RENEWAL INFORMATION AND INSTRUCTIONS
FOR MISSISSIPPI DENTAL HYGIENISTS

GENERAL INFORMATION

It is time to renew your Mississippi dental hygiene license, and **NO PAPER RENEWALS WILL BE MAILED OR ACCEPTED**. Your renewal information may be accessed via the Board’s online portal, a link to which is located on the right-hand side of the Board’s home page (http://www.dentalboard.ms.gov). Furthermore, this document can be accessed at any time via the Board’s web site by clicking “Online Renewals” on the left-hand side of the home page, scrolling down the page, and clicking the bulleted item labeled “Dental Hygienists.” These instructions will guide you step-by-step through the online renewal process.

Board Regulation 37 states that every licensed dental hygienist must renew his/her dental hygiene license sixty (60) days prior to November 1 of each biennial period. You have **SIXTY (60)** days from September 1 in which to renew; as such, your renewal must be finalized on or before **OCTOBER 31**. Otherwise, renewals finalized after that date will be assessed penalties. Beginning November 1, reminders will be e-mailed every thirty (30) days to advise you that your renewal is overdue. If your renewal is not finalized on or before **DECEMBER 31**, on **JANUARY 1** your license will be voided for failure to re-register. Consequently, you no longer may practice dental hygiene in the State of Mississippi. However, you may request in writing that your license be voided.

A currently valid e-mail address is required for online renewal, and methods of payment include VISA, MasterCard, American Express, debit cards, and electronic checks. Confirmation notices from the State's payment processor will be e-mailed within one (1) hour from the time you complete renewal to the e-mail address you provide during the PAYMENT INFORMATION portion of your renewal. The State of Mississippi assesses a small convenience fee to use its E-Commerce portal, and this fee will be added to the total amount due upon completion of your renewal. The Board **DOES NOT** receive any part of this convenience fee. Additionally, **FOURTEEN (14)** days following receipt by the Board of your renewal and verified payment, your certification card will be transmitted via e-mail to the e-mail address you provided to the Board in the PERSONAL INFORMATION portion of your renewal.

If you currently provide dental hygiene services for one or more licensed Mississippi dentists, you need to make those selections in the WORK INFORMATION portion of your renewal and ensure you select **ALL** licensed Mississippi dentists for whom you provide dental hygiene services, regardless of the person signing your paycheck. For example, if you provide dental hygiene services in a dental office with more than one dentist, although you may work primarily for only one dentist in the clinic, you should select **ALL** dentists associated with that clinic as your dental employers, inasmuch as you may, from time-to-time, provide services for any dentists associated with that clinic. Also, should one or more of the licensed Mississippi dentists for whom you provide dental hygiene services have additional offices located within the State of Mississippi or in another state (referred to by the Board as satellite offices), and you travel to those satellite offices to provide dental hygiene services, you should select **ALL** satellite offices at which you provide dental hygiene services.

If you currently provide dental hygiene services for dentists **NOT** licensed by the State of Mississippi (those dentists with offices outside the State of Mississippi), you must provide the full name, degree, street address, mailing address, telephone number, and fax number for **ALL** out-of-state dentists for whom you provide dental hygiene services. Furthermore, even if you currently are **NOT** practicing dental hygiene, you must provide the full name, street address, mailing address, telephone number, and fax number for **ALL** non-dental locations at which you work.

