

BOARD OF DENTISTRY
Professional & Vocational Licensing Division
Department of Commerce and Consumer Affairs
State of Hawaii

MINUTES OF MEETING¹

Date: September 16, 2024

Time: 10:00 a.m.

Place: Queen Liliuokalani Room, 1st Floor
King Kalakaua Building
335 Merchant Street
Honolulu, Hawaii 96813

Virtual Videoconference Meeting – Zoom Webinar

<https://dcca-hawaii->

gov.zoom.us/j/84749062987?pwd=Kv02eCaeksUUOF3576HjEdqADmmTiR.1

Members Present: Andrew Tseu, D.D.S., J.D., Chair, Dental Member
Jonathan Lau, D.D.S., Vice-Chair, Dental Member
Katherine Fukushima, R.D.H., Dental Hygiene Member
Paul Guevara, D.M.D, M.D.S., Chair, Dental Member
Steven Pine, D.D.S., Dental Member
Joy Shimabuku, Public Member
Joyce Yamada, Ed.D., R.D.H., Dental Hygiene Member
Craig Yamamoto, D.D.S., Dental Member

Members Excused: Staphe Fujimoto, D.D.S., Dental Member

Staff Present: Sheena Choy, Executive Officer (“EO Choy”)
Bryan Yee, Esq., Deputy Attorney General (“DAG Yee”)
Marc Yoshimura, Secretary
Dawn Lee, Division Secretary
Johnny Li, Tech Support

In-Person Guests: Charles Kamimura

Zoom Webinar

Guests: Danny Cup Choy
Kim Nguyen, Hawaii Dental Association
Gerraine Hignite
Catrice Opichka, CRDTS
Alan Walker
Joseph Ostheller
Richael Cobler, CRDTS

¹ Comments from the public were solicited on each agenda item. If no public comments were given, the solicitation for and lack of public comment are not explicitly stated in these minutes.

Melissa Pavlicek, Hawaii Dental Association

Virtual Meeting
Instructions:

A short video regarding virtual meetings was played for attendees.

The Vice Chair provided information on internet and phone access for today's virtual meeting and announced that today's meeting was being recorded and that the recording will be posted on the Board's web page.

Agenda:

The agenda for this meeting was filed with the Office of the Lieutenant Governor, as required by §92-7(b), Hawaii Revised Statutes ("HRS").

Roll Call:

The Chair welcomed everyone to the meeting and proceeded with a roll call of the Board members. All Board members confirmed that they were present; those on Zoom confirmed they were present and alone.

Call to Order:

There being a quorum present, the Chair called the meeting to order at 10:09 a.m.

Chair's
Announcements:

Welcome of new Board member, Dr. Steven Pine, DDS, Hawaii Island County

The Chair welcomed new Board member, Dr. Steven Pine, DDS and invited Dr. Pine to share a few words of introduction.

Approval of
Minutes:

Approval of the Executive Session Minutes of the May 13, 2024 Meeting and the Open and Executive Session Minutes of the July 15, 2024 Meeting

The Chair stated that approval of the May 13, 2024 Executive Session minutes was deferred at the last meeting. He asked if there was any discussion of, corrections to, or public comments regarding the May 13, 2024 Executive Session minutes.

Seeing no public comments or Board discussion, the Chair asked for a motion to approve the Executive Session minutes of the May 13, 2024 meeting.

Upon a motion by Dr. Guevara, seconded by Dr. Pine, it was voted on and unanimously carried to approve the Executive Session minutes of the May 13, 2024 meeting.

The Chair asked if there was any discussion of, corrections to, or public comments regarding the July 15, 2024 minutes. There were none.

Upon a motion by Ms. Shimabuku, seconded by Ms. Yamada, it was voted on and unanimously carried to approve the Open and Executive Session minutes of the July 15, 2024 meeting.

New Business: **Presentation by the Central Regional Dental Testing Service (“CRDTS”) on the CRDTS CARE special program**

Catrice Opichka, Director of Special Programs, CRDTS was promoted to panelist on Zoom.

The Chair welcomed Ms. Opichka to the meeting and invited her to share the presentation on behalf of CRDTS.

Ms. Opichka stated that CRDTS Care is a custom, hands-on remediation and reeducation program for state dental boards, dental professionals, and dental and dental hygiene students. Participants are either self-referred or are fulfilling a board-mandated requirement for disciplinary remediation.

