

**KENTUCKY DENTAL ASSOCIATION
EXECUTIVE BOARD MEETING**

Zoom Meeting
February 17, 2024
9:00 A.M.

- 1. CALL TO ORDER.** Dr. Matt Milliner called the meeting to order at 9:00 a.m. The following members of the KDA Board were present:

Dr. Thomas Carroll
Dr. Ryan Estes
Dr. Laura Hancock Jones
Dr. Don Heine
Dr. Margaret Hill (U of L interim dean)
Dr. Fred Howard
Dr. Matt Johnson
Dr. Paul Lavelle
Dr. Cliff Lowdenback

Dr. Julie McKee
Dr. BJ Millay
Dr. Matt Milliner
Dr. Charles Montague
Dr. Jeff Okeson (UK Dean)
Dr. Jonathan Rich
Dr. Samantha Shaver
Dr. Kevin Wall

- 1.** Guests included **Drs. Garth Bobrowski , Gina Davis, Kaitlyn Patel, Adam Rich, Jill Keaton, Jerry Caudill** and **Mr. Jeff Allen** of the Kentucky Board of Dentistry were also present. **Mr. William Amshoff** of Welenken CPAs was also present. Staff members present were Dr. Stephen Robertson, Mr. Todd Edwards, Mrs. Melissa Nathanson, and Mrs. Janet Glover.
- 2. INVOCATION.** **Dr. Garth Bobrowski** gave the invocation.
- 3. APPROVAL OF MINUTES.** The minutes of the October 21, 2023, meeting of the Executive Board was approved.

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

4. **CONFLICT OF INTEREST.** **Dr. Matt Milliner** discussed the conflicts that may interfere with duties of any board member. Each board member explained any conflict they may have.

Dr. Cliff Lowdenback UK Alumni Association
Dr. Fred Howard Consultant for Avesis and UK Faculty
Dr. Jonathan Rich Dental Director for Envolve
Dr. Laure Hancock Jones None
Dr. Charles Montague None
Dr. Andy Elliott Dental Consultant/Subcontractor for Avesis
Dr. Samantha Shaver KDPAC Chair
Dr. Kevin Wall None
Dr. Garth Bobrowski None
Dr. Margaret Hill U of L Interim Dean
Dr. Jeff Okeson U of K Dean
Dr. Matt Milliner None
Dr. Matthew Johnson None
Dr. BJ Millay None
Dr. Paul Lavelle None

5. TREASURER's REPORT. Year-end Financials were discussed by the KDA's Accountants.

6. REPORT OF THE PRESIDENT. Dr. Cliff Lowdenback gave a verbal report.

7. REPORT OF THE FIRST VICE PRESIDENT. Dr. Matt Milliner gave the following report.

The months since our last Board meeting have presented many opportunities to serve the KDA and work with our Executive Committee and Board at large. I attended the Purchase Dental Society Meeting with Steve Robertson, Libby Milligan, and Don Heine in November. We had over 25 members in attendance with our visitors, including Dr. Gina Davis who worked in Eddyville that day. Steve and Libby presented an excellent informational set to our local members regarding current and recent legislative efforts along with challenges with HB 370. Several questions from the local membership showed appreciation for the efforts! We appreciate their attendance and support of our local society.

I have attended most Tuesday Executive Committee meetings with Libby, but have missed a handful due to work and family issues in the last seven weeks. Libby continues to guide our efforts and Steve continues to make in-roads with Frankfort legislators and administrators. I appreciate the efforts to work with Lisa Lee on Medicaid issues as well as testify before committee hearings and work with legislators to accomplish KDA goals. In this vein of efforts, I attended the KDA Legislative Day and met with Senators Danny Carrol and Jason Howell and Representative Randy Bridges from western KY. Five students from the second-year dental class at U of L accompanied me, one from Ballard County, next to Paducah. These students stole the show with the legislators when describing concerns about educational debt, how they may be able to practice, and if they can even stay in Kentucky. Three ladies were from Florida, Texas, and Alabama with only two from Kentucky. The attendance at the luncheon from Legislators and their staff was phenomenal! The KDA Staff and Libby organized a fantastic day for us!

I served as an ex-officio member on the Dental Compact work group. Kate led this group masterfully and Dr. Keaton and Dr. Adam Rich brought excellent perspectives. Dr. Shaver added a great deal to the efforts as the other ex-officio member of this group! Their report is well-written and clear. The other two groups I assigned from our last Board meeting have yet to report back. I am looking forward to hearing from Dr. Hancock and Dr. Greenwell's groups on Teledentistry and Mid-level providers, respectively.

