

**WEST VIRGINIA  
SECRETARY OF STATE  
BETTY IRELAND  
ADMINISTRATIVE LAW DIVISION**

Form #2

Do Not Mark In This Box

**FILED**

2005 JUN 16 A 10:39

OFFICE WEST VIRGINIA  
SECRETARY OF STATE

**NOTICE OF A COMMENT PERIOD ON A PROPOSED RULE**

AGENCY: West Virginia Board of Dental Examiners TITLE NUMBER: 5

RULE TYPE: Legislative CITE AUTHORITY: 30-1-6; 30-4-6; 30-4A-15 of HB2929; 30-4A-18 of HB2929

AMENDMENT TO AN EXISTING RULE: YES  NO

IF YES, SERIES NUMBER OF RULE BEING AMENDED: 3

TITLE OF RULE BEING AMENDED: Fees Established by the Board

IF NO, SERIES NUMBER OF RULE BEING PROPOSED: \_\_\_\_\_

TITLE OF RULE BEING PROPOSED: \_\_\_\_\_

IN LIEU OF A PUBLIC HEARING, A COMMENT PERIOD HAS BEEN ESTABLISHED DURING WHICH ANY INTERESTED PERSON MAY SEND COMMENTS CONCERNING THESE PROPOSED RULES. THIS COMMENT PERIOD WILL END ON July 20, 2005 AT 4:00 pm ONLY WRITTEN COMMENTS WILL BE ACCEPTED AND ARE TO BE MAILED TO THE FOLLOWING ADDRESS:

WV Board of Dental Examiners  
207 South Heber Street  
Beckley, WV 25801

THE ISSUES TO BE HEARD SHALL BE LIMITED TO THIS PROPOSED RULE.

  
\_\_\_\_\_  
Authorized Signature

ATTACH A **BRIEF** SUMMARY OF YOUR PROPOSAL

\$4.00

George D. Conard, Jr., DDS  
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6353 East Pea Ridge Road  
Huntington, WV 25705

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Secretary  
1501 Seventh Avenue  
Charleston, WV 25312

John C. Dixon, DDS  
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Bernard J. Grubler, DDS  
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Executive Secretary  
207 S. Heber Street  
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WEST VIRGINIA BOARD OF DENTAL EXAMINERS  
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Mrs. Dolores L. Gribble  
11 Davis Place  
Clarksburg, WV 26301

Susan M. Combs  
Office Manager  
207 S. Heber Street  
Beckley, WV 25801

June 15, 2005

The Honorable Betty Ireland  
Secretary of State  
Building 1, Suite 157-K  
1900 Kanawha Blvd., East  
Charleston, WV 25305-0770


Dear Secretary Ireland:

The West Virginia Board of Dental Examiners in session June 10, 2005, approved for filing, the proposed rule CSR §5-3 titled Fees Established by the Board.

Enclosed is a Notice of a Comment Period on a Proposed Rule with attachments for filing. Please return to us one copy of the proposed rule with the filing date shown for our records.

If further information is needed, please do not hesitate to contact me at your earliest convenience.

Very truly yours,

  
JOHN F. PARKULO  
Executive Secretary

JFP/smc  
Enclosures

## SUMMARY OF RULE

All proposed additional fees or fee increases are proposed to provide additional revenue for the Board of Dental Examiners to continue to effectively carry out its duties by Legislative mandate. The fees are necessary to add 2 additional Board Meetings per year, allow for revenue to contract (2) Hearing Examiners, and or contract (1-2) Investigators, increase employee salaries and restructure employee responsibilities, offset operating expenses that have increased with no corresponding revenue source. Some fees are included herein to effectively carry out duties of the Board and its Subcommittee on Anesthesia in accordance with HB2929 of the 2005 Legislative Session to regulate different types of dental anesthesia while protecting the health, safety and welfare of the Citizens of the State of West Virginia.

## STATEMENT OF CIRCUMSTANCES

These rules will budgetarily support the Board in its efforts to carry out its duties as prescribed in West Virginia Code. This rule will allow the Board to recoup administrative costs of services the Board has always rendered and not charged for. The Board expects to pay an increased rental fee beginning July 1, 2006. The Board needs funding to implement a hearing examiner process and establish funds for contracting hearing examiners and/or investigators, increase the number of regularly scheduled meetings per year, increase salaries of their employees and restructure employee responsibilities, and support the increased number of members on its Subcommittee on Anesthesia necessary to implement HB2929 in regards to new permit classes. It will also support the Board in the ever increasing costs of employee benefits and other typical business increases that occur every year.

The fiscal impact of this rule is expected to be on those individuals regulated by the Board whom pay application, renewal, permit and miscellaneous fees.