Some reasons for self-referral include a professional moving to a new state that is requiring re-examination, a retired professional who is now returning to practice in another state, or a professional who has stepped away from practice and is reactivating a lapsed license.

CRDTS CARE will first conduct didactic and clinical pre-assessments of the candidate. CRDTS is partnered with SPEAR Dental Education, EBAS Ethics Testing, and CE Zoom to assess areas including: fraud, boundaries, substance abuse, unprofessional conduct, and professional standards.

Using the pre-assessment results and board recommendations (for board referrals), CRDTS CARE will propose a custom remediation plan with clear learning objectives. The participant will have access to CRDTS’ extensive Learning Library and will be assigned comprehensive coursework. Education is provided by current or past educators with expertise in specific disciplines. Some coursework is in-person and some via Zoom; homework is built in to maximize licensee’s time, typodonts are sent home for more practice, homework is returned to a subject matter expert for grading, and evaluations are done over Zoom sessions.

As a final step in the remediation process, a post-assessment is conducted which includes clinical assessments evaluated by three independent graders. A final report is sent to the participant and board including all test scores, areas of assessment, analysis of objectives met, and proposed next course of action.

The following state dental boards have participated in the CRDTS CARE programs: Missouri, Kansas, Louisiana, Iowa, South Dakota, New Mexico, Georgia, Texas, Illinois, Wisconsin, Nebraska, Colorado, and Wyoming.

The Chair asked if there was any public testimony. There was none.

Dr. Guevara asked how many dentist or dental hygienists have

participated in the CRDTS CARE program.

Ms. Opichka stated that as of today, there are 19 dentists or dental hygienists actively participating in some phase of the program. The program has only been around for a little over a year, so collectively, she estimates there have been several dozen total participants.

Dr. Guevara asked what the success rate has been.

Ms. Opichka stated that almost all the individuals have completed their custom remediation program and CRDTS has communicated to their state boards that they are safe to practice in the area for which they were referred to CRDTS CARE. The timeline for remediation varies depending on the individual case. There has only been one situation to-date where CRDTS was unable to report that the licensee was safe to practice. The state board decided to send that licensee back to CRDTS CARE for a second round of remediation.

The Chair asked for the estimated costs of a CRDTS CARE remediation plan.

Ms. Opichka stated that for dental hygienists, re-education plans cost between \$3,500 to \$5,000 depending on preference for group or private sessions. For dentists, the pre-assessment is about \$4,000; the program itself can range from \$5,000 to \$20,000+ depending on the individual case.

The Chair asked when the CRDTS CARE program was established.

Ms. Opichka stated that the program has been running for about a year and half to two years.

EO Choy asked what the average time for a re-education program is.

Ms. Opichka stated that the timeline varies. If the re-education is in one discipline that is non-clinical, such as ethics, that takes about two months. Any time there is a hands-on component, this extends the timeline; an average would be six months.

EO Choy asked what resources the CRDTS CARE program has for non-clinical cases such as boundary issues or substance abuse.

Ms. Fukushima left the meeting at 10:29 a.m.

Ms. Opichka stated that there are experts on staff who have built, and continue to build, curriculum on such non-clinical topics. If not, CRDTS will refer state boards to other resources.

Richael Cobler, Executive Director, CRDTS was promoted to panelist.

Ms. Cobler stated that, especially for dental hygiene, CRDTS CARE offers group courses at a lower price.

EO Choy asked what the process is for referring an individual to the program.

Ms. Opichka stated that the program is also custom for state boards. Some boards only involve CRDTS after a final order is issued, other boards ask CRDTS CARE to be involved before the issuance of a final order to help design the board order.

The Chair thanked Ms. Opichka and Ms. Cobler for their presentation and both were moved back to “participant” on Zoom.

Board member reports from 2024 Central Regional Dental Testing Service (“CRDTS”) Annual Meeting

The Chair stated that he and Ms. Yamada attended the CRDTS Annual Meeting on behalf of the Board from August 23 to 24, 2024.

Ms. Fukushima rejoined the meeting at 10:36 a.m.

Ms. Yamada is the Board’s CRDTS Steering Committee representative. She reported that a main topic of discussion was on dental and dental hygiene compacts. CRDTS is not supporting either the Council of State Governments (“CSG”) or the American Association of Dental Boards (“AADB”) compacts.

