BOARDS AND COMMISSIONS
Board of Dentistry
(Amended at ARRS Committee)

201 KAR 8:533. Licensure of dentists.

RELATES TO: KRS 39A.350-39A.366, 218A.205, 304.40-075, 313.010(9), 313.030, 313.254

STATUTORY AUTHORITY: KRS 218A.205, 313.021(1)(a), (b), (c), 313.035(1), (3), 313.254

NECESSITY, FUNCTION, AND CONFORMITY: KRS 313.035 and 218A.205 require the board to promulgate administrative regulations relating to requirements and procedures for the licensure of dentists. This administrative regulation establishes requirements and procedures for licensure of dentists.

Section 1. General Licensure Requirements. An applicant desiring initial licensure in Kentucky as a general dentist shall~~[dental licensure in the Commonwealth shall at a minimum]~~:

(1) Understand, read, speak, and write the English language with a comprehension and performance level equal to at least the ninth grade of education, verified by testing as necessary;

(2) Submit a completed, signed, and notarized Application for Dental Licensure with an attached applicant photo taken within the past six (6) months;

(3) Pay the fee required by 201 KAR 8:520;

(4) Not be~~[currently]~~ subject to disciplinary action pursuant to KRS Chapter 313 that would prevent licensure;

(5) Complete and pass the board's jurisprudence exam;

(6) Hold an active ~~[Provide proof of having current]~~ certification in cardiopulmonary resuscitation (CPR) or a more comprehensive program which meets or exceeds the American Heart Association Guidelines for CPR and ECC;

(7) Submit to a nationwide state and federal criminal background check by fingerprint through the Department of Kentucky State Police;

(8) Provide verification~~[within three (3) months of the date the application is received at the office of the board]~~ of any license to practice dentistry held previously or currently in any state or other licensing jurisdiction;

(9) Hold a Doctor of Medicine in Dentistry (DMD) or Doctor of Dental Surgery (DDS) degree from a dental school, college, or department of a university accredited by the ~~[Provide proof that the applicant is a graduate of a]~~ Commission on Dental Accreditation (CODA)~~[accredited dental school or college or dental department of a university]~~;

(10) Successfully complete ~~[Provide proof that the applicant has successfully completed Part I and Part II of]~~the National Board Dental Examination (NBDE) Part I and Part II or the Integrated National Board Dental Examination (INBDE)~~[, which is written and theoretical]~~, conducted by the Joint Commission on National Dental Examinations (JCNDE);~~[and]~~

(11) Provide a written explanation for any positive returns on a query of the National Practitioner Data Bank; and

(12) Complete all additional requirements for one (1) of the following:

(a) Licensure by clinical examination;

(b) Licensure by credentials; or

(c) Licensure by foreign training.

Section 2. Requirements for Licensure by Clinical Examination.

(1) An individual desiring initial licensure in Kentucky as a general dentist by clinical examination shall:

(a) ***[(1)]*** [~~Each individual desiring initial licensure as a dentist by examination shall complete~~] Complete all[~~ of the~~] requirements [~~listed~~]in Section 1 of this administrative regulation; and[~~.~~]

(b) ***[(2)]*** Successfully complete all components of one (1) of the following [~~Each individual desiring initial licensure as a dentist by examination shall successfully complete a~~] clinical examinations[~~examination~~] within the five (5) years preceding the filing of the application[~~. The board shall accept the following regional clinical examinations~~]:

1. ***[(a)]*** The examination of the Council of Interstate Testing Agencies (CITA);

2. ***[(b)]*** The examination of the Central Regional Dental Testing Service (CRDTS);

3. ***[(c)]*** The examination of the Commission on Dental Competency Assessments (CDCA);

4. ***[(d)]*** The examination of the States Resources for Testing and Assessments[~~Southern Regional Testing Agency~~] (SRTA);[~~ and~~]

5. ***[(e)]*** The examination of the Western Regional Examining Board (WREB); or

6. ***[(f)]*** The Dental Licensure Objective Structured Clinical Examination (DLOSCE) of the ***[Joint Commission on National Dental Examinations ( ]*** JCNDE ***[ )]***.