I appreciate the active participation from our members and Steve's efforts to continue engaging new leaders in the KDA. I believe this presents opportunities to recruit and engage members at all career points. I also believe this presents an opportunity to look at how we all work with the KDA and find ways to streamline our efforts. All members have much busier lives than 15-20 years ago and my generation and younger value engagement, but appreciate the opportunity to not allow things to further encroach on their time and their lives more than they desire. Finding a necessary balance will help our organization remain valid to membership while not asking too much of any one group of volunteers.

My role at this point has been supportive in nature to the other leaders in the organization. I will continue to work in this capacity at first VP and take on any necessary duties to keep the organization moving forward. Many thanks to everyone for the great work in the past several months!

8. REPORT OF THE SECPOND VICE PRESIDENT. Dr. Samantha Shaver gave a verbal report concerning membership.

9. REPORT OF THE EXECUTIVE DIRECTOR. Dr. Stephen Robertson submitted the following report:

**Report of the Executive Director
Kentucky Dental Association**

February 2024

The headline items now revolve around Legislative Activities in Frankfort.

We are actively campaigning against **HB141, an anti-fluoridation bill** hidden behind a local choice argument. The bill would allow for local governing bodies to make the decision whether to continue the practice of water fluoridation. Several of the smaller water districts are on record as being opposed to fluoridation due to what they term unnecessary expense and effort. The anti-fluoridation group is hopeful they can win smaller group discussions in isolated communities to cease this vital program. The KDA has helped create a much larger group of fluoridation supporters through the Kentucky Oral Health Coalition to attack this issue. For the first time ever, this bill has made it out of Committee, and had readings on the House floor. This will continue to be an annual fight, and the anti-fluoridation group is becoming more organized and persuasive. We need to be better prepared in coming sessions to attack this threat to public health.

A few days before Christmas we were notified by the Kentucky Department of Insurance that, upon further review, they did not feel that **HB370** passed in 2022, stipulated that over the maximum was a non-covered service. We had previously been informed that they agreed with the intent of the bill. Following this notification, we have crafted a “**clean-up**” to clarify the language in statute. We will be filling this bill within the next two weeks with our primary sponsors being Derek Lewis and Sarge Pollock. Included in this bill will be **Assignment of Benefits**, allowing patients the right to choose their provider with payment being issued to the provider. We have had preliminary discussions with Delta Dental to help hopefully help ease the progress, but we need to be prepared for a potential battle as this process moves forward.

Our **Medicaid funding increase request** is on track. We are asking for an increase from 2022’s 1.13% of the Medicaid MCO Budget, to 5% this budget. The State allocation would be roughly \$50.2M. Our formal Budget Allocation Request will be filed in the Senate within the coming week.

Our Annual **KDA Legislative Day** was held on January 30. We had a fabulous turnout of both Dentists and students, with terrific support from the PepperPointe group, who remains very engaged and active in our process. Several Legislators commented how pleased they were with the turnout, and the discussions. We were well represented, and all should make plans to attend future events!

There is still a chance bills addressing both the Dental and Dental Hygienist Compact and Mid-Level providers will be presented. We have already had a Work Group address the Compact, and their report will be filed today. We have a Work Group in place to address Mid-Level providers and will deal with these issues as needed. Please watch your email for **Action Alerts!** This will be an extremely active session from here on out and will need the involvement of as many of our members as possible to push the goals and bills home. One such alert concerning water fluoridation has already gone out, and hopefully you have taken the time to follow through and reach out to your Representative.

I am requesting that all Executive Board members work on creating a text contact list for their component members to be able to communicate quickly regarding necessary actions. We do not script e-mails but provide key talking points for these brief messages. This is an election year for every representative and half the Senators, your messages will be read and heard, and play a vital role in helping complete our tasks. **Another consideration for the Board: It has become apparent through the rushed nature of the Fluoride battle this session, we need to have a prepared core of trained individuals ready to testify or represent the KDA publicly for interviews. To that end we need to research the possibility of hiring a PR firm to do training of selected individuals to meet these needs. I’m requesting the Board appoint a Work Group to look into this possibility.**

Lastly on the Legislative front, **we need to be working together to beef up our KDPAC.** When we are successful in our activities this year, we need to be there to support the individuals in Frankfort who were there for us. As I have mentioned previously, every Representative and half the Senate is up for re-election. Our KDPAC allows us to support these individuals during the campaign process. Never has this need been more pressing. Please communicate to your membership that this is the time for our members to step up and fund the KDPAC.