CRDTS Special Programs is also seeing growth, including the CRDTS CARE program that was just presented. Additionally, all dental exam manuals for the 2025 season are available on the CRDTS website, crdts.org, and dental hygiene manuals will be posted by November 2024.

CRDTS is continuing to communicate with the dental boards and associations in states that do not accept the CRDTS exams for dental and/or dental hygiene licensure. While Hawaii does accept the dental hygiene examination, Hawaii does not accept the dental examination. CRDTS believes it is in the State’s best interest to accept all nationally recognized exams. The American Dental Association’s Comprehensive Policy on Dental Licensure urges states to accept clinical examination results from any clinical testing agency when determining clinical competency for initial licensure.

Finally, CRDTS announced in July the pending merger with SRTA. The organization will adopt the CRDTS bylaws and will continue to be directed by a steering committee comprised of current state dental board members.

Dr. Yamamoto left the meeting at 10:39 a.m.

The Chair stated that Ms. Yamada presented a very thorough report of the CRDTS Annual Meeting and he does not have anything further to add.

Report from the Rules Permitted Interaction Group (“PIG”)

EO Choy stated that a “Permitted Interaction Group” or “PIG” is authorized by Hawaii Revised Statutes (“HRS”) §92-2.5(b). PIGs may be formed by State boards to investigate specified issues outside of regularly scheduled board meetings under certain conditions. At this meeting, the Rules PIG will share a report to the Board; public testimony is accepted, but the Board cannot discuss the report until a final, duly noticed Board meeting is scheduled. After the future, third meeting, EO Choy stated that for the public’s information, there will continue to be opportunities throughout the rules revision process for the public to continue to provide comments.

The Rules PIG was formed on January 22, 2024 and was tasked with evaluating the existing Hawaii Administrative Rules (“HAR”) §16-79 and providing recommendations to the Board for rules revisions.

Gerraine Hignite raised her hand on Zoom and was promoted to “panelist.”

The Chair invited Ms. Hignite to share public comments.

Ms. Hignite stated that she is providing comments on behalf of the Hawaii Dental Hygienists’ Association (“HDHA”). Ms. Hignite stated that HDHA would like to be involved in the PIG’s discussions regarding rules revisions since they have a direct effect on the profession.

Ms. Hignite was moved back to “panelist” on Zoom.

Dr. Yamamoto rejoined the meeting at 10:45 a.m.

The Chair shared the report as he also serves as chair of the Rules PIG. He stated that the draft proposed rules revisions have been distributed in the Board member packet, and are also available to the public via the public packet accessible on the Board’s website, under *Board of Dentistry > Meeting Schedule > Board Meeting Packet for September 16, 2024 meeting*: https://cca.hawaii.gov/pvl/boards/dentist/meeting_schedule/.

The Chair shared highlights of the proposed revisions:

- The Rules PIG members are himself (dentist) as Rules PIG chair, Ms. Yamada (dental hygienist), the Vice Chair (dentist), and Ms. Shimabuku (public member);
- Definitions were added, including defining “dental records” and “HIPAA”
- Updates to outdated testing information to incorporate the new

- Integrated Dental Board Examination, which replaced the old administration of the board exams
- Clarified that only DDS and DMD degrees are acceptable for licensure; the Board does not accept any specialty degrees in lieu of these accredited degrees for dentists;
 - Clarified the documentation and requirements for the community service and temporary dentist and dental hygienist licenses;
 - Added allowable duties for dental assistants, including digital and intra-oral scanning and making impressions and diagnostics, and clarified training;
 - Added allowable duties for dental hygienists, including language that mirrors HRS §447-3(f) for general supervision of dental hygienists in public health settings and allowing hygienists to perform dental screenings in school-based oral health programs under general supervision;
 - Definitions were added in the “Anesthesia” subsection;
 - Clarified that renewal facility inspections are required for dentists with the special permit to administer;
 - Numerous revisions to the subsection on “Continuing Education,” including changing credit given for Life Support classes, changing the ethics requirements from 3 credits per year to 6 credits anytime during the licensing biennium, changing acceptable CE course formats, adding requirement that the hands-on portion of Life Support classes be in-person, and adding five new acceptable approved sponsoring organizations;
 - Clarified license renewal requirements generally and for specific license types;
 - Added a new section addressing dental records access and retention

For a complete list of all the proposed rules amendments, interested individuals are directed to the public packet on the Board’s website which has a marked version of the draft proposed amendments. The Chair thanked the Rules PIG members for their time and effort on the proposed revisions.

