

# THOROUGHBRED

Second Quarter 2015

### THE OFFICIAL PUBLICATION OF THE KENTUCKY ACADEMY OF GENERAL DENTISTRY

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WE WANT YOU!!! LOOKING FOR COMMITTEE MEMBERS

## From the President...

Greetings.

I think today we are all aware that healthcare is changing and that these changes are likely not good for either patients or providers but rather for government and insurance companies. Throughout the last decade membership is decreasing in both the Academy of General Dentistry (AGD) and the American Dental Association (ADA). This loss in membership greatly reduces the AGD's and the ADA's ability to affect change or maintain the status quo both in terms of financial resources and in market share. I still recall in dental school hearing about how our strong membership in organized dentistry had resulted in our ability for the most part to escape many of the insurance issues that were affecting our medical colleagues.

When I talk to people who aren't a member of a professional organization I usually hear something along the lines of either "The organization isn't doing anything for me." Or "I don't like what the organization is doing." My response is join and you can change it. While we may not agree on dental treatment or politics in general we will likely agree on the majority of political issues that affect our practices. However, when we lack the financial or membership resources to fight and win political wars we can only fight for the scraps at the table.

Another common response is along the lines of "when the organization changes then I'll join." This is great logic if you're selling a car but not so great when you're part of an organization. This is because the organization's role is to serve members and not non-members. Even more importantly because even though we may have the same values and goals of the non-member we can't make changes because our membership numbers and treasury no longer have the political and financial capital necessary. However, if the non-members joined then they would have a voice and the organization would have a stronger voice both in terms of membership capital and monetarily.

Growing up I had the opportunity to volunteer at the National Scouting Museum when it was still located in Murray Kentucky. Ernest Thompson Seton who was a renowned naturalist and co-founder of the Boy Scouts of America said that "The strength of the wolf is the pack and the strength of the pack is the wolf." Just as the strength of the wolf is the pack the strength of the dentist is organized dentistry.

In addition to being a member of the AGD I am also a member of the American Dental Association ADA. At the time the AGD made the decision to separate from the ADA I was and still am opposed to it. While there is no use in crying over spilled milk I will say that just as the ADA is the voice of dentistry the AGD is the voice of the general dentist. Furthermore, if membership in both the AGD and the ADA are strong then when general dentists through the AGD tell the ADA they want action on an issue our voice will be better heard. Furthermore, this will result in the same loud voice for the ADA. If our general dentists join only the ADA but not the AGD then we will lack a strong unified voice to the ADA.

If we compare professions, dentistry is one of the smallest. I believe the number of lawyers graduating each year exceeds the total number of dentists practicing. This means that our voice is already small when we go up against bigger groups. However, big things can come in small packages and when 100% of dentists are a member of the AGD and the ADA and we go to Washington or Frankfort then I guarantee that we will have the financial capital to educate our patients on why something is bad and they call their congressmen and senators I guarantee you we will be heard.

I unfortunately see a time when we may need to wage a media war in order to educate and inform our patients of changes that will not be good for them i.e. having a non-dentist perform dental care. This sort of campaign will be both financially costly as well as costly in terms of political capital. If we do not strive for 100% membership and work to ensure our colleagues understand the importance of membership and join we may have to accept that instead of being at the table to make decisions we were on the menu. It the words of John F. Kennedy, "Ask not what



your country can do for you but what you can do for your country." I promise you that membership and service are a win- win and that we need you to be involved and to promote membership to your friends and colleagues!

Yours in Service. Geoffrey S. Ball, DMD, FAGD President, Kentucky Academy of General Dentistry

# Dr. Greenwell attends AGD's Hill Day



Another year has passed and I find myself in Washington D.C. looking at the beautiful cherry blossoms of early spring. I really enjoy my role on the Legislative and Governmental Affairs council of the Academy of General Dentistry. It has given me the opportunity to see firsthand what the AGD does for its members. This year as we have done for several, the Academy sponsors members to gather together to discuss the future of dentistry and its role in the government. We are all given assignments to meet with our perspective Members of Congress to advocate for what we believe is the best for our patients and profession. As a member from Kentucky, I had meetings with Senators Mitch McConnell and Rand Paul's office and Rep. Brett Guthrie's office. All of the legislators are very easy and gracious in listening to our concerns. I spent thirty minutes with Congressman Guthrie talking about our challenges to provide care to all the citizens of Kentucky without government overregulation and burdening insurance mandates.

