

# ODA Today

A publication of the Ohio Dental Association focusing on dentistry in Ohio

## QuickBites

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Follow the ODA to find updates from organized dentistry in Ohio, including legislation and other important issues affecting dentists and patients.

Keep up to date on ODA events, including the 2011 ODA Annual Session. Watch for the Annual Session hashtag (#ODA2011AS) for updates leading up to the meeting and to find useful information live at the Greater Columbus Convention Center Sept. 15-18.



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## ODA Annual Session to offer hands-on courses, special events and more

### ODA Staff

Dentists and staff looking for innovative hands-on opportunities need to look no further than the 145th ODA Annual Session, September 15 -18, in Columbus, Ohio. According to 2011 ODA Annual Session General Chairman, Dr. Dale Anne Featheringham, "The Annual Session Committee has a long-standing commitment to bring quality educational programs to our members and their staff each year, and that includes offering a wide variety of hands-on workshops." This year, attendees can choose from 13 workshops varying from model pouring techniques for staff, to CPR accreditation, to specialized training for dentists. Due to limited attendance, hands-on courses sell out fast and most workshops will be closed for on-site registrations. Register online today at [www.oda.org](http://www.oda.org).



Ohio Dental Association photo

Attendees participate in a hands-on course at the 2010 Ohio Dental Association Annual Session. This year's convention, to be held Sept. 15-18, offers more than 60 CE courses – 13 of which are hands-on.

Hands-on courses available at the 2011 ODA Annual Session include:

Obtaining Accurate Alginate Impressions and Model Pouring Techniques

Sarah Conroy, DDS

Thursday, September, 15

9:00 a.m. to 12:00 p.m. and 2:00 p.m. to 5:00 p.m.

CDE Hours: 3

Fee: M - \$245; NMD - \$310; S/O - \$175

Course Code T17; T22

Limited Attendance

This hands-on course will engage the audience in learning new techniques for practicing excellent alginate impressions and model pouring. The course combines theory and practical information. The participant will learn current techniques for patient preparation, criteria for alginate tray selection and preparation, use of adhesives, proper mixing techniques, loading seating and removal of impression trays, inspection of impressions, bite registration techniques,

pouring casts and separating casts.

Note: This course is offered on Friday morning, Course T17, and on Friday afternoon, Course T22.

Treatment Planning The Worn Dentition

John Cranham, DDS

Thursday, September, 15

9:00 a.m. to 12:00 p.m.

CDE Hours: 3

Fee: M - \$245; NMD - \$310; S/O - \$175

Course Code T18

Limited Attendance

The aging baby boomer population presents itself with many unique challenges. Unlike their parents, they expect to keep their teeth in health and function for their entire lives. They also will be living longer in a world with increased stresses, making occlusal wear/occlusal disease one of the greatest threats to their dentition. This same group of people are also spending billions

of dollars to stay healthy and look their very best. Being able to design comprehensive treatment plans that will address occlusal, aesthetic, biologic along with the correct material selection will be essential to the successful restorative practice. Dr. Cranham presents his unique hands-on workshop to learn from actual cases how and why to develop a treatment plan that will meet and exceed the expectations of the patient and the dental team. You will work through actual cases restored by Dr. Cranham, to learn a predictable approach to complex treatment planning.

Restorative Materials: What, Where, When and How – Workshop

Charles Wakefield, DDS

Thursday, September, 15

2:00 p.m. to 5:00 p.m.

CDE Hours: 3

See ANNUAL SESSION, page 6

## State budget deal includes new Use Tax Amnesty Program

### ODA Staff

Ohio's 2012-13 state budget signed in late June by Governor John Kasich contains a directive for the Ohio Department of Taxation to create a new Use Tax Amnesty Program beginning this fall. The new program is independent from the use tax programs outlined in the last edition of the *ODA Today* (see Politics and Policy, July 2011).

Under the new program, a consumer who pays the full amount of use tax (a sales tax that applies to certain out-of-state purchases) for which the consumer has outstanding liability on or after January 1, 2009, will have all delinquent use tax owed by the consumer before January 1, 2009 waived or abated. Additionally, all applicable penalties and interest accrued before and after January 1, 2009 would be waived or abated. Amnesty program participants who pay the required outstanding delinquent tax will also be immune from criminal prosecution and any

civil action with respect to that tax.

Creation of the new program is welcome news, said Keith Kerns, ODA director of legal and legislative services. "It will provide dentists and other consumers with one additional option to become compliant with state's use tax," said Kerns. "It's also another sign that the state is getting serious about enforcement of the sales and use tax," he cautioned.

The program is set to begin on October 1, 2011, and will conclude on May 1, 2013. The department must also establish a payment plan which can be utilized by consumers participating in the program. The payment plan may extend up to seven years in length. If a consumer fails to remit the unpaid use tax or fails to comply with the terms of the payment plan, the consumer is liable for interest on the amount of use tax owed.

Any consumer against which the

department has issued an assessment before the creation of the program is not eligible to participate. Additionally, the department is not authorized to waive any interest or penalties due on use tax paid by a consumer who registered with the department for the use tax on or before June 1, 2011.

Kerns encouraged dentists to work with their tax professionals on the use tax issue. "Dentists are wise to consider a proactive approach if they determine that a deficiency in the use tax exists," he said. "There are serious consequences for failure to pay use tax, including significant interest assessments and penalties. This new amnesty program is certainly worth exploring."

For more information on the use tax and the new amnesty program, please contact the ODA legal department at (800) 282-1526 or visit the Ohio Department of Taxation website: <http://www.tax.ohio.gov>.



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David J. Owsiany, JD  
ODA Executive Director

## Court finds statute of repose unconstitutional

Recently, the Ohio Twelfth District Court of Appeals in Warren County ruled that an important aspect of the medical malpractice reforms passed into law in 2002 is unconstitutional. The provision of the Ohio Revised Code at issue, bars the commencement of malpractice actions on medical, dental and other health care claims if the claim is based on actions that are more than four-years old. This action is just one more chapter in an on-going battle to enact meaningful time limits on liability for health care providers.

### Case Background

The case involved an individual who died of liver disease and whose estate sued a physician that treated the deceased more than a decade earlier. The deceased's estate claimed the physician failed to properly assess, evaluate, and respond to abnormal laboratory results. The lawsuit was filed in 2009. The physician treated the individual from 1995 to 1998. The physician moved for summary judgement citing the Ohio Revised Code provision, often referred to as a "statute of repose," that places a four-year time limit on the commencement of such lawsuits.

The Warren County Court of Common Pleas denied the motion for summary judgement and found that the statute of repose was unconstitutional as it applied to the deceased patient. The physician immediately appealed and, in April of

2011, the Court of Appeals affirmed the judgment of the trial court, also finding the statute of repose to be unconstitutional.

### Analysis

For years, Ohio law has provided for a so-called "statute of limitations" on certain malpractice actions. For example, the Ohio Revised Code provides that a malpractice action based on a medical or dental claim "shall be commenced within one year after the cause of action accrued." The courts, however, have interpreted the "statute of limitations" to mean that a plaintiff has one year after he or she "discovers" or should have discovered the injury to file a lawsuit. The so-called "discovery" rule has severely limited the application of the statute of limitations to malpractice claims because a plaintiff nearly always argues that he or she "discovered" the injury within a year of commencing the lawsuit, regardless of how long ago the treatment sued upon was actually provided.

The fact that there was no effective time limit on a health care provider's exposure to liability created significant difficulties in the administration of justice and immense burdens on health care providers. Often times, when several years pass between the treatment and the lawsuit, key witnesses, such as former employees, are no longer available to testify in defense of the health care provider or memories have faded. Moreover, without a time limit, health care providers are burdened with maintaining and retaining old patient records merely because a lawsuit could be brought related to treatment that was rendered several years earlier.

To remedy the situation, in 1996 the ODA partnered with the Ohio State Medical Association and others to successfully

advocate for passage of a broad tort reform bill that was subsequently signed into law by then-Governor George Voinovich. The statute sought to place caps on damages in personal injury and malpractice lawsuits, an effective time limit on the commencement of malpractice actions against dentists and other health care providers and other restrictions on frivolous litigation.

In 1999, a liberal activist majority on the Ohio Supreme Court invalidated the tort reform law. The court effectively made itself a super-legislature by striking down the tort reform statute because a majority of the justices disagreed with the General Assembly's policy decision to restore balance to a civil liability system that had created a lottery mentality for certain plaintiffs and personal injury attorneys.

Undeterred, the General Assembly again took up malpractice reform in 2002, including proposing to place caps on damages and a new four-year statute of repose on medical and dental claims. While the malpractice legislation was pending before the legislature, plaintiffs' lawyers lobbied against the bill, especially the statute of repose. At the time, I wrote an article for the Buckeye Institute for Public Policy Solutions that was published in the [Cincinnati Business Courier](#) explaining the following:

"Under the current system, there is no effective time limitation for commencement of malpractice suits. Because there is no time limit for bringing lawsuits, health care practitioners are faced with the costly burden of retaining old records even if they are unnecessary for patient care. For example, upon retirement, dentists who have practiced for thirty years are routinely advised by their [malpractice] insurers to

indefinitely retain and maintain all their patient records, including charts, x-rays and models, in order to defend against a lawsuit from a patient they haven't treated for years or even decades."

The ODA worked with a broad coalition of other health care provider groups in order to secure passage of the new law, which included a four-year statute of repose for medical and dental claims.

The recent court decisions to declare this new statute of repose unconstitutional potentially returns Ohio to a situation where health care providers have no effective time limit for being hauled into court regardless of how long ago the treatment was provided. Moreover, the Twelfth District Court of Appeals' decision harkens back to the 1990s when certain Ohio judges – including a majority of Ohio Supreme Court justices – regularly substituted their own policy preferences for that of the General Assembly under the guise of constitutional interpretation. In reality, as most of you will recall from your high school civics class, the appropriate role of the judiciary is to apply the laws passed by the legislature in a neutral manner consistent with the Constitution, not to act as a super-legislature.

Fortunately, in recent years, Ohio voters have elected new justices to the Ohio Supreme Court who understand that their appropriate role under the Ohio Constitution is to apply the law as neutral arbiters, respecting the lawmaking function of the General Assembly. Accordingly, I sincerely hope that this case is appealed to the Ohio Supreme Court where the justices can determine the constitutionality of the medical and dental malpractice statute of repose once and for all.

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## Legal Briefs

Keith Kerns, Esq. ODA Director of Legal & Legislative Services

# Office manuals help avoid employment problems

A well-defined office manual can be of great benefit to a dental practice. Employment issues are some of the most difficult matters to confront as a small-business owner. Oftentimes, the best way for employer dentists to avoid the common problems that arise with employees is to establish an office employee manual.

Establishing an employee manual provides the practice owner with the opportunity to clearly communicate the duties and expectations for all employees and establish how an employee will be compensated, evaluated and disciplined if the need arises.

Office manuals can cover a variety of topics but should primarily be devoted to outlining the expectations for employees and the benefits those employees are eligible to receive for complying with those expectations. Clearly addressing these issues in a manual help prevent future disagreements, misunderstandings

and challenges on a variety of issues. An artfully drafted manual can also serve as a basis to terminate a problem worker.

Benefits, such as vacation leave, continuing education leave and reimbursement, life insurance, medical coverage, sick days and medical and maternity leave can all be included in the manual. As a general rule, these policies are left to the discretion of the employer.

Many dentists believe that the Family and Medical Leave Act (FMLA) dictates their business' leave policy. However, the FMLA only applies to those businesses with fifty or more employees. Ohio law also provides little guidance on leave practices. However, it does require all businesses to offer a sufficient amount of maternity leave but does not define what amount of time is necessary to meet this standard.

Dentists are advised to consult with an attorney or human resource professional when establishing leave policies. Additionally, it is important that once established all benefits policies are applied evenly across employment categories (i.e. full-time/part-time and exempt/non-exempt.)

In addition to outlining benefits, office manuals are also effective mediums to utilize when establishing job descriptions

and work hours for each employee, including employee dentists, hygienists, EFDAs, assistants, office managers and receptionists. For jobs requiring a credential, such as a license or certification, those credentials should also be included in the job description. Finally, employers may want to consider including the phrase, "and other duties as assigned by the owner dentist" in each job description to address any changes in responsibilities that may evolve over time.