Discussion and clarification of the Board’s extension of the waiver extension for acceptance of virtual Continuing Education (“CE”) credit for the biennial renewal period of January 1, 2024 to December 31, 2025

EO Choy stated that since 2020, the Board has approved waivers for each licensing biennium to account for undue hardship from the Covid-19 pandemic. Those previous waivers have allowed for 100% of CEs to be completed virtually.

On January 22, 2024, pursuant to HAR §16-79-147(b)(5), the Board voted to grant an extension to its previous blanket waiver to continue to allow acceptance of 100% of CEs completed virtually due to undue hardship from the pandemic. However, the Board changed the waiver language from previous waivers to require that all virtual CEs for the

2024-2025 waiver extension must be conducted in real-time. Additionally, the current waiver does not include the skills-portion of the Basic Life Support (“BLS”), Advanced Cardiac Life Support (“ACLS”), or Pediatric Advanced Life Support (“PALS”) courses, which must be conducted in real-time.

EO Choy stated that the Board has received numerous inquiries from licensees regarding the new requirement that all virtual CEs must be conducted in real-time. Inquiries include requests for clarification as to what type of course formats qualify as “real-time.”

EO Choy stated that she would like the Board to re-visit their decision to include the requirement for 100% of CEs for the 2024-2025 licensure biennium to be completed in “real-time” as there wasn’t significant discussion at the January 22, 2024 meeting of why this requirement is being made for the current waiver. She stated that in looking into the matter further, she would like to bring several considerations to the Board’s attention:

1. While it is the responsibility of every licensee to educate themselves on the CE requirements for each renewal period, it may be confusing for many licensees that there is a significant departure from the CE waivers granted by the Board during the 2020-2021, 2021-2022, 2022-2023, and 2023-2024 licensure bienniums. Additionally, the proposed rules revisions, if passed, would set new requirements for CEs;
2. In researching other state dental board’s CE requirements, it appears that all other states allow at least some of the required CEs to be completed by virtual, asynchronous (e.g. pre-recorded) means. Since this is a commonly accepted practice nationwide, it does not appear that there is a significant public protection concern with allowing some CEs to be completed virtually and not in real-time; and
3. Adding increasingly specific requirements places an administrative strain on Board staff when checking for compliance. Specifically, based on past CE certificates the Board has received and accepted to confirm CEs, CE course providers are very inconsistent about specifying the course format.

EO Choy stated that she is suggesting the Board consider removing the requirement that all CEs be conducted in real-time for the January 1, 2024 to December 31, 2025 renewal waiver.

The Chair asked if there was any public testimony. There was none.

The Chair asked if there was any Board discussion.

Dr. Pine asked why the Board voted to grant an extension to the waiver

accepting all virtual CEs.

The Vice Chair replied that the Board discussed the fact that times have changed since the pandemic; online learning is now a new norm.

Ms. Yamada stated that the quality of the presentations online has improved greatly.

EO Choy stated that the Board's authority to grant a waiver to the CE requirement must be due to "undue hardship." While the Board considered that quality virtual learning is now available, ultimately the decision to grant a waiver was based on determination of continue undue hardship from the pandemic.

Dr. Pine asked for clarification regarding Life Support courses that are being offered in hybrid formats.

EO Choy clarified that the Board's current waiver responds to the change in format by requiring that the hands-on portion of Life Support classes be completed in-person; the other learning sections may be completed virtually.

Dr. Guevara suggested the Board revert back to the language of previous waivers to clear up any potential confusion for this licensing biennium.

Upon a motion by the Vice Chair, seconded by Dr. Pine, it was voted upon and unanimously carried to amend the current CE waiver for the January 1, 2024 to December 31, 2025 licensure period to remove the requirement that all virtual CEs be conducted in real-time (i.e. all CEs may be completed virtually and do not have to be live or in real-time). The Board's waiver still maintains the requirement that the skills-portion of the life support classes (BLS, ACLS, and PALS) must be taken in-person to meet the CE requirement.

