

EXHIBIT R

QUESTIONNAIRE FOR FILING PROPOSED RULES AND REGULATIONS WITH THE ARKANSAS LEGISLATIVE COUNCIL AND JOINT INTERIM COMMITTEE

DEPARTMENT/AGENCY Arkansas Department of Health
DIVISION Oral Health
DIVISION DIRECTOR Dr. Bryan Whitaker
CONTACT PERSON Dr. Bryan Whitaker
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NAME OF PRESENTER AT COMMITTEE MEETING Dr. Bryan Whitaker
PRESENTER E-MAIL bryan.whitaker@arkansas.gov

INSTRUCTIONS

- A. Please make copies of this form for future use.
- B. Please answer each question completely using layman terms. You may use additional sheets, if necessary.
- C. If you have a method of indexing your rules, please give the proposed citation after "Short Title of this Rule" below.
- D. Submit two (2) copies of this questionnaire and financial impact statement attached to the front of two (2) copies of the proposed rule and required documents. Mail or deliver to:

Donna K. Davis
Administrative Rules Review Section
Arkansas Legislative Council
Bureau of Legislative Research
Room 315, State Capitol
Little Rock, AR 72201

1. What is the short title of this rule? Rules Pertaining to Dental Hygienists Serving Underserved Areas

2. What is the subject of the proposed rule? Dental hygienists

3. Is this rule required to comply with a federal statute, rule, or regulation? Yes No
If yes, please provide the federal rule, regulation, and/or statute citation.

4. Was this rule filed under the emergency provisions of the Administrative Procedure Act? Yes No
If yes, what is the effective date of the emergency rule? _____

When does the emergency rule expire? _____

Will this emergency rule be promulgated under the permanent provisions of the Administrative Procedure Act? Yes No

5. Is this a new rule? Yes No

If yes, please provide a brief summary explaining the regulation.
The rules provide for limited governance of the services provided by a dental hygienist working under a collaborative care program permit with a licensed client in underserved areas.

Does this repeal an existing rule? Yes No

If yes, a copy of the repealed rule is to be included with your completed questionnaire. If it is being replaced with a new rule, please provide a summary of the rule giving an explanation of what the rule does.

Is this an amendment to an existing rule? Yes No

If yes, please attach a mark-up showing the changes in the existing rule and a summary of the substantive changes. **Note: The summary should explain what the amendment does, and the mark-up copy should be clearly labeled "mark-up."**

6. Cite the state law that grants the authority for this proposed rule?

If codified, please give Arkansas Code citation.

Ark. Code Ann. § 17-82-101, et seq.

7. What is the purpose of this proposed rule? Why is it necessary?

The rules provide for limited governance of the services provided by a dental hygienist working under a collaborative care program permit with a licensed client in underserved areas.

8. Please provide the address where this rule is publicly accessible in electronic form via the Internet as required by Arkansas Code § 25-19-108(b).

www.healthy.arkansas.gov

9. Will a public hearing be held on this proposed rule? Yes No

If yes, please complete the following:

Date: 3/14/13

Time: 10:00 a.m.

Place: 5th Fl. Briefing Rm., ADH, 4815 W. Markham, Little Rock, AR 72205

10. When does the public comment period expire for permanent promulgation? (Must provide a date.)

3/14/13

11. What is the proposed effective date of this proposed rule? (Must provide a date.)

4/25/13

12. Do you expect this rule to be controversial? Yes No

If yes, please explain.

13. Please give the names of persons, groups, or organizations that you expect to comment on these rules? Please provide their position (for or against) if known.

Arkansas State Board of Dental Examiners. They are in favor of the rules.

FINANCIAL IMPACT STATEMENT

PLEASE ANSWER ALL QUESTIONS COMPLETELY

DEPARTMENT Arkansas Department of Health

DIVISION Oral Health

PERSON COMPLETING THIS STATEMENT Reginald A. Rogers

TELEPHONE NO. 501-661-2609 **FAX NO.** 501-661-2357 **EMAIL:** reginald.rogers@arkansas.gov

To comply with Act 1104 of 1995, please complete the following Financial Impact Statement and file two copies with the questionnaire and proposed rules.

SHORT TITLE OF THIS RULE Rules Pertaining to Dental Hygienists Serving Underserved Areas

1. Does this proposed, amended, or repealed rule have a financial impact? Yes No

2. Does this proposed, amended, or repealed rule affect small businesses? Yes No
If yes, please attach a copy of the economic impact statement required to be filed with the Arkansas Economic Development Commission under Arkansas Code § 25-15-301 et seq.

3. If you believe that the development of a financial impact statement is so speculative as to be cost prohibited, please explain.

