ADMINISTRATIVE RULES Fiscal Estimate & Economic Impact Analysis

1. Type of Estimate and Analysis ☑ Original □ Updated □Corrected	2. Date October 21, 2021	
3. Administrative Rule Chapter, Title and Number (and Clearinghouse Number if applicable) ${ m DE}11$		
4. Subject Permits to Administer Anesthesia		
	6. Chapter 20, Stats. Appropriations Affected 20.165 (1) (g)	
7. Fiscal Effect of Implementing the Rule		
	Increase Costs	
Indeterminate Decrease Existing Revenues 8. The Rule Will Impact the Following (Check All That Apply)	Could Absorb Within Agency's Budget	
State's Economy		
	Utility Rate Payers	
□ Small Businesses (if checked, complete Attachment A)		
9. Estimate of Implementation and Compliance to Businesses, Local Governmental Units and Individuals, pers. 227.137(3)(b)(1).		
\$0		
10. Would Implementation and Compliance Costs Businesses, Local Governmental Units and Individuals Be \$10 Million or more Over		
Any 2-year Period, pers. 227.137(3)(b)(2)?		
Yes No 11. Policy Problem Addressed by the Rule		
The rule clarifies that dentists who apply for a Class III anesthesia permit allowing a dentist to perform deep sedation or		
general anesthesia, as an option for receiving the permit complete a postdoctoral residency in an accredited dental		
program in dental anesthesiology.		
12. Summary of the Businesses, Business Sectors, Associations Representing Business, Local Governmental Units, and Individuals		
that may be Affected by the Proposed Rule that were Contacted for Comments.		
The rule will be posted for 14 days on the Department of Safety and Professional Services' website to solicit comments on the potential economic impact.		
13. Identify the Local Governmental Units that Participated in the Development of this EIA.		
None		
14. Summary of Rule's Economic and Fiscal Impact on Specific Businesses, Business Sectors, Public Utility Rate Payers, Local Governmental Units and the State's Economyas a Whole (Include Implementation and Compliance Costs Expected to be Incurred)		
No economic or fiscal impacts are anticipated for specific businesses, business sectors, public utility rate payers, local		
governmental units, or the state's economy as a whole. A total of \$1,060.92 in one time costs are anticipated to be		
absorbed within the operating budget of the Department of Safety and Professional Services.		
15. Benefits of Implementing the Rule and Alternative(s) to Implementing the Rule The Dentistry Examining Board has determined a need to clarify a provision related to the permitting requirements for		
dentists in administering anesthesia. Specifically, the Board will clarify a provision that requires completion of an		
accredited dental program in dental anesthesiology is required for Class III permits and review other permitting classes		
to ensure clarity in the requirements.		
16. Long Range Implications of Implementing the Rule		
The long range implications of implementing this rule are improved Dentistry practice in administering anesthesia due to clear requirements		
requirements. 17. Compare With Approaches Being Used by Federal Government		
i / . Compare with Approaches being Used by rederal Government		

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None.

18. Compare With Approaches Being Used by Neighboring States (Illinois, Iowa, Michigan and Minnesota) Illinois: Illinois does not require a permit for minimal sedation. Moderate sedation requires a Permit A. Deep sedation or general anesthesia requires a Permit B. To receive a Permit B, a dentist must be a diplomate of the American Board of Oral and Maxillofacial Surgery, or complete 2 years of advanced training in anesthesiology or have a specialty license in oral and maxillofacial surgery. (225 ILCS 25/8.1)

Iowa: Iowa requires a general anesthesia permit if the dentist is applying deep sedation or general anesthesia. To qualify for a moderate sedation permit, the applicant shall complete a training program approved by the board that consists of a minimum of 60 hours of instruction and management of at least 20 patients or an accredited residency program that includes: formal training and clinical experiences in moderate sedation; a training that includes rescuing patients from a deeper level of sedation than intended; and if intends to utilize on pediatric or ASA III or IV patients, an accredited residency program that includes formal training in anesthesia and clinical experience in managing pediatric or ASA III or IV patients. To qualify for a general anesthesia permit, the applicant shall compete an advanced education program accredited by the Commission on Dental Accreditation that provides training in deep sedation and general anesthesia; a minimum of one year of advanced training in anesthesiology and related academic subjects in a training program approved by the anesthesia credentials committee of the board; formal training in airway management; and current ACLS certification. (IAC 650-29.11)

Michigan: Under Chapter 6 of the Michigan Administrative Rules, R338.11601 - R338.11605, the requirements for general anesthesia, intervenous conscience sedation and enteral sedation are identified. Under R338.11603, Michigan adopts the standards for advanced training in anesthesia and pain control and training in intravenous conscious sedation as identified by the Commission on Dental Education of the American Dental Association in the publication entitled "Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students" (October 2012). Michigan adopts the standards for enteral sedation course as outlined in the Dental Education of the American Dental Association in the publication in the publication entitled "Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students" (October 2012). Michigan adopts the standards for enteral sedation course as outlined in the Dental Education of the American Dental Association in the publication entitled "Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students" (October 2012).

Minnesota: Minnesota requires the following education for deep sedation or general anesthesia: a didactic and clinical program at a dental school, hospital, or graduate medical or dental program accredited by the Commission on Dental Accreditation equivalent to a program for advanced specialty education in oral and maxillofacial surgery or a one year residency in general anesthesia at an institution certified by the American Society of Anesthesiology, the American Medical Association, or the Joint Commission on Hospital Accreditation with minimum number of hours for various procedures. The dentist must also have ACLS or PALS certification and CPR certification. (Minnesota Administrative Rules 3100.3600)

19. Contact Name	20. Contact Phone Number
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ATTACHMENT A

1. Summaryof Rule's Economic and Fiscal Impact on Small Businesses (Separatelyfor each Small Business Sector, Include Implementation and Compliance Costs Expected to be Incurred)

2. Summary of the data sources used to measure the Rule's impact on Small Businesses

3. Did the agency consider the following methods to reduce the impact of the Rule on Small Businesses?

Less Stringent Compliance or Reporting Requirements

Less Stringent Schedules or Deadlines for Compliance or Reporting

Consolidation or Simplification of Reporting Requirements

Establishment of performance standards in lieu of Design or Operational Standards

Exemption of Small Businesses from some or all requirements

Other, describe:

4. Describe the methods incorporated into the Rule that will reduce its impact on Small Businesses

5. Describe the Rule's Enforcement Provisions

6. Did the Agency prepare a Cost Benefit Analysis (if Yes, attach to form)

🗆 Yes 🛛 No