

**Economic Impact Analysis** Virginia Department of Planning and Budget

**18 VAC 60-20 – Regulations Governing the Practice of Dentistry and Dental Hygiene Department of Health Professions** February 14, 2006

## Summary of the Proposed Amendments to Regulation

The Board of Dentistry (board) proposes to: 1) require all license and permit applicants to include a current report from the National Practitioner Data Bank as part of their application, and 2) accept at its discretion other evidence of qualification for licensure when a transcript or other documentation required for licensure cannot be produced by the entity from which it is required.

## **Result of Analysis**

The benefits likely exceed the costs for all proposed changes.

# **Estimated Economic Impact**

### NPDB report

Under the current regulations all applications for any license or permit issued by the board must include, among other items, a current report from the U.S. Department of Health and Human Services' (HSS) Healthcare Integrity and Protection Data Bank (HIPDB). HSS describes the HIPDB as "primarily a flagging system that may serve to alert users that a comprehensive review of a practitioner's, provider's, or supplier's past actions may be prudent. The HIPDB is intended to augment, not replace, traditional forms of review and investigation, serving as an important supplement to a careful review of a practitioner's, or supplier's past actions."<sup>1</sup>

The board proposes to also require that applications include a current report from HSS' National Practitioner Data Bank (NPDB). Unlike the HIPDB, the NPDB report contains

<sup>&</sup>lt;sup>1</sup> Source: <u>http://www.npdb-hipdb.com/hipdb.html</u>, accessed on February 14, 2006.

malpractice history.<sup>2</sup> When a health practitioner requests a self-report from HSS, the federal agency sends the NPDB report as well as the HIPDB report.<sup>3</sup> According to the Virginia Department of Health Professions (department), most applicants routinely submit both, but some decline to submit the NPDB report because it is not specified in regulation or because there is damaging information about malpractice paid claims. Since the health practitioner also receives the NPDB report when she receives the HIPDB report, the proposed requirement that applications include a current NPDB report will produce no cost for qualified applicants other than perhaps a small increase in postage. The board's receiving malpractice history via the NPDB report is significantly beneficial for the public since the board can make significantly better informed decisions in determining whether applicants can be expected to practice competently and ethically. Thus the proposal to require that applications include a current NPDB report should produce a net benefit.

#### Alternative evidence of qualification

The board also proposes to add the following language to these regulations: "If a transcript or other documentation required for licensure cannot be produced by the entity from which it is required, the board, in its discretion, may accept other evidence of qualification for licensure." According to the department,

The issuance of temporary licenses to persons displaced by Katrina has highlighted a problem with current requirements for transcripts or other documentation. If a dental school has closed or all documents are lost in a disaster, the applicant would be unable to fulfill the current application requirements and thereby be barred from licensure in Virginia. The Board believes it is in the best interests of the health and safety of patients to permit qualified practitioners to be licensed, thus increasing the access to and supply of dental care. For example, when the Office of the Registrar at LSU Health Sciences Center at New Orleans could not produce a transcript for a student who graduated prior to 1999, they were able to verify that the applicant had received a Doctor of Dental Surgery in 1991. With the amended regulation, the Board would be able to act affirmatively on an application based on that verification.

This proposal should also produce a net benefit. It should help enable qualified applicants to obtain licensure who otherwise might be prevented from doing so for reasons unrelated to their

<sup>&</sup>lt;sup>2</sup> Source: Virginia Department of Health Professions

<sup>&</sup>lt;sup>3</sup> Ibid

competence or ethics. As stated by the board and department, this can potentially increase the access to and supply of quality dental care.

### **Businesses and Entities Affected**

The proposed regulations affect individuals applying to obtain licensure or a permit to practice dentistry or dental hygiene in the Commonwealth, dental patients, and the dental practices and universities that hire dentists and dental hygienists. Between December 1, 2004 and December 1 2005 238 hygienists and 265 dentists obtained licensure in Virginia.<sup>4</sup>

## **Localities Particularly Affected**

The proposed regulations affect all Virginia localities.

#### **Projected Impact on Employment**

A small number of dentists and dental hygienists may obtain licensure and practice in Virginia who otherwise would not have due to the proposal to accept other evidence of qualification for licensure. The proposal to require the NPDB report may result in the board denying a small number of license applications that otherwise would have been approved due to the additional information on malpractice. Together, the two proposals are unlikely to result in a large change in the number of individuals employed as dentists or dental hygienists in the Commonwealth.

## Effects on the Use and Value of Private Property

As described above, a small numbers of individuals may be able to practice dentistry or dental hygiene in Virginia due to the proposal to proposal to accept other evidence of qualification for licensure. Also as described above, a small number of different individuals may be denied the opportunity to practice dentistry or dental hygiene due to the proposal to require the NPDB report.

### **Small Businesses: Costs and Other Effects**

All dental practices likely qualify as small businesses. The proposed regulatory changes do not produce significant costs for competent and ethical dentists and dental hygienists.

<sup>&</sup>lt;sup>4</sup> Ibid

#### Small Businesses: Alternative Method that Minimizes Adverse Impact

The proposed regulatory changes do not produce an adverse impact for competent and ethical dentists and dental hygienists or the public.

#### Legal Mandate

The Department of Planning and Budget (DPB) has analyzed the economic impact of this proposed regulation in accordance with Section 2.2-4007.H of the Administrative Process Act and Executive Order Number 21 (02). Section 2.2-4007.H requires that such economic impact analyses include, but need not be limited to, the projected number of businesses or other entities to whom the regulation would apply, the identity of any localities and types of businesses or other entities particularly affected, the projected number of persons and employment positions to be affected, the projected costs to affected businesses or entities to implement or comply with the regulation, and the impact on the use and value of private property. Further, if the proposed regulation has adverse effect on small businesses, Section 2.2-4007.H requires that such economic impact analyses include (i) an identification and estimate of the number of small businesses subject to the regulation; (ii) the projected reporting, recordkeeping, and other administrative costs required for small businesses to comply with the regulation, including the type of professional skills necessary for preparing required reports and other documents; (iii) a statement of the probable effect of the regulation on affected small businesses; and (iv) a description of any less intrusive or less costly alternative methods of achieving the purpose of the regulation. The analysis presented above represents DPB's best estimate of these economic impacts.