The manual can also be used to address general workplace standards. Dental offices may consider adopting policies on such issues as employee conduct and personal appearance, smoking, patient confidentiality, financial practices, acceptance of gifts, office security, telephone and electronic communication.

Dental offices should consider implementing a policy on substance abuse as part of the manual. This policy is important for several reasons, most important being to maintain a sober and attentive staff that works with the public.

Maintaining such a policy also provides an added benefit for employers should they find themselves defending a workers' compensation claim. Under Ohio law, a worker injured on the job while under the influence has the burden of proving that their impairment did not cause their injury if the employer simply has a substance abuse policy in place. Similarly, maintaining a written policy which prohibits office place harassment can serve as an affirmative defense to a law suit based on harassment. Sample policy statements on these issues can be found on the ODA's website, [www.oda.org](http://www.oda.org).

Every office manual should include a statement that the office is an equal opportunity employer and an employment-at-will statement. Ohio is an employment-at-will state, which means that an employer can hire or fire someone for any reason or no reason as long as they are not doing so in a discriminatory manner. Employees should be made aware of this fact.

Once established, office manuals should be distributed to all current employees and each new employee that enters the practice so expectations and policies are communicated at the outset of employment. Each employee should acknowledge receipt of the office manual in writing and the employer dentist should maintain that written documentation as part of the employee's record. Additionally, dentists should periodically review the manual to ensure it meets the practice's needs and incorporates all current office policies.

The American Dental Association has compiled a sample employee office manual that a dental office can utilize when developing its own. To order the ADA's sample manual, call (800) 621-8099. It is also important to always consult with private legal counsel before implementing or altering an employee manual.

Legal Briefs is intended to offer information and general guidance but should not be construed as legal advice and cannot be substituted for the advice of the dentist's own legal counsel. Dentists should always seek the advice of their own attorneys regarding specific circumstances.

## Interested in advocating on dentistry's behalf? Want to make a difference in the practice of dentistry?

Make an appointment with your local legislator to discuss the issues facing your profession. The ODA department of governmental affairs offers information and tips on meeting with legislators.

Contact the ODA at (800) 282-1526 today to help voice dentistry's message at the Statehouse.



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## CDT at your fingertips with code check app

Need to find a CDT Code but don't have access to a book or a computer?

The ADA hopes to make coding easier and faster with the introduction of the new CDT Code Check app for the iOS (iPhone, iPad) and Android-powered mobile devices (phones and tablets).

The app is available for \$19.99 in the Apple iTunes Store and the Android Market.

The CDT Code Check, which contains every CDT code, is a portable resource for dentists and dental staff. The app includes new codes and revisions with marked changes, and assists dental professionals who use procedure codes for tasks in developing treatment plans, managing patient charting and submitting insurance claims.

There is a complete listing of each CDT Code, including category of service, subcategory, procedure code, nomenclature and descriptor. Users can also search by code number or key word.

To purchase the new app, visit the Apple iTunes store or Android Market and search CDT Code Check.

## Wastewater plants seek relief from Lake Erie mercury limits

Ohio wastewater treatment plants in the Lake Erie watershed basin are asking state regulators to let them have a variance from the mercury discharge limits.

Plants in Mentor and Madison in northeast Ohio are among more than 70 that have received regulatory approval for mercury discharges about the limits in their permits, and 19 others are seeking similar approval from the Environmental Protection Agency. The treatment plants had to submit plans for reducing levels of mercury and other pollutants.

In 1995's Great Lakes Initiative - a regional effort to reduce the amount of toxins, such as mercury, to restore the health of the Great Lakes - a limit was set to 1.3 parts per trillion of discharging mercury into the waters.

Until late last year, the plants were able to use areas known as mixing zones to blend pollutants into cleaner waters to reduce the concentration to acceptable levels, but they now must meet the limit at the point of discharge.

In order to achieve the 1.3 parts per trillion limit, cities would likely have to install extremely costly technology. The 1.3 parts per trillion is estimated to be equivalent to the size of a pencil eraser, inside Cleveland Browns Stadium filled with water.

To aid in the situation, roughly a year ago, the Ohio Dental Association and the Ohio Environmental Protection Agency (OEPA) teamed up to develop the Ohio Good DEED (Dedicated to Environmental Excellence in Dentistry) program.

The Good DEED program educates Ohio dentists on the required and recommended waste management practices and recognizes those who implement these environmentally friendly practices into their offices. It does so through an OEPA hosted and maintained web site and an ODA certificate of recognition that may be posted in the dentist's office.

To learn more about the Good DEED program, visit [www.oda.org](http://www.oda.org).

## State goes after dental company, Allcare in trouble

Ohio Attorney General Mike DeWine sued Allcare Dental & Dentures on June 17th, charging that the company violated Ohio consumer-protection laws when it abruptly closed its offices in January without providing dental products and services that patients had already paid for.

The action came after the attorney general's office received more than 940 complaints against Allcare, most involving failure to deliver, attorney general's spokesman Dan Tierney said. In their complaints, consumers disputed about \$2 million in payments to Allcare, he said.

Allcare, based in New York, closed offices in more than a dozen states back in January. The closings included 38 offices in Ohio.

The Pennsylvania attorney general sued Allcare in April, saying that the company violated the state's consumer-protection laws. Several lawsuits seeking class-action status have also been filed against the company.

Allcare canceled all scheduled appointments with no notice to consumers, most of whom claim to have paid for a year's worth of dental services in advance.

The company posted its final consumer correspondence on its website, [www.all-careinfo.com](http://www.all-careinfo.com), advising consumers to seek services at their own cost if they are in need of emergency dental care.

The site said that consumer records and any dental work in progress have been transferred to local dentists.

Consumers who have had dental work done at their own cost can still participate in the lawsuit.

The Ohio lawsuit, filed in Franklin County Common Pleas Court, seeks restitution for consumers and a \$25,000 fine for each violation of Ohio law.

*This article has been printed with permission from the Columbus Dispatch.*


## ODA Meeting & Event Calendar


- Aug.**
- 3 Dental Education and Licensure Committee
  - 5 Statewide Subcouncil on Peer Review
  - 15 Subcouncil on the New Dentist
  - 18 Deadline for 2nd mailing to ODA House of Delegates
  - 26 Council on Membership Services

- Sept.**
- 15-18 145th ODA Annual Session

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**ANNUAL SESSION, from page 1**

Fee: M - \$245; NMD - \$310; S/O - \$175  
Course Code T23

Support provided by Kerr Corp.

This workshop provides the opportunity to see, touch, and feel different materials and systems discussed in the morning lecture. In this session, attendees will be able to demonstrate: a selection of adhesive systems, including self etch products; microfill, hybrid and nanofilled composites; glass ionomers, resin modified glass ionomers and compomers as liners; luting agents and restoratives; bleaching; direct pulp capping with calcium hydroxide or adhesive agents; esthetic alternatives such as indirect composite, porcelain inlays/onlays/crowns and their clinical techniques.

Note: Course Code T15 is a prerequisite to take this hands-on workshop.

**Invisalign Clear Essentials I Workshop**

Friday, September, 16

8:00 a.m. to 5:00 p.m.

CDE Hours: 8

Fee: M - \$1695; NMD - \$1695

Course Code #F28

Support provided by Align Technology

This one day course is designed specifically for the general practitioner and team members that wish to incorporate the Invisalign® system into their practice. This case-based training provides participants with the clinical and operational confidence to successfully treat a range of highly predictable cases. In addition to providing your entire team with essential clinical, operational and marketing skills, the course presents a full range of support resources specifically designed to meet the needs of the non-orthodontic practice. Attendees of this course will understand the necessary steps of the Invisalign system including: case selection and treatment goal planning; case submission; treatment planning process; treatment initiation; case monitoring; finishing and retention; describing available support tools to assist with the Invisalign system; selecting more predictable cases for treatment based on relevant clinical experience; and gaining the necessary knowledge to integrate the Invisalign system into their practice immediately. Dentists who register for Course #F28 can bring up to four (4) auxiliary staff members for no additional course fee. Simply register auxiliary staff to attend Course #F29.

**Invisalign Clear Essentials II**

Friday, September, 16

8:00 a.m. to 5:00 p.m.

CDE Hours: 8

Fee: M - \$350; NMD - \$350

Course Code F30

Support provided by Align Technology

A lecture for GPs who currently offer Invisalign in their practice. Advanced topics and techniques using Invisalign® are discussed to help doctors effectively select and treat more complex malocclusions. Participants must have experience submitting and finishing Invisalign® cases prior to attending Certification II. Attendees must be Invisalign trained. Doctors are encouraged to bring cases to Certification II – the instructor will select some cases to discuss during part of the course and be available for Q&A after

the course. Topics presented include: how to identify and treat cases with Invisalign; advanced Invisalign diagnosis and treatment planning; advanced Invisalign techniques including buttons, elastics, pliers and IPR; tips & techniques from experienced Invisalign® providers; and how to use the full range of clinical support mechanisms.

**Creating Smiles with Esthetic Porcelain Restorations**

Lisa Powell, DDS

Friday, September, 16

9:00 a.m. to 5:00 p.m.

CDE Hours: 6

Fee: M - \$320 NMD - \$385; S/O - \$220

Course Code F32

Support Provided by Kerr Corp.

Limited Attendance

This interactive all day course will provide many pearls of wisdom to take back and use in your practice. From treatment planning, patient communication, lab communication, diagnostic wax-ups, esthetic preparation designs, retraction, impression techniques to provisionals and bonding /cementation, there are many ways to streamline procedures and still provide the care we want for our patients. Attendees will learn: solving complex esthetic challenges; smile design; restoration choices for any situation; proper case preparation; how to eliminate sensitivity; soft tissue management; easy temporization; and the proper cementation products for different restorations.

**Lasers: A Hands-On Workshop**

John Cranham, DDS

Friday, September, 16

9:00 a.m. to 12:00 p.m.

CDE Hours: 3

Fee: M - \$150; NMD - \$215; S/O - \$125

Course Code F41

Limited Attendance

Support provided by Biolase

Dr. Cranham will lead a workshop with the objectives to: distinguish the different types of lasers available; best determine what laser is needed for a particular dental procedure; demonstrate the correct laser settings (power and pulses) for a given set of dental procedures; identify the correct insurance codes for the particular procedures being performed; use each different laser in a hands-on demo; and to choose the appropriate patient education program and consent form for the patient.

**CPR Recertification\***

Heart Start of Central Ohio

Friday, September, 16

10:00 a.m. to 2:00 p.m.

CDE Hours: 4

Fee: M - \$90; NMD - \$155; S/O - \$71

Course Code F42

Renew your existing 2-year certification for CPR following the American Heart Association Guidelines for healthcare professionals – you must submit your current American Heart Association healthcare provider card to attend the class. Learn how to recognize and respond to life-threatening emergencies such as cardiac arrest, respiratory arrest, and foreign-body airway obstruction. Recognize heart attack and stroke in adults and breathing



difficulty in children and learn skills of CPR for victims of all ages (including ventilation with barrier devices and bag-mask devices) as well as demonstrate the use of an automated external defibrillator (AED). Fees collected for this class do not necessarily represent revenue for the American Heart Association.

\*Please submit your current AHA healthcare provider card when you attend this renewal course. If you do not have a current AHA healthcare provider card, see Course Code S64.

Note: This course fulfills the Ohio State Dental Board's CPR requirement for hygienists. For licensure, hygienists must have proof of CPR certification.

**New Dimensions in Endodontics Workshop**

Alex Fluery, DDS

Friday, September, 16

2:00 p.m. to 5:00 p.m.

CDE Hours: 3

Fee: M - \$245; NMD - \$310; S/O - \$175

Course Code F45

Support provided by Brasseler USA

The hands-on session will provide participants the opportunity to use "Real World Endo" techniques and to witness first-hand how they will change the way they practice endodontics. The hands-on session will be conducted using either accessed teeth (the preferred method) or blocks. In addition to instrumentation techniques, a demonstration will be done showing how to perform "synchronized hydraulic condensation." Time will also be dedicated to "Preventing the Separation of Rotary Files" and the use of piezo electric ultrasonics will be available at all times. During the hands-on session, participants will learn: how to properly use the EndoSequence file; the correct way to use an ultrasonic, in the pursuit of hidden canals; the ease of use associated with synchronized hydraulic condensation; how to create synchronicity between instrumentation and obturation; the multiple benefits of bioceramic technology in endodontics. Attendees are encouraged to bring two to four accessed, extracted teeth. Note: Course Code F38 is a prerequisite to take this hands-on workshop.

