

HOUSE BILL No. 5951

September 27, 2012, Introduced by Rep. MacGregor and referred to the Committee on Health Policy.

A bill to amend 1978 PA 368, entitled
"Public health code,"
(MCL 333.1101 to 333.25211) by adding part 216.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

PART 216

MOBILE DENTAL FACILITY

SEC. 21601. (1) AS USED IN THIS PART:

(A) "ACTIVE PATIENT" MEANS A PERSON WHO HAS RECEIVED ANY TYPE
OF DENTAL CARE IN A MOBILE DENTAL FACILITY IN THE PRECEDING 24
MONTHS.

(B) "ASSESSMENT OF A PATIENT" MEANS A PREDIAGNOSTIC SERVICE OF
LIMITED OR FOCUSED INSPECTION THAT IS COMPLETED TO IDENTIFY SIGNS
OF ORAL OR SYSTEMIC DISEASE, MALFORMATION, OR INJURY, AND THE
POTENTIAL NEED FOR REFERRAL OF A PATIENT TO A DENTIST FOR DIAGNOSIS

1 AND TREATMENT PLANNING.

2 (C) "BOARD OF DENTISTRY" MEANS THE BOARD CREATED UNDER PART
3 166.

4 (D) "CLINICAL EVALUATION" MEANS A DIAGNOSTIC SERVICE PROVIDED
5 BY A DENTIST THAT INCLUDES A COMPLETE INTRA- AND EXTRA-ORAL
6 INSPECTION, MAY INCLUDE OTHER MODALITIES OF EXAMINATION TO IDENTIFY
7 SIGNS OF ORAL OR SYSTEMIC DISEASE, MALFORMATION, OR INJURY, AND MAY
8 INCLUDE THE COMPLETION OF PROPER DIAGNOSIS AND TREATMENT PLANNING
9 TO DETERMINE THE TREATMENT NEEDS OF AN INDIVIDUAL PATIENT.

10 (E) "COMPREHENSIVE DENTAL SERVICES" MEANS THE CLINICAL
11 EVALUATION, INCLUDING DIAGNOSIS AND TREATMENT PLANNING, IMAGERY
12 SERVICES, AND PROVIDING INDICATED TREATMENT THAT MAY INCLUDE
13 PREVENTATIVE, RESTORATIVE, AND SURGICAL PROCEDURES THAT ARE
14 CONSIDERED NECESSARY FOR AN INDIVIDUAL PATIENT.

15 (F) "DENTAL HOME" MEANS A NETWORK OF INDIVIDUALIZED CARE BASED
16 ON RISK ASSESSMENT, THAT INCLUDES ORAL HEALTH EDUCATION, DENTAL
17 SCREENINGS, PREVENTATIVE DENTAL SERVICES, DIAGNOSTIC SERVICES,
18 COMPREHENSIVE DENTAL SERVICES, AND EMERGENCY SERVICES.

19 (G) "DENTALLY UNDERSERVED POPULATION" MEANS A POPULATION THAT
20 MEETS 1 OF THE FOLLOWING CRITERIA:

21 (i) FIFTY PERCENT OR MORE OF THE PROSPECTIVE PATIENTS ARE
22 MEDICAID-ELIGIBLE OR ENROLLED IN MEDICAID.

23 (ii) THERE IS AN IDENTIFIABLE SUBPOPULATION OF PROSPECTIVE
24 PATIENTS LOCATED IN AN AREA DESIGNATED AS A DENTAL HEALTH
25 PROFESSION SHORTAGE AREA BY THE DEPARTMENT OF COMMUNITY HEALTH.

26 (iii) TWENTY-FIVE PERCENT OR MORE OF THE PROSPECTIVE PATIENTS
27 ARE ELIGIBLE FOR A FEDERAL FREE OR REDUCED-PRICED LUNCH SUBSIDY.