Carefully review all instructions and your personal/work information as you go step-by-step through your online renewal to ensure your licensure information is current and accurate. Once you begin the online renewal process, you **MUST** complete your online renewal and payment at that time. You will **NOT** be able to complete part of your renewal and return at a later date/time to finalize your renewal. Additionally, once your renewal has been finalized, you will **NOT** be able to return to the online portal to make changes to your renewal.
RENEWAL INSTRUCTIONS

STEP 1

- Enter your Mississippi dental hygiene or provisional dental hygiene license number.
- Dental hygiene licenses are 4 digits, followed by a dash, followed by 2 digits, and then followed by “DH” (e.g., 1111-80DH).
- Provisional dental hygiene licenses have PRV or PRV-TP at the beginning of the license number, followed by a dash, followed by 3 digits and another dash, followed by 2 digits, and then followed by “DH” (e.g., PRV-TP-111-80DH).
- Your “Unique Id” is a 10-digit number consisting of the last 4 digits of your Social Security number, followed by your 2 digit birth month, followed by your 2 digit birth date, and followed by your 2 digit birth year (e.g., 5555031148, with “5555” being the last 4 digits of your Social Security number, “03” being the 2 digit birth month, “11” being the 2 digit birth date, and “48” being the 2 digit birth year).
- Once you have reviewed this screen and entered the correct information, press “Enter.”

STEP 2

- Press “Renew” to begin your online renewal process.
- If you are not ready to renew your license, press “Logout” and return to the online portal at a later time.
- Once you begin the online renewal process, you MUST complete your online renewal and payment at that time.
- You will NOT be able to complete part of your renewal and return at a later date/time to finalize your renewal.
- Once your renewal has been finalized, you will NOT be able to return to the online portal to make changes to your renewal.
STEP 3

- This screen provides information as to the renewal and penalty periods.
- Once you have reviewed this screen, press “Continue.”

STEP 4

- No changes can be made to your license number, original license issue name, maiden name, or date of birth.
- No changes can be made to your status, as the Board office makes changes based on your final renewal and any changed information provided by you.
- If your first, middle, or last names should be changed, enter all changed information.
- Your “Home Street Address” is the physical location of your residence and cannot be a post office box; however, your “Primary Mailing Address” can be any address you choose for information sent from the Board to you via United States Postal Service.
- If your “Primary Mailing Address” is identical to your “Home Street Address,” you should press “Same as Home” to populate the information for your “Primary Mailing Address.”
- You MUST provide a currently valid e-mail address, and double-check your e-mail address for accuracy.
- Asterisks denote required fields.
- Once you have reviewed this screen and entered the correct information, press “Continue.”
STEP 5

- This screen provides information as to your selection of dental and non-dental employers.
- If the Board’s current information reflects one (1) or more dental or non-dental employers for you, when you press “Continue” you will be directed to the screen in Step 5-A.
- If the Board’s current information does NOT reflect one (1) or more dental or non-dental employers for you, when you press “Continue” you will be directed to the screen in Step 5-B.
- Once you have reviewed this screen, press “Continue.”

STEP 5-A

- If you currently have one (1) or more dental or non-dental employers listed with the Board, you have an opportunity at this point to add new dental or non-dental employers or delete currently listed dental or non-dental employers.
- If you delete all current employers and press “Continue,” you will be directed to the screen in Step 5-B. If you select “No” in Step 5-B and press “Continue,” you will be directed to the screen in Step 5-C.
- If currently listed dental or non-dental employers are correct, press “Continue,” and you will be directed to the screen in Step 6.
- If you need to add dental or non-dental employers, press “Add Location,” and you will be directed to the screen in Step 5-C.

STEP 5-B

- If your current information with the Board reflects no currently listed dental or non-dental employers, when you pressed “Continue” in Step 5, you will be directed to the screen in Step 5-B.
- If you deleted all current employers in Step 5-A and pressed “Continue,” you will be directed to the screen in Step 5-B.
- If you select “No” and press “Continue,” you will be directed to the screen in Step 6.
- If you select “Yes” to add updated dental or non-dental employers and press “Continue,” you will be directed to the screen in Step 5-C.
STEP 5-C

- To add updated dental or non-dental employers, you first must determine the type of employer and select the appropriate category.
- You may select only one (1) category at a time. If you need to add more than one kind of dental or non-dental employer, you will be able to return to the screen in Step 5-C, select another type of dental or non-dental employer, and enter all pertinent information on the appropriate follow-up screens.
- Once you have selected the type of dental or non-dental employer, press “Continue,” and you will be directed to the screen in Step 5-D.