**Direct Composites – Workshop**

Michael Miyasaki, DDS

Friday, September, 16

2:00 p.m. to 5:00 p.m.

CDE Hours: 3

Fee: M - \$245; NMD - \$310; S/O - \$175

Course Code F47

Support provided by Discus Dental

Enamel etch? Total etch? Self-etching adhesive agent? Which do you choose? These questions and many others will be answered in this hands-on opportunity in placement of direct composite restorations for the anterior and posterior areas of the mouth. Comprehensive dentistry includes providing your patients the best options in direct composite restorations. Material

utilization in a hands-on environment will allow the clinician to increase their skills with technique sensitive composite restorations.

Note: Course Code F39 is a prerequisite to take this hands-on workshop.

**CPR Accreditation\***

Heart Start of Central Ohio

Saturday, September, 17

10:00 a.m. to 5:00 p.m.

CDE Hours: 6

Fee: M - \$155; NMD - \$220; S/O - \$99

Course Code S59

Receive your 2-year certification for CPR following the American Heart Association Guidelines for healthcare professionals. Learn how to recognize and respond to life-threatening emergencies such as cardiac arrest, respiratory arrest, and foreign-body airway obstruction. Recognize heart attack and stroke in adults and breathing difficulty in children and learn skills of CPR for victims of all ages (including ventilation with barrier devices and bag-mask devices) as well as demonstrate the use of an automated external defibrillator (AED). Time listed includes a one-hour lunch break. Fees collected for this class do not necessarily represent revenue for the American Heart Association.

\*If you need to renew your existing AHA 2-year healthcare provider certification see Course Code F42.

Note: This course fulfills the Ohio State Dental Board's CPR requirement for hygienists. For licensure, hygienists must have proof of CPR certification.

**Predictable Implant Esthetics – Foundations for Success Hands-on Workshop**

Pareesh Shah, DMD, MS

Saturday, September, 17

2:00 p.m. to 5:00 p.m.

CDE Hours: 3

Fee: M - \$245; NMD - \$310; S/O - \$175

Course Code S62

Support Provided by Dentsply Caulk, Dentsply Tulsa and Dentsply Prosthetics. This hands-on workshop will allow participants to learn how to plan and implement successful implant esthetics. Proper impressioning techniques, lab communication, abutment selection and prosthetic design will be reviewed. Participants will have an opportunity to work with various implant prosthetic components including abutments, impression copings and soft tissue models. Learn predictable impressioning techniques, create soft tissue indexes and develop emergence profiles with provisionals and proper abutment selection for esthetic success. Learn techniques that will be easy to implement Monday morning.

Note: Attendance at Course Code S58 is required to attend this hands-on workshop.

**MITS Early Registration**

When registering early for MITS please click "Secure Provider Portal" link in order for registration to be complete! Visit [http://jfs.ohio.gov/mits/PRR\\_9\\_11\\_MITS\\_Portal\\_Validation.pdf](http://jfs.ohio.gov/mits/PRR_9_11_MITS_Portal_Validation.pdf) for more information.

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## Dental Insurance Corner

### Lack of aveoloplasty coverage, new payment method raise concerns for many dentists

**Christopher A. Moore, MA**  
**ODA Director of Dental Services**  
**New payment method**

The Ohio Dental Association has received a number of calls from ODA member dentists concerning a new means of payment that has been sent to them by an Ohio third party administrator (TPA). Instead of a check or electronic funds transfer, the dentist receives what the TPA describes as a "virtual stored value card" to pay for those dental services the dentist has submitted a claim.

Dentists must pay a service fee in order to use the card just as they would if a patient used a credit card to make a payment. The fee the dentist must pay to use this card however, is five percent. Dentists have reported that they were unaware of the five percent rate prior to using the card. None of the dentists who have contacted the ODA are in contracting arrangements with the TPA nor have any of them requested to be paid in this manner.

In a March 2, 2011 letter, Dr. Steven R. Moore, chairman, ODA Council on Dental Care Programs and Dental Practice, wrote the TPA requesting information on how dentists could receive payment in an alternative format, e.g., by check. The TPA has not responded to the ODA's letter to date.

The ODA has received reports from numerous sources however, that dentists may request to not receive pay-

ment by means of the card by simply informing the TPA as such. The TPA issues checks to those dentists who have opted out of the card payment program. The reports are not clear though as to whether the dentist may opt out of the card payment method unilaterally or if the dentist must request to do so on an employer by employer basis.

#### Alveoloplasty coverage

The ODA is working to address a directive that a national dental plan organization has provided to its member companies concerning the coverage of alveoplasties (D7310 or D7311) in a quadrant where multiple surgical extractions have been performed.

In looking into dentists' complaints involving alveoloplasty claim denials, the ODA has learned: 1) the national dental plan organization does not permit its member companies to cover alveoplasties in conjunction with extractions performed by the same dentist in the same surgical area on the same date of service unless otherwise specified in a client contract and 2) if a dentist who contracts with one of the member insurance companies performs an alveoloplasty, the claim will be disallowed and the dentist will be contractually prohibited from billing the patient for any portion of the service.

The ODA has requested the national dental plan organization reconsider its national position on this issue. Doing so

would provide more latitude to its member companies in the coverage of an alveoloplasty in a quadrant where multiple extractions have been performed.

The D7140 and D7210 procedure codes do account for the minor smoothing of socket bone. The ODA is concerned, however, with cases that involve more significant amounts of the dentist's time in order to properly care for the patient. For example, multiple adjacent extractions or surgical removals resulting in sharp and irregular areas of alveolar bone which would be unlikely to heal spontaneously. In many cases, a dentist may determine that performance of the alveoloplasty at the time of the extractions is warranted based on the needs of the patient.

At the state level, it appears that the member insurance company that operates in Ohio will cover alveoplasties in certain situations if the dentist provides the carrier with additional information, e.g., insertion of an immediate prosthesis, preparation for radiation therapy, etc. This is similar to other Ohio-based

insurance companies that also cover alveoplasties in certain situations, e.g., multiple extractions that leave the ridge jagged.

Unfortunately, it appears, with the carrier in question, that a dentist must first obtain a denial before the company will provide benefits upon the dentist's submission of additional information on appeal. It is hoped that a change in the national dental plan organization's directive to its member companies will alleviate the unnecessary burden and cost of appealing the initial claim denial.

"The ODA's Dental Insurance Working Group is working with members of the insurance industry to address what we believe is an unfair and unjust policy," stated Moore. "In the meantime, dentists should realize that in spite of the national policy of one major dental plan organization, state level carriers may still provide their policy holders with some coverage of alveoplasties if the dentist provides them with documentation demonstrating the need for this procedure."

*Editor's note: Dental Insurance Corner is intended to offer information and general guidance but should not be construed as legal advice and cannot be substituted for the advice of the dentist's own legal counsel. Dentists should always seek the advice of their own attorneys regarding specific circumstances. ODA members who would like to submit a dental insurance related question, problem or concern may do so by sending the appropriate information to the ODA Dental Insurance Working Group, 1370 Dublin Road, Columbus, OH 43215, or 614-486-0381 FAX, or chrism@oda.org.*

### Hygienists will find many CE options during the 145th ODA Annual Session

#### ODA Staff

With the Ohio State Dental Board's (OSDB) CE biennium deadline approaching\*, dental hygienists need to look no further than the ODA Annual Session, September 15 – 18, 2011, to find quality courses designed especially for them.

#### Dental Hygiene Track

The innovative ODA Hygiene Track makes taking quality CE even easier. Different speakers come into the same room, so attendees can comfortably stay in one classroom without worrying about getting to different presentations on time. The featured presentations are not repeated on any day so there is no concern with doubling-up on CE. After attending each Track, attendees will receive an itemized CE slip to document each separate presentation.

Each day's Hygiene Track will be moderated by Dr. John L. Mayo. Dr. Mayo received his bachelor's degree in biology from Wittenberg University. He is a graduate of The Ohio State University College of Dentistry and completed a General Practice Residency at St. Elizabeth Medical Center in Youngstown, Ohio. Dr. Mayo is a long-time faculty member in the Dr. Madeleine Haggerty Dental Hygiene Program at Youngstown State University.

The Track is offered on Thursday (Course Code T12), Friday (Course Code F33) and Saturday (Course Code S55) during Annual Session.

#### Oral Health Access Supervision Program (OHASP)

Last year, the Ohio General Assembly created the Oral Health Access Supervision Program (OHASP) designed to help increase access to a dental home for underserved populations. The OHASP allows dentists to send hygienists into certain designated locations like nursing homes, clinics, and certain public schools under a new level of hygiene supervision. Both the supervising dentist and dental hygienist must apply for a permit from the Ohio State Dental Board (OSDB) in order

to participate in the OHASP. To qualify for participation in the program, a hygienist must complete a course that meets OSDB criteria pertaining to the practice of dental hygiene under the oral health access supervision of a dentist. The ODA Annual Session course code #Y66 meets those criteria. In order to aid in ensuring dental hygienists and dentists have easy access to the course, the ODA is offering its course free to ADA member dentists and staff registered for Annual Session.

#### Preventative Products Roundtable Luncheons

Offered on Thursday and Friday during course lunch breaks, representatives from the leading preventative products companies will participate in this interactive

session where attendees will be seated at tables for lunch and company representatives will travel the room spending time at each table describing their newest materials and answering dental hygienists' questions. The following companies will be represented: Crest Oral B; Colgate; Darrow Dental; Dentsply Professional; Discus Dental; Premier Dental Products; Pulpdent; and Sunstar Americas. The code for Thursday's program is T20 and Friday's program is F43. Both programs offer 2 hours of CDE credit.

#### Dental Hygiene Speakers

In addition to the courses listed above, the ODA Annual Session features renowned hygiene lecturers including: Karen Davis, RDH, BSDH, RDHMP; Kristie

Menage Bernie, RDH, BS, RYT; and, Anne Nugent Guignon, RDH, MPH

#### Additional Courses

As always, the ODA Annual Session offers critical courses such as CPR Certification, Medical Emergencies in the Dental Office, and Monitoring Nitrous Oxide Sedation.

Complete course descriptions and registration information can be found on the ODA's website, [www.oda.org](http://www.oda.org).

\*To qualify for licensure renewal by the Ohio State Dental Board, dental hygienists must have 24 hours of required continuing dental education credit by the end of the current biennium, ending December 31, 2011. The prior criteria was 12 hours of CDE credit.

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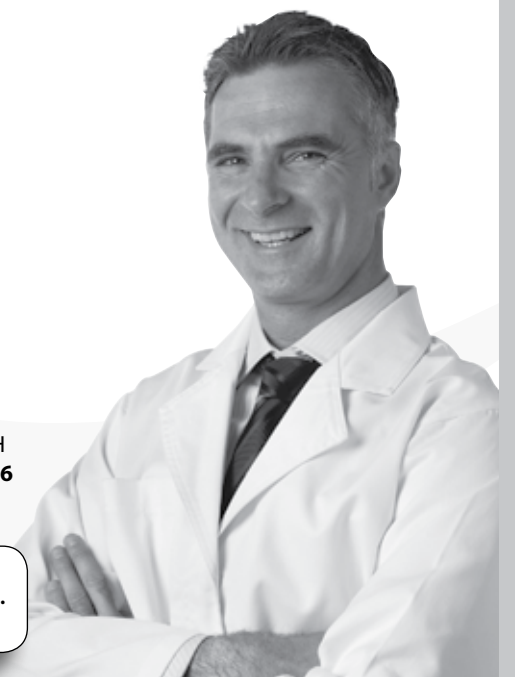
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**NPT is pleased to announce we just transitioned the practices of Dr. Mark Hodson of Centerville, OH and Dr. Michael Cornett of Springboro, OH. Congratulations to these individuals.**



## In-office education: one critical component of dental practice marketing

### Danielle Walton, Co-Founder, Adept Marketing

"How do we attract and keep more patients?"

It is a legitimate question we often hear from dental clients as they seek to grow their practices. While there are various ways to answer this question – including marketing, advertising, PR and online marketing strategies – perhaps the most overlooked aspect of growth is marketing to existing patients through in-office education.

