

CHAPTER 447

DENTISTRY AND DENTAL HYGIENE

SUBCHAPTER I
REGULATION OF DENTISTRY
AND DENTAL HYGIENE

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SUBCHAPTER II
DENTIST AND DENTAL
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Cross-reference: See definitions in s. 440.01.

SUBCHAPTER I
REGULATION OF DENTISTRY
AND DENTAL HYGIENE**447.01 Definitions.** In this subchapter:

(1) “Accredited” means accredited by the American Dental Association commission on dental accreditation or its successor agency.

(1e) “Administer” means to directly apply a vaccine to the body of a patient by any means.

(1m) “Community rehabilitation program” means a nonprofit entity, county, municipality, or state or federal agency that directly provides, or facilitates the provision of, vocational rehabilitation services to individuals who have disabilities to maximize the employment opportunities, including career advancement, of such individuals.

(1t) “Compact” means the dentist and dental hygienist compact under s. 447.50.

(1u) “Compact privilege” means a compact privilege, as defined in s. 447.50 (2) (g), that is granted under the compact to an individual to practice in this state.

(2) “Dental disease” means any pain, injury, deformity, physical illness or departure from complete dental health or the proper condition of the human oral cavity or any of its parts.

(3) “Dental hygiene” means the performance of educational, preventive or therapeutic dental services. “Dental hygiene” includes any of the following:

(a) Removing supragingival or subgingival calcareous deposits, subgingival cement or extrinsic stains from a natural or restored surface of or a fixed replacement for a human tooth.

(b) Deep scaling or root planing a human tooth.

(c) Conditioning a human tooth surface in preparation for the placement of a sealant and placing a sealant.

(d) Conducting a substantive medical or dental history interview or preliminary examination of a dental patient’s oral cavity or surrounding structures, including the preparation of a case history or recording of clinical findings.

(e) Conducting an oral screening without the written prescription of a dentist.

(f) Participating in the development of a dental patient’s dental hygiene treatment plan.

(g) Any other practice specified in the rules promulgated under s. 447.02 (1) (d).

(4) “Dental hygiene student” means an individual who is enrolled in and in regular attendance at an accredited dental hygiene school.

(5) “Dental hygienist” means an individual who practices dental hygiene.

(6) “Dental student” means an individual who is enrolled in and in regular attendance at an accredited dental school.

(6g) “Dental therapist” means an individual who practices dental therapy.

(6r) “Dental therapy” means the limited practice of dentistry, consisting of the services, treatments, and procedures specified in s. 447.06 (3) (b).

(7) “Dentist” means an individual who practices dentistry.

(8) (am) “Dentistry” means the examination, evaluation, diagnosis, prevention, or treatment, including surgery, of diseases, disorders, or conditions of the human oral cavity or its adjacent or associated tissues and structures, or of the maxillofacial area, and their impact on the human body.

(az) “Dentistry” includes administering vaccines against SARS-CoV-2 coronavirus and influenza under s. 447.059 (1).

(bm) A dentist who is licensed under this subchapter or who is exercising the compact privilege in this state may not perform dental services that are outside the scope of the dentist’s relevant education, training, and experience.

(9) “Examining board” means the dentistry examining board.

(10) “Mobile dentistry program registrant” means a person registered under s. 447.058.

(11) “Prescription order” has the meaning given in s. 450.01 (21).

(12) “Remediable procedures” means patient procedures that create changes within the oral cavity or surrounding structures that are reversible and do not involve any increased health risks to the patient.

(13) “Written or oral prescription” means specific written or oral authorization by a dentist to perform patient procedures

according to a clearly defined treatment plan developed by the dentist.

History: 1989 a. 56; 1989 a. 349 ss. 4, 5, 8 to 10; 2013 a. 244, 341; 2017 a. 20; 2021 a. 8; 2023 a. 87, 88.

447.02 Dentistry examining board. (1) The examining board may promulgate rules:

(a) Governing the reexamination of an applicant who fails an examination specified in s. 447.04 (1) (a) 5., (1m) (e), or (2) (a) 5. The rules may specify additional educational requirements for those applicants and may specify the number of times an applicant may be examined.

(b) Governing the standards and conditions for the use of radiation and ionizing equipment in the practice of dentistry or dental therapy.

(c) Subject to ch. 553 and s. 447.06 (1), governing dental franchising.

(d) Specifying practices, in addition to the practices specified under s. 447.01 (3) (a) to (f), that are included within the practice of dental hygiene.

(e) Providing for the granting of temporary licenses under this subchapter.

(f) Governing compliance with continuing education requirements under s. 447.056.

(g) Specifying services, treatments, or procedures, in addition to those specified under s. 447.06 (3) (b) 1. to 27., that are included within the practice of dental therapy.

(2) The examining board shall promulgate rules specifying all of the following:

(a) The conditions for supervision and the degree of supervision required under ss. 447.03 (3) (a), (am), (b) and (d) 2. and 447.065.

(b) The standards, conditions and any educational requirements that are in addition to the requirements specified in s. 447.04 (1) that must be met by a dentist to be permitted to induce general anesthesia or conscious sedation in connection with the practice of dentistry.

(c) Whether an individual is required to be licensed under this subchapter to remove plaque or materia alba accretions with mechanical devices.

(d) The oral systemic premedications and subgingival sustained release chemotherapeutic agents that may be administered by a dental hygienist under s. 447.06 (2) (e) 1. and 3.

(e) The educational requirements for administration of local anesthesia by a dental hygienist under s. 447.06 (2) (e) 2.

(f) A requirement that a mobile dentistry program registrant establish procedures for a patient treated in the mobile dentistry program to access his or her patient records.

(g) Standards of conduct for the operation of a mobile dentistry program in this state, the provision of dental services through a mobile dentistry program, and the use of portable dental equipment.

(h) A definition of “mobile dentistry program” and the activities that constitute the operation of a mobile dentistry program for purposes of the registration requirement under s. 447.058.

(i) Provisions implementing s. 447.40.

(j) The educational requirements for a dental hygienist to administer nitrous oxide inhalation analgesia under s. 447.06 (2) (e) 4.

(3) (a) The examining board may issue a permit authorizing the practice in this state, without compensation, of dentistry, dental therapy, or dental hygiene to an applicant who is licensed to practice dentistry, dental therapy, or dental hygiene in another state, if all of the following apply:

1. The examining board determines that the applicant’s services will improve the welfare of Wisconsin residents.

2. The examining board determines that the applicant is qualified and satisfies the criteria specified under s. 447.04 (1) (b) 1. to 3., except that the examining board may not require the applicant to pass an examination of state statutes and rules relating to dentistry, dental therapy, or dental hygiene.

3. If the applicant is applying for a permit to practice dental therapy, the applicant graduated from a dental therapy education program approved under s. 447.04 (1m) (c) 1. to 3.

(b) A permit under this subsection shall authorize the practice of dentistry, dental therapy, or dental hygiene in a specified area of the state for a period of time not more than 10 days in a year and may be renewed by the examining board. The examining board may not require an applicant to pay a fee for the issuance or renewal of a permit under this subsection.

(4) In the course of investigating a violation of this subchapter, the examining board may require, by order or subpoena, that a person who manages or controls a business that offers dental or dental hygiene services, including management or control of a business through which the person allows another person to offer dental or dental hygiene services, produce patient health care records, as defined in s. 146.81 (4).

(5) Except as provided in ss. 447.058 and 447.063, nothing in this subchapter may be construed as authorizing the examining board to regulate business or administrative support functions or services, that do not constitute the practice of dentistry, dental therapy, or dental hygiene, provided to a business that provides dental or dental hygiene services.

NOTE: Sub. (5) is shown as amended by 2023 Wis. Acts 87 and 88 and as merged by the legislative reference bureau under s. 13.92 (2) (i).

(6) The examining board shall send a notice to the legislative reference bureau for publication in the Wisconsin Administrative Register when the board determines that 50 or more individuals are currently licensed as dental therapists in this state under s. 447.04 (1m). This subsection does not apply on or after January 1, 2030.

History: 1989 a. 349; 1997 a. 96; 2007 a. 31; 2009 a. 10; 2013 a. 244, 345, 354; 2015 a. 195 s. 82; 2017 a. 116; 2023 a. 87, 88; s. 13.92 (2) (i).

Cross-reference: See also DE and chs. DE 7, 10, and 11, Wis. adm. code.

447.03 License required. (1) DENTISTS. Except as provided under sub. (3) and ss. 257.03 and 447.02 (3), no person may do any of the following unless he or she is licensed to practice dentistry under this subchapter or holds a compact privilege to practice dentistry:

(a) Practice or offer to practice dentistry.

(b) Use or permit to be used, directly or indirectly, for a profit or otherwise for himself or herself, or for any other person, the title, or append to his or her name the words or letters, “doctor”, “Dr.”, “Doctor of Dental Surgery”, “D.D.S.”, or “D.M.D.”, or any other letters, titles, degrees, terms or descriptive matter, personal or not, which directly or indirectly represent him or her to be engaged in the practice of dentistry.

(c) Inform the public directly or indirectly in any language, orally, in writing or printing, or by drawings, demonstrations, signs, pictures or other means that he or she can perform or will attempt to perform dental services of any kind.

(1m) DENTAL THERAPISTS. Except as provided under sub. (3) and s. 447.02 (3), no person may do any of the following unless he or she is licensed to practice dental therapy under this chapter:

(a) Practice or offer to practice dental therapy.

(b) Represent himself or herself to the public as a dental therapist or use, in connection with his or her name, any title or description that may convey the impression that he or she is a dental therapist.

(2) DENTAL HYGIENISTS. Except as provided under sub. (3) and s. 447.02 (3), no person may do any of the following unless he or she is licensed to practice dental hygiene under this subchapter or holds a compact privilege to practice dental hygiene:

(a) Practice or offer to practice dental hygiene.

3 Updated 21–22 Wis. Stats.

(b) Represent himself or herself to the public as a dental hygienist or use, in connection with his or her name, any title or description that may convey the impression that he or she is a dental hygienist.

(3) EXCEPTIONS. No license or certificate under this subchapter is required for any of the following:

(a) A dental student who practices dentistry under the supervision of a dentist in an infirmary, clinic, hospital or other institution connected or associated for training purposes with an accredited dental school.

(am) A dental therapy student who practices dental therapy under the supervision of a dentist in an infirmary, clinic, hospital, or other institution connected or associated for training purposes with a dental therapy school accredited by the American Dental Association commission on dental accreditation or its successor agency.

(b) A dental hygiene student who practices dental hygiene under the supervision of a dentist in an infirmary, clinic, hospital or other institution connected or associated for training purposes with an accredited dental hygiene school.

(c) An individual licensed to practice dentistry, dental therapy, or dental hygiene in another state or country who practices dentistry, dental therapy, or dental hygiene in a program of dental education or research at the invitation of a group of dentists or practices dentistry, dental therapy, or dental hygiene under the jurisdiction of the army, navy, air force, U.S. public health service, or veterans bureau.

(d) Any of the following individuals who do not engage in the private practice of dentistry and do not have an office outside the institution at which he or she is appointed or employed:

1. A nonclinical instructor in dental science who is employed by an accredited dental school.

2. A dental fellow engaged in dental science teaching or research who is appointed by and is under the supervision of the faculty of an accredited dental school.

3. A dental intern who is appointed by a hospital located in this state, if the hospital is accredited for dental internship training and the internship does not exceed one year.

4. A dental resident who is appointed by a hospital located in this state for a 2nd or subsequent year of advanced study of dental science if the hospital is accredited for dental residency training.

(e) Any examiner representing a testing service approved by the examining board.

(f) A dental laboratory or dental laboratory technician to construct appliances or restorations for dentists if all of the following apply:

1. The appliances or restorations are constructed upon receipt from a dentist of impressions or measurements, directions, and a written work authorization on a form approved by the examining board.

2. The amounts payable for the services are billed to the dentist.

(g) Any individual who provides remediable procedures that are delegated under s. 447.065 (1).

(h) A physician licensed under subch. II of ch. 448 acting within the scope of his or her license.

History: 1989 a. 349 ss. 15, 18; 1997 a. 96; 2005 a. 96; 2009 a. 10, 42; 2011 a. 258; 2013 a. 341; 2023 a. 87, 88.

Cross-reference: See also chs. DE 2, 3, 9, 11, and 12, Wis. adm. code.

447.035 Certification; expanded function dental auxiliaries. (1) In this section, “auxiliary” means an expanded function dental auxiliary.

(2) Notwithstanding s. 447.03 (1) and (2), a certification to practice as an auxiliary granted under s. 447.04 (3) shall permit the holder to perform all of the following as delegated and supervised by a dentist:

(a) Placement and finishing of restoration material after the dentist prepares a tooth for restoration.

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(b) Application of sealants.

(c) Coronal polishing.

(d) Impressions.

(e) Temporizations.

(f) Packing cord.

(g) Removal of cement from crowns.

(h) Adjustment of dentures and other removable oral appliances.

(i) Removal of sutures and dressings.

(k) Application of topical fluoride, fluoride varnish, or similar dental topical agent.

(3) (a) The examining board shall, subject to pars. (b) and (c), promulgate rules for the certification and practice of auxiliaries.

(b) The rules promulgated under par. (a) shall do all of the following:

1. Require an applicant to the accredited instructional program described in subd. 2. to demonstrate in his or her application that the individual satisfies one of the following criteria in order to be permitted to enroll in the instructional program:

a. Has completed at least 1,000 hours practicing as a dental assistant and holds the certified dental assistant credential issued by the Dental Assisting National Board, Inc., or its successor.

b. Has completed at least 2,000 hours practicing as a dental assistant, as verified by the supervising licensed dentist.

2. Require an applicant for certification under s. 447.04 (3) to demonstrate to the satisfaction of the examining board that the applicant has successfully completed an accredited instructional program that provides training in practice as an auxiliary and requires no fewer than 70 hours of classroom instruction.

3. Require a dentist who delegates a procedure to an auxiliary certified under s. 447.04 (3) to remain on the premises where the auxiliary is performing the procedure until the procedure is complete and the dentist has verified that the procedure has been performed successfully.

