KENTUCKY DENTAL ASSOCIATION HOUSE OF DELEGATES FIRST SESSION

Hyatt Regency Hotel Louisville, Kentucky March 10, 2012

Dr. H. Fred Howard, Speaker of the House

- 1. CALL TO ORDER. Dr. Fred Howard, Speaker, called the House of Delegates to order at 2:30 p.m.
- 2. QUORUM STATEMENT. Dr. Barry Curry announced that a quorum was present.
- 3. INVOCATION. Dr. Theodore E. Logan, Jr. gave the invocation.
- 4. **APPROVAL OF MINUTES.** The minutes of the April 9, 2011 meeting of the House of Delegates were approved. The minutes of the April 10, 2011 meeting of the House of Delegates were approved.
- 5. **RECOGNITION OF SPONSOR. Dr. B. J. Moorhead** thanked **Anthem Blue Cross-Blue Shield** for providing refreshments at today's meeting.
- 6. **SPEAKER'S INTRODUCTORY COMMENTS AND INTRODUCTIONS. Dr. Fred Howard, Speaker,** introduced Dr. Kathleen O'Loughlin, Executive Director of the American Dental Association and the Past Presidents in attendance.
- 7. **KENTUCKY DENTAL ASSOCIATION MEMORIAL SERVICE. Dr. Theodore E.** Logan, Jr. conducted the annual Memorial Service. Those honored are as follows:

Dr. Samuel Ballou*	Dr. James McKinney, III
Dr. Ova Combs	Dr. Donald Newsom
Dr. Christopher Cron	Dr. James Patterson
Dr. Glen Gill	Dr. Carl Peterson
Dr. Clark Hall	Dr. Ralph Petrey
Dr. Carl Heeb	Dr. Hubert Petty
Dr. John Helton	Dr. Willis Potter
Dr. John J. Kelly, III	Dr. James Shipp
Dr. Harold Klein	Dr. James Simpson
Dr. Bernard Lutz	Dr. Lewis Whipple
Dr. John J. Kelly, III Dr. Harold Klein	Dr. James Shipp Dr. James Simpson

*Past President

Each member's name was attached to a rose which was placed into the Memorial Vase upon the reading of their name. The Memorial Vase, with its roses, remained at the center of the podium throughout all activities of the House of Delegates. At the conclusion of the House of Delegates, the roses were made available to family and friends of the deceased.

8. ADDRESS BY EXECUTIVE DIRECTOR OF THE AMERICAN DENTAL ASSOCIATION. Dr. Kathleen O'Loughlin addressed the House of Delegates and presented a current look at ADA activities. The outline of her address follows:

REMARKS FROM DR. KATHY O'LOUGHLIN ADA EXECUTIVE DIRECTOR Kentucky Dental Association March 10, 2012

Impact

These are critical times for dentistry at all levels, just are they are for our nation. There are many outside factors beyond our control: political, cultural and economic. We can accept these challenges and adjust. That's exactly what the ADA is doing today.

Response

ADA Strengths Tangible benefits for members. Advancing profession through science and research. Support for dental education. Advocate for dentistry and public oral health. Provide vital information to the public.

ADA Advocacy Initiatives Help preserve the doctor/patient relationship. Protect the practice of dentistry. Shield dentists from new taxes. Reduce the cost of doing business. Make dental care more affordable. Address access for Medicaid recipients and the under-served. Anticipate and address legislative and regulatory issues. Member survey: Advocacy #1 reason for membership.

National: The Workforce Issue

Commonly used tactic to support mid-levels: perceived lack of dentists. Example: PBS interview with Dr. Calnon Reporter: surprised; insisted that (9,000+) new dentists needed to meet demand Do Kentucky & Tennessee think there is a lack of dentists? Governance study: controversial Dental therapists: further compromising dentists' livelihood? ADA Examines this in its first 'Barriers' papers A series of papers on access Addresses barriers to oral health The first paper: workforce "Breaking Down Barriers to Oral Health for All Americans: The Role of Workforce." The second paper: tattered oral health safety net Future releases: Utilization Oral health literacy Disease prevention Financing care Overall purpose: take full command of these issues and tell the story as only dentistry can.