Inquiry from Dr. Eunsol Lee regarding clarification of the Board's March 18, 2013 statement on Botox

EO Choy stated that the Board received an email on September 5, 2024 from Dr. Eunsol Lee requesting clarification of the Board's statement on Botox adopted at the Board's March 18, 2013 meeting.

Specifically, Dr. Lee asked:

"1. What is considered the appropriate training? I am planning on taking a TMJ Botox Course with Aesthetic Medical Training Organization. It is an 8 hours ADA certified course. Would taking this course be enough for me to practice on patients?

2. What type of non-esthetic oral conditions are there that may benefit from dermal fillers?"

Ms. Shimabuku read the Board's current position on Botox, adopted on March 18, 2013:

"The use of Botox is within the scope of practice of dentistry as defined in Chapter 448, Hawaii Revised Statutes ("HRS"). Licensed dentists in Hawaii are allowed to utilize Botox specifically for the treatment of TMD/myofacial pain or other conditions affecting the oral cavity and associated structures as specified in §448-1, HRS. Dental practitioners are required to receive appropriate training and acquire the necessary knowledge, skills, and expertise to provide this service in a safe and efficacious manner. Additionally, they should confer with their dental insurance carrier to determine if malpractice coverage for this procedure exists.

The use and placement of dermal fillers by licensed dentists in Hawaii is also within the scope of practice of dentistry. Dermal fillers may be utilized to treat conditions within the oral cavity. Licensed dentists should confer with their dental insurance carrier to determine if malpractice coverage for this procedure exists.

The use of Botox and placement of dermal fillers must be completed by the licensed dentist possessing the appropriate training, knowledge, and skill set. It cannot be delegated to a dental hygienist or dental assistant."

The Chair asked if there was any public testimony. There was none.

The Chair asked if there was any Board discussion. He specifically requested Dr. Guevara to share information as Dr. Guevara was on the investigative committee that researched this issue when it came before the Board in 2011.

Dr. Guevara stated that the Board addressed this issue because licensees started performing Botox when the procedure first came out, before the Board had any laws, rules, or guidance on its use. The PIG ultimately concluded that the education or training had to be CODA-accredited or from the list of the Board's approved sponsoring organizations. The Board does not recommend specific courses. He noted that there was significant discussion around the use of dermal fillers in addressing "dark triangles" from periodontal disease. The Hawaii Medical Board also weighed in and cautioned that while dentists may understand facial anatomy, dental licensees should be careful not to enter into other professions' scope of practice, which is outside the dental scope of practice. The PIG also received significant input from the dental profession and other national organizations around this issue.

EO Choy stated that the term "associated structures" referenced in the Board's current position is taken directly from HRS §448-1 where the scope of practice of dentistry is defined:

§448-1 Dentistry defined; exempted practices. A person practices dentistry, within the meaning of this chapter, who represents oneself as being able to diagnose, treat, operate or prescribe for any disease, pain, injury, deficiency, deformity, or physical condition of the human teeth, alveolar process, gums, or jaw, or who offers or undertakes by any means or methods to diagnose, treat, operate or prescribe for any disease, pain, injury, deficiency, deformity, or physical condition of the same, or to take impressions of the teeth or jaws; or who owns, maintains, or operates an office for the practice of dentistry; or who engages in any of the practices included in the curricula of recognized and approved dental schools or colleges. Dentistry includes that part of health care concerned with the diagnosis, prevention, and treatment of diseases of the teeth, oral cavity, and associated structures including the restoration of defective or missing teeth. The fact that a person uses any dental degree, or designation, or any card, device, directory, poster, sign, or other media whereby one represents oneself to be a dentist, shall be prima facie evidence that the person is engaged in the practice of dentistry...

EO Choy stated that, as Dr. Guevara mentioned, the report from the Botox and Dermal Fillers PIG concluded that it is the responsibility of the licensee to identify the appropriate training and program, and to consult with their dental insurance regarding what qualifies as “associated structures.” EO Choy further clarified that the Board’s current position does not consider cosmetic procedures to fall within a dentist’s scope of practice.

Upon a motion by Dr. Guevara, seconded by Dr. Pine, it was voted upon and unanimously carried to maintain the Board’s statement on Botox and dermal fillers as adopted at the Board’s March 18, 2013 meeting, with the addition that appropriate training should be by approved sponsoring organizations as listed in HAR §16-115-142.

