

**KENTUCKY DENTAL ASSOCIATION
EXECUTIVE BOARD MEETING**

KDA Headquarters Building
Louisville, Kentucky
October 3, 2015
11:10 A.M.

1. **CALL TO ORDER.** **Dr. Bill Lee** called the meeting to order at 10:05 a.m. The following members of the Board were present:

Dr. Ralph Beadle
Dr. Garth Bobrowski
Dr. Vaughn Brummer
Dr. Barry Curry
Dr. Ansley Depp
Dr. H. Fred Howard
Dr. William Lee

Dr. Ted Logan
Dr. Robert Mann (representing
Dr. Karen Nation)
Dr. Robert Millay
Dr. Matt Milliner
Dr. David Narramore
Dr. Dennis Price
John Houston (ULSD Student)

Guests included: Drs. Mike Johnson, Charles Montague, B J Moorhead, Mark Moats, DeJon Graves, Shera Newcomb, John Newcomb, Michael Hunzinger, Daniela Shields, Will Yoder, Zak Taylor, Jason Ford, Carson Keally, Ryan Estes, Darren Greenwell. Also present was Jeanine Pekkarinen, ADA Membership Recruitment, Retention and Outreach Manager. Staff members present were Mr. Todd Edwards, Mrs. Janet Glover, Mrs. Melissa Nathanson and Mr. Richard Whitehouse.

2. **INVOCATION.** **Dr. Ted Logan** gave the invocation.
3. **CONFLICT OF INTEREST.** **Mr. Richard A. Whitehouse** commented regarding the importance of transparency regarding conflicts of interests and dualities in any organization. He noted the policy contained in the KDA Bylaws as well as the disclosure each board member signed upon election to the KDA Board. He referred to the agreement of board members at the last meeting to incorporate a declaration of any conflicts or dualities into the opening of each official meeting. Chairman Lee called for board members to declare any conflicts or dualities. There were no new conflicts expressed.
4. **APPROVAL OF MINUTES.** The minutes of the August 8, 2015, meeting of the Executive Board were approved.

NOTE: All reports are presented in the minutes as they were submitted by their authors. No editing in the form of spelling or grammar has been attempted.

5. **CONSENT CALENDAR.** The Consent Calendar was established.

- 6. REPORT OF THE SECRETARY-TREASURER.** Dr. Ted Logan, Jr. presented the report of the 2015 KDA Budget and Finance Committee Report.

**KENTUCKY DENTAL ASSOCIATION
BUDGET AND FINANCE MEETING**

Conference Call

Louisville, Kentucky

September 15, 2015

7:10 P.M.

- 1. CALL TO ORDER.** Dr. Barry Curry called the meeting to order at 7:10 P.M. The following members of the committee were present:

Dr. Bill Collins, Dr. Barry Curry, Dr. Bill Lee, Dr. Ted Logan, Dr. Robert Millay, and Dr. Karen Nation.

Staff members present were: Mr. Rick Whitehouse, KDA Executive Director and Mr. Todd Edwards, KDA Assistant Executive Director.

- 2. THE PROPOSED 2017 KDA BUDGET.** There were lengthy discussions about the anticipated shortfall of revenues over expense for the proposed 2017 KDA Budget. The Committee strongly encourages the Annual Sessions Council to produce a financially successful meeting in 2016 and 2017.
- 3. DUES INCREASE FOR THE FISCAL YEAR 2017.** The committee proposed a \$75.00 dues increase to offset the deficit. The dues increase would not accomplish the anticipated revenue shortfall. However, a \$9,200.00 contribution from the Journal Fund would balance the budget.

MOTION: Dr. Barry Curry moved the 2017 Budget Revenues and Expenses be approved and sent to the KDA Executive Board for its approval.

ACTION: Approved and sent to the KDA Executive Board with a recommendation to approve.

- 4. ADJOURNMENT.** The meeting was adjourned at 8:46 P.M.

Respectfully submitted

Theodore E. Logan, Jr. DMD
Secretary-Treasurer

2017 Proposed KDA Budget

	Adopted Budget 2016	Year to Date 6/30/2015	Proposed Budget 2017
REVENUES			
KDA Dues	378,814.00	358,091.00	437,903.00
KDA Assessment	101,000.00	97,000.00	99,000.00
Annual Session	50,000.00	1,898.00	75,000.00
Interest Income	2,500.00	1,358.00	2,500.00
Rental Income-Lou Dental Soc	4,866.00	0.00	5,011.00
Frost Arnett	0.00	0.00	250.00
ADABEI (ADA)	25,000.00	15,947.00	25,000.00
KDA Insurance Services	35,000.00	15,000.00	30,000.00
ADA Dues Rebates	500.00	0.00	500.00
Non-Budgeted Revenue	3,000.00	826.00	3,000.00
Officite	6,000.00	650.00	6,000.00
Rental Income	62,400.00	29,063.00	62,400.00
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TOTAL REVENUES	669,080.00	519,833.00	746,564.00
Journal Fund Contribution	70,900.00		9,156.00
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	739,980.00	519,833.00	755,720.00
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	Adopted Budget 2016	Year to Date 6/30/2015	Proposed Budget 2017
EXPENSES			
A. Fixed disbursements over which the House has no control but must have approval			
Utilities & Maintenance:			
Telephone	7,500.00	4,088.00	7,500.00
Gas, Electric & Water	25,400.00	12,939.00	25,400.00
Rent	84,630.00	42,314.00	84,630.00
Maintenance Expenses	20,000.00	13,702.00	20,000.00
Janitorial Expenses	5,000.00	416.00	5,000.00
Total Utilities & Maintenance	142,530.00	73,459.00	142,530.00
Accounting & Audit Services	13,000.00	0.00	13,000.00
Attorney Fees	4,000.00	0.00	4,000.00
Insurance	13,000.00	1,940.00	13,000.00
Printing and Postage	3,000.00	1,278.00	3,000.00
Miscellaneous	2,500.00	11,019.00	2,500.00
A. TOTAL	178,030.00	87,696.00	178,030.00

B. Items Controlled by the House Of Delegates

General Administrative Expenses:			
Equipment Maint & Rent	12,000.00	4,987.00	12,000.00
Technological Support	10,000.00	1,546.00	10,000.00
Membership Dues & Subs	750.00	167.00	750.00
Support Staff Expenses	4,500.00	1,757.00	4,500.00
Office Supplies	5,000.00	2,278.00	5,000.00
Executive Board Expenses	2,000.00	806.00	2,000.00
President's Expenses	5,000.00	20.00	5,000.00
1st Vice President Expenses	3,000.00	2,057.00	3,000.00
ADA Delegates Expenses	30,000.00	1,100.00	35,000.00
Leadership Conference	0.00	0.00	4,500.00
KDHC Membership	1,000.00	300.00	1,000.00
Ex. Dir. Discretionary Expenses	750.00	0.00	750.00
Auto Expenses	4,000.00	919.00	4,000.00
Total General Administrative Exp.	78,000.00	15,937.00	87,500.00

	Adopted Budget 2016	Year to Date 6/30/2015	Proposed Budget 2017
Council/Committee/Work Group Expenses:			
Council on Annual Session	0.00	154.95	0.00
Budget & Finance Committee	0.00	0.00	0.00
Long Range Planning Committee	0.00		0.00
Membership Steering Committee	7,500.00	0.00	7,500.00
Work Group to Study Future of Oral Health in KY	1,000.00		1,000.00
New Dentist Committee	3,200.00	1039.00	3,200.00
General Council Expenses	250.00		250.00
UK-UL KSDS Student Support	1,000.00	0.00	1,000.00
Total Council/Committee/Work Group Expenses:	12,950.00	1,193.95	12,950.00
B. TOTAL	90,950.00	17,130.95	100,450.00

	Adopted Budget 2016	Year to Date 6/30/2015	Proposed Budget 2017
C. Staff Compensation			
Executive Directors Expenses	12,000.00	8,684.00	12,000.00
Secretary - Treasurer Expenses	5,000.00	0.00	5,000.00
Salaries-Staff	360,000.00	177,243.00	365,000.00
Staff Benefits	40,000.00	17,691.00	40,000.00
Retirement Plan Contributions	15,000.00	7,547.00	15,250.00
Payroll Taxes	33,000.00	14,012.00	33,990.00
C. TOTAL	<u>465,000.00</u>	<u>225,177.00</u>	<u>471,240.00</u>
D. Fund Contributions			
Reserve Fund Expenses	0.00	0	0.00
Capital Expenditures	5,000.00		5,000.00
D. TOTAL	<u>5,000.00</u>		<u>5,000.00</u>
E. Non-Budgeted Expenses			
Investment Fees	1,000.00	352.00	1,000.00
E. TOTAL		<u>352.00</u>	
TOTAL EXPENSES	739,980.00	330,355.95	755,720.00

2017 BUDGET NARRATIVE

The revenue section lists the areas of revenues the Association anticipates for the fiscal year 2017.

Dues - reflects the dues income for all categories of membership. This reflects a \$75.00 dues increase for 2017.

Annual Session - reflects net revenue from all sources generated by the Annual Session. (Exhibit, Continuing Education fee courses and miscellaneous income).

Interest Income - reflects interest earned on Association investments.

Rental Income-Louisville Dental Society – reflects annual rental income received from the Louisville Dental Society.

Frost Arnett Income - reflects royalty income received from KDA endorsed collection services.

ADABEI (Formerly Finco) (ADA) Royalties - reflects endorsement income received for credit card purchases and other endorsed products and services.

KDAIS Income - reflects endorsement income received from Kentucky Dental Association Insurance Services Company.

ADA Dues Rebate - reflects revenue received from ADA for timely processing of dues payment.

Label Sales - reflects income from sale of KDA Membership labels.

Non-Budgeted Revenue - reflects any revenues not classify under the listed revenue categories.

Rental Income – income from the rental of the first floor of the headquarters building.

Officite – endorsement income from Officite web page services.

2017 BUDGET NARRATIVE

EXPENSES

A. Fixed disbursements over which the House has no control but must have annual approval.

Utilities and Maintenance - reflects the cost of maintenance, janitorial, telephone, gas, electric and water for the operation of the KDA Executive Office.

Rent- debt reduction \mortgage paid to Kentucky Dental Foundation

Accounting Services - reflects cost of the Association's annual audit, accounting software support and related tax services.

Attorney Fees - reflects the cost of the Association's legal counsel.

Insurance - reflects cost of insurance on Association property and contents.

Printing and Postage - reflects cost of printing and postage not associated with Journal.

Miscellaneous - reflects cost of miscellaneous expenses not attributable to existing expense accounts.

Temporary Services - It has become necessary to utilize temporary employees in the KDA building.

B. Items controlled by the House of Delegates

General Administrative Expenses:

Equipment Maintenance and Rental - reflects cost of general maintenance and rental of office equipment.

Membership Dues and Subscriptions- reflects cost of various professional staff dues and subscriptions to publications.

Technological Support - reflects cost for the computer network, also maintenance for computers.

Support Staff Expense - reflects cost of continuing education, travel and miscellaneous expenses for KDA Staff.

Office Supplies - reflects cost of Executive Office supplies.

KOHC – membership in Kentucky Oral Health Coalition

2017 BUDGET NARRATIVE

Executive Board Expense - reflects cost of conducting Executive Board Meetings as necessary.

Presidents Expense - reflects expenses incurred by the President on behalf of the KDA.

1st Vice-President's Expense - reflects costs of the 1st First Vice-President to attend ADA sponsored conferences.

KDA Leadership Conference- reflects cost of KDA Leadership Conference.

ADA Delegates Expenses - reflects expenses for the Kentucky Delegates and Alternate Delegates to attend the ADA House of Delegates Meeting.

Ex. Director Discretionary Expenses - reflects expenses incurred by the Executive Director which do not fall under expense account.

Auto Expense - reflects cost of operating and maintaining the association automobile.

Council and Work Group Meeting, Travel, Lodging, Telephone, Printing and Postage

Membership Steering Work Group - monies for a membership survey.

General Council Expense - reflects expenses that occur during Council Day meetings.

UK-UL-KSDS Student Support - reflects cost of booth space during meeting. Also, monies are specified for KSDS support for flag football game, spring basketball tournament, Lunch n learns, fall retreat for new officers and student lobby day.

2017 BUDGET NARRATIVE

C. Staff Compensation

Executive Directors Expense - reflects expenses incurred by the Executive Director related to travel, meals and entertainment, including the ADA and 6th District meetings.

Secretary-Treasurer Expense - reflects expenses incurred by the Secretary-Treasurer related to travel, meals and entertainment, including the ADA and 6th District meetings.

Salaries - reflects salaries for KDA Staff.

Staff Benefits - reflects cost of employee health and other insurance programs.

Retirement Plan Contributions - reflects the Association's annual contribution to the employee program.

Payroll Taxes - reflects the Association's contribution to social security taxes and the cost of Kentucky and federal unemployment taxes.

D. Fund Contributions

Reserve Fund Expense – the contribution to the Reserve Fund.

MOTION: The Committee moves to approve the 2017 Proposed KDA Budget and refer to the 2016 KDA House of Delegates with a recommendation to adopt.