1 (H) "MEMORANDUM OF AGREEMENT" MEANS A DOCUMENT WRITTEN BETWEEN
2 PARTIES TO COOPERATIVELY WORK TOGETHER ON AN AGREED-UPON PROJECT OR
3 MEET AN AGREED-UPON OBJECTIVE. THE PURPOSE OF A MEMORANDUM OF
4 AGREEMENT IS TO HAVE A WRITTEN UNDERSTANDING OF THE AGREEMENT
5 BETWEEN THE PARTIES. A MEMORANDUM OF AGREEMENT SERVES AS A LEGAL
6 DOCUMENT THAT IS BINDING AND HOLDS THE PARTIES RESPONSIBLE TO THEIR
7 COMMITMENT ALONG WITH DESCRIBING THE TERMS AND DETAILS OF THE
8 COOPERATIVE AGREEMENT. A MEMORANDUM OF AGREEMENT MAY BE USED
9 BETWEEN AGENCIES, THE PUBLIC, THE FEDERAL OR STATE GOVERNMENT,
10 COMMUNITIES, AND INDIVIDUALS.

11 (I) "MOBILE DENTAL FACILITY" MEANS EITHER OF THE FOLLOWING:

12 (i) A SELF-CONTAINED, INTACT FACILITY IN WHICH DENTISTRY OR
13 DENTAL HYGIENE IS PRACTICED THAT MAY BE TRANSPORTED FROM 1 LOCATION
14 TO ANOTHER.

15 (ii) ANY FACILITY WHERE DENTAL SERVICES ARE RENDERED USING
16 PORTABLE EQUIPMENT.

17 (J) "OPERATOR" MEANS EITHER OF THE FOLLOWING:

18 (i) AN INDIVIDUAL LICENSED TO PRACTICE DENTISTRY IN THIS STATE
19 WHO UTILIZES AND HOLDS A PERMIT UNDER THIS PART FOR A MOBILE DENTAL
20 FACILITY AND IS A LICENSED DENTIST, IN GOOD STANDING AND POSSESSING
21 A VALID AND CURRENT LICENSE UNDER THIS ACT.

22 (ii) A MICHIGAN NONPROFIT CORPORATION OR ANY GOVERNMENTAL
23 AGENCY CONTRACTING WITH INDIVIDUALS LICENSED TO PRACTICE DENTISTRY
24 IN THIS STATE OR DENTAL HYGIENISTS LICENSED IN THIS STATE, WHO
25 UTILIZE AND HOLD A PERMIT UNDER THIS PART FOR A MOBILE DENTAL
26 FACILITY.

27 (K) "PREVENTATIVE DENTAL SERVICES" MEANS DENTAL SERVICES THAT

1 INCLUDE, BUT ARE NOT LIMITED TO, SCREENING OF A PATIENT, ASSESSMENT
2 OF A PATIENT, PROPHYLAXIS, FLUORIDE TREATMENTS, AND APPLICATION OF
3 SEALANTS. IMAGERY STUDIES ARE NOT PREVENTATIVE DENTAL SERVICES.

4 (1) "SCREENING OF A PATIENT" MEANS A PREDIAGNOSTIC SERVICE TO
5 DETERMINE A PATIENT'S NEED TO BE SEEN BY A DENTIST FOR DIAGNOSIS.
6 SCREENING OF A PATIENT INCLUDES A STATE- OR FEDERALLY MANDATED
7 SCREENING.

8 (2) IN ADDITION, ARTICLE 1 CONTAINS GENERAL DEFINITIONS AND
9 PRINCIPLES OF CONSTRUCTION APPLICABLE TO ALL ARTICLES IN THIS CODE.

10 SEC. 21603. (1) EVERY MOBILE DENTAL FACILITY MUST OBTAIN A
11 PERMIT UNDER THIS PART.

12 (2) EVERY MOBILE DENTAL FACILITY MUST HAVE AN OPERATOR IN
13 CHARGE AT ALL TIMES.

14 (3) AN OWNER OF A MOBILE DENTAL FACILITY OR AN OWNER OF AN
15 ENTITY PROVIDING CONTRACTUAL MANAGEMENT SERVICES TO AN OPERATOR IS
16 SUBJECT TO THE REQUIREMENTS OF THIS PART.

17 (4) AN OPERATOR MAY CONTRACT OR EMPLOY OTHER DENTISTS, DENTAL
18 HYGIENISTS, OR DENTAL ASSISTANTS TO WORK IN A MOBILE DENTAL
19 FACILITY.

20 (5) ONE OPERATOR MAY HOLD PERMITS FOR MORE THAN 1 MOBILE
21 DENTAL FACILITY.

