

6. The licensee shall provide to the Board upon request any back-up data maintained off premises, together with the following information:

- i. The name of the computer operating system containing the patient record files and instructions on using such system;
- ii. Current passwords;
- iii. Previous passwords if required to access the system; and
- iv. The name of a contact person at the practice management company, if any, that provides technical support for the licensee's computer system.

(d) Patient records, including all radiographs, shall be maintained for at least seven years from the date of the last entry, except that diagnostic and study models used for definitive treatment shall be maintained for at least three years from the date the model is made. Working models may be maintained.

(e) Licensees shall provide patient records to the patient or the patient's authorized representative or another dentist of the patient's choosing in accordance with the following:

1. Upon receipt of a written request from a patient or the patient's authorized representative and within 14 days thereof, legible copies of the patient record including, if requested, duplicates of models and copies of radiographs, **shall be furnished** to the patient, the patient's authorized representative, or a dentist of the patient's choosing. "Authorized representative" means a person who has been designated by the patient or a court to exercise rights under this section. An authorized representative shall include the patient's attorney or an agent of an insurance carrier with whom the patient has a contract which provides that the carrier be given access to records to assess a claim for monetary benefits or reimbursement. If the patient is a minor, a parent or guardian who has custody (whether sole or joint) shall be deemed an authorized representative.

2. A licensee may require any unpaid balance for diagnostic services only to be paid prior to release of such records. Where treatment of a patient whose dental expenses are paid through Medicaid is discontinued by the dentist prior to completion of the treatment, no charge for the records shall be made, nor shall any payment be required.

3. The licensee may charge a reasonable fee for:

- i. The reproduction of records, which shall be no greater than \$1.00 per page or \$100.00 for the entire record, whichever is less. (If the record requested is less than 10 pages, the licensee may charge up to \$10.00 to cover postage and the miscellaneous costs associated with retrieval of the record.); and/or

- ii. The reproduction of radiographs or any other material within a patient record, which cannot be routinely copied or duplicated on a commercial duplicating machine. The fee for duplication for a set of up to nine radiographs shall not exceed \$15.00. The fee for duplication for a set of up to 18 radiographs shall not exceed \$30.00. The fee for duplication of a panorex shall not exceed \$30.00.

4. Licensees shall not charge a patient for a copy of the patient's record when the licensee has affirmatively terminated a patient from the practice.

5. To the extent that the record is illegible or prepared in a language other than English, the licensee shall provide a typed or written transcription and/or translation at no additional cost to the patient.

(f) Licensees shall maintain the confidentiality of patient records, except that:

1. The licensee shall release patient records as directed by the Board of Dentistry or the Office of the Attorney General, or by a Demand for Statement in Writing under Oath, pursuant to N.J.S.A. 45:1-18. Such records shall be originals, unless otherwise specified, and shall be unedited, with full patient names. To the extent that the record is illegible, the licensee, upon request, shall provide a typed or written transcription of the record. If the record is in a language other than English, the licensee shall also provide a translation. All radiographs, models, and reports maintained by the licensee, including those prepared by other dentists, shall also be provided. The costs of producing such records shall be borne by the licensee.

2. The licensee, in the exercise of professional judgment and in the best interests of the patient (even absent the patient's request), may release pertinent information about the patient's treatment to another licensed health care professional who is providing or who has been asked to provide treatment to the patient, or whose expertise may assist the licensee in his or her rendition of professional services.

3. The licensee shall release information as required by statute or rule, such as the reporting of communicable diseases or gunshot wounds or suspected child abuse, or when the patient's treatment is the subject of peer review.

(g) If a licensee ceases to engage in the practice of dentistry or it is anticipated that he or she will remain out of practice for more than six months, the licensee or a designee shall:

1. Establish a procedure by which patients may obtain treatment records or agree to the transfer of those records to another licensee who is assuming the responsibilities of that practice;

2. If the practice will not be attended by another licensee, publish a notice of the cessation and the established

procedure for the retrieval of records in a newspaper of general circulation in the geographic location of the licensee's practice, at least once each month for the first three months after the cessation;

3. File a notice of the established procedure for the retrieval of records with the Board of Dentistry;

4. Make reasonable efforts to directly notify any patient treated during the six months preceding the cessation of the practice to provide information concerning the established procedure for retrieval of records; and

5. Conspicuously post a notice on the premises of the procedure for the retrieval of records.

(h) Patient records need not be maintained in situations where no patient-dentist relationship exists, such as where the professional services of a dentist are rendered at the behest of a third party for the purposes of examination and evaluation only, at the behest of the Board or for dental screenings.

(i) Services not recorded in the patient record in accordance with the requirements of this section shall be presumed not to have been performed. It shall be the responsibility of the licensee to produce evidence to establish that the non-recorded services were actually performed.

New Rule, R.1980 d.457, effective October 16, 1980.

See: 12 N.J.R. 347(a), 12 N.J.R. 672(f).

Amended by R.1986 d.269, effective July 7, 1986.

See: 18 N.J.R. 816(a), 18 N.J.R. 1394(a).

Added text to (c) "provided, however, where ... or payment required."