4. Require each auxiliary to maintain current proficiency in cardiopulmonary resuscitation, including the use of an automated external defibrillator achieved through instruction provided by an individual, organization, or institution of higher education approved under s. 46.03 (38) to provide such instruction.

(c) The rules promulgated under par. (a) may not permit an auxiliary to perform any of the following:

1. Cutting of hard or soft tissue.

2. Diagnosis.

3. Treatment planning.

History: 2021 a. 254.

Cross-reference: See also ch. DE 16, Wis. adm. code.

447.04 Licensure; certification. (1) DENTISTS. (a) The examining board shall grant a license to practice dentistry to an individual who does all of the following:

1. Submits an application for the license to the department on a form provided by the department.

2. Pays the fee specified in s. 440.05 (1).

3. Submits evidence satisfactory to the examining board that he or she has graduated from an accredited dental school.

4. Submits evidence satisfactory to the examining board that he or she has passed the national dental examination and the examination of a dental testing service approved by the examining board.

5. Passes an examination administered by the examining board on the statutes and rules relating to dentistry.

5m. Submits evidence satisfactory to the examining board that he or she has current proficiency in cardiopulmonary resuscitation, including the use of an automated external defibrillator achieved through instruction provided by an individual, organization, or institution of higher education approved under s. 46.03 (38) to provide such instruction.

6. Completes any other requirements established by the examining board by rule.

(b) Except as provided in par. (c), the examining board may grant a license to practice dentistry to an individual who is licensed in good standing to practice dentistry in another state or territory of the United States or in another country if the applicant complies with all of the following requirements:

1. Meets the requirements for licensure established by the examining board by rule.

2. Submits evidence satisfactory to the examining board that the person has current proficiency in cardiopulmonary resuscitation, including the use of an automated external defibrillator achieved through instruction provided by an individual, organization, or institution of higher education qualified to provide such instruction. The examining board shall consult with the department of health services to determine whether an individual, organization, or institution of higher education is qualified to provide instruction under this subdivision.

3. Presents the license to the examining board and pays the fee specified under s. 440.05 (2).

(bm) The examining board shall grant a compact privilege to practice dentistry to an individual who does all of the following:

1. Submits an application for the compact privilege to the department on a form provided by the department.

2. Pays the applicable fee specified in s. 447.51 (2).

3. Passes an examination administered by the examining board on the statutes and rules relating to dentistry.

4. Satisfies all other applicable requirements under s. 447.50 (4).

(c) 1. The examining board shall grant a license to practice dentistry to an applicant who is licensed in good standing to practice dentistry in another jurisdiction upon presentation of the license and who does all of the following:

a. Pays the fee specified in s. 440.05 (2).

b. Submits evidence satisfactory to the examining board that the applicant has been offered employment as a full-time faculty member at a school of dentistry in this state.

c. Makes responses during any interview that the examining board may require that demonstrate, to the satisfaction of the examining board, that the applicant is competent to practice dentistry.

d. Submits evidence satisfactory to the examining board that the person has current proficiency in cardiopulmonary resuscitation, including the use of an automated external defibrillator achieved through instruction provided by an individual, organization, or institution of higher education qualified to provide such instruction. The examining board shall consult with the department of health services to determine whether an individual, organization, or institution of higher education is qualified to provide instruction under this subdivision.

2. A license granted under subd. 1. authorizes the license holder to practice dentistry only within educational facilities.

3. A license granted under subd. 1. is no longer in effect if the license holder ceases to be employed as a full-time faculty member at a school of dentistry in this state.

4. The examining board may promulgate rules to carry out the purposes of this paragraph.

(1m) DENTAL THERAPISTS. The examining board shall grant a license to practice dental therapy to an individual who does all of the following:

(a) Submits an application for the license to the department on a form provided by the department.

(b) Pays the fee specified in s. 440.05 (1).

(c) Submits evidence satisfactory to the examining board that he or she has done one of the following:

1. Graduated from an accredited dental therapy education program.

2. Graduated from a dental therapy education program that was not accredited at the time of graduation, but that satisfies all of the following:

a. The program was approved by the Minnesota Board of Dentistry on or before February 2, 2024.

b. The program was accredited as of the date the individual applies for a license under this subsection.

3. Graduated from a dental therapy education program located in this state that, at the time of graduation, was not fully accredited but had received initial accreditation. This subdivision applies to a dental therapy education program only during the 4-year period beginning after the program's inception. After that 4-year period has elapsed, an individual may not qualify for a license under this subsection on the basis of graduation from that program unless the program has subsequently become accredited as described in subd. 1. The examining board shall maintain a register of individuals granted a license on the basis of graduation from a program described in this subdivision.

(d) Submits evidence satisfactory to the examining board that he or she has passed a national board dental therapy examination and a dental therapy clinical examination administered by a regional testing service that has been approved by the examining board to administer clinical examinations for dental professionals. If a national board examination or a regional testing service examination for dental therapy does not exist, the examining board shall accept evidence of passing an alternative examination administered by another entity or testing service that is approved by the examining board.

(e) Passes an examination administered by the examining board on the statutes and rules relating to dental therapy.

(f) Submits evidence satisfactory to the examining board that he or she has current proficiency in cardiopulmonary resuscitation, including the use of an automated external defibrillator achieved through instruction provided by an individual, organization, or institution of higher education approved under s. 46.03 (38) to provide such instruction.

(g) If the individual was licensed or is currently licensed in another state or territory of the United States or in another country, the individual submits information related to his or her licensure in other jurisdictions as required by the examining board.

(h) Completes any other requirements established by the examining board by rule that are comparable to and no more restrictive than the requirements established by the board for dentists under sub. (1) (a) 6. and dental hygienists under sub. (2) (a) 6.

(2) DENTAL HYGIENISTS. (a) The examining board shall grant a license to practice dental hygiene to an individual who does all of the following:

1. Submits an application for the license to the department on a form provided by the department.

2. Pays the fee specified in s. 440.05 (1).

3. Submits evidence satisfactory to the examining board that he or she has graduated from an accredited dental hygiene school.

4. Submits evidence satisfactory to the examining board that he or she has passed the national dental hygiene examination and the examination of a dental hygiene testing service approved by the examining board.

5. Passes an examination administered by the examining board on the statutes and rules relating to dental hygiene.

5m. Submits evidence satisfactory to the examining board that he or she has current proficiency in cardiopulmonary resuscitation, including the use of an automated external defibrillator achieved through instruction provided by an individual, organization, or institution of higher education approved under s. 46.03 (38) to provide such instruction.

6. Completes any other requirements established by the examining board by rule.

(b) The examining board may grant a license to practice dental hygiene to an individual who is licensed in good standing to practice dental hygiene in another state or territory of the United States or in another country if the applicant complies with all of the following requirements:

1. Meets the requirements for licensure established by the examining board by rule.
2. Submits evidence satisfactory to the examining board that the person has current proficiency in cardiopulmonary resuscitation, including the use of an automated external defibrillator achieved through instruction provided by an individual, organization, or institution of higher education qualified to provide such instruction. The examining board shall consult with the department of health services to determine whether an individual, organization, or institution of higher education is qualified to provide instruction under this subdivision.
3. Presents the license to the examining board and pays the fee specified under s. 440.05 (2).

(bm) The examining board shall grant a compact privilege to practice dental hygiene to an individual who does all of the following:

1. Submits an application for the compact privilege to the department on a form provided by the department.
2. Pays the applicable fee specified in s. 447.51 (2).
3. Passes an examination administered by the examining board on the statutes and rules relating to dental hygiene.
4. Satisfies all other applicable requirements under s. 447.50 (4).

(c) 1. The examining board shall grant a certificate to administer local anesthesia to a dental hygienist who is licensed under par. (a) or (b), and who submits evidence satisfactory to the examining board that he or she satisfies the educational requirements established in rules promulgated under s. 447.02 (2) (e).

2. No fee may be charged for a certificate granted under subd. 1. A certificate granted under subd. 1. remains in effect while the dental hygienist's license granted under par. (a) or (b) remains in effect unless the certificate is suspended or revoked by the examining board.

(d) 1. The examining board shall grant a certificate to administer nitrous oxide inhalation analgesia to a dental hygienist who is licensed under par. (a) or (b) and who submits evidence satisfactory to the examining board that he or she satisfies the educational requirements established in rules promulgated under s. 447.02 (2) (j), including by having satisfied substantially similar requirements in another state.

2. A certificate granted under subd. 1. remains in effect while the dental hygienist's license granted under par. (a) or (b) remains in effect unless the board suspends or revokes the certificate.

(3) EXPANDED FUNCTION DENTAL AUXILIARIES. The examining board shall grant a certification to practice as an expanded function dental auxiliary to an individual who does all of the following:

- (a) Pays the fee specified in s. 440.05 (1).
- (b) Submits evidence satisfactory to the examining board that he or she has completed the accredited instructional program required under s. 447.035 (3) (b) 2.
- (c) Submits evidence satisfactory to the examining board that he or she has current proficiency in cardiopulmonary resuscitation, including the use of an automated external defibrillator achieved through instruction provided by an individual, organization, or institution of higher education approved under s. 46.03 (38) to provide such instruction.

History: 1989 a. 349; 1997 a. 96; 2001 a. 16, 109; 2007 a. 20 s. 9121 (6) (a); 2007 a. 104; 2009 a. 276; 2013 a. 354; 2015 a. 195 s. 82; 2021 a. 254; 2023 a. 87, 88.

Cross-reference: See also chs. DE 2, and 3 Wis. adm. code.

447.05 Expiration and renewal. (1) (a) Except as provided in par. (b), renewal applications shall be submitted to the department on a form provided by the department on or before the applicable renewal date specified under s. 440.08 (2) (a) and shall

include the applicable renewal fee determined by the department under s. 440.03 (9) (a).

(b) A certification to practice as an expanded function dental auxiliary granted under s. 447.04 (3) is permanent unless revoked and not subject to periodic renewal.

(2) The examining board may not renew a license to practice dentistry unless the applicant for renewal attests that he or she has complied with s. 447.056, that he or she has current proficiency in cardiopulmonary resuscitation, and that he or she has current proficiency in the use of an automated external defibrillator achieved through instruction provided by an individual, organization, or institution of higher education approved under s. 46.03 (38) to provide such instruction.

(2m) The examining board may not renew a license to practice dental therapy unless the applicant for renewal attests that he or she has complied with s. 447.057 and any rules promulgated under s. 447.057, that he or she has current proficiency in cardiopulmonary resuscitation, and that he or she has current proficiency in the use of an automated external defibrillator achieved through instruction provided by an individual, organization, or institution of higher education approved under s. 46.03 (38) to provide such instruction.

(3) The examining board may not renew a license to practice dental hygiene unless the applicant for renewal attests that he or she has complied with s. 447.055 and any rules promulgated by the examining board under s. 447.055, that he or she has a current certification in cardiopulmonary resuscitation, and that he or she has current proficiency in the use of an automated external defibrillator achieved through instruction provided by an individual, organization, or institution of higher education approved under s. 46.03 (38) to provide such instruction.

History: 1989 a. 349; 1991 a. 39; 2005 a. 318; 2007 a. 20, 104; 2009 a. 180; 2017 a. 331; 2021 a. 254; 2023 a. 87.

447.055 Continuing education; dental hygienists.

(1) (a) 1. Except as provided in subs. (3) and (4), a person is not eligible for renewal of a license to practice dental hygiene, other than a permit issued under s. 447.02 (3), unless the person has taught, prepared, attended, or otherwise completed, during the 2-year period immediately preceding the renewal date specified under s. 440.08 (2) (a), 12 credit hours of continuing education relating to the clinical practice of dental hygiene that is sponsored or recognized by a local, state, regional, national, or international dental, dental hygiene, dental assisting, or medical-related professional organization.

2. Notwithstanding subd. 1., the examining board may promulgate a rule requiring not more than 20 nor less than 12 credit hours of continuing education for eligibility for renewal of a license to practice dental hygiene.

(b) Continuing education required under par. (a) may include training in all of the following:

1. Basic life support or cardiopulmonary resuscitation. Not more than 2 of the credit hours required under par. (a) may be satisfied by such training.

2. Infection control. Not less than 2 of the credit hours required under par. (a) must be satisfied by such training.

(d) The examining board may promulgate rules requiring that continuing education credit hours under par. (a) include courses in specific clinical subjects.

(2) The credit hours required under sub. (1) (a) may be satisfied by independent study, correspondence, or Internet programs or courses.

(3) Subsection (1) (a) does not apply to an applicant for renewal of a license that expires on the first renewal date after the date on which the examining board initially granted the license.

(4) A person may substitute credit hours of college level courses related to the practice of dental hygiene for the credit hours required under sub. (1) (a). For purposes of this subsection, one

credit hour of a college level course is equivalent to 6 credit hours of continuing education.

(5) For purposes of sub. (1) (a), one hour of teaching or preparing a continuing education program is equivalent to one credit hour of continuing education, but a person who teaches or prepares a continuing education program may obtain credit for the program only once.

(6) The examining board may require applicants for renewal of a license to practice dental hygiene to submit proof of compliance with the requirements of this section.

History: 2005 a. 318; 2007 a. 31; 2007 a. 20 s. 9121 (6) (a); 2009 a. 10; 2017 a. 331.

447.056 Continuing education; dentists. (1) Except as provided in subs. (2) to (4), a person is not eligible for renewal of a license to practice dentistry, other than a permit issued under s. 447.02 (3), unless the person has taught, attended, or otherwise completed, during the 2–year period immediately preceding the renewal date specified under s. 440.08 (2) (a), 30 credit hours of continuing education related to the practice of dentistry or the practice of medicine, including not less than 25 credit hours of instruction in clinical dentistry or clinical medicine. Not more than 4 of the 30 hours may be from teaching. Continuing education does not satisfy the requirements under this subsection unless the continuing education is one of the following:

(a) Sponsored or recognized by a local, state, regional, national, or international dental or medical professional organization.

(b) A college–level course that is offered by a postsecondary institution accredited by the American Dental Association commission on dental accreditation or a successor agency, or by another recognized accrediting body.