During the meeting we heard from Congressman Brian Babin, DDS. Dr. Babin is a dentist serving his congressional district in the House from Texas. He is one of three dentists who serve in Congress. The other two are Dr. Paul Gozar from Arizona and Dr. Mike Simpson from Idaho. I have had the privilege of meeting both and they are true advocates of dentistry. We also heard from Thomas Spangler, JD, Senior Director, Legislative and Regulatory Policy at the ADA. Mr. Spangler discussed legislation

proposed by the ADA and supported by the AGD call for the Action for Dental Health Act, H.R. 539.

H.R. 539 takes its name from the ADA Action for Dental Health (ADH) initiative, a nationwide, community based movement aimed at providing care to individuals currently suffering with dental ailments and delivering dental health education and disease prevention into underserved communities. As part of the effort the ADH initiative is focused on the following:

- Reducing the number of people who visit the ER for a dental condition by referring them to dental practices.
- Expanding access to care for the vulnerable and the elderly by delivering on site care.
- Expanding public access to fluoridated water.
- Strengthening collaborations with other professionals and organizations.

We all asked for support for this legislation. We did not ask Congress for more funds. The legislation just gives the Centers from Disease Control the ability to allocate existing funds. I believe this is key to gain support, due to Congresses hesitation to increase spending.

We also listened to a panel of experts on the overly increasing student debt problem. The panel consisted of Robert Moran, Senate HELP Committee, James Kolstad, AGD New Dentist Committee, and Matthew Shick, JD, Association of American Medical Colleges. Currently the level of debt accrued by a new dentist has become almost unmanageable. Currently the average for a new grad in 2015 is \$247,000.00. I can't imagine that much debt. Due to young dentists having to serve this enormous amount of debt, there is no way they can currently practice without changing the way in which we have. It's important that we do what we can to educate our leaders to the worsening problem. There is no current legislation pending in Congress this year, the AGD is doing everything we can to keep this problem in the thoughts of Congress.

The last panel addressed Barriers of Oral Health. Lynn Mouden, DDS, MPF, Chief Dental Officer, CMS and Katherine Weno, DDS, JD, Director, CDC Division of Oral Health. A big topic was raised on community water fluoridation. The CDC will be recommending some big changes in the fluoride guidelines which will surly create some controversy with the anti-fluoridation groups.

Three other bills were discussed with our members of Congress. (S. 149) the Medical Device Access and Innovation Protection Act, (H.R. 160) the Protect Medical Innovation Act, and (H.R. 494) the Competitive Health and Insurance Reform Act. These three bills can have a substantial impact on our practices. They will help to defer costs to us and our patients. H.R. 494 is sponsored by Dr. Gozar from Arizona. This legislation is to repeal the Federal anti-trust law exemptions the Insurance industry has had since the nineteen forties. The McCarran-Ferguson Act allows

the insurance companies to have collective actions not afforded by everyone else. This legislation is focused on the health insurance industry and will restore competition and protect consumers from these unfair practices.

I encourage everyone to get involved at the local, state and federal levels. The more voices heard the more that will show our legislators or resolve to create the best environment for patient's oral health. If anyone is interested, but have questions on how to get involve, please contact me and I will be happy to help. Our Academy's members are the cornerstone of general dentistry. We all need each other to provoke change. Stand with me to make your profession heard.



Dr. Greenwell with Rep. Brett Guthrie

Darren Greenwell, DMD, FAGD

Would you like to be published? Show people how smart you really are? Be the envy of your study group? Please send your management or clinical pearl to Executive Director, Maegan Bennett for placement in our next newsletter.

# Region 6 update from Regional Director, Richard Dycus

As a region we are growing and I am happy to say that Kentucky is leading the way as one of the faster growing small constituents.

As an association we are strong. Our AGD is financially on sound footing. We have many valued programs and member benefits that are excellent.

