

33-402.101 Dental Services – General.

(1) The Department of Corrections Office of Health Services shall ensure that a comprehensive program of dental services, supervised by a dentist, is available to all inmates under its jurisdiction. The dental services program shall include emergency dental services, urgent dental services, preventative dental services and routine dental services.

(2) Definitions.

(a) Emergency dental services include treatment for trauma, control of bleeding, and acute infection. Emergency dental services shall be available to inmates 24-hours a day.

(b) Urgent dental services include treatment for chipped teeth, tooth pain, lost crowns or fillings, or broken dentures. All Department of Corrections dental clinics shall hold daily sick call, when a dentist is available, to provide dental access to those inmates who cannot wait for a routine appointment but do not meet the criteria for emergency dental services.

(c) Preventative dental services include oral (mouth) exams and regular oral hygiene. The Department of Corrections shall provide each inmate oral hygiene supplies including a toothbrush and a toothpaste containing fluoride. The inmate shall also be provided education in the use of oral hygiene supplies.

(d) Routine dental services are available by request and include examination, diagnosis, and treatment provided per a written treatment plan. Oral surgery is also available to all inmates; however, oral surgery for purely cosmetic reasons will not be performed. Orthodontics or the treatment of misaligned teeth is excluded from routine services and shall not be provided unless the lack of orthodontic services adversely affects an inmate's health.

(3) All inmates are required to receive an orientation to dental services within seven days of arrival at their assigned institutions. The dental orientation shall include:

(a) An explanation of access to dental care, including the hours of emergency, sick-call and routine dental care;

(b) How to request dental care; and

(c) A group oral hygiene presentation.

(4) Each inmate shall receive a dental examination to determine his or her dental needs as soon as possible, but not later than seven days after incarceration at a reception center.

(5) Dental periodic oral examinations shall be done every ~~two~~ three years until the inmate is 50 years of age, and annually thereafter.

(a) Only a dentist may perform a dental periodic oral examination.

(b) An inmate in an active treatment program is not required to receive a dental periodic oral examination. Sick call and emergency dental visits are not considered an active treatment program and will not affect the periodic oral examination date.

(c) An inmate may refuse specific dental examinations and treatments. Inmates who refuse dental services will be required to sign Form DC4-711A, Refusal for Health Care Services. Form DC4-711A is incorporated by reference in Rule 33-602.210, F.A.C. By refusing an examination or treatment at a particular time, the inmate does not waive his or her right to subsequent dental care.

(6) Proper oral hygiene shall be reinforced throughout the inmate's dental treatment plan. A complete prophylaxis (cleaning) is included as part of the dental treatment plan. Auxiliaries can be utilized to assist in oral hygiene services in accordance with the State Dental Practice Act, Chapter 466, F.S.

(7) Dental services available to inmates are based upon four levels of dental care.

(a) Level I dental care is available to inmates during the reception process. It includes:

1. An intake dental examination performed by a dentist and the development of a provisional treatment plan.
2. Necessary extractions as determined by the intake dental examination.
3. Emergency dental treatment including treatment of soft tissue disease.

(b) Level II dental care is available to inmates with less than six months of Department of Corrections' incarceration time. It includes:

1. All Level I care.
2. Tooth decay control with temporary fillings.
3. Limited cleaning of symptomatic area with emphasis on oral hygiene practices.

4. Complete and partial denture repairs provided the inmate has sufficient Department of Corrections' incarceration time remaining on his or her sentence to complete the repair.

5. If an inmate has no upper or lower teeth and requests dentures, the inmate is to be placed on the appointment waiting list at his or her permanent facility. The inmate is not required to wait six months for Level III care.

6. In cases of medical referral, inmates are to be scheduled as soon as possible for evaluation for dental care.

(c) Level III dental care is available to inmates with six months or more of continuous Department of Corrections' incarceration time. Level III includes:

1. All Levels I and II care.

2. Complete dental examination with X-rays, periodontal (gum) screening and recording, and development of a dental treatment plan.

3. Teeth cleaning, gum examination and oral hygiene instructions.

4. Complete dentures provided the inmate has at least four months of continuous Department of Corrections' incarceration time remaining on his or her sentence.

5. After the inmate has received a complete cleaning he or she is eligible for:

a. Fillings/Restorative treatment.

b. Partial dentures.