Consider this scenario:

A long-time patient visits her dentist for a routine, semi-annual cleaning. When she sits in the chair, the dentist realizes that the loyal patient has invested in a full cosmetic dentistry makeover estimated at \$20,000 to \$30,000. When the dentist asks "when did you do this?" and "why didn't you consider our practice?" she responds, "It never occurred to me that you did this sort of thing."

This is a true story and a dentist's worst nightmare. However, with some thoughtful and strategic approaches about in-office

education, these types of situations can be avoided while patient retention and practice growth makes measured progress.

### Rethinking in-office education

Gone are the days when generic brochures, a few memorable sayings and a poster in the waiting area would suffice as in-office education. Today's busy patients are taking in their smartphone content instead of static messages posted around the office. Rethinking in-office education requires dental practices to leverage the tools that "speak" to patients and present information in a way that actually encourages engagement. Here are a few considerations worth employing:

**Remain relevant.** Marketing is an investment of time and money, but also an investment in the future. If the goal is to grow the practice, it also must be to remain relevant – with today's "dental consumer" who consumes services that are cosmetic in nature, and alongside the dental practice that is competing for the same patient. Relevance extends

from the services offered to the full patient experience. While a practice's personality needs to be part of the equation, each practice also must define its target audience and understand what's truly relevant to them. If a practice caters to senior citizens, then easy to read, on-screen material and larger print brochures should be a factor. If audiences are younger and more tech savvy, consideration should be given to integrating QR codes into printed materials and replacing magazines with iPads that are programmed with default presentations of dental services.

**Customization matters.** Whether it's a video loop on a flat screen, a slide presentation on the iPad, or a brochure that patients can take with them, customizing in-office marketing is critical to further establishing credibility and setting expectations. If it is something the dental practice does, it shouldn't be marketed with generic content from a third-party source. Unique perspectives and approaches taken by the practice to common procedures and cosmetic

considerations are what differentiate one practice from another.

**It's always about transferring knowledge.** Nobody likes to be sold and patients are no different. By providing patients with information – affording them to weigh the pros against any drawbacks – they can make an educated decision on what is best for them before making an investment. An effective in-office marketing strategy takes this into consideration. By providing patients with the knowledge they need, they become equipped to make decisions that favor the expert source providing information.

**Embrace their full attention.** A patient's full attention can be best leveraged in the dental chair, both with and without the dental staff present. Providing highly visual, easy-to-absorb information, such as before and after images of procedures on a flat screen, can better speak to patients when they're more focused on their oral health. It is also an opportunity to personally connect. While acknowledging that time in the chair means full patient attention, it is also a time to show patients that they have the dental team's full attention as well.

### Commitment to patient engagement

Without patient engagement, efforts to attract new patients won't reap their full results. Great dental service alone is not the measuring stick of patient loyalty, which is why a strategic effort to fully satisfy and retain existing patients is necessary. From the initial impressions in the front office to how hygienists and dentists engage with patients – each interaction leaves a memorable impression. It can impact any strategically executed in-office education – for better or worse.

### Acknowledge the bigger marketing picture

In-office education is just one piece of a comprehensive marketing strategy. Considering some patients are in the office for just two hours a year, it is critical to stay in front of patients in strategic ways outside the office, including email marketing and other outreach initiatives, keeping them informed of evolving capabilities and relevant news regarding oral health and the practice in general.

When dental practices view in-office education as a critical element of their broader marketing effort, consistency ensues, retention occurs and the opportunity for growth becomes even greater.

*Danielle Walton is co-founder of Adept Marketing, a central Ohio-based Internet Marketing firm that specializes in delivering performance-driven metrics for small to mid-size businesses. In addition to working with promising start-ups, Adept has developed a practice with dental expertise and serves multiple dental clients across the country. Connect with Danielle at [dwalton@marketingadept.com](mailto:dwalton@marketingadept.com) or visit [www.marketingadept.com](http://www.marketingadept.com).*

### Change of address?

Contact the ODA Membership Department if you have moved your home or practice, changed your phone number, changed your name or changed your email address.

Via email: [membership@oda.org](mailto:membership@oda.org)

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## Access to Care Award: Stowe Mission of Central Ohio Dental Clinic



Dr. Danny Stowe, Chief of Staff/Clinic Administrator/Dentist at Stowe Mission of Central Ohio Dental Clinic.

Over time, more than 50 churches in the Metro Baptist Association became interested in getting involved, as well as, other dentists, hygienists and dental assistants. We were seeing patients in a 4-chair clinic," Stowe said.

Stowe continued his mission and "in 2005, the Stowe Baptist Center Dental Clinic became a primary referral source for most area hospitals, emergency room doctors and social services. These referrals increased our patients exponentially," he said. "With the help of a lot of dedicated volunteers and generous donors, we were able to purchase a new, bigger building at 888 South Parsons Avenue. We are now seeing patients in an 8-chair clinic with an updated clinical environment."

The clinic attracts the homeless, indigent and the poorest of the poor. There are no geographic restrictions and people come from as far away as Lancaster, Marysville, Zanesville and Cincinnati and all points in between.

Dr. William Meyers, Chair of the Columbus Dental Society Honors and Awards Committee said "the success of the clinic would not be possible without volunteers. There is a core group of nine dentists, OSU senior dental students, radiologists and lay persons who work each week. The donation value per patient is about \$400 which includes, x-rays, surgery, sutures, and take-home meds," he said. "The yearly treatment total is approximately \$260,000."

Since its opening – that's a donation of over 3 million dollars.

Stowe does not plan to slow down any time soon. "I would like to continue being involved in dentistry as long as I can still be useful," he said. "I enjoy private practice and enjoy mentoring my associate doctors. I want to still be involved with the Stowe Mission of Central Ohio Dental Clinic because I see so much need. The Dental Clinic fills a necessary role in allowing members of our profession the opportunity to give back," he continued. "The Stowe Mission Clinic also gives me opportunities to work with students from The Ohio State University through The Ohio Project. I place a high priority in continuing my overseas medical mission trips especially in Africa where I've worked for the last 6 years, most recently Uganda and Kenya."



photo courtesy of the Stowe Mission of Central Ohio Dental Clinic  
Dr. Danny Stowe and other Stowe Mission of Central Ohio Dental Clinic dentists volunteer their time and efforts toward patients in Central Ohio.

In addition to his personal volunteer efforts, Stowe believes younger dentists should also participate in volunteerism as members of one of the most unique professions in the world.

"Our services are needed by people everywhere. There are so many people these days that are left out or have fallen through the cracks and are not receiving any dental care due to an ineffective healthcare system and economy," Stowe said. "Volunteerism is the action professionally needed to again fulfill the law of Paying Forward. The ODA provides to us many benefits such as protection, advice, opportunity, fellowship and a political voice. Organized dentistry gives us power to make a difference."

For Stowe, it's simply helping others that puts purpose and meaning to his life.

Pastor Michael Brooks, President and CEO of Stowe Mission of Central Ohio agrees. "This is an awesome ministry because the healing takes place immediately and you can see the joy on people's faces as they leave," he said.

With all his knowledge gained while working for the Stowe Mission of Central Ohio, Stowe cannot choose a most memorable experience or important lesson learned. "Dentistry for me has been not an end unto itself. Dentistry has been a means to an end to share the gospel and to see the world," he said. "Dentistry and

the needs of people are immense and you can literally see the planet, culture, and health needs of people around the world. My experiences have been too great to number. After 70 - plus trips abroad, the general needs of people are the same regardless of location."

A 1977 graduate of the Ohio State University College of Dentistry, Stowe has been in private practice for over 30 years. He returned to OSU as a part-time clinical instructor from 1979-1986.

Stowe has been married to wife Michelle for 39 years and has three children, Abigail, Nathan, and Emma. The Stowe family welcomed their first grandchild, Claire a little over one year ago with another granddaughter due in September.

In his spare time, Stowe enjoys golf, deer and bird hunting, as well as following The Ohio State Buckeyes athletics and attending church at the Dublin Baptist Church. He has been an adult Bible study teacher for 25 years.

"I have had a great ride so far," he said. "God has blessed me in immeasurable ways, and I'm excited to see what he has in store for me next."

Congratulations to Dr. Danny Stowe and the Stowe Mission of Central Ohio Dental Clinic!


**Want updates on the latest dental news in Ohio?**

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## Achievement Award Winner: Dr. Edward Stuart Sterling



For over 40 years, Dr. Edward Sterling has been a passionate and enthusiastic advocate of the dental profession. On Friday, Sept. 16, Sterling will receive the Ohio Dental Association Achievement Award for his dedication to the dental profession at this year's Callahan Celebration of Excellence, held in conjunction with the 145th ODA Annual Session in Columbus, Ohio.

Sterling retired in December 2010 as Director of Dental Services at the Nisonger Center, having devoted close to 40 years to caring for people with special needs. His program at Nisonger Center is the longest standing program of its kind in the United States, and for those years, every student trained at the Ohio State University College of Dentistry was exposed to people with special needs – a feat unmatched anywhere else in dental education.

On becoming involved with the Nisonger Center, Sterling explains how he found his passion.

"While I was completing my pediatric training in Portland, OR one of my rotations was through a program similar to The Nisonger Center at OSU. It was an interdisciplinary program in which I had the opportunity to work and interact directly on a daily basis with pediatricians, speech pathologists, nurses, psychologists, social workers, audiologists, occupational therapists, physical therapists, etc," he said. "I had a host of "teachers," all of whom had a range of skills and body of knowledge that could be helpful to me in the provision of dental care for children. The fact that it focused on children with disabilities was secondary. The excitement for me was the broadening of my scope of knowledge and skills."

When Sterling completed his pediatric training in 1967, he wanted to continue the relationship he discovered in Oregon.

"I intended to practice and look for a part time teaching opportunity after I completed my military obligation. When I came to Ohio in 1971, I still had practice and teaching in mind; however, I discovered that I had things reversed," he said. "I became the full time director of the dental program at Nisonger Center and practiced part time to help maintain a dose of reality in my teaching activities."

Sterling's novel relationship with the Franklin County Board of MRDD that supports Nisonger is considered a "best practice" by the Association of State and Territorial Dental Directors (ASTDD) as a sustainable, comprehensive source of care for persons with disabilities. He has been honored by the Franklin County Board of MRDD for his service and dedication.

Even so, on receiving the Achievement Award from the ODA, Sterling said he feels humbled by it.

"To be recognized by colleagues is like being voted to an all star team by the other players," he said. "It is a great honor, especially since it is coming from fellow dentists."

Sterling became interested in the dental profession through a series of events and the process of elimination. "As a child I spent a lot of time in the dental office as a patient. I can't remember it ever being a negative experience," he said. "In college, I knew that I wanted to be a professional. I had considered pharmacy and psychology but they fell by the wayside. I liked what I saw in dentistry, helping people, the science and art; and the idea of 'being my own boss.' Those things appealed to me."

Sterling graduated from the University of Illinois at Navy Pier, Chicago in 1961 and went on to become an alumnus of the University of Illinois, College of Dentistry in 1965. In 1967, he was awarded a Certificate for Pediatric Dentistry from the University of Oregon Dental School.

Later in his career he did not stop looking for opportunities to help those with disabilities. Dr. Sterling, started, from scratch, the Johnstown Dental Center, a 2-chair clinic that provides dental care to preschool and kindergarten children with special needs in a school-centered health commons concept along with other health services. This clinic is also one of the largest providers of dental care to Latino preschoolers in central Ohio.

In all of these endeavors, Sterling single handedly found and maintained support from a variety of sources. Clever grant-writing highlighting innovation and program expansion allowed him to obtain funding in very competitive grant programs. Dr. Paul Casamassimo, a reviewer for one of the grant applications from the American Academy of Pediatric Dentistry's Foundation, Healthy Smiles, Healthy Children, said "I can tell you that in one competition, involving over 60 applications, his proposal ranked first and was subsequently funded."

After many successful years dedicating his time and energy to the dental profession, Sterling still has more goals for the future.

"I would like to become more involved with Special Olympics. I am the State Coordinator for the State Summer Games and that has been a lot of fun. The participation of dental and dental hygiene students, residents and dental health professionals from all over Ohio has been very gratifying and at the same time, we are collecting important data that can help improve dental care for people with disabilities," he said.