Now KDA items, several Work Groups will be presenting reports at this meeting. The work completed by these groups is to be commended! We have reached agreements with several companies to become Patrons and

possibly continued non-dues revenue sources. The WG on the Dental and Dental Hygiene Compact has produced one of the most detailed reports this body has ever received!

The KOHC will be holding its Spring zoom meeting Friday March 29th, from 10am -noon. The topic will be **Dental Mid-Level Providers** and I have accepted a position on the presentation panel.

Our **Strategic Planning event** has run into some roadblocks. We are unable to find meeting facilities and rooms for the event in Lexington or Louisville due to an Equestrian Event in Lexington on that weekend, and Derby the next weekend in Louisville. I have also heard from several members that they already have date conflicts, and if we wish to include Dental Students, this is the week prior to Finals. **We need to decide today under old business what we wish to do about the date and scheduling of this event. Planning of the event with ADA is already underway.**

At this event we will be setting the course for the future of this Association. This is a vital event that requires full participation. As we have discussed previously, well-meaning decisions were made in the past that have left our organization in a very vulnerable position.

My example, in 2004 the KDA removed the Councils on Membership and New Dentist and replaced it with a Membership Steering Committee. From our By-Laws:

MEMBERSHIP STEERING COMMITTEE

(a) **Composition.** This committee shall consist of six (6) members appointed by the Executive Board for three-year terms with no limitation as to the number of terms served. The terms will be staggered with two members appointed annually. One member shall meet the criteria of an ADA New Dentist. The Executive Board shall appoint the Chairperson.

(b) **Duties**

1. To develop policy for membership services.
2. To develop a statewide plan for recruitment and retention.
3. To report membership status biannually to the Executive Board.
4. To perform such other duties as may be assigned by the President, the Executive Board or the House of Delegates.

This group now has ZERO members, and I think everyone would agree Membership is a Priority! Our previous groups had representation from every component, I feel we need to discuss the possibility of returning to this arrangement. I understand waning involvement was the impetus for this change, but to return to where we need and desire to be, part of our charge is to find the people who are willing and can fill these slots. Component representation is vital so there is “local” involvement in all issues and initiatives.

This is one example, unfortunately there are more.

How can we focus on Membership if we do not even have a manned Membership group?!

We have **KDA Elections** upcoming in August, but, by our current guidelines, the **application deadline of April 1** is rapidly approaching. We have numerous open positions:

*** Second Vice President**

*** Delegate to the ADA - 2025-1**

(Currently occupied by Fred Howard/Not Eligible for Re-election)

*** Delegate to the ADA - 2025-2**

(Currently occupied by Sam Shaver/Not Eligible for Re-election)

*** Delegate to the ADA - 2024**

(Currently occupied by Steve Robertson/Not Eligible for Re-election)

Please note that this delegate will be expected to attend the 2024 ADA meeting this October.

*** Alternate Delegate to the ADA – 2025**

(Currently occupied by Darren Greenwell/Eligible for Re-election)

Also open are Speaker and Parliamentarian for floor elections in August.

Our Presidential rotation stipulates the current election area is EAST OF LOUISVILLE (Northern Kentucky Dental Society, Eastern Dental Society, Kentucky Mountain Dental Society or Southeastern Dental Society.)

2025: Open to any Component

2026: Bluegrass Dental Society

2027: West of Louisville (Green River Dental Society, South Central Dental Society, Pennyrite Dental Society, West central Dental Society or Purchase Dental Society)

2028: Louisville Dental Society

About elections, several years ago we instituted term-limits for ADA Delegates, without a stipulation of stair stepping their terms. After this all 5 seated ADA Delegates will be rolling of this year and next. And the same situation will potentially happen in six years in the future. **I am not suggesting we remove the term limits for ADA Delegates, but we may wish to revisit the fact all fall off at once.**

We have received **Grant funding from the ADA** for continuation of our “**Ask Me Anything**” program for **new Dentists and Dental Students at our annual meeting**, although a co-sponsor will need to be identified. We have also received funding for a **Dental Faculty membership event at both schools**, and planning for those events has already begun.

Lastly, planning for our annual meeting in August is well underway, and we feel we be be hosting a “can’t miss event!” You will see several new events and changes we fell all will enjoy, including an excellent array of presenters. Make plans now to bring your entire team to the Galt House August 22-25!

