

# HOUSE BILL No. 4865

June 20, 2013, Introduced by Reps. MacGregor, Shirkey, Lyons, Pscholka, Haines, Hooker, Schmidt, Darany, Genetski, Callton, Yonker, Foster, Cotter, Stallworth, Jacobsen, Tlaib, Zorn and Switalski and referred to the Committee on Health Policy.

A bill to amend 1978 PA 368, entitled  
"Public health code,"  
(MCL 333.1101 to 333.25211) by adding part 216.

## THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

### PART 216

#### MOBILE DENTAL FACILITY

#### SEC. 21601. (1) AS USED IN THIS PART:

(A) "ACTIVE PATIENT" MEANS A PERSON WHO HAS RECEIVED ANY TYPE  
OF DENTAL CARE IN A MOBILE DENTAL FACILITY IN THE PRECEDING 24  
MONTHS.

(B) "ASSESSMENT OF A PATIENT" MEANS A LIMITED CLINICAL  
INSPECTION THAT IS PERFORMED TO IDENTIFY POSSIBLE SIGNS OF ORAL OR  
SYSTEMIC DISEASE, MALFORMATION, OR INJURY, AND THE POTENTIAL NEED  
FOR REFERRAL FOR DIAGNOSIS AND TREATMENT.

1 (C) "BOARD OF DENTISTRY" MEANS THE BOARD CREATED UNDER PART  
2 166.

3 (D) "CLINICAL EVALUATION" MEANS A DIAGNOSTIC SERVICE PROVIDED  
4 BY A DENTIST THAT INCLUDES A COMPLETE INTRA- AND EXTRA-ORAL  
5 INSPECTION, MAY INCLUDE OTHER MODALITIES OF EXAMINATION TO IDENTIFY  
6 SIGNS OF ORAL OR SYSTEMIC DISEASE, MALFORMATION, OR INJURY, AND MAY  
7 INCLUDE THE COMPLETION OF DIAGNOSIS AND TREATMENT PLANNING TO  
8 DETERMINE THE TREATMENT NEEDS OF AN INDIVIDUAL PATIENT.

9 (E) "COMPREHENSIVE DENTAL SERVICES" MEANS CLINICAL EVALUATION,  
10 INCLUDING DIAGNOSIS AND TREATMENT PLANNING; IMAGERY SERVICES; AND  
11 INDICATED TREATMENT THAT MAY INCLUDE PREVENTATIVE, RESTORATIVE, AND  
12 SURGICAL PROCEDURES THAT ARE CONSIDERED NECESSARY FOR AN INDIVIDUAL  
13 PATIENT.

14 (F) "DENTAL HOME" MEANS A NETWORK OF INDIVIDUALIZED CARE BASED  
15 ON RISK ASSESSMENT, THAT INCLUDES ORAL HEALTH EDUCATION, DENTAL  
16 SCREENINGS, PREVENTATIVE DENTAL SERVICES, DIAGNOSTIC SERVICES,  
17 COMPREHENSIVE DENTAL SERVICES, AND EMERGENCY SERVICES.

18 (G) "IMAGERY" MEANS VISUALIZATION OF ORAL AND FACIAL  
19 STRUCTURES USING SPECIALIZED INSTRUMENTS AND TECHNIQUES FOR  
20 DIAGNOSTIC PURPOSES.

21 (H) "MEMORANDUM OF AGREEMENT" MEANS WRITTEN DOCUMENTATION OF  
22 AN AGREEMENT BETWEEN PARTIES TO WORK TOGETHER COOPERATIVELY ON AN  
23 AGREED-UPON PROJECT OR MEET AN AGREED-UPON OBJECTIVE. THE PURPOSE  
24 OF A MEMORANDUM OF AGREEMENT IS TO HAVE A WRITTEN UNDERSTANDING OF  
25 THE AGREEMENT BETWEEN THE PARTIES. A MEMORANDUM OF AGREEMENT SERVES  
26 AS A LEGAL DOCUMENT THAT IS BINDING AND HOLDS THE PARTIES  
27 RESPONSIBLE TO THEIR COMMITMENT ALONG WITH DESCRIBING THE TERMS AND

1 DETAILS OF THE COOPERATIVE AGREEMENT. A MEMORANDUM OF AGREEMENT MAY  
2 BE USED BETWEEN AGENCIES, THE PUBLIC, THE FEDERAL OR STATE  
3 GOVERNMENT, COMMUNITIES, AND INDIVIDUALS.