APPENDIX B

**FISCAL NOTE FOR PROPOSED RULES**

Rule Title: Fees Established by the Board

Type of Rule:  Legislative  Interpretive  Procedural

Agency: West Virginia Board of Dental Examiners

Address: 207 South Heber Street  
Beckley, WV 25801

Phone Number: 304-252-8266 Email: wvbde@charterinternet.com

**Fiscal Note Summary**

Summarize in a clear and concise manner what impact this measure will have on costs and revenues of state government.

This rule will budgetarily support the Board in it's efforts to effectively carry out it's Legislative mandated duties as set forth in the West Virginia Code, more specifically as set forth in §30-1 et seq.; §30-4 et seq.; §30-4B et seq.; and the newly passed §30-4A et seq. or HB2929 of the 2005 Legislative Session which comes into effect July 2005. This rule will allow the Board to recoup administrative costs of services the Board has always rendered and not charged for. The Board expects increased costs for rent at the end of their current lease which expires 6/30/2006. The Board needs the funds to implement a hearing examiner process, to increase the number of regularly scheduled meetings per year, increase salaries of their employees, and support the increased number of members on it's subcommittee on anesthesia necessary to implement HB2929 in regards to the new permit classes. It will also support the Board in the ever increasing costs of employee benefits and other typical business increases that occur every year

**Fiscal Note Detail**

Show over-all effect in Item 1 and 2 and, in Item 3, give an explanation of Breakdown by fiscal year, including long-range effect.

FISCAL YEAR			
Effect of Proposal	2005 Increase/Decrease (use "-")	2006 Increase/Decrease (use "-")	Fiscal Year (Upon Full Implementation)
1. Estimated Total Cost			
Personal Services			
Current Expenses			
Repairs & Alterations			
Assets			
Equipment			
Other			
2. Estimated Total Revenues	21,000.00	83,000.00	83,000.00

Rule Title: Fees Establish by the Board

**3. Explanation of above estimates (including long-range effect):**

Please include any increase or decrease in fees in your estimated total revenues.

Estimates are based on projections of increase in application, renewal and permit fees. The Board estimates an increase of at least \$83,000 per year upon full implementation of these rules. With such increases the Board will add at least two regularly scheduled meetings per year, consider salary increases for its employees, pay increased rental costs, implement a hearing examiner process and establish funds for contracting hearing examiners and/or investigators, and use increases to help support the additional committee members to the Board's Subcommittee on Anesthesia.

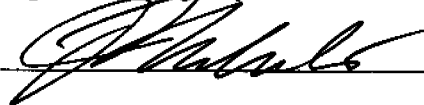
**MEMORANDUM**

Please identify any areas of vagueness, technical defects, reasons the proposed rule **would not** have a fiscal impact, and/or any special issues **not** captured elsewhere on this form.

The fiscal impact of this rules is expected to be on those individuals regulated by the Board whom pay application, renewal, permit and miscellaneous fees.

Date: 6/15/05

Signature of Agency Head or Authorized Representative

  
\_\_\_\_\_

FILED

TITLE 5  
LEGISLATIVE RULE  
WEST VIRGINIA BOARD OF DENTAL EXAMINERS

2005 JUN 16 A 10:39

SERIES 3  
FEES ESTABLISHED BY THE BOARD

OFFICE WEST VIRGINIA  
SECRETARY OF STATE**§5-3-1. General.**

- 1.1. Scope. -- This legislative rule establishes fees for the Board of Dental Examiners.
- 1.2. Authority. -- W. Va. Code §§30-1-6 and 30-4-~~4A6~~.
- 1.3. Filing Date. --
- 1.4. Effective Date. --

**§5-3-2. Schedule of Fees for Dentists.**

2.1. Dental Licensure Application	<del>\$50.00</del> <u>\$150.00</u>
2.2. <u>Re-examination fee for Dentists (Law Exam)</u>	<u>\$20.00</u>
<del>2.2.</del> <u>2.3.</u> Out of State Dentist - Dental Licensure Application	<del>\$100.00</del> <u>\$250.00</u>
<del>2.3.</del> <u>2.4.</u> Temporary Permit	<del>\$100.00</del> <u>\$150.00</u>
2.4. <u>2.5.</u> Dental Intern/Dental Residency Permit	<del>\$50.00</del> <u>\$100.00</u>
2.5. <u>2.6.</u> Teaching Permit	<del>\$100.00</del> <u>\$150.00</u>
2.6. <u>2.7.</u> Investigation of Qualification for Temporary, Dental Intern/Dental Residency or Teaching Permits	\$50.00
<del>2.7.</del> <u>2.8.</u> Annual Information & Renewal fee for a Dentist	<del>\$125.00</del> <u>\$150.00</u>

**§5-3-53. Schedule of fees for Specialty Licensure for Dentists.**

53.1. Dental Specialty Licensure Application	<del>\$300.00</del> <u>\$450.00</u>
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**§5-3-34 Schedule of Fees for Hygienists.**