ACTION: Approved and referred to the 2016 KDA House of Delegates.

7. REPORT OF THE PRESIDENT. Dr. Dennis Price submitted the following report:

President's Report for Executive Board Meeting — October 3, 2015

Over 100 private practicing women dentists, dental educators, and dental students attended the 2nd Annual KDA Women Dentists' Forum on Friday, August 21, 2015. The event was held at Gingerwoods in Prospect (East end of Louisville), Kentucky. Former KDA President, Dr. Beverly Largent, as Chairperson for the event put together a daylong program which was hosted by former LDS President, Dr. Samantha Shaver. Many dental, and non-dental, sponsors donated some excellent door prizes for the event. The KDA staff — Todd Edwards, Janet Glover, and Melissa Nathanson -- did another outstanding job of coordinating all of the logistics for this meeting including registration, refreshments, catered lunch, wine and cheese reception, and even fresh flowers on all tables. Former KDA President and Journal Editor Emeritus, Dr. John Thompson, provided AV and Technical support all day for the meeting and hosted the wine and cheese reception at the end of the day. ED Rick Whitehouse and yours truly were allowed to address the audience briefly at the start of the day for welcoming remarks and a plea for continued and more enthusiastic participation of all member (and even a few non-member) dentists and dental students in all aspects of Organized Dentistry thru the ADA's Tripartite system. Former KDA President and ADA Sixth District Trustee, Dr. Ken Rich, attended the Forum and provided greetings from the ADA and introduction of the keynote ADA speaker.

During the morning session of the program, recently retired, Immediate-Past Dean, Dr. Sharon Turner, from the University of Kentucky, addressed the audience. A last minute personal issue prevented ADA Ex. Dir, Dr. Kathleen O'Loughlin, from attending the Women Dentists' Forum. However, her substitute representative from the ADA, Dr. Betsy Shapiro, provided a very informative, fact-filled, and interesting power point presentation highlighting timely and appropriate issues facing dentistry and some of the support programs available to dentists thru the ADA. The afternoon session included a very informative presentation by a Financial Planning Group from the Paducah area. Feedback from attendees at the meeting seem to support the desire and need to continue this sort of Program in the future, and I would encourage future KDA leadership to begin planning for such events. With the 2017 and 2018 Annual Sessions scheduled for August dates, it might be more appropriate to schedule any Women Dentists' Forums in those calendar years for a month other than August — unless there is reason to believe that special programs for Women Dentists could and should be included with the Annual Sessions of 2017 and 2018.

I would recommend that the Annual Session and Scientific Session Chairs for those meetings consult with KDA Staff, as well as Drs. Largent, Shaver, and KDA 2nd VP, Dr. Ansley Depp, concerning future plans for any Women Dentists' Forums.

In conjunction with timing for the Women Dentists' Forum, on Thursday afternoon and evening, August 20, 2015, the KDA hosted a small golf outing at Louisville Country Club with two (male) members from each of the instate dental schools, UK and UL. The 1st Annual(?) KDA Cup, a (pewter) silver mint julep cup, was won by the UKCD team of students Evan Cox and Josh Whitt. They defeated a ULSD team of students Nick Mechas and Tyler Jury, as well as a KDA team of Drs. Mark Schulte and Dennis Price. The golfers joined a group of KDA leadership and the ADA guest, Dr. Shapiro, for a banquet dinner meeting celebration that evening, as a warm-up for the Forum on Friday.

As a followup to the August, 2015 Board meeting, clarification of the composition of the KDA Membership Steering Committee has resulted in naming Drs. Rachel Gold and Olivia Estes to 3-Yr. terms as Co-Chairpersons. Additionally, as of the writing of this report, two members will be named for 2-yr. terms, and two members will be named for 1-yr. terms. Plans also call for adding "Consultants" from each of our local societies for membership recruitment and retention. And, more concentrated and organized visits to each of the dental schools will be initiated this Fall in the form of "Lunch and Learns", or evening social events, to engage and solicit involvement of dental students into Organized Dentistry.

In the critical arena of Advocacy and Legislative Affairs, the Bluegrass Dental Society hosted a very impressive "Legislative Meet and Greet" at their September 8, 2015 local society meeting. Although I was traveling out of town and unable to attend, I was informed that several significant elected officials attended the meeting, making for a wonderful opportunity for the KDA to create and strengthen relationships with legislators. As an Association, we all need to follow the methods of Bluegrass, Ky. Mountain, and Eastern Societies in "keeping the ball rolling" to further our association, relationship, and influence with elected officials throughout the Commonwealth.

Thanks to KDA Staff and all Executive Board Representatives for your continued interest, dedication, and involvement in Organized Dentistry. I also thank all of the members who continue to be involved in the Local Societies; for, member engagement at the Local level is the best way to get and to keep ALL dentists united in the effort to help and support each other in our chosen profession, and to serve the citizens of Kentucky and the USA with the best possible oral and dental care possible.

It certainly will take efforts of all of us to "Help Member Dentists Succeed and Serve".
Respectfully submitted,

Dennis R. Price, DMD
President, Kentucky Dental Association

MOTION: Dr Fred Howard moved that a workgroup of the KDA Executive Board be appointed by the President to study access to care issues, to include the recent Pew Report. The motion was seconded by **Dr. David Narramore**.

ACTION: ADOPTED.

MOTION: Dr Fred Howard moved to endorse a 2016 KDA Womens Forum and to request a group to explore the future forums for 2017 and 2018. The group will consist of Drs. Beverly Largent, Samantha Shaver and Ansley Depp. **Dr. Ansley Depp** seconded the motion.

ACTION: ADOPTED.

- 8. ADA PRESENTATION. Ms. Jeanine Pekkarinen**, ADA Membership Recruitment, Retention and Outreach Manager gave a presentation on membership, recruitment and retention in the KDA. She discussed ways to eliminate barriers from becoming a member, educate members what dues are and what they are for, variety of ways for members to pay dues, and conversion of students to members were discussed.

- 9. LEADERSHIP PRESENTATION. Mr. Scott Hobart**, National Professional Oral Care Schools Team Leader for Proctor and Gamble, gave a presentation from a module in the Proctor and Gamble Leadership Academy. The presentation focused on courage as related to leadership.

10. REPORT OF THE FIRST VICE PRESIDENT. Dr. Bill Collins submitted the following report:

Dental Therapy: Fact or Fiction

Since the Affordable Care Act has surfaced, the number of Medicaid recipients, nationally as well as in Kentucky, has drastically increased. Access to care is being questioned and avenues to provide better access are under review. Elected officials and health plan administrators do not want to hear about the high number of broken appointments or the incredible severity of the patients' need; rather, it appears that, they want patients to be treated regardless of standards of care compromises resulting from the limitations and restrictions of Medicaid plans. The dental profession must make legislators understand, that no-show rates are at or above 50%, and that once pain is relieved the patients seldom return in spite of the dire need of further treatment. We must make them understand the pre-authorizations and requirements required of providers by the MCO's and the desperately low fee schedule for services creates extreme hardships for dentists, especially in rural areas. For example, politicians must understand dentists cannot extract a tooth for a payment rate which now is 10% below the Medicaid provider reimbursement fees in 2011 which were already among the lowest, if not the lowest, in the country. Dentists are paid \$38.00 for performing an extraction, and then \$3.00 co-pay is charged to the patient. But if patients can't make the co-pay, we must see them anyway because of the extent of the infections and because it is our duty as professionals.

It is up to us to make them understand, that whether the treatment is provided by a therapist or dentist, fees must cover the actual cost of care for the services provided or no provider can survive financially. We must make them realize that we have fought hard to bring the standard of care to the level it is at today and that lowering it does not benefit the patient. We must demonstrate to them that the health and welfare of the patient are our greatest concern, regardless of whether the patient's source of payment is Medicaid, private pay or commercial insurance. We must again become proactive in our communities and regain the status that once belonged to us. We must become more visible in our communities; we must gain the strong alliance we once had with our peers in dentistry as well as our physician colleagues, for our strength lies in our numbers. We are in rapidly changing times; we must fight for the benefit of our patients, for they are entitled to the best care possible. We must make them understand without implying that their educations were deficient, that newly graduated dentists cannot overcome the financial hardships being generated managed care Medicaid. They cannot overcome the hardships caused by patient no-shows, ; administrative bureaucracy associated with obtaining a provider number, getting credentialed and excessive use of mandatory pre-authorizations;, low reimbursement rates,; high equipment and expendable , supply cost and other office overhead even in a well-run dental practice that even if student loan repayment assistance is available, there must be more of a commitment from government payers to ensure that their practice remains viable. As you read this report/article, please keep in mind that the training and employment of dental therapists is already on our doorstep and the outcome of the inclusion of dental therapists to the dental team depends on how we address the situation.

Commission on Dental Accreditation:

Process and Timeline for Development of Dental Therapy Education Program Accreditation and Dental Therapy in Kentucky

To better understand what has happened with the recent approval of education standards for accreditation of dental therapy education programs we need to consider what comprises the membership of the Commission on Dental Accreditation (CODA). When you read this also keep in mind the ADA dwindling membership. As we lose members, it does affect other things.

- 30 Commissioners
- 4 ADA appointees
- 4 ADEA appointees
- 4 AADB appointees
- 9 specialty appointees -one from each recognized dental specialty
- 1 joint ADEA/Special Care Dentistry appointee
- 4 public members
- 1 dental hygiene appointee
- 1 dental assisting appointee
- 1 dental lab technology appointee
- 1 dental student
- Director is ex officio, with no voting privileges

In 2009 Dental Therapy was gaining ground in Minnesota. The time line appears as follows:

Timeline-Dental Therapy

- 2009-request to accredit DT programs in Minnesota from the Minnesota Board of Dentistry, the University of Minnesota, Metropolitan State University, and the Minnesota Dental Association
- 2010-request denied; CODA develops policy: “Principles and Criteria Eligibility of Allied Dental Programs for Accreditation by the Commission on Dental Accreditation”
- 2011-request from University of Minnesota to develop accreditation standards for baccalaureate degree DT program; CODA agrees
- 2012
 - BOT and HOD resolutions urging CODA to delay development of a standards until further documentation that Criteria 2 and 5 are met; CODA decides to develop standards, but not develop a process of accreditation
 - Community Catalyst announces development of accreditation standards with no ADA/CODA input

As you can see, at this point the development of Dental Therapy was going to gain accreditation and become a viable entity with or without CODA and the ADA approval. CODA develops Principle and Criteria Eligibility for Allied Dental Programs. This also opens the doors for other programs such as denturity.

“Principles and Criteria Eligibility of Allied Dental Programs for Accreditation by the Commission on Dental Accreditation”

- Criteria 2: Has the allied dental education area been in operation for a sufficient period of time to establish benchmarks and adequately measure performance?

- Criteria 5: Is there evidence of need and support from the public and private.

- 2013

- CODA Task Force writes DT standards

- Draft standards circulated for comments for one year

- 2014

- Draft standards revised; circulated for one year

- February 2015

- CODA adopts accreditation standards for dental therapy education programs

- June 1 deadline to submit documentation on criteria 2 and 5.

- August 2015

- CODA reviews documentation from Metropolitan State University, Minnesota Board of Dentistry, Minnesota Dental Hygienists’ Association, Minnesota Dental Hygiene Educators’ Association, Minnesota Department of Health, Normandale Community College, and University of Minnesota on criteria 2 and 5

- Unanimous (30-0) vote that criteria 2 is met

- 24-5-1 vote that criteria 5 is met.

- August 2015

- CODA forms a Workgroup to develop a process of accreditation for dental therapy programs

- Application

- Self-study guide

- Review Committee

- Site visitors

- Future steps

- February 2016

- CODA adopts process of accreditation for DT programs

- CODA begins accepting applications for accreditation of DT programs

- February 2017

- Earliest that CODA could accredit DT programs

- ADA Input and CODA Decisions

- Trustee Liaison

- 4 ADA appointees as members of the Commission

- Once appointed to CODA, have fiduciary responsibility to CODA, not the ADA

- Written comment at any time, from ADA Board of Trustees, any ADA Council, individual ADA members
- Open Hearings-ADA Annual Session
- CDEL is the ADA Council with ADA bylaws responsibility for communicating/interacting with CODA
- ADA approves CODA budget
- ADA has final approval authority over revisions to CODA Rules

All of the bullet points are directly from a meeting of President-Elects. I wanted nothing to be tainted or misinterpreted. Dr. Carol Summer-Hays, the President Elect, specifically stated the ADA does not support the idea of Dental Therapy. Dr. Summer-Hays also stated that much of the ADA does not believe that Criteria 5 has been met. (Criteria 5: Is there evidence of need and support from the public and private.)

The formation of Dental Therapy institutions may take 6 to 8 years before the first class is graduated. The cost to put a program in place is very expensive and more expensive if there are no existing dental programs.

There are 3 programs in existence, Alaska, Minnesota, and Maine. There are about 50 Dental Therapist in the field. The following is from an editorial published by the USA Today: Minnesota was the first to allow licensing of dental therapists in 2009. Alaska followed, and together these states have 59 active practitioners. Maine Gov. Paul LePage, a Republican, signed that state's bill into law last month, and efforts are underway in other states, including Vermont, New Mexico and Kansas. A bill that would allow dental therapists to practice in Washington State stalled in committee in February.