4 (I) "MOBILE DENTAL FACILITY" MEANS EITHER OF THE FOLLOWING:

5 (i) A SELF-CONTAINED, INTACT FACILITY IN WHICH DENTISTRY OR  
6 DENTAL HYGIENE IS PRACTICED THAT MAY BE TRANSPORTED FROM 1 LOCATION  
7 TO ANOTHER.

8 (ii) ANY FACILITY WHERE DENTAL SERVICES ARE RENDERED USING  
9 PORTABLE EQUIPMENT.

10 (J) "OPERATOR" MEANS EITHER OF THE FOLLOWING:

11 (i) AN INDIVIDUAL WITH A VALID, CURRENT LICENSE TO PRACTICE  
12 DENTISTRY IN THIS STATE WHO UTILIZES AND HOLDS A PERMIT UNDER THIS  
13 PART FOR A MOBILE DENTAL FACILITY.

14 (ii) A MICHIGAN NONPROFIT CORPORATION OR ANY GOVERNMENTAL  
15 AGENCY CONTRACTING WITH INDIVIDUALS LICENSED TO PRACTICE DENTISTRY  
16 IN THIS STATE OR DENTAL HYGIENISTS LICENSED IN THIS STATE, WHO  
17 UTILIZES AND HOLDS A PERMIT UNDER THIS PART FOR A MOBILE DENTAL  
18 FACILITY.

19 (K) "PREVENTATIVE DENTAL SERVICES" MEANS DENTAL SERVICES THAT  
20 INCLUDE, BUT ARE NOT LIMITED TO, SCREENING OF A PATIENT, ASSESSMENT  
21 OF A PATIENT, PROPHYLAXIS, FLUORIDE TREATMENTS, AND APPLICATION OF  
22 SEALANTS. IMAGERY STUDIES ARE NOT PREVENTATIVE DENTAL SERVICES.

23 (L) "SCREENING OF A PATIENT" MEANS SCREENING, INCLUDING STATE-  
24 OR FEDERALLY MANDATED SCREENING, TO DETERMINE AN INDIVIDUAL'S NEED  
25 TO BE SEEN BY A DENTIST FOR DIAGNOSIS.

26 (2) IN ADDITION, ARTICLE 1 CONTAINS GENERAL DEFINITIONS AND  
27 PRINCIPLES OF CONSTRUCTION APPLICABLE TO THIS PART.

1           SEC. 21603. (1) AN OPERATOR SHALL OBTAIN A PERMIT UNDER THIS  
2 PART FOR A MOBILE DENTAL FACILITY BEFORE OFFERING DENTAL SERVICES  
3 AT THE FACILITY.

4           (2) A MOBILE DENTAL FACILITY SHALL HAVE AN OPERATOR IN CHARGE  
5 AT ALL TIMES.

6           (3) AN OPERATOR MAY CONTRACT OR EMPLOY OTHER DENTISTS, DENTAL  
7 HYGIENISTS, OR DENTAL ASSISTANTS TO WORK IN A MOBILE DENTAL  
8 FACILITY.

9           (4) AN OPERATOR MAY HOLD A PERMIT FOR 1 OR MORE MOBILE DENTAL  
10 FACILITIES.

11          SEC. 21605. (1) AN INDIVIDUAL OR ENTITY SEEKING A PERMIT TO  
12 OPERATE A MOBILE DENTAL FACILITY SHALL SUBMIT AN APPLICATION ON A  
13 FORM PROVIDED BY THE DEPARTMENT.