Amended by R.1990 d.205, effective April 2, 1990.

See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

Repeal and New Rule, R.1993 d.650, effective December 20, 1993.

See: 25 N.J.R. 1833(a), 25 N.J.R. 5935(a).

Amended by R.1998 d.90, effective February 17, 1998.

See: 29 N.J.R. 4069(b), 30 N.J.R. 686(a).

Rewrote (a)8; inserted new 9 and 10; recodified existing 9 as 11; added a new (b); recodified existing (b) as (c) and added language regarding models; and recodified existing (c) through (f) as (d) through (g).

Amended by R.2000 d.147, effective April 3, 2000.

See: 32 N.J.R. 215(a), 32 N.J.R. 1221(a).

In (a), deleted "where appropriate" at the end of 4, rewrote 6, and substituted "and" for "or" following "dosage" in 7; in (b)5, substituted "quarterly" for "quarterly-annually" following "at least" in the introductory paragraph, and deleted ", but not limited to," following "including" in i; in (d), inserted "of the patient's choosing" following "dentist" throughout 1, and inserted "or written" following "typed" in the last sentence of 3; in (e), inserted "or written" following "typed" in the third sentence of 1; in (f)5, deleted "when possible" at the end; and rewrote (g).

Amended by R.2005 d.309, effective September 19, 2005.

See: 37 N.J.R. 1149(a), 37 N.J.R. 3709(a).

In (a), added 4, deleted "and" at the end of 10, added "; and" and removed "." at the end of 11, added 12; added (b); recodified former (b) as (c); recodified and rewrote former (c) as (d); recodified and rewrote former (d) as (e); recodified former (e)-(g) as (f)-(h).

Amended by R.2011 d.041, effective February 7, 2011.

See: 42 N.J.R. 2217(a), 43 N.J.R. 310(a).

In the introductory paragraph of (a), substituted "third-party" for "third party"; in (a)5, substituted "an accurate" for "a", "all" for "the", and inserted "and the materials used"; rewrote (a)6; added new (a)8; recodified former (a)8 through (a)12 as (a)9 through (a)13; in (a)12, deleted "and" from the end; in (a)13, substituted "; and" for a period at the end; added (a)14; rewrote (e)3ii; in (h), substituted a comma for "or" following "only", and inserted "or for dental screenings"; and added (i).

### 13:30-8.8 Reporting of incidents or deaths

(a) All licensees shall report to the State Board of Dentistry within seven days, in writing, on a form supplied by the Board and available on the Board's website at <http://www.njconsumeraffairs.gov/dentistry/>, any incident occurring in a dental office, clinic or any other dental facility after dental treatment has been initiated, which requires the removal of a patient to a hospital for observation or treatment.

(b) All licensees shall report to the Board within seven days, in writing, on a form supplied by the Board and available on the Board's website at <http://www.njconsumeraffairs.gov/dentistry/>, any death, which may be related to dental treatment, whether or not the death occurred in a dental office, clinic or other dental facility.

New Rule, R.1980 d.503, effective November 18, 1980.

See: 12 N.J.R. 607(c), 13 N.J.R. 40(a).

Recodification, R.1990 d.205, effective April 2, 1990.

See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

Recodified from N.J.A.C. 13:30-8.9.

Amended by R.2000 d.147, effective April 3, 2000.

See: 32 N.J.R. 215(a), 32 N.J.R. 1221(a).

In (a), deleted "main office of the" preceding "State"; and rewrote (b).

Amended by R.2011 d.041, effective February 7, 2011.

See: 42 N.J.R. 2217(a), 43 N.J.R. 310(a).

In (a) and (b), inserted "on a form supplied by the Board and available on the Board's website at <http://www.njconsumeraffairs.gov/dentistry/>"; in (a), inserted "after dental treatment has been initiated,"; and in (b), inserted a comma following "any death".

### 13:30-8.9 Display of names; identifying badges

(a) Every facility offering dental care to the public shall legibly display on all exterior signs or other means of exterior display the names of the licensees who are responsible for the administration of the facility. A dental facility may display on exterior signs or other means of exterior display the names of licensees associated with the facility.

(b) Every dental care facility where two or more dental licensees are engaged in providing dental care shall legibly display in its office, the names and professional status of all licensees associated with the facility.

(c) Any licensee shall wear an identifying badge indicating his or her name and professional status while working in the facility.

New Rule, R.1980 d.509, effective November 21, 1980.

See: 12 N.J.R. 608(a), 13 N.J.R. 41(a).

Recodification, R.1990 d.205, effective April 2, 1990.

See: 22 N.J.R. 149(b), 22 N.J.R. 1145(a).

Recodified from N.J.A.C. 13:30-8.10.

Amended by R.2000 d.147, effective April 3, 2000.

See: 32 N.J.R. 215(a), 32 N.J.R. 1221(a).

Rewrote (c).

Amended by R.2005 d.309, effective September 19, 2005.

See: 37 N.J.R. 1149(a), 37 N.J.R. 3709(a).

Rewrote (a).

### 13:30-8.10 Dental insurance forms

(a) No licensee shall submit any claim, bill or governmental assistance claim to a third party payor for dental