"Maine is having an oral health crisis," says Mark Eves, Maine's speaker of the House. "The rural part of the state is at a critical point where we need to do something."
Heather Luebben, an advanced dental therapist practicing in Coon Rapids, Minn., began her stint in oral health as a hygienist before training to become a dental therapist.
"You can't deny that there are more people having trouble receiving dental care," Luebben says.
"We have rural areas that just don't have enough dentists."

This is true for many states. Three times as many people nationwide are without dental insurance as are without health insurance, according to Delta Dental insurance company data. Medicare does not pay for dental services except in rare cases, and Medicaid leaves dental insurance up to the states.

As a result, oral health care is a challenge, especially in rural areas where access to dentists is low and many people do not address dental health issues until it is too late. These people often end up in emergency rooms instead of at a dental office, says author and health care activist Wendell Potter. The Pew Center on the States estimated that in 2009, more than 830,000 visits to emergency rooms were for preventable dental conditions. This was a 16% increase from 2006.
"As we look at public funds spent on people who go to the ER for dental pain, it's one of the highest expenditures we have as a state," Eves says. "We're managing pain without getting to the source of the problem."

Despite its recognition of oral health disparities, the American Dental Association is firmly against states approving dental therapists. The association lobbied hard against the dental therapy bill in Maine, Eves says.

The ADA does not consider the one-size-fits-all mid-level dental provider model to be a viable solution to the diverse set of barriers that impede millions from getting dental care," the group said in a statement.

ADA spokesman Robert Raible declined USA TODAY's request for further comment. Those in favor of licensing dental therapists say the opposition is from both an economic and a quality-of-care standpoint.

"They're doing this from the perspective of what is best for their members," Potter says. But when dental therapists work in dentists' private practices, they have been shown to increase income, Willard says: "This would be an economic advantage, just like having a hygienist is." Rueben says dental therapists and dentists aren't in competition with each other. "I see us as another provider who is able to work along with dentists," she says. "The more people we have trained, the more people who can care for others."

During the conference call with the ADA, representatives from New Mexico and Kansas spoke out. They report that they are losing ground to the dental therapist movement among legislators, even more so since the Affordable Care Act.

The Pew Center is currently in Kentucky and is working with McNary and Associates. As you probably know, an oral health research advisory committee has recently partnered with the Pew Children's Dental Campaign to guide research on the oral health status of the population and access to dental care in the state. Research partners will compile existing data describing population oral health status and develop evidence-based recommendations to improve access to dental services and address dental service provider shortages. Specifically, the goals of the project include:

- Researching and identifying the oral health care needs for Kentucky's children and adults;
- Identifying barriers to receiving oral health care in the state;
- Collaborating with advocates, researchers, leaders, and policymakers throughout Kentucky to advance efforts that improve access to oral health care; and
- Addressing oral health care needs through evidence-based, cost-effective policy solutions.

The Center for Health Workforce (CHWS) at the University at Albany, School of Public Health has been asked by project partners to evaluate past research and current data related to the oral health of Kentucky's population and to interview oral health stakeholders throughout the state about their perspectives on issues related to insufficient access to dental treatment as well as possible strategies to improve oral health literacy, appropriate utilization of oral health services, and oral health outcomes in the state.

What is the need for a dental therapist in Kentucky? The recent establishment of the Public Health Hygienist is THE Kentucky experiment on midlevel dental providers. If this model is successful, there would be no need for dental therapists, because the hygiene program will have been successful in moving patients in to care in their hometowns. The current programs have robust and supportive dentists that are making this program work. And the support of the local dentists is a strong requirement before they could be considered for the start-up money. In summary, the creation of dental therapists and/or denturists will be an issue in the legislature before long, and the profession must be ready. All the stakeholders at the ADA are strongly against the creation and use of dental therapists, but it appears that government will act on this issue because of public pressure related to access to dental treatment.

While this article has mostly addressed the development and approval of dental therapists in Kentucky, there is also great reason for concern that denturist will find a way to work its way into the mix as well. During the last revision of the Kentucky Dental Practice Act, there was discussion indicating that the Kentucky Board of Dentistry would entertain licensing denturists IF the denturist had graduated from a CODA accredited school. At the ADA level it is known the only way this can be approached is at the State level. WE MUST actively engage our legislators and provide solid and vital information why the dental therapist is not needed in Kentucky. As everyone knows, once the legislature addresses this issue and enacts laws creating a scope of practice and licensure process for dental therapists, their regulation must fall under the Kentucky Board of Dentistry.

We must the strategy that we want to pursue and actively engage our membership to interact with our legislators. I have been approached and have agreed to participate in upcoming interviews. I have suggested the names of other proactive KDA members such as, Garth Brobrowski, Fred Howard, David Narramore, Chad Street, Beverly Largent, Andy Elliott and a few others as participants in this process. The interviews will be conducted by the Center for Health Workforce Studies (CHWS,) which is an academic research center located at the University at Albany, School of Public Health. The Center's focus is on research related to the health workforce. CHWS is designated as the National Oral Health Workforce Research Center under a cooperative agreement with the federal government's Health Resources Services Administration (HRSA). The Pew Children's Dental Campaign has funded CHWS to complete a comprehensive environmental scan of oral health in Kentucky that will include a review of existing literature, secondary data analysis from a variety of sources, and interviews of strategic stakeholders with an interest in oral health in the state.

I will keep everyone updated as it progresses.

Bill Collins DMD
1st Vice President
Kentucky Dental Association

11. REPORT OF THE EXECUTIVE DIRECTOR. Mr. Richard Whitehouse
submitted the following report:

**REPORT OF THE
EXECUTIVE DIRECTOR
October 3, 2015
MEMORANDUM**

To: KDA Executive Board
From: Richard A. Whitehouse, Executive Director
Re: Executive Director's Report for October 2015 meeting
Date: September 14, 2015

The following is the KDA Executive Director's report for the period from August thru September 2015.

ADMINISTRATIVE MATTERS

KDA eXPRESS

The first issue of our new electronic publication, *KDA eXPRESS*, will be delivered to all licensed dentists on September 15th. After a six month free trial, it will only be sent to KDA members. This piece is intended to provide bi-weekly links to relevant news, information regarding upcoming meetings, and a summary of KDA activities made on behalf of member dentists.

Endorsement Protocol

Attached is a copy of the protocol sent to vendors who have expressed an interest in working with us. Several of the initial responses have requested consideration of royalty agreements. I will prepare details of any potential agreements for board review.

ADVOCACY

KOHC/PEW Research Update

On August 18th, I participated in a telephone conversation to update me on a meeting I missed due to a schedule conflict. One of the individuals was from Pew and I raised my concern regarding the perception that this research will be premised upon the desire to better establish mid-level providers. I received assurances that the project would be a comprehensive review of the question of access to care and was not intended to reach a particular conclusion.

ADA Study

At our last meeting, I reported upon a conversation with Krishna Aravamudham, Director of the Center for Dental Benefits, Coding and Quality with the ADA Practice Institute. Kentucky was selected as the only state in the nation in which they will contract with researchers to analyze the efficacy of managed care organizations in the delivery of state dental services. The third party research consultant will offer recommendations for improving administration, provider participation, and beneficiary utilization. The results of the initial RFP for this project were quite high. However, Dr. Rich has worked with the ADA to lower the project cost. It may help us find necessary funding if we pledge some nominal financial support.

ACTION REQUESTED

- Vote to support a study on the Medicaid delivery system in Kentucky with a \$5K donation. (Recommendation: Approve)

Baptist Health Blue Zone Task Force

At the invitation of Baptist Health, I attended a task force meeting on August 28th regarding a potential “Blue Zone” project for Kentucky. This project would involve us in issues involved in how to improve public health across Kentucky. It may be an opportunity to amplify discussion regarding concerns of the effect of soda consumption on dental health. For more on the blue zone concept, see http://www.ted.com/talks/dan_buettner_how_to_live_to_be_100.

BGSD Legislative Meet & Greet

On September 8th, the Blue Grass Dental Society held a very successful legislative meet and greet as part of their annual fish fry event. There was a good member turnout and a number of key legislative members in attendance.

Children’s Health TAC

I was invited to and attended the Children’s Health Technical Advisory Committee (TAC) on September 9th. Dr. Boborowski and our representative to the committee, Dr. Haney also attended.

MEMBERSHIP

Women’s Forum

The 2nd Annual Women’s Forum held on August 21st was a great success. Income for the event was \$24,700. This includes a \$15,000 ADA grant. Total expenses were \$13,141.40. With attendance up from last year, we are close to outgrowing the venue. This is a good problem to have. But, it also suggests the need to focus on more programs and events aimed toward women at our annual meeting.

New ULSD Student Representative

Our new ULSD student representative is John A. Houston. He replaces Alex Marti. We appreciate the relationship we have had with Alex and look forward to working with John as we work to become more involved with dental students to introduce them to organized dentistry.

KDA Leadership Academy

I continue to explore the possibility of a KDA Leadership Academy. Since my last report, I have found two opportunities that will help bring this concept to fruition without placing undue burden on our budget. I don't have a fixed timetable. But, I would like to have the inaugural class selected and program prepared by late 2016.

While at the recent ADA Management Conference, I learned that the ADA is also looking at some type of education initiative involving leadership. I have volunteered to serve on a committee with other executive directors and ADA staff to explore potential ways the ADA may offer or partner with constituents to create programs. That group is scheduled to conduct their first meeting on September 15th.

I have also continued discussions with Proctor & Gamble on this topic. Recently, our scientific relations manager with Crest, David Gardner, introduced me to Scott Hobart. Scott is in charge of developing and facilitating leadership training at P&G. He is interested in providing a program to us free of charge involving leadership and personal courage. This would be their first venture in doing so with a dental association. But, the program has been well received among other audiences. I am hoping to present this program to the board and our guests during the upcoming component leadership conference. I also plan to integrate it into our annual meeting as a pilot during our opening session.

ANNUAL MEETING

Opening Session

Every conference I have ever attended has some sort of opening session. Some are short. Some are long. But, all are an opportunity to convey information to members and others that address what all dentists want to know and often ask - why should I be a member?

An opening session provides a platform to expound upon all that has been done for members in the past year. It is an opportunity to provide a glimpse of the road ahead. It is an opportunity to highlight key member value and services that reinforce the notion that all dentists should be part of organized dentistry. It is also an opportunity to introduce members to key leaders in the organization.

Many of these sessions also offer a keynote speech. I've had several thoughts regarding potential speakers. But, I am mindful that this event may not be as well attended in the first year out. Nonetheless, an opportunity has presented itself that might serve several purposes. As suggested above, we may pilot our leadership training at this meeting. If we make this part of our opening session, it may increase attendance and give attendees something to talk about in terms of real member value. It may also provide a good opportunity to include legislators and policymakers at the official kickoff of our meeting. So, I am working to incorporate this into our schedule.

Continuing Education

Some would argue that CE no longer has a place at our annual meeting. While I don't subscribe to that view, we need to change the way we present it. Accordingly, we have cut the number of course offerings by half. We have placed limits on the amount we will pay speakers and sought more Kentucky talent. Most importantly, I have urged our Council on Annual Sessions and Scientific Session to focus topics on subject matter of interest to dentists in Kentucky.

Hygienist's Luncheon

We will be conducting a roundtable luncheon for dental hygienists on preventive products sponsored by Crest.

Randall is a luncheon

We have moved this event to the lunchtime slot.

Breakout Sessions

I am planning to conduct four different 45 minute break-out sessions for members only on Friday from 8:00-8:45 and 4:00-4:45. These breakouts will be conducted by board members and others and deal with the following topics:

Legislative Agenda & Workshop
Component Workshop/Panel

Medicaid Update
Multi-Dentist Practice Panel

Student Prom

We need to work with dental students to build a bridge to transition them from academe to the profession. To ensure this is not a bridge to nowhere, it would seem appropriate to use the occasion of our annual meeting to welcome graduating students to dentistry. So, we are arranging a "prom" centered on graduating students to mark this event and demonstrate the fact that we value their involvement in this association.

STRATEGIC PLAN

At our last meeting, I highlighted the need to fine-tune our strategic plan and goals with specific strategies and performance metrics. If anyone has thoughts to share before our next meeting, I would like to present them to develop a working draft. Until then, we should remember that we have decided to approach all our decisions within the following framework.

MISSION

Helping Member Dentists Succeed and Serve

VISION

Advancing the Profession of Dentistry While Improving Oral Health

GOALS

- Advocate for dentistry in the commonwealth
- Serve and support the needs and success of members
- Promote oral health through community service and public relations
- Lead the profession through the ADA tri-partite structure

UPCOMING MEETINGS

9.12	KBOD meeting (CANCELLED)
9.15	KDPAC meeting via phone call (CANCELLED)
9.15	KDA budget meeting via phone call
9.16	Eastern Dental Society meeting
9.23	Dental TAC meeting
9.24	Louisville Dental Society meeting
9.30	CHFS Health Summit
10.8	Southeast Dental Society meeting
10.15	South Central Dental Society meeting
10.16-17	6 th District Caucus meeting
11.4-9	ADA Annual Meeting
11.14	KBOD meeting
11.17	Northern Kentucky Dental Society
11.20	KOHC Health Summit
12.2	Dental TAC meeting
12.3-5	ADA Annual Lobbyist Conference

POSTSCRIPT

It's hard to believe it has been a whole year since I took over as executive director of this organization. A lot has happened. But, we all know there is so much more to be done. Thank you for your patience and your willingness to work with me to do the important work of serving organized dentistry in Kentucky. I appreciate the opportunity to work with all of you to take us to greater heights.

