MEMBERS PRESENT
Julia Richman, DDS, Chair
Aaron Stevens, DMD, Vice Chair
John Liu, DDS
Marlynne Fulton, Public Member
Lyle McClellan, DDS
Tiffany Bass, DDS
Sonia Pal, DDS
Ronald Marsh, DDS
Bree Kramer, EFDA
Kathleen Elling, EFDA
Karen Clements, DDS
Abhishake Banda, DMD, MD
David Carsten, DDS

OTHERS PRESENT
Sophie Doumit, Washington State Dental Association (WSDA)
Dr. Bryan Edgar, WSDA
Dr. Linda Edgar, WSDA
Emily Studebaker, WSDA
Bracken Killpack, WSDA
Emily Lovell, WSDA
Dr. Todd Cooper, Columbia Basin Oral and Maxillofacial Surgeons
Charlie Hall, DDS
Dr. Timothy Hess, University of Washington School of Dentistry
Dr. Gary Pickard, Pacific Dental Services
Jennifer Zbaraschuk, Washington Dental Hygienists’ Association (WDHA)
Colleen Gaylord, WDHA
Lori Angdahl, WDHA
Danielle Mora, WDHA
Dr. Michael Kevin Joe, Washington State Society of Prosthodontics (WSSP)
Dr. W. Eunku Chung, WSSP
Dr. John Pettrini Jr, WSSP
Dr. Joy McDaniell, Department of Corrections (DOC)
Erin Gallegos, Dentsply Sirona
Ericka Brown, Department of Health

MEMBERS ABSENT
Brian Macall, DDS
Kunal Walia, DDS
Karla Briggs, Public Member

STAFF PRESENT
Trina Crawford, Executive Director
Jennifer Santiago, Program Manager
Becky McElhiney, Assistant Program Manager
Bill Kellingston, Supervising Staff Attorney
Heather Carter, Assistant Attorney General (AAG)
OPEN SESSION

1. CALL TO ORDER – Julia Richman, DDS, Chairperson, called the meeting to order at 9:30 a.m.

1.1. The commission, staff, and audience introduced themselves.
1.2. The commission approved the agenda as presented.
1.3. The commission approved the December 6, 2019 business meeting minutes as presented.

2. PRESENTATION

The commission received information from Sasha De Leon, Drugs Systems Director and Carly Bartz-Overman, Program Manager about the prescription monitoring program and Washington State safe medication return program.

3. LEGISLATION

3.1. Dr. Marsh reported to the commission on the Department of Health (Department) weekly “Meet Me Call” conference calls.
   • Dr. Marsh has participated in two calls so far this legislative session.
   • Senate Bill 6061 would require training for dentists practicing teledentistry.
   • House Bill 2438 involves collecting data on dental prescribing and opioid impact.
   • House Bill 1317 introduced in 2019 would expand the commission to 18 members, including two dental therapists.
   • Senate Bill 5833 was introduced in 2019 and would expand the scope of practice for dental assistants.

3.2. The commission discussed 2020 legislation.
   • Dr. Richman asked the commission if there were any concerns regarding the 2020 legislative bills related to dentistry.
     o Dr. Liu asked if the dental commission set standards for education or continuing education for dental therapists.
     o Ms. Santiago clarified that the specific training requirements are included in the bill. Ms. Santiago shared that a technical concern about continuing education has already been submitted to the Department.
     o Dr. Marsh asked the commission about their thoughts on expanding the commission to 18 members.
     o Ms. Crawford expressed a concern about the balance of dental professionals to public members.
     o Dr. Marsh expressed a concern about 2 members representing the interests of 50 professionals.
     o Dr. Stevens clarified that the commission represents the public so the ratio is not relevant.
     o A stakeholder clarified that the definition of dentistry includes teledentistry.
4. BOTULINUM TOXIN INJECTION / DERMAL FILLERS / PLASMA INJECTIONS

The commission discussed botulinum toxin injections, neurotoxin injections, dermal fillers, and plasma injections.