(2) Subsection (1) does not apply to an applicant for renewal of a license that expires on the first renewal date after the date on which the examining board initially granted the license.

(3) Credit hours completed before the 2–year period immediately preceding renewal of a license to practice dentistry may not be applied to fulfill the credit hours required under sub. (1).

(4) The examining board may waive the continuing education requirements under sub. (1) if it finds that exceptional circumstances such as prolonged illness, disability, or other similar circumstances have prevented a person licensed to practice dentistry from meeting the requirement.

(5) A person who is licensed to practice dentistry shall keep a written record detailing each continuing education credit completed in compliance with sub. (1) and shall maintain the written record for not less than 6 years after the person completes each credit. The examining board may require applicants for renewal of a license to practice dentistry to submit proof of compliance with the requirements of this section.

History: 2007 a. 31; 2009 a. 10.

447.057 Continuing education; dental therapists.

(1) (a) Except as provided in subs. (3) and (4), a person is not eligible for renewal of a license to practice dental therapy, other than a permit issued under s. 447.02 (3), unless the person has taught, prepared, attended, or otherwise completed, during the 2–year period immediately preceding the renewal date specified under s. 440.08 (2) (a), 12 credit hours of continuing education relating to the clinical practice of dental therapy that is sponsored or recognized by a local, state, regional, national, or international dental, dental therapy, dental hygiene, dental assisting, or medical–related professional organization.

(b) Continuing education required under par. (a) may include training in all of the following:

1. Basic life support or cardiopulmonary resuscitation. Not more than 2 of the credit hours required under par. (a) may be satisfied by such training.

2. Infection control. Not less than 2 of the credit hours required under par. (a) must be satisfied by such training.

(c) After consultation with the department of health services, the examining board may promulgate rules requiring that continuing education credit hours under par. (a) include courses in specific clinical subjects.

(2) The credit hours required under sub. (1) (a) may be satisfied by independent study, correspondence, or Internet programs or courses.

(3) Subsection (1) (a) does not apply to an applicant for renewal of a license that expires on the first renewal date after the date on which the examining board initially granted the license.

(4) A person may substitute credit hours of college level courses related to the practice of dental therapy for the credit hours required under sub. (1) (a). For purposes of this subsection, one credit hour of a college level course is equivalent to 6 credit hours of continuing education.

(5) For purposes of sub. (1) (a), one hour of teaching or preparing a continuing education program is equivalent to one credit hour of continuing education, but a person who teaches or prepares a continuing education program may obtain credit for the program only once.

(6) The examining board may require applicants for renewal of a license to practice dental therapy to submit proof of compliance with the requirements of this section.

History: 2023 a. 87.

447.058 Mobile dentistry program registration.

(1) REGISTRATION REQUIRED. No person may own or operate a mobile dentistry program in this state unless the person is registered under this section. A person that wishes to own or operate more than one mobile dentistry program in this state shall apply for a separate registration under this section for each mobile dentistry program the person owns or operates.

(2) REGISTRATION. (a) The examining board may grant a registration under this section to a person who does all of the following:

1. Submits an application for registration to the department on a form provided by the department. The application shall include the person’s name and tax identification number, the person’s business address and telephone number, and any other information the department or the examining board requires.

2. Pays the fee specified in s. 440.05 (1).

3. Satisfies any other requirements established by the examining board by rule.

(b) A mobile dentistry program registrant shall submit an application for renewal, and the applicable renewal fee determined by the department under s. 440.03 (9) (a), to the department on a form provided by the department on or before the applicable renewal date specified under s. 440.08 (2) (a).

History: 2013 a. 244.

Cross–reference: See also ch. DE 10, Wis. adm. code.

447.059 Administering certain vaccines. (1) A dentist

may administer without a prescription order a vaccine against SARS–CoV–2 coronavirus or influenza only if he or she satisfies all of the following:

(a) The dentist successfully completes 8 hours in a course of study and training approved by the examining board in vaccination storage, protocols, administration technique, emergency procedures, and record keeping.

(b) The dentist has in effect liability insurance that covers the dentist against loss, expense, and liability resulting from errors, omissions, or neglect in the administration of vaccines against SARS–CoV–2 coronavirus and influenza in an amount that is not less than \$1,000,000 for each occurrence and \$2,000,000 for all occurrences in any one policy year.

(c) The dentist maintains proof of completing a course of study and training specified in par. (a) and satisfying the requirement specified in par. (b).

(2) A dentist may not administer a vaccine under sub. (1) to a child who is under the age of 6 unless all of the following apply:

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(a) The vaccine is administered pursuant to a prescription order issued within the 29 days immediately preceding the day on which the vaccine is administered.

(b) The dentist successfully completes a course of instruction approved by the examining board that includes the administration of vaccines against SARS-CoV-2 coronavirus and influenza to children under the age of 6.

(c) The dentist maintains proof of completing a course of instruction specified in par. (b).

(3) Upon request, a dentist shall provide copies of proof required under subs. (1) (c) and (2) (c) to the department or the examining board.

(4) A dentist who administers a vaccine under sub. (1) shall update the Wisconsin Immunization Registry established by the department of health services within 7 days of administering the vaccine.

History: 2021 a. 8.

447.06 Practice limitations. (1) No contract of employment entered into between a dentist or dental therapist and any other party under which the dentist or dental therapist renders dental services may require the dentist or dental therapist to act in a manner that violates the professional standards for dentistry or dental therapy set forth in this subchapter. Nothing in this subsection limits the ability of the other party to control the operation of the dental practice in a manner in accordance with the professional standards for dentistry or dental therapy set forth in this subchapter.

NOTE: Sub. (1) is shown as amended by 2023 Wis. Acts 87 and 88 and as merged by the legislative reference bureau under s. 13.92 (2) (i).

(1g) No contract of employment entered into between a dentist and any other party under which the dentist is employed to practice dentistry may require a dentist to meet a minimum quota for the number of patients seen or the number of procedures performed.

(1m) No contract of employment entered into between a dental therapist and any other party under which the dental therapist is employed to practice dental therapy may require a dental therapist to meet a minimum quota for the number of patients seen or the number of procedures performed.

(1r) No contract of employment entered into between a dental hygienist and any other party under which the dental hygienist is employed to practice dental hygiene may require a dental hygienist to meet a minimum quota for the number of patients seen or the number of procedures performed.

(2) (a) A hygienist may practice dental hygiene or perform remediable procedures only as an employee or as an independent contractor and only as follows:

1. In a dental office.
2. For a school board, a governing body of a private school, as defined in s. 115.001 (3d), or a governing body of a tribal school, as defined in s. 115.001 (15m).
3. For a school for the education of dentists, dental therapists, or dental hygienists.
4. For a state or federal prison, county jail or other federal, state, county or municipal correctional or detention facility, or a facility established to provide care for terminally ill patients.
5. For a local health department, as defined in s. 250.01 (4).
6. For a charitable institution open to the general public or to members of a religious sect or order.
7. For a nonprofit home health care agency.
8. For a nonprofit dental care program serving primarily indigent, economically disadvantaged or migrant worker populations.
9. At a facility, as defined in s. 50.01 (1m), an adult family home certified under s. 50.032 or licensed under s. 50.033, an adult day care center, as defined in s. 49.45 (47) (a), a community rehabilitation program, a hospital, as defined in s. 50.33 (2), or a

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facility that is primarily operated to provide outpatient medical services.

(b) A dental hygienist may practice dental hygiene or perform remediable procedures under par. (a) 1. only as authorized by a dentist or dental therapist [or dental therapy] who is present in the facility in which those practices or procedures are performed, except as provided in par. (c).

NOTE: Par. (b) is shown as amended by 2023 Wis. Acts 87 and 88 and as merged by the legislative reference bureau under s. 13.92 (2) (i). The language in brackets was inserted by 2023 Wis. Act 87 but rendered without effect by the treatment of s. 447.06 (2) (b) by 2023 Wis. Act 88. Corrective legislation is pending.

(c) A dental hygienist may practice dental hygiene or perform remediable procedures under par. (a) 1. if a dentist or dental therapist [or dental therapy] is not present in the facility in which those practices or procedures are performed only if all of the following conditions are met:

NOTE: Par. (c) (intro.) is shown as amended by 2023 Wis. Acts 87 and 88 and as merged by the legislative reference bureau under s. 13.92 (2) (i). The language in brackets was inserted by 2023 Wis. Act 87 but rendered without effect by the treatment of s. 447.06 (2) (c) (intro.) by 2023 Wis. Act 88. Corrective legislation is pending.

1. The dental hygiene practices or remediable procedures are performed under a written or oral prescription.

2. The dentist or dental therapist who made the written or oral prescription has examined the patient at least once during the 12-month period immediately preceding:

- a. The date on which the written or oral prescription was made; and
- b. The date on which the dental hygiene practices or remediable procedures are performed.

3. The written or oral prescription specifies the practices and procedures that the dental hygienist may perform with the informed consent of the patient or, if applicable, the patient's parent or legal guardian.

(d) A dental hygienist may not diagnose a dental disease or ailment, determine any treatment or any regimen of any treatment outside of the scope of dental hygiene, prescribe or order medication or perform any procedure that involves the intentional cutting of soft or hard tissue of the mouth by any means.

(e) Pursuant to a treatment plan approved by a dentist, a dental hygienist may administer the following upon delegation by the dentist if the dentist remains on the premises in which the practices are performed and is available to the patient throughout the completion of the appointment:

1. Oral systemic premedications specified by the examining board by rule.
2. If the dental hygienist is certified under s. 447.04 (2) (c) 1., local anesthesia.
3. Subgingival sustained release chemotherapeutic agents specified by the examining board by rule.
4. If the dental hygienist is certified under s. 447.04 (2) (d) 1., nitrous oxide inhalation analgesia.

(3) (a) In this subsection:

1. "Collaborative management agreement" means an agreement under par. (d).
2. "Dental health shortage area" has the meaning given in s. 36.60 (1) (ad).
3. "Direct supervision" means that the dentist is present in the dental office or other practice setting, personally diagnoses the condition to be treated, personally authorizes each procedure, and before dismissal of the patient, evaluates the performance of the allied dental personnel.
4. "General supervision" means that the dentist is not present in the dental office or other practice setting or on the premises at the time tasks or procedures are being performed by the dental therapist, but that the tasks or procedures performed by the dental therapist are being performed with the prior knowledge and consent of the dentist.

5. “Indirect supervision” means that the dentist is present in the dental office or other practice setting, authorizes each procedure, and remains in the office while the procedures are being performed by the allied dental personnel.

6. “Medical Assistance patient” means a patient who is a recipient of services under the Medical Assistance program under subch. IV of ch. 49.

7. “Qualifying dentist” means a dentist who is licensed in this state, who is actively practicing in this state, and who satisfies the requirement under par. (dr).

8. “Uninsured patient” means a patient who lacks dental health coverage, either through a public health care program or private insurance, and has an annual gross family income equal to or less than 200 percent of the federal poverty guidelines.

(b) The scope of practice of a dental therapist shall, subject to the terms of a collaborative management agreement, be limited to providing the following services, treatments, and procedures:

1. Oral evaluation and assessment of dental disease and formulation of an individualized treatment plan.

2. Identification of oral and systemic conditions requiring evaluation or treatment by dentists, physicians, or other health care providers and managing referrals.

3. Comprehensive charting of the oral cavity.

4. Oral health instruction and disease prevention education, including nutritional counseling and dietary analysis.

5. Exposure and evaluation of radiographic images.

6. Dental prophylaxis, including subgingival scaling and polishing procedures.

7. Dispensing and administration via the oral or topical route of nonnarcotic analgesic, anti-inflammatory, and antibiotic medications as prescribed by a licensed health care provider.

8. Application of topical preventive or prophylactic agents, including fluoride varnish, antimicrobial agents, caries arresting medicaments, and pit and fissure sealants.

9. Pulp vitality testing.

10. Application of desensitizing medications or resins.

11. Fabrication of athletic mouth guards and soft occlusal guards.

12. Changing of periodontal dressings.

13. Administration of local anesthetic and nitrous oxide.

14. Simple extraction of erupted primary teeth.

15. Nonsurgical extraction of periodontally diseased permanent teeth with tooth mobility of +3 to +4 to the extent authorized in the dental therapist’s collaborative management agreement, except for the extraction of a tooth that is unerupted, impacted, or fractured or that needs to be sectioned for removal.

16. Emergency palliative treatment of dental pain limited to the procedures in this paragraph.

17. Preparation and placement of direct restoration in primary and permanent teeth.

18. Fabrication and placement of single-tooth temporary crowns.

19. Preparation and placement of preformed crowns on primary teeth.

20. Indirect and direct pulp capping on permanent teeth.

21. Indirect pulp capping on primary teeth.

22. Intraoral suture placement and removal.

23. Minor adjustment and repair of removable prostheses.

24. Placement and removal of space maintainers.

25. Pulpotomy on primary teeth.

26. Tooth reimplantation and stabilization.

27. Recementing of a permanent crown.

28. Any additional services, treatments, or procedures specified in the rules promulgated under s. 447.02 (1) (g).

(bm) 1. Notwithstanding par. (b) 1. to 28., a dental therapist shall, except as provided in subd. 2., limit his or her practice of

dental therapy to providing the services, treatments, and procedures covered by his or her dental therapy education program.

2. If any service, treatment, or procedure under par. (b) 1. to 28. was not covered by a dental therapist’s dental therapy education program, the dental therapist may provide that service, treatment, or procedure if the dental therapist has subsequently received additional dental therapy educational training to provide that service, treatment, or procedure.

(c) 1. Except as provided in subd. 2., a dental therapist licensed under this chapter may provide dental therapy services in this state only under the direct supervision or indirect supervision of a qualifying dentist with whom the dental therapist has entered into a collaborative management agreement.

2. a. Once a dental therapist licensed under this chapter has provided dental therapy services for at least 2,000 hours under direct supervision or indirect supervision, the dental therapist may provide dental therapy services in this state under the general supervision of a qualifying dentist with whom the dental therapist has entered into a collaborative management agreement.

b. For purposes of the 2,000 hours requirement under subd. 2. a., hours may include hours of providing dental therapy services in this state under direct supervision or indirect supervision of a qualifying dentist as described in subd. 1. or hours of providing dental therapy services under direct supervision or indirect supervision while licensed as a dental therapist outside this state, but may not include any hours completed prior to graduating from the dental therapy education program.