Respectfully submitted,

Richard A. Whitehouse
Executive Director



KDA PATRON PROCESS

I am writing because you have expressed interest in partnering with the Kentucky Dental Association or becoming a KDA patron. I appreciate your patience as the KDA Board has developed a program that outlines how we can help you reach our membership and demonstrate your support and commitment to our efforts to serve organized dentistry in Kentucky.

The process for becoming a KDA patron is as follows:

Vendors seeking to become a KDA patron shall submit written proposals addressing the following criteria relative to their company, product, and/or services:

- Product quality
- Company reputation
- Discount for KDA members
- Royalty or share of profits to KDA from member sales
- Irresolvable conflict/competition with products of other KDA patrons
(NOTE: Unless explicitly stated, patronage does not presume exclusive endorsement of a product or service.)

Patronage levels are set forth below:

(italics denote items beyond level below)

- **PLATINUM LEVEL PATRON (\$12,000+)**
Includes credit for:
 - Sponsoring KDA Annual Meeting
 - Reserving exhibit space
 - Sponsoring events and activities
 - Sponsoring exhibit hall activities
 - Advertisement (6-full page)
 - *Sponsoring receptions*
 - *Sponsoring planned KDA Leadership Academy*
- **GOLD LEVEL PATRON (\$10,000)**
Includes credit for:
 - Sponsoring KDA Annual Meeting
 - Reserving exhibit space

- Sponsoring events and activities
- *Sponsoring exhibit hall activities*
- *Advertisement (6-full page)*
- SILVER LEVEL PATRON (\$5,000)
 - Includes credit for:
 - Sponsoring KDA Annual Meeting
 - Reserving exhibit space
 - *Sponsoring events and activities*
 - *Advertisement (6-1/4 page)*
- BRONZE LEVEL PATRON (\$2500)
 - Includes credit for:
 - Sponsoring KDA Annual Meeting
 - Reserving exhibit space
 - Advertisement (2-1/4 page)

Patrons may also support individual items outside of the above sponsorship tiers, such as:

- Exhibit space
- Advertising in *KDA Today*
- Speakers (including, but not limited to continuing education, keynote, special event, reception or exhibit hall entertainment)
- Events or activities (including, but not limited to luncheons, refreshments, reception or exhibit hall entertainment)
- Miscellaneous items (including, but not limited to publications, lanyards, badge cases, signage, etc.)

We are also interested in sponsorship partners for a KDA Leadership Academy to introduce new dentist to organized dentistry. You may contact me to discuss that program, if you are interested.

Please submit your requests for participation at any patronage level directly to me. I will review and accept proposals provisionally pending action by the KDA Board. Patronage arrangements shall be in effect for one year from the date of agreement. If good cause is shown that the terms or criteria below have been breached or are not being met, patronage relationships may be terminated without notice.

I appreciate your patience in our development of this new plan and look forward to hearing from you.

Patrons may also support individual items outside of the above sponsorship tiers, such as:

- Exhibit space
- Advertising in *KDA Today*
- Speakers (including, but not limited to continuing education, keynote, special event, reception or exhibit hall entertainment)
- Events or activities (including, but not limited to luncheons, refreshments, reception or exhibit hall entertainment)
- Miscellaneous items (including, but not limited to publications, lanyards, badge cases, signage, etc.)

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I appreciate your patience in our development of this new plan and look forward to hearing from you.

Information Only Item

Proposal Narrative Kentucky Donated Dental Services (DDS) Program

Mission and History

Dental Lifeline Network (DLN) is a national charitable organization whose mission is to improve the oral health of people with disabilities or who are elderly or medically fragile and have no other way to get help. DLN accomplishes its mission by developing and coordinating collaborative relationships that provide essential resources for direct-service programs, especially charitable care.

The flagship program of DLN is Donated Dental Services (DDS) that have been established in 43 states with a national safety-net initiative helping people in the remaining 7 states and DC, including Kentucky. Since starting the first DDS program in Colorado nearly 30 years ago, over 100,000 people received more than \$300 million in comprehensive, pro bono dental care from a network of 15,200 dentists and 3,600 laboratories that volunteer.

Need for Program

The size of the target population is significant. The 2011 American Community Survey lists 39 percent of the 731,907 Kentuckians receiving some form of government assistance as having at

least one disability. ¹ The Census Bureau estimates that 14.4 percent of the 2014 state population of 4,431,475 is over 65 years of age. While many of these Kentuckians have some coverage or the means to pay for care, others cannot do so and suffer needlessly from pain and infection. And, government assistance is limited. Medicare does not cover dental care and Medicaid is limited for adult recipients.

Program Description

DLN will start a statewide DDS program with Delta Dental of Kentucky and the Kentucky Dental Association that has endorsed developing this program to help some of the state's most vulnerable citizens: people with disabilities or who are elderly or medically fragile and cannot afford comprehensive treatment. As mentioned, some people in Kentucky have been served through the national DDS safety-net program that only helps a few people a year. The proposed statewide program will be much more expansive in terms of volunteer participation and people helped.

The DDS program model relies on the engagement and generosity of a network of volunteer dentists and dental labs. Volunteer dentists fully donate their services, including the use of their offices and supplies. General practitioners, specialists, and laboratories participate so patients receive comprehensive and sustainable care. DDS patients have seriously neglected dental problems and part of our criteria for program eligibility is that they need more than just a cleaning and a checkup.

Volunteers generally donate comprehensive care to one or two patients per year. They treat DDS patients in their own offices, so the treatment can be worked into regular schedules. Dental labs will be encouraged to give generously as well. The demand for lab services, however, is sometimes greater than what they are able to donate; at times we must pay for lab fabrications. To further encourage labs to contribute, we have recruited manufacturers that donate materials for dentures, crowns, bridges and implants.

We already collaborate with several Kentucky health and human service organizations that refer patients to our national safety net program including several cancer care organizations, the Kynect program, transplant centers, and Area Agencies on Aging. With a statewide program, we will reach out to many more such organizations such as Kynect and groups helping military veterans.

Though the dentists and labs will donate services, monies are being requested to support these volunteers. Services will center around a DDS Coordinator whose responsibilities will include determining eligibility of applicants and referrals to volunteers including specialists and labs as needed. The Coordinator also ensures that the needs of patients and volunteers are addressed and resolved throughout the course of the treatment. Part social worker, part volunteer coordinator, part ambassador, the DDS Coordinator eliminates barriers to care and provides a seamless volunteer experience. This method of service delivery is not only appreciated by dentists; DDS patients also have a less stressful and more satisfying experience, as they are treated like any other dental patient.

¹ <http://www.census.gov/prod/2013pubs/acsbr11-12.pdf>

The objectives for the first year are to recruit a volunteer network of 225 volunteer dentists and 25 laboratories that will provide \$575,000 in comprehensive, pro bono therapies to 250 vulnerable Kentuckians.

Startup activities will include:

- Recruit a leadership council in collaboration with the KDA whose primary focus will be to engage Kentucky dentists as DDS volunteers
- Hire a DDS Coordinator
- Publicize the program (also in collaboration with Delta and the KDA)
- Built relationships with additional health and human services organization for patient referral

Future Funding

As in many of the other states in which DDS programs operate, long-term operating support will be sought from the Commonwealth of Kentucky. Legislation authorizing such funding was unanimously approved in the House during the last legislative session, yet did not clear the Senate before adjournment. Representative Tom Burch has committed to reintroduce the measure in the next session.

Request

Dental Lifeline Network respectfully requests a program development grant of \$95,474 from Delta Dental of Kentucky to start helping the many Kentuckians who are desperate to overcome debilitating pain and infection.

Recognition

DLN is eager to work with Delta Dental of Kentucky to recognize Delta's support of DDS and would welcome your input to do so. Delta Dental plans in other many other states provide significant support as well and what follows are several ways in which we recognize them. Such activities could easily be implemented in Kentucky as well:

1. Delta Dental of Minnesota similarly supports that state's DDS program and last year provided funds for plaques displayed in the offices of each volunteer dentist and lab, typically in waiting rooms. An example is attached that shows how Delta's participation is recognized.
2. Last year, Delta Dental of Colorado provided a grant for several continuing education courses focusing on care for patients with special needs. The courses are used to thank volunteers and publicize the DDS program to potential volunteer dentists. We propose offering two such courses that not only would recognize DDKY support, but also DDS volunteers and attract additional volunteers.
3. At the end of the program year and every consecutive year, we plan to prepare a newsletter/annual report to distribute to the entire membership of the Kentucky Dental Association that will recognize DDKY. Hopefully, such publicity will also attract new volunteers.

4. Future recognition events after reaching significant milestones (i.e., \$1 million in donated services) at the Capitol to publicize the community service activities of the state's dentists and Delta Dental to law makers.

Other ideas include having an event after the program is launched and include media. We would need the active assistance of DDKY to determine how to do so along with the Kentucky Dental Association. And, we plan to use DLN's social media program to recognize Delta Dental's support: Blogposts and social media channels.

Information Only Item

Scientific Chair Subcommittee Meeting Sept. 10, 2015

Attendees: B.J. Moorhead, Randy Ransdell, Mary Oldfield, Terry Norris, Michelle Story, Mark Moats, Rick Whitehouse

- The committee is working to set a date for a site visit at the French Lick facility to better plan our 2017 and 2018 meetings.
- As a working goal, we will schedule no more than 11 speakers per morning and afternoon session to help better control our budgetary expenditures. Emphasis will be placed on selecting speakers that will attract larger audiences.
- Rick Whitehouse has contacted the ED from the Indiana Dental Association to receive information regarding the use of the French Lick facility, since the IDA has had several of their meetings in French Lick. The Indiana ED expressed a willingness to work with us since Indiana will hold their meeting in French Lick in the spring of 2018.
- The entire Council on Annual Sessions will be engaged to make recommendations regarding possible changes in our price structure for our future meetings, beginning in 2017. Rick Whitehouse, Todd Edwards and B.J. Moorhead will meet first in October or November to studying possible models to consider. With a possible new model, we may want to fashion something similar to models used at the Hinman meeting and Chicago Midwinter, where attendees pay an enrollment fee for the meeting and are able to attend several no fee courses.
- A booth is planned on our exhibit floor in March 2016 to promote our new meeting date & venue.
- The committee jointly designed a survey for our members to help us better plan the 2017 meeting. That survey can viewed at <http://bit.ly/1OgxWSD>
- The committee further discussed the lack of good statistics from our annual meeting that could help us with planning and speaker selection.
- The committee will continue to discuss how to best implement a keynote speaker to begin our annual meeting and help promote the benefits of KDA membership.
- **ACTION ITEM:** The committee voted unanimously to ask the Executive Board to consider a bylaws change that would allow the Scientific committee to annually select the next junior chair for the committee, rather than having this listed as a Presidential duty, or allowing the committee to make a nomination to be approved by the Executive Board or the President. Knowing that some new Presidents make their selection with no prior experience in Annual Sessions, it was felt that the committee could better make the selection because the members understand the needs and demands of the position.

MOTION: Dr Fred Howard moved to fund up to \$8,000.00 to assist the ADA in a study of Medicaid delivery systems. Funding will come from the Reserve Fund. The motion was seconded by **Dr. David Narramore**.

ACTION: ADOPTED.

12. REPORT OF THE UNIVERSITY OF KENTUCKY COLLEGE OF DENTISTRY.

Kentucky Dental Association Executive Meeting October 2015

Clinical Affairs:

- The University of Kentucky recently held a 10th Anniversary Celebration for the UK Eastern Kentucky Dental Outreach Program, as reported by Kristi Lopez via **UKNow**, the University of Kentucky News Service: HAZARD, Ky. (Sept. 10, 2015) - University of Kentucky, UK HealthCare and the UK North Fork Valley Community Health Center celebrated the 10th anniversary and the success story of the Ronald McDonald Care Mobile in Eastern Kentucky at a special ceremony on Sept. 9. UK President Dr. Eli Capilouto, Dr. Nikki Stone, director of the Eastern Kentucky Ronald McDonald Care Mobile, John Sampson, UK HealthCare associate ambulatory director for clinical operations, Fran Feltner, director of the UK Center of Excellence in Rural Health, Dr. Joe Kingery, CEO/medical director of the UK North Fork Valley Clinic, Dr. Stephanos Kyrkanides, dean of the UK College of Dentistry, and Dr. Raynor Mullins, professor emeritus and retired chief of the Division of Dental Public Health at the UK College of Dentistry, gave remarks at the event held at the UK Center of Excellence in Rural Health in Hazard. Please see <http://uknow.uky.edu/content/10th-anniversary-celebration-held-eastern-kentucky-dental-outreach-program> for the full story about this very successful UK outreach activity.
- The College continues to implement new clinical technologies. Reciprocating electric endodontic handpieces have been introduced into the predoctoral curriculum and clinics. The implementation of CAD-CAM scanning, design, and milling systems continues to enhance pre-clinical instruction and patient care.
- The College continues to emphasize comprehensive care teams in the predoctoral clinical education. Dr. Thomas A. McConnell has been appointed as Division Chief of the new Comprehensive Care Division. In addition, two new Team Leader positions are under recruitment for the Comprehensive Group Practice Teams in the DMD clinics. These activities demonstrate the School's focus on modelling general practitioner-led teams to manage patient care for successful clinical and educational outcomes.