- Ms. Carter shared information about the recently rescinded interpretive statement.
  - Interpretive statements are advisory only and not enforceable.
  - The interpretive statement was originally written in 2013 and reconsidered in 2016, but no changes were made at that time.
  - The interpretive statement was officially withdrawn on January 3, 2020 through the code revisers office.
  - The dental statute defining dentistry (RCW 18.32.020) is old and only has a few definitional provisions.
  - The fourth provision, defining dentistry as anything included in the curriculum of an accredited dental school program, has been used to keep up with the evolution of dentistry.
  - If the definition were to be challenged, the court would look at plain language of the statute.
  - Dr. Liu asked if the court would take into account the elective nature of botulinum toxin injection courses if there were a disciplinary case involving a dentist practicing botulinum toxin injection.
  - Ms. Carter clarified that the court would only look at evidence and the defense would likely submit a syllabus from dental courses throughout the country teaching botulinum toxin injection.
  - Dr. Banda asked if the first provision was the most clear or “plain language”.
  - Ms. Carter clarified that the first provision is about representation and not the only provision defining dentistry in the statute.

- Dr. Cooper shared about his involvement with the development of the 2013 interpretive statement. Dr. Cooper shared his opinions and concerns with the provision in statute that defines dentistry based on what is taught in dental school (RCW 18.32.020 (4)):
  - Not clearly defining scope of practice renders it unenforceable.
  - Commission on Dental Accreditation (CODA) accredited programs include resident-level training on many other medical procedures, which would all be considered in-scope with this definition. This provision would also open the scope for oral surgeons.
  - There is no need for the other provisions of RCW 18.32.020 if the fourth provision applies.
  - The fourth provision applies only to faculty and students at dental schools.

- Dr. Hall shared a historical legislative document to demonstrate legislative intent, as well as his opinions and concerns with RCW 18.32.020 (4):
  - Scope of practice is a political boundary. Only the legislature can expand scope.
  - Not against the expansion of the scope of practice but the method by which it appears to be happening currently.
The provision exempts dental schools, not faculty.
- Shared his interpretation of the provision, which he believes was intended to exempt dental schools from the dental practice act since they are not owned by dentists.
- Dental statutes do not contain exemptions that prohibit other health care professions from practicing dental procedures.

- Ms. Studebaker cautioned that it is not the role of the commission to expand or limit scope, and that interpretations of statute are not needed when language is unambiguous.
- Ms. Studebaker shared history that the Washington State Supreme Court recognized the validity of the fourth provision of RCW 18.32.020.
- Dr. Richman requested further information regarding the cases referenced. Ms. Studebaker agreed to send documentation to the commission.
- Dr. Edgar asked if the course was elective in dental schools.
- Dr. Liu clarified that a practitioner must be sufficiently trained in a procedure to meet the standard of care, so whether a course is elective or not is irrelevant.
- Dr. Pickard supports the WSDA and their comments, and suggested reviewing current legislation of neighboring states.
- Dr. Richman asked the commission to share their opinions on the discussion.
- Dr. Stevens shared his opinion that the language is clear, but difficult to apply to the changing field of dentistry.
- Dr. Stevens cautioned the commission to apply what they think is right but also what is enforceable by law.
- Dr. Banda suggested the statute language should be updated.
- Dr. Marsh clarified that the document in question is not a rule or law, but an interpretive statement intended to provide dentists with guidance.
- Dr. McClellan suggested adding requirements to refer to other medical professionals when appropriate.
- Mr. Killpack expressed his opinions that the language is unambiguous and written to anticipate the growth of the field of dentistry. Clear language does not require intent. There are many places of overlap in law or rule between professions.
- Ms. Carter suggested updating the statute via the legislative process.
- Ms. Crawford shared that the Department is aware of the issue and beginning internal conversations to address it. Legislative actions are typically not requested by the Department, but associations.
- Dr. Clements expressed concerns that rescinding the interpretive statement sent a message to the dental community that practicing botulinum toxin injections is now allowed.
- Dr. Liu expressed concerns that rescinding the interpretive statement only added to the confusion.
- Mr. Killpack shared that the WSDA does not think the language is ambiguous and supports incorporating the ADA’s definition of dentistry in statute. This could replace provisions two and four in RCW 18.32.020.
• Dr. Carsten shared his experience with the ADA in which the lines are getting blurred as medicine progresses.
• Ms. Lovell understands the legislative process can be lengthy and suggested having a guiding document in place in the meantime. The WSDA has submitted a proposed document and requests the commission’s feedback. WSDA recommendation was to establish appropriate education and training.
• Dr. Marsh moved to reinstate the recently rescinded interpretive statement. Dr. Banda seconded. The commission voted with 2 in favor, 8 opposed, 3 abstained. The motion did not pass.
• Mr. Kellington clarified that the standard of care requires a practitioner to be sufficiently trained in a procedure before performing it and reminded the commission that there are still tools in place for enforcement.
• Dr. Banda expressed his opinion that the document submitted by the WSDA was a well-crafted document but did not address the statute in question. Isolating one procedure would set a precedent that a document would need to be developed for every procedure.
• Ms. Lovell expressed concerns the medical community had when the interpretive statement was rescinded.
• Ms. Carter suggested developing a guiding document such as an advisory opinion and creating a botulinum toxin injection committee.
• Dr. Richman requested Dr. Banda draft language for a potential advisory document.
• The commission agreed continued discussion is needed on this topic and would like to include the Department’s policy and legislative staff.