3. Notwithstanding subsd. 1. and 2., the level of supervision for a dental therapist may be further limited under the terms of a collaborative management agreement under par. (d) 1. b.

4. A supervising dentist shall accept responsibility for all services performed by a dental therapist pursuant to a collaborative management agreement. If services needed by a patient are beyond the dental therapist’s scope of practice or authorization under the collaborative management agreement, the dental therapist shall, to the extent required under the collaborative management agreement, consult with the supervising dentist as needed to arrange for those services to be provided by a dentist or another qualified health care provider.

(d) 1. Prior to providing any dental therapy services, a dental therapist shall enter into a written collaborative management agreement with a qualifying dentist who will serve as a supervising dentist under par. (c). The agreement must be signed by the dental therapist and the qualifying dentist and address all of the following:

a. The practice settings where services may be provided and the patient populations that may be served.

b. Consistent with and subject to pars. (bm) and (c), any conditions or limitations on the services that may be provided by the dental therapist, the level of supervision required, and any circumstances requiring consultation prior to performing services.

c. Age-specific and procedure-specific practice protocols.

d. Dental record-keeping procedures.

e. Plans for managing dental or medical emergencies.

f. A quality assurance plan for monitoring care provided by the dental therapist.

g. Protocols for administering and dispensing medications.

h. Criteria or protocols relating to the provision of care to patients with specific medical conditions, treatments, or medications.

i. Policies relating to supervision of dental hygienists and other staff.

j. A plan for the referral of patients to other dental or health care providers or clinics when services needed are beyond the scope of practice or authorization of the dental therapist.

k. Whether and to what extent the dental therapist may perform services described in par. (b) 15.

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2. a. A collaborative management agreement shall be limited to covering one qualifying dentist and one dental therapist.

b. A dental therapist may enter into multiple collaborative management agreements.

c. No dentist may have collaborative management agreements with more than 4 dental therapists at any time.

(dm) A dental therapist may, subject to par. (e), provide dental therapy services only as an employee of one or more of the following that satisfies par. (dr):

1. A dentist with whom the dental therapist has entered into a collaborative management agreement.

2. A dental practice.

3. A school district or the operator of a private school, as defined in s. 115.001 (3r), or a tribal school, as defined in s. 115.001 (15m).

4. The operator of a school for the education of dentists or dental hygienists.

5. A state or federal prison, a county jail, or other federal, state, county, or municipal correctional or detention facility, or a facility established to provide care for terminally ill patients.

6. A local health department, as defined in s. 250.01 (4).

7. A charitable institution open to the general public or to members of a religious sect or order.

8. A nonprofit home health care agency.

9. The operator of a nonprofit dental care program serving primarily indigent, economically disadvantaged, or migrant worker populations.

10. A health care employer, as defined in s. 440.094 (1) (b).

(dr) A dentist may not enter into a collaborative management agreement with a dental therapist unless the dentist directly employs the dental therapist as provided in par. (dm) 1. or the dentist is employed by or contracts with the dental therapist's employer described in par. (dm) 2. to 10.

(e) A dental therapist shall at all times comply with at least one of the following:

1. Limit his or her practice to practicing in one or more dental health shortage areas. If a dental therapist begins practicing in a dental health shortage area, and that area loses its designation as a dental health shortage area while the dental therapist continues to practice in that area, the dental therapist is considered to satisfy this subdivision as long as the dental therapist continues to practice in that area.

2. Practice in one or more settings in which at least 50 percent of the total patient base of the dental therapist consists of patients who are any of the following:

a. Medical Assistance patients.

b. Uninsured patients.

c. Patients receiving dental care at free and charitable clinics.

d. Patients receiving dental care at federally qualified health centers.

e. Patients who reside in long-term care facilities.

f. Veterans.

g. Patients who are members of a federally recognized Indian tribe or band.

h. Patients receiving dental care at clinics or facilities located on tribal lands.

i. Patients with medical disabilities or chronic conditions that create barriers of access to dental care.

History: 1989 a. 349 ss. 13, 16 to 19; 1993 a. 27; 1997 a. 96; 2009 a. 302; 2013 a. 237, 354; 2017 a. 20, 116; 2023 a. 87, 88; s. 13.92 (2) (i).

447.063 Preservation and transfer of patient health care records. (1) A person who manages or controls a business that offers dental, dental therapy, or dental hygiene services, including management or control of a business through which the person allows another person to offer dental, dental therapy, or dental hygiene services, shall preserve patient health care records,

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as defined in s. 146.81 (4), for an amount of time determined by the examining board by rule.

(2) A person who manages or controls a business that offers dental, dental therapy, or dental hygiene services, including management or control of a business through which the person allows another person to offer dental, dental therapy, or dental hygiene services, shall, upon request of a patient or person authorized by the patient, as defined in s. 146.81 (5), transfer the patient health care records, as defined in s. 146.81 (4), of the patient to another person that the patient or person authorized by the patient specifies to receive the patient health care records.

History: 2017 a. 116; 2023 a. 87.

447.065 Delegation of remediable procedures and dental practices.

(1) A dentist or dental therapist may delegate to an individual who is not licensed under this subchapter only the performance of remediable procedures, and only if all of the following conditions are met:

NOTE: Sub. (1) (intro.) is shown as amended by 2023 Wis. Acts 87 and 88 and as merged by the legislative reference bureau under s. 13.92 (2) (i).

(a) The unlicensed individual performs the remediable procedures in accordance with a treatment plan approved by the dentist or dental therapist.

(b) The dentist or dental therapist is on the premises when the unlicensed individual performs the remediable procedures.

(c) The unlicensed individual's performance of the remediable procedures is subject to inspection by the dentist or dental therapist.

(2) Subject to the requirements under s. 447.06 (2), a dentist or dental therapist may delegate to a dental hygienist the performance of remediable procedures and the administration of oral systemic premedications, local anesthesia, nitrous oxide inhalation analgesia, and subgingival sustained release chemotherapeutic agents, to the extent the dentist or dental therapist has the authority to perform the activity personally.

NOTE: Sub. (2) is shown as amended by 2023 Wis. Acts 87 and 88 and as merged by the legislative reference bureau under s. 13.92 (2) (i).

(3) A dentist or dental therapist who delegates to another individual the performance of any practice or remediable procedure is responsible for that individual's performance of that delegated practice or procedure.

History: 1989 a. 349; 1997 a. 96; 2013 a. 354; 2023 a. 87, 88; s. 13.92 (2) (i).

447.067 Identification of removable prosthetic devices.

(1) Except as provided in sub. (2), a dentist who constructs a removable prosthetic device shall mark the device with the patient's first and last name. Except as provided in sub. (2), a dentist who authorizes a dental laboratory or dental laboratory technician to construct a removable prosthetic device shall ensure that the device is marked with the patient's first and last name.

(2) The following exceptions apply to the identification required under sub. (1):

(a) The first, middle and last name initials of the patient may be substituted for the first and last name of the patient if, in the professional judgment of the dentist, it is impracticable to mark the first and last name of the patient.

(b) The name and the initials of the patient may be omitted if each of those forms of identification is medically contraindicated.

History: 1993 a. 103.

447.07 Disciplinary proceedings.

(1) The examining board may, without further notice or process, limit, suspend, or revoke the license or certificate of any dentist, dental therapist, or dental hygienist, or the registration of a mobile dentistry program registrant, who fails, within 60 days after the mailing of written notice to the dentist's, dental therapist's, dental hygienist's, or registrant's last-known address, to renew the license, certificate, or registration.

(3) Subject to the rules promulgated under s. 440.03 (1), the examining board may make investigations and conduct hearings in regard to any alleged action of any dentist, dental therapist, den-

tal hygienist, or expanded function dental auxiliary, of a mobile dentistry program registrant, or of any other person it has reason to believe is engaged in or has engaged in the practice of dentistry, dental therapy, or dental hygiene, or the operation of a mobile dentistry program, in this state, and may, on its own motion, or upon complaint in writing, reprimand any dentist, dental therapist, dental hygienist, or expanded function dental auxiliary who is licensed or certified under this subchapter or who holds a compact privilege, or any mobile dentistry program registrant, or deny, limit, suspend, or revoke his or her license, certificate, or compact privilege, or the registration of the mobile dentistry program registrant, if it finds that the dentist, dental therapist, dental hygienist, expanded function dental auxiliary, or mobile dentistry program registrant has done any of the following:

NOTE: Sub. (3) (intro.) is shown as amended by 2023 Wis. Acts 87 and 88 and as merged by the legislative reference bureau under s. 13.92 (2) (i).

(a) Engaged in unprofessional conduct or violated the standards of conduct established by the examining board under s. 447.02 (2) (g).

(b) Made any false statement or given any false information in connection with an application for a license, certificate, or registration or for renewal or reinstatement of a license, certificate, or registration, or received a license, certificate, or registration through error.

(c) Been adjudicated mentally incompetent by a court.

(d) Directly or indirectly sent, for a purpose other than shade verification, impressions or measurements to a dental laboratory without a written work authorization on a form approved by the examining board and signed by the authorizing dentist, or directly or indirectly sent a patient, or an agent of a patient, to a dental laboratory for any purpose other than for shade verification. The examining board or its agents or employees may inspect dental offices and the work authorization records of dental laboratories to determine compliance with this paragraph.

(e) Subject to ss. 111.321, 111.322, and 111.335, been convicted of a crime, the circumstances of which substantially relate to the practice of dentistry, dental therapy, or dental hygiene, the practice of an expanded function dental auxiliary, or the operation of a mobile dentistry program.

(f) Violated this subchapter or any federal or state statute or rule that relates to the practice of dentistry, dental therapy, dental hygiene, or an expanded function dental auxiliary, or the operation of a mobile dentistry program.

NOTE: Par. (f) is shown as amended by 2023 Wis. Acts 87 and 88 and as merged by the legislative reference bureau under s. 13.92 (2) (i).

(g) Subject to ss. 111.321, 111.322 and 111.34, practiced dentistry, dental therapy, or dental hygiene or as an expanded function dental auxiliary while his or her ability was impaired by alcohol or other drugs.

(h) Engaged in conduct that indicates a lack of knowledge of, an inability to apply or the negligent application of, principles or skills of dentistry, dental therapy, or dental hygiene or the practice of an expanded function dental auxiliary.

(i) Obtained or attempted to obtain compensation by fraud or deceit.

(j) Employed, directly or indirectly, any unlicensed or uncertified person to perform any act requiring licensure or certification under this subchapter.

(k) Engaged in repeated irregularities in billing a 3rd party for services rendered to a patient. In this paragraph, “irregularities in billing” includes:

1. Reporting charges for the purpose of obtaining a total payment in excess of that usually received for the services rendered.

2. Reporting incorrect treatment dates for the purpose of obtaining payment.

3. Reporting charges for services not rendered.

4. Incorrectly reporting services rendered for the purpose of obtaining payment.

5. Abrogating the copayment provisions of a contract by agreeing to forgive any or all of the patient’s obligation for payment under the contract.

(L) Violated ch. 450 or 961.

(m) Made a substantial misrepresentation in the course of practice, or in the operation of a mobile dentistry program, that was relied upon by a client.

(n) Violated any order of the examining board.

(o) Advertised by using a statement that tends to deceive or mislead the public.

(5) The examining board may reinstate a license, certificate, or registration that has been voluntarily surrendered or revoked on terms and conditions that it considers appropriate. This subsection does not apply to a license or registration that is revoked under s. 440.12.

(6) The examining board shall immediately revoke the license to practice dental therapy granted under s. 447.04 (1m) of an individual who qualified for the license on the basis of graduation from a dental therapy education program described in s. 447.04 (1m) (c) 3. if, upon the conclusion of the 4–year period described in s. 447.04 (1m) (c) 3., the program is not accredited as described in s. 447.04 (1m) (c) 1. If the program subsequently becomes accredited, the examining board may allow reinstatement of a revoked license described in this subsection.

(7) In addition to or in lieu of a reprimand or denial, limitation, suspension, or revocation of a license, certificate, or registration under sub. (3), the examining board may assess against an applicant, licensee, certificate holder, or mobile dentistry program registrant a forfeiture of not more than \$5,000 for each violation enumerated under sub. (3).

History: 1975 c. 94 s. 91 (12); 1977 c. 29; 1977 c. 418; 1979 c. 162; 1981 c. 65, 380; 1981 c. 391 ss. 169, 211; 1983 a. 289; 1985 a. 29, 146; 1987 a. 316; 1989 a. 349; 1995 a. 448; 1997 a. 96, 97, 237; 2013 a. 244; 2021 a. 254; 2023 a. 87, 88; s. 13.92 (2) (i).

Cross-reference: See also ch. DE 6, Wis. adm. code.

Tort-based informed consent law requires a showing that a failure to disclose information caused actual injury. The standards of unprofessional conduct do not require such a showing. Unprofessional conduct includes practicing in a manner that substantially departs from the standard of care ordinarily exercised by a dentist that harms or could have harmed a patient. *Painter v. Dentistry Examining Board*, 2003 WI App 123, 265 Wis. 2d 248, 665 N.W.2d 397, 02–2218.

The 5–pronged test of *Gimenez*, 203 Wis. 2d 349, does not apply to cases in which fraud and misrepresentation are alleged. *Gimenez* expressly limits the application of the test to cases in which the medical professional is charged with choosing a course of treatment that is dangerous or detrimental to his or her patient or the public. It does not apply to allegations of unprofessional conduct by perpetrating a fraud on a patient in an attempt to obtain compensation. *Krahenbuhl v. Wisconsin Dentistry Examining Board*, 2006 WI App 73, 292 Wis. 2d 154, 713 N.W.2d 152, 05–1376.

447.09 Penalties. Any person who violates this subchapter may be fined not more than \$1,000 or imprisoned for not more than one year in the county jail or both for the first offense and is guilty of a Class I felony for the 2nd or subsequent conviction within 5 years.