(2) ***[(3)]*** An individual applying more than two (2) years after graduating with a DDS or DMD, [~~An individual desiring initial licensure as a dentist by examination more than two (2) years after fulfilling all of the requirements of his or her CODA accredited dental education~~] shall:

(a) Hold a license to practice dentistry in good standing in another state or territory of the United States or the District of Columbia; or

(b) Complete a continuing education plan approved by the board [~~If the applicant does not hold a license to practice dentistry in good standing, complete a board approved refresher course prior to receiving a license to practice dentistry in the Commonwealth of Kentucky~~].

(3) ***[(4)]*** An applicant who has taken a clinical examination three (3) times and failed to achieve a passing score shall[~~ not be allowed to sit for the examination again until the applicant has~~]complete[~~completed and passed~~] a remediation plan approved by the board.

Section 3. Requirements for Licensure by Credentials. An individual desiring initial licensure in Kentucky as a general[~~Each individual desiring initial licensure as a~~] dentist by credentials shall:

(1) Complete all[~~ of the~~] requirements[~~ listed~~] in Section 1 of this administrative regulation;

(2) Successfully complete [~~Provide proof of having passed~~] a state, regional, or national clinical examination used to determine clinical competency in a state or territory of the United States or the District of Columbia; and

(3) Be licensed and actively practicing dentistry in a state or territory of the United States or the District of Columbia for a least [~~Provide proof that, for~~] five (5) of the six (6) years [~~immediately ~~]preceding the filing of the application[~~, the applicant has been engaged in the active practice of dentistry when he or she was legally authorized to practice dentistry in a state or territory of the United States or the District of Columbia if the qualifications for the authorization were equal to or higher than those of the Commonwealth of Kentucky~~].

Section 4. Requirements for Licensure by Foreign Training.

(1) An individual desiring initial licensure in Kentucky as a general dentist who is a graduate of a non-CODA accredited dental school, college , or department of a university

shall:

(a) ~~***(1)***~~ Complete all requirements in Section 1 of this administrative regulation **,** except for subsection (9);

(b) ~~***(2)***~~ Pass the Test of English as a Foreign Language (TOEFL) administered by the Educational Testing Service with a score of 650 on the paper-based test (PBT) or a score of 116 on the internet-based test (iBT), if English is not the applicant's primary language;

(c) ~~***(3)***~~ Successfully complete two (2) years of postgraduate training in a CODA accredited general dentistry program;

(d) ~~***(4)***~~ Submit a letter of satisfactory program completion from the program director of each postgraduate training site; and

(e) ~~***(5)***~~ Successfully complete a clinical examination required by Section 2 ***(1)(b)*** ~~***(2)***~~ of this administrative regulation within five (5) years preceding the filing of the application.

(2) ~~***(6)***~~ An individual applying for dental licensure more than two (2) years after completing a CODA accredited general dentistry program shall:

(a) Hold a license to practice dentistry in good standing in another state or territory of the United States or the District of Columbia; or

(b) Complete a continuing education plan approved by the board.

Section 5. Requirements for Student Limited Licensure.

(1) ~~(1)~~ An ~~Each~~ individual desiring limited licensure in Kentucky as a student~~ limited license~~ shall:

(a) ~~***(1)***~~ ~~(a)~~ Complete all~~ of the~~ requirements~~ listed~~ in Section 1 of this administrative regulation**,**except for~~with the exception of~~ subsections (9) and (10);

(b) ~~***(2)***~~ ~~(b)~~ Submit ~~Provide~~ a letter from the dean or program director of a postgraduate, residency, or fellowship program in ~~the Commonwealth of~~ Kentucky stating that the applicant has been accepted into the program and the expected date of completion;

(c) ~~***(3)***~~ ~~(c)~~ Submit a signed Statement Regarding Student Licensure Limitations; and

(d) ~~***(4)***~~ ~~(d)~~ Submit an official final transcript of the applicant's dental coursework with the degree posted.

(2) ~~***(5)***~~ ~~(2)~~ A student limited license holder ~~An individual licensed under this section~~ shall only practice dentistry in conjunction with programs of the dental school where the individual is a student and shall only provide professional services to patients of these programs.