STEP 5-D

- Carefully read all “Work Location Questions” and click each checkbox to acknowledge you have read the question, understand the question, and will correctly report all dental and non-dental employers.
- You will need to review this screen each time you select a dental or non-dental employer and each time you select a different type of dental or non-dental employer.
- If you selected “MS Licensed Dentist” in Step 5-C, after selecting the checkbox next to each question and pressing “Continue,” you will be directed to the screen in Step 5-E.
- If you selected “Facility or Institution” in Step 5-C, after selecting the checkbox next to each question and pressing “Continue,” you will be directed to the screen in Step 5-H.
- If you selected “Veterans Administration Medical Center” in Step 5-C, after selecting the checkbox next to each question and pressing “Continue,” you will be directed to the screen in Step 5-I.
- If you selected “U.S. Military Base” in Step 5-C, after selecting the checkbox next to each question and pressing “Continue,” you will be directed to the screen in Step 5-J.
- If you selected “Out of State Licensed Dentist” in Step 5-C, after selecting the checkbox next to each question and pressing “Continue,” you will be directed to the screen in Step 5-K.
- If you selected “Other Type of Employment” in Step 5-C, after selecting the checkbox next to each question and pressing “Continue,” you will be directed to the screen in Step 5-L.
STEP 5-E

- After selecting “Continue” in Step 5-D and if you selected “MS Licensed Dentist” in Step 5-C, you will be directed to the screen in Step 5-E.
- Enter all or part of the dentist’s last name in the “Mississippi Dentist Search” box and press “Continue.”
- The results are displayed in the screen in Step 5-F.
- You may return to the “Mississippi Dentist Search” box as many times as necessary to ensure you provide the Board with the names and locations of all currently licensed Mississippi dentists for whom you provide dental hygiene services, regardless of the person signing your paycheck. When doing so, you will revisit the same screens as noted in Steps 5-C and 5-D.

STEP 5-F

- Based upon the search parameters you entered in Step 5-E, the screen in Step 5-F displays all currently licensed Mississippi dentists whose last names match all or part of your search parameters.
- Remember the “Work Location Questions” in Step 5-D, inasmuch as you MUST select ALL licensed dentists in a dental clinic, regardless of the person signing your paycheck, and you MUST select ALL satellite offices for each dentist for whom you provide dental hygiene services.
- Once you have made your selections and pressed “Continue,” you may be directed to the screen in Step 5-G if the dentist(s) you have selected work at more than one (1) location and/or have additional dentists working in the same locations as those selected on the screen in Step 5-F.
- Once you have made your selections and pressed “Continue,” you may be directed to the screen in Step 6 if you have selected all locations for your dental employers and if no additional dentists work at these locations.
- You can always press “Back” or “Location List” to edit your search parameters and type of employer, whereupon you will revisit the same screens as noted in Steps 5-C and 5-D.
STEP 5-G

Based upon your selections in Step 5-F, you may be directed to the screen in Step 5-G.

If you did NOT select all Mississippi dentists working at a particular location or if you did NOT select ALL locations for the dentist(s) for whom you provide dental hygiene services, this screen will serve as a reminder that you may not have properly recorded your Mississippi dental employers.

Once again, remember the “Work Location Questions” in Step 5-D, inasmuch as you MUST select ALL licensed dentists in a dental clinic, regardless of the person signing your paycheck, and you MUST select ALL satellite offices for each dentist for whom you provide dental hygiene services.

Make all necessary additional selections and press "Continue,” whereupon you will be directed to the screen in Step 6.

You can always press “Back” or “Location List” to edit your search parameters and type of employer, whereupon you will revisit the same screens as noted in Steps 5-C and 5-D.

STEP 5-H

After selecting “Continue” in Step 5-D and if you selected “Facility or Institution” in Step 5-C, you will be directed to the screen in Step 5-H.