History: 1989 a. 349; 1997 a. 283; 2001 a. 109; 2023 a. 88.

447.10 Injunction. If it appears upon the complaint of any person to the examining board, or it is believed by the examining board that any person is violating this subchapter, the examining board, or the district attorney of the proper county, may investigate such alleged violation, and may, in addition to or in lieu of any other remedies provided by law, bring action in the name and on behalf of the state against any such person to enjoin such violation. Between meetings of the examining board, its president and secretary, acting in its behalf, are empowered jointly to make such an investigation, and on the basis thereof to seek such relief. Investigations conducted by the examining board, or by its president and secretary, shall be conducted according to rules promulgated under s. 440.03 (1).

History: 1977 c. 418; 2023 a. 88.

447.11 Wisconsin Dental Association. The Wisconsin Dental Association is continued with the general powers of a domestic nonstock corporation. It may take by purchase or gift

11 Updated 21–22 Wis. Stats.

and hold real and personal property. It may adopt, alter and enforce bylaws and rules for the admission and expulsion of members, the election of officers and the management of its affairs.

History: 1989 a. 349.

447.12 County and district dental societies. (1) The dentists of any county who are licensed to practice dentistry under this subchapter, provided there are at least 5 in the county, may organize a county dental society as a component of the Wisconsin Dental Association. When so organized it shall be a body corporate, and shall be designated as the dental society of the county, and shall have the general powers of a corporation and may take by purchase or gift and hold real and personal property. County dental societies now existing are continued with the powers and privileges conferred by this subchapter. A county or district dental society that was in existence but unincorporated on September 29, 1963, is not required to incorporate unless that is the express wish of the majority of its members.

(2) Persons who hold the degree of doctor of dental surgery, or its equivalent, and any other persons who have been licensed by the examining board to practice dentistry in this state, shall be eligible to meet for the organization of or to become members of a county dental society.

(3) If there are not a sufficient number of dentists in a given county to form a dental society under sub. (1), those residing in the county may unite with those of adjoining counties and organize a multicounty or district dental society as a component of the Wisconsin Dental Association. The organizational meeting shall be held at the time and place agreed upon in writing by a majority of those eligible to belong.

(4) A county or district dental society may adopt, alter and enforce articles and bylaws, or a constitution and bylaws for the admission and expulsion of members, the election of officers and the management of its affairs, but no instrument or action on the part of the society is valid if it is inconsistent with the articles, bylaws or policies of the Wisconsin Dental Association, or if it violates the autonomy of any other component of the Wisconsin Dental Association. Any county or district dental society which incorporates after September 29, 1963, shall file its articles as provided in ch. 181.

History: 1989 a. 349; 2023 a. 88.

447.13 Service insurance corporations for dental care. The Wisconsin Dental Association or, in a manner and to the extent approved by the Wisconsin Dental Association, a county or district dental society, may establish in one or more counties a service insurance corporation for dental care under ch. 613.

History: 1975 c. 223; 1989 a. 349.

447.15 Definitions applicable to indemnification and insurance provisions. In ss. 447.15 to 447.31:

(1) “Dental society” means a county or district dental society organized or continued under s. 447.12.

(2) “Director or officer” means any of the following:

(a) A natural person who is or was a director or officer of a dental society.

(b) A natural person who, while a director or officer of a dental society, is or was serving at the dental society’s request as a director, officer, partner, trustee, member of any governing or decision-making committee, employee or agent of another dental society or corporation, partnership, joint venture, trust or other enterprise.

(c) A natural person who, while a director or officer of a dental society, is or was serving an employee benefit plan because his or her duties to the dental society also imposed duties on, or otherwise involved services by, the person to the plan or to participants in or beneficiaries of the plan.

(d) Unless the context requires otherwise, the estate or personal representative of a director or officer.

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(3) “Expenses” include fees, costs, charges, disbursements, attorney fees and any other expenses incurred in connection with a proceeding.

(4) “Liability” includes the obligation to pay a judgment, settlement, forfeiture, or fine, including any excise tax assessed with respect to an employee benefit plan, plus costs, fees, and surcharges imposed under ch. 814, and reasonable expenses.

(5) “Party” means a natural person who was or is, or who is threatened to be made, a named defendant or respondent in a proceeding.

(6) “Proceeding” means any threatened, pending or completed civil, criminal, administrative or investigative action, suit, arbitration or other proceeding, whether formal or informal, which involves foreign, federal, state or local law and which is brought by or in the right of the dental society or by any other person.

History: 1987 a. 13; 2003 a. 139.

447.17 Mandatory indemnification. (1) A dental society shall indemnify a director or officer, to the extent he or she has been successful on the merits or otherwise in the defense of a proceeding, for all reasonable expenses incurred in the proceeding if the director or officer was a party because he or she is a director or officer of the dental society.

(2) (a) In cases not included under sub. (1), a dental society shall indemnify a director or officer against liability incurred by the director or officer in a proceeding to which the director or officer was a party because he or she is a director or officer of the dental society, unless liability was incurred because the director or officer breached or failed to perform a duty he or she owes to the dental society and the breach or failure to perform constitutes any of the following:

1. A willful failure to deal fairly with the dental society or its members in connection with a matter in which the director or officer has a material conflict of interest.

2. A violation of criminal law, unless the director or officer had reasonable cause to believe his or her conduct was lawful or no reasonable cause to believe his or her conduct was unlawful.

3. A transaction from which the director or officer derived an improper personal profit.

4. Willful misconduct.

(b) Determination of whether indemnification is required under this subsection shall be made under s. 447.19.

(c) The termination of a proceeding by judgment, order, settlement or conviction, or upon a plea of no contest or an equivalent plea, does not, by itself, create a presumption that indemnification of the director or officer is not required under this subsection.

(3) A director or officer who seeks indemnification shall make a written request to the dental society.

(4) (a) Indemnification under this section is not required to the extent limited by the dental society’s articles, constitution or bylaws under s. 447.23.

(b) Indemnification under this section is not required if the director or officer has previously received indemnification or allowance of expenses from any person, including the dental society, in connection with the same proceeding.

History: 1987 a. 13.

Cooperative indemnification. La Rowe and Weine. WBB Sept. 1988.

447.19 Determination of right to indemnification.

Unless otherwise provided by the articles, constitution or bylaws or by written agreement between the director or officer and the dental society, the director or officer seeking indemnification under s. 447.17 (2) shall select one of the following means for determining his or her right to indemnification:

(1) By majority vote of a quorum of the board of directors consisting of directors not at the time parties to the same or related proceedings. If a quorum of disinterested directors cannot be obtained, by majority vote of a committee duly appointed by the board of directors and consisting solely of 2 or more directors not

at the time parties to the same or related proceedings. Directors who are parties to the same or related proceedings may participate in the designation of members of the committee.

(2) By independent legal counsel selected by a quorum of the board of directors or its committee in the manner prescribed in sub. (1) or, if unable to obtain such a quorum or committee, by a majority vote of the full board of directors, including directors who are parties to the same or related proceedings.

(3) By a panel of 3 arbitrators consisting of one arbitrator selected by those directors entitled under sub. (2) to select independent legal counsel, one arbitrator selected by the director or officer seeking indemnification and one arbitrator selected by the 2 arbitrators previously selected.

(4) By an affirmative vote of a majority of members who are entitled to vote and who are present in person or represented by proxy at a meeting at which a quorum is present, if there are members having voting rights. Unless the articles, constitution or bylaws provide otherwise, members holding one-tenth of the votes entitled to be cast, present in person or represented by proxy, shall constitute a quorum at a meeting of members. Membership rights owned by, or voted under the control of, persons who are at the time parties to the same or related proceedings, whether as plaintiffs or defendants or in any other capacity, may not be voted in making the determination.

(5) By a court under s. 447.27.

(6) By any other method provided for in any additional right to indemnification permitted under s. 447.25.

History: 1987 a. 13.

447.21 Allowance of expenses as incurred. Upon written request by a director or officer who is a party to a proceeding, a dental society may pay or reimburse his or her reasonable expenses as incurred if the director or officer provides the dental society with all of the following:

(1) A written affirmation of his or her good faith belief that he or she has not breached or failed to perform his or her duties to the dental society.

(2) A written undertaking, executed personally or on his or her behalf, to repay the allowance and, if required by the dental society, to pay reasonable interest on the allowance to the extent that it is ultimately determined under s. 447.19 that indemnification under s. 447.17 (2) is not required and that indemnification is not ordered by a court under s. 447.27 (2) (b). The undertaking under this subsection shall be an unlimited general obligation of the director or officer and may be accepted without reference to his or her ability to repay the allowance. The undertaking may be secured or unsecured.

History: 1987 a. 13.

447.23 Dental society may limit indemnification. (1) A dental society's obligations to indemnify under s. 447.17 may be limited as follows:

(a) If the dental society is organized before June 13, 1987, except as provided in s. 447.12 (4), by an amendment to its articles, constitution or bylaws which becomes effective on or after June 13, 1987.

(b) If the dental society is organized on or after June 13, 1987, except as provided in s. 447.12 (4), by its articles, constitution or bylaws, including any amendments to its articles, constitution or bylaws.

(2) A limitation under sub. (1) applies if the first alleged act of a director or officer for which indemnification is sought occurred while the limitation was in effect.

History: 1987 a. 13.

447.25 Additional rights to indemnification and allowance of expenses. (1) Except as provided in sub. (2), ss. 447.17 and 447.21 do not preclude any additional right to indemnification or allowance of expenses that a director or officer may have under any of the following:

(a) The articles, constitution or bylaws.

(b) A written agreement between the director or officer and the dental society.

(c) A resolution of the board of directors.

(d) A resolution, after notice, adopted by a majority vote of members who are entitled to vote.

(2) Regardless of the existence of an additional right under sub. (1), the dental society may not indemnify a director or officer, or permit a director or officer to retain any allowance of expenses unless it is determined by or on behalf of the dental society that the director or officer did not breach or fail to perform a duty he or she owes to the dental society which constitutes conduct under s. 447.17 (2) (a) 1., 2., 3. or 4. A director or officer who is a party to the same or related proceeding for which indemnification or an allowance of expenses is sought may not participate in a determination under this subsection.

(3) Sections 447.15 to 447.31 do not affect a dental society's power to pay or reimburse expenses incurred by a director or officer in any of the following circumstances:

(a) As a witness in a proceeding to which he or she is not a party.

(b) As a plaintiff or petitioner in a proceeding because he or she is or was an employee, agent, director or officer of the dental society.

History: 1987 a. 13.

447.27 Court-ordered indemnification. (1) Except as provided otherwise by written agreement between the director or officer and the dental society, a director or officer who is a party to a proceeding may apply for indemnification to the court conducting the proceeding or to another court of competent jurisdiction. Application shall be made for an initial determination by the court under s. 447.19 (5) or for review by the court of an adverse determination under s. 447.19 (1), (2), (3), (4) or (6). After receipt of an application, the court shall give any notice it considers necessary.

(2) The court shall order indemnification if it determines any of the following:

(a) That the director or officer is entitled to indemnification under s. 447.17 (1) or (2). If the court also determines that the dental society unreasonably refused the director's or officer's request for indemnification, the court shall order the dental society to pay the director's or officer's reasonable expenses incurred to obtain the court-ordered indemnification.

(b) That the director or officer is fairly and reasonably entitled to indemnification in view of all the relevant circumstances, regardless of whether indemnification is required under s. 447.17 (2).

History: 1987 a. 13.

447.29 Indemnification and allowance of expenses of employees and agents. A dental society may indemnify and allow reasonable expenses of an employee or agent who is not a director or officer to the extent provided by the articles, constitution or bylaws, by general or specific action of the board of directors or by contract.

History: 1987 a. 13.

447.31 Insurance. A dental society may purchase and maintain insurance on behalf of an individual who is an employee, agent, director or officer of the dental society against liability asserted against and incurred by the individual in his or her capacity as an employee, agent, director or officer, or arising from his or her status as an employee, agent, director or officer, regardless of whether the dental society is required or authorized to indemnify or allow expenses to the individual against the same liability under ss. 447.17, 447.21, 447.25 and 447.29.

History: 1987 a. 13.

447.34 Reliance by directors or officers. Unless the director or officer has knowledge that makes reliance unwar-

ranted, a director or officer of a county or district dental society organized or continued under s. 447.12 may, in discharging his or her duties to the dental society, rely on information, opinions, reports or statements, any of which may be written or oral, formal or informal, including financial statements and other financial data, if prepared or presented by any of the following:

(1) An officer or employee of the dental society whom the director or officer believes in good faith to be reliable and competent in the matters presented.

(2) Legal counsel, certified public accountants licensed under ch. 442, or other persons as to matters the director or officer believes in good faith are within the person's professional or expert competence.

(3) In the case of reliance by a director, a committee of the board of directors of which the director is not a member if the director believes in good faith that the committee merits confidence.

History: 1987 a. 13; 2001 a. 16.

447.36 Consideration of interests in addition to members' interests. In discharging his or her duties to a county or district dental society organized or continued under s. 447.12 and in determining what he or she believes to be in the best interests of the dental society, a director or officer may, in addition to considering the effects of any action on members, consider the following:

(1) The effects of the action on employees, suppliers and customers of the dental society.

(2) The effects of the action on communities in which the dental society operates.

(3) Any other factors the director or officer considers pertinent.

History: 1987 a. 13.

447.38 Limited liability of directors and officers.

(1) Except as provided in subs. (2) and (3), a director or officer of a county or district dental society organized or continued under s. 447.12 is not liable to the dental society, its members or creditors, or any person asserting rights on behalf of the dental society, its members or creditors, or any other person, for damages, settlements, fees, fines, penalties or other monetary liabilities arising from a breach of, or failure to perform, any duty resulting solely from his or her status as a director or officer, unless the person asserting liability proves that the breach or failure to perform constitutes any of the following:

(a) A willful failure to deal fairly with the dental society or its members in connection with a matter in which the director or officer has a material conflict of interest.

(b) A violation of criminal law, unless the director or officer had reasonable cause to believe his or her conduct was lawful or no reasonable cause to believe his or her conduct was unlawful.