(3) ~~***(6)***~~ ~~(3)~~ A student limited license may be renewed in accordance with Section 10 of this administrative regulation **,** but ~~Licenses issued under this section shall be renewed with all other dental licenses issued by the board and~~ shall automatically expire ***if~~when~~*** the student graduates from or exits the program~~upon the termination of the holder's status as a student~~.

(4) ~~***(7)***~~ ~~(4)~~ A program enrolling~~ an individual holding~~ a student limited license holder shall notify the board in writing of the date the student graduates from or exits the program.

(5) ~~***(8)***~~ ~~(5)~~ Nothing in this section shall prohibit:

(a) A student from performing a dental procedure~~operation~~ under the direct supervision of a competent instructor within the dental school, college, or department of a university or private practice facility approved by the board. The board may authorize a student ~~of any dental college, school, or department of a university~~ to practice dentistry within a~~in any~~ state or municipal institution,~~ or~~ public school,~~ or under the~~ board of health,~~ or in a~~ public clinic, or~~ a~~ charitable entity~~institution~~. A

fee shall not be accepted by the student beyond the expenses covered by a[~~provided by the~~] stipend;

(b) A student limited license holder from working under the general supervision of a licensed dentist within the confines of the postgraduate training program; and

(c) A volunteer health practitioner from providing services under KRS 39A.350-39A.366.

Section 6. [~~Section 5.~~] Requirements for Faculty Limited Licensure.

(1) [~~(1)~~] An [~~Each~~] individual desiring limited licensure in Kentucky as a faculty member[~~limited license~~] shall:

(a) [(1)] [~~(a)~~] Complete all[~~ of the~~] requirements [~~listed ~~]in Section 1 of this administrative regulation with the exception of subsections (9) and (10);

(b) [(2)] [~~(b)~~] Submit [~~Provide~~] a letter from the dean or program director of a Kentucky[~~the~~] dental school stating that the applicant has received[~~showing~~] a faculty appointment[~~ with one (1) of the Commonwealth's dental schools~~];

(c) [(3)] [~~(c)~~] Submit a signed Statement Regarding Faculty Licensure Limitations; and

(d) [(4)] [~~(d)~~] Submit an official final transcript of the applicant's[~~his or her~~] dental coursework with the degree posted.

(2) [(5)] [~~(2)~~] A faculty limited license holder [~~An individual licensed under this section~~] shall only practice dentistry in conjunction with programs of the dental school where the individual is a faculty member and shall only provide professional services to patients of these programs.

(3) [(6)] [~~(3)~~] A faculty limited license may be renewed in accordance with Section 10 of this administrative regulation **,** but [~~Licenses issued under this section shall be renewed with all other dental licenses issued by the board and~~] shall automatically expire ***if[~~when~~]*** the licensee leaves their faculty position[~~upon the termination of the holder's status as a faculty member~~].

(4) [(7)] [~~(4)~~] A program employing[~~ an individual holding~~] a faculty limited license holder shall notify the board in writing of the date the licensee leaves ***his or her[~~their~~]*** faculty position[~~exits the program~~].

[~~Section 6.~~] [~~Requirements for Licensure of Foreign Trained Dentists.~~]

[~~(1)~~] [~~Each individual desiring licensure as a dentist who is a graduate of a non-CODA accredited dental program shall successfully complete two (2) years of postgraduate training in a CODA accredited general dentistry program and shall:~~]

[~~(a)~~] [~~Provide proof of having passed the Test of English as a Foreign Language (TOEFL) administered by the Educational Testing Service with a score of 650 on the paper-based test (PBT) or a score of 116 on the internet-based test (iBT), if English is not the applicant's native language;~~]

[~~(b)~~] [~~Submit a completed, signed, and notarized Application for Dental Licensure with an attached applicant photo taken within the past six (6) months;~~]

[~~(c)~~] [~~Pay the fee required by 201 KAR 8:520;~~]

[~~(d)~~] [~~Not be currently subject to disciplinary action pursuant to KRS Chapter 313 that would prevent licensure;~~]