14          (2) AN APPLICATION SUBMITTED TO THE DEPARTMENT UNDER  
15 SUBSECTION (1) SHALL INCLUDE A REGISTRATION FEE IN AN AMOUNT  
16 DETERMINED BY THE DEPARTMENT BUT NOT MORE THAN THE COST OF  
17 REGULATION.

18          (3) A PERMIT IS VALID FOR 2 YEARS AND AN APPLICATION FOR  
19 RENEWAL MAY BE SUBMITTED NOT LATER THAN THE LAST DAY OF THE MONTH  
20 IN WHICH THE PERMIT EXPIRES UPON SUBMISSION OF PROOF TO THE  
21 DEPARTMENT OF COMPLIANCE WITH THE REQUIREMENTS OF THIS PART. A  
22 PERMIT APPLICATION THAT IS NOT TIMELY FILED IS SUBJECT TO A LATE  
23 FEE IN AN AMOUNT DETERMINED BY THE DEPARTMENT AS THE ADDITIONAL  
24 COST OF PROCESSING THE LATE RENEWAL.

25          (4) A PERMIT SHALL NOT BE ISSUED UNLESS THE APPLYING  
26 INDIVIDUAL OR ENTITY IS IN COMPLIANCE WITH ALL APPLICABLE  
27 REQUIREMENTS OF THIS PART.

1 (5) A PERMIT ISSUED UNDER THIS PART IS NOT TRANSFERRABLE. IF  
2 THE OPERATOR OF THE MOBILE DENTAL FACILITY CHANGES, THE PERMIT IS  
3 NO LONGER VALID. HOWEVER, IF AN APPLICATION FOR A NEW PERMIT TO  
4 CONTINUE OPERATING THE MOBILE DENTAL FACILITY IS SUBMITTED NOT  
5 LATER THAN 30 DAYS AFTER THE CHANGE OF OPERATOR, THE FORMER PERMIT  
6 IS VALID AS AN INTERIM PERMIT UNTIL THE APPLICATION IS APPROVED OR  
7 DENIED, BUT NOT LONGER THAN 90 DAYS.

8 (6) THE DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS SHALL  
9 EITHER APPROVE OR DENY AN APPLICATION FOR A PERMIT UNDER THIS PART  
10 NOT LATER THAN 60 DAYS AFTER RECEIVING THE APPLICATION.

11 SEC. 21607. (1) AN APPLICANT SHALL PROVIDE WITH THE  
12 APPLICATION FOR A PERMIT UNDER THIS PART, AND SUBSEQUENTLY, WITHIN  
13 10 DAYS AFTER A REQUEST FROM THE DEPARTMENT, ALL OF THE FOLLOWING  
14 INFORMATION, AS APPLICABLE:

15 (A) A LIST OF EACH DENTIST, DENTAL HYGIENIST, AND DENTAL  
16 ASSISTANT WHO WILL PROVIDE CARE AT OR WITHIN THE MOBILE DENTAL  
17 FACILITY, INCLUDING, AT A MINIMUM, EACH INDIVIDUAL'S NAME, ADDRESS,  
18 TELEPHONE NUMBER, AND STATE OCCUPATIONAL LICENSE NUMBER.

19 (B) A WRITTEN PLAN AND PROCEDURE FOR PROVIDING EMERGENCY  
20 FOLLOW-UP CARE TO EACH PATIENT TREATED AT THE MOBILE DENTAL  
21 FACILITY.

22 (C) A SIGNED MEMORANDUM OF AGREEMENT BETWEEN THE OPERATOR AND  
23 AT LEAST 1 DENTIST OR PARTY WHO CAN ARRANGE FOR OR PROVIDE FOLLOW-  
24 UP SERVICES AT A SITE WITHIN A REASONABLE DISTANCE OF THE LOCATION  
25 WHERE THE OPERATOR PROVIDES DENTAL SERVICES TO A PATIENT. THE  
26 MEMORANDUM OF AGREEMENT SHALL STATE THAT THE CONTRACTING DENTIST OR  
27 PARTY WILL ACCEPT PATIENTS TREATED AT THE MOBILE DENTAL FACILITY

1 FOR FOLLOW-UP DENTAL SERVICES, IF THE OPERATOR DOES NOT PROVIDE FOR  
2 FOLLOW-UP SERVICES AT A PERMANENT LOCATION WITHIN A REASONABLE  
3 DISTANCE OF THE LOCATION WHERE THE OPERATOR PROVIDED DENTAL  
4 SERVICES TO THE PATIENT.