- Issues relating to Medicaid dental treatment, safety net care, and public health outreach by the College continue to be addressed actively by the School in conjunction with other stakeholders.
- The ribbon cutting ceremony for the UK College of Dentistry Turfland Mall satellite faculty practice location in Lexington is scheduled for September 25, with the first patients scheduled for October. This College practice is in the new UK HealthCare Building on Harrodsburg Road. Oral health services offered will include oral and maxillofacial surgery, orthodontics, and general dentistry accompanied by other specialty support services to provide “one stop shopping” for UK employees and their families, for UK students, and for patients from the community seeking UK Oral HealthCare services. When the Turfland location opens, the current general dentistry clinic in the Kentucky South UK HealthCare facility on Harrodsburg Road, which has been in operation for 17 years, will close and move to the new Turfland Mall location.
- The College is preparing to open a dental clinic in the new Public Health Department Building in Benton, Marshall County. This partnership with the Marshall County will complement current College outreach activities in Western Kentucky.
- Finally, as reported in the August 11, 2015, **ADA Morning Huddle:** Dental School Officials: Evidence Shows Amalgam Dental Fillings Are “Safe And Effective.”
In an op-ed for the Lexington (KY) Herald-Leader (8/10), officials from the University of Kentucky College of Dentistry say that the July 22 article Health officials kill proposal to curb mercury dental fillings “greatly misleads readers.” The article focused on “the opinion and feelings of a few patients,” ignoring “the overwhelming bulk of evidence published over the past 30 years in peer-reviewed scientific journals that clearly shows amalgam dental fillings are safe and effective,” the officials state. “The Multiple Sclerosis Society, the Autism Society of America, the Mayo Clinic, and World Health Organization all state there is no scientific evidence that dental amalgam causes the diseases these groups are committed to curing,” the officials add.
Please see Lexington (KY) Herald-Leader for the full op-ed piece.

Alumni Affairs:

- In March we participated at the KDA meeting with an exhibit booth on Friday and Saturday and the UKCD Alumni Association held a reception Friday evening for our alumni and friends.
- On March 27 we held a reception for alumni and friends at the Hinman meeting in Atlanta.
- In April the UKCD Alumni Association hosted a dinner for the Class of 2015 to welcome them into the profession. We had young alumni speak to them about what to expect after graduation.

- On August 15, the UKCD Alumni Association hosted the annual Golf Scramble for alumni and friends at the University Club of Kentucky. We had about 60 golfers.
- On August 29 we organized the 4th Annual John Mink Legacy Conference for the Department of Pediatric Dentistry.
- In September, our yearly issue of Perspectives magazine is mailed to all alumni.
- Upcoming events and activities include:
 - 39th Annual Fall Symposium and Alumni Weekend – October 2-3
 - Alumni Reception at the ADA – November 7
 - Annual CE and Basketball - TBD
 - 7th Annual Barrels and Kegs – Bourbon and Beer Tasting with Silent Auction – February 5, 2016
 - Alumni Reception at the KDA – March 4, 2016
 - Alumni Reception at the Hinman – March 18, 2016

Development:

- A mailing was sent to UKCD alumni requesting support for the Janet Faraci Lee, D.M.D Leadership Development Endowed Fund. This fund encourages UKCD students' involvement in organized dentistry activities.
- The Keith J. Lemmerman, DMD Endowment for Graduate Periodontics was launched with a luncheon, in which Dr. Neal Lemmerman, his son, and Mrs. Terri Lemmerman, widow of Dr. Keith Lemmerman, shared the vision for this endowment with Perio faculty and residents.
- For fiscal year 2015, UK College of Dentistry alumni ranked #2 among all UK colleges in percentage of alumni who gave to their college and #2 again this year in giving to the University of Kentucky in general.
- The Development Director made visits to alumni and supporters in Cincinnati, OH, Lexington, Martin and Prestonsburg.

Student Affairs:

Admissions Status:

Our admissions cycle is well underway, we will again plan a class size of 65.

Student Updates:

- On August 21st we held our annual White Coat Ceremony to welcome our 65 first year students into the profession of dentistry.
- On Friday, September 11th, the AAWD *Strut Your Smile* Event was held to raise funds in order to provide dental care for individuals impacted by intimate partner abuse that seek shelter at Greenhouse 17. Annually, this event raises over \$10,000 to support this outreach effort.
- Saturday Morning Clinics dates this fall:
 - September 12, 2015
 - November 14, 2015
 - December 12, 2015

13. REPORT OF THE UNIVERSITY OF LOUISVILLE SCHOOL OF DENTISTRY.

**Kentucky Dental Association Executive Board Report
University of Louisville School of Dentistry
October 2015**

STUDENT AFFAIRS AND ADMISSIONS - Dianne Foster

The White Coat Ceremony was held on August 22. The event was supported by the American College of Dentists and the International College of Dentists. Dr. Michael Metz opened the event with a welcome and introductions. Greetings were provided from the American College of Dentists by Dr. Terry L. Norris and from the International College of dentists by Dr. Fred H. Howard. Student Doctor Erin Fraundorf, ULSD Student Body President, led the D1 and DH3 students in the recitation of the Dentist's Pledge.



DMD Class of 2019



Dental Hygiene Class of 2017



The University of Louisville’s School of Dentistry international program honored two of our visiting students, Jakub Swiderski and Mikolaj Szarstuk from Krakow Poland and Jagiellonian University School of dentistry with the “White Coat”. The Kraków University is the oldest higher education institution in Poland and one of the oldest in Europe. It was founded on 12 May 1364 by the Polish king Casimir the Great. Today the University employs more than 540 professors, 730 associate

professors, 2,600 other academic staff and over 3,500 administrative staff, while providing education to about 50 thousand students.

Diversity is a point of pride for the University of Louisville School of Dentistry, ULSD class 2019 students at the White Coat Ceremony.



FINANCIAL AID - Barbara Dagnan


The University of Louisville is working closely with the University of Kentucky in implementing a loan repayment program from Governor Beshear’s office to provide \$100K to graduating dentists who must commit to full time service in Appalachian counties, with higher priority given to candidates locating in ARC Distressed Counties and lower priority given to candidates locating in ARC Transitional Counties (Boyd, Clark, Greenup and Madison). Candidates are eligible if they will be establishing a new practice, joining an existing private practice, or purchasing an existing practice in an ARC distressed county. Dentists that are to be employed during the service commitment by a federally qualified health center, a licensed primary care center, rural health clinic or by a dental business that is a publicly traded corporation, chain, or franchise would not be eligible.

INCLUSION AND DIVERSITY RECRUITMENT - Dr. Sherry Babbage

Increasing Cultural Competency in Our Changing World



Since 2006, the University of Louisville School of Medicine has invited students, faculty, and staff to attend a workshop centered on diversity in healthcare. Each year the Cultural Competency Workshop is offered to 1st year medical and dental students, dental hygiene students, as well as dental residents, audiology students, and post-baccalaureate students. Attendance for the 2014 workshop was well over 400 individuals. Breakout sessions are offered on specific topics related to diversity/cultural competency in the healthcare professions. A Pre and Post Evaluation Survey are offered to all students to gauge their responses to the effectiveness to the topics discussed.

<p style="text-align: center;">9th Annual University of Louisville Health Sciences Center Patricia Allen Cultural Competency Workshop</p>  <p style="text-align: center; color: red;">Increasing Cultural Competency in <i>Our Changing World</i></p>	<p>Learning Objectives:</p> <ul style="list-style-type: none"> • Introduce students to cultural issues with the Mennonite community • How to work effectively with LGBT patients • Overview of the role and relevance of the tort system in shaping cultural competencies • To sensitize students to the day-to-day realities of life faced by people with low incomes and the barriers they will encounter to life situations and healthcare • A practical approach to caring for patients who engage in non-traditional sexual practices. What every medical provider needs to know • Expose students via case scenarios to treatment considerations for a diverse dental patient base • Cultural Competency in nursing care • Define Cultural Competency in Global Health
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COMMUNITY SERVICE - Dr. Lee Mayer

The ULSD Community Service program remains actively involved in approximately 80 initiatives annually, not including the “Extramural Clinical Experience” required project or the community service class (GDOM 820). Many projects are ongoing and/or require continuous planning. These range from actual provision of dental services to oral health education at schools, businesses or community events. Many events are held collaboratively with other health focused groups and help to maintain ULSD’s presence in the community. Projects are completed locally, across the Commonwealth of Kentucky, the United States and in some other nations. Most months, ULSD faculty, students, and staff make thousands of community contacts. Students generally are willing to provide oral health education, work at health fairs, and do other self-formulated outreach activities. Community affiliations have become the basis of the ULSD program and are excellent for public relations, future collaborations, and marketing our program. A uniform UofL format for reporting community engagement activities has been implemented and the large scale activities are registered into the UofL Community Engagement data base.

The Smile KY screenings will begin next month for the 2016 event and are limited to Bullitt County schools only. The Smile KY Steering Committee met on September 16 at the Louisville Water Co. The Smile KY Give Kids a Smile 2016 treatment day will be held on Friday, February

5, in Bullitt County dental offices. Jefferson County Schools will not be participating. The annual Golf Scramble is on September 28. Hardin County and Warren County do their own Smile KY following original guidelines.

A RAM event will occur in Somerset, KY on September 18 and 19. Dr. David Maddy is the Director of the Mobile Dental Clinics. Dr. Steve Hieronymous, ULSD Alum, will be the host.

The 23rd Annual ULSD Oral Cancer Screenings at the Kentucky State Fair, now designated a Head and Neck Assessment, continued this year as a LASDA/Kentucky Cancer Program collaborative project. Five volunteer faculty accompanied by 36 D4 students performed 117 evaluations and provided oral health literature. Faculty volunteers included Drs. John Firriolo, Brian Shumway, Mark Bernstein, Larry Gettleman, and Lee Mayer. DMD Student Doctor Jared Martin did a superb job of coordinating the booth.

CONTINUING EDUCATION - Dr. Dan Fadel

- Alumni Day - October 9; Shelby Campus
- ULSD CE will present a new Dental Coding Course in 2016 as both a Certification Course and a one day CE course. Patrick Rose has agreed to course direct.
- Working to qualify on Medical CE for some DMD courses
- ADA CERP Accreditation materials will be due June 30, 2016.
- ULSD CE will host the Louisville Dental Society (LDS) on September 24.

ACADEMIC AFFAIRS - Dr. Margaret Hill



Dr. Gary Crim has been and is one of the pillars of the University of Louisville School of Dentistry. He has guided us through a number of accreditations, both for the Commission on Dental Accreditation (CODA) and the Southern Association of Colleges and Schools (SACSCASI), and has served the campus throughout his 40 years at the ULSD. In addition to providing leadership and guidance to our pre-doctoral educational program, counseling students, and mentoring junior faculty, Dr. Crim has long been recognized by our students, faculty and staff as an outstanding teacher, lecturer and clinician. Dr. Crim will now rejoin his parent Department of

General Dentistry and Oral Medicine as professor and will continue to guide dental students in their quest in the profession of dentistry. We all thank him and welcome him back on a full-time basis to our academic ranks.



Dr. Margaret Hill will assume the position of Associate Dean for Academic Affairs and Predoctoral Education. Dr. Hill received her education at Eastern Kentucky University (undergraduate) with a B.S. in Biology and a minor in Chemistry. She subsequently attended the University of Louisville School of Dentistry, earning a DMD degree in 1987. She then earned a certificate in General Practice Residency at the University of Louisville School of Dentistry in 1988. At the University of Kentucky, Dr. Hill completed her residency

program in Periodontics in 1990. She has previously served as the Associate Dean for Postgraduate Education. In addition, she is Women's Liaison to ADEA, Assessment and Effectiveness Committee (Chair), and Student Review Council (Chair).

DEPARTMENT OF ORAL HEALTH AND REHABILITATION

Dr. Dean Morton has joined the Indiana University School of Dentistry as Chair of the Department of Prosthodontics and Assistant Dean for Strategic Partnerships and Innovation. He will also create and lead an Interdisciplinary Center for Dental Implants and Esthetics.