[~~(e)~~] [~~Complete and pass the board's jurisprudence exam;~~]

[~~(f)~~] [~~Provide proof of having current certification in cardiopulmonary resuscitation (CPR) that meets or exceeds the American Heart Association Guidelines for CPR and ECC;~~]

[~~(g)~~] [~~Submit to a state and federal criminal background check by fingerprint through the Department of Kentucky State Police;~~]

[~~(h)~~] [~~Provide verification within three (3) months of the date the application is received at the office of the board of any license to practice dentistry held previously or~~

~~currently in any state or jurisdiction;]~~

~~[(i)] [Provide proof of having successfully completed two (2) years postgraduate training in a CODA accredited general dentistry program;]~~

~~[(j)] [Submit one (1) letter of recommendation from the program director of each training site;]~~

~~[(k)] [Provide proof of successful completion of Part I and Part II of the National Board Dental Examination, which is written and theoretical, conducted by the Joint Commission on National Dental Examinations within the five (5) years preceding application for licensure;]~~

~~[(l)] [Provide proof of successfully completing within the five (5) years prior to application a clinical examination required by Section 2(2) of this administrative regulation; and]~~

~~[(m)] [Provide a written explanation for any positive returns on a query of the National Practitioner Data Bank.]~~

~~[(2)] [An individual desiring initial licensure as a dentist who is a graduate of a non-CODA accredited dental program and applies more than two (2) years after fulfilling all of the requirements of his or her postgraduate training in a CODA accredited general dentistry program shall:]~~

~~[(a)] [Hold a license to practice dentistry in good standing in another state or territory of the United States or the District of Columbia; or]~~

~~[(b)] [If the applicant does not hold a license to practice dentistry in good standing, complete a board approved refresher course prior to receiving a license to practice dentistry in the Commonwealth of Kentucky.]~~

Section 7. Requirements for Charitable Limited Dental Licensure.

(1) ~~[(1)]~~ An individual desiring limited licensure in Kentucky to provide charitable dental services ~~[Each individual desiring a charitable limited license]~~ shall:

(a) [(1)] ~~[(a)]~~ Understand, read, speak, and write the English language with a comprehension and performance level equal to at least the ninth grade of education, verified by testing as necessary;

(b) [(2)] ~~[(b)]~~ Submit a completed, signed, and notarized Application for Charitable~~[Dental]~~ Limited Licensure with an attached applicant photo taken within the past six (6) months;

(c) [(3)] ~~[(c)]~~ Pay the fee required by 201 KAR 8:520;

(d) [(4)] ~~[(d)]~~ Not be subject to disciplinary action pursuant to KRS Chapter 313 that would prevent licensure;

(e) [(5)] ~~[(e)]~~ Hold ~~[Have]~~ a license to practice dentistry in good standing in another state or territory of the United States or the District of Columbia; and

(f) [(6)] ~~[(f)]~~ Provide a written explanation for any positive returns on a query of the National Practitioner Data Bank.

(2) [(7)] ~~[(2)]~~ A charitable limited dental license holder ~~[An individual licensed under this section]~~ shall:

(a) Work only with charitable entities registered with the Cabinet for Health and Family Services that have met the requirements of KRS 313.254 and 201 KAR 8:581;

(b) Only perform procedures allowed by KRS 313.254(4) and (5) which shall be completed within the duration of the charitable event;

(c) Not prescribe any medications while practicing in Kentucky;

(d) Be eligible for the provisions of medical malpractice insurance procured under KRS 304.40-075; and

(e) ~~[(d)]~~ Perform these duties without expectation of compensation or charge to the individual, and without payment or reimbursement by any governmental agency or insurer.~~[;]~~

[(c)] [Have a charitable limited license that shall be valid for no more than two (2) years and shall expire during the regular dental renewal cycle; and]

[(f)] [Comply with reciprocity requirements if applicable.]

[1.] [A state that extends a reciprocal agreement shall comply with this section.]

[2.] [An individual shall notify the sponsor of a charitable clinic and the board of the intent to conduct or participate in the clinic.]

[3.] [An individual conducting or participating in a charitable clinic shall have a license to practice dentistry in the state in which the dentist practices.]