5 (D) IF THE OPERATOR PROVIDES ONLY PREVENTATIVE DENTAL  
6 SERVICES, A SIGNED MEMORANDUM OF AGREEMENT FOR REFERRAL FOR  
7 COMPREHENSIVE DENTAL SERVICES BETWEEN THE OPERATOR AND A DENTIST OR  
8 PARTY WHO CAN ARRANGE FOR OR PROVIDE COMPREHENSIVE DENTAL SERVICES  
9 AT A SITE WITHIN A REASONABLE DISTANCE OF THE LOCATION WHERE THE  
10 OPERATOR PROVIDES PREVENTATIVE DENTAL SERVICES TO A PATIENT.

11 (E) FOR A SCHOOL-BASED OR SCHOOL-LINKED SETTING, A WRITTEN  
12 PLAN THAT SHOWS COMPLIANCE WITH THE GUIDELINES JOINTLY DEVELOPED BY  
13 THE DEPARTMENT OF COMMUNITY HEALTH AND THE MICHIGAN DENTAL  
14 ASSOCIATION FOR A SCHOOL-BASED ORAL HEALTH PROGRAM.

15 (F) A COPY OF THE DRIVER LICENSE AND OFFICIAL MOTOR VEHICLE  
16 DRIVING RECORD FROM THE SECRETARY OF STATE OF EVERY INDIVIDUAL WHO  
17 DRIVES OR TRANSPORTS THE MOBILE DENTAL FACILITY OR THE MOBILE  
18 DENTAL FACILITY'S PORTABLE EQUIPMENT.

19 (G) PROOF OF GENERAL LIABILITY INSURANCE COVERING THE MOBILE  
20 DENTAL FACILITY THAT IS ISSUED BY A LICENSED INSURANCE CARRIER  
21 AUTHORIZED TO DO BUSINESS IN THIS STATE.

22 (2) AN OPERATOR SHALL MEET ALL OF THE FOLLOWING REQUIREMENTS:

23 (A) COMPLY WITH ALL APPLICABLE FEDERAL, STATE, AND LOCAL LAWS,  
24 REGULATIONS, AND ORDINANCES, INCLUDING, BUT NOT LIMITED TO, THOSE  
25 CONCERNING RADIOGRAPHIC EQUIPMENT, FLAMMABILITY, SANITATION,  
26 ZONING, AND CONSTRUCTION STANDARDS, INCLUDING STANDARDS RELATING TO  
27 REQUIRED ACCESS FOR PERSONS WITH DISABILITIES.

1 (B) MAINTAIN CONTINUOUSLY AVAILABLE AT THE MOBILE DENTAL  
2 FACILITY A COMMUNICATION DEVICE FOR MAKING AND RECEIVING TELEPHONE  
3 CALLS AND SUMMONING EMERGENCY SERVICES.

4 (C) MAKE IMMEDIATELY AVAILABLE, UPON REQUEST FROM ANY PERSON,  
5 A COPY OF THE LICENSE OF EACH DENTIST, DENTAL HYGIENIST, OR DENTAL  
6 ASSISTANT WORKING AT THE MOBILE DENTAL FACILITY.

7 (D) MAKE IMMEDIATELY AVAILABLE, AT THE MOBILE DENTAL FACILITY,  
8 UPON REQUEST FROM ANY PERSON, A COPY OF THE PERMIT REQUIRED UNDER  
9 THIS PART.