Other Upcoming Events:

Strategic Planning Session: TBD

KDA/ADA National Signing Day at ULSD & UKCD: TBD

CE event in Lexington: Thursday, April 25

Mid-States Meeting hosted at the Galt House: August 21-23

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

University of Kentucky College of Dentistry
Kentucky Dental Association Executive Report
University of Kentucky College of Dentistry
Kentucky Dental Association Executive Report

January 2024

College Updates

- Dean Okeson was accompanied by several DMD students while attending the January Legislative Day in Frankfort. His main emphasis in conversations was Medicaid reimbursement.
- The UKCD Office of Continuing Education is pleased to announce receiving ADA CERP reaccreditation approval for four years. This is the second time the unit has been approved for four years rather than a two- or three-year period.

Publications & Presentations

- **Dr. Emily Blevins** discussed "Dental Anxiety and Sedation Dentistry" on the Kentucky Smiles on Talking FACS podcast.
- **Dr. Isabel Moreno-Hay** lectured to the West Central Dental Society on the "Use of onabotulinum toxin in Dentistry" and "The relationship between sleep-related breathing disorders and temporomandibular disorders." Additionally, Moreno-Hay presented at the International Symposium of Bruxism organized by SEDCYDO (Spanish Society of TMD and OFP) in Madrid, Spain, with a lecture titled: Evidence-based therapeutic options for the management of bruxism. She also presented at the Danish Society for Clinical Oral Physiology Annual meeting with a lecture titled: Differential diagnosis in TMD.
- **Dr. Craig Miller** was featured on the Infection Control and Hospital Epidemiology (ICHE) podcast. The topic was Antimicrobial Use and Stewardship in Dentistry.
- **Dr. James K. Hartsfield, Jr.**, gave a virtual presentation on "Precision Oral Health Care" as a part of the continuing education diploma course "Odontologia en la Era de la Inteligencia Artificial" (Dentistry in the Age of Artificial Intelligence) through Pontificia Universidad Javeriana, Bogota, Colombia. Additionally, Hartsfield was a plenary speaker on "Vertical Growth in Children, Development of Openbites" at the Canadian Association of Orthodontists meeting in Orlando.
- **Drs. Lorri A. Morford and James K. Hartsfield, Jr.** gave webinars on "Genetics and Orthodontics" to the University of Florence orthodontic residents in Florence, Italy.
- **Dr. Ahmad Kutkut** gave several presentations including: ICOI Meeting – "Challenges in Dental Implant Education;" ADEA ISG Group – "Digital Implant Dentistry Predoctoral Program at University of Kentucky;" and ACP Annual Session – "Digital Implant Dentistry Predoctoral Program at University of Kentucky."
- **Moreno-Hay I, Bender SD.** Bruxism and oro-facial pain not related to temporomandibular disorder conditions: Comorbidities or risk factors? *J Oral Rehabil.* 2024; 51: 196-201.
- **Galal O,** Eustachian tube calcification as an unusual finding on a panoramic radiograph. *Imaging Sci*

Dent. 2024 Jan;54:e5.

- Sangalli L, Alessandri-Bonetti A, Kapos FP, **Boggero IA**. Occupations associated with treatment seeking and biopsychosocial functioning at a tertiary orofacial pain clinic: A cross-sectional study. *J Am Dent Assoc*. 2023 Nov 19: S0002-8177(23)00622-0. doi: 10.1016/j.adaj.2023.09.021. Epub ahead of print. PMID: 37988046.
- Macrophage-related gingival transcriptomic patterns and microbiome alterations in experimental periodontitis in nonhuman primates. **Gonzalez OA, Kirakodu S**, Nguyen L, Ebersole JL. *J Periodontal Res*. 2023 Dec;58(6):1148-1170.
- Sex-Related Effect of Aging in Gingival Gamma-Delta T Cells. Tubero Euzebio Alves V, Bruno MEC, Mukherjee S, Wang L, Danaher RJ, Su L, Starr ME, **Gonzalez OA**. *J Dent Res*. 2023 Nov 15. Online ahead of print.
- Re: Estimating the cost of inappropriate antibiotic prophylaxis prior to dental procedures. **Miller CS**, Thornhill MH. *Infect Control Hosp Epidemiol*. 2023 Nov 3:1-2. doi: 10.1017/ice.2023.209. Online ahead of print.
- Xerostomia, reduced salivary flow, and oral burning: Associations from a cross-sectional study. **Rojas-Ramirez MV**, Eldomiaty W, Sangalli L, **Al-Sabbagh M, Dawson DR, Miller CS**. *Oral Surg Oral Med Oral Pathol Oral Radiol*. 2023 Aug;136(2):154-161.
- Occupations associated with treatment seeking and biopsychosocial functioning at a tertiary orofacial pain clinic [A cross-sectional study](#). Linda Sangalli; Anna Alessandri-Bonetti; Flavia P. Kapos; **Ian A. Boggero** *JADA* Nov 2023.
- Sex as a Biological Variable in Oral Diseases: Evidence and Future Prospects. L Sangalli, L C Souza, A Letra, **L Shaddox**, E Ioannidou · **J Den Res Dec 2023**.
- Periodontal disease, local and systemic inflammation in Hispanics with Type 2 diabetes mellitus. **Oelisoa M Andriankaja ***, Reuben Adatorwovor, Alpdogan Kantarci, Hatice Hasturk, **Luciana Shaddox**, Michael A Levine. *Biomedicines*, *In press* Oct 2023.
- [Integrated Clinical Orthodontics, 2nd Edition | Wiley](#). Chapter in eBook, (coming Jan, 2024). **Hartsfield JK Jr, LA Morford**, AM Shafi. Chapter 4, In: *Integrated Clinical Orthodontics*, 2nd ed. V Krishnan, and Anne Marie Kuijpers-Jagtman, eds. Wiley-Blackwell, pages 63-95, 2023 (E-Book), 2024 (Print).