22 SEC. 21605. (1) AN INDIVIDUAL OR ENTITY SEEKING A PERMIT TO
23 OPERATE A MOBILE DENTAL FACILITY SHALL SUBMIT AN APPLICATION ON A
24 FORM PROVIDED BY THE DEPARTMENT OF LICENSING AND REGULATORY
25 AFFAIRS.

26 (2) AT THE TIME OF APPLICATION, THE INDIVIDUAL OR ENTITY
27 SEEKING A PERMIT SHALL PAY A REGISTRATION FEE TO THE DEPARTMENT OF

1 LICENSING AND REGULATORY AFFAIRS IN AN AMOUNT DETERMINED BY THE
2 DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS.

3 (3) A PERMIT IS VALID FOR 2 YEARS AND MAY BE RENEWED NOT LATER
4 THAN THE LAST DAY OF THE MONTH IN WHICH THE PERMIT WAS ISSUED UPON
5 SUBMISSION OF PROOF TO THE DEPARTMENT OF LICENSING AND REGULATORY
6 AFFAIRS OF COMPLIANCE WITH THE REQUIREMENTS OF THIS PART. PERMITS
7 NOT RENEWED ON TIME ARE SUBJECT TO A LATE FEE AS PRESCRIBED BY THE
8 DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS.

9 (4) A PERMIT SHALL NOT BE ISSUED UNLESS THE APPLYING
10 INDIVIDUAL OR ENTITY COMPLIES WITH ALL OF THE REQUIREMENTS OF THIS
11 PART.

12 (5) IF OWNERSHIP OF THE MOBILE DENTAL FACILITY CHANGES, THE
13 PERMIT IS RENDERED INVALID AND A NEW PERMIT APPLICATION MUST BE
14 SUBMITTED WITHIN 30 DAYS AFTER THE TRANSFER OF OWNERSHIP.

15 SEC. 21607. (1) AN OPERATOR SHALL PROVIDE AS PART OF THE
16 APPLICATION FOR A PERMIT, AND AFTER AN APPLICATION HAS BEEN
17 SUBMITTED, WITHIN 10 DAYS AFTER A REQUEST FROM THE DEPARTMENT OF
18 LICENSING AND REGULATORY AFFAIRS, ALL OF THE FOLLOWING INFORMATION,
19 AS APPLICABLE:

20 (A) A LIST OF EACH DENTIST, DENTAL HYGIENIST, AND DENTAL
21 ASSISTANT WHO WILL BE PROVIDING CARE AT OR WITHIN THE MOBILE DENTAL
22 FACILITY, PROVIDING, AT A MINIMUM, EACH INDIVIDUAL'S NAME, ADDRESS,
23 TELEPHONE NUMBER, AND STATE OCCUPATIONAL LICENSE NUMBER.

24 (B) A WRITTEN PLAN AND PROCEDURE FOR PROVIDING EMERGENCY
25 FOLLOW-UP CARE TO ALL PATIENTS TREATED AT THE MOBILE DENTAL
26 FACILITY.

27 (C) A SIGNED MEMORANDUM OF AGREEMENT BETWEEN THE OPERATOR AND

1 AT LEAST 1 DENTIST LOCATED WITHIN A 100-MILE RADIUS IN THE UPPER
2 PENINSULA OR A 50-MILE RADIUS IN THE LOWER PENINSULA OF ANY
3 LOCATION WHERE THE OPERATOR PROVIDES SERVICE TO A PATIENT, THAT
4 STATES THE CONTRACTING DENTIST WILL ACCEPT PATIENTS TREATED AT THE
5 MOBILE DENTAL FACILITY FOR ANY FOLLOW-UP DENTAL SERVICES, IF THE
6 OPERATOR DOES NOT PROVIDE FOR FOLLOW-UP SERVICES AT A PERMANENT
7 LOCATION LOCATED WITHIN A 100-MILE RADIUS IN THE UPPER PENINSULA OR
8 A 50-MILE RADIUS IN THE LOWER PENINSULA OF WHERE THE OPERATOR
9 PROVIDED SERVICE TO THE PATIENT.

10 (D) TO THE EXTENT THE OPERATOR ONLY PROVIDES PREVENTATIVE
11 DENTAL SERVICES, A SIGNED MEMORANDUM OF AGREEMENT FOR REFERRAL FOR
12 COMPREHENSIVE DENTAL SERVICES BETWEEN THE OPERATOR AND A DENTIST
13 LOCATED WITHIN A 100-MILE RADIUS IN THE UPPER PENINSULA OR A 50-
14 MILE RADIUS IN THE LOWER PENINSULA OF THE LOCATION WHERE THE
15 OPERATOR PROVIDES SERVICES TO A PATIENT.