(c) A transaction from which the director or officer derived an improper personal profit.

(d) Willful misconduct.

(2) Except as provided in sub. (3), this section does not apply to any of the following:

(a) A civil or criminal proceeding brought by or on behalf of any governmental unit, authority or agency.

(b) A proceeding brought by any person for a violation of state or federal law where the proceeding is brought pursuant to an express private right of action created by state or federal statute.

(3) Subsection (2) does not apply to a proceeding brought by a governmental unit, authority or agency in its capacity as a private party or contractor.

History: 1987 a. 13.

Cooperative indemnification. La Rowe and Weine. WBB Sept. 1988.

447.40 Informed consent. Any dentist or dental therapist who treats a patient shall inform the patient about the availability of reasonable alternate modes of treatment and about the benefits

and risks of these treatments. The reasonable dentist standard is the standard for informing a patient under this section. The reasonable dentist standard requires disclosure only of information that a reasonable dentist would know and disclose under the circumstances. The dentist's or dental therapist's duty to inform the patient under this section does not require disclosure of any of the following:

(1) Detailed technical information that in all probability a patient would not understand.

(2) Risks apparent or known to the patient.

(3) Extremely remote possibilities that might falsely or detrimentally alarm the patient.

(4) Information in emergencies where failure to provide treatment would be more harmful to the patient than treatment.

(5) Information in cases where the patient is incapable of consenting.

(6) Information about alternate modes of treatment for any condition the dentist or dental therapist has not included in his or her diagnosis, assessment, or treatment plan at the time the dentist or dental therapist informs the patient.

History: 2013 a. 345; 2023 a. 87.

SUBCHAPTER II

DENTIST AND DENTAL HYGIENIST COMPACT

447.50 Dentist and dental hygienist compact.

(1) **TITLE AND PURPOSE.** This statute shall be known and cited as the dentist and dental hygienist compact. The purposes of this compact are to facilitate the interstate practice of dentistry and dental hygiene and improve public access to dentistry and dental hygiene services by providing dentists and dental hygienists licensed in a participating state the ability to practice in participating states in which they are not licensed. The compact does this by establishing a pathway for a dentists and dental hygienists licensed in a participating state to obtain a compact privilege that authorizes them to practice in another participating state in which they are not licensed. The compact enables participating states to protect the public health and safety with respect to the practice of such dentists and dental hygienists, through the state's authority to regulate the practice of dentistry and dental hygiene in the state. The compact:

(a) Enables dentists and dental hygienists who qualify for a compact privilege to practice in other participating states without satisfying burdensome and duplicative requirements associated with securing a license to practice in those states;

(b) Promotes mobility and addresses workforce shortages through each participating state's acceptance of a compact privilege to practice in that state;

(c) Increases public access to qualified, licensed dentists and dental hygienists by creating a responsible, streamlined pathway for licensees to practice in participating states.

(d) Enhances the ability of participating states to protect the public's health and safety;

(e) Does not interfere with licensure requirements established by a participating state;

(f) Facilitates the sharing of licensure and disciplinary information among participating states;

(g) Requires dentists and dental hygienists who practice in a participating state pursuant to a compact privilege to practice within the scope of practice authorized in that state;

(h) Extends the authority of a participating state to regulate the practice of dentistry and dental hygiene within its borders to dentists and dental hygienists who practice in the state through a compact privilege;

(i) Promotes the cooperation of participating state in regulating the practice of dentistry and dental hygiene within those states;

(j) Facilitates the relocation of military members and their spouses who are licensed to practice dentistry or dental hygiene;

(2) DEFINITIONS. As used in this compact, unless the context requires otherwise, the following definitions shall apply:

(a) “Active military member” means any person with full–time duty status in the armed forces of the United States, including members of the national guard and reserve.

(b) “Adverse action” means disciplinary action or encumbrance imposed on a license or compact privilege by a state licensing authority.

(c) “Alternative program” means a nondisciplinary monitoring or practice remediation process applicable to a dentist or dental hygienist approved by a state licensing authority of a participating state in which the dentist or dental hygienist is licensed. This includes, but is not limited to, programs to which licensees with substance abuse or addiction issues are referred in lieu of adverse action.

(d) “Clinical assessment” means examination or process, required for licensure as a dentist or dental hygienist as applicable, that provides evidence of clinical competence in dentistry or dental hygiene.

(e) “Commissioner” means the individual appointed by a participating state to serve as the member of the commission for that participating state.

(f) “Compact” means this dentist and dental hygienist compact.

(g) “Compact privilege” means the authorization granted by a remote state to allow a licensee from a participating state to practice as a dentist or dental hygienist in a remote state.

(h) “Continuing professional development” means a requirement, as a condition of license renewal to provide evidence of successful participation in educational or professional activities relevant to practice or area of work.

(i) “Criminal background check” means the submission of fingerprints or other biometric–based information for a license applicant for the purpose of obtaining that applicant’s criminal history record information, as defined in 28 CFR 20.3 (d), from the federal bureau of investigation and the state’s criminal history record repository, as defined in 28 CFR. 20.3 (f).

(j) “Data system” means the commission’s repository of information about licensees, including but not limited to examination, licensure, investigative, compact privilege, adverse action, and alternative program.

(k) “Dental hygienist” means an individual who is licensed by a state licensing authority to practice dental hygiene.

(L) “Dentist” means an individual who is licensed by a state licensing authority to practice dentistry.

(m) “Dentist and dental hygienist compact commission” or “commission” means a joint government agency established by this compact comprised of each state that has enacted the compact and a national administrative body comprised of a commissioner from each state that has enacted the compact.

(n) “Encumbered license” means a license that a state licensing authority has limited in any way other than through an alternative program.

(o) “Executive board” means the chair, vice chair, secretary and treasurer and any other commissioners as may be determined by commission rule or bylaw.

(p) “Jurisprudence requirement” means the assessment of an individual’s knowledge of the laws and rules governing the practice of dentistry or dental hygiene, as applicable, in a state.

(q) “License” means current authorization by a state, other than authorization pursuant to a compact privilege, or other privilege, for an individual to practice as a dentist or dental hygienist in that state.

(r) “Licensee” means an individual who holds an unrestricted license from a participating state to practice as a dentist or dental hygienist in that state.

(s) “Model compact” means the model for the dentist and dental hygienist compact on file with the council of state governments or other entity as designated by the commission.

(t) “Participating state” means a state that has enacted the compact and been admitted to the commission in accordance with the provisions herein and commission rules.

(u) “Qualifying license” means a license that is not an encumbered license issued by a participating state to practice dentistry or dental hygiene.

(v) “Remote state” means a participating state where a licensee who is not licensed as a dentist or dental hygienist is exercising or seeking to exercise the compact privilege.

(w) “Rule” means a regulation promulgated by an entity that has the force of law.

(x) “Scope of practice” means the procedures, actions, and processes a dentist or dental hygienist licensed in a state is permitted to undertake in that state and the circumstances under which the licensee is permitted to undertake those procedures, actions and processes. Such procedures, actions and processes and the circumstances under which they may be undertaken may be established through means, including, but not limited to, statute, regulations, case law, and other processes available to the state licensing authority or other government agency.

(y) “Significant investigative information” means information, records, and documents received or generated by a state licensing authority pursuant to an investigation for which a determination has been made that there is probable cause to believe that the licensee has violated a statute or regulation that is considered more than a minor infraction for which the state licensing authority could pursue adverse action against the licensee.

(z) “State” means any state, commonwealth, district, or territory of the United States that regulates the practices of dentistry and dental hygiene.

(za) “State licensing authority” means an agency or other entity of a state that is responsible for the licensing and regulation of dentists or dental hygienists.

(3) STATE PARTICIPATION IN THE COMPACT. (a) In order to join the compact and thereafter continue as a participating state, a state must:

1. Enact a compact that is not materially different from the model compact as determined in accordance with commission rules;

2. Participate fully in the commission’s data system;

3. Have a mechanism in place for receiving and investigating complaints about its licensees and license applicants;

4. Notify the commission, in compliance with the terms of the compact and commission rules, of any adverse action or the availability of significant investigative information regarding a licensee and license applicant;

5. Fully implement a criminal background check requirement, within a time frame established by commission rule, by receiving the results of a qualifying criminal background check;

6. Comply with the commission rules applicable to a participating state;

7. Accept the national board examinations of the Joint Commission on National Dental Examinations or another examination accepted by commission rule as a licensure examination;

8. Accept for licensure that applicants for a dentist license graduate from a predoctoral dental education program accredited by the Commission on Dental Accreditation or another accrediting agency recognized by the United States department of education for the accreditation of dentistry and dental hygiene education programs, leading to the doctor of dental surgery (D.D.S.) or doctor of dental medicine (D.M.D.) degree;

9. Accept for licensure that applicants for a dental hygienist license graduate from a dental hygiene education program accredited by the Commission on Dental Accreditation or another accrediting agency recognized by the United States department of

education for the accreditation of dentistry and dental hygiene education programs;

10. Require for licensure that applicants successfully complete a clinical assessment;

11. Have continuing professional development requirements as a condition for license renewal; and

12. Pay a participation fee to the commission as established by commission rule.

(b) Providing alternative pathways for an individual to obtain an unrestricted license does not disqualify a state from participating in the compact.

(c) When conducting a criminal background check the state licensing authority shall:

1. Consider that information in making a licensure decision;

2. Maintain documentation of completion of the criminal background check and background check information to the extent allowed by state and federal law; and

3. Report to the commission whether it has completed the criminal background check and whether the individual was granted or denied a license.

(d) A licensee of a participating state who has a qualifying license in that state and does not hold an encumbered license in any other participating state, shall be issued a compact privilege in a remote state in accordance with the terms of the compact and commission rules. If a remote state has a jurisprudence requirement a compact privilege will not be issued to the licensee unless the licensee has satisfied the jurisprudence requirement.

(4) COMPACT PRIVILEGE. (a) To obtain and exercise the compact privilege under the terms and provisions of the compact, the licensee shall:

1. Have a qualifying license as a dentist or dental hygienist in a participating state;

2. Be eligible for a compact privilege in any remote state in accordance with pars. (d), (g), and (h);

3. Submit to an application process whenever the licensee is seeking a compact privilege;

4. Pay any applicable commission and remote state fees for a compact privilege in the remote state;

5. Meet any jurisprudence requirement established by a remote state in which the licensee is seeking a compact privilege;

6. Have passed a national board examination of the Joint Commission on National Dental Examinations or another examination accepted by commission rule;

7. For a dentist, have graduated from a predoctoral dental education program accredited by the Commission on Dental Accreditation or another accrediting agency recognized by the United States department of education for the accreditation of dentistry and dental hygiene education programs, leading to the doctor of dental surgery (D.D.S.) or doctor of dental medicine (D.M.D.) degree;

8. For a dental hygienist, have graduated from a dental hygiene education program accredited by the Commission on Dental Accreditation or another accrediting agency recognized by the United States department of education for the accreditation of dentistry and dental hygiene education programs;

9. Have successfully completed a clinical assessment for licensure;

10. Report to the commission adverse action taken by any non-participating state when applying for a compact privilege and, otherwise, within thirty (30) days from the date the adverse action is taken;

11. Report to the commission when applying for a compact privilege the address of the licensee's primary residence and thereafter immediately report to the commission any change in the address of the licensee's primary residence; and

12. Consent to accept service of process by mail at the licensee's primary residence on record with the commission with

respect to any action brought against the licensee by the commission or a participating state, and consent to accept service of a subpoena by mail at the licensee's primary residence on record with the commission with respect to any action brought or investigation conducted by the commission or a participating state.

(b) The licensee must comply with the requirements of par. (a) to maintain the compact privilege in the remote state. If those requirements are met, the compact privilege will continue as long as the licensee maintains a qualifying license in the state through which the licensee applied for the compact privilege and pays any applicable compact privilege renewal fees.

(c) A licensee providing dentistry or dental hygiene in a remote state under the compact privilege shall function within the scope of practice authorized by the remote state for a dentist or dental hygienist licensed in that state.

(d) A licensee providing dentistry or dental hygiene pursuant to a compact privilege in a remote state is subject to that state's regulatory authority. A remote state may, in accordance with due process and that state's laws, by adverse action revoke or remove a licensee's compact privilege in the remote state for a specific period of time and impose fines or take any other necessary actions to protect the health and safety of its citizens. If a remote state imposes an adverse action against a compact privilege that limits the compact privilege, that adverse action applies to all compact privileges in all remote states. A licensee whose compact privilege in a remote state is removed for a specified period of time is not eligible for a compact privilege in any other remote state until the specific time for removal of the compact privilege has passed and all encumbrance requirements are satisfied.

(e) If a license in a participating state is an encumbered license, the licensee shall lose the compact privilege in a remote state and shall not be eligible for a compact privilege in any remote state until the license is no longer encumbered.

(f) Once an encumbered license in a participating state is restored to good standing, the licensee must meet the requirements of par. (a) to obtain a compact privilege in a remote state.

(g) If a licensee's compact privilege in a remote state is removed by the remote state, the individual shall lose or be ineligible for the compact privilege in any remote state until the following occur:

1. The specific period of time for which the compact privilege was removed has ended; and

2. All conditions for removal of the compact privilege have been satisfied.

(h) Once the requirements of par. (g) have been met, the licensee must meet the requirements in par. (a) to obtain a compact privilege in a remote state.

(5) ACTIVE MILITARY MEMBER OR THEIR SPOUSES. An active military member and their spouse shall not be required to pay to the commission for a compact privilege the fee otherwise charged by the commission. If a remote state chooses to charge a fee for a compact privilege, it may choose to charge a reduced fee or no fee to an active military member and their spouse for a compact privilege.

(6) ADVERSE ACTIONS. (a) A participating state in which a licensee is licensed shall have exclusive authority to impose adverse action against the qualifying license issued by that participating state.

(b) A participating state may take adverse action based on the significant investigative information of a remote state, so long as the participating state follows its own procedures for imposing adverse action.