[(3)] [A dentist licensed under this section shall not be allowed to prescribe any medications while practicing in the Commonwealth.]

Section 8. Requirements for Specialty Licensure. An individual[Each individual] desiring initial licensure as a dental specialist in Kentucky as defined by KRS 313.010(9) shall:

(1) Submit a completed, signed, and notarized Application for Specialty ***Dental*** Licensure with an attached applicant photo taken within the past six (6) months;

(2) Pay the fee required by 201 KAR 8:520;

(3) Hold an active Kentucky license to practice general dentistry prior to being issued a specialty license; and

(4) Successfully complete [Submit satisfactory evidence of completing] a CODA accredited graduate or postgraduate specialty program after graduating[graduation] from a dental school.

Section 9. [Minimum]Continuing Education Requirements.

(1) A Kentucky licensed dentist shall complete thirty (30) hours of continuing education during the two (2) year licensure period defined by KRS 313.030(2) **,** except in the following cases:

(a) [(1)] A licensee who was issued a new or reinstated license in the second year of the current biennial license period shall only complete one-half the required hours for that period;

(b) [(2)] A licensee who graduated in the first year of the current biennial license period shall only complete one-half the required hours for that period;

(c) [(3)] A licensee who graduated in the second year of the current biennial license period shall not be required to complete continuing education hours for that period;

(d) [(4)] A charitable limited license holder shall not be required to complete continuing education hours; or

(e) [(5)] A licensee may be granted a hardship waiver or deferment if ***the [such a]*** request is submitted to and approved by the board.

[(1)] [Each individual desiring renewal of an active dental license shall complete thirty (30) hours of continuing education that relates to or advances the practice of dentistry and would be useful to the licensee's practice.]

(2) [(6)] [(2)] Acceptable continuing education content[hours] shall include[course content designed to increase]:

(a) Competency in treating patients who are medically compromised or who experience medical emergencies during the course of dental treatment;

(b) Pharmaceutical [Knowledge of pharmaceutical] products and[the protocol of the] proper use protocols of medications;

(c) Competence to diagnose oral pathology;

(d) Awareness of currently accepted methods of infection control;

(e) Basic [Knowledge of basic] medical and scientific subjects[including biology, physiology, pathology, biochemistry, pharmacology, epidemiology, and public health];

(f) Clinical [Knowledge of clinical] and technological subjects;

(g) Patient [Knowledge of subjects pertinent to patient] management, safety, and oral healthcare;

(h) Mass ~~[Competency in assisting in mass]~~ casualty or mass immunization situations;

(i) Clinical dentistry performed on a charitable or volunteer basis~~[skills through the volunteer of clinical charitable dentistry that meets the requirements of KRS 313.254]~~;

(j) Business ~~[Knowledge of office business]~~ operations and best practices; and~~[or]~~

(k) Dental ~~[Participation in dental]~~ association or society business meetings.

(3) [(7)] ~~[(3)]~~ The thirty (30) hours of continuing education shall include:

(a) A minimum of ten (10) hours~~[shall be]~~ taken in a live interactive presentation format***;[.]***

(b) ~~[(4)]~~ A maximum of ten (10) hours~~[total may be taken]~~ that meet the requirements of subsection ***(2)[(4)]***~~[(2)]~~(i) - (k) of this section***; and[.]***

(c) ~~[(5)]~~ A minimum of three (3) hours~~[of continuing education shall be taken]~~ in the use of the Kentucky All Schedule Prescription Electronic Reporting System (KASPER), pain management, or addiction disorders.

(4) [(8)] ~~[(6)]~~ Dentists who hold a board-issued sedation permit shall also meet the continuing education requirements of 201 KAR 8:550, Section 8.

(5) [(9)] ~~[(7)]~~ All continuing education hours shall be documented by~~[verified by the receipt of]~~ a certificate of completion or ~~[certificate of]~~attendance bearing:

(a) A ~~[The]~~ signature ~~[of]~~or other verification of~~[by]~~ the provider;

(b) The name of the licensee in attendance;

(c) The title of the course or meeting attended or completed;

(d) The date of attendance or completion;

(e) The number of hours earned; and

(f) Evidence of the method of delivery if the course was taken in a live interactive presentation format.