16 (E) A WRITTEN PLAN THAT SHOWS COMPLIANCE WITH THE GUIDELINES
17 ESTABLISHED BY THE DEPARTMENT OF COMMUNITY HEALTH AND MICHIGAN
18 DENTAL ASSOCIATION FOR SCHOOL-BASED ORAL HEALTH PROGRAMS.

19 (F) A COPY OF THE DRIVER LICENSE AND OFFICIAL MOTOR VEHICLE
20 DRIVING RECORD FROM THE SECRETARY OF STATE OF EVERY PERSON THAT
21 WILL BE DRIVING OR TRANSPORTING THE MOBILE DENTAL FACILITY.

22 (G) PROOF OF GENERAL LIABILITY INSURANCE COVERING THE MOBILE
23 DENTAL FACILITY BY A LICENSED INSURANCE CARRIER, AUTHORIZED TO DO
24 BUSINESS IN THIS STATE.

25 (2) AN OPERATOR SHALL MEET ALL OF THE FOLLOWING REQUIREMENTS:

26 (A) COMPLY WITH ALL APPLICABLE FEDERAL, STATE, AND LOCAL LAWS,
27 REGULATIONS, AND ORDINANCES, INCLUDING, BUT NOT LIMITED TO, THOSE

1 CONCERNING RADIOGRAPHIC EQUIPMENT, FLAMMABILITY, SANITATION,
2 ZONING, AND CONSTRUCTION STANDARDS, INCLUDING STANDARDS RELATING TO
3 REQUIRED ACCESS FOR PERSONS WITH DISABILITIES.

4 (B) MAINTAIN A CONSTANTLY AVAILABLE COMMUNICATION DEVICE FOR
5 MAKING AND RECEIVING TELEPHONE CALLS AND SUMMONING EMERGENCY
6 SERVICES AT THE MOBILE DENTAL FACILITY.

7 (C) HAVE IMMEDIATELY AVAILABLE, UPON REQUEST, A COPY OF THE
8 LICENSE OF EACH DENTIST, DENTAL HYGIENIST, OR DENTAL ASSISTANT
9 WORKING WITHIN THE MOBILE DENTAL FACILITY.

10 (D) HAVE IMMEDIATELY AVAILABLE, UPON REQUEST, A COPY OF THE
11 PERMIT REQUIRED UNDER THIS PART IN THE MOBILE DENTAL FACILITY.

12 (3) A MOBILE DENTAL FACILITY SHALL COMPLY WITH ALL FEDERAL,
13 STATE, AND LOCAL LAWS, REGULATIONS, AND ORDINANCES APPLICABLE TO
14 PROVIDING PREVENTATIVE DENTAL SERVICES OR COMPREHENSIVE DENTAL
15 SERVICES AT THE MOBILE DENTAL FACILITY, INCLUDING, BUT NOT LIMITED
16 TO, THOSE CONCERNING THE OPERATION OF SANITATION, INFECTIOUS WASTE
17 MANAGEMENT AND DISPOSAL, OCCUPATIONAL SAFETY, DISEASE PREVENTION,
18 AND ADMINISTRATIVE CODE RULES PERTAINING TO THE PRACTICE OF
19 DENTISTRY.

20 (4) A MOBILE DENTAL FACILITY SHALL HAVE READY ACCESS TO ALL OF
21 THE FOLLOWING FUNCTIONAL EQUIPMENT:

22 (A) INSTRUMENT STERILIZATION SYSTEM.

23 (B) POTABLE HOT AND COLD WATER, HAND SANITIZER, OR BOTH.

24 (C) TOILET FACILITIES.

25 (D) A RAMP OR LIFT.

26 (E) SMOKE AND CARBON MONOXIDE DETECTORS, AS APPLICABLE.

27 (F) RADIOGRAPHIC EQUIPMENT PROPERLY REGISTERED AND INSPECTED

1 BY THE STATE.

2 (G) COMMUNICATION DEVICES CONSTANTLY AVAILABLE FOR MAKING AND
3 RECEIVING TELEPHONE CALLS AND SUMMONING EMERGENCY SERVICES.