(c) Nothing in this compact shall override a participating state's decision that participation in an alternative program may be used in lieu of adverse action and that such participation shall remain nonpublic if required by the participating state's laws. Participating states must require licensees who enter any alternative program in lieu of discipline to agree not to practice pursuant to a compact privilege in any other participating state during the term

of the alternative program without prior authorization from such other participating state.

(d) Any participating state in which a licensee is applying to practice or is practicing pursuant to a compact privilege may investigate actual or alleged violations of the statutes and regulations authorizing the practice of dentistry or dental hygiene in any other participating state in which the dentist or dental hygienist holds a license or compact privilege.

(e) A remote state shall have the authority to:

1. Take adverse actions as set forth in sub. (4) (d) against a licensee's compact privilege in the state;

2. In furtherance of its rights and responsibilities under the compact and the commission's rules issue subpoenas for both hearings and investigations that require the attendance and testimony of witnesses, and the production of evidence. Subpoenas issued by a state licensing authority in a participating state for the attendance and testimony of witnesses, or the production of evidence from another participating state, shall be enforced in the latter state by any court of competent jurisdiction, according to the practice and procedure of that court applicable to subpoenas issued in proceedings pending before it. The issuing authority shall pay any witness fees, travel expenses, mileage, and other fees required by the service statutes of the state where the witnesses or evidence are located; and

3. If otherwise permitted by state law, recover from the licensee the costs of investigations and disposition of cases resulting from any adverse action taken against that licensee.

(f) *Joint investigations.* 1. In addition to the authority granted to a participating state by its dentist or dental hygienist licensure act or other applicable state law, a participating state may jointly investigate licensees with other participating states.

2. Participating states shall share any significant investigative information, litigation, or compliance materials in furtherance of any joint or individual investigation initiated under the compact.

(g) *Authority to continue investigation.* 1. After a licensee's compact privilege in a remote state is terminated, the remote state may continue an investigation of the licensee that began when the licensee had a compact privilege in that remote state.

2. If the investigation yields what would be significant investigative information had the licensee continued to have a compact privilege in that remote state, the remote state shall report the presence of such information to the data system as required by sub. (8) (b) 6. as if it was significant investigative information.

(7) ESTABLISHMENT AND OPERATION OF THE COMMISSION. (a) The compact participating states hereby create and establish a joint government agency whose membership consists of all participating states that have enacted the compact. The commission is an instrumentality of the participating states acting jointly and not an instrumentality of any one state. The commission shall come into existence on or after the effective date of the compact as set forth in sub. (11) (a).

(b) *Participation, voting, and meetings.* 1. Each participating state shall have and be limited to one (1) commissioner selected by that participating state's state licensing authority or, if the state has more than one state licensing authority, selected collectively by the state licensing authorities.

2. The commissioner shall be a member or designee of such authority or authorities.

3. The commission may by rule or bylaw establish a term of office for commissioners and may by rule or bylaw establish term limits.

4. The commission may recommend to a state licensing authority or authorities, as applicable, removal or suspension of an individual as the state's commissioner.

5. A participating state's state licensing authority, or authorities, as applicable, shall fill any vacancy of its commissioner on the commission within sixty (60) days of the vacancy.

6. Each commissioner shall be entitled to one vote on all matters that are voted upon by the commission.

7. The commission shall meet at least once during each calendar year. Additional meetings may be held as set forth in the bylaws. The commission may meet by telecommunication, video conference or other similar electronic means.

(c) The commission shall have the following powers:

1. Establish the fiscal year of the commission;

2. Establish a code of conduct and conflict of interest policies;

3. Adopt rules and bylaws;

4. Maintain its financial records in accordance with the bylaws;

5. Meet and take such actions as are consistent with the provisions of this compact, the commission's rules, and the bylaws;

6. Initiate and conclude legal proceedings or actions in the name of the commission, provided that the standing of any state licensing authority to sue or be sued under applicable law shall not be affected;

7. Maintain and certify records and information provided to a participating state as the authenticated business records of the commission, and designate a person to do so on the commission's behalf;

8. Purchase and maintain insurance and bonds;

9. Borrow, accept, or contract for services of personnel, including, but not limited to, employees of a participating state;

10. Conduct an annual financial review;

11. Hire employees, elect or appoint officers, fix compensation, define duties, grant such individuals appropriate authority to carry out the purposes of the compact, and establish the commission's personnel policies and programs relating to conflicts of interest, qualifications of personnel, and other related personnel matters;

12. As set forth in the commission rules, charge a fee to a licensee for the grant of a compact privilege in a remote state and thereafter, as may be established by commission rule, charge the licensee a compact privilege renewal fee for each renewal period in which that licensee exercises or intends to exercise the compact privilege in that remote state. Nothing herein shall be construed to prevent a remote state from charging a licensee a fee for a compact privilege or renewals of a compact privilege, or a fee for the jurisprudence requirement if the remote state imposes such a requirement for the grant of a compact privilege;

13. Accept any and all appropriate gifts, donations, grants of money, other sources of revenue, equipment, supplies, materials, and services, and receive, utilize, and dispose of the same; provided that at all times the commission shall avoid any appearance of impropriety and/or conflict of interest;

14. Lease, purchase, retain, own, hold, improve, or use any property, real, personal, or mixed, or any undivided interest therein;

15. Sell, convey, mortgage, pledge, lease, exchange, abandon, or otherwise dispose of any property real, personal, or mixed;

16. Establish a budget and make expenditures;

17. Borrow money;

18. Appoint committees, including standing committees, which may be composed of members, state regulators, state legislators or their representatives, and consumer representatives, and such other interested persons as may be designated in this compact and the bylaws;

19. Provide and receive information from, and cooperate with, law enforcement agencies;

20. Elect a chair, vice chair, secretary and treasurer and such other officers of the commission as provided in the commission's bylaws;

21. Establish and elect an executive board;

17 Updated 21–22 Wis. Stats.

22. Adopt and provide to the participating states an annual report;

23. Determine whether a state's enacted compact is materially different from the model compact language such that the state would not qualify for participation in the compact; and

24. Perform such other functions as may be necessary or appropriate to achieve the purposes of this compact.

(d) *Meetings of the commission.* 1. All meetings of the commission that are not closed pursuant to this paragraph shall be open to the public. Notice of public meetings shall be posted on the commission's website at least thirty (30) days prior to the public meeting.

2. Notwithstanding subd. 1., the commission may convene an emergency public meeting by providing at least twenty-four (24) hours prior notice on the commission's website, and any other means as provided in the commission's rules, for any of the reasons it may dispense with notice of proposed rule making under sub. (9) (L). The commission's legal counsel shall certify that one of the reasons justifying an emergency public meeting has been met.

3. Notice of all commission meetings shall provide the time, date, and location of the meeting, and if the meeting is to be held or accessible via telecommunication, video conference, or other electronic means, the notice shall include the mechanism for access to the meeting through such means.

4. The commission may convene in a closed, nonpublic meeting for the commission to receive legal advice or to discuss:

a. Noncompliance of a participating state with its obligations under the compact;

b. The employment, compensation, discipline or other matters, practices or procedures related to specific employees or other matters related to the commission's internal personnel practices and procedures;

c. Current or threatened discipline of a licensee or compact privilege holder by the commission or by a participating state's licensing authority;

d. Current, threatened, or reasonably anticipated litigation;

e. Negotiation of contracts for the purchase, lease, or sale of goods, services, or real estate;

f. Accusing any person of a crime or formally censuring any person;

g. Trade secrets or commercial or financial information that is privileged or confidential;

h. Information of a personal nature where disclosure would constitute a clearly unwarranted invasion of personal privacy;

i. Investigative records compiled for law enforcement purposes;

j. Information related to any investigative reports prepared by or on behalf of or for use of the commission or other committee charged with responsibility of investigation or determination of compliance issues pursuant to the compact;

k. Legal advice;

L. Matters specifically exempted from disclosure to the public by federal or participating state law; and

m. Other matters as promulgated by the commission by rule.

5. If a meeting, or portion of a meeting, is closed, the presiding officer shall state that the meeting will be closed and reference each relevant exempting provision, and such reference shall be recorded in the minutes.

6. The commission shall keep minutes that fully and clearly describe all matters discussed in a meeting and shall provide a full and accurate summary of actions taken, and the reasons therefore, including a description of the views expressed. All documents considered in connection with an action shall be identified in such minutes. All minutes and documents of a closed meeting shall remain under seal, subject to release only by a majority vote of the commission or order of a court of competent jurisdiction.

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(e) *Financing of the commission.* 1. The commission shall pay, or provide for the payment of, the reasonable expenses of its establishment, organization, and ongoing activities.

2. The commission may accept any and all appropriate sources of revenue, donations, and grants of money, equipment, supplies, materials, and services.

3. The commission may levy on and collect an annual assessment from each participating state and impose fees on licensees of participating states when a compact privilege is granted, to cover the cost of the operations and activities of the commission and its staff, which must be in a total amount sufficient to cover its annual budget as approved each fiscal year for which sufficient revenue is not provided by other sources. The aggregate annual assessment amount for participating states shall be allocated based upon a formula that the commission shall promulgate by rule.

4. The commission shall not incur obligations of any kind prior to securing the funds adequate to meet the same; nor shall the commission pledge the credit of any participating state, except by and with the authority of the participating state.

5. The commission shall keep accurate accounts of all receipts and disbursements. The receipts and disbursements of the commission shall be subject to the financial review and accounting procedures established under its bylaws. All receipts and disbursements of funds handled by the commission shall be subject to an annual financial review by a certified or licensed public accountant, and the report of the financial review shall be included in and become part of the annual report of the commission.

(f) *The executive board.* 1. The executive board shall have the power to act on behalf of the commission according to the terms of this compact. The powers, duties, and responsibilities of the executive board shall include:

a. Overseeing the day-to-day activities of the administration of the compact including compliance with the provisions of the compact, the commission's rules and bylaws;

b. Recommending to the commission changes to the rules or bylaws, changes to this compact legislation, fees charged to compact participating states, fees charged to licensees, and other fees;

c. Ensuring compact administration services are appropriately provided, including by contract;

d. Preparing and recommending the budget;

e. Maintaining financial records on behalf of the commission;

f. Monitoring compact compliance of participating states and providing compliance reports to the commission;

g. Establishing additional committees as necessary;

h. Exercising the powers and duties of the commission during the interim between commission meetings, except for adopting or amending rules, adopting or amending bylaws, and exercising any other powers and duties expressly reserved to the commission by rule or bylaw; and

i. Other duties as provided in the rules or bylaws of the commission.

2. The executive board shall be composed of up to seven (7) members:

a. The chair, vice chair, secretary and treasurer of the commission and any other members of the commission who serve on the executive board shall be voting members of the executive board; and

b. Other than the chair, vice chair, secretary, and treasurer, the commission may elect up to three (3) voting members from the current membership of the commission.

3. The commission may remove any member of the executive board as provided in the commission's bylaws.

4. The executive board shall meet at least annually.

a. An executive board meeting at which it takes or intends to take formal action on a matter shall be open to the public, except that the executive board may meet in a closed, nonpublic session

of a public meeting when dealing with any of the matters covered under par. (d) 4.

b. The executive board shall give five (5) business days' notice of its public meetings, posted on its website and as it may otherwise determine to provide notice to persons with an interest in the public matters the executive board intends to address at those meetings.

5. The executive board may hold an emergency meeting when acting for the commission to:

- a. Meet an imminent threat to public health, safety, or welfare;
 - b. Prevent a loss of commission or participating state funds;
- or
- c. Protect public health and safety.

(g) *Qualified immunity, defense, and indemnification.* 1. The members, officers, executive director, employees and representatives of the commission shall be immune from suit and liability, both personally and in their official capacity, for any claim for damage to or loss of property or personal injury or other civil liability caused by or arising out of any actual or alleged act, error, or omission that occurred, or that the person against whom the claim is made had a reasonable basis for believing occurred within the scope of commission employment, duties or responsibilities; provided that nothing in this subdivision shall be construed to protect any such person from suit or liability for any damage, loss, injury, or liability caused by the intentional or willful or wanton misconduct of that person. The procurement of insurance of any type by the commission shall not in any way compromise or limit the immunity granted hereunder.

2. The commission shall defend any member, officer, executive director, employee, and representative of the commission in any civil action seeking to impose liability arising out of any actual or alleged act, error, or omission that occurred within the scope of commission employment, duties, or responsibilities, or as determined by the commission that the person against whom the claim is made had a reasonable basis for believing occurred within the scope of commission employment, duties, or responsibilities; provided that nothing herein shall be construed to prohibit that person from retaining their own counsel at their own expense; and provided further, that the actual or alleged act, error, or omission did not result from that person's intentional or willful or wanton misconduct.

3. Notwithstanding subd. 1., should any member, officer, executive director, employee, or representative of the commission be held liable for the amount of any settlement or judgment arising out of any actual or alleged act, error, or omission that occurred within the scope of that individual's employment, duties, or responsibilities for the commission, or that the person to whom that individual is liable had a reasonable basis for believing occurred within the scope of the individual's employment, duties, or responsibilities for the commission, the commission shall indemnify and hold harmless such individual, provided that the actual or alleged act, error, or omission did not result from the intentional or willful or wanton misconduct of the individual.

4. Nothing herein shall be construed as a limitation on the liability of any licensee for professional malpractice or misconduct, which shall be governed solely by any other applicable state laws.

5. Nothing in this compact shall be interpreted to waive or otherwise abrogate a participating state's state action immunity or state action affirmative defense with respect to antitrust claims under the Sherman Act, Clayton Act, or any other state or federal antitrust or anticompetitive law or regulation.

6. Nothing in this compact shall be construed to be a waiver of sovereign immunity by the participating states or by the commission.

(8) **DATA SYSTEM.** (a) The commission shall provide for the development, maintenance, operation, and utilization of a coordinated database and reporting system containing licensure, adverse action, and the presence of significant investigative information on all licensees and applicants for a license in participating states.