I. Acrylic partial dentures provided the inmate has at least four months of continuous Department of Corrections' incarceration time remaining on his or her sentence. ~~Three or more anterior (front) teeth in an arch must be missing before an anterior acrylic partial denture is considered. Acrylic partial dentures will not be made available for purely cosmetic reasons.~~

II. Cast partial dentures will be fabricated only when the oral condition precludes the fabrication of acrylic partial dentures.

III. Each inmate is responsible for the loss, destruction, or mutilation of removable prosthetics. Failure to take responsibility for the removable prosthetics is not justification for replacement at Department of Corrections' expense. In cases where intentional damage or loss is suggested, the incident will be considered the same as willfully damaging state property and will be dealt with in accordance with existing department policies.

IV. ~~Only one denture(s) will be provided in a lifetime with one reline provided at no cost.~~ When indicated, dentures(s)

are eligible for replacement every five years. Dentures required more often will be charged to the inmate unless such a requirement is caused by a change in the inmate's dental condition that renders the existing denture(s) nonfunctional.

c. Nonemergency endodontic (root canal) therapy is available to Level III inmates (more than six months of continuous Department of Corrections' incarceration time) when clinically indicated. All teeth receiving endodontic therapy must have adequate support in the surrounding gum tissues and have a good chance of recovery and long-term ~~long term~~ retention. In addition, posterior teeth receiving endodontic therapy must be crucial to arch integrity (no missing teeth in the quadrant or necessary as a partial denture abutment.)

d. Basic nonsurgical periodontal therapy as necessary.

(d) Level IV dental care represents advanced dental services that may be available on a limited basis.

1. This level of dental care is available to inmates on an as-needed basis after completion of Level III services and successful demonstration of a plaque free index score of 90 percent or greater for two consecutive months. If an inmate cannot demonstrate that he or she is following an acceptable oral hygiene program, advanced dental therapy will not be considered.

2. Dental care and follow-up to highly specialized procedures such as orthodontics and implants placed before incarceration will be managed on an individual basis after consulting with the Director of Dental Services. The inmate will be responsible for the costs of continuation of care associated with both orthodontics and implants initiated before incarceration.

3. Fixed prosthetics (~~crowns and bridges~~ multiple units) are not to be done except in unusual circumstances and only when an adequate restoration cannot be placed. The inmate will be responsible for the lab charges associated with the replacement of single unit crowns installed prior to incarceration.

(8) Dental Care Requests, Complaints and Formal Grievances.

(a) Inmate requests for dental services shall be submitted on Form DC6-236, Inmate Request or Form DC4-698A, Inmate Sick-Call Request, and submitted to the Senior Dentist or his or her designee. Form DC4-698A is hereby incorporated by reference. A copy of this form is available from the Forms Control Administrator, Bureau of Policy Development. 501 South Calhoun Street, Tallahassee, Florida 32399-2500, <http://www.flrules.org/Gateway/reference.asp?No=Ref-XXXXXX> <http://www.flrules.org/Gateway/reference.asp?No=Ref-13148>. The effective date of this form is XX/XX 05-21. Form DC6-236 is incorporated by reference in Rule 33-103.005, F.A.C.

(b) Inmates wishing to file a complaint or formal grievance shall follow the grievance procedure as described in Rule 33-103.001, F.A.C.

(9) Co-payments for Dental Services.

(a) Inmates must make a co-payment for each nonemergency dental visit as described in Section 945.6037, F.S.

(b) There will be no co-payment for emergency dental services. If an inmate declares a dental emergency that does not meet the dental emergency guidelines, no treatment will be rendered, and a co-payment charge will be assessed.

(10) Missed Appointments. Inmates who do not keep their dental appointments shall be rescheduled, with the following exceptions ~~except for the following~~:

(a) All inmates having two non-security related no-shows in a row or having a history of no-shows shall be brought to the dental clinic to determine their desire to continue dental care;

(b) All inmates having three non-security related no-shows within a ~~six-appointment~~ ~~six-appointment~~ time span shall be removed from the dental treatment list and will not be rescheduled again for routine or comprehensive dental care unless a written request is submitted for continuation for dental care. If such written request is submitted, ~~t~~The inmate will be placed on the appointment waiting list and will not be given preferential appointments unless the inmate's overall health would be adversely affected by delaying dental treatment.

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