10 (3) THE OPERATOR OF A MOBILE DENTAL FACILITY AND THE  
11 OPERATOR'S AGENTS AND EMPLOYEES SHALL COMPLY WITH ALL FEDERAL,  
12 STATE, AND LOCAL LAWS, ADMINISTRATIVE RULES, REGULATIONS, AND  
13 ORDINANCES APPLICABLE TO THE MOBILE DENTAL FACILITY AND TO THE  
14 INDIVIDUALS AND ENTITIES THAT PROVIDE THE PREVENTATIVE DENTAL  
15 SERVICES OR COMPREHENSIVE DENTAL SERVICES AT THE MOBILE DENTAL  
16 FACILITY, INCLUDING, BUT NOT LIMITED TO, THOSE CONCERNING  
17 SANITATION, INFECTIOUS WASTE MANAGEMENT AND DISPOSAL, OCCUPATIONAL  
18 SAFETY, AND DISEASE PREVENTION.

19 (4) A MOBILE DENTAL FACILITY SHALL HAVE READY ACCESS TO ALL OF  
20 THE FOLLOWING FUNCTIONAL EQUIPMENT:

21 (A) AN INSTRUMENT STERILIZATION SYSTEM.

22 (B) POTABLE HOT AND COLD WATER, HAND SANITIZER, OR BOTH.

23 (C) TOILET FACILITIES.

24 (D) A RAMP OR LIFT IF NECESSARY FOR ACCESS BY INDIVIDUALS WITH  
25 LIMITED MOBILITY.

26 (E) SMOKE AND CARBON MONOXIDE DETECTORS, AS APPLICABLE.

27 (F) RADIOGRAPHIC EQUIPMENT PROPERLY REGISTERED AND INSPECTED,

1 AS APPLICABLE, BY THE STATE.

2 (G) A COMMUNICATION DEVICE CONTINUOUSLY AVAILABLE FOR MAKING  
3 AND RECEIVING TELEPHONE CALLS AND SUMMONING EMERGENCY SERVICES.

4 (5) A MOBILE DENTAL FACILITY SHALL HAVE READY ACCESS TO THE  
5 FOLLOWING DENTAL EQUIPMENT:

6 (A) PROPER LIGHTING.

7 (B) PORTABLE SUCTION.

8 (C) HAND PIECES.

9 (D) DENTAL INSTRUMENTS.

10 (E) SUPPLIES.

11 (6) A DENTIST LICENSED UNDER THIS ACT SHALL BE PRESENT IN A  
12 MOBILE DENTAL FACILITY AT ANY TIME COMPREHENSIVE DENTAL SERVICES  
13 ARE PERFORMED ON A PATIENT. A DENTIST NEED NOT BE PRESENT WHILE  
14 ONLY PREVENTATIVE DENTAL SERVICES ARE PERFORMED.

15 (7) IF THE MOBILE DENTAL FACILITY IS PART OF A PROGRAM THAT  
16 PROVIDES COMPREHENSIVE DENTAL SERVICES AND IS ESTABLISHED UNDER A  
17 MEMORANDUM OF AGREEMENT, THE MOBILE DENTAL FACILITY MAY PROVIDE  
18 IMAGERY SERVICES.

19 SEC. 21609. (1) THE OPERATOR OR HIS OR HER DESIGNEE SHALL  
20 ESTABLISH A WRITTEN TREATMENT PLAN FOR, AND PROVIDE A COPY TO, EACH  
21 PATIENT WHO RECEIVES DENTAL SERVICES AT A MOBILE DENTAL FACILITY.

22 (2) THE WRITTEN TREATMENT PLAN REQUIRED UNDER SUBSECTION (1)  
23 SHALL ADDRESS COMPREHENSIVE DENTAL SERVICES TO BE PROVIDED EITHER  
24 BY THE MOBILE DENTAL FACILITY OR THROUGH AN AFFILIATED DENTIST,  
25 DENTAL OFFICE, OR PARTY WHO CAN ARRANGE FOR OR PROVIDE THOSE  
26 SERVICES UNDER A MEMORANDUM OF AGREEMENT WITH THE OPERATOR OF THE  
27 MOBILE DENTAL FACILITY.