Please see the board’s relevant laws and rules for more details. Please be advised that in accordance with Hawaii Administrative Rules (HAR) section 16-201-90, the above interpretation is for informational and explanatory purposes only. It is not an official opinion or decision, and therefore is not to be viewed as binding on the board, or the Department of Commerce and Consumer Affairs.

Applications:

Ratification Lists

After reading the license numbers on the ratification lists, the Chair asked if there was any public testimony.

DAG Yee left the meeting at 11:28 a.m.

Seeing none, the Chair asked for a motion to approve the ratification lists.

Upon a motion by Ms. Shimabuku, seconded by the Vice Chair, it was

voted on and unanimously carried to approve the following ratification lists:

1) Approved Dentists

DT-3181 AKIOKA, EDWARD DAVID
DT-3182 JOW, HARRISON WALLACE
DT-3183 WILLIS-ORLANDO, ELLIOT REED
DT-3184 TUPUA, KRISTIANA
DT-3185 RICE, REGINALD CHRISTIAN
DT-3186 JOSE DEL CASTILLO, NIKKI
DT-3187 MAHDAVI, NICOLE NEGIN
DT-3188 KAN, SUZANNE
DT-3189 SAKAI, NICOLE C
DT-3190 LEE, KAITLIN ELIZABETH
DT-3191 SANO, REID KEJI
DT-3192 GERMANO, CIARA MARIE
DT-3193 RISNER, JONATHAN RISNER
DT-3194 DE GUZMAN, JEFFREY
DT-3195 UTLEY, AZURE LAARLETTA
DT-3196 PALANI, PARTHIBAN
DT-3197 DEVENS, KARLEY RAISA KIMI

2) Approved Dental Hygienists

DH-2479 RAYOAN, CYNDIA M.L.K.
DH-2480 CAYCE, ANGELA
DH-2481 NGUYEN, TAYLOR M
DH-2482 LAU, VIVIAN
DH-2483 WATANABE, JACY T.N.
DH-2484 CATBAGAN, AUDREE M
DH-2485 IRMO, YASMINA ROSINA
DH-2486 LOPEZ, AMBER C.R.
DH-2487 NAKAMA, AUBREY C.M.
DH-2488 LEUNG, MICHELLE H.W.
DH-2489 NAPOLEON, JANELLE KIANA AGCAOILI
DH-2490 CHAN, JESSICA
DH-2491 CADIZ, MYREM JELISHA ALOP
DH-2492 BINUYA, DENISE MARIE
DH-2493 TORRICER, JODI HARUKO
DH-2494 IYESUSAB, SOLOMON KAHSAY
DH-2495 MESA-KELIIHOOMALU, CHRISTINE JOY
DH-2496 BAGORIO, SARA BETH
DH-2497 DUAN, TINA YINGLIN
DH-2498 MENG, MAXINE
DH-2499 GOUDEAU, THEKLA MELI

3) Approved Temporary Dentists

DTT-381 YOUKHEANG, SOPHIE
DTT-382 CLOKIE, KAYLE J.E.

DTT-383 GIRON, ANTHONY
DTT-384 GRIMARD LEANDRE

- 4) Approved Dental Hygienist Certification in the Administration of Intra-Oral Block Anesthesia
DH-2479 RAYOAN, CYNDIA M.L.K.
DH-2480 CAYCE, ANGELA
DH-2481 NGUYEN, TAYLOR M
DH-2482 LAU, VIVIAN
DH-2483 WATANABE, JACY T.N.
DH-2484 CATBAGAN, AUDREE M
DH-2485 IRMO, YASMINA ROSINA
DH-2486 LOPEZ, AMBER C.R.
DH-2487 NAKAMA, AUBREY C.M.
DH-2488 LEUNG, MICHELLE H.W.
DH-2489 NAPOLEON, JANELLE KIANA AGCAOILI
DH-2490 CHAN, JESSICA
DH-2491 CADIZ, MYREM JELISHA ALOP
DH-2492 BINUYA, DENISE MARIE
DH-2493 TORRICER, JODI HARUKO
DH-2494 IYESUSAB, SOLOMON KAHSAY
DH-2495 MESA-KELIIHOOMALU, CHRISTINE JOY
DH-2497 DUAN, TINA YINGLIN
DH-2498 MENG, MAXINE

- 5) Approved Additional Dentist Permit to Administer Deep Sedation/
General Anesthesia and Moderate Sedation

DT-2889 SAHDEV, ROHIT
DT-2897 SAYAH, AZIN
DT-3128 RETHMAN, MICHAEL JOHN

Applications

At 11:32 a.m., upon a motion by the Vice Chair, seconded by Ms. Yamada, it was voted on and unanimously carried to move into Executive Session in accordance with HRS §92-4 and §92-5(a)(1) and (4) "To consider and evaluate personal information relating to individuals applying for professional or vocational licenses cited in section 26-9 or both;" and "To consult with the Board's attorney on questions and issues pertaining to the Board's powers, duties, privileges, immunities, and liabilities."