Local: The Managed Care Issue

Kentucky Medicaid is expanding managed care coverage to all areas of the state. Medicaid contracted with three new managed care organizations (MCOs):

CoventryCares of Kentucky Kentucky Spirit Health Plan WellCare of Kentucky. This began on Nov. 1, 2011.

Out-of-network providers of dental services were reimbursed at 100% of the Medicaid fee schedule for medically necessary services provided on Nov. 1, 2011, through Dec. 31,

2011. Beginning Jan. 1, 2012, out-of-network providers of dental services will be reimbursed at 90% of the Medicaid Fee schedule for medically necessary covered services. Must obtain prior authorization (PA) for all out-of-network services provided to eligible CoventryCares members. A list of the dental services requiring PA is available at CoventryCaresKY.com.

Further complicating the mix: Each of the medical MCOs contracted with a dental MCO. Each company medical or dental also bid the project at a different price.

- Each medical MCO has a dental MCO.
- Avesis, Dentaquest and MCNA are in the mix.

It also appears that there is no out of network service provided at this point. Avesis appears to be the best liked/least hated of the MCOs. MCNA is the least loved.

- This is due in large part to the amount of PAs placed on the providers by MCNA.
- There is a striking correlation between the richness of the contract and number of PAs and restraint placed on the member.

Interesting to note: MCNA also has the "Passport" which is a much richer contract and there is little or no PAs or restrictions on that provision of care for this group. Ken Rich is a great resource for us on this information.

Coalitions

In support of Goal #2—be the trusted oral health resource for the public— ADA works hard to raise awareness through collaboration

Sharecare.com

- Web-based health resource affiliated with Dr. Oz
- Ad Council public service campaign

children's oral health

These outreach efforts provide information to millions of people.

In support of Goal #3—collaborate with others to improve public health outcomes— Community Water Fluoridation support

Most effective public health initiative to reduce tooth decay

- Member involvement in promoting facts is critical
 - Dentists = trust of their community
 - Dentists = opinion leaders on oral health issues
 - ADA members can be extremely effective advocates

ADA: designing a dental society fluoridation tool kit

- to aid in fluoridation advocacy efforts
- help build broad-based coalitions of community leaders, parents, teachers, hospital administrators, school nurses, physicians, civic leaders and other health advocates.

National Roundtable for Dental Collaboration

Inception = 2010 23 participating organizations (including all of the dental specialty organizations, as well as the Hispanic Dental Association, the National Dental Association, the Society of American Indian Dentists and the American Association of Women Dentists).

Resulted in "The Partnership for Healthy Mouths, Healthy Lives."

Access to Dental Care Summit

Convened by the ADA in 2009

Focused on common vision among diverse stakeholders to improve access to oral health care for underserved people.

Summit attendees included:

- ADA leadership,
- key dental stakeholders,
- federal agencies,
- health care policy-makers,
- the dental industry,
- consumer advocacy groups,
- education and research communities,
- financing organizations...including third-party payers,
- philanthropy and safety net providers, and
- primary care/medical providers.

Summit participants identified several priority areas, including: prevention and public health infrastructure,

- o oral health literacy,
- o medical and dental collaboration,
- metrics for improving oral health,
- o financing models, and
- o delivery system improvements.

For two years, a workgroup met on a routine basis. May 2011: workgroup became the U.S. National Oral Health Alliance. December 2011, ADA joined as a partner.

Strategic Plan Goal #4—maintain a financially stable organization

Short and long term savings:

- cutting the ADA's operating budget.
- o overhauling the employee pension plan.
- o aligning annual budget with the ADA Strategic Plan.
- o (putting our money where our mouth is).