(6) [(10)] ~~[(8)]~~ The licensee shall be responsible for obtaining the qualifying documentation of continuing education ~~[It shall be the sole responsibility of the individual licensee to obtain documentation]~~ from the provider or sponsoring organization~~[verifying participation as established in subsection (7) of this section]~~ and to retain those documents~~[the documentation]~~ for a minimum of five (5) years.

(7) [(11)] ~~[(9)]~~ During the ~~[At]~~ license renewal process, licensees~~[each licensee]~~ shall attest to their compliance~~[the fact that he or she has complied]~~ with the requirements of this section.

(8) [(12)] ~~[(10)]~~ Licensees ~~[Each licensee]~~ shall be subject to audit of their compliance with the requirements of this section~~[proof of continuing education compliance by the board]~~.

Section 10. ~~[Requirements for]~~Renewal of a Dental License.

(1) ~~[(1)]~~ All dental licenses issued by the board shall expire on December 31 of odd-numbered years and ***shall [must]*** be renewed to remain active. A licensee ~~[Each individual]~~ desiring renewal of an active general, specialty, student limited, or faculty limited dental license shall:

(a) [(1)] ~~[(a)]~~ Submit a~~[signed,]~~ completed and signed Application for Renewal of Dental Licensure;

(b) [(2)] ~~[(b)]~~ Pay the fee required by 201 KAR 8:520;

(c) [(3)] ~~[(c)]~~ Maintain an active~~[, with no more than a thirty (30) day lapse, CPR]~~ certification in CPR or a more comprehensive program that meets or exceeds the American Heart Association Guidelines for CPR and ECC~~[unless a hardship waiver is approved by the board]~~; and

(d) [(4)] ~~[(d)]~~ Meet the continuing education requirements~~[as provided for]~~ in Section 9 of this administrative regulation~~[except in the following cases:]~~

~~[1.] [If a hardship waiver has been submitted to and is subsequently approved by the board;]~~

[2.] [If the licensee graduated in the first year of the biennial license period, the licensee shall complete one-half (1/2) of the hours as outlined in Section 9 of this administrative regulation; and]

[3.] [If the licensee graduated in the second year of the biennial license period, the licensee shall not be required to complete the continuing education requirements outlined in Section 9 of this administrative regulation].

(2) ***[(5)]*** [(2)] [If]A licensee who has not actively practiced dentistry in the two (2)[consecutive] years preceding the filing of the renewal application shall complete a continuing education plan approved by the board[, he or she shall complete and pass a board approved refresher course] prior to resuming the active practice of dentistry.

(3) ***[(6)]*** A licensee desiring renewal of a charitable limited dental license shall repeat the initial licensure process required by Section 7 of this administrative regulation.

Section 11. Retirement of a Dental License.

(1) [(1)] A licensee [Each individual] desiring to no longer hold an active dental license in Kentucky[retirement of a dental license] shall submit a completed and signed Retirement of License Form.

(2) ***[(1)]*** [(2)] Upon receipt of this form, the board shall send written confirmation of retirement to the address provided[by the licensee on the Retirement of License form].

(3) ***[(2)]*** [(3)] A licensee shall not retire a license that has[a] pending disciplinary action against it.

(4) ***[(3)]*** [(4)] A license that is not properly retired or renewed shall be considered expired for reinstatement purposes [Each retirement shall be effective upon the processing of the completed and signed Retirement of License Form by the board].

Section 12. Reinstatement of a Dental License.