Dr. Gerald Grant has agreed to serve as the Acting Chair of Department of Oral Health and Rehabilitation (OHR). Gerry brings to ULSD extensive professional and administrative experience. He served as the Service Chief, 3D Medical Applications Center and developed and managed the largest DoD 3D Medical Applications Center at the Walter Reed National Military Medical Center. Services are offered worldwide to all DoD, VA, and other government agencies, to include additive manufacturing of medical devices, titanium implants, anatomical models, surgical guides, virtual surgical support, and other research devices. He is also a member of the John's Hopkins facial transplant program. In addition, Dr. Grant has served as the Director of Craniofacial Research at the Naval-Postgraduate Dental School. In addition to serving as Chair of OHR at ULSD he will be developing a Center of Innovation for the use of digital imaging, virtual surgical planning, medical modeling, and design and fabrication of medical devices with additive manufacturing in support of head and neck, orthopedic, and dental reconstruction and rehabilitation. The Center will include engineering programs, design programs, the medical school and the dental school.

CELEBRATION OF FACULTY EXCELLENCE

President James R. Ramsey and Provost Neville G. Pinto honored faculty of the University for their achievement at Papa John's Cardinal Stadium on September 15. ULSD honorees are:



Dr. Jan Potempa was recognized as a Distinguished Faculty member and received a University Medal for Outstanding Scholarship, Research, and Achievement.



Dr. Robert Staat was honored with a University Medal for his Distinguished Faculty Award in Service to the University.



Dr. Richard Lamont was recognized for joint patents developed with the Proctor and Gamble Company.

DEAN SEARCH

Dr. David Dunn, Executive Vice President for Health Affairs, has formed a search committee and initiated a national search to recruit a Dean for the School of Dentistry. Search committee members include:

Craig Blakely, Ph.D., M.P.H. – Dean, School of Public Health and Information Sciences
Karan Chavis – Commission on Diversity and Racial Equality Representative
Stephen Clark, D.M.D. – School of Dentistry Faculty
Ron Fell, Ph.D. – College of Arts and Sciences Faculty
Jennifer Fiorica, D.M.D. – School of Dentistry Resident
John Firriolo, D.D.S., Ph.D. – School of Dentistry Faculty
Dianne Foster – School of Dentistry Staff
Erin Fraundorf – School of Dentistry Student
Irving Joshua, Ph.D. – School of Medicine Basic Sciences Faculty
George Kushner, D.M.D., M.D. – School of Dentistry Faculty
Michael Metz, D.M.D., M.S.D., M.S., M.B.A. – School of Dentistry Faculty
O. Wayne Mortenson, D.M.D. – Dental Alumni/Community
Mark P. Pfeifer, M.D. – Senior Vice President & Chief Medical Officer, University of Louisville Hospital
Barbara Polivka, Ph.D. – School of Nursing Faculty
Jill Steinbach, Ph.D. – Speed School of Engineering Faculty
Barbara Stratton, D.M.D. – School of Dentistry Faculty
Charles Woods, M.D. – School of Medicine Faculty

The services of Dr. Daniel Rodas from Isaacson, Miller have been engaged to assist in the recruitment process. Dr. Craig Blakely will chair the committee.

A handwritten signature in black ink, appearing to read "John J. Sauk". The signature is fluid and cursive, with a period at the end.

John J. Sauk, DDS, MS
Dean

14. REPORT OF THE STATE DENTAL DIRECTOR. Dr. Julie McKee submitted the following report:

Kentucky Dental Association Report

October 3, 2015

Update on Department for Public Health Activities as Reported by Dr. Julie McKee

Community Fluoridation:

Ongoing to Final Actions: In January of 2011, the federal Health and Human Services Secretary announced that federal regulations that recommend the optimal level of community water fluoridation are undergoing revision to lower the amount from a range of 0.8 to 1.4 parts per million (Kentucky water systems target and adjust systems for .9 to 1.0 parts per million) to a single concentration recommendation of 0.7 parts per million. In April, 2015, the CDC released the official recommendations for community drinking water at 0.7 ppm. The Kentucky Department for Public Health has filed regulations that adjust the rate and range by which the Community Water Fluoridation Specialists regulate public water systems to reflect the CDC's recommendations. **Update:** The proposed regulation was passed by the Administrative Regulation Review Subcommittee with little discussion and is scheduled to be reviewed by the Interim Joint Committee on Health and Welfare on September 16th. Results of the Interim Joint Committee on Health and Welfare meeting will be shared during the October meeting. Dr. McKee will keep the Association up to date on activities relative to this issue. Continued support by the Kentucky Dental Association is greatly appreciated and is necessary as the new state regulations to implement federal recommendations move through the regulatory process.

Kentucky Dental School Loan Repayment Program

Work Continuing: On July 20th, Governor Steve Beshear announced a pilot program that involves the Cabinet for Health and Family Services, the University of Louisville School of Dentistry and the University of Kentucky College of Dentistry to offer up to five awards of \$100,000 to recent dental graduates that agree to practice in Appalachian Kentucky. Priorities are given to those that will locate in economically distressed counties and eastern Kentucky natives that return to the area for their dental career. Additional stipulations are being finalized between all parties. For more information, please contact Dr. McKee at JulieW.McKee@ky.gov. This effort is a one-time project that may catalyze the establishment of a more sustainable program to place new dentists in underserved areas. **Update:** Contracts between the cabinet and universities necessary to implement this program are currently in process. Both universities have been very engaged and helpful in working on common language and standards acceptable to both schools and the Governor's Office.

Kentucky Oral Health Coalition:

Ongoing: The Coalition's annual meeting is November 20th at the Crown Plaza in Louisville. This year's conference showcases Dr. Michael Glick, Dean of the SUNY Buffalo Dental School and the editor of the Journal of the American Dental Association. He is the author of four books and over one hundred articles on dentistry and oral medicine. There are CEUs offered for this

event. Visit the website for details for this very affordable event. The Kentucky Oral Health Coalition continues to seek additional dentist members. Interested dentists can log on to www.kyoralthcoalition.org for more details and membership information.

Kentucky Public Health Dental Hygiene Program:

Ongoing: Five dental hygiene programs continue to provide services under the new sections of KRS 313.040 and associated regulations: Jessamine County (also serving Mercer County), Lawrence County (also serving Martin County), Lincoln Trail District Health Department, Pike County and Purchase District Health Department (also serving Calloway and Graves County). For this fiscal year, Lewis County and Clark County were also awarded funds to establish a dental hygiene program under the laws of the Board of Dentistry and the protocols of the Department for Public Health. **Update:** The Oral Health Program will award up to three more health departments to expand the footprint of the public health registered dental hygienist program by October 9th. The Kentucky Department for Public Health continues to work with the Medicaid Managed Care Organizations and the Dental Benefits Administrators to secure a stream of funding for their services to add to their sustainability beyond the life of the start-up funding.

To oversee this program, Babette Southard, RDH, MSAH, continues to work through all aspects of this new venture. Her background includes private practice, charitable dental clinics, teaching hygiene and assisting and quality improvement programs in dentistry. Her email address is Babette.Southard@ky.gov.

New: From July through October, the public health hygiene teams are implementing electronic health records for their services and follow up activities. The Department for Public Health is in the process of implementing an electronic health record (eClinicalWorks) for all of the clinical activities of a Kentucky-based health department. The dental program was implemented first. Implementation of other clinical services are scheduled to begin early next calendar year.

I welcome comments and questions about the content of this report. I will not be attending this meeting, but would be happy to answer your questions. Thank you for the opportunity to have a seat at this table.

Respectfully submitted,

Julie Watts McKee, DMD
State Dental Director

15. REPORT OF THE COUNCIL ON ANNUAL SESSIONS. Dr. B. J. Moorhead
submitted the following report:

Scientific Chair Subcommittee Meeting
Sept. 10, 2015

Attendees: B.J. Moorhead, Randy Ransdell, Mary Oldfield, Terry Norris, Michelle Story, Mark Moats, Rick Whitehouse

- The committee is working to set a date for a site visit at the French Lick facility to better plan our 2017 and 2018 meetings.
- As a working goal, we will schedule no more than 11 speakers per morning and afternoon session to help better control our budgetary expenditures. Emphasis will be placed on selecting speakers that will attract larger audiences.
- Rick Whitehouse has contacted the ED from the Indiana Dental Association to receive information regarding the use of the French Lick facility, since the IDA has had several of their meetings in French Lick. The Indiana ED expressed a willingness to work with us since Indiana will hold their meeting in French Lick in the spring of 2018.
- The entire Council on Annual Sessions will be engaged to make recommendations regarding possible changes in our price structure for our future meetings, beginning in 2017. Rick Whitehouse, Todd Edwards and B.J. Moorhead will meet first in October or November to studying possible models to consider. With a possible new model, we may want to fashion something similar to models used at the Hinman meeting and Chicago Midwinter, where attendees pay an enrollment fee for the meeting and are able to attend several no fee courses.
- A booth is planned on our exhibit floor in March 2016 to promote our new meeting date & venue.
- The committee jointly designed a survey for our members to help us better plan the 2017 meeting. That survey can viewed at <http://bit.ly/1OgxWSD>
- The committee further discussed the lack of good statistics from our annual meeting that could help us with planning and speaker selection.
- The committee will continue to discuss how to best implement a keynote speaker to begin our annual meeting and help promote the benefits of KDA membership.
- **ACTION ITEM:** The committee voted unanimously to ask the Executive Board to consider a bylaws change that would allow the Scientific committee to annually select the next junior chair for the committee, rather than having this listed as a Presidential duty, or allowing the committee to make a nomination to be approved by the Executive Board or the President. Knowing that some new Presidents make their selection with no prior experience in Annual Sessions, it was felt that the committee could better make the selection because the members understand the needs and demands of the position.

Attached is the 2015 Hinman Meeting Scouting Report. This report is informational only.

On 7/20/15, 7:45 AM, "maryoldfield@qx.net" <maryoldfield@qx.net> wrote:

>The Hinman meeting is well worth and a real bargain for the KDA to send
>scouts to.

>National and regional speakers are eager to attend the Hinman.

>I had originally intended to draw from within the state for next year's
>meeting March 3rd, 4th, and 5th.

>The following are some of the reasons I feel that plan has been only
>partially successful.

>

>1. Many university based specialists are not members of the KDA.

>2. Lack of interest by specialists in private practice.

>3. Perceived lack of time to prepare.

>4. Several specialists were interested in speaking but not interested
>in joining the KDA.

>

>We must continue to scout nationally as much as our budget will allow
>for a quality state program.

>We can court manufacturers for sponsorship but not allow them to
>dictate our program.

>Not all speakers are as great as touted by their corporate sponsor.

>Many must be seen in person to know this. Online CE I think is what we
>are still trying to avoid.

>All meetings will become less than great if allowed to.

>

>Lastly a sincere thanks to B.J. Moorhead and Michelle Story for
>helping me get acclimated as quickly as possible at the Hinman.

>

>Best member benefit ever!

>

>Thank you for your time.

>--

>Mary Oldfield

REPORT OF HINMAN MEETING – 2015
DR. TERRY NORRIS

I came away from the Hinman Meeting as I always do; inspired and encouraged. As always I wish our KDA could replicate the Hinman hospitality and volunteers. This goes a long way into getting speakers and members back in subsequent years. I really enjoyed Dr. Wayne Kerr who deals with motivation, financial planning and transitions. His course was packed and he kept his presentation upbeat and interesting. He would be great to have at the KDA and also for our Marcus Randall Event.

Another interesting course was divided into 3 one hour snippets where individual came in and talked about hot topics in dentistry, hygiene and products. This would work at the KDA.

One thing we have not had at the KDA and it would be great for some doctors and especially the front office is successfully managing dental insurance. Gary Dougan did this course and he is willing to come to KY.

I have my planning on hold right now until further information is handed down from the Executive Committee and the Executive Director on how many speakers they want at the French Lick venue and how many rooms, etc. are available.

Members of the KDA Executive Board:

>I have had an opportunity to attend the Thomas P. Hinman meeting as a
>scout for the KDA for the past two years. I have found this experience
>to be a significant opportunity to evaluate speakers,vendors,sponsors
>and share and generate ideas for our KDA annual meeting.

>

>The Hinman meeting began for me with a scout briefing held to acclimate
>scouts to the speakers, venue, hospitality and events for the meeting.

>Opportunities to interact with the speakers where highlighted and
>provided during breakfast and lunch times. We were also given the
>opportunity to enter all speaker presentations during the meeting. This
>proves to be very valuable face time with individual speakers and their
>managers, other scouts for many National and State meetings,as well
>leadership of the ADA on a National level. It allows the speakers an
>opportunity to also create name and face recognition for our KDA
>leadership. I think this type of relationship is very important. We
>have been very well represented in the past. It shows.