We have an advocacy department that is expanding. We have met with more allied groups nationally and have built a great relationship with ASDA.

Our mastertrack and fellowship awards programs are strong and highly sought after by general dentists. We are in the process of separating our scientific session from our governance. Eventually our scientific session will not meet with our House of Delegates. Our CE offering continue to be strong in all our region. Again, Kentucky leads the way for smaller constituents. Much praise goes to the Kentucky AGD Board and its Executive Director.

Due to family duties, I will not be at the Annual Session this year and our Trustee Connie White will be the caucus chair. She has graciously agreed to help out while I am absent that one meeting.

Richard Dycus, Region 6 Director rdycusdds@gmail.com

# Kentucky Board of Dentistry Update



The last meeting was March 14 2015. Normally the KYBOD meets the second Saturday of every odd month and start at 9 am. These meetings are open to anyone. A lot of the KYBOD business is conducted by special committee and those actions are not open or discussed at the regular meeting. For example, the disciplinary committee. Board members are paid \$200.00 per meeting.

The results of last election for the KYBOD were released. Previous election had fewer than 2% of dentists voting. The past election had almost 9% of eligible dentists voting. The leading vote getter was past president Jason Ford. I would urge everyone to vote, however our votes are only a recommendation to the Governor who can pick anyone he or she likes.

A motion was tabled to allow dentists to train assistants in their own to do coronal polishing. All the hygiene members were strongly opposed. It was reported that the Supreme Court has not issued a decision about legality of mall whitening yet. It is thought that this decision could affect all boards of every profession.

A discussion was heard (no action taken) about elimination live patient exams for licensure. MD's have no such exams and there is a push nationwide to eliminate the current requirements. In Ohio at present, a one year residency will suffice instead of an exam. Part of the push is to have dental schools more accountable. Presented research shows there is no predictable results from board exams or dental school grades to forecast future problems or success.

If anyone has any questions, please contact me. I go to the KYBOD meetings as representative of KY AGD, which means I often bite my tongue and shut up. Should you have concerns you would like our chapter to address, send them to me and will mention them to our council since I represent all our members at the meetings.

Thomas K Tyre DMD FAGD Painlsdoc@aol.com

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## AGD News and Media

## **Dental Organizations Question HRSA Report**

In February, the Health Resources and Services Administration (HRSA) released a report analyzing workforce projections for dentists and dental hygienists through 2025. The report projected a 6 percent increase in dentists nationally by 2025 if workforce patterns continue. However, demand for dentists is projected to increase 10 percent in this timeframe, creating even more of a shortage than what currently exists. According to the report, all states and the District of Columbia will experience this shortage, although California, Florida, and New York are projected to experience the greatest shortfall.

In comments to the HRSA, the American Dental Association's (ADA) Health Policy Institute challenged the report's findings. Specifically, the ADA faulted the HRSA for assuming dental care patterns will remain constant in the next decade, calling it "inconsistent with the best available evidence." The AGD shares this assessment. After analyzing both the HRSA's report and the ADA's comments, the AGD issued a press release echoing ADA's criticism of a flawed demand model.

"The HRSA report overlooks many market forces that influence supply and demand," says AGD President W. Carter Brown, DMD, FAGD. The AGD also points to underutilization of existing dental services to support its claim that future supply will be adequate. According to Brown, "The barriers to access and utilization have little to do with the supply of dentists, and we know that the economic capacity for care within the current number of dentists is far from maximized. There is plenty of appointment time available with the dentists and their teams. Factors such as the lack of the patient's perceived value for dental care and oral health literacy, transportation, and, frankly, fear of treatment are some of the biggest drivers of underutilization of care."

## Live Patient Implant Course at AGD 2015

Build the confidence to incorporate implants into your dental practice at AGD 2015, June 18 to 21, in San Francisco! The AGD is proud to offer the live patient dental implant course "The Magical Circle," featuring Todd B. Engel, DDS, on Friday, June 19. Dr. Engel is the founder of the Engel Institute—a center for live patient surgical implant instruction that has educated more than 2,000 dental professionals since 2005. "The Magical Circle" course offers attendees education and instruction on every aspect of the implant procedure—from treatment planning to final restoration. To reserve your spot in this course, register today for AGD 2015!