Faculty & Staff Updates

- The UKCD Office of Continuing Education is pleased to announce that **Meagan Castro**, Staff Support Assistant, has been appointed as secretary on the Association for Continuing Dental Education (ACDE) Board of Directors. In this role, Castro will have several key responsibilities, including promoting the ACDE among dental professionals, educators, and providers, preparing for the ACDE annual meeting, and developing and distributing communications regarding meetings and events to members.
- **Drs. Andrew and Timothy Cude** were recognized as two of the top 22 graduates under 40 for their undergraduate alma mater, Murray State University.

Learner Updates

- **Drs. Ronald Singer and Kara Hourdas** traveled with D1 students to Elliott County for the 2023-2024 Seal Trip. Students provided a dental examination, cleaning, fluoride treatment, sealants, and a brushing and flossing demonstration to participants. The effort received positive coverage by several media outlets.
- The college participated in three Remote Area Medical (RAM) Clinic in 2023. Student volunteers, accompanied by faculty and resident volunteers, traveled to Hazard, Bowling Green, and Mayfield to support patient care.

Philanthropy/Alumni Relations

- While the main focus of UKCD Class of 1968 55th reunion was to reconnect with their classmates and celebrate their successful careers, the class also heard during the luncheon from two junior faculty who had received the Class of 1968 Faculty Development Award. In addition, two members of the class offered a match of \$10,000 to those class members who donated to the fund supporting the award. The class exceeded the match, raising a total of \$30,450, including the match, to support the UKCD faculty.
- Dean Okeson took 12 members of the Donald Knapp family out to dinner, following the Donald D. Knapp DDS Memorial Lecture. The presenter at the lecture, along with Dr. Lu Shaddox, Associate Dean for Research, and Linda Epling, joined the group. The Knapp Family enables the college to offer the lecture, which highlights research relevant to general practitioners.
- UKCD launched two pilot projects to in support of its Pathways to Dentistry effort. The projects are located in Fulton/Hickman and Lawrence Counties. Local workgroups have been established in each county with the following alumni participating: Lawrence County: James and Marc Lester, and Fulton/Hickman: Mike Hawks, Rick Canty and Beverly Largent. The local groups will take a framework and customize for their area. A broader taskforce is developing the overall concept. Alumni participating on the overall taskforce are Fred Howard, Emily Winfrey, Michael Day, Marc Lester, Bev Largent, Rhonda Hogan and Zindell Richardson.
- Two married alumni, Don Kleier and Betty Barr, continued their support for two scholarships named for Dr. Vincent Barr and one scholarship for Dr. Milton Gellin. They are also underwriting the Dr. Vincent A. Barr Visiting Presenter at ASDA Day.
- Dean Okeson met individually with members of the UKCD Advisory Board over the last six months to discuss alignment between UKCD and their individual companies, along with their thoughts on the role of the advisory board. Six of the meetings were held over Zoom with those who live far from Lexington and three were in-person meetings.
- The Director of Philanthropy made visits to alumni and friends of the college in Cincinnati/Northern Kentucky and Lexington. She also met virtually with alumni in Atlanta, Northern Kentucky, North Carolina, and Washington, D.C.
- Two UK alumni have invested in the college's future by including UKCD in their estate plans. An anonymous patient of the DMD Student Clinic has established a fund to assist UK staff and students who have complex dental needs but are without sufficient financial resources to

complete treatment. Another alumna has worked with UK to create both an endowed and non-endowed discretionary fund for pediatric dentistry in honor of Dr. Doug Damm. These two pediatric funds will support faculty, program, research, and student needs, in addition to facility improvements.

