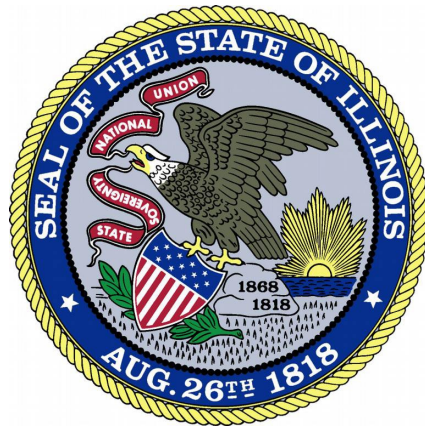


Governor's Office of Management and Budget

Alexis Sturm

Director



Regulatory Sunset Act Report of Illinois Dental Practice Act

April 18, 2025

**To the Honorable JB Pritzker
Governor of Illinois**

Governor Pritzker:

As required by Section 5 of the Regulatory Sunset Act (5 ILCS 80/1 et seq.), GOMB facilitated a study with the Illinois Department of Financial and Professional Regulation (IDFPR), the agency responsible for oversight of Illinois Dental Practice Act (225 ILCS 25/1 et seq.) (the Act), which is scheduled to be repealed on January 1, 2026. This report provides justification for the recommendation to continue this Act.

GOMB's examination of this Act was conducted considering the factors set out in Sections 6 and 7 of the Regulatory Sunset Act. The following report outlines the work of GOMB's study and details the criteria and data utilized to arrive at the above recommendation.

Respectfully,

Alexis Sturm
Director
Governor's Office of Management and Budget

GOMB Regulatory Sunset Act Report: Illinois Dental Practice Act

The State of Illinois, acting through the Illinois Department of Financial and Professional Regulation (IDFPR or the Department), licenses the profession of dental practice. The occupations of dentist, dental hygienist, and specialist are subject to licensure under this Act.

A dentist is a professional who diagnoses, treats, prescribes, or operates for any disease, pain, deformity, deficiency, injury, or physical condition of the human tooth, teeth, alveolar process, gums, or jaw. The entirety of the scope of practice for a dentist can be found listed in Section 17 of the Act (225 ILCS 25/17).

A dental hygienist generally can be defined as a licensee who performs oral prophylactic procedures under the supervision of a dentist. The entirety of the scope of practice for a dental hygienist can be found in Section 18 of the Act (225 ILCS 25/18).

A specialist's scope of practice is that of any particular branch of dentistry, including endodontics, oral and maxillofacial surgery, orthodontics and dentofacial orthopedics, pediatric dentistry, periodontics, prosthodontics, oral and maxillofacial radiology, and dental anesthesiology, and may only be performed by a dentist who has complied with the requirements established for that particular branch of dentistry. 225 ILCS 25/11(b).

The Act states that "[t]he practice of dentistry in the State of Illinois is hereby declared to affect the public health, safety and welfare and to be subject to regulation and control in the public interest. It is further declared to be a matter of public interest and concern that the dental profession merit and receive the confidence of the public and that only qualified persons be permitted to practice dentistry in the State of Illinois. Despite the authority granted under this Act allowing dentists to delegate the performance of certain procedures to dental hygienists and dental assistants, nothing contained in this Act shall be construed in any way to relieve the supervising dentist from ultimate responsibility for the care of his or her patient. This Act shall be liberally construed to carry out these objects and purposes." 225 ILCS 25/2.