1           (3) IF THE WRITTEN TREATMENT PLAN REQUIRED UNDER SUBSECTION  
2     (1) CANNOT BE COMPLETED DURING THE PATIENT'S INITIAL VISIT TO THE  
3     MOBILE DENTAL FACILITY, THE OPERATOR OR HIS OR HER DESIGNEE SHALL  
4     MAKE A REASONABLE ATTEMPT TO SCHEDULE ADDITIONAL APPOINTMENTS TO  
5     COMPLETE DENTAL SERVICES EITHER AT THE MOBILE DENTAL FACILITY OR  
6     WITH AN AFFILIATED DENTIST, DENTAL OFFICE, OR PARTY WHO CAN ARRANGE  
7     FOR OR PROVIDE THOSE DENTAL SERVICES UNDER A MEMORANDUM OF  
8     AGREEMENT WITH THE MOBILE DENTAL FACILITY, AT INTERVALS NOT TO  
9     EXCEED 90 DAYS, UNTIL THE TREATMENT PLAN IS COMPLETED OR THE  
10    PATIENT CEASES TREATMENT. IF THE OPERATOR OR HIS OR HER DESIGNEE IS  
11    UNABLE TO MAKE ARRANGEMENTS FOR CONTINUED TREATMENT, HE OR SHE  
12    SHALL PLACE WRITTEN DOCUMENTATION OF THE ATTEMPTS IN THE PATIENT  
13    RECORD AND MAKE THE DOCUMENTATION AVAILABLE UPON THE REQUEST OF THE  
14    DEPARTMENT. A COPY OF THE DOCUMENTATION SHALL BE SENT TO THE  
15    PATIENT. FAILURE OF THE OPERATOR OR HIS OR HER DESIGNEE TO COMPLY  
16    WITH THE PROVISIONS OF THIS SUBSECTION IS UNPROFESSIONAL CONDUCT BY  
17    PATIENT ABANDONMENT AND IS CAUSE FOR DISCIPLINARY ACTION BY THE  
18    BOARD OF DENTISTRY.

19           (4) THE OPERATOR SHALL OBTAIN THE PATIENT'S WRITTEN CONSENT,  
20    OR THE CONSENT OF A PARENT OR GUARDIAN OF A PATIENT WHO IS A MINOR  
21    OR LEGALLY INCAPABLE OF CONSENT, BEFORE PROVIDING ANY DENTAL  
22    SERVICES TO A PATIENT AT A MOBILE DENTAL FACILITY.

23           (5) THE FORM FOR THE WRITTEN CONSENT REQUIRED UNDER SUBSECTION  
24    (4) SHALL INCLUDE, AT A MINIMUM, ALL OF THE FOLLOWING:

25           (A) THE NAME OF THE MOBILE DENTAL FACILITY PROVIDING DENTAL  
26    SERVICES.

27           (B) THE PERMANENT ADDRESS OF THE MOBILE DENTAL FACILITY.

1 (C) THE TELEPHONE NUMBER THAT A PATIENT MAY CALL 24 HOURS A  
2 DAY FOR EMERGENCY CALLS.

3 (D) A LIST OF THE SERVICES TO BE PROVIDED.

4 (E) A STATEMENT INDICATING THAT THE PATIENT, PARENT, OR  
5 GUARDIAN UNDERSTANDS THAT TREATMENT MAY BE OBTAINED AT THE  
6 PATIENT'S DENTAL HOME RATHER THAN AT A MOBILE DENTAL FACILITY.

7 (6) IF THE PATIENT IS A MINOR OR INCAPACITATED PERSON, THE  
8 WRITTEN CONSENT REQUIRED UNDER SUBSECTION (4) SHALL ALSO INCLUDE  
9 BOTH OF THE FOLLOWING:

10 (A) IF THE MINOR OR INCAPACITATED PERSON HAS HAD DENTAL  
11 SERVICES IN THE PAST 12 MONTHS, THE NAME AND ADDRESS OF THE DENTIST  
12 OR DENTAL OFFICE THAT PROVIDED THE DENTAL SERVICES.