Taking "The Race to Relevance" to heart. Embracing change.

• HoD: approved review of governance model.

Budget process: forcing greater scrutiny of programs and services. Reinvesting in ADA technology framework.

o Improved automated mechanisms for serving members and nonmembers alike.

Meeting Membership Challenges Head-On Changing demographics

- Ratio of women to men in dental school has gone from one in four to one in two (1986-2009).
- Proportion of dentists of diverse ethnic background has also increased.
- The face of dentistry is changing.
- So are the economics.
 - Number of dentists in the top twenty-five large group practices in the U.S. increased by 25 percent (2009-2011).
 - Phenomenal growth in a time of high unemployment and challenging levels of dental reimbursement.

Membership growth & decline

- Since 2006, the ADA has experienced a net gain of just under 700 members.
 - Greatest growth: women, ethnically diverse populations, and new dentists.
 - Net number of general practitioners has declined slightly.
 - Even where significant gains have been achieved, the market has grown faster, resulting in a loss in ADA market share.

ADA Action: Council on Membership: two primary actions.

- 1. Established MC2
 - "Membership Contacts and Connections."
 - Gives constituents and components have access to tools, resources, training and assistance to support their efforts.
 - Example: marketing collaborative which uses a web-to-print tool to provide national membership marketing campaigns customized at a constituent level.
- 2. Membership Program for Growth (MPG).
 - Invites constituent and component societies to submit proposals for grant funds.
 - Allocates resources where they can have the greatest impact on increasing market share;
 - Creates a laboratory to document, test and validate effective membership growth strategies and tactics; and
 - Provides an enhanced mechanism to encourage, reward and recognize positive results.

Closing

Challenges are an opportunity. o Reflect, adapt and modernize. If handled thoughtfully—will make us stronger. Let's start meeting these challenges today. Thank you.

9. **REPORT OF SIXTH DISTRICT TRUSTEE. Dr. Ken Rich** expressed his appreciation to Dr. O'Loughlin for her attendance at our Annual Session. He presented several gifts acknowledging our appreciation. His report from the Sixth District follows:

To each of you on the sixth district delegation my most heartfelt thanks for your time, efforts and expertise.

Your dedication to our profession and the association are what makes and keeps us the ultimate authority on Oral Health.

In the past three years we have truly come thru some difficult times that have been and are being compounded by a less than favorable economy. Your dedication and efforts have been essential in guiding us thru these troubled times. Even though there will be obstacles ahead I feel confident that we have put together the most honest and qualified team possible to guide us through these challenges. Working together i have great confidence that we can not only maintain our status and influence in the world but also improve it.

In the coming year we will continue to face challenges in the areas of finances and unwanted intrusions on the way we deliver health care.

The affordable Health Care act will have a lasting effect and forever alter what we do even if it is not totally implemented or is rescinded. The changes that will and have been made in the area of regulation will forever alter the way third parties are reimbursing for health care. CMS is attempting to transition from a payor of health care services to "health care plan" There is a high probability that these changes will become at the very least part of the standards adopted by the private payers.

Midlevels will continue to be a great concern that will consume large amounts of both our humane and monetary resources. These issues, for the most part be played out on a state by state bases

Of a more global concern is the ever evolving issue that seems to drive all the others" how to improve the oral health of our country with inadequate resources"?

To my knowledge only PEW and Kellogg are promoting midlevels many others are developing risk assessment and disease management approaches to impact oral health. Some of these show great promise in reducing the disease of the test population. Widespread use of these concepts will require major systems changes in the way we deliver and are reimbursed for care. If we have the resolve to move our profession in this direction and retake ownership of the "How does one improve oral health" conversation not only do we show the world a better way but we minimize less palatable and less effective options. We have the tools and talent to accomplish this but we need the vision and commitment. I believe it is our responsibility and opportunity

Thank you for affording me the opportunity to serve in this position and thank you for your dedication commitment and effort

Our profession is better because of you.

