenses to
9 faculty who have not received their education from a
10 CODA-accredited program but are recognized as
11 international experts based on their global impact on
12 their area of practice.

13 Dr. Funari requested clarification to the fourth
14 bullet point to amend Section 2(g) to allow dental
15 schools to provide yearlong clinical training for
16 dentists from other states and countries who do not
17 have an unrestricted or restricted dental license in
18 the Commonwealth of Pennsylvania.

19 Dr. Oakley explained that it would allow them to
20 provide clinical one-year preceptorships or
21 fellowships that can expand beyond the level of
22 research and into clinical settings.

23 Mr. Rouse referred to the part of the Dental Law
24 that discusses what the practice of dentistry does
25 not include under (g), the practice of dentistry does

1 not include the practice of dentistry in a continuing
2 education course offered by a dental school in this
3 Commonwealth for a duration of 20 days or less,
4 either continuous or in several sessions where a
5 dentist licensed in the United States or other
6 countries work under the direct supervision of
7 dentists licensed by the Commonwealth and delivered
8 within the educational facilities of a dental school
9 in this Commonwealth that is approved by the American
10 Dental Association Commission on Dental Accreditation

11 Dr. Lugo asked whether the schools are proposing
12 that the Board delegate licensing procedures to
13 schools and then those individuals that the schools
14 license are able to work in satellite clinics and do
15 billable procedures as a fully licensed dentist.

16 Dr. Oakley noted that they are advocating to
17 assume the role and hoping to have conversation about
18 the mechanism in which that is applied. She stated
19 their objective is to be able to capture the best and
20 brightest faculty members that schools in other
21 states are capturing that they cannot.

22 Dr. Lugo stated the Board's mission is to protect
23 the public of Pennsylvania and cannot delegate that
24 to any other institution and would require more
25 discussion to have a way to work with the Board for

1 that particular special licensing the schools are
2 requesting.

3 Dr. Lugo noted the importance of solving the
4 issue of faculty recruitment and moving toward a
5 cordial working relationship to get to the same
6 point. He mentioned that the schools educate and the
7 Board wants good licensed people to stay in
8 Pennsylvania but are leaving after they go through
9 the program.

10 Mr. Rouse referred to the nondelegation doctrine,
11 where legislature and regulatory agencies, such as
12 the Board, are not allowed to delegate their
13 authority to a nongovernmental entity.

14 Dr. Lugo asked Dr. Oakley about the billable
15 hours and having dentists who are faculty dentists
16 but working and generating revenue for the school as
17 regularly licensed dentists in a satellite clinic or
18 within the institution.

19 Dr. Oakley explained that they did not get into
20 that level of detail as written but is worth more
21 discussion. She noted the intent was to get them
22 into clinics where they could provide the level of
23 education needed and put them in an environment where
24 they can still feel as though they could service the
25 public themselves and keep their clinical skills

1 sharp.

2 Dr. Lugo commented that it would not be
3 farfetched to suggest hiring this category and also
4 having them produce money for them in the community
5 but get them at the lowest possible cost. He
6 referred to balance and how to control that level of
7 bringing in the lowest wage for high production,
8 where the licensing component and difference between
9 a faculty license for teaching didactics and bringing
10 in the best and the brightest for teaching didactics
11 versus using that same license for the full privilege
12 to be used in the marketplace.

13 Dr. Lugo noted that the distinction would be good
14 to have to convince the Board that the didactics and
15 the clinical production and what is delivered to the
16 people of Pennsylvania is equally fair across the
17 board whether there is one license and the one
18 standard that they are hoping to achieve for
19 Pennsylvania.

20 Chairman Casey commented that the Board would be
21 willing to analyze and help out in any way but cannot
22 put the gavel down and approve.

23 Mr. Rouse again noted the Board does not have a
24 legislative function and basically works with
25 regulations and what the legislature has given the

1 Board the authority to do.

2 Mr. Rouse referred to another comment from Dr.
3 Sean Simon, the director of the Center for Continuing
4 Dental Education, University of Pittsburgh School of
5 Dental Medicine, regarding Section 2(g) recommending
6 there be one year as opposed to 20 days.