5. DENTAL COLLABORATION COMMITTEE

Dr. McClellan reported to the commission on the committee meeting held December 20, 2019.
• The committee discussed whether it was within the scope of practice for denturists to place abutments.
• Denturists have been performing the procedure for 20 years with no formal complaints.
• Denturists have a different relationship with patients than dentists because they see their patients more frequently.
• Other dental professionals have concerns that placing abutments is beyond the scope and training of denturists.
• Ms. Lovell expressed her opinion that the dental commission’s concerns were not well-represented at the committee meeting.
• The committee decided to bring the issue to their prospective boards or committees for discussion.
• Dr. Carsten clarified that the definition of “removable” is the issue and that it implies removable by the patient.
• Dr. Kevin Joe agreed with Dr. Carsten’s interpretation of the definition of removable and expressed concerns for public safety.
• Dr. Kevin Joe expressed his suspicion that cases go undetected because the focus of other dental providers is patient care and not deducing underlying causes for issues.
• Dr. Carsten shared his experience with the Oregon Health and Science University in which he has seen cases of issues caused by denturists placing abutments.
• Dr. Chung clarified the prosthodontic glossary defines “removable” as removable by the patient.
• Dr. Edgar shared his concerns that this is a clear violation of scope, the statute does not define “removable”, and that the claim of no complaints by the denturists is inaccurate.
• There is a concern that denturists have unlawfully increased their scope of practice.
• There have been 10 letters for and 18 letters against denturists placing abutments.
• Dr. Stevens expressed his opinion that this issue highlights the fact that scope of practice interpretation is tricky.
• Ms. Carter suggested the committee have another meeting and the dental commission members could relay these concerns. The commission could also communicate their concerns to Ms. Santiago or Ms. Crawford, or write a letter to the Board of Denturists.
• Ms. Carter advised the commission that each profession has jurisdiction over its own statute.
• Dr. McClellan will raise a summary of these concerns to the committee at the next committee meeting.
• Ms. Lovell requested that Dr. Carsten join the Dental Collaboration Committee as he has some experience with this topic.
• Ms. Santiago clarified the difference between the Dental Quality Assurance Commission and the Board of Denturists, and reiterated that they are separate disciplinary authorities.
• The WSDA clarified that it does not speak on behalf of the commission.

6. DENTAL INFECTION CONTROL COMMITTEE

Dr. Carsten reported to the commission on the committee meeting held January 16, 2020. Rules are still in progress and another meeting is scheduled for March 2, 2020.