>

>Among the highlights of the meeting was a GOLD program for new
>graduates of some of the best known speakers in our profession. It was
>a very unique opportunity for new graduates to experience very high

>level learning.
>
>The general session participation and lecture course offerings covered
>all aspects of dentistry and were highlighted by target audience. I
>was able to create an opportunity to plan the 3 days to view the great
>majority of the speakers during one or more presentations. This allowed
>me to have interaction with a number of speakers that would likely
>prove to be great talent to bring to our KDA. Among the names that of
>presenters that stand out are Drs. Wayne Kerr, Mollie Winston, Mark
>Hyman, Tom McDonald, Lee Ann Brady, Michael Pruett, Steve Ratcliff,
>also Mr. Kirk Behrendt, Ms. Laci Phillips, Ms. Tonya Lanthier, that I
>have been able to initiate contact in presenting to our meeting.
>
>The expansive Exhibit hall created an opportunity to interact and
>invite participation in our KDA and follow up with trends, techniques
>and materials introduced in the participation and lecture courses.
>
>The General Chairman and Presidents's reception was a fabulous forum to
>relax and create social interaction with the speakers. This was a
>wonderful chance to have time to talk with the presenters. Not to
>mention-the venue and food were awesome.
>
>Friday evening was highlighted by as Dentist Reception which allowed
>added face time with speakers and Hinman and ADA leadership, other
>meeting scouts. There are also a U.K. and U.of L. Alumni reception
>among the various group alumni receptions that allowed interaction with
>KDA members and potential members in attendance.
>
>Among the subtle, but great, benefits of the Hinman meeting for me was
>the opportunity to work with our wonderful KDA scouts. It gave me a
>chance learn the process and protocol relating to scouting for a dental
>meeting. It has a learning curve. However, I believe our leadership
>and our committee approach to encourage teamwork, collaboration and
>participation on a group level will pay dividends in the future.
>
>It would be my opinion that Hinman attendance by our KDA scouts is a
>fabulous resource to evaluate and interact with local, regional and
>national speaker talent and share and create ideas for our KDA Meeting.
>
>Respectfully,
>Mark A. Moats, D.M.D.,M.A.G.D.
>Mark A. Moats, D.M.D., Family Dentistry P.L.L.C.
>481 Klutzy Park Plaza Drive
>Henderson, KY 42420
>270-826-2677 (Office)
>270-454-6275 (Cell)
>moatsfamilydentistry.com
>KDA Scientific Chair 2017

16. REPORT OF THE MEMEBRSHIP COMMITTEE. Dr. Rachel Gold submitted the following report:

Dr. Olivia Estes and I would like to thank the executive board for the opportunity to represent you and the KDA as co- chairs in this New Member role.

As Olivia will be focusing her attention on interaction with students within the University setting, I will be stepping in with a focus on engaging new dentists throughout the state. We are grateful and thankful for the guidance that Dr. Lindsey Willoughby and Dr. Jonathan Rich have and are providing us, as we are working to create an action plan and begin this important work.

Dr. Estes will be our representative at the ADA annual session in November and will be attending multiple New Dentist events. Dr. Estes has also been working hard to organize question and answer panels with local dentists for both universities. We have also discussed organizing a lunch and learn to precede each school's student convention in order to familiarize 4th year dental students with the information they are about to receive regarding membership enrollment for the ADA/KDA.

As there are remaining funds from the MPG grants for the year 2015, we would like to use a portion of these funds to encourage new dentists to visit their component society meetings this fall free of charge. Please take this information back to your local component society as we would like to encourage someone within each society to personally invite new dentists, both members and non-members, to attend at no cost to them. We will be reaching out to each component society and encouraging a new member representative to offer this benefit to new dentists in their area.

MPG grant applications will not be available for 2016 until November and at that time we will begin the process of submitting applications.

We have created a preliminary plan for the New Dentist social to be held in conjunction with the 2016 KDA annual session in March as well as ADA signing day at both the University Of Louisville School Of Dentistry and the University Of Kentucky College Of Dentistry.

Please do not hesitate to contact Dr. Estes, or myself if there are any questions that we can answer!

Respectfully Submitted,
Dr. Rachel Gold, Co-Chairman

17. REPORT OF THE TECHNICAL ADVISORY COMMITTEE TO KMAP. Dr.

Garth Bobrowski submitted the following report:

KENTUCKY DENTAL TAC MEETING MINUTES

Transportation Cabinet

**Mero Street
Frankfort, Kentucky**

**March 25, 2015
8:00 a.m. EST.**

The meeting of the Dental Technical Advisory Committee (TAC) was called to order by Dr. Bob Bobrowski, Chair.

The TAC members in attendance: Dr. Garth Bobrowski, Dr. Susie Riley, Dr. Neil Rush, Dr. John Gray, Dr. Matt Akridge, Dr. Wayne Lose and Dr. Matt Johnson. Dr. Rick Whitehouse, Executive Director, Kentucky Dental Association.

Medicaid staff in attendance: Dr. Ken Rich, Ms. Carrie Anglin, Mr. Charles Douglass, Ms. Stephanie Bates and Mr. Stuart Owen (telephonically); Ms. Babette Southard with Public Health.

The Managed Care Organization (MCO) representatives in attendance were: Dr. Jerry Caudill, Ms. Emori Campbell and Ms. Carol Brenner with Avesis; Ms. Pat Russell with WellCare; Ms. Cheryl Lighthart (telephonically) with Scion Dental; Ms. Peg Patton (telephonically) and Jean O'Brien with Anthem Kentucky; Dr. Vaughn Payne, Ms. Beth McIntire, Ms. Candace Owens, Ms. Felicia Wheeler and Mr. Patrick Smith (telephonically) with Humana- CareSource; Ms. Morgan Stumbo with MCNA; Dr. Fred Tolin with CoventryCares; Mr. Matt Misleh, Ms. Rebekah Mathews and Dr. Adam Rich with DentaQuest; Dr. Fred Tolin with Passport; Ms. Morgan Stumbo Tackett and Ms. Cleandria Hart (telephonically) and Ms. Mercedes Linares (telephonically) with MCNA; Mr. Jason Trudeau with Passport. Also in attendance: Ms. Mahak Kalra and Ms. Maria Hafer with Kentucky Youth Advocates and Kentucky Oral Health Coalition; Dr. Raynor Mullins, Dr. Nikki Stone and Ms. Jill Townsend with University of Kentucky.

The minutes from the last TAC meeting were reviewed. A motion was made by Dr. Riley and seconded by Dr. Akridge to approve the minutes. The motion passed unanimously.

MCO'S/SUBCONTRACTORS:

PASSPORT /AVESIS: Reports were distributed to the TAC. Mr. Jason Trudeau noted that the percentage of pregnant women who received a dental visit in the reported year was down. Passport will reach out to OB/GYNs to ask for help in getting the word out to pregnant women. Dr. Caudill stated that Passport's number of providers has increased steadily over the past year in both general dentistry and specialists. Dr. Rush asked about the number of suspended claims and denied claims

GENERAL DISCUSSION: There was discussion about the paper claims process versus the electronic claims process, and Dr. Caudill stated that a new portal has been built that will streamline the filing process and that this portal is being used on the Vision side of Medicaid and will then be moved over to the Dental side.

CARESOURCE/MCNA: Representatives from the MCO reviewed the PowerPoint presentation that was given to the TAC. Dr. Rush and Dr. Riley spoke about the difficulty in submitting an electronic claim on this MCO's portal due to the amount of data that has to be entered manually. Ms. Beth McIntire will take this topic back for review and Dr. Riley will follow up with Mr. Patrick Smith with CareSource to discuss this topic further after the meeting.

GENERAL DISCUSSION: Dr. Gray stated that oral pathologists at the University of Kentucky and at the University of Louisville have not been paid for services provided to Medicaid recipients since the inception of MCOs in the state. Dr. Raynor Mullins of UK stated that this is a standard-of-care issue and is an issue of whether the appropriate billing would occur on the medical side or the dental side. Dr. Rich noted that there was confusing language in the original regulation which did not authorize payments to oral pathologists. He further stated that when the new regulation goes into effect, there will be codes that will be billable on the dental side.

Dr. Riley will recommend to the Medicaid Advisory Council that DMS and MCO representatives meet with representatives from both UK and U of L to resolve this matter and that the regulations impacting the payment for

oral pathology services be clarified so that this will no longer be an issue going forward in the new MCO contracts.

Dr. Gray spoke about the requirement of credentialing with not only the Kentucky Board of Dentistry but with DMS and with each MCO. Dr. Rich noted that this is a federal requirement that the State of Kentucky has to implement. He did note that by May of 2015, a new portal will be in place to make the credentialing process easier and more efficient.

SCION: Ms. Cheryl Lighthart reviewed the PowerPoint presentation that was given to the TAC members. Dr. Bobrowski asked about the timely filings that were denied and Ms. Lighthart will furnish some examples of why these claims were denied.

ANTHEM/DENTAQUEST: Ms. Rebekah Mathews introduced herself and Matt Misleh as the two people who will oversee client and provider relationships in Kentucky for DentaQuest. DentaQuest is in the process of hiring a Kentucky Executive Director, and Adam Rich will serve as the Kentucky Dental Director for DentaQuest. Ms. Mathews reviewed the PowerPoint presentation that was furnished to the TAC.

Dr. Akridge asked if there were any assurances to providers as to what the fee schedules are going to be or what will be maintained over a three- to five-year level. Ms. Mathews noted that an initial fee schedule has been set up and they will get provider feedback to see if there are tweaks needed that will better produce and maintain an adequate network for its membership.

Dr. Lose spoke of problems his practice has had with DentaQuest, and Mr. Misleh stated that these issues will be taken care of within a few weeks. He also stated that they are looking into how to manage the surgical extractions that have to be preauthorized. Dr. Gray asked that when the MCO's review surgical extractions, that they don't review it to the national average.

WELLCARE/AVESIS: Ms. Pat Russell will provide the TAC with the medical information that was not furnished to the TAC ahead of the meeting. Dr. Caudill furnished the TAC with a PowerPoint presentation and stated that WellCare has had an increase in general dentists and specialists throughout the state.

COVENTRYCARES/AVESIS: Dr. Caudill furnished the TAC a handout and noted that Dr. Fred Tolin will provide the medical information at a later date. Dr. Caudill noted that there has been an increase in general dentists and an increase in pediatric dentists, oral surgeons and orthodontists throughout the state and it has been going up every quarter.

KY MEDICAID FFS: Ms. Bates reviewed the fourth quarter reports that were furnished to the TAC.

GENERAL DISCUSSION: Dr. Bobrowski and Dr. Akridge spoke about the huge profits being made by MCOs nationwide and how providers struggle financially while trying to provide care for Medicaid recipients. Dr. Akridge stated that providers need to be kept in the loop with regard to determining what services get approved, how payments are made and the fee structure.

Dr. Bobrowski requested that all MCO reports be forwarded to Carrie Anglin two weeks before the scheduled TAC meetings, and then Ms. Anglin will disseminate those reports to the TAC prior to the meetings.

Dr. Gray stated that there are dental providers who provide services to Medicaid recipients in good faith after verifying on both the KYMMIS and MCO websites that the recipient is eligible and participating with an MCO. Copies of the eligibility verifications are saved by the provider. DMS retro terminates the recipient and the MCO does not pay the provider despite several appeals. The MCO states that the provider cannot be paid due to the retro termination. Dr. Gray noted that this matter should be between the MCO and DMS and that the provider should be paid and not penalized when he provided the service and followed the guidelines for verifying patient eligibility.

NEW BUSINESS: Revision of Dental Regulations: There was a lengthy discussion concerning the revision of the dental regulations, and Mr. Stuart Owen from DMS asked that if any member of the TAC or the MCOs have suggestions or feedback to send them to him as quickly as possible. Mr. Owen discussed the timetable for implementing new regulations and noted there will be a public comment period at a later date to allow for further input.

Proposed Mobile/Portable Delivery Requirements: Dr. Raynor Mullins and Dr. Nikki Stone addressed the TAC concerning the University of Kentucky's nationally-recognized Mobile Dental Outreach Program and how

the proposed guidelines would affect this program. Dr. Caudill discussed his support for the guidelines, his investigation of mobile and portable units in the state, and his concern that many of these units are cherry-picking and not referring children on for further treatment. After further discussion, it was decided that a subcommittee would be formed to review the guidelines and to come up with language that is suitable for all parties involved that can then be forwarded to DMS.

Revalidation Letter: Dr. Rich stated that the language in the revalidation letter speaking about fingerprinting and background checks will be deleted and noted that there will be a new letter that goes out stating that all new and existing Medicaid providers must revalidate under new screening requirements and that the new requirements place providers in three different categories of risk levels – limited, moderate and high – which determines what screening must be performed.

Threatening Letters from MCOs: Dr. Bobrowski noted that dentists were sent a letter from MCNA stating that MCNA is required to notify all applicable regulatory agencies including the National Practitioner Data Bank of all involuntary contract terminations. Ms. Morgan Stumbo Tackett stated that this language has now been changed and no provider will be turned over to the National Practitioner Data Bank unless there's a quality-of-care issue.

The meeting was adjourned.

(Minutes were taped and transcribed by Terri Pelosi, Court Reporter, this the 9th day of April, 2015.)

KENTUCKY DENTAL TAC MEETING MINUTES

Transportation Cabinet
Mero Street

Frankfort, Kentucky

June 24, 2015

8:00 a.m. EST.

The meeting of the Dental Technical Advisory Committee (TAC) was called to order by Dr. Bob Bobrowski, Chair.

The TAC members in attendance: Dr. Garth Bobrowski, Dr. Susie Riley, Dr. John Gray, Dr. Wayne Lose and Dr. Matt Johnson. Dr. Rick Whitehouse, Executive Director, Kentucky Dental Association.