(1) [(1)] A former licensee [Each individual] desiring reinstatement of an expired or[a] properly retired dental license in Kentucky shall:

(a) ***[(1)]*** [(a)] Submit a completed, signed, and notarized Application to Reinstate [a]Dental or Dental Hygiene Licensure[License] with an attached applicant photo taken within the past six (6) months;

(b) ***[(2)]*** [(b)] Pay the fee required by 201 KAR 8:520;

(c) ***[(3)]*** [(c)] Hold an active [Show proof of having current] certification in CPR or a more comprehensive program that meets or exceeds the American Heart Association Guidelines for CPR and ECC;

(d) ***[(4)]*** [(d)] Provide verification[within three (3) months of the date the application is received at the office of the board] of any license to practice dentistry obtained[held previously or currently] in any state or other licensing jurisdiction since the applicant was first licensed in Kentucky;

(e) ***[(5)]*** [(e)] Submit to a nationwide state and federal criminal background check by fingerprint through the Department of Kentucky State Police; and

(f) ***[(6)]*** [(f)] Provide a written explanation for any positive returns on a query of the National Practitioner Data Bank.

(2) ***[(7)]*** [(2)] An [If an individual applies to reinstate a license within two (2) years of when the license was last active, the individual shall provide proof of having met the continuing education requirements as outlined in Section 9 of this administrative regulation within those two (2) years.]

[(3)] [If the] applicant who has not actively practiced dentistry in the two (2)[consecutive] years [immediately]preceding the filing of the reinstatement application[, the applicant] shall complete[and pass] a continuing education plan[refresher course] approved by the board prior to resuming the active practice of dentistry.

(3) ***[(8)]*** A former licensee who applies to reinstate an expired license that was not properly retired shall be subject to:

(a) The expired license reinstatement penalties in 201 KAR 8:520 if applying less than two (2) years from when the license was last active; or

(b) The same reinstatement fees as a properly retired license if applying more than two (2) years from when the license was last active.

~~[(4)] [If a license is reinstated in the first year of the biennial license period, the licensee shall complete all of the continuing education requirements as outlined in Section 9 of this administrative regulation prior to the renewal of the license.]~~

~~[(5)] [If a license is reinstated in the second year of the biennial license period, the licensee shall complete one-half (1/2) of the hours as outlined in Section 9 of this administrative regulation prior to the renewal of the license.]~~

Section 13. ~~[Requirements for]~~Verification of Licensure. An~~[Each]~~ individual desiring an official verification of a dental license held currently or previously in Kentucky shall:

(1) Submit a signed and completed Verification of Licensure or Registration Form; and

(2) Pay the fee required by 201 KAR 8:520.

Section 14. ~~[Requesting a Duplicate License. Each individual desiring a duplicate dental license shall:]~~

~~[(1)] [Submit a signed and completed Duplicate License or Registration Request Form; and]~~

~~[(2)] [Pay the fee required by 201 KAR 8:520.]~~

~~[Section 15.]~~ Issuance of Initial Licensure. Upon an applicant's completion of all~~[If an applicant has completed all of the]~~ requirements for dental licensure within six (6) months of the date the application was received~~[at the office of the board]~~, the board shall:

(1) Issue a license in sequential numerical order; or

(2) Deny licensure due to a violation of KRS Chapter 313 or 201 KAR Chapter 8.

Section 15. ~~[Section 16.]~~ Incorporation by Reference.

(1) The following material is incorporated by reference:

(a) "Application for Charitable ~~[Dental]~~Limited Licensure", January 2024~~[May 2023]~~;

(b) "Application for Dental Licensure", January 2024~~[May 2023]~~;

(c) "Application for Renewal of Dental Licensure", January 2024~~[May 2023]~~;

(d) "Application for Specialty Dental Licensure", January 2024~~[February 2023]~~;

(e) "Application to Reinstate ~~[a]~~Dental or Dental Hygiene Licensure~~[License]~~", January 2024~~[May 2023]~~;

(f) ***~~["Duplicate License or Registration Request Form", January 2024]~~*** ~~[December 2022]~~ ***~~[;]~~***

~~[(g)]~~ "Retirement of License Form", January 2024~~[February 2023]~~;

(g) ~~[(h)]~~ "Statement Regarding Faculty Licensure Limitations", January 2024~~[May 2023]~~;

(h) ~~[(i)]~~ "Statement Regarding Student Licensure Limitations", January 2024~~[May 2023]~~;

(i) ~~[(j)]~~ "Verification of Licensure or Registration Form", January 2024~~[February 2023]~~; and

(j) ~~[(k)]~~ "2020 American Heart Association Guidelines for CPR and ECC", 2020.

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