34.1. Dental Hygiene Licensure Application	<del>\$35.00</del> <u>\$60.00</u>
34.2. Re-examination fee for Dental Hygienists (Law Exam)	<del>\$10.00</del> <u>\$20.00</u>

5CSR3

34.3. Out of State Dental Hygienist - Dental Hygienist Licensure Application	<del>\$50.00</del>	<u>\$100.00</u>
34.4. Temporary Permit		\$100.00
34.5. Teaching Permit		\$100.00
34.6. Investigation of Qualification for Temporary, <del>Dental Intern/Dental-Residency</del> or Teaching Permits		\$50.00
34.7. Annual Information & Renewal fee for a Dental Hygienist	<del>\$50.00</del>	<u>\$65.00</u>
4.8. <u>Local Anesthesia Permit Application fee</u>		<u>\$25.00</u>
4.9. <u>Nitrous Oxide Monitoring Permit Application fee</u>		<u>\$25.00</u>
4.10. <u>Bleaching Permit Application fee</u>		<u>\$25.00</u>

**§5-3-5. Schedule of Fees for Dental Assistants.**

5.1. <u>Nitrous Oxide Monitoring Permit Application fee</u>	<u>\$25.00</u>	
5.2. <u>Orthodontic and/or Restorative Expanded Duties Permit Application fee</u>		<u>\$25.00</u>

**§5-3-46. Schedule of Fees for Dental Corporations.**

46.1. Application to Form a Dental Corporation	\$200.00
46.2. Annual <del>Registration</del> <u>renewal</u> fee for a Dental Corporation	\$150.00

**§5-3-7. Schedule of fees for Anesthesia.**

7.1. <u>Class Two Certification Application Fee</u>	<u>\$50.00</u>
7.2. <u>Class Two Certification Renewal Fee</u>	<u>\$25.00</u>
7.3. <u>Class Three or Four Permit Application Fee</u>	<u>\$600.00</u>
7.4. <u>Class Three or Four Permit Renewal Fee</u>	<u>\$200.00</u>

**§5-3-8. Schedule of fees for Professional Limited Liability Companies.**

8.1. <u>Application to Form a Dental Professional Limited Liability Company</u>	<u>\$200.00</u>
8.2. <u>Annual Renewal fee for a Professional Limited Liability Company</u>	<u>\$150.00</u>

**§5-3-69. Schedule for Miscellaneous Fees.**

69.1. <u>Verification of Licensure to another State (Charge for licensee)</u>	<del>\$10.00</del> <u>\$25.00</u>
9.2. <u>Verification of Licensure (other entities)</u>	<u>\$25.00 per name</u>
9.3. <u>Course approval application fee</u>	<u>\$100.00</u>
9.4. <u>Duplicate renewal license</u>	<u>\$5.00</u>
9.5. <u>Duplicate wall certificate</u>	<u>\$10.00</u>
9.6. <u>Roster of Active Dental/Hygiene Licensees (paper, email or cd)</u>	<u>\$50.00 per list</u>
9.7. <u>Roster of Active Dental/Hygiene Licensees (labels)</u>	<u>\$100.00 per list</u>
9.8. <u>Roster of Active Dental/Hygiene Licensees (one county) (paper, email or labels)</u>	<u>\$10.00 per list</u>
9.9. <u>Miscellaneous Copies (first page) additional pages</u>	<u>\$3.00</u> <u>\$0.25</u>
9.10. <u>Retrieval Fee</u>	<u>\$25.00</u>

**§5-3-10. Late Renewal and Late Continuing Education Fees**

10.1. Any Dental, Dental Specialty, Hygiene, Anesthesia, Corporation, PLLC, etc. that fail to renew by the specified renewal date, either by statute or rule, shall be assessed a penalty fee equal to the renewal fee as required by statute or rule, in addition to other conditions of renewal as set forth by statute or rule.

10.2. Any Licensee that fails to report their continuing education requirements as set forth by statute or rule by the required reporting date shall be assessed a penalty fee equal the annual renewal fee of said licensee.

**§5-3-11. Returned Checks.**

11.1. Returned Check Charge \$25.00

11.2. Failure to replace renewal or application fees due to a returned check and pay the returned check charge shall constitute grounds for denial, revocation or suspension of a license.

**§5-3-12. Non Refundable.**

12.1. All fees are non-refundable.

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June 15, 2005

The Honorable Betty Ireland  
Secretary of State  
Building 1, Suite 157-K  
1900 Kanawha Blvd., East  
Charleston, WV 25305-0770

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Enclosed is a Notice of a Comment Period on a Proposed Rule with attachments for filing. Please return to us one copy of the proposed rule with the filing date shown for our records.

If further information is needed, please do not hesitate to contact me at your earliest convenience.

Very truly yours,

A handwritten signature in black ink, appearing to read "John F. Parkulo".  
JOHN F. PARKULO  
Executive Secretary

JFP/smc  
Enclosures