1. License Count and Fee Structure

License Count

As of July 2024, IDFPR provides the following dental license issuances for each of the fiscal years indicated:

License Type	FY20	FY21	FY21	FY22	FY23
Dentist	984	984	1,263	1,351	1,644

As of July 2024, IDFPR provides the following types of licenses that are currently active:

License Type	Active Licenses
Dentist	11,563
Dental Hygienist	8,921
Specialty in Dentistry	1,727

Restricted Faculty Licenses	57
Dental Sedation Permit	595
Dental / Dental Hygienist Continuing Education Sponsor	30
Dentist, Controlled Substance	9,786

Fee Structure

IDFPR provides the following fee structure and amounts with online payment option availability:

License Type	Fee	Online Payment Option
Application	\$250	Yes
License	\$250	Yes
License Renewal	\$300	Yes

2. Obtaining Licensure as a Dentist in Illinois

Obtaining Licensure

Section 5 of the Act outlines the powers and duties the Department may use to assess the qualifications of applicants for the dental profession:

- (a) Conduct or authorize examinations to ascertain the fitness and qualifications of applicants for dental licenses or dental hygienist licenses, pass upon the qualifications of applicants for licenses, and issue licenses to such as are found to be fit and qualified.
- (b) Prescribe rules and regulations for a method of examination of candidates.
- (c) Prescribe rules and regulations defining what shall constitute an approved program, school, college or department of a university except that no program, school, college or department of a university that refuses admittance to applicants solely on account of race, color, creed, sex or national origin shall be approved.
- (d) Conduct hearings on proceedings to revoke, suspend, or on objection to the issuance of licenses and to revoke, suspend or refuse to issue such licenses.
- (e) Promulgate rules and regulations required for the administration of this Act.
- (f) The Department may require completion of a census by all licensed dentists in order to obtain relevant information regarding the availability of dental services within the State.

Further, Section 9 of the Act provides the qualifications necessary for dental licenses in the State. They include:

(a) (Blank).

(b) Be at least 21 years of age and of good moral character.

(c) (1) Present satisfactory evidence of completion of dental education by graduation from a dental college or school in the United States or Canada approved by the Department. The Department shall not approve any dental college or school which does not require at least (A) 60 semester hours of collegiate credit or the equivalent in acceptable subjects from a college or university before admission, and (B) completion of at least 4 academic years of instruction or the equivalent in an approved dental college or school that is accredited by the Commission on Dental Accreditation of the American Dental Association; or

(2) Present satisfactory evidence of completion of dental education by graduation from a dental college or school outside the United States or Canada and provide satisfactory evidence that the applicant has: (A) completed a minimum of 2 academic years of general dental clinical training and obtained a doctorate of dental surgery (DDS) or doctorate of dental medicine (DMD) at a dental college or school in the United States or Canada approved by the Department; or (B) met the program requirements approved by rule by the Department. Nothing in this Act shall be construed to prevent either the Department or any dental college or school from establishing higher standards than specified in this Act.

(d) (Blank).

(e) Present satisfactory evidence that the applicant has passed the integrated National Board Dental Examination administered by the Joint Commission on National Dental Examinations and has successfully completed an examination conducted by one of the following regional testing services:

the Central Regional Dental Testing Service, Inc. (CRDTS), the Southern Regional Testing Agency, Inc. (SRTA), the Western Regional Examining Board (WREB), the Commission on Dental Competency Assessments (COCA), or the Council of Interstate Testing Agencies (CITA). For purposes of this Section, successful completion shall mean that the applicant has achieved a minimum passing score as determined by the applicable regional testing service. The Secretary may suspend a regional testing service under this subsection (e) if, after proper notice and hearing, it is established that (i) the integrity of the examination has been breached so as to make future test results unreliable or (ii) the test is fundamentally deficient in testing clinical competency. In determining professional capacity under this Section, any individual who has not been actively engaged in the practice of dentistry, has not been a dental student, or has not been engaged in a formal program of dental education during the 5 years immediately preceding the filing of an application may be required to complete such additional testing, training, or remedial education as the Board may deem necessary in order to establish the applicant's present capacity to practice dentistry with reasonable judgment, skill, and safety.

In response to inquiries by GOMB, the Department stated that it also uses an applicant's submitted application materials when evaluating an applicant's competency. In addition, the Department states that the provisions within the Act and Administrative Rules "have been modeled with the intent of ensuring the public's health, safety, and welfare." The rules for establishing standards can be found on

the IDFPR website ([IDFPR Rules](#)).