"I would like to be more involved with the Humanitarian Foundation of The Grottoes of North America. I have been their dental consultant for

many years. The Grottoes is a Mason affiliated organization with a particular interest in dental services for children with disabilities. They provide a linkage and are a potential financial resource for dental care for children who fall through cracks in the system," he said. "Because The Grottoes have maintained a low profile, its availability as a resource is not as well known as it should be. It can be an invaluable asset. I will be working with The Grottoes to increase visibility."

Sterling places much emphasis on the importance of organized dentistry. "Ultimately, I believe the greatest benefit of organized dentistry is the voice it provides for us," he said. "Without it, we would have little to no input or impact into the world in which we practice and teach."

"Dentistry is essentially a 'cottage industry' without a central gathering or focal point. Medicine has hospital affiliation as a major focal point. Dentists, therefore, would have no significant voice without organized dentistry. The local dental societies, state associations and national organizations like the ADA and the specialty associations are THE "voice" for us as individual dentists. Though we may not always agree with the position taken, it is our best chance to be heard and to have an impact on state and national policy and practice," he said.

"In addition, organized dentistry helps us as individuals to keep abreast of changes in the rules of practice, the explosion of dental materials, research, use of social media and the changing face of practice with the recognition of concepts like evidence based care. Organized dentistry is our best link to the past, present and future of our profession," he said.

In his leisure time, Sterling says he enjoys playing handball at the local YMCA and in tournaments. He enjoys theater and concerts and volunteers for Six String Concerts, an organization that brings in singer/songwriters from Ohio. Sterling also considers himself a serious fan of the Columbus Blue Jackets, except when they are playing the Red Wings. With travel as one of his passions, Sterling and his wife Dora recently took a Mediterranean cruise and plan to go to China soon.

Despite his many accomplishments, Sterling takes his greatest pride in his family. Sterling and his wife have been raising their two grandsons for the past 14 years who are the children of their adopted daughter. His son Brad, is a business consultant in retail and lives in Oregon and has blessed Sterling with a grandson Griffen. Sterling's daughter Cara, lives in the Boston area, and has two sons Nicholas and Jeffrey. Sterling's five grandsons range in age from 7 to 19 years old and he plans to spend more time with them in the future due to his recent retirement. Congratulations to Dr. Edward Sterling!

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## Congratulations to the 2011 ODA Awards of Excellence recipients!

Access to Dental Care Program Award: Stowe Mission of Central Ohio  
Dental Clinic

Achievement Award: Dr. Edward Sterling

Distinguished Dentist Award: Dr. Billie Sue Kyger

Marvin Fisk Humanitarian Award: Dr. Byron Henry

N. Wayne Hiatt Rising Star Award: Dr. Benjamin Lamielle

## Distinguished Dentist Award: Dr. Billie Sue Kyger



For well over 20 years of service to the dental profession and dental education, Dr. Billie Sue Kyger, DDS, will receive the 2011 Ohio Dental Association Distinguished Dentist Award, the highest honor bestowed by the Association.

The award will be presented on Friday, Sept. 16, at this year's Callahan Celebration of Excellence, held in conjunction with the 145th ODA Annual Session in Columbus, Ohio.

"Dr. Kyger has served as a mentor and example to me and all young members in our society," wrote Hans Guter, President of Rehwinkel Dental Society in his nomination letter. "She has demonstrated that you can serve your profession, run a successful practice, be a leader in your community and most importantly have a wonderful family."

On receiving the 2011 ODA Distinguished Dentist Award, Kyger said it is very gratifying.

"I am extremely grateful and proud to be the recipient of this prestigious award," she said. "The greatest honor that one can receive is to be recognized

by your peers 'at home'. I have been truly blessed to have both exceptional mentors and friends throughout my professional career."

Kyger first became involved in dentistry through the American Student Dental Association.

"I knew that dentistry was not just going to be my job, but a lifelong passion," she said. "During that year [at the American Student Dental Association], ASDA passed a resolution in the ADA to give dental students the first seats as members of the House of Delegates. That significant accomplishment was just the beginning of an incredible journey in organized dentistry that has been such a special part of my life."

Kyger went on to become the national Vice President of the American Student Dental Association from 1982-83.

Kyger received her BS from The Ohio State University in June of 1979 for studying Pharmacy. After receiving her DDS in 1983 also from OSU, Kyger began her career in dentistry in Gallipolis, Ohio, where she has practiced for 27 years.

Her work in the field of dentistry is far from over. When asked what her goals for the future are, Kyger explains her passion.

"I have a very strong commitment to both organized dentistry and to dental education. I hope to remain active in the ADA and ODA and become more involved in dental education," she said. "Constant learning is the heart of a good professional while commitment to organized dentistry is the energy of the future."

Kyger has been actively involved in

organized dentistry for almost three decades. She says becoming involved in organized dentistry was one of the best professional decisions she made as a young dentist.

"A young practitioner has a wonderful opportunity to network with other dentists and be a part of the constant transformation of their profession," she said. "I can honestly say that I have gained so much from my experiences and cannot imagine my career without my involvement in organized dentistry."

Organized dentistry has not only impacted Kyger's professional career but her personal life as well.

"Without a doubt, the greatest benefit of organized dentistry for me has been the incredible friendships that I have made," she said. "There is a real strength to the relationships that are built through working hard together to achieve a common professional goal. Over time, these friendships continue to grow and become permanent parts of your extended family."

Dentistry has provided many memorable experiences for Kyger over the years, however some stand out more than others.

"The privilege of serving as both the president of the Ohio Dental Association and the Ohio State Dental Board has been a very special part of my dental leadership experience," she said. "While the two entities have many similarities and many differences, the common goal of improving oral health care for our patients remains the top priority for both the ODA and the Board. There were challenges and celebrations with both organizations, but 'at the end of the day', the experience was priceless!"

Kyger also notes what she believes to be the most important thing she has learned through dentistry.

"While hard work, commitment to excellence, and solid business practices are essential keys for success, it is the way you treat and care for your patients that is the most important," she said.

Nationally, she has served on

numerous councils, committees and boards including the American Dental Association; Council on Dental Practice, Joint Commission on National Dental Examinations, Council on Dental Therapeutics, Council on Scientific Affairs, and has also been a consultant to the Council on Scientific Affairs since 1997.

Other memberships include the Rehwinkel Dental Society, the Pierre-Fauchard Academy, OSU College of Dentistry Alumni Association (Life Member), the American Academy of Cosmetic Dentistry, the International College of Dentists and many others.

At the state level, Kyger has held a number of positions within the Ohio Dental Association including delegate, District II Co-Coordinator, Vice-President, President Elect, and finally President of the ODA from 2002-2003.

Kyger has also contributed to professional dental journals such as the *Journal of Dental Education* with a piece in the February 1984 issue.

Kyger has received numerous honors and awards, including the ODA's Rising Star Award in 1991 as well as becoming a fellow in the International College of Dentists and the American College of Dentists.

Outside dentistry, Kyger enjoys traveling, boating, skiing and special time with friends. She also says she is truly blessed to have a great family.

Kyger is married to ODA member dentist Dr. Timothy Kyger and together they have two children, Timothy Fritz and Lauren Elizabeth. Timothy has been on the school board for over 18 years and is very active in their church. Their son Timothy graduated from James Madison University in Virginia with a BS in health sciences and continues the family legacy in dentistry. He recently began dental school at the University of Louisville College of Dentistry. Lauren is a senior at James Madison University and is also a health science major.

Congratulations to Dr. Billie Sue Kyger!



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## Callahan Memorial Award: Dr. Dushanka Kleinman



Dushanka Kleinman, Associate Dean for Research and Academic Affairs and Professor at The University of Maryland School of Public Health has been actively involved in dentistry for over 38 years.

On Friday, Sept. 16, Dr. Kleinman will receive the international Callahan Memorial Award, one of dentistry's most prestigious annual awards, at this year's Callahan Celebration of Excellence, held in conjunction with the 145th ODA Annual Session in Columbus, Ohio.

The Callahan Memorial Award Commission was established in 1920 by the Ohio Dental Association to honor the work of John Ross Callahan, one of Ohio's noted dental researchers and a leader in organized dentistry.

On receiving this award, Kleinman said it is an extreme honor.

"I am humbled to be recognized in the company of awardees who came before me," she said. "Dr. Callahan was a pioneer in research and education and it is an honor to become a part of his legacy."

Kleinman's career has taken a diverse path thus far with experience in many different facets of dentistry.

Kleinman is a dentist and a board certified specialist in dental public health. Her research has included epidemiologic studies of dental, oral and craniofacial diseases, oral cancer and HIV-related conditions. She has participated in the development of several Surgeon General reports and was the co-executive editor of *Oral Health in America: A Report of the Surgeon General* (2000). Kleinman has a particular interest in enhancing the understanding and elimination of health disparities, with a focus on the role of factors that transcend health conditions such as health determinants, health promotion interventions and health

literacy.

While her career path has continued to be ever-changing and challenging in many ways, her goals for the future remain consistent.

"Currently I am at the School of Public Health at the University of Maryland, College Park and my goal is contribute to the awareness and importance of oral health among public health practitioners," she said. "In addition, I am committed to supporting the integration of oral health into overall health. This comes at a time when health is viewed as an integral part of a functioning society. We need our health, including our oral health, to contribute to the economy, to care for our families and communities, and to enjoy quality of life and wellness."

Kleinman received her BA from the University of Wisconsin, in Madison, in 1969. After receiving her DDS in 1973 from the University of Illinois at Chicago, Kleinman continued her dental education earning an MSD in dental public health from the Henry M. Goldman School of Dental Medicine, Boston University, in Boston, MA.

Continuing her passion for the education system, Kleinman has delivered commencement addresses to various schools across the country including the University of Illinois at Chicago College of Dentistry, University of Pennsylvania School of Dental Medicine and the University of Michigan School of Dentistry.

When asked what she would say to young dentists about the importance of organized dentistry, Kleinman said "organized dentistry offers the opportunity for collegiality, peer support, life-long learning and leadership development. These are attributes that exist during pre-doctoral and residency training and are needed throughout one's career. Being involved in and taking an active part in organized dentistry allows dentists to establish and continue their professional growth in the context of a larger community of practitioners."

Kleinman said the greatest benefit of organized dentistry is bringing people together.

"I find the greatest benefit of organized dentistry is the convening of the

profession to explore and discuss issues and policies related to the profession and how the profession can best meet the needs of the public," she said. "Convening, finding common ground and then acting allows for positive and forward movement of the profession as a whole."

Kleinman has also been in commissioned corps service for the United States Public Health Service (USPHS). She began in 1978 as a Lieutenant for the USPHS and later ended her service to the USPHS as a Rear Admiral and Assistant Surgeon General in 2006.

Kleinman has also served on numerous councils, committees and boards including; University of Maryland (UMD) Graduate School Council for Associate Deans of Graduate Education; UMD Provost Committee on Review of University Libraries; Board of Scientific Counselors, Coordinating Center for Health Promotion, Centers for Disease and Control and Prevention, and UMD Research Development Council.

Kleinman has received numerous honors and awards, including the Top 25 Women Dentists award – Dental Products Report; ADA Distinguished

Service Award; Shils Award Recipient; AADR Jack Hein Public Service Award; USPHS Surgeon General's Medallion, Distinguished Service Medal and Exemplary Service Medal for serving as the Chief Dental Officer; Greater New York Dental Meeting Irving E. Gruber Award and Pierre Fauchard Academy Gold Medal Award.

Kleinman also serves several national professional dental journals, acting as a member of the editorial board for the *Journal of the American Dental Association*, the *Journal of Public Health Dentistry* and *Community Dentistry and Oral Epidemiology*.

Outside of dentistry, Kleinman enjoys family time, a range of outdoor sports and time with friends. Kleinman and her husband of 37 years, Joel Kleinman, have two daughters Alexa and Jessica. Kleinman's husband is a neuroscientist, a psychiatrist and neurologist. Alexa and Jessica have also pursued health related careers. Kleinman and her husband are grandparents to Zoe Danielle who turned two years old in the month July.

Congratulations to Dr. Dushanka Kleinman!

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## Callahan Celebration of Excellence

Join the celebration to honor 2011 ODA President Dr. Thomas Matanzo and 2011 Callahan Memorial Award Recipient Dr. Dushanka Kleinman at the Callahan Celebration of Excellence. The night starts off with an open bar reception at 6:30 p.m., and the event includes the presentation of the Callahan Memorial Award and the ODA Awards of Excellence. Register online at [www.oda.org](http://www.oda.org).