- Besides including UKCD in their estate plans, alumni are also assisting the school in efforts to expand its utilization of digital dentistry. Over \$20,000 has been given to UKCD to enhance the incorporation of digital dentistry into the curriculum and patient care.
- The UKCD Class of 1968 is also working to ensure the college always has quality faculty in the future. During their 50th reunion, the class established a faculty development fund to support junior faculty participation in activities that will contribute to their career preparation. Since then, the class has selected three recipients, who each had available funds of up to \$5,000 to be used for professional development. Dr. Jennie Ison has been selected as the 2023 recipient of the UKCD Class of 68 Faculty Development Fund. She will use the funds to attend the Eastern Society of Teachers of Oral Pathology's Annual Meeting this fall.
- The UK College of Dentistry hosted alumni, friends, and students for the Fall Symposium and Alumni Weekend, sponsored by the UKCD Alumni Association in October 2023. The gathering featured the Donald E. Knapp Memorial Lecture, 13th Annual Barrels & Kegs Tasting and Silent Auction, Alumni CE Course and General Meeting, Keeneland Racing, and Alumni Reception and Distinguished Alumni Awards at Spindletop Hall, 50th Anniversary Brunch for the class of 1973, 55th Anniversary Dinner for the Class of 1968 and Tailgating and UK Football. The UKCD Alumni Association awarded scholarships in the amount of \$6000 (\$2000 each) to UKCD Class of 2024 members Sarah Hearle, Amina Nouri, and Nick Ragland. Drs. Don Kleier ('70) and Steven Tucker ('75) were the 2023 recipients of the Distinguished Alumni of the Year Award. The Classes of 1978, 1983, 1988, 1993, 1998, 2003, 2008, 2013, and 2018 also celebrated anniversaries.
- In December, the UKCD Alumni Association held its fourth quarterly Alumni Board Meeting. Alumni board members are able to participate both in-person and via Zoom from across the country. Dean Okeson provided an update to the board on the status of the college and our event committee chairs began discussions with the group on plans for all of our 2024 signature events. The board approved new 2024-2025 (two-year) at-large board terms for Drs. Shea Lair ('83), Chuck Rolph ('00), and Dustin Mayrand ('12). A moment of silence was held for alumni who had passed away since our last quarterly meeting.
- Save the dates for upcoming UKCD Alumni Association activities are:
 - May 17-19, 2024 – UKCD Wellness Retreat: Focusing on Women's Health
 - June 4, 2024 – Deadline for submissions for Distinguished Alumni of the Year
 - August 17, 2024 – UKCD Alumni Association Golf Scramble
 - August 23, 2024 – Alumni Reception at the KDA
 - October 10-12, 2024 – Annual Fall Symposium and Alumni Weekend

**11. REPORT OF UNIVERSITY OF LOUISVILLE COLLEGE DENTISTRY.
University of Louisville School of Dentistry (ULSD)
Kentucky Dental Association Executive Board Report
February 5, 2024**

Facilities

- ULSD will open a new general dentistry practice in West Louisville in March 2024. As with other UofL community dental practices, the West Louisville practice is designed to serve populations with unmet dental care needs, including people who have Medicaid or no dental insurance. The practice is located in the newly built Goodwill Opportunity Campus at the corner of Broadway and 28th Street.

Student Activities

- In November 2023, the Louisville ASDA chapter won Best Community Service Initiative, Best Wellness Initiative, and Best Newsletter during the District 7 conference in St. Louis.
- In January 2024, eight students joined the DMD Class of 2026 through our advanced standing admission option. The program is designed for selected individuals who have received a dental degree from an institution outside the United States or Canada and have passed Part I and Part II of the NBDE or INBDE.
- The first wave of acceptance notifications for the DMD class of 2028 were sent out in December 2023. The class will have 120 members.
- The application window for dental hygiene upper division for the class of 2026 closed in mid-January. The class will have 30 members.
- Convocation for class of 2024 DMD, dental hygiene, and advanced standing students is scheduled for Saturday, May 11 at the Louisville Palace.

