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mn.gov/boards/dentistry/

AT A GLANCE

- Over 17,000 dentists, dental therapists, dental hygienists, and dental assistants are regulated by this Board
- Over 700 new licenses are issued each year
- We investigate nearly 300 complaints each year
- Requirements for continuing education are set and then audited for compliance. Around 70% % of the licensed dental professionals who are audited pass; others need additional work
- We maintain a registry of 150 dental laboratories
- We have been recognized nationally and internationally for innovation (including being the first state to license *dental therapists*)

*Note: In FY 2012 – FY 2015, the Board of Dentistry was the administering board for the **Health Professionals Services Program (HPSP)** on behalf of the other health regulatory boards and the Minnesota Department of Health. In FY 2016 and beyond, the administering board is Physical Therapy; see Physical Therapy for the Program Narrative specific to the HPSP program.*

PURPOSE

MISSION: The Board of Dentistry exists to ensure that Minnesota citizens receive quality dental care from competent dental health care professionals.

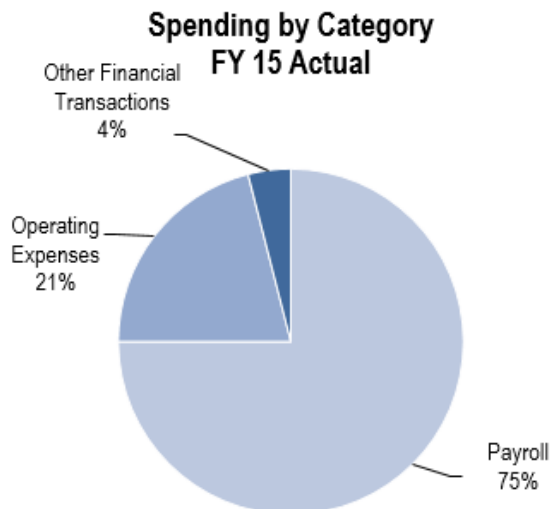
We accomplish public protection through:

- establishing initial licensure standards (education and examinations)
- continued competence (professional development) standards, and
- enforcing regulations and responding to complaints

By establishing high standards for licensure and enforcing those standards, we contribute to the statewide outcomes to ensure that

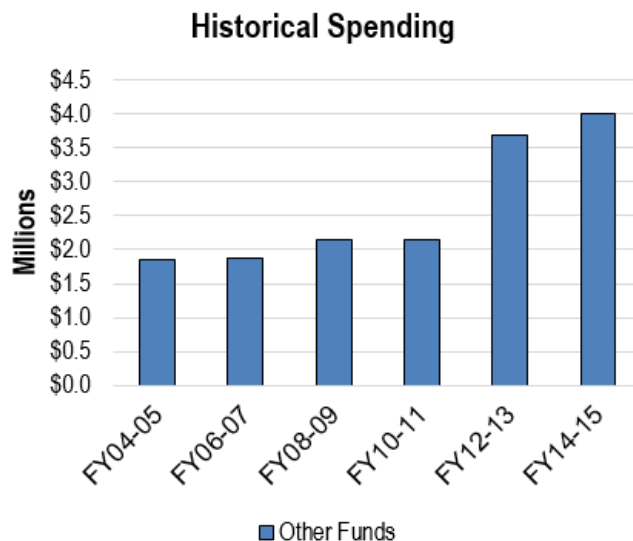
- **All Minnesotans have optimal health**
- **People in Minnesota are receiving safe and quality dental care**
- **We provide efficient and accountable government services**

BUDGET



FY 15 includes spending for both Board of Dentistry and the Health Professional Services Program

Source: BPAS



FY 12-15 includes spending for both Board of Dentistry and the Health Professional Services Program

Source: Consolidated Fund Statement

The Board is funded by licensure fees. Minnesota Statutes section 214.06, subdivision 1(a) compels the Board to collect fees in the amount sufficient to cover direct and indirect expenditures. Funds are deposited as non-dedicated revenue into the state government special revenue fund. From this fund, the Board receives a direct appropriation to pay for agency expenses such as

salaries, rent, costs associated with disciplinary/contested cases and operating expenditures. It also pays statewide indirect costs through an open appropriation. The Board receives no general fund dollars.

In addition to Board operations, licensure fees fund activities that support multiple boards and/or other agencies. Some of these are: the Administrative Services Unit (inter-board), Health Professionals Services Program (inter-board), HIV, HBV and HCV Prevention Program (Department of Health), Prescription Monitoring Program (Pharmacy Board), Office of the Attorney General for legal services, Criminal Background Check Program (inter-board), and the Voluntary Healthcare Provider Program (inter-board).