This list is populated with ALL Mississippi dental, dental hygiene, and dental assisting schools.

Select the appropriate school at which you work and press “Continue.”

If you work at more than one (1) of these schools, you will need to revisit the screens in Steps 5-C and 5-D to make additional selections.

It is NOT necessary to individually select the dentists for whom you work at these schools. You simply may select the school, and it will be added to the list of employers on the screen in Step 5-M.
STEP 5-I

- After selecting “Continue” in Step 5-D and if you selected “Veterans Administration Medical Center” (VAMC) in Step 5-C, you will be directed to the screen in Step 5-I.

- The office “Street Address” is the physical location of the VAMC and cannot be a post office box.

- If the “Mailing Address” is identical to the “Street Address,” you should press “Same as Office” to populate the information for the “Mailing Address.”

- Although not a requirement, a currently valid e-mail address would be helpful. Double-check your e-mail address for accuracy.

- Asterisks denote required fields.

- If you work at more than one (1) of these facilities, you will need to revisit the screens in Steps 5-C and 5-D to make additional selections.

- Once you have reviewed this screen and entered the correct information, press “Add Location,” and you will be directed to the screen in Step 5-M for final verification of your work location information.

STEP 5-J

- After selecting “Continue” in Step 5-D and if you selected “U.S. Military Base” in Step 5-C, you will be directed to the screen in Step 5-J.

- The office “Street Address” is the physical location of the military base and cannot be a post office box.

- If the “Mailing Address” is identical to the “Street Address,” you should press “Same as Office” to populate the information for the “Mailing Address.”

- Although not a requirement, a currently valid e-mail address would be helpful. Double-check your e-mail address for accuracy.

- Asterisks denote required fields.

- If you work at more than one (1) of these facilities, you will need to revisit the screens in Steps 5-C and 5-D to make additional selections.

- Once you have reviewed this screen and entered the correct information, press “Add Location,” and you will be directed to the screen in Step 5-M for final verification of your work location information.
STEP 5-K

- After selecting “Continue” in Step 5-D and if you selected “Out of State Licensed Dentist” in Step 5-C, you will be directed to the screen in Step 5-K.
- The office “Street Address” is the physical location of the dentist’s office and cannot be a post office box.
- If the “Mailing Address” is identical to the “Street Address,” you should press “Same as Office” to populate the information for the “Mailing Address.”
- Although not a requirement, a currently valid e-mail address would be helpful. Double-check your e-mail address for accuracy.
- Asterisks denote required fields.
- If you work for more than one (1) out-of-state dentist, you will need to revisit the screens in Steps 5-C and 5-D to make additional selections.
- Once you have reviewed this screen and entered the correct information, press “Add Location,” and you will be directed to the screen in Step 5-M for final verification of your work location information.

STEP 5-L

- After selecting “Continue” in Step 5-D and if you selected “Other Type of Employment” in Step 5-C, you will be directed to the screen in Step 5-L.
- The “Street Address” is the physical location of your non-dental employer and cannot be a post office box.
- If the “Mailing Address” is identical to the “Street Address,” you should press “Same as Office” to populate the information for the “Mailing Address.”
- Although not a requirement, a currently valid e-mail address would be helpful. Double-check your e-mail address for accuracy.
- Asterisks denote required fields.
- If you work for more than one (1) non-dental employer, you will need to revisit the screens in Steps 5-C and 5-D to make additional selections.
- Once you have reviewed this screen and entered the correct information, press “Add Location,” and you will be directed to the screen in Step 5-M for final verification of your work location information.
STEP 5-M

- Once you have made all dental and non-dental employer selections during the various phases of Step 5 and pressed “Add Location” following your final selection(s), you will be directed to the screen in Step 5-M.

- This is your opportunity to review all of your employer selections and make any required additions or deletions. If you press “Back,” you will revisit the screen in Step 5 and move forward from there. If you press “Add Location,” you will revisit the screens in Steps 5-C and 5-D and move forward from there.