Ken Rich Sixth district Trustee

10. **PRESIDENT'S ADDRESS. Dr. Kevin Wall** presented his annual address to the House. The text follows.

Last year when I assumed the reins of the KDA from John Creech, one of my best friends asked "how does it feel to be the president of the state dental association whose state ranks last in dental health?" I chuckled and said "The bar is not set very high so I can't screw up too badly. We can't get any worse." The truth is we can keep sliding backwards. We have had some great successes the past year, but we have also had some obstacles. We have striven to stay true to our mission statement by being the advocate for the dentists of the state and by trying to improve oral health for the citizens of Kentucky.

We seem to be fighting an uphill battle in changing the perception of Kentuckians by others, but it is a fight we are going to have to get involved in. The "Turtle Man" is just another example of what the general American population thinks of Kentuckians with his toothless grin and country speak. Apparently he has signed a contract with his network promising he will not get his teeth fixed because it will negatively affect his persona. We need to reach our patients and increase the oral literacy in our state. Through education and public service we can make a difference.

This year we finished the regulations to support the changes made in the dental statutes and we ended with changes that should not cause too much hardship for the members. Dr. Creech and Dr. Johnson worked very hard to protect our interests and I feel like we can live with the changes that were made. Dr. Creech continues to work with the Board of Dentistry in working out the details of the Public Health Dental Hygienist.

We also started using CAPWIZ this year in communicating with the membership and I foresee this being a great tool in the future. I feel like the communication with membership has improved, but there is still much room for improvement. I would like to see our website updated more and utilized more. If there were valuable information

posted on the website frequently, it would be accessed more.

The KDA was fortunate this year in securing grants submitted by Dr. Jonathan Rich to improve our membership numbers. We had programs in Louisville and Lexington for our New Dentists as we continue to work towards again making the New Dentist Committee an integral part of our organization. We had programs at both dental schools where we introduced organized dentistry to the students in the hope that we can get them to join after graduation. This coming year we again applied for grants from the ADA and we were awarded money for four projects so our efforts for recruitment and retention of members can continue.

Our greatest obstacle this year has been the state's revamped Medicaid program. When the state decided to get out of the Medicaid business and turn it over to the managed care organizations, everyone was worried how it could work. Three of our members, Dr. Garth Bobrowski, Dr. Carla Rodriguez, and Dr. Al Pelphrey, worked tirelessly in trying to negotiate with the MCO's on behalf of our members. I have awarded the three of them a presidential citation because of their hard work. We are still not completely happy with some of the Medicaid policies and we continue to work to improve the MCO manuals.

We have also been very involved with legislation this year, especially the non-covered services proposals. For three years now, we have tried to get a bill passed prohibiting insurance companies from setting fees for non-covered services. It has been frustrating to say the least, but I think with perseverance we will get this passed.

We are also constantly monitoring all legislation to protect our members and our profession. Our KDPAC has not been very strong recently. Dr. Mike Johnson has stepped up to lead our PAC and make it more of a presence. I want to thank him for taking on such a huge project.

We have continued the planning meetings that Dr. Creech started last year and this should allow for a smooth transition from year to year and president to president. The House is voting this year to change the nomination process from the general assembly to the House and to rename the offices of the officers. These changes should help to make the association run better and more efficiently.

Dr. B.J. Moorhead, who is the scientific chair for this year's annual meeting has done a tremendous job in putting together a wonderful program. I want to thank him for all of his hard work this year and all of his help. I would also like to thank Dr. Fred Howard for all of his support this year. I would like to also thank Dr. Terry Norris for all of his help and support, and I wish him well as he steps up to lead us next year. I want to thank all of you for your kind words, your help and support in making this year a great and memorable time for me.