13 (B) A STATEMENT INDICATING THAT THE MINOR OR INCAPACITATED  
14 PERSON MAY OBTAIN ANY OR ALL DENTAL SERVICES AT HIS OR HER DENTAL  
15 HOME, AND THAT OBTAINING DUPLICATE SERVICES AT A MOBILE DENTAL  
16 FACILITY MAY AFFECT BENEFITS THAT HE OR SHE RECEIVES FROM PRIVATE  
17 INSURANCE, A STATE OR FEDERAL PROGRAM, OR OTHER THIRD-PARTY  
18 PROVIDER OF DENTAL BENEFITS.

19 (7) EACH PERSON RECEIVING DENTAL SERVICES AT A MOBILE DENTAL  
20 FACILITY SHALL RECEIVE ALL OF THE FOLLOWING INFORMATION IN WRITING:

21 (A) THE NAME OF THE DENTIST, DENTAL HYGIENIST, OR DENTAL  
22 ASSISTANT WHO PROVIDED THE DENTAL SERVICES TO THE PATIENT.

23 (B) THE TELEPHONE NUMBER OR EMERGENCY CONTACT NUMBER TO REACH  
24 THE MOBILE DENTAL FACILITY OR OPERATOR, OR BOTH, IN CASE OF  
25 EMERGENCY.

26 (C) A LIST OF THE DENTAL SERVICES RENDERED, INCLUDING DENTAL  
27 PROCEDURE CODE, FEE, AND TOOTH NUMBERS.

1 (D) A DESCRIPTION OF ANY FURTHER DENTAL SERVICES THAT ARE  
2 ADVISABLE OR THAT HAVE BEEN SCHEDULED.

3 (E) A REFERRAL TO A SPECIALIST, DENTIST, OR PARTY WHO CAN  
4 ARRANGE FOR OR PROVIDE COMPREHENSIVE DENTAL SERVICES IF THE MOBILE  
5 DENTAL FACILITY IS UNABLE TO PROVIDE THE NECESSARY COMPREHENSIVE  
6 DENTAL SERVICES. THE REFERRAL SHALL INCLUDE ALL IMAGERY RECORDS THE  
7 MOBILE DENTAL FACILITY OBTAINED FOR THE PATIENT.

8 (F) A COPY OF THE CONSENT FORM REQUIRED UNDER THIS SECTION  
9 AUTHORIZING ADDITIONAL TREATMENT.

10 (8) AN OPERATOR WHO FAILS TO COMPLY WITH APPLICABLE FEDERAL,  
11 STATE, OR LOCAL LAWS AND RULES GOVERNING THE PRACTICE OF DENTISTRY,  
12 DENTAL HYGIENE, OR ANY OF THE REQUIREMENTS OF THIS ARTICLE IS  
13 SUBJECT TO DISCIPLINARY ACTION FOR UNETHICAL OR UNPROFESSIONAL  
14 CONDUCT AND MAY BE SUBJECT TO DISCIPLINARY ACTION BY THE DEPARTMENT  
15 OR BOARD OF DENTISTRY, AS APPLICABLE.

16 SEC. 21611. (1) THE OPERATOR SHALL SUBMIT AN ANNUAL REPORT ON  
17 ACTIVITIES PERFORMED AT THE MOBILE DENTAL FACILITY DURING THE 1-  
18 YEAR PERIOD FOLLOWING APPROVAL OF THE APPLICATION UNDER THIS PART  
19 AND FOR EACH 1-YEAR PERIOD THEREAFTER. THE REPORT SHALL BE  
20 SUBMITTED TO THE DEPARTMENT, THE DEPARTMENT OF COMMUNITY HEALTH,  
21 AND THE BOARD OF DENTISTRY NOT LATER THAN 60 DAYS AFTER THE  
22 EXPIRATION OF EACH 1-YEAR PERIOD.

23 (2) AN ANNUAL REPORT REQUIRED UNDER SUBSECTION (1) SHALL  
24 INCLUDE ALL OF THE FOLLOWING INFORMATION:

25 (A) A LIST OF ALL LOCATIONS, INCLUDING STREET ADDRESS, CITY,  
26 AND STATE, WHERE ANY LEVEL OF DENTAL SERVICE WAS PROVIDED.