- Once you have reviewed this screen and made any required additions or deletions, press “Continue,” and you will be directed to the screen in Step 6.

STEP 6

- Upon pressing “Continue” in Steps 5-A, 5-B, or 5-M, you will be directed to the screen in Step 6.

- Carefully read all “Work Location Questions” and click each checkbox to acknowledge you have read the question, understand the question, and have correctly reported all dental and non-dental employers.

- Press “Back” to return to Screen 5-M, whereupon you may change any of your dental and non-dental employer information and follow the appropriate screens to return to the screen in Step 6.

- If you are certain you have correctly reported all dental and non-dental employer information and once you have reviewed this screen, press “Continue,” and you will be directed to the screen in Step 7.
STEP 7

- Carefully read all affirmations and information in the “Hygienist Certification” box.
- If you agree with all affirmations in the “Hygienist Certification” box, on the pull-down menus in the “Months Practiced” box select the number of months you have practiced in the State of Mississippi.
- You must select the appropriate number of months practiced in the State of Mississippi (e.g., 0 to 12) on each pull-down menu.
- If supplemental information is required concerning affirmations in the “Hygienist Certification” box or changes provided in the previous renewal screens, enter that supplemental information in the “Comments” box.
- Once you have reviewed this screen and entered the required information, press “Continue” for Step 8.

STEP 8

- Review all information provided on the “Summary” screen.
- This is your FINAL opportunity to see and review all renewal information at-a-glance, including those revisions, additions, or deletions you provided in each of the previous renewal screens.
- To change previously-entered renewal information, press the “Edit This Section” link next to the information to be reviewed and/or edited or press “Back.”
- Once you have reviewed and/or edited any information, follow the prompts to return to the “Summary” screen.
- When you are certain your renewal information is correct, answer each statement in the “Certification Agreement” section by selecting the checkbox next to each statement.
- Press “Continue” to begin the payment process, which will take you to the screen in Step 9.
- Please be aware you CANNOT return to any renewal screens to edit your renewal information once you press “Continue” and begin the payment process.
STEP 9

- Carefully read the information on the “Going to Payment – License Renewal” screen.
- If you are ready to continue with the payment portion of your online renewal, press “Continue with Payment,” and you will be directed to the screen in Step 10.
- If you press “Cancel,” you will be returned to the “ONLINE Services” page of the Board’s renewal portal, whereupon you will need to select “Hygienist License” to re-initiate your renewal process.
- Re-initiating your renewal process requires you to re-enter all changed renewal information.

STEP 10

- You now are beginning the payment portion of your online renewal. It is advisable to have your credit/debit card or your checking account information in front of you before you begin this process.
- The “Transaction Summary” box provides the total renewal fees due to the Board. The “Transaction Detail” box breaks down the first fee into the appropriate renewal categories.
- Once you have reviewed your transaction information, under “Payment Method” select the method of payment in the pull-down menu for your renewal, e.g., credit or debit card (see Step 11-A) or electronic check (see Step 11-B).
- Press “Continue” to enter your payment information. If you press “Cancel Payment,” you will be directed to the screen in Step 10-A, and you will be required to re-initiate your entire renewal process and re-enter any changes to your personal and work information.

STEP 10-A

- If you pressed “Cancel Payment” in Step 10, you will be re-directed to the screen in Step 10-A.
- You should press “Main Page” to return to the Board’s renewal portal entrance, whereupon you will need to select “Hygienist License” to re-initiate your renewal process.
- Re-initiating your renewal process requires you to re-enter all changed renewal information.
STEP 11-A