(b) Notwithstanding any other provision of state law to the contrary, a participating state shall submit a uniform data set to the data system on all individuals to whom this compact is applicable as required by the rules of the commission, including:

1. Identifying information;
2. Licensure data;
3. Adverse actions against a licensee, license applicant or compact privilege and information related thereto;
4. Nonconfidential information related to alternative program participation, the beginning and ending dates of such participation, and other information related to such participation;
5. Any denial of an application for licensure, and the reason(s) for such denial, (excluding the reporting of any criminal history record information where prohibited by law);
6. The presence of significant investigative information; and
7. Other information that may facilitate the administration of this compact or the protection of the public, as determined by the rules of the commission.

(c) The records and information provided to a participating state pursuant to this compact or through the data system, when certified by the commission or an agent thereof, shall constitute the authenticated business records of the commission, and shall be entitled to any associated hearsay exception in any relevant judicial, quasi-judicial or administrative proceedings in a participating state.

(d) Significant investigative information pertaining to a licensee in any participating state will only be available to other participating states.

(e) It is the responsibility of the participating states to monitor the database to determine whether adverse action has been taken against a licensee or license applicant. Adverse action information pertaining to a licensee or license applicant in any participating state will be available to any other participating state.

(f) Participating states contributing information to the data system may designate information that may not be shared with the public without the express permission of the contributing state.

(g) Any information submitted to the data system that is subsequently expunged pursuant to federal law or the laws of the participating state contributing the information shall be removed from the data system.

(9) **RULE MAKING.** (a) The commission shall promulgate reasonable rules in order to effectively and efficiently implement and administer the purposes and provisions of the compact. A commission rule shall be invalid and have no force or effect only if a court of competent jurisdiction holds that the rule is invalid because the commission exercised its rule-making authority in a manner that is beyond the scope and purposes of the compact, or the powers granted hereunder, or based upon another applicable standard of review.

(b) The rules of the commission shall have the force of law in each participating state, provided however that where the rules of the commission conflict with the laws of the participating state that establish the participating state's scope of practice as held by a court of competent jurisdiction, the rules of the commission shall be ineffective in that state to the extent of the conflict.

(c) The commission shall exercise its rule-making powers pursuant to the criteria set forth in this subsection and the rules adopted thereunder. Rules shall become binding as of the date specified by the commission for each rule.

(d) If a majority of the legislatures of the participating states rejects a commission rule or portion of a commission rule, by enactment of a statute or resolution in the same manner used to adopt the compact, within four (4) years of the date of adoption of the rule, then such rule shall have no further force and effect in any participating state or to any state applying to participate in the compact.

(e) Rules shall be adopted at a regular or special meeting of the commission.

(f) Prior to adoption of a proposed rule, the commission shall hold a public hearing and allow persons to provide oral and written comments, data, facts, opinions, and arguments.

(g) Prior to adoption of a proposed rule by the commission, and at least thirty (30) days in advance of the meeting at which the commission will hold a public hearing on the proposed rule, the commission shall provide a notice of proposed rule making:

1. On the website of the commission or other publicly accessible platform;
2. To persons who have requested notice of the commission's notices of proposed rule making, and
3. In such other way(s) as the commission may by rule specify.

(h) The notice of proposed rule making shall include:

1. The time, date, and location of the public hearing at which the commission will hear public comments on the proposed rule and, if different, the time, date, and location of the meeting where the commission will consider and vote on the proposed rule;
2. If the hearing is held via telecommunication, video conference, or other electronic means, the commission shall include the mechanism for access to the hearing in the notice of proposed rule making;
3. The text of the proposed rule and the reason therefor;
4. A request for comments on the proposed rule from any interested person; and
5. The manner in which interested persons may submit written comments.

(i) All hearings will be recorded. A copy of the recording and all written comments and documents received by the commission in response to the proposed rule shall be available to the public.

(j) Nothing in this subsection shall be construed as requiring a separate hearing on each commission rule. Rules may be grouped for the convenience of the commission at hearings required by this subsection.

(k) The commission shall, by majority vote of all commissioners, take final action on the proposed rule based on the rule-making record.

1. The commission may adopt changes to the proposed rule provided the changes do not enlarge the original purpose of the proposed rule.

2. The commission shall provide an explanation of the reasons for substantive changes made to the proposed rule as well as reasons for substantive changes not made that were recommended by commenters.

3. The commission shall determine a reasonable effective date for the rule. Except for an emergency as provided in par. (L), the effective date of the rule shall be no sooner than thirty (30) days after the commission issuing the notice that it adopted or amended the rule.

(L) Upon determination that an emergency exists, the commission may consider and adopt an emergency rule with 24 hours' notice, with opportunity to comment, provided that the usual rule-making procedures provided in the compact and in this subsection shall be retroactively applied to the rule as soon as reasonably possible, in no event later than ninety (90) days after the effective date of the rule. For the purposes of this provision, an emergency rule is one that must be adopted immediately in order to:

1. Meet an imminent threat to public health, safety, or welfare;
2. Prevent a loss of commission or participating state funds;
3. Meet a deadline for the promulgation of a rule that is established by federal law or rule; or
4. Protect public health and safety.

(m) The commission or an authorized committee of the commission may direct revisions to a previously adopted rule for purposes of correcting typographical errors, errors in format, errors in consistency, or grammatical errors. Public notice of any revisions shall be posted on the website of the commission. The revision shall be subject to challenge by any person for a period of thirty (30) days after posting. The revision may be challenged only on grounds that the revision results in a material change to a rule. A challenge shall be made in writing and delivered to the commission prior to the end of the notice period. If no challenge is made, the revision will take effect without further action. If the revision is challenged, the revision may not take effect without the approval of the commission.

(n) No participating state's rule-making requirements shall apply under this compact.

(10) OVERSIGHT, DISPUTE RESOLUTION, AND ENFORCEMENT. (a) Oversight. 1. The executive and judicial branches of state government in each participating state shall enforce this compact and take all actions necessary and appropriate to implement the compact.

2. Venue is proper and judicial proceedings by or against the commission shall be brought solely and exclusively in a court of competent jurisdiction where the principal office of the commission is located. The commission may waive venue and jurisdictional defenses to the extent it adopts or consents to participate in alternative dispute resolution proceedings. Nothing herein shall affect or limit the selection or propriety of venue in any action against a licensee for professional malpractice, misconduct or any such similar matter.

3. The commission shall be entitled to receive service of process in any proceeding regarding the enforcement or interpretation of the compact or commission rule and shall have standing to intervene in such a proceeding for all purposes. Failure to provide the commission service of process shall render a judgment or order void as to the commission, this compact, or promulgated rules.

(b) Default, technical assistance, and termination. 1. If the commission determines that a participating state has defaulted in the performance of its obligations or responsibilities under this compact or the promulgated rules, the commission shall provide written notice to the defaulting state. The notice of default shall describe the default, the proposed means of curing the default, and any other action that the commission may take, and shall offer training and specific technical assistance regarding the default.

2. The commission shall provide a copy of the notice of default to the other participating states.

(c) If a state in default fails to cure the default, the defaulting state may be terminated from the compact upon an affirmative vote of a majority of the commissioners, and all rights, privileges and benefits conferred on that state by this compact may be terminated on the effective date of termination. A cure of the default does not relieve the offending state of obligations or liabilities incurred during the period of default.

(d) Termination of participation in the compact shall be imposed only after all other means of securing compliance have been exhausted. Notice of intent to suspend or terminate shall be given by the commission to the governor, the majority and minority leaders of the defaulting state's legislature, the defaulting state's state licensing authority or authorities, as applicable, and each of the participating states' state licensing authority or authorities, as applicable.

(e) A state that has been terminated is responsible for all assessments, obligations, and liabilities incurred through the effective date of termination, including obligations that extend beyond the effective date of termination.

(f) Upon the termination of a state's participation in this compact, that state shall immediately provide notice to all licensees of the state, including licensees of other participating states issued a compact privilege to practice within that state, of such termination. The terminated state shall continue to recognize all compact privileges then in effect in that state for a minimum of one hundred eighty (180) days after the date of said notice of termination.

(g) The commission shall not bear any costs related to a state that is found to be in default or that has been terminated from the

compact, unless agreed upon in writing between the commission and the defaulting state.

(h) The defaulting state may appeal the action of the commission by petitioning the U.S. District Court for the District of Columbia or the federal district where the commission has its principal offices. The prevailing party shall be awarded all costs of such litigation, including reasonable attorney's fees.

(i) *Dispute resolution.* 1. Upon request by a participating state, the commission shall attempt to resolve disputes related to the compact that arise among participating states and between participating states and non-participating states.

2. The commission shall promulgate a rule providing for both mediation and binding dispute resolution for disputes as appropriate.

(j) *Enforcement.* 1. The commission, in the reasonable exercise of its discretion, shall enforce the provisions of this compact and the commission's rules.

2. By majority vote, the commission may initiate legal action against a participating state in default in the U.S. District Court for the District of Columbia or the federal district where the commission has its principal offices to enforce compliance with the provisions of the compact and its promulgated rules. The relief sought may include both injunctive relief and damages. In the event judicial enforcement is necessary, the prevailing party shall be awarded all costs of such litigation, including reasonable attorney's fees. The remedies herein shall not be the exclusive remedies of the commission. The commission may pursue any other remedies available under federal or the defaulting participating state's law.

3. A participating state may initiate legal action against the commission in the U.S. District Court for the District of Columbia or the federal district where the commission has its principal offices to enforce compliance with the provisions of the compact and its promulgated rules. The relief sought may include both injunctive relief and damages. In the event judicial enforcement is necessary, the prevailing party shall be awarded all costs of such litigation, including reasonable attorney's fees.

4. No individual or entity other than a participating state may enforce this compact against the commission.

(11) EFFECTIVE DATE, WITHDRAWAL, AND AMENDMENT. (a) The compact shall come into effect on the date on which the compact statute is enacted into law in the seventh participating state.

1. On or after the effective date of the compact, the commission shall convene and review the enactment of each of the states that enacted the compact prior to the commission convening ("charter participating states") to determine if the statute enacted by each such charter participating state is materially different than the model compact.

a. A charter participating state whose enactment is found to be materially different from the model compact shall be entitled to the default process set forth in sub. (10).

b. If any participating state is later found to be in default, or is terminated or withdraws from the compact, the commission shall remain in existence and the compact shall remain in effect even if the number of participating states should be less than seven (7).

2. Participating states enacting the compact subsequent to the charter participating states shall be subject to the process set forth in sub. (7) (c) 23. to determine if their enactments are materially different from the model compact and whether they qualify for participation in the compact.

3. All actions taken for the benefit of the commission or in furtherance of the purposes of the administration of the compact prior to the effective date of the compact or the commission coming into existence shall be considered to be actions of the commission unless specifically repudiated by the commission.

4. Any state that joins the compact subsequent to the commission's initial adoption of the rules and bylaws shall be subject to

the commission's rules and bylaws as they exist on the date on which the compact becomes law in that state. Any rule that has been previously adopted by the commission shall have the full force and effect of law on the day the compact becomes law in that state.

(b) Any participating state may withdraw from this compact by enacting a statute repealing that state's enactment of the compact.

1. A participating state's withdrawal shall not take effect until one hundred eighty (180) days after enactment of the repealing statute.

2. Withdrawal shall not affect the continuing requirement of the withdrawing state's licensing authority or authorities to comply with the investigative and adverse action reporting requirements of this compact prior to the effective date of withdrawal.

3. Upon the enactment of a statute withdrawing from this compact, the state shall immediately provide notice of such withdrawal to all licensees within that state. Notwithstanding any subsequent statutory enactment to the contrary, such withdrawing state shall continue to recognize all compact privileges to practice within that state granted pursuant to this compact for a minimum of one hundred eighty (180) days after the date of such notice of withdrawal.

(c) Nothing contained in this compact shall be construed to invalidate or prevent any licensure agreement or other cooperative arrangement between a participating state and a non-participating state that does not conflict with the provisions of this compact.

(d) This compact may be amended by the participating states. No amendment to this compact shall become effective and binding upon any participating state until it is enacted into the laws of all participating states.

(12) CONSTRUCTION AND SEVERABILITY. (a) This compact and the commission's rule-making authority shall be liberally construed so as to effectuate the purposes, and the implementation and administration of the compact. Provisions of the compact expressly authorizing or requiring the promulgation of rules shall not be construed to limit the commission's rule-making authority solely for those purposes.

(b) The provisions of this compact shall be severable and if any phrase, clause, sentence or provision of this compact is held by a court of competent jurisdiction to be contrary to the constitution of any participating state, a state seeking participation in the compact, or of the United States, or the applicability thereof to any government, agency, person or circumstance is held to be unconstitutional by a court of competent jurisdiction, the validity of the remainder of this compact and the applicability thereof to any other government, agency, person or circumstance shall not be affected thereby.

(c) Notwithstanding par. (b), the commission may deny a state's participation in the compact or, in accordance with the requirements of sub. (10) (b), terminate a participating state's participation in the compact, if it determines that a constitutional requirement of a participating state is a material departure from the compact. Otherwise, if this compact shall be held to be contrary to the constitution of any participating state, the compact shall remain in full force and effect as to the remaining participating states and in full force and effect as to the participating state affected as to all severable matters.

(13) CONSISTENT EFFECT AND CONFLICT WITH OTHER STATE LAWS. (a) Nothing herein shall prevent or inhibit the enforcement of any other law of a participating state that is not inconsistent with the compact.

(b) Any laws, statutes, regulations, or other legal requirements in a participating state in conflict with the compact are superseded to the extent of the conflict.

(c) All permissible agreements between the commission and the participating states are binding in accordance with their terms.

History: 2023 a. 88.

447.51 Implementation of the dentist and dental hygienist compact. (1) In this section, “compact privilege” has the meaning given in s. 447.50 (2) (g).

(2) The department may impose a fee for an individual to receive a compact privilege as provided in s. 447.50 (4) (a) 4.

(3) (a) An individual who is exercising the compact privilege in this state shall comply with s. 440.03 (13) (am).

(b) Subject to s. 447.50 and any rules promulgated thereunder, ss. 440.20 to 440.22 and the rules promulgated under s. 440.03 (1) shall apply to an individual who is exercising the compact privilege in this state in the same manner that they apply to holders of licenses issued under subch. I.

History: 2023 a. 88.