Sincerely, Kevin Wall

11. ADDRESS OF THE PRESIDENT-ELECT. Dr. Terry Norris, President-elect of the Kentucky Dental Association, presented his address to the House of Delegates. The text of his message follows.

I had the opportunity to attend the President Elect's Conference at the ADA building on January 22 to 24. All but one of the 53 President Elects were in attendance. This conference was much more informative than I had expected. One logistical element I feel the KDA needs to do is to send the President Elect and the President Elect-Elect (soon to be the First and Second Vice President, respective) to the conference in 2013. After then only the Second Vice President would attend. The reason for this is there are yearlong webinars and conference calls for the President Elects. I will stay involved with this group even though I am only a president elect for two months after the conference. Many of these president elects do not take office until the fall. This would be a great learning experience to bring the soon to be Second Vice President up to speed. The impact on the budget would only be a onetime expense in 2013.

I have been assured by Mr. Porter that we will be doing monthly drafts for dues in 2013 via credit cards for anyone choosing to take advantage of this program.

At the time of this submission I have not had time to speak to the deans about the opportunity and availability for juniors or seniors to take part in the RAM clinics. I will update this verbally at our meeting.

Sincerely, Terry L. Norris

- 12. NOMINATION/ELECTION OF SPEAKER OF THE HOUSE. Dr. Mike Johnson nominated Dr. H. Fred Howard for the office of Speaker of the House. Dr. Howard was elected by acclamation.
- 13. **NOMINATION/ELECTION OF PARLIAMENTARIAN. Dr. J. D. Hill** nominated Dr. Bill Lee for the office of **Parliamentarian** of the House of Delegates. Dr. Lee was elected by acclamation.
- 14. **REPORT OF THE KENTUCKY DENTAL FOUNDATION. Dr. Steve Robertson**, Foundation President, submitted the following report:

Friends and Delegates,

I am Dr. Stephen W. Robertson, president of your Kentucky Dental Foundation, and I am here to tell you we have had an exciting year! But, at the same time, we seem to be suffering from a bit of an identity crisis.

By show of hands, how many of you were aware we have a Kentucky Dental Foundation?

Our Foundation was first established in 2000. It is a full-fledged, not-for-profit, IRS 501c3 philanthropic organization. The Foundation was established to accept tax-deductible gifts for the promotion of Dentistry and Oral Health in our great Commonwealth.

Our two biggest obstacles have been manpower and fundraising. But, I am happy to report to you today that we have made great strides in both areas. Our Board slots are filled, and we have reached out into the lay community to gain more insight from nondental minds, by adding Mr. David Gardner, of Proctor & Gamble, and Ms. Kelly Dearing Smith, of the Louisville Water Company, to our Board. Their input has already been eyeopening, to say the least.

We have big dreams, we have great vision, and with the help of our Dental Community, we can reach even higher.

Our Constitution states we may deliver grants to the chosen projects by using the interest income on the money we raise. Currently, this has meant awards totaling approximately \$3,500.00 yearly.

How many of you were aware that YOUR Foundation has actually already been awarding grants? For the year 2011, two programs were selected for support; The Western Kentucky University Institute for Rural Health, and the Smile Kentucky! Statewide Initiative.

What can be accomplished is only limited by the funding of this Foundation.

Why should you consider supporting the Foundation at this time? Because it truly is YOUR Foundation, the Kentucky Dental Foundation. This is the way that we can support the promotion of our great profession and increased Oral Health, while providing an avenue for tax-deductible donations.

Before you today is a copy of our contribution form. Please consider filling it out and becoming a Foundation contributor today. Please take the forms with you to your component meetings and discuss the Foundation with its members. You will notice that there are several suggested levels of contributions, and most, if you so desire, can be divided over a four year period.