STRATEGIES

The Board accomplishes its mission through services that include: establishing the educational, examination and other qualification standards for initial licensure as dentists, dental hygienists, dental therapists, and dental assistants; determining requirements for license renewal, such as professional development (continuing education); accepting, investigating, and resolving complaints regarding licensed dental professionals; tracking compliance of those licensees who are under corrective or disciplinary action of the Board; registering professional firms; disseminating public information; and engaging in policy initiatives to ensure that statutes and rules regulating dental professions remain relevant.

The Board achieves our mission by continuous learning and engagement with dental professionals, dental students and dental professional educational institutions. The Board strives to address complaints in a timely and efficient manner. We continue to look for new methods of communication to engage the public in what we do and how we work to ensure safe dental care is provided to the citizens of Minnesota. We maintain consistency, integrity, and understanding of our licensing process by providing transparency in our requirements for education, consistency in application process, and criminal background check process. This supports the process of candidate integrity during licensing and furthers our mission to protect the public by ensuring that Minnesota citizens receive quality dental health care from competent dental health care professionals. We are working with information technology to improve the quality and quantity measures for licensing and complaint/ compliance process. We are improving the length of time spent for complaint resolution. We work with all of our testing agencies to ensure the integrity of the dental and allied dental professional licensure process. We have been able to lower our costs per licensee, and continue to look for methods to streamline operations and aid in efficiency.

RESULTS

The Board challenges itself to stay current on expectations, opportunities and standards for regulating dental professionals. We take pride in being effective and efficient in our complaint process, improving our licensing procedures while maintaining high standards and keeping our operating costs as low as possible."

<i>Type of Measure</i>	<i>Name of Measure</i>	<i>Previous</i>	<i>Current</i>	<i>Dates</i>
Quantity	Number of Dental Therapy Licenses Issued *	43	63	FY2014- FY2016
	Number of Advanced Dental Therapy Certifications Issued*	6	25	
Quality	Board cost per licensee (measure of efficiency)	\$ 88.60	\$ 61.40	FY2014- FY2016
Quantity & Quality	Complaints Remaining Open at the End of the Fiscal Year	134	103	FY2014- FY2016
	Age of Complaints < 1 year	97	82	
	Age of complaints >1 year	37	21	

*Dental Therapy is a newer dental profession, with the first licensure beginning in 2011 and the first eligible DT to receive Advanced Dental Therapy Certification was in 2013.

Minnesota Statutes Chapter 214 (enabling statute) <https://www.revisor.mn.gov/statutes/?id=214>

Minnesota Statutes Chapter 150A (Dental Practice Act) <https://www.revisor.mn.gov/statutes/?id=150A>

Expenditures By Fund

	Actual FY14	Actual FY15	Actual FY16	Estimate FY17	Forecasted Base	
					FY18	FY19
1201 - Health Related Boards	1,919	2,078	1,145	1,568	1,357	1,357
2000 - Restrict Misc Special Revenue	0	9	28	27	35	35
Total	1,919	2,087	1,173	1,595	1,392	1,393
<i>Biennial Change</i>				(1,238)		16
<i>Biennial % Change</i>				(31)		1

Expenditures by Program

Program: Dentistry Board of	1,919	2,087	1,173	1,595	1,392	1,393
Total	1,919	2,087	1,173	1,595	1,392	1,393

Expenditures by Category

Compensation	1,503	1,556	811	1,000	997	1,007
Operating Expenses	415	474	362	595	395	386
Other Financial Transactions	1	57	1	0	0	0
Total	1,919	2,087	1,173	1,595	1,392	1,393

Full-Time Equivalents

17.2	17.7	11.2	11.2	11.2	11.2
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1201 - Health Related Boards

	Actual		Actual	Estimate	Forecast Base	
	FY14	FY 15	FY 16	FY17	FY18	FY19
Balance Forward In	0	156	0	211	0	0
Direct Appropriation	2,059	2,105	1,328	1,328	1,342	1,342
Open Appropriation	0	0	14	15	15	15
Net Transfers	0	0	14	14	0	0
Cancellations	0	183	0	0	0	0
Expenditures	1,919	2,078	1,145	1,568	1,357	1,357
Balance Forward Out	140	0	211	0	0	0
<i>Biennial Change in Expenditures</i>				(1,284)		1
<i>Biennial % Change in Expenditures</i>				(32)		0
Full-Time Equivalents	17.2	17.7	11.2	11.2	11.2	11.2

2000 - Restrict Misc Special Revenue

	Actual		Actual	Estimate	Forecast Base	
	FY14	FY 15	FY 16	FY17	FY18	FY19
Balance Forward In	0	0	1	1	0	0
Receipts	0	10	28	26	35	35
Expenditures	0	9	28	27	35	35
Balance Forward Out	0	1	1	0	0	0
<i>Biennial Change in Expenditures</i>				46		16
<i>Biennial % Change in Expenditures</i>				534		28