DAG Yee rejoined the meeting in Executive Session at 11:35 a.m.

Dr. Yamamoto left the meeting in Executive Session at 12:20 p.m.

At 12:31 p.m., upon a motion by Dr. Guevara, seconded by the Vice Chair, it was voted on and unanimously carried to move out of Executive Session.

The Chair summarized that in Executive Session, the Board consulted with its attorney regarding confidential matters related to the applications for Dr. Joseph Ostheller and Dr. Alan Walker.

Dentist

Joseph Ostheller

The Chair asked if there was public testimony. There was none.

Dr. Guevara made a motion to approve the application for Dr. Ostheller. The motion was seconded by the Vice Chair. However, Ms. Shimabuku indicated she will abstain from the vote. Due to not being able to make the quorum requirements to vote, the matter was deferred.

Alan Walker

The Chair asked if there was public testimony. There was none.

Dr. Guevara made a motion to approve the application for Dr. Walker. The motion was seconded by the Vice Chair. However, Ms. Shimabuku indicated she will abstain from the vote. Due to not being able to make the quorum requirements to vote, the matter was deferred.

Executive Officer's
Report:

Update on the Council of State Government's ("CSG") Dentist and Dental Hygienist Compact

EO Choy reminded the Board that they have been receiving presentations and other information throughout the past year regarding the issue of dental compacts. There are currently two dental compacts being considered nationally – the Council of State Governments ("CSG") Dentist and Dental Hygienist Compact and the American Association of Dental Boards ("AADB") Interstate Dental and Dental Hygiene Licensure Compact.

EO Choy reported that on April 24, 2024, the CSG compact was enacted with the enactment of a seventh participating state. Currently, ten (10) states have enacted CSG legislation: Washington, Colorado, Kansas, Minnesota, Iowa, Wisconsin, Tennessee, Virginia, Ohio, and Maine have joined the CSG Compact.

The AADB Compact has not yet gained the minimum participating states for enactment.

EO Choy stated that the Board has been provided with information on the CSG Compact implementation timeline from the CSG website. Based on the information provided by CSG, the compact will not be fully operational

for an estimated 18-24 months. EO Choy will keep the Board informed of updates.

Announcement of the pending merger of the Central Regional Dental Testing Service (“CRDTS”) and the State Resources for Testing and Assessments (“SRTA”)

EO Choy reported that CRDTS and SRTA issued a press release in July 2024 regarding a pending merger. EO Choy reminded the Board that the merger would only impact dental hygiene licensees in Hawaii.

Pursuant to HRS §447-1(b), the Board requires that dental hygiene applicants take and pass one of four regional clinical examinations given after February 1, 2005 by:

1. Western Regional Examining Board (“WREB”);
2. Central Regional Dental Testing Service (“CRDTS”);
3. Southern Regional Testing Agency (“SRTA”); or
4. North East Regional Board of Dental Examiners (“NERB”)

Pursuant to HRS §448-9.4, only the ADEX exam is accepted for Hawaii dentist applicants.

EO Choy stated she will keep the Board posted regarding the merger.

Next Meeting:

Monday, November 18, 2024
10:00 a.m.

In-Person: Queen Liliuokalani Conference Room
HRH King Kalakaua Building
335 Merchant Street, First Floor
Honolulu, Hawaii 96813

Virtual

Participation: Virtual Videoconference Meeting – Zoom Webinar

Adjournment: The meeting adjourned at 12:36 p.m.

Reviewed and approved by:

Taken and recorded by:

/s/ Sheena Choy

/s/ Marc Yoshimura

Sheena Choy
Executive Officer

Marc Yoshimura
Secretary

SC:my

10/18/24

[X] Minutes approved as is.

[] Minutes approved with changes; see minutes of