3. Equity Concerns

IDFPR states that equity issues may have an impact on individuals seeking to become a licensed dental professional in the State of Illinois. These issues include financial challenges such as the cost to obtain licensure and the failure to complete licensure due to access to training, education, and geographic location of training and testing sites.

Currently, there are only three institutions in Illinois that have accredited dental schools. They include two institutions in the northeast part of the State, the University of Illinois at Chicago and Midwestern University, and one institution in the southern part of the State, Southern Illinois University. IDFPR states that it has “done its best to minimize barriers to licensure by requiring universally accepted qualification requirements and imposing fair standards on professionalism.”

Further study and coordination with educational institutions is recommended to address barriers to obtaining licensure in these regulated fields in Illinois.

4. Agency recommendations to change the statute

IDFPR is not recommending any changes to the Act.

5. Agency efforts to comply with enabling laws

At the time of this study, GOMB is not aware of any compliance issues by IDFPR related to the provisions of the Act.

6. Recent bills introduced by the General Assembly

Pediatric dentists have concerns with the requirement that all applicants for a moderate sedation permit submit the same documentation required for a Permit A for moderate sedation. Pediatric dentists argue that they do not usually utilize IV sedation to sedate children and therefore should not have to submit cases involving IV sedation as part of their application process. The Board and Department do not agree and believe that IV sedation cases are necessary for safety of a patient.

The Illinois Pediatric Dental Society proposed legislation filed on January 19, 2024, as SB 2822 amending requirements for a moderate sedation permit. If the applicant has attended a CODA-accredited program, they can submit sedation cases relative to their specialty. The Department opposed the bill and negotiated with the Illinois Pediatric Dental Society and the Illinois State Dental Society to modify the bill to ensure patient safety. Public Act 103-0628, enacted July 1, 2024, also allows the Department to create administrative rules for continuing education courses for moderate sedation. The Department is working with the associations on these new administrative rules.

7. Stakeholder Feedback and Protocols for licensed dental professionals

Outside the legislation cited in section 6, IDFPR did not report having received comments from professional organizations or other interested parties regarding the impact of its rules or administrative decisions related to enforcement of licensure of dental professionals. Further, IDFPR is not aware of any public feedback regarding licensure of dental professionals.

8. Public Outreach

IDFPR provides multiple avenues for members of the public to contact the Department with comments or concerns about the programs it oversees or the Department's rules governing its programs. IDFPR conducts public outreach efforts through social media and other external-facing means.

9. Industry Standards

IDFPR states that the Illinois personal qualifications required for this profession are in line with industry standards.

10. Public Complaint Resolution

Through July 2024, reflecting the past five years, IDFPR reports 2,237 public complaints spread across the seven professions regulated under this Act.

11. Disciplinary Action

The Act provides for disciplinary action against dental professionals if problems arise during the provision of their services or for other specified events. In particular, "the Department may refuse to issue or renew, or may revoke, suspend, place on probation, reprimand or take other disciplinary or non-disciplinary action as the Department may deem proper, including fines not to exceed \$10,000 per violation, with regard to any license, [for any one or a combination of 40 identified acts]." 225 ILCS 25/23.

12. Conclusion

The Act governs the licensure of dental professionals in the State of Illinois. The absence of licensing criteria for dental professionals would pose a significant and direct harm to the safety and welfare of the public. The lack of regulation would eliminate the professional standards to which individuals practicing dentistry in Illinois are held.

Current evidence does not suggest that the imposition of the State's regulatory standards is such a burden as to outweigh the benefits to the health, safety, and welfare of the people of Illinois in continuing the licensure and regulation of this profession. Consequently, the Act is necessary and appropriate to ensure the health, safety, and welfare of the people of Illinois.

The Act should be continued to promote and enhance the safety and welfare of the public, without burdening licensees or commerce.