

MARYLAND REGISTER

Proposed Action on Regulations

Transmittal Sheet PROPOSED OR REPROPOSED Actions on Regulations	Date Filed with AELR Committee	TO BE COMPLETED BY DSD
	03/26/2015	Date Filed with Division of State Documents
		Document Number
		Date of Publication in MD Register

1. Desired date of publication in Maryland Register: 5/1/2015

2. COMAR Codification

Title Subtitle Chapter Regulation

10 44 01 02

3. Name of Promulgating Authority

Department of Health and Mental Hygiene

4. Name of Regulations Coordinator

Michele Phinney

Telephone Number

410-767-5623

Mailing Address

201 W. Preston Street

City State Zip Code

Baltimore MD 21201

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5. Name of Person to Call About this Document

Murray Sherman

Telephone No.

410-402-8530

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murray.sherman@maryland.gov

6. Check applicable items:

New Regulations

Amendments to Existing Regulations

Date when existing text was downloaded from COMAR online: December 19, 2014.

Repeal of Existing Regulations

Recodification

Incorporation by Reference of Documents Requiring DSD Approval

Reproposal of Substantively Different Text:

: Md. R
(vol.) (issue) (page nos) (date)

Under Maryland Register docket no.: --P.

7. Is there emergency text which is identical to this proposal:

Yes No

8. Incorporation by Reference

Check if applicable: Incorporation by Reference (IBR) approval form(s) attached and 18 copies of documents proposed for incorporation submitted to DSD. (Submit 18 paper copies of IBR document to DSD and one copy to AELR.)

9. Public Body - Open Meeting

OPTIONAL - If promulgating authority is a public body, check to include a sentence in the Notice of Proposed Action that proposed action was considered at an open meeting held pursuant to State Government Article, §10-506(c), Annotated Code of Maryland.

OPTIONAL - If promulgating authority is a public body, check to include a paragraph that final action will be considered at an open meeting.

10. Children's Environmental Health and Protection

Check if the system should send a copy of the proposal to the Children's Environmental Health and Protection Advisory Council.

11. Certificate of Authorized Officer

I certify that the attached document is in compliance with the Administrative Procedure Act. I also certify that the attached text has been approved for legality by Grant Gerber, Assistant Attorney General, (telephone #410-767-5469) on March 20, 2015. A written copy of the approval is on file at this agency.

Name of Authorized Officer

Van T. Mitchell

Title

Secretary

Telephone No.

410-767-6500

Date

March 26, 2015

Title 10
DEPARTMENT OF HEALTH AND MENTAL HYGIENE

Subtitle 44 BOARD OF DENTAL EXAMINERS

10.44.01 Dental Assistants

Authority: Health Occupations Article, §4-205, Annotated Code of Maryland

Notice of Proposed Action

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The Secretary of Health and Mental Hygiene proposes to amend Regulation .02 under COMAR 10.44.01 Dental Assistants.

This action was considered by the Board of Dental Examiners at a public hearing held on February 4, 2015 notice of which was given under the Notice of Public Meetings link on the Board's website pursuant to State Government Article, § 10-506(c), Annotated Code of Maryland.

Statement of Purpose

The purpose of this action is to reduce the number of hours of a Board-approved course in infection control that an uncertified dental assistant must complete before participating in a dental sealant program. The Board has found that the subject is adequately covered in 2-hour Board-approved courses and, as a result of the 6-hour requirement, dental assistants are taking what amounts to the same course material multiple times.

Comparison to Federal Standards

There is no corresponding federal standard to this proposed action.

Estimate of Economic Impact

I. Summary of Economic Impact.

The savings to the dental assistants will be minimal.

II. Types of Economic Impact.

Revenue (R+/R-)

Expenditure (E+/E-) Magnitude

A. On issuing agency:	NONE
B. On other State agencies:	NONE
C. On local governments:	NONE

Benefit (+) Cost (-)	Magnitude
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- | | | |
|---|------|---------------|
| D. On regulated industries or trade groups: | (+) | Indeterminate |
| E. On other industries or trade groups: | NONE | |
| F. Direct and indirect effects on public: | NONE | |

III. Assumptions. (Identified by Impact Letter and Number from Section II.)

D. There may some financial savings if the dental assistant has paid for the courses but the amount is indeterminate.

Economic Impact on Small Businesses

The proposed action has minimal or no economic impact on small businesses.

Impact on Individuals with Disabilities

The proposed action has no impact on individuals with disabilities.

Opportunity for Public Comment

Comments may be sent to Michele Phinney, Director, Office of Regulation and Policy Coordination, Department of Health and Mental Hygiene, 201 West Preston Street, Room 512, Baltimore, MD 21201, or call 410-767-6499; TTY:800-735-2258, or email to dhmh.regs@maryland.gov, or fax to 410-767-6483. Comments will be accepted through June 1, 2015. A public hearing has not been scheduled.

Economic Impact Statement Part C

- A. Fiscal Year in which regulations will become effective: FY 2015
- B. Does the budget for the fiscal year in which regulations become effective contain funds to implement the regulations?
- C. If 'yes', state whether general, special (exact name), or federal funds will be used:
- D. If 'no', identify the source(s) of funds necessary for implementation of these regulations:
- E. If these regulations have no economic impact under Part A, indicate reason briefly:

F. If these regulations have minimal or no economic impact on small businesses under Part B, indicate the reason and attach small business worksheet.

Reducing the number of hours of a required course that a dental assistant involved in a dental sealant program must complete will have no economic impact on small businesses.

G. Small Business Worksheet:

Attached Document:

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10.44.01.02 (December 19, 2014)

.02 Exceptions.

A.—D. (text unchanged)

E. In addition to the requirements in §§B and C of this regulation, a dental assistant, who provides dental assistant duties under this regulation and who is not certified by the Dental Assisting National Board as qualified in general duties or qualified in orthodontics, shall successfully complete a Board-approved course of at least [6] 2 hours in infection control with OSHA protocol.

F.—J. (text unchanged)

Van T. Mitchell

Secretary of Health and Mental Hygiene