## Membership Referral Programs Under Way

The AGD Refer a Colleague and Refer a Classmate programs are in full swing, welcoming your referrals and new members. Help spread the word about the value of AGD membership to your peers and you can earn great rewards! AGD member dentists can earn a chance to win a free trip to AGD 2016, July 14 to 17, in Boston, while student members can earn gift cards! Start talking about the AGD today and invite your colleagues to join! To learn more about these recruitment programs, email refer@agd.org

## **Medicare FAQ**

According to a new federal rule, dentists who treat Medicare patients must either enroll in Medicare or opt out of the program in order to prescribe medication to their qualifying patients with Part D drug plans. To help you better understand the rule and what action is needed, the AGD has compiled the following list of frequently asked questions (FAQ). Should you fail to find the answers you need, please do not hesitate to follow up with the AGD for more information.

## **Patient Resources**

The AGD understands that you are always striving to educate your patients on a variety of oral health topics and good oral hygiene. To assist you, the AGD offers members several options for patient education materials. Utilize the one-page AGD Oral Health Fact Sheets in your office to explain various oral health conditions to your patients, or send your patients to the AGD's consumer website KnowYourTeeth.com to learn more about their oral health. The AGD is a partner of a national ad campaign designed to educate parents on how to improve their children's oral health in simple ways. The ad campaign's consumer website, 2min2x.org, offers a plethora of oral health information and entertaining videos designed to get children brushing.

# **CALENDAR OF UPCOMING EVENTS**

# **Continuing Education...**

#### Kentucky AGD

The KY-AGD 2015 annual meeting with be October 2nd at the University of Louisville Event and Conference Service Center at Shelby Campus beginning at 8:30 am. "Jewels you can use on Monday" presented by Dr. Marc M. Gottlieb. Click <u>here</u> to view the event brochure.

(You can also copy and paste this address into your browser http://www.kyagd.org/sites/default/files/doc\_resources/2015%20BACK-.pdf)

Other courses are also being planned for summer and fall. Watch your email for details.

#### National AGD

Make plans now for AGD 2015, the AGD's annual meeting. Join your colleagues at AGD 2015 at the Moscone West Convention Center in San Francisco. It's never too early to plan ahead for top-notch continuing education and innovative, fun events. Mark your calendar for AGD 2015 in San Francisco, June 18 to 21, 2015!



#### Louisville Dental Society

Sept 17 will be at ULSD; KDA Update, telling us what's going on in the KY legislature & what's new at the KDA. Oct 15 will be at Audubon Country Club; Brian Wilson with Four Quadrants Advisory.

### Tennessee AGD

Jul 10 – Jul 11 2015 TN AGD Annual Meeting at Wilderness at the Smokies Get more information on their website www.tnagd.org

#### Indiana AGD

May 8th & 9th, 2015. Speaker: Dr. Charles Goodacre (May 8th) and Dr. Rhys Spoor (May 9th)- "Front to Back Restoring Smiles & Teeth. In Indianpolis, IN at Crowne Plaza by International Airport.

June 6th, 2015- Joint meeting with OH, 9am-Noon with option of evening baseball game. Speaker: Dr. Mark Murphy. In Cincinnati at the Westin Hotel.

October 16th & 17th, 2015. Speaker: Dr. Ted Reese- "Oral Surgery Skills for the General Practitioner. In Indianapolis, IN at the Crowne Plaza by the International Airport. Get more information on their website www.indianaagd.com

# **Board Meetings...**

**Next KYAGD Board Meeting**– May 31, 2015 at 9:00 am CST at 481 Klutey Park Plaza, Henderson, KY 42420 If you are interested in getting involved with the board and attending our board meeting please contact Maegan Bennett at mbennett@agd.org.

**Next KYBOD Board Meeting**– May 9, 2015 at 9:00 am at 312 Whittington Parkway First Floor - Board Meeting Room Louisville, Kentucky 40222. For more information about attending a Board of Dentistry board meeting please contact the Board at 502-429-7280.