4 (5) A MOBILE DENTAL FACILITY SHALL HAVE READY ACCESS TO THE
5 FOLLOWING DENTAL EQUIPMENT:

6 (A) PROPER LIGHTING.

7 (B) PORTABLE SUCTION.

8 (C) HAND PIECES.

9 (D) DENTAL INSTRUMENTS.

10 (E) SUPPLIES.

11 (6) A DENTIST LICENSED UNDER THIS ACT SHALL BE PRESENT IN A
12 MOBILE DENTAL FACILITY AT ANY TIME COMPREHENSIVE DENTAL SERVICES
13 ARE BEING PERFORMED ON A PATIENT.

14 SEC. 21609. (1) THE OPERATOR OR HIS OR HER DESIGNEE SHALL
15 ESTABLISH AND PROVIDE A WRITTEN TREATMENT PLAN TO ALL PATIENTS
16 RECEIVING DENTAL SERVICES AT A MOBILE DENTAL FACILITY.

17 (2) THE WRITTEN TREATMENT PLAN REQUIRED UNDER SUBSECTION (1)
18 SHALL ADDRESS PROVIDING COMPREHENSIVE DENTAL SERVICES EITHER BY THE
19 MOBILE DENTAL FACILITY OR THROUGH AN AFFILIATED DENTIST OR DENTAL
20 OFFICE PROVIDING THOSE SERVICES UNDER A MEMORANDUM OF AGREEMENT
21 WITH THE MOBILE DENTAL FACILITY.

22 (3) IF THE WRITTEN TREATMENT PLAN REQUIRED UNDER SUBSECTION
23 (1) CANNOT BE COMPLETED DURING THE PATIENT'S INITIAL VISIT TO THE
24 MOBILE DENTAL FACILITY, THE OPERATOR OR HIS OR HER DESIGNEE SHALL
25 MAKE A REASONABLE ATTEMPT TO SCHEDULE ADDITIONAL APPOINTMENTS TO
26 COMPLETE DENTAL SERVICES EITHER AT THE MOBILE DENTAL FACILITY OR
27 WITH AN AFFILIATED DENTIST OR DENTAL OFFICE PROVIDING THOSE DENTAL

SERVICES UNDER A MEMORANDUM OF AGREEMENT WITH THE MOBILE DENTAL FACILITY, AT INTERVALS NOT TO EXCEED 90 DAYS, UNTIL THE TREATMENT PLAN IS COMPLETED OR THE PATIENT CEASES TREATMENT. IF THE OPERATOR OR HIS OR HER DESIGNEE IS UNABLE TO MAKE ARRANGEMENTS FOR CONTINUED TREATMENT, WRITTEN DOCUMENTATION OF THE ATTEMPTS MUST BE PART OF THE PATIENT RECORD AND BE AVAILABLE UPON REQUEST. A COPY OF THIS DOCUMENTATION MUST BE SENT TO THE PATIENT. FAILURE OF THE OPERATOR OR HIS OR HER DESIGNEE TO COMPLY WITH THE PROVISIONS OF THIS SUBSECTION SHALL BE CONSIDERED UNPROFESSIONAL CONDUCT BY PATIENT ABANDONMENT AND IS SUBJECT TO DISCIPLINARY ACTION BY THE BOARD OF DENTISTRY.

(4) THE OPERATOR SHALL OBTAIN THE PATIENT'S WRITTEN CONSENT BEFORE PROVIDING ANY DENTAL SERVICES TO A PATIENT AT A MOBILE DENTAL FACILITY.

(5) A PARENT OR GUARDIAN MUST AUTHORIZE PROVIDING DENTAL SERVICES TO A MINOR CHILD OR INCAPACITATED PERSON AT A MOBILE DENTAL FACILITY.

(6) THE WRITTEN CONSENT FORM REQUIRED UNDER SUBSECTION (4) SHALL INCLUDE, AT A MINIMUM, ALL OF THE FOLLOWING:

(A) THE NAME OF THE MOBILE DENTAL FACILITY PROVIDING DENTAL SERVICES.

(B) THE PERMANENT ADDRESS OF THE MOBILE DENTAL FACILITY.

(C) THE TELEPHONE NUMBER THAT A PATIENT MAY CALL 24 HOURS A DAY FOR EMERGENCY CALLS.

(D) A LIST OF THE SERVICES TO BE PROVIDED.