4. If the purpose of this rule is to implement a federal rule or regulation, please give the incremental cost for implementing the rule. Please indicate if the cost provided is the cost of the program.

Current Fiscal Year

General Revenue _____
Federal Funds _____
Cash Funds _____
Special Revenue _____
Other (Identify) _____
Total 0

Next Fiscal Year

General Revenue _____
Federal Funds _____
Cash Funds _____
Special Revenue _____
Other (Identify) _____
Total 0

5. What is the total estimated cost by fiscal year to any party subject to the proposed, amended, or repealed rule? Identify the party subject to the proposed rule and explain how they are affected.

Current Fiscal Year

\$ 0

Next Fiscal Year

\$ 0

6. What is the total estimated cost by fiscal year to the agency to implement this rule? Is this the cost of the program or grant? Please explain.

Current Fiscal Year

\$ 0

Next Fiscal Year

\$ 0

RULES AND REGULATIONS PERTAINING TO DENTAL HYGIENISTS SERVING UNDERSERVED AREAS

SECTION I. AUTHORITY

The following Rules and Regulations pertaining to Dental Hygienists Serving Underserved Areas are duly adopted and promulgated by the Arkansas Board of Health pursuant to the authority expressly conferred by the laws of the State of Arkansas including Ark. Code Ann. § 17-82-706.

SECTION II. PURPOSE

To protect the health of the citizens of Arkansas by promulgating rules providing limited governance of the services provided by a dental hygienist working under a collaborative care permit program with a licensed dentist.

SECTION III. DEFINITIONS

For the purposes of these Rules, the following words and phrases when used herein shall be construed as follows:

(1) "Collaborative agreement" means a written agreement between a dentist licensed by the Arkansas State Board of Dental Examiners and a dental hygienist licensed by the Arkansas State Board of Dental Examiners providing that the dental hygienist may provide prophylaxis, fluoride treatments, sealants, dental hygiene instruction, assessment of a patient's need for further treatment by a dentist and if delegated by the consulting dentist other services provided by law to children, senior citizens and persons with developmental disabilities in a public setting without the supervision and presence of the dentist and without a prior examination of the persons by the dentist

(2) "Collaborative dental hygienist" means a dental hygienist who holds a Collaborative Care Permit I, a Collaborative Care Permit II, or both from the Arkansas State Board of Dental Examiners and who has entered into a collaborative agreement with no more than one (1) consulting dentist regarding provision of services under this subchapter

(3) "Consulting dentist" means a dentist who holds a Collaborative Dental Care Permit from the Arkansas State Board of Dental Examiners and:

(A) If engaged in the private practice of dentistry, has entered into a collaborative agreement with no more than three (3) collaborative dental hygienists regarding the provision of services under this subchapter; or

(B) Is employed by the Arkansas Department of Health

(4) "Public settings" means:

(A) Adult long-term care facilities;

(B) Charitable health clinics that provide free or reduced-fee services to low-income patients;

(C) County incarceration facilities;

(D) Facilities that primarily serve developmentally disabled persons;

(E) Head Start programs;

(F) Homes of Homebound patients who qualify for in-home medical assistance;

(G) Hospital long-term care units;

(H) Local health units;

(I) Schools;

(J) Community health centers; and

(K) State correctional institutions

SECTION IV. SPECIFIC REQUIREMENTS

1. The Office of Oral Health, Arkansas Department of Health, shall develop and maintain a list of communities and/or rural areas prioritized as to need for dental services and will endeavor to direct collaborative services to these communities and rural areas.
2. A consulting dentist in a collaborative care program with a dental hygienist must consult the Office of Oral Health, Arkansas Department of Health, for permission to practice collaborative care in prioritized areas. Permission must be confirmed annually.
3. Collaborative practice dental hygienists will encourage patients to establish a dental home.
4. The Office of Oral Health will keep appropriate records.

SECTION V. SEVERABILITY

If any provision of these Rules or the application thereof to any person or circumstance is invalid, such invalidity shall not affect other provisions or applications of these Rules and Regulations which can give effect without the invalid provisions or applications, and to this end, the provisions hereto are declared severable.

SECTION VI. REPEAL

All regulations and parts of regulations in conflict herewith are hereby repealed. (Specify if repealing a specific existing rule or part thereof.)

CERTIFICATION

This will certify that the foregoing Rules and Regulations Pertaining to Dental Hygienists Serving Underserved Areas were adopted by the Arkansas Board of Health at a regular session of the Board held in (city, state) on the _____ day of _____, 2013.

Paul K. Halverson, DrPH, FACHE
Secretary, Arkansas State Board of Health
Director, Arkansas Department of Health