7 Mr. Rouse referred to a comment from PAGD under
8 § 33.306 on page 41 of the annex, where it would
9 allow the Board to preclude auxiliary personnel from
10 performing radiologic procedures if it finds that the
11 continued performance of radiologic procedures by the
12 auxiliary poses a threat to the health, safety, or
13 welfare of the public. He noted PAGD requested that
14 a health threat due to a radiologic procedure be
15 better defined as its definition varies based on the
16 source.

17 Mr. Rouse also noted PAGD questioned whether the
18 Board can preclude unlicensed auxiliary personnel
19 from performing radiological procedures.

20 Dr. Groody commented that it goes back to the
21 authorization needed for any dental assistant to
22 expose radiographs. She noted the Board changed
23 that, where it is still required but they are not
24 registering with the Board anymore and is under the
25 purview of the dentist to make sure they are

1 authorized for the DANB exam.

2 Mr. Rouse stated the request of a health threat
3 due to a radiological procedure be better defined
4 would be discussed further at a later time.

5 Mr. Rouse referred to a comment from the
6 Pennsylvania Dental Association concerning the
7 amendment for § 33.211 regarding unprofessional
8 conduct and recommended the word "solely" be added,
9 where engaging in or permitting a pervasive pattern
10 of refusal to accept patients into their practice or
11 denying dental service to patients solely based on a
12 patient's actual or perceived disability.

13 Dr. Arndt noted not seeing a problem with adding
14 the word "solely."

15 Mr. Rouse referred to a recommendation from Helen
16 Hawkey, the executive director of the Pennsylvania
17 Coalition for Oral Health, to page 1 of the annex to
18 amend the definition of cardiopulmonary resuscitation
19 (CPR) to add basic life support to make it clearer
20 for licensing certificate holders because the
21 Pennsylvania Coalition for Oral Health gets this
22 question often. She requested the same change be
23 made to page 7.

24 Mr. Rouse referred to a general comment from Ms.
25 Hawkey regarding page 6, where radiology proficiency

1 for the taking of radiographs is not covered in the
2 EFDA scope. She mentioned there is no requirement of
3 EFDA's to have a radiology certification, where it is
4 currently possible for someone to graduate from an
5 approved EFDA program, receive their EFDA
6 certification from the board, but not be legally
7 allowed to take radiographs.

8 Mr. Rouse also noted Ms. Hawkey referred to the
9 definition of program on page 20 of the annex and top
10 of page 23 that includes radiographs in the new draft
11 but may need to be addressed elsewhere. She also
12 noted it may be helpful to add a radiation health and
13 safety (RHS) exam requirement under the requirement
14 for candidates.

15 Dr. Groody agreed with tightening the gap, noting
16 that when the Board made the workforce model of the
17 EFDA in the definition, the Board assumed that they
18 do not need to require RHS for the authorization
19 because every dental assistant needs to have it. She
20 mentioned it could be added to the program
21 requirements or put that on the institutions.

22 Dr. Lugo suggested putting the education
23 documents in the application process.

24 Dr. Groody noted that a candidate has to upload
25 current CPR in the Pennsylvania Licensing System

1 (PALS). She stated dental assistants were previously
2 recognized by the Board before PALS was a thing and
3 were DANB certified to expose radiographs. She
4 mentioned it could be as easy as uploading the RHS or
5 require it from the program.

6 Dr. Arndt commented that because it is on the
7 application does not make it a requirement because
8 changes are needed in another section and suggested
9 requiring both.

10 Mr. Rouse addressed a question on page 27 and 29
11 asking why the removal of (j) to prevent EFDA's from
12 fabricating temporary crowns and bridges.

13 Dr. Groody explained that it is not in the scope
14 of practice as a duty of EFDA and does not make sense
15 to test it.

16 Dr. Arndt asked why it is not in the scope of
17 practice because it is a primary function that a
18 dental assistant can do and an EFDA should be able to
19 do.