You will notice also the Fred E. Meece Memorial Donation category. We have always accepted "in memorium" gifts, and I hope you noticed the scrolling LED boards at the registration area listing all contributors and memorium donors. The decision was made to honor Dr. Meece by placing his name on this category, because he was the first to establish a fund for the granting or gifting of monies by the KDA. When the Foundation was established, this fund was rolled into our corpus. An original Board member of the Foundation, Dr. Meece lost his life in an automobile accident a few years back. A perpetual plaque will hung in the KDA office building listing those who have and will be honored by donations to this fund. Several individuals and components are already taking advantage of this special recognition. While these donations do not count towards contribution dollars, they will be providing a lasting legacy for those you choose to honor.

Did I mention that these donations and contributions tax-deductible? I also want you to know that all the Foundation Board members have made pledges, or are already contributors. We can accept contributions from anyone interested in supporting our cause. Components, members and non-members of the KDA, staff and Dental team members, and we are preparing to aggressively pursue corporate gifts. If you find someone interested in supporting our Foundation, have them contact the KDA staff and we will help them with their contribution.

As I mentioned, we have big plans. Our Board members have been involved in a series of "work days," where we have refocused our efforts and reorganized our thoughts. Over the coming year, you will begin to see a bigger presence from your Foundation. Before we can hope for people to support it, they have to know it exists, and that it is working. Beginning in 2013, the Foundation plans to have a much more visible presence at this annual meeting. Starting then, we will have a raffle for a free room at the Hyatt for the 2014 meeting, with tickets starting as low as five dollars. We hope to also be holding a raffle on the floor for donated items from our vendors, an idea that came from our lay members. Not a silent auction with competitive bidding, just make the appropriate donation (only a few dollars) and drop your ticket or tickets in the bowl for the items you are interested in winning. It is our plan for these to become annual events.

As I close I would like to again direct you to the contribution form, and point out the \$50.00 Foundation Contributor category. We created this as an entry contribution so to say. Make a small tax-deductible donation to get your feet wet, see how good it makes you feel to know you are truly helping out. We also plan on offering a carrot, an enticement shall we say. We are planning to offer a CE course at the 2013 KDA meeting that will be FREE to all Foundation Contributors. This will not be a course on proper public bathroom cleaning procedures, it is our hope that it will be presented by one of the top speakers at the meeting for 2-3 hours of credit. Your Contribution at any of listed levels will gain your admission.

This is also a program we hope to continue for many years to come.

So, as I stated, we have big plans, we have big dreams, and they are OUR dreams. But we cannot do it without your help and support. So fill out that contribution form and help spread the word, OUR Foundation WILL accomplish great things with your help.

Did I mention it's tax-deductible?

Respectfully submitted, Stephen W. Robertson, D.M.D.

15. COUNCIL ELECTIONS. The following were elected to Councils by acclamation:

Council on Governmental Affairs and Federal Dental Services Dr. Mark Moats Dr. Kevin Wall

16. **COUNCIL NOMINATIONS.** The following were nominated. Election will be held during the second meeting of the House of Delegates by ballot vote.

Council on Ethics, Bylaws and Judicial Affairs Dr. Robert Ballou Dr. Steve Robertson Dr. Bryan Turner

17. UNFINISHED BUSINESS. There was no unfinished business.

18. NEW BUSINESS.

 <u>Kentucky Board of Dentistry</u> Mr. Mike Porter announced that as a result of the KBD elections, the names of Dr. James K. Hargan, Dr. Susan King and Dr. Karen Nation will be submitted to the Governor. He will select one person to serve on the Board.

 <u>General Assembly</u> The following were elected in the General Assembly: President – Dr. Terry Norris First Vice President – Dr. B. J. Moorhead Second Vice President – Dr. Garth Bobrowski ADA Delegate – Dr. Mike Johnson ADA Delegate – Dr. Bill Lee ADA Alternate Delegate – Dr. Kevin Wall

19. ADJOURNMENT. The meeting adjourned at 4:07 p.m.

Respectfully submitted,

Theodore E. Logan, Jr., DMD Secretary-Treasurer