Alumni Affairs & Continuing Education

- Upcoming alumni events:
 - Reception at Hinman Meeting in Atlanta, Georgia March 21-23
 - Reception at American Association of Orthodontists Annual Session in New Orleans, Louisiana May 3-6, 2024
 - Reception at American Academy of Pediatric Dentistry Annual Session in Toronto, Canada May 23-26, 2024
 - ULSD Night at the Ballpark date TBD
 - Reunion weekend celebrating DMD and Dental Hygiene classes ending in 4 and 9 June 14-15, 2024
- Upcoming in-person CE events:
 - February 23: Coronal Polishing for the Dental Auxiliary
 - May 18 & 19, June 1 & 2: Dental Assisting Delegated Duties (EDDA)
 - June 15: 41st Annual William J. Mansfield Jr. Alumni Day
- Upcoming virtual CE events:
 - April 26: Radiation Safety for the Dental Auxiliary presented by Lavina Myers, RDH, MPH

Research News

- ULSD has moved from #21 to #20 in the U.S. for Dentistry & Oral Sciences on the ShanghaiRankings Global Ranking of Academic Subjects (GRAS). Among dental schools worldwide, we are ranked #47. GRAS uses objective academic indicators and third-party data (including research activity) to measure the performance of universities around the world in various subjects.
- DMD students Arjun Patel and Dylan Pope were selected to represent ULSD at the Hinman Dental Student Research Symposium in November 2023.
- DMD student Paige Tierney was selected as ULSD's 2024 Hinman Scholar. Paige has participated in

many research activities during her time at ULSD. Her name has appeared on published abstracts, including one published in the Journal of Immunology, as well as an NIH R21 grant application, “Covid 19 Modulation of Human Beta-Defensin-1 and the Ionocyte in the Salivary Gland”.

Faculty News

- Dr. Sarah Franklin has joined ULSD as full-time faculty for oral pathology.
- Dr. Tim Naomi has joined ULSD on a part-time basis. He will transition to a full-time role as Director of the General Practice Residency on April 1.
- As part of our partnership with Community Dental Clinic of Owensboro, the clinic’s three dentists joined our faculty in January 2024. Dr. Mark Ralph and Dr. Gary Aud are full-time faculty. Dr. Carol Braun sees pediatric patients one day a week.
- Dr. Abbie Beacham has been appointed to the American Psychological Association Society for Health Psychology 2024 Presidential Task Force on Health Psychologist Well-being.
- Dr. Tiffany McPheeters has been awarded a Gheens Foundation Community Engagement mini grant to support “Resources for home care providers on providing oral hygiene to homebound patients”.
- Dr. Grace De Souza received a Gheens Foundation mini grant to support AAWD students with their initiative “Oral Hygiene Literacy with Latinx families”.
- Dr. Henry Greenwell was posthumously honored as Periodontics Educator of the Year during the American Academy of Periodontology Annual Meeting in November 2023.
- The following longtime faculty members retired in 2023:
 - Dr. P. Gay Baughman
 - Dr. Mark Bernstein
 - Dr. Bruce Cook
 - Dr. Gary Crim
 - Dr. Dave Maddy
 - Dr. Roger Richardson
 - Dr. Michael Utley

In Memoriam

- Dr. Stephen Feldman passed away on December 22, 2023. Dr. Feldman was the preventive dentistry guru for ULSD during his time at the school, and he was devoted to being sure that students practiced what he preached.
- Dr. Larry Meffert passed away on December 31, 2023. Dr. Meffert (also known as “The Singing Dentist”) made our clinics a brighter place for many years with his positive outlook and constant encouragement.
- Carol Read, RDH, MEd passed away on January 10, 2024. During her time as a dental hygiene faculty member, her patience and kindness made a difference for the many dental and hygiene students she mentored.

Selected Faculty Publications

- Beacham, AO. Effectively Supporting the Well-Being of Healthcare Professionals. National Register of Health Service Psychologists.
- Cascante-Sequeira D, Oliveira-Santos C, Brasil DM, Santaella GM, Swanson C, Blackburn M, Scarfe WC, Haiter-Neto F. Convex triangular vs. cylindrical field of view: how does the shape of the FOV affect radiation dose?. Clin Oral Invest, 2023.
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Recommendations to the Executive Board:

- None

12. REPORT OF UNIVERSITY OF PIKEVILLE.

University of Pikeville Report

[Return to Top](#)

February 2024

Leadership Updates:

- Dr. Jill Keaton assumed the position of Dean for the Tanner College of Dental Medicine on November 4, 2023.