20 Dr. Groody explained that Pennsylvania does not
21 have a scope of practice for dental assistants and it
22 was not as restoratively permanent when the
23 definitions of EFDA were formed for Pennsylvania.

24 Mr. Rouse noted the Pennsylvania Coalition for
25 Oral Health thanked the Board for adding the

1 disability piece.

2 Mr. Rouse noted a question regarding page 40
3 under § 33.216 asking whether it is the intention of
4 the Board to only require an automated external
5 defibrillator (AED) in offices and requested
6 clarification of locations, and the Board agreed to
7 make the changes.

8 Mr. Rouse informed Board members that he would
9 make the amendments discussed today and send it back
10 to the Board.

11 Dr. Funari requested more discussion concerning
12 allowing a provider with a faculty license to perform
13 their duties in a location other than the primary
14 facility.]

15

16 Report of Board Counsel - Miscellaneous

17 [Ronald K. Rouse, Esquire, Board Counsel, provided a
18 copy of House Bill 758 of 2023 regarding social bias
19 and cultural competence training for public employees
20 and licensees. He noted the legislation proposes to
21 direct the Pennsylvania Human Relations Commission to
22 develop continuing education training for 17 boards,
23 including the State Board of Dentistry, regarding
24 social bias and cultural competence. He explained
25 that the training would be virtual and required every

1 2 years.

2 Mr. Rouse addressed the new training requirement
3 for Drug Enforcement Administration (DEA) registered
4 practitioners. He explained that a new one-time 8-
5 hour training requirement for all drug enforcement
6 administration registered practitioners on the
7 treatment and management of patients with opioid or
8 other substance use disorders was enacted on December
9 29, 2022.

10 Dr. Funari offered to forward a letter of the
11 requirements and who can offer it, along with all of
12 the oral surgeons and anybody who has an anesthesia
13 permit speaking on the requirements to Mr. Rouse. He
14 also mentioned that a Continuing Education
15 Recognition Program (CERP) course would qualify but a
16 Providers of Approved Continuing Education (PACE)
17 course would not qualify.]

18 ***

19 Report of Board Chairperson

20 [Shawn M. Casey, D.M.D., Chairman, addressed his
21 inspection of the program at the Lebanon Veterans
22 Affairs as part of the Commission on Dental
23 Accreditation (CODA) process.

24 Chairman Casey also addressed the Children's
25 Hospital Dental Clinic in Pittsburgh, noting the

1 residents are doing an amazing job collaborating
2 together as a team.

3 Chairman Casey mentioned they receive a great
4 education in both of those facilities and hats off to
5 both of the program directors.

6 Chairman Casey reminded everybody that MOM-n-PA
7 would be held June 2-3 in Allentown this year. He
8 encouraged anyone who had time to participate, noting
9 it to be a great opportunity to give back to the
10 community and dental organization.

11 Dr. Funari commented that dentists and auxiliary
12 personnel are needed and also encouraged anyone
13 interested to go to their website.]

14 ***

15 Report of Acting Commissioner - No Report

16 ***

17 Report of Board Administrator - No Report

18 ***

19 Report of Committees - Legislation and Regulatory
20 Committee

21 [Barbara Fowler, Public Member, noted conversation
22 within the Legislation and Regulatory Committee
23 Meeting with the assistance of Dr. Mountain to
24 identify some of the issues related to mobile vans in
25 Pennsylvania and would be talking with Dr. Casey and

1 Ms. Townley about scheduling a larger conversation
2 with the full Board this spring.]

3 ***

4 Report of Committees - Accreditation and Licensing
5 Committee - No Report

6 ***

7 Report of Committees - Probable Cause Screening
8 Committee

9 [LaJuan M. Mountain, D.M.D., noted reviewing three
10 matters.]

11 Chairman Casey informed Board members that Amber
12 Sizemore would need to be replaced on the Probable
13 Cause Screening Committee and asked for
14 recommendations, noting Dr. Funari expressed interest
15 in being part of that committee.]