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*Held in conjunction with the 2011 ODA Annual Session*

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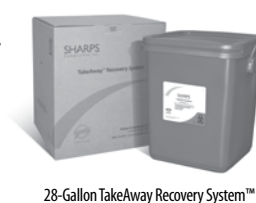
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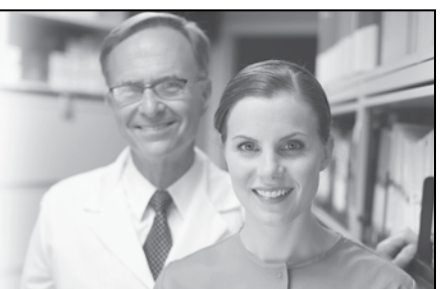
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## The Explorer

Matthew J. Messina, DDS  
Executive Editor

### Intention vs. Outcome

As a country, we are facing any number of monumental decisions regarding how we are to proceed as a people into the future. It seems that today, everything is seen through the prism of politics. A well-ordered system of government should encourage values beyond politics. Ethics, character, and responsibility would have merit, and the weight of political power would give way to discussions of the right thing to do. Even though that doesn't seem to be the reality of today, I would like to try to apply reason to our dental corner of the world. Just for fun, let's leave the politics out for a few minutes and look at the issue of access to care.

I have written at length about the fact that I believe that the dental profession is being incorrectly blamed for the issue of lack of access to dental care. It also is unfair to expect that the dental profession can solve a problem that is not of our creation. As I have argued before, if the access issue is so severe, then we cannot wait years to implement systems to train new personnel, and that is not necessary anyway. We have at our disposal the types of highly trained individuals to work as a dental team to resolve the issue.

As a profession, we have proposed that a sufficient number of dentists will provide dental care when the reimbursement rate for public assisted dental care is sufficient to meet the basic overhead of the dental practice. Dentists are a caring profession, but we cannot lose money providing care and continue in business.

Also, it is relatively simple to reduce the administrative burden on a dental practice providing care, as the suffocating bureaucracy is listed by dentists as a major barrier to participation. It does

not appear that we do not have enough dentists in practice to meet the demand for care. There is a mal-distribution of those dentists, with easily identifiable areas of the country with a shortage of dentists. Existing programs for loan forgiveness or other financial incentives to encourage dentists to locate into these under-served areas have shown the ability to work well, and could be expanded.

In spite of the demonstrated ability to resolve the core issues of the access problem by working within the existing structure, certain groups in the public health community seem enamored with creating new classes of dental care providers. The Dental Health Aide Therapist (DHAT) was started in New Zealand and has been imported into Alaska.

There are efforts in place to continue expanding the DHAT model across the US. In October 2010, the W.K. Kellogg foundation released a study by RTI International that "found that dental therapists practicing in Alaska provide safe, competent and appropriate dental care. The two-year, intensive evaluation is the first independent evaluation of its scale to assess care provided by dental therapists practicing in the United States. It confirms what numerous prior studies of dental therapists practicing in other countries have already shown: that dental therapists provide safe care for underserved populations." The study looked at two years of dental care in native Alaskan village populations. The Pew Report Card also gives New Zealand an 'A' rating because they have extensive public health programs and have created the dental therapist (DHAT) mid-level provider. The intentions of these groups are admirable, but what really are the outcomes?

The New Zealand Herald News, in a March 2, 2011 piece by Abby Gillies, reports that "the dental health of young children continues to be among the worst in the developed world, figures reveal." A Ministry of Health report has found that 44% of five-year-olds have at least one decayed, missing or filled tooth. In 2000, 48% of five-year-olds had cavities, and the figure has never dropped below

43% since then. In the US, 28% of 5 year-old children had one or more decayed, missing or filled teeth in 2004. The figure for 5 year-olds in England was 39% and 43% for Australia.

In New Zealand, "free dental care is available for children up to age 18. Most public primary schools have a dental clinic and many regions operate mobile clinics." Despite campaigns to improve access and enrolment, "a number of factors led to poor oral hygiene", the Ministry of Health said. "Many parents didn't see oral health as a priority and only took their children to the dentist in an emergency," said a New Zealand Dental Association spokesperson.

As a scientific profession, dentistry owes it to the public to look beyond the good intentions of proposed programs, and to see if they really work. We know that our efforts over the long haul have elevated the level of dental care in the United States to among the highest in the world. Our commitment to prevention has been the hallmark of the American dental profession, and it works!

Martin Luther King put it this way: "Cowardice asks the question – Is it safe? Vanity asks the question – Is it popular? Expediency asks the question – Is it political? But conscience asks the question – Is it right?"

We know what is right. The dental profession represents the best chance that people have for excellent oral health for a lifetime. The question is: "Do we have the courage to stand up and fight for it? (for the good of our patients and the public at large) Even if it isn't safe, or popular, or politically expedient?"

*Dr. Messina may be reached at [docmessina@cox.net](mailto:docmessina@cox.net).*

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## Between the Lines

Ken Jones, DDS, JD  
Guest Columnist

### God Speaks

"You talkin' to me?" Robert DeNiro in Taxi Driver in 1976.

Did'ja ever have one of those days? Every so often, we all do, and a while back, it was once again my turn. What's that you say? My days should always be great? I, one of the privileged of the world, should have nothing to complain about, you say? Well, just come along and listen as God talks to me.

First, realize that the aftermath of cancer is tough on everyone in your life. I can only manage to work four to five hours each day no matter how much there is to do. My abbreviated staff has to deal with that, and we know that every treatment minute counts. I've truly been looking forward to a return to full strength and a full schedule.

So the sense of dread started one Friday with the announcement that the amalgamator in my favorite operatory went "Snap" and died. Later that day, the credit card machine headed for the great terminal in the sky.

Now, we all know that when the phone rings at six-thirty on a Monday morning, someone died, someone's pregnant, or it's the cops telling you there's a problem.

For me, it was the latter, reporting a break-in by someone looking for drugs. By the time we rescheduled everyone and cleaned up the mess, I decided that God was telling me something. When the air conditioning froze up and quit the next day, I was sure of it.

So, I decided to listen for a change, and, to make a long story short, I sold my building and I sold my general dental practice. Last week I sent a letter to all of my patients, telling them of my decision, though not of God's messages.

This week, though, I almost changed my mind. No, it wasn't the hassle of cleaning out thirty-nine years of dental "stuff" from every nook, cranny and drawer. It wasn't packing up all those records and moving them to the office of the young man who's taking over for me. It wasn't even the unhooked plumbing and electrical, nor the donated equipment that suddenly left a hole in my life.

It was the people. I've got a friend who just left practice, too, and we both decided that it's always the people. They're really all that counts, both in your practice and in your life. And I'll miss the people.

Everyone I work with and work for seems to understand that it's time for my wife and me to start a new phase in our lives. The woman who heads the crown and bridge department at my favorite lab

invited my wife and me down to visit. The tellers at my bank bought me a box of chocolates. It's the people.

I'll have a lot of thank you cards to send out to everyone who got in touch when they heard the news. One brought me a gift certificate for her favorite restaurant. Another, who was caring for a sick parent out of town, sent her husband in to tell me she didn't think she'd find another dentist as understanding and as cantankerous to take care of her. (And talk about the Pot calling the Kettle....) A bunch of patients just dropped by to see if it was really true. They all offered a handshake or a hug and a word of encouragement. One of those had been with me since 1973.

My favorite, though, was the woman who lit candles in church for me every day of the two months I was in the hospital last year. She actually cried when I presented her with a couple of fresh cut roses that grow just outside my operatory window. She wasn't the only one who cried. Sometimes, I did, too. It's the people, you know?

So, as I tried to decide whether it was the peoples' messages or my own feelings of impending doom, impending freedom and continued happiness that had the greatest attraction, God (like the Verizon guy) kept saying, "Can you hear me now?"

Yeah, Lord, I'm listening. I'm going. But I'll still miss the people.  
*Dr. Jones may be reached at [jonesddsjd@aol.com](mailto:jonesddsjd@aol.com).*

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Dentist Associate. General practice, Xenia. P/T with opportunity for full time. Established, low stress practice. Salary based on production. Contact northxen@gmail.com.

Dentist associate opportunity, full or part time. Generous compensation for the right candidate. Future partnership/ownership possible. Residential suite adjacent to office is available. Practice located east of Cincinnati. Call Mr. Sullivan at (937) 430-4317.

Dentist, Bay Village, OH. Dental associate opportunity, part time. Great position for a dentist interested in working in a well-managed environment. If you like to do endo, extractions, and implants, we have a terrific opportunity for you. Please fax resume to 216-393-0100 or email Joyce at imagrammy04@yahoo.com.

Dentist, Cincinnati, OH. Incredible opportunity available in one of the best practices in the area. Cerec, Lasers, Intraoral cameras, etc. Implant and endodontics experience required. Please contact Brian at (513) 325-4009.

Dentist, Columbus, OH. Incredible opportunity available in one of the finest dental practices in the Midwest. Beautiful state of the art facility with terrific staff committed to keeping up with constant growth of fee for service dentistry. Cerec, Biolase, computers, lasers etc. Excellent interpersonal and clinical skills required. E-mail Deb at deb@fixaridental.com or call (614) 866-7445.

Dentist jobs: Aspen Dental offers tremendous earning potential and a practice support model that empowers dentists. We eliminate obstacles for dentists to own their own practice. Call (866) 451-8816. www.aspendentaljobs.com. EOE

Dentist wanted, Parma Heights, full or part time. Established 34 year old, 2 doctor private practice. Newly renovated, experience preferred, no evenings, employment leading to full partnership. For interview call (440) 884-5450.

Dentist opportunity, North Central Ohio. Full time associate position. Great opportunity to be busy immediately. Future partnership/ownership possible. New equipment and newly decorated building. Call (419) 350-1386.

Geriatric dentistry. Full-time/part-time general dentists needed for nursing home and homebound patients, throughout the state of Ohio. All transportation, equipment, supplies, auxiliary and administrative staff provided. Daily minimum rate \$500+production+benefits. Join our team providing care for over 20 years. Please fax resume to (440) 888-8763.

Looking for an associate dentist Southwest of Cleveland. Modern office and a great staff make this a great place to work! New grads welcome. Please email resume to frontdesk@wellingtondentists.com. You may also call (440) 668-7668 for more details.

Part-time dental associate (2-3 days/week) wanted for Kenton Ohio dental office. Dentist must have excellent communication skills and be comfortable performing extractions, root canals, dentures and partials. Work with experienced, motivated staff and possibility of partnership or buy-out in future. Please email resume to tamcoa@hotmail.com.

Oral surgeon needed. Reynoldsburg office, part time. Sedation and implant ability a must. (614) 866-2656.

Seeking general practice dentists. We are seeking general dentist associateship for two-doctor, two-office comprehensive general practice in southern suburb of Dayton, Ohio. Applicant must have dynamic personality and exceptional chairside manners. GPR, AGD, preferable but new graduates are encouraged to apply. Scope of practice entails comprehensive general dentistry with an emphasis on IV sedation associated with patient care. Excellent base salary and benefits available. Please contact Eric Callejo, DDS at (937) 294-0776 (office), (937) 344-1671 (cell), or send curriculum vitae via fax to (937) 298-7663 or email to eccallejodds@swohio.twcbc.com.

Well established, rural, high-volume 30 year old practice in Lodi, OH is looking for an associate dentist. Opportunity for partnership or ownership. Please call and ask for Teresa (330) 948-1655 for more information.

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## Equipment for Sale

Our office purchased new intraoral wall (\$1500), Mobile (\$1500) X-rays, Handheld X-ray (\$3695), Chairs and units packages (\$3695), Implant Motors (\$1995) and more. Need to downsize. Everything Brand New, still in box w/ Warranty. 561-703-1961 NYCFREED@aol.com.r.

The Panoramic PC1000 unit from Pan Corp can be used with a Scan X digital phosphorus plate or panoramic radiographic film for traditional "wet" development. Excellent condition, asking \$4000. Contact Mariska or Jessica at (937) 429-3160.

## Practice for Sale

Dental office for sale: \$1,000,000 plus gross revenue. Beautiful 6 operator general dentistry office in Cleveland east side suburbs. Fabulous cash flow, plenty of active and new patients and still room to grow. Call for more information @ (216) 212-6048.