27 (B) THE DATES WHEN DENTAL SERVICES WERE PROVIDED.

1 (C) THE TOTAL NUMBER OF PATIENTS TREATED AT EACH LOCATION.

2 (D) THE TYPES OF DENTAL SERVICES PROVIDED, REPORTED IN A  
3 MANNER CONSISTENT WITH CENTER FOR MEDICARE AND MEDICAID SERVICES  
4 (CMS) FORM 416, USING APPROPRIATE DIAGNOSTIC, PREVENTATIVE, AND  
5 RESTORATIVE CODING FOR EACH DENTIST, DENTAL HYGIENIST, OR DENTAL  
6 ASSISTANT PROVIDING DENTAL SERVICES.

7 (E) A LIST OF THE CHANGES IN THE DENTISTS, DENTAL HYGIENISTS,  
8 OR DENTAL ASSISTANTS PROVIDING DENTAL SERVICES AT THE MOBILE DENTAL  
9 FACILITY.

10 SEC. 21613. (1) THE OPERATOR OR HIS OR HER DESIGNEE SHALL  
11 NOTIFY THE DEPARTMENT AND THE BOARD OF DENTISTRY NOT LATER THAN 30  
12 DAYS AFTER ANY OF THE FOLLOWING OCCURRENCES:

13 (A) A CHANGE IN OWNERSHIP OF THE MOBILE DENTAL FACILITY.

14 (B) A CHANGE IN A MEMORANDUM OF AGREEMENT REQUIRED UNDER  
15 SECTION 21607.

16 (C) A CHANGE IN THE ADDRESS OR TELEPHONE NUMBER OF THE MOBILE  
17 DENTAL FACILITY.

18 (D) CESSATION OF OPERATION OF THE MOBILE DENTAL FACILITY.

19 (2) UPON CESSATION OF OPERATION OF A MOBILE DENTAL FACILITY,  
20 THE OPERATOR SHALL DO ALL OF THE FOLLOWING:

21 (A) PROVIDE WRITTEN NOTICE TO ALL TREATMENT VENUES AND, UPON  
22 REQUEST, PROVIDE EVIDENCE OF THE WRITTEN NOTICE TO THE BOARD OF  
23 DENTISTRY.

24 (B) PROVIDE FOR AVAILABILITY OF EACH ACTIVE PATIENT'S DENTAL  
25 RECORDS BY 1 OF THE FOLLOWING METHODS:

26 (i) MAKE THE DENTAL RECORDS AVAILABLE TO THE PATIENT OR THE  
27 PATIENT'S PARENT OR GUARDIAN FROM THE MOBILE DENTAL FACILITY FOR

1 180 DAYS AFTER THE MOBILE DENTAL FACILITY CEASES OPERATION AND,  
2 UPON HIS OR HER REQUEST, TRANSFER THE RECORDS TO THE ACTIVE  
3 PATIENT, THE PATIENT'S PARENT OR GUARDIAN, OR ANOTHER DENTIST.

4 (ii) TRANSFER THE RECORDS TO ANOTHER DENTIST.

5 (C) NOTIFY EACH ACTIVE PATIENT OR THE PATIENT'S PARENT OR  
6 GUARDIAN THAT THE DENTAL RECORDS ARE AVAILABLE AS REQUIRED UNDER  
7 SUBDIVISION (B), INCLUDING THE NAME AND CONTACT INFORMATION FOR THE  
8 DENTIST IF THE RECORDS HAVE BEEN TRANSFERRED.

9 (D) UPON REQUEST FROM THE DEPARTMENT, PROVIDE DOCUMENTATION  
10 THAT A REASONABLE ATTEMPT WAS MADE TO CONTACT EACH ACTIVE PATIENT  
11 OR THE ACTIVE PATIENT'S PARENT OR GUARDIAN TO PROVIDE INFORMATION  
12 CONCERNING STORAGE AND RETRIEVAL OF THE PATIENT'S RECORDS.