16 CHAIRMAN CASEY:

17 I'd like to entertain a motion of
18 having Dr. Joel Funari be part of the
19 Probable Cause Screening Committee.

20 DR. JASPAN:

21 I make a motion to be part of the
22 Probable Cause Committee.

23 CHAIRMAN CASEY:

24 Second?

25 DR. SULLIVAN:

1 Second.

2 CHAIRMAN CASEY:

3 Roll call, Christina.

4

5 Claggett, aye; Casey, aye; Sullivan,
6 aye; Groody, aye; Arndt, aye; Fowler,
7 aye; Jaspan, aye; Lugo, aye; Mountain,
8 aye; Murray, aye; Zehring, aye.

9 [The motion carried unanimously.]

10

11 Report of Committees - Scope of Traditional and
12 Emerging Practice Committee

13 [Donna L. Murray, RDH, PHDHP, MSDH, noted the Scope
14 of Traditional and Emerging Practice Committee met on
15 April 21 and discussed three items, including dental
16 laser utilization by a dental hygienist,
17 teledentistry, and digital imaging impressions. She
18 noted Angie Wallace from the Academy of Dental Lasers
19 presented a summary on various lasers and how they
20 are currently being used in dentistry by dentists and
21 dental hygienists.

22 Ms. Murray noted Ms. Wallace answered committee
23 questions and agreed to return during a full board
24 meeting for a presentation that would include
25 specific topics and resources that the committee and

1 Board members request and is scheduled to present on
2 July 14.

3 Ms. Murray addressed teledentistry, noting Board
4 Counsel shared a copy of House Bill 1729, which was
5 referred to the Professional Licensure Committee in
6 July 2021. She reported that updates would continue
7 to be shared with Board members.

8 Ms. Murray noted digital imaging impressions was
9 added to the agenda based on the prior Scope of
10 Practice Committee Meeting as the technology and
11 digital imaging continues to grow with dental
12 applications. She mentioned that the topic may be
13 one of interest for future discussions.

14 Chairman Casey wished everyone a happy Mother's
15 Day.]

16 ***

17 Adjournment

18 CHAIRMAN CASEY:

19 Do I have a motion to end the meeting?

20 We'll see you back on July 14, 2023.

21 DR. FUNARI:

22 I will make that last motion.

23 MS. MURRAY:

24 I will second it.

25 CHAIRMAN CASEY:

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Enjoy Mother's Day. Have a nice weekend.

[There being no further business, the State Board of Dentistry Meeting adjourned at 2:52 p.m.]

CERTIFICATE

I hereby certify that the foregoing summary minutes of the State Board of Dentistry meeting, was reduced to writing by me or under my supervision, and that the minutes accurately summarize the substance of the State Board of Dentistry meeting.



Sophia Mahoney,
Minute Clerk
Sargent's Court Reporting
Service, Inc.

STATE BOARD OF DENTISTRY
REFERENCE INDEX

May 12, 2023

	TIME	AGENDA
1		
2		
3		
4		
5		
6		
7		
8	9:00	Executive Session
9	10:30	Return to Open Session
10		
11	11:06	Official Call to Order
12		
13	11:07	Roll Call
14		
15	11:07	Introduction of Attendees
16		
17	11:09	Approval of Minutes
18		
19	11:10	Appointment - Affiliated Monitors Inc.
20		
21	11:36	Appointment - Pennsylvania Insurance
22		Department - Pennie Health Insurance
23		Presentation
24		
25	11:59	Review of Applications
26		
27	12:03	Report of Board Counsel
28		
29	12:10	Appointment - Bureau of Finance and
30		Operations Annual Budget Presentation
31		
32	12:18	Report of Prosecutorial Division
33		
34	12:43	Executive Session
35	12:58	Return to Open Session
36		
37	12:58	Motion
38		
39	1:04	Report of Board Counsel (cont.)
40		
41	2:44	Report of Board Chairperson
42		
43	2:47	Report of Committees
44		
45	2:52	Adjournment
46		
47		
48		
49		
50		