Dental office & practice for sale. Fantastically profitable small town practice. Fee for service only. \$400K+ /yr working 3 1/2 days/week. Very low overhead. Work less, keep more! Great potential. Contact dr.dan3@roadrunner.com.

Dental office, practice, and building for sale. Dentist retiring after 35 years. In county seat 35 miles north of Columbus. Large potential for growth. Located on town square. Has large waiting room, 2-3 operatories, lab, x-ray room. Respond to: retiringdds@hotmail.com.

Medina, Ohio dental office for sale.

\$1.5mil gross, 9 ops, 3 hyg. Excellent opportunity. Call Dr. Don Moorhead/Henry Schein Practice Transitions for info. (330) 659-9739 or CP (440) 823-8037.

NPTN. Practices currently for sale in Columbus, Cincinnati, West Union, Piqua, and Willoughby Hills. Low commissions to sellers - no fees to buyers. Free appraisal/legal drafts with practice listing. Buyer representation available. Call Jason Gamble (614) 648-8118 or visit www.nptnetwork.com.

Middleburg Heights, Ohio. Dental practice available for immediate purchase. Doctor relocating. 11 year old office with Panorex. Two fully equipped operatories in excellent condition. \$350,000 production in 3 1/2 days for five years. Low overhead. Ideal for motivated dentist. Great scope to grow. Call (440) 212-0757 or email dwsharma21@gmail.com.

Practices for sale statewide. Listings change monthly. Call Steve Jordan, Professional Management, (888) 543-5299 or visit www.PMAgroup.net.

Retiring dentist, fee-for-service, building available, large upside potential. E-mail inquiries to retiringdentist@gmail.com.

Due to health issues, the practice of John M. Lazor Jr. DDS, FADSA, located in North Canton is for sale. This includes the building, equipment, patients and GREAT staff. All treatment rooms have central oxygen and nitrous oxide systems. All treatment rooms are set up for surgery, implants, Sybron endodontic system and general dentistry. We have the most modern equipment available. Digital panorex connected to all computers with intraoral cameras, three flat screen monitors and computers in every room. Two complete implant systems with

accessories (Zimmer and Straumann), and two WH drills bought through Straumann. Please call (330) 499-2367 for more information, or call Dr. Lazor in the evening before 8:00pm at (330) 854-6933.

Massillon, OH. Great practice, 6 ops, beautiful décor; may consider associate with buy-in; professional condo parks. Call Doctors Network, (614) 306-8503.

## Position Wanted

Dentist with 10 years of diverse experience is looking for an associate position. (216) 338-6700.

## Space Available

For lease: 1200 square feet equipped with three operatories in the heart of Western Hills in Cincinnati. Office is in move-in condition. Great location for a specialist. Call O'Conner at (513) 922-4220.

For rent: established dental office in Worthington, OH for single practitioner. Located in full-service office building, fully plumbed, newly decorated and in excellent location. Available July 1, 2011. Telephone (614) 451-1437.

Modern dental office for sale or lease. 5 ops w/lab, 1670 s/f additional business tenant in place. Free standing brick building in Bay Village, OH, an affluent waterfront community. Contact Gary at (440) 835-0272 x20 or gary@realtyprosinc.com. Realty professionals.

Selling fully equipped dental office in total or by the unit. I am joining my wife's fully equipped dental office, leaving behind

my office space and equipment. All equipment and furnishings to be sold. An excellent opportunity for an inexpensive satellite office or low cost entry practice on Chagrin Boulevard in the Beachwood-Woodmere area. New office lease will need to be negotiated with landlord for 1300 sq. ft. office space (current office rent: \$11.20/sq. ft.). Detailed Benco appraisal of equipment available upon request. Please contact: Dr. Steve Atkins (216) 464-8758 or e-mail: Satkinsdds@aol.com.

Space available immediately in modern orthodontic office, rapidly growing Mason Ohio area. Open bay treatment area with 5 chairs, private consultation room with exam chair, and a private exam room for services including digital x-ray/Nomad. EagleSoft Dental System, computers, electric HS and other amenities. Ideal for pedo, endo or perio satellite. Send inquiries to cedar5236@gmail.com.

## Miscellaneous

Temporary Coverage. Professional temporary coverage during vacation, maternity, and personal leaves keeps your production 'open wide'. Short-notice OK. No obligation quotes. Absolute confidentiality. Trusted integrity, since 1996. To receive coverage, (800) 600-0963. Register as a provider at www.doctorsperdiem.com. Email: docs@doctorsperdiem.com.

ODA Classified can also be found online at <http://www.oda.org>.

## Obituaries

### Dr. Charles Krouse

ODA President in 1973

Local civic leader and retired dentist Dr. Charles Daniel Krouse, 90, Defiance, died on, May 31, 2011, at CHP Defiance Area In-Patient Hospice Center.

He was born May 21, 1921, in Defiance, the son of Charles E. and Alice Edna (Shock) Krouse. On Oct. 30, 1943, he married Mary Ann Wells, who died in 2010.

Born and raised in Defiance, he had achieved national recognition in dentistry and had been influential in the Defiance community through public service.

Dr. Krouse graduated from Defiance High School, attended Capital University on a basketball scholarship but returned to Defiance to play basketball and received his bachelor of arts degree from Defiance College. In 1949, he received his doctor of dental surgery from Ohio State University.

Hard work and dedication in the field of dentistry have resulted in many rewards and honors for Dr. Krouse. One of his biggest accomplishments was being elected first vice president of the American Dental Association, the first person in 40 years to be elected to a national office from Ohio.

In 1963, he was elected a fellow of the American College of Dentists, which is one of the most prestigious honors that a dentist can achieve. He was elected president of the Ohio Dental Association (ODA) and also president of the Maumee Valley Dental Society. He received the Association Achievement Award from the ODA in 1984, and in 1985 received the Distinguished Alumnus Award from

the Ohio State University, College of Dentistry.

Dr. Krouse started his dental career in 1949 when he opened his own practice in Defiance. He was called to military service in 1951, and completed his military duty in 1953 as a dental captain in the U.S. Air Force. Dr. Krouse retired in 1991 from the Defiance Dental Group after 42 years of dentistry.

Surviving are two daughters, Carol (Ted) Pohlmann of Defiance and Patricia (Jeff) Wolfrum, Defiance; and grandchildren, Kristin (Doug) Keber, Kelly (Jonathan) Wiechers, Kate (Mark) Bishop, Todd Pohlmann, Jonathan (Brittany) Wolfrum and Logan Wolfrum.

Preferred memorials are to First Presbyterian church, CHP Defiance Area In-Patient Hospice Center and Defiance College. Condolences may be left at www.HCSfuneralhome.com.

### Dr. William Taylor

William N. Taylor, 87, retired Dentist, of Norwalk, Ohio passed away peacefully early Wednesday morning, June 22, 2011 at The Cleveland Clinic after a brief illness. He recently had been a resident of the Ohio Veterans Home in Sandusky, Ohio. He was born April 18, 1924 in Findlay, Ohio to the late Zeller B. and Florence (Hutchinson) Taylor.

Bill graduated from Findlay High School in 1941 and The Ohio State University in 1953. He was a veteran of the U. S. Navy serving as an aviation electronics mate during W.W. II and a Navy dental officer from 1952 - 1956. He was a 50 plus year member of Mt. Vernon Lodge No. 64 F & AM, Chapter, Council and Commandry, was member of The Ohio State University Alumni Association, a former Republican

State Representative in the Ohio General Assembly, and a member of the Delta Sigma Delta Dental Fraternity.

He is survived by his son and daughter in law Patrick and Barbara Taylor of Leesburg, Florida, by his grandchildren, Dr. William P. (Laura) Taylor of Amherst, New Hampshire, Laura Ann ( Mark) Privette of Wake Forest, North Carolina, by five great grandchildren, Katie, Andrew, and Erin Taylor, and Caleb and Hannah Privette. He is also survived by his brother Dr. Rodney K. (Gloria) Taylor of Pensacola, Florida, by his sister in law Mid Taylor, and numerous nieces and nephews. He was preceded in death by his parents, by his wife Avryl I. Taylor, 2 brothers and 2 sisters.

In lieu of flowers the family suggests memorial contributions be made to the Ohio Veterans Home, or the charity of your choice. Online condolences may be made by going to [www.edwalkerfuneralhome.com](http://www.edwalkerfuneralhome.com).

### Dr. Rexford Hardin

ODA President in 1978

Rexford E. "Doc" Hardin, of Sarasota, died June 20, 2011. Rex was born in St. Mary's, Ohio. After graduating from St. Mary's Memorial High School he joined the Army Air Corps where he served as a Navigator Bombardier during World War II.

He attended Wittenburg University and went on to Case Western Reserve University where he received his degree in Dental Surgery (DDS). Rex then went back into the Air Force during the Korean War to serve as a dentist on the island of Okinawa. Following his discharge, he and his wife Elizabeth (Betty) moved to Toledo,

Ohio where he practiced dentistry for more than 35 years.

He was elected President of the Toledo Dental Society in 1969 and President of the Ohio Dental Association in 1977. He received numerous professional awards including the Pierre Fauchard Medal awarded for outstanding contribution to the art and science of dentistry. After a successful career in dentistry "Doc" founded IPI in 1985 where he remained CEO until the time of his death.

Though his professional accomplishments were many his true passion was community service. In 1962 he founded the American Cancer Society Golf Benefit and served as Golf Coordinator for the Ohio American Cancer Society Golf Program which raised more than \$15 million in the fight against cancer. He initiated the Lucas County Early Detection of Oral Cancer Program in 1964 which was the first program of its kind in the United States. He started the Men Against Prostate Cancer charity to raise money for Prostate Cancer research.

He received the Burt Silverman Memorial Award, St. George Medal and the Ernest N. Bach Award for his contribution to his community and his profession.

He is survived by his wife of 62 years Betty Hardin; children, Lisa Grabeman, Julie Lawson, Stephen; sons- in-law, Tom Grabeman, Brian Lawson; daughter-in-law, Joann; grandchildren, Kevin Rexford Grabeman, Leslie Grabeman, Jacob Rexford Hardin, Alec Hardin and Alyssa Hardin.

## Seventh District Trustee Election: Dr. Steve Simpson



Dickens once wrote, "It was the best of times; it was the worst of times." Internally, the ADA enjoys a renaissance of focused, member-driven initiatives and programs, facilitated by staff that recognize and appreciate the value of volunteer input. By contrast, external forces threaten the primacy of our role as the leader of the dental team. For leadership, challenges beget opportunities. In these circumstances, we can thrive and prosper, or we can wither and become irrelevant. By embracing our values, marshalling our strengths and coordinating our resources, we can

be a health care association responsive to both our member needs and the public interest. We are alone as the last truly independent health care providers. Pharmacy and Optometry have been engulfed by retail enterprise, while Medicine struggles in the grip of hospital associations and insurance oversight. To maintain our standing and stature, we must be prepared to defend our standards and anticipate future confrontations from our antagonists.

Our exceptional membership market share correlates to our effectiveness as advocates for the profession. Our well designed and deployed advocacy programs continue to attract, retain and engage members. Going forward, our leadership will be confronted with options to be decisive or timid, innovative or entrenched, proactive or reactive. Our staff is capable of supporting an aggressive agenda on behalf of the profession and our membership, but it is critical that the volunteer leadership adopt the same determined, disciplined and decisive approach. We have faced many challenges in the past from legislative, regulatory, and institutional (i.e. insurance)

initiatives. A new adversary has emerged, the special interest group, currently the Kellogg Foundation. With enormous resources and a diverse campaign strategy, this opponent necessitates a collaborative and coordinated program centered on our core values: preventative care, patient education and patient centric treatment. We must deliver this message to members, the public and policy makers. Historically, we have prevailed when we have made the greater public interest the foundation of our message. We must identify, develop and deploy specific programs to meet identifiable needs without compromising the quality of care.

Our success in Ohio on issues impacting our profession figures prominently in my perception of the role and responsibilities charged to our 7th District Trustee and the operational dynamics within the ADA. The Trustee, in collaboration with the Executive Director and senior staff, must recognize, evaluate and respond to challenges to our core professional values and principles, as determined by our ADA House of Delegates. We have an engaged House of Delegates, and

an ADA Council system that provides input from members with particular skills and interests. This collaborative, member-driven information stream supports the leadership in determining appropriate strategies to promote and evaluate programs and systems that ultimately determine the direction and future of our association. In my experience in the House and on an ADA Council, the system does not always function as intended. The ODA, however, has sustained a qualitative system of program development and evaluation for many years, and our success is a tribute to a consistent and disciplined approach to problem solving. I appreciate the metrics-driven agenda of our state association, and I would bring that same perspective and pragmatism to the ADA as your Trustee.