7. DENTAL ANESTHESIA COMMITTEE

Dr. Liu reported to the commission on the committee meeting held January 17, 2020. Rules are still in progress and will be brought to the commission for discussion when the draft rules are completed.

8. DENTAL JURISPRUDENCE EXAMINATION COMMITTEE

Ms. Kramer reported to the commission on the committee meeting held January 24, 2020. The committee agreed to remove all questions referencing the botulinum toxin injection interpretive statement from all examinations and a question on one examination regarding chronic pain management.
9. PUBLIC DISCLOSURE

The commission discussed requests to be approved professional associations or educational organizations to receive lists and labels.

- The commission approved a request from the Institute for Brain Potential.
- The commission approved a request from the Western Society of Periodontology.
- The commission denied a request from the Dental Intelligence Agency.

10. RULES

10.1. The commission discussed WAC 246-817-420 Specialty representation.
- There are no updates at this time. Discussions will continue at the Continuing Competency Committee meeting scheduled for March 6, 2020.

10.2. The commission received an update on WAC 246-817-907 Patient notification, secure storage, and disposal for opioid prescribing.
- The CR-103 will be filed soon.

10.3. The commission received information related to 2019 Substitute Senate Bill 5380:
- RCW 69.50.312 requires all prescribers to electronically prescribe schedule II through V effective January 2021.
- RCW 70.225 requires provider groups of ten or more to demonstrate they can integrate with the prescription monitoring program (PMP).
- There is a waiver option for providers who are unable to meet the requirements. The PMP has begun discussions about the waiver process.
- Dr. Carsten shared his concern that there is only one dental software program (Epic) that would be compatible with the PMP software. Epic is typically used for organizations with 500 practitioners or more.
- Dr. Carsten will compile these concerns in a written comment to Ms. Santiago to share with the PMP.

10.4. The commission received an update on rules in progress and list of priorities for rule modifications.

11. OTHER

11.1. The commission discussed licensure rules related to Commission on Dental Accreditation (CODA) and the first international school accreditation.
- Dr. Edgar expressed his opinion that there is no need for additional requirements for international schools because when a program is CODA approved it is fully accredited.
- Ms. Carter clarified that WAC 246-817-110 is specific to the US and Canada for CODA accreditation.
- There is some contradiction between WAC 246-817 and WAC 246-817-160 regarding accredited schools.
- Dr. Edgar suggested the rules be updated to include CODA accredited international programs.
• Dr. Richman suggested this topic be discussed at a future Continuing Competency Committee meeting.

11.2. The commission discussed Dental Licensure Objective Structured Clinical Examination (DLOSCE).
• Dr. Carsten will be taking the examination as part of a pilot program.
• The commission approved a request to have Dr. Phillip Marucha, Dean, Oregon Health and Science University School of Dentistry and Dr. Gary Chiodo, Interim Dean, University of Washington School of Dentistry present to the commission regarding DLOSCE at a future meeting.
• Dr. Carsten will refer the deans to Ms. Santiago to schedule a presentation at a future commission meeting.

12. CORRESPONDENCE

The commission received a copy of a response to Dr. Gary Bell providing a statement related to releasing dental records to law enforcement when appropriate.

13. PROGRAM REPORT – Becky McElhiney, Jennifer Santiago, and Trina Crawford

13.1. The commission received the budget report. Ms. Crawford specified that numbers are still being finalized. There is currently a budget deficit due to increased costs caused by increased discipline. Costs to support the Healthcare Enforcement and Licensing Modernization Solution (HELMS) program will be taken from the fund balance at a rate of $12 per licensee per year.
13.2. The commission received a list of 2020 dental commission meeting dates.
13.3. The commission received a list of active committees.

14. FUTURE COMMISSION BUSINESS

Ms. Santiago reminded the commission of the upcoming business meetings at the Department of Health Kent facility on March 6, 2020 and in Bellingham, WA on April 17, 2020.

The commission adjourned at 12:26 p.m.

Submitted By: Commission Approval By:

Jennifer Santiago, Program Manager Julia Richman, DDS, Chairperson