- If you selected credit card as your method of payment in Step 10, you will see this screen for your “Customer Billing Information” and “Credit Card Information.”
- Review the information provided in the “Transaction Summary” box. Note that an “Online Processing Fee” has been added to the total amount due.
- The “Online Processing Fee” is a convenience fee assessed by the State of Mississippi, NOT THE BOARD.
- The Mississippi State Board of Dental Examiners does NOT receive any portion of the “Online Processing Fee.” This fee is divided among the State of Mississippi (again, NOT the Board), the State’s payment processor, and your credit/debit card company.
- The “Online Processing Fee” is a sliding scale fee based upon the total amount being renewed, and the processing fee for paying by electronic check (see step 11-B) is the lowest fee ($1.25).
- Under “Customer Billing Information” enter all necessary information to use in billing your credit/debit card.
- The e-mail address you enter in this section may be different from the e-mail address you previously entered in your “Personal Information” (Step 4). Double-check the e-mail address you enter in this section to ensure you receive your payment confirmation e-mail transmitted to you within one (1) hour from the time you finalize your renewal.
- Under “Credit Card Information,” select the type of credit/debit card (VISA, MasterCard, or American Express) and enter the remaining credit/debit card information. Ensure you have entered the correct information, as incorrectly entered information will cause your renewal and payment to be incomplete.
- Once you have verified all information on this screen, press “Continue” for the “Confirmation of Payment” screen shown in Step 12.
**STEP 11-B**

- If you selected electronic check as your method of payment in Step 10, you will see this screen for your “Customer Billing Information” and “Electronic Check Information.”
- Review the information provided in the “Transaction Summary” box. Note that an “Online Processing Fee” has been added to the total amount due.
- The “Online Processing Fee” is a convenience fee assessed by the State of Mississippi, **NOT THE BOARD**.
- The Mississippi State Board of Dental Examiners does **NOT** receive any portion of the “Online Processing Fee.” This fee is divided among the State of Mississippi (again, **NOT the Board**) and the State’s payment processor.
- The “Online Processing Fee” for paying by electronic check is $1.25.
- Under “Customer Billing Information” enter all necessary information to use in settling the payment with your financial institution.
- The e-mail address you enter in this section may be different from the e-mail address you previously entered in your “Personal Information” (Step 4). Double-check the e-mail address you enter in this section to ensure you receive your payment confirmation e-mail transmitted to you within one (1) hour from the time you finalize your renewal.
- Under “Electronic Check Information,” select the type of account, e.g., checking or savings, and enter your bank’s routing number, along with your checking account number. Re-enter your checking account number to ensure it is correct. Enter your bank’s name and the name on your bank account.
- If your payment is being funded specifically by a foreign source, select the box to note such funding.
- Once you have verified all information on this screen, press “Continue” for the “Confirmation of Payment” screen shown in Step 12.

**STEP 11-C**

- If you press “Cancel Payment” at any time during the payment portion of your renewal, you will be directed to the “Payment Not Authorized” screen.
- If this occurs, press “Main Page” and re-initiate your online renewal process. You will be required to re-enter all changes to your renewal information and, once again, begin the payment process.
- If you pressed “Continue” following entry of your credit/debit card or bank account information (Steps 11-A or 11-B), you will be directed to the “Confirmation of Payment” screen in Step 12.
STEP 12

- Once you have finalized both your renewal information and payment, you will be directed to the “Confirmation of Payment” screen. This screen verifies that your renewal is considered **COMPLETE**.
- You should print a copy of this screen for your records as proof that you have finalized your Mississippi license renewal with the Board.
- Press “Main Page” to return to the online portal’s main renewal screen.

STEP 13

- Within one (1) hour of finalizing your renewal, you will receive an e-mail similar to the following which will be transmitted to the e-mail address you entered during the **PAYMENT PORTION** of your online renewal.
- If you do not receive a confirmation of payment e-mail, you should contact the Board’s office, inasmuch as you may have entered an incorrect e-mail address at the time you were entering your payment information.
- As with the “Confirmation of Payment” screen shown in Step 12, you should keep a copy of the payment confirmation e-mail as proof that you have finalized your Mississippi license renewal.