I appreciate this opportunity to share my perspective on the duties, responsibilities and obligations of the Trustee. The ADA is poised to become a more responsive, less bureaucratic and more cohesive organization. I would enjoy the challenge and the privilege of serving on your behalf.

## Question and Answer with Dr. Steve Simpson

**Q: The Kellogg Foundation has pledged to spend \$16 million dollars to promote the creation of dental health aide therapists over the next 3 years. They have targeted their efforts in 5 states, including Ohio. The Kellogg Foundation has chosen the Universal Health Care Action Network of Ohio to promote dental therapists in Ohio. As trustee, how would you address the issue of mid-level dental providers, such as dental health aide therapists?**

A: There are several components to our response to the Kellogg initiative. The campaign to create a DHAT in Ohio is not unique, and the message from organized dentistry should resonate nationally. We should be clear in communicating our long standing commitment to dental access issues. We recognize that this problem has no single, simple solution, and that success requires thoughtfully coordinated programs that utilize limited resources effectively and efficiently. The ODA has partnered successfully with state agencies and private enterprise to promote facilities and activities with sustained records of accomplishment that directly impact the dental health of the less fortunate. In addition, we must inform the public, the legislature, and our members of our initiatives to address access, and engage in discussions about how to extend and expand our successes. Adult Dental Medicaid services, the use of Expanded Function Dental Assistants, Donated Dental Service programs (both public and private), the Student Loan Repayment program and Give Kids a Smile Day services are all examples of creative, innovative ventures that significantly impact dental care and treatment, and extend services prudently and systematically. This is a positive message offering legitimate solutions to an acknowledged problem, as opposed to promotion of an unproven entity (the DHAT) that diverts resources, energy and attention from our objective: uniform, quality dental care for the citizens of Ohio, and the nation. This approach communicates our concern, understanding and commitment. It should establish a successful precedent, and provide a template for other states confronted with this challenge from the Kellogg Foundation.

**Q: What are the most important issues facing the dental profession and organized dentistry today and how would you work as trustee to address those issues?**

A: First, are those issues within the profession itself. We must acknowledge and respond to declining membership numbers and dues dollars, whether associated with population demographics or a failure to adequately engage our new members. We must connect more comprehensively, perhaps by expanding our media formats, so that we can recruit, retain and captivate our members, and so that their contribution becomes valued, sustained and appreciated. Furthermore, we must become more successful in cultivating and developing our future leaders, through mentoring initiatives and by providing all members opportunities for meaningful participation. Within our own dental team, we must maintain a united voice on issues impacting the profession, and avoid allowing any divisive elements of specialty or auxiliary groups to dilute or confuse our message.

Secondly, we will continue to face external challenges from a variety of entities. They will attempt to divide us and weaken our resolve on issues such as third party reimbursement, regulatory control, workforce utilization, product safety, and many others. We have a distinguished history of maintaining positions based

on science, research and the public interest, and we should not diverge from our commitment to our values. We advance dentistry as a profession based on sound, reliable and dependable solutions to clinical issues and challenges.

**Q: What makes you the best candidate for ADA Seventh District Trustee?**

A: Our ODA House of Delegates will determine who is most suitable for the 7th District Trustee position; I humbly suggest that they have two good candidates to select from. I consider my strongest assets to be my attitude, experience and perspective. I bring a positive, optimistic attitude to service in organized dentistry. That dynamic reflects on my approach to problems and challenges. I am proud of the efforts taken on behalf of the public by our profession. Our hard work on fluoridation and preventative care are high yielding and selfless. Holding the moral high ground makes advocacy on behalf of dentistry gratifying and worthwhile. I consider myself very fortunate to have had leadership opportunities in organized dentistry on the local, state and national levels.

As a member and consultant on the ADA Council on Dental Benefits, I have presented material on peer review and dispute resolution nationally, and I have found an altruistic commitment to high standards throughout our membership. My participation in cooperative, collaborative deliberation and decision making, whether on a component council or on an ADA reference committee, has developed my skills in unifying distinct and diverse perceptions into tangible consensus. Finally, my perspective of where we have been, where we are, and where I hope we will be, is a significant motive to my pursuit of the Trustee position. I believe that our future as an organization and as a profession flourishes on open and receptive communications, on values free from politics and personal agendas, and on sustaining realistic, sensible expectations. With the collective talent and strength of our membership, our potential is unlimited, our opportunities are intriguing and our outlook is inspiring.

## FRANK R. RECKER, DDS, JD

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Frank R. Recker has practiced general dentistry for 13 years and served as a member of the Ohio State Dental Board before entering the legal profession. Areas of practice include:

- Administrative Law before State Dental Boards
- Dental Malpractice Defense
- Practice-related Business Transactions

Dr. Recker also represents multiple national dental organizations and individual dentists in various matters, including First amendment litigation (i.e. advertising), judicial appeals of state board proceedings, civil rights actions against state agencies, and disputes with PPOs and DMSOs.

A sampling of various cases can be obtained online. Questions regarding representation can also be addressed to Dr. Recker via e-mail at recker@ddslaw.com.

www.ddslaw.com



## Seventh District Trustee Election: Dr. Joseph Crowley



We often hear “I wonder what I will be when I grow up”. Traditionally, we attach the conversation to young people trying to direct their future with the decisions and choices they make in their still inexperienced lives. Very early in my life, I set the lofty goal of becoming a dentist. I directed all of my early educational decisions toward this goal, and like others, through my desire and commitment, my goal was achieved.

Occasionally, my peers will joke

about what they want to be when they grow up. Although humorous, there has always been a touch of reality to the question. The “growing up” and “being something” is an ongoing journey we all take. When I became a dentist and launched my professional career, I thought I had reached my ultimate goal. It didn’t take long to realize that I would have to continue to change and “grow up”. Changes occurred with maturity, and I was becoming someone a bit different with each day. I realize that goal setting is not a one-time task. In order to contribute to my profession and maintain my core values, I would have to keep “growing up”. Changes in the way I practice dentistry continually occur. Planning makes the changes easier and more rewarding than the changes that occur “just because”. This realization has helped me choose the path of service in dentistry that has rewarded me tenfold.

Early in my career I felt a sense of belonging, camaraderie, and the tenets

of wisdom that I received when I gathered with my professional peers. The education that continues through my professional association is as valuable as the education I received in dental school. This realization helps me look at the global scope of dentistry and understand that the value of the professional organization I joined early in my career, is actually the backbone of my success.

I have always been a joiner, so it was natural for me to get involved in my local society. I was “growing” as a new member of my profession. I found that I enjoyed being active in the work of our local organization, and before long, I was involved and participating at a very high level. It became clear that “what I wanted to be when I grew up” was a leader in the dental profession. I became active at all levels of the tripartite and served as chairman of committees and participated in task forces.

I played many roles in our professional organizations including president of the

Cincinnati Dental Society, president of the Ohio Dental Association, and I continue to serve on multiple committees at the State and National level.

I have enjoyed every moment of my participation (moments that at times were either tense or humorous, or a little bit of both). I found joy in being able to work with member dentists who share my passion in keeping our profession valued and respected. At every level, I have felt privileged to work with the outstanding staff members of each organization who help make our work possible and our successes numerous.

So I come back to the ever present thought of “what do I want to be when I grow up.” It begins with a twinkle in my eye as I can’t wait to see what each new day brings. I would love to continue my work for dentistry as the Seventh District Trustee. That is the leadership role that I feel qualified to challenge, and I would be honored if ODA members would have me represent them at the ADA.

### Question and Answer with Dr. Joseph Crowley

**Q: The Kellogg Foundation has pledged to spend \$16 million dollars to promote the creation of dental health aide therapists over the next 3 years. They have targeted their efforts in 5 states, including Ohio. The Kellogg Foundation has chosen the Universal Health Care Action Network of Ohio to promote dental therapists in Ohio. As trustee, how would you address the issue of mid-level dental providers, such as dental health aide therapists?**

A. I had a very active role as a member of the ODA Executive team and the ADA Council on Governmental Affairs as our profession defined auxiliary use and the mid-level provider role in the delivery of oral health care in America. I believe we, as a profession, have the ability to enhance, not compromise, our proven system of oral health care delivery. The dentist is ultimately responsible for all patient care. Diagnosis and treatment solutions require the level of education that only the dentist receives. No other alternative program reaches the level of education necessary to ensure complete oral care for the patient. Increasing the efficiency of delivery of care by enhancing the workforce duties and properly training personnel through new innovative educational programs makes sense. The ODA has been a leading advocate in this endeavor. Supervision by a dentist is imperative and the quality of care is defined by the education of the dentist and the trained dental team that works with the dentist. I do not sway from this core value of our profession. The Kellogg Foundation and other like-minded organizations have no real proof that their idea of changing provider models will insure the quality of care that the dental profession has delivered in America to this date. It seems that other countries that utilize the midlevel provider model have not solved the access and quality issues in their populations. Reaching out to the individual who chooses not to seek or cannot attain care does not mean the level of care given to that individual should be compromised. Numerous studies prove that there are barriers to the delivery of care in our communities. The ADA and the ODA have been very proactive in addressing these studies and the solution is not a new provider. Our profession must work with state regulatory bodies and other organizations that hope to see increased utilization of dental care. We must utilize expanded educational programs that safely increase duties and use of dental auxiliary (e.g., the CDHC model) to gain access to the population that does not receive care. The profession also needs to help educate the population in general, including those who choose not to seek care, and help all understand the value and benefits that good oral health care has in their total health.

**Q: What are the most important issues facing the dental profession and organized dentistry today and how would you work as trustee to address those issues?**

A: The ADA tripartite organization exists to help its member dentists attain the best possible education, information, and infrastructure to deliver first class health care to dental patients. The membership role and its continued growth is definitely an issue that needs ongoing attention. Developing and maintaining programs that will attract and benefit dentists of all demographics will be vital to our organization’s continued role as the “go to” source of oral health care information. Workforce issues will be an issue of national attention. The ADA’s work to keep and maintain the dentist as the leader of the dental team, and the advocate for all our patient care, will require ongoing attention in both national and state activities concerning workforce and delivery of care. Legislative issues, both national and state by state, will always be a high priority. Proactive legislative activities that protect the practice of dentistry and keep the delivery system safe and innovative will be a necessary day to day activity for organized dentistry. The ADA’s role in health care reform discussions is a very high priority on the current agenda. Quality measures that will be used to judge our dentistry and its effectiveness must be developed with the dentist (ADA) playing the major role in its formation. Also, how dentistry is treated as a small business in America will be determined as this “reform” moves forward. Our voice must continue to be heard in this bureaucratic activity at the national and state level. I would hope to be deeply involved in the advocacy for the profession and I believe the ADA forum offers the best way to influence all decisions that affect our practice today and in the future.

**Q: What makes you the best candidate for ADA Seventh District Trustee?**

A: Throughout my years of involvement in organized dentistry, I have become more and more understanding of the issues that face our profession and I know how important it is to have a seat at the table as issues arise. I have assumed many leadership roles in the tripartite of the ADA and this involvement has given me the opportunity to help determine the direction we, as an organization, are headed. I feel my participation in the

legislative arena as a political action committee member, as the chairman of the ODPAC committee in Ohio, and especially as the chairman of the ADA Council on Government Affairs, have given me a wealth of knowledge on the critical legislative and regulatory issues that play a major role in the profession of dentistry and its future. I have also taken on many civic leadership roles outside the dental profession that have helped me increase and improve my skills as an effective leader. I have always been able to express my opinions easily and am very comfortable with solution based activities. I feel I communicate well with committee members and other decision makers in our profession, and I know team based skills are imperative to successful outcomes in the work we do. I greatly respect the professional staff and realize utilizing staff knowledge and skill sets is critical to success and makes our leadership job much more efficient and effective. I feel that I possess great leadership skills and that these skills would be very effective in carrying out the duties of an excellent Trustee to the ADA. I have always taken the time to prepare and perform the job and duties correctly, and I plan to devote the necessary time in the future to continue my work for the dental profession. I would be honored to serve the dentists of District Seven of the American Dental Association as their Trustee.

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