(E) A STATEMENT INDICATING THAT THE PATIENT, PARENT, OR GUARDIAN UNDERSTANDS TREATMENT MAY BE PROVIDED AT THE PATIENT'S

1 DENTAL HOME RATHER THAN AT A MOBILE DENTAL FACILITY.

2 (7) IF THE PATIENT IS A MINOR OR INCAPACITATED PERSON, THE
3 WRITTEN CONSENT REQUIRED UNDER SUBSECTION (4) MUST ALSO INCLUDE
4 BOTH OF THE FOLLOWING:

5 (A) IF THE MINOR OR INCAPACITATED PERSON HAS HAD DENTAL
6 SERVICES IN THE PAST 12 MONTHS, THE NAME AND ADDRESS OF THE DENTIST
7 OR DENTAL OFFICE WHERE THE DENTAL SERVICES WERE PROVIDED.

8 (B) A STATEMENT INDICATING THAT THE MINOR OR INCAPACITATED
9 PERSON MAY HAVE ANY OR ALL DENTAL TREATMENT AT THE DENTAL HOME AND
10 THAT DUPLICATION OF TREATMENT OF THE MINOR OR INCAPACITATED PERSON
11 AT A MOBILE DENTAL FACILITY MAY IMPACT BENEFITS THAT HE OR SHE
12 RECEIVES FROM PRIVATE INSURANCE, A STATE OR FEDERAL PROGRAM, OR
13 OTHER THIRD-PARTY PROVIDER OF DENTAL BENEFITS.

14 (8) EACH PERSON RECEIVING DENTAL SERVICES AT A MOBILE DENTAL
15 FACILITY SHALL RECEIVE ALL OF THE FOLLOWING PRINTED INFORMATION:

16 (A) THE NAME OF THE DENTIST, DENTAL HYGIENIST, OR DENTAL
17 ASSISTANT WHO PROVIDED THE DENTAL SERVICES TO THE PATIENT.

18 (B) THE TELEPHONE NUMBER OR EMERGENCY CONTACT NUMBER TO REACH
19 THE MOBILE DENTAL FACILITY OR OPERATOR, OR BOTH, IN CASE OF
20 EMERGENCY.

21 (C) A LIST OF THE TREATMENT RENDERED, INCLUDING DENTAL
22 PROCEDURE CODE, FEE, AND TOOTH NUMBERS.

23 (D) A DESCRIPTION OF ANY FURTHER TREATMENT THAT IS ADVISABLE
24 OR THAT HAS BEEN SCHEDULED.

25 (E) A REFERRAL TO A SPECIALIST OR OTHER DENTIST IF THE MOBILE
26 DENTAL FACILITY IS UNABLE TO PROVIDE THE NECESSARY COMPREHENSIVE
27 DENTAL SERVICES.

1 (F) A COPY OF THE CONSENT FORM REQUIRED UNDER THIS SECTION FOR
2 ADDITIONAL TREATMENT.

3 (9) AN OPERATION MAY OPERATE AT AUTHORIZED FACILITIES SERVING
4 DENTALLY UNDERSERVED POPULATIONS.

5 (10) AN OPERATOR WHO FAILS TO COMPLY WITH APPLICABLE FEDERAL,
6 STATE, OR LOCAL LAWS AND RULES GOVERNING THE PRACTICE OF DENTISTRY,
7 DENTAL HYGIENE, OR ANY OF THE REQUIREMENTS OF THIS ARTICLE IS
8 SUBJECT TO DISCIPLINARY ACTION FOR UNETHICAL OR UNPROFESSIONAL
9 CONDUCT AND MAY BE SUBJECT TO DISCIPLINARY ACTION BY THE DEPARTMENT
10 OF LICENSING AND REGULATORY AFFAIRS OR BOARD OF DENTISTRY, AS
11 APPLICABLE.

12 SEC. 21611. (1) NOT LATER THAN 1 YEAR AFTER THE APPLICATION
13 APPROVAL DATE UNDER THIS PART, THE OPERATOR SHALL SUBMIT AN ANNUAL
14 REPORT OF THE ACTIVITIES OF THE MOBILE DENTAL FACILITY TO THE
15 DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS, DEPARTMENT OF
16 COMMUNITY HEALTH, AND THE BOARD OF DENTISTRY.