Medicaid staff in attendance: Dr. Ken Rich, Mr. Charles Douglass, Ms. Stephanie Bates and Mr. Stuart Owen (telephonically); Dr. Julie McKee and Ms. Babette Southard with Public Health.

The Managed Care Organization (MCO) representatives in attendance were: Dr. Fred Sharpe, Dr. Jerry Caudill, and Ms. Nicole Allen with Avesis; Ms. Jean O'Brien with Anthem Kentucky; Dr. Vaughn Payne, Ms. Beth McIntire, Ms. Candace Owens, Mr. Patrick Smith (telephonically) and Ms. Missy Mougey (telephonically) with Humana- CareSource; Ms. Morgan Stumbo Tackett and Ms. Cleandria Hart (telephonically) with MCNA; Dr. Fred Tolin with CoventryCares; Mr. Matt Misleh and Ms. Michele Blackwell with DentaQuest; Dr. Fred Tolin with CoventryCares; Mr. Jason Trudeau with Passport. Also in attendance: Ms. Maria Hafer with Kentucky Youth Advocates and Kentucky Oral Health Coalition; Dr. Raynor Mullins, University of Kentucky; Dr. Krishna Aravamudhan, American Dental Association.

The minutes from the March 25, 2015 meeting were not reviewed nor moved for approval. Dr. Riley and Dr. Lose noted that they did not receive the minutes via email prior to the meeting.

MCO'S/SUBCONTRACTORS:

All the MCOs furnished the TAC members with reports prior to the meeting.

COVENTRYCARES/AVESIS: Ms. Nicole Allen with Avesis reviewed the report and talked about customer service performance, claims performance, utilization management performance and appeals. Dr. Caudill discussed the provider service performance.

General Discussion: Dr. Lose asked if the MCOs could furnish information reflecting how many dentists received paid claims of \$10,000 or more a quarter by specialty instead of the amount that is submitted on claims. Dr. Sharpe noted that MCOs struggle with keeping the provider lists current because providers do not always report to the MCOs when they retire, leave the state, etcetera. Dr. Caudill stated that if a provider does not submit a claim in two years, DMS will automatically invalidate the provider's Medicaid number.

HUMANA-CARESOURCE/MCNA: Several representatives from the MCO and their subcontractor discussed the report. Topics covered were the Service Center call data, provider relations, geo access maps, credentialing, utilization management, claims and appeals.

General Discussion: Dr. Riley asked for clarification on an appeal her office had filed on a claim for a root canal where payment was denied, and she had been told by the MCO that the reason for denial was because they did not have a signed authorization from the patient. The representative told Dr. Riley that she was basing this decision on 907 KAR 17:010(4). Ms. Mougey stated that this was a misinterpretation and that the claims team was working on this to get it resolved expeditiously.

Dr. Riley noted that her office was still experiencing problems with the portal claims submissions. It would not auto populate patient information. Also, when it auto-populated the provider information, it only auto-populated for the billing provider, not the treating provider. Mr. Smith with Humana stated he would look into this.

Doctor Gray noted that oral surgeons are concerned about the number of appeals being denied for sedation.

PASSPORT /AVESIS: Ms. Michele Allen with Avesis reviewed the report and talked about customer service performance, claims performance, utilization management performance and appeals. Dr. Caudill discussed the provider service performance.

General Discussion: Dr. Bobrowski asked about the accuracy of the dots on the geo access maps in terms of the geography, and Dr. Sharpe said he would have to check with the people who do the maps and report back.

ANTHEM/DENTAQUEST: Ms. Michele Blackwell with DentaQuest reviewed the report and discussed network recruiting, credentialing, top provider volumes, the contact center, authorizations and claims, utilization and resources and contacts for provider support. Ms. Blackwell noted that since this was the first time reporting for DentaQuest since it partnered with Anthem, appeals information was not included in the report but will be included in the reports going forward.

WELLCARE/AVESIS: Ms. Michele Allen with Avesis reviewed the report and talked about customer service performance, claims performance, utilization management performance and appeals. Dr. Caudill discussed the provider service performance.

KY MEDICAID FFS: There was no report. Ms. C. J. Jones introduced herself as the new Branch Manager for Benefits Policy and she noted that the job position has been posted for Carrie Anglin's position. Ms. Jones stated that until the job position is filled, she and Charles Douglass will be the points of contact for the TAC members.

General Discussion: Ms. McIntire asked if there were gold standard slides that all the MCOs could use for comparing data more easily and efficiently when making their reports. Dr. Caudill suggested that Dr. Bobrowski share with the new administrators who have come into the program the basic core data that the TAC asked for several years ago, and Dr. Riley noted that when Scion was involved with the program, their reports represented the gold standard. Dr. Lose asked if the reports could show the number of recipients signed up for each plan.

INTRODUCTION OF KRISHNA ARAVAMUDHAN: Dr. Rich introduced Dr. Krishna Aravamudhan, Director of Dental Benefits at the American Dental Association (ADA), and stated she is the lead staff person for a group working on developing quality measures for dentistry. Dr. Aravamudhan thanked the TAC for inviting her to speak. She stated that after listening to the MCO presentations, she noted that quality metrics were missing from the reports and she was hopeful that, over time, these metrics could be adopted into the reports. She noted that Kentucky seems prime for diagnostic activity at a policy level and that the KDA can assist with this.

ACCESS-TO-CARE DISCUSSION: Dr. John Gray stated there is too much redundancy in the credentialing process and suggested that all credentialing be done through the Kentucky Board of Dentistry. The Board could

issue the Medicaid numbers to providers and then DMS would have the option of approving that number. Dr. Gray also noted that there is a provider trust issue with DMS and the HMOs and that all the parties need to work closer together.

OLD BUSINESS:

MOBILE/PORTABLE DENTAL UNITS: Ms. Morgan Stumbo Tackett stated the subcommittee came to an agreement that it was up to the individual MCOs as to how they treat mobile dental units in the state and noted that, in her experience, DMS has always supported the decisions of MCOs when dealing with these mobile/portable units. Dr. Johnson agreed with Ms. Tackett's summation. Dr. Caudill stated that he had spoken with Commissioner Lee and she felt that the MCOs and their administrators had the authority to deal with these mobile/portable units in a manner they felt appropriate and that the Commissioner suggested that the HMOs, UK's dental outreach program, and the Kentucky Primary Care Association work on ways to address these units statewide across all plans.

REVISION OF DENTAL REGULATIONS: Dr. Bobrowski stated that the dental regulations have been revised and they are now at LRC. There will be a public comment period and the deadline for written comments will be July 31, 2015.

FAILED/BROKEN APPOINTMENTS: Dr. Bobrowski stated that this is an issue that must be addressed and that recipients need to be educated about keeping appointments and/or calling to cancel rather than no showing up at all. Dr. Caudill stated that DMS is setting it up in their internal system to begin accepting codes for failed/broken appointments and the HMOs will not be deemed for failed encounters.

OTHER: Dr. Mullins noted that in the new regulations, the oral pathology billing issue has been addressed but the issue of back payments on the medical side relating to oral pathology has not been addressed.

Dr. Riley stated that she took the retro termination issue forward to the Medicaid Advisory Council and Commissioner Lee's response was that no blanket policies would be issued but she requested that each instance be forwarded to her with documentation.

NEW BUSINESS:

CHECKS TO MEDICAID PROVIDER: Dr. Bobrowski had been issued a check from state government but could not identify what the check was for. Ms Bates will check on this.

SENIOR UK/UL STUDENTS MEDICAID ELIGIBLE PRIOR TO MAY, 2016: Dr. Bobrowski asked if there is a way to get these students credentialed and a Medicaid number, pending their graduation from dental school.

Dr. Rich did note that DMS is in the process of signing contracts that will allow them to access the Kentucky Board of Dentistry's data bank automatically to help with license revalidation and other issues.

The meeting was adjourned. The next meeting will be held September 23, 2015.

(Minutes were taped and transcribed by Terri Pelosi, Court Reporter, this the 8th day of July, 2015.

18. THE KENTUCKY DENTAL FOUNDATION.

MOTION: Dr Fred Howard moved to accept the recommendations of the Foundation for the expired Directors vacancies. The directors reappointed are: Dr Jim Allen, Dr Stephen Robertson, and Dr Andy Elliott, Ms. Kelley Dearing-Smith and Mr. David Gardner. **Dr Ralph Beadle** seconded the motion.

ACTION: ADOPTED.

19. REPORT OF THE KDA MEDICAID WORKGROUP. Dr. Garth Bobrowski submitted the following report:

KDA TAC REPORT
(TECHNICAL ADVISORY COM. TO MEDICAID)
KDA MEDICAID WORKGROUP
10/3/15

On September 9, 2015, I attended the Children’s Health TAC meeting in Frankfort. This meeting focused on children’s oral health. One topic was the increased need for fluoride varnish applications. Due to a decrease in public health nurse funding and being strapped for finances at the local health departments, there has been a decrease in these applications. Gov. Beshear just announced a Kentucky Smiling Schools Program last week that will be expanding to nine more counties (Green, and other Appalachia counties). This will go to 40 more elementary schools. The recent report states that Kentucky is 41st in the nation in annual dental visits, 45th in the percentage of children with untreated decay and 47th in the percentage of adults 65 and older missing six or more teeth. This effort is supplying \$800,000 to reach almost 18,000 students. The money is coming from the Appalachian Regional Commission and the Kentucky Oral Health Program. This Program will now reach children in 40 counties. Sec. Audrey Haynes reports that this program has reduced tooth decay and fillings by 20%.

Our Medicaid Workgroup continues to be very active. We have a conference call Monday night, Oct. 5, 2015. We will work on the final draft of the Medicaid regs that was received back from Frankfort as a Statement of Consideration. It will go to the LRC on or around 10-15-15.

On Sept. 23, 2015, the TAC met in Frankfort for a 4 hour meeting. After the MCO reports a long discussion progressed concerning “retro-termination” of patients and recoupment of fees from the dentists. I expressed my dissatisfaction with this at least 3-4 times , because the state PROMISED us that if a patient was eligible on the state website and the MCO website, the dentist would be paid for the treatment rendered. They say this is a “federal thing” and they don’t have any control. Now I am getting red-faced !! Once again the providing dentist loses. The dental work has been done, the dentist gets paid, but now the dentist has to pay back the money received. So the patient wins(free work done), the MCO wins(got their money back),so the dentist is out the supplies, reimbursement fees, staff time and cost. ANOTHER BATTLE TO FIGHT. HELP!!.

Some of the WINS we are getting are: 1. Passport has no plan for retro-terminations,2. Passport will be giving a 25% fee increase for Preventive and Diagnostic procedures starting 1/1/16, 3. online credentialling is being worked on and is now in beta-testing,4. Humana will start paying for two adult cleanings per year,5. Humana has removed the requirement for their pre-authorizations for extractions,6. we got new codes added for “missed or broken appointments” and Anthem will start paying the dentist \$3 for this code, 7. added new codes and fees to help the Oral Pathology departments, 8. there will be a 25% fee increase in the Regular Medicaid fees for Preventive and Diagnostic codes, 9. there will be a code change in the new regs to do fluoride varnishes on young children, 10. added language to help the orthodontist and oral surgeons on their reimbursements , 11. got an increase in the fee on a denture repair(the fee paid was below the actual cost of the even the lab fee),12. we are getting a reduction in paperwork on the MCO pre-authorization requests—going to a one page standard form,13. because of our pressure , the credentialling process is now only supposed to take no longer than 45 days-we'll see, 14. we got rid of the adult patient rule of one visit per month and will be changed to 12 visits per year. A full listing of our wins will be coming out soon.

Other battles that are looming is that AVESIS sent out a memo to all the dentists and has made the use of nitrous oxide harder on the 10-14 year old group—requiring 3 procedures to be done at each appointment. Then AVESIS has added requirements and more restrictions for adult root planing.

I really feel that if you have a complaint on the MEDICAID/MCO PROGRAM, you need to let the TAC, Medicaid Workgroup, Sec. Audrey Haynes, and Medicaid Commissioner , Lisa Lee, know.

There is constant ‘ebb and flow’ going on with changes in the Medicaid program and with a new Governor coming, who knows what staff changes will be coming. We need to keep our legislators fully informed of our Medicaid situation-good and bad.

I am so proud of the work that our Medicaid workgroup and TAC are doing. Through your eyes and ears let us know where we can help you.

Respectfully submitted,
Dr. Garth Bobrowski
Chair, KDA Medicaid Workgroup
Chair, KDA Dental TAC to Medicaid.

20. EXECUTIVE SESSION. The Board moved into executive session to discuss personnel matters.

21. NEW BUSINESS:

- **MOTION: Dr. Fred Howard** moved to give Mr. Richard Whitehouse a bonus in the amount of \$6,000.00. **Dr. David Narramore** seconded the motion.
ACTION: ADOPTED.

22. ADJOURNMENT. **Dr. David Narramore** moved to adjourn. The meeting was adjourned at 5:45 PM.

Respectfully submitted

Theodore E. Logan, Jr. DMD
Secretary-Treasurer