17 (2) THE ANNUAL REPORT REQUIRED UNDER SUBSECTION (1) SHALL
18 INCLUDE ALL OF THE FOLLOWING INFORMATION:

19 (A) A LIST OF ALL LOCATIONS, INCLUDING STREET ADDRESS, CITY,
20 AND STATE, WHERE ANY LEVEL OF DENTAL SERVICE WAS PROVIDED.

21 (B) THE DATES WHEN DENTAL SERVICES WERE PROVIDED.

22 (C) THE TOTAL NUMBER OF PATIENTS TREATED AT EACH LOCATION
23 DURING THE CALENDAR YEAR.

24 (D) THE TYPES OF DENTAL SERVICES PROVIDED, REPORTED IN A
25 MANNER CONSISTENT WITH CENTER FOR MEDICARE AND MEDICAID SERVICES
26 (CMS) FORM 416, USING APPROPRIATE DIAGNOSTIC, PREVENTATIVE, AND
27 RESTORATIVE CODING FOR EACH DENTIST, DENTAL HYGIENIST, OR DENTAL

1 ASSISTANT PROVIDING DENTAL SERVICES.

2 (E) A LIST OF THE CHANGES IN THE DENTIST, DENTAL HYGIENIST, OR
3 DENTAL ASSISTANT PROVIDING DENTAL SERVICES AT THE MOBILE DENTAL
4 FACILITY.

5 SEC. 21613. (1) THE OPERATOR, OR HIS OR HER DESIGNEE, SHALL
6 NOTIFY THE DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS AND THE
7 BOARD OF DENTISTRY NOT LATER THAN 30 DAYS AFTER 1 OR MORE OF THE
8 FOLLOWING OCCURRENCES:

9 (A) A CHANGE IN OWNERSHIP OF THE MOBILE DENTAL FACILITY.

10 (B) A CHANGE IN THE MEMORANDUM OF AGREEMENT REQUIRED UNDER
11 SECTION 21607.

12 (C) A CHANGE IN THE ADDRESS OR TELEPHONE NUMBER OF THE MOBILE
13 DENTAL FACILITY.

14 (D) CESSATION OF OPERATION OF THE MOBILE DENTAL FACILITY.

15 (2) UPON CESSATION OF OPERATION OF A MOBILE DENTAL FACILITY,
16 THE OPERATOR SHALL DO ALL OF THE FOLLOWING:

17 (A) PROVIDE WRITTEN NOTICE TO ALL TREATMENT VENUES AND, UPON
18 REQUEST, PROVIDE EVIDENCE OF THAT WRITTEN NOTICE TO THE BOARD OF
19 DENTISTRY.

20 (B) AT THE REQUEST OF AN ACTIVE PATIENT OR THE ACTIVE
21 PATIENT'S PARENT OR GUARDIAN, TRANSFER THAT ACTIVE PATIENT'S DENTAL
22 RECORDS TO ANOTHER DENTIST OR TO THE ACTIVE PATIENT, FOR A PERIOD
23 OF NOT LESS 180 DAYS FOLLOWING THE CESSATION OF OPERATIONS OF THE
24 MOBILE DENTAL FACILITY.

25 (C) PROVIDE WRITTEN NOTICE TO ACTIVE PATIENTS OR THE ACTIVE
26 PATIENTS' PARENTS OR GUARDIANS STATING WHERE RECORDS ARE STORED AND
27 MAY BE RETRIEVED.

1 SEC. 21615. THE FOLLOWING ENTITIES OR ORGANIZATIONS ARE EXEMPT
2 FROM THE REQUIREMENTS OF THIS PART:

3 (A) A FEDERAL, STATE, OR LOCAL GOVERNMENT AGENCY PERFORMING OR
4 FACILITATING DENTAL SERVICES.

5 (B) ANY OTHER PUBLIC HEALTH AGENCY CREATED OR APPOINTED UNDER
6 SECTION 2413, 2415, OR 2421 OR FEDERALLY QUALIFIED HEALTH CENTER
7 PERFORMING DENTAL SERVICES.

8 (C) ANY STUDENT, FACULTY, OR VOLUNTEER AFFILIATED WITH A
9 DENTAL SCHOOL OR DENTAL HYGIENE SCHOOL ACCREDITED BY THE COMMISSION
10 ON DENTAL ACCREDITATION OR SIMILAR ACCREDITING BODY.