College Updates:

- An application for initial accreditation of the developing predoctoral dental program at the University of Pikeville was submitted to the Commission on Dental Accreditation in June 2023.
- The initial student cohort at the Tanner College of Dental Medicine is anticipated to be admitted in June 2025.
- Architects, engineers, and designers from EOP and Kahler Slater have developed the facility design for the Tanner College of Dental Medicine in downtown Pikeville. The overall plan includes a four-story building housing ninety-three dental operatories, a simulation laboratory with sixty-five stations, classrooms, faculty offices, digital laboratories, central sterilization, and CRET Innovation Center.
- The Tanner College of Dental Medicine was named the recipient of the 2024 Center for Research and Education in Technology award. Recipients are provided with the latest digital equipment and technology to outfit up to six dental operatories.

Faculty Updates:

- Dr. Iqebal Hasan will assume the position of Associate Dean of Academic Affairs on March 1, 2024.
- Applications are currently being accepted for the position of Associate Dean of Clinical Affairs.

Recommendations to the Executive Board:

- None

13. REPORT OF THE DENTAL DIRECTOR. Dr. Julie McKee gave a verbal report.

14. ANNUAL SESSIONS.

COUNCIL ON ANNUAL SESSION

Tuesday, November 14, 2023 – Zoom Meeting
7:00 P.M. (Eastern Standard Time)

Council members present: Drs. Gina Davis, Chairman, Charles Montague, Michelle Story, Kate von Lakum and Randy Ransdell. Ex-Officio members present: Drs. Sam Shaver and Cliff Lowdenback. Drs. B.J. Moorhead, Mark Moats, Brandon Stapleton and Celin Arce were also present. Staff present: Dr. Stephen Robertson, Janet Glover, Melissa Nathanson and Todd Edwards.

The meeting was called to order at 7:00 p.m.

The Council reviewed the 2023 Kentucky Meeting and discussed plans for the 2024 meeting. Several ideas were discussed with much of the discussion being informational only.

The council discussed having Elijah Desmond as DJ for the Friday night reception, as Emcee for the Friday all day course and a Dental Pitch event for the 2024 meeting. Dr. B.J. Moorhead and Dr. Stephen Robertson made a short presentation regarding Elijah and what was being considered for the 2024 KY Meeting. Elijah is sponsored by the group Legally Mine. Legally Mine will pay Elijah's honoraria and expenses for this event. In return, the group Legally Mine, requests that they be given a one-hour spot on the KDA program for a presentation as well as a booth in the exhibit hall. We are currently waiting for contract materials from Elijah. Once these are received, another meeting of this council will be scheduled to discuss options.

Meeting adjourned at 9:00 p.m.

Respectfully submitted,
Dr. Gina Davis, Chairman

COUNCIL ON ANNUAL SESSION

Tuesday, December 5, 2023 – Zoom Meeting

7:00 P.M. (Eastern Standard Time)

The contracts from Elijah Desmond were received on November 28th and sent to the Council on Annual Session for review. A zoom meeting was scheduled for December 5 at 7:00 p.m. to discuss these contracts.

Council members present: Drs. Gina Davis, Chairman, Michelle Story, Kate von Lakum, Laura Hancock Jones and Randy Ransdell. Ex-Officio member present: Dr. Cliff Lowdenback. Drs. B.J. Moorhead, Mark Moats and Brandon Stapleton were also present. Staff present: Dr. Stephen Robertson, Janet Glover, Melissa Nathanson and Todd Edwards.

The meeting was called to order at 7:00 p.m.

The council reviewed the contracts from Elijah Desmond and discussion followed.

After much discussion, the following motion was made:

MOTION: Dr. Michelle Story moved to accept the two contracts from Elijah Desmond and move forward with signing these contracts for the 2024 KY Meeting. Dr. Kate von Lakum seconded the motion. MOTION APPROVED.

Meeting adjourned at 7:45 p.m.

Respectfully submitted,

Dr. Gina Davis, Chairman

15. THE REPORT OF THE TECHNICAL ADVISORY TO KMAP. Dr Garth Bobrowski presented a verbal report. Attachments for this report were included in the agenda for the meeting.

16. GOVERNMENTAL AFFAIRS. Dr Garth Bobrowski presented a verbal report and attachments contained in the agenda..

17. COMPONENT REPORTS.

Report from Southeastern Dental Society to the KDA Executive Board

The Southeastern Dental Society met on Thursday November 2, 2023 at the Depot restaurant in Corbin, KY. Our KDA President, Dr. Cliff Lowdenback presented to our society issues that the KDA is working on, especially in the upcoming legislative session. He was also joined by the KDA Executive Director, Dr. Steve Robertson, who further discussed issues affecting our profession. He also gave the history of where we are with many of the issues and how the KDA plans to address these in the future. They also discussed the importance of members filing complaints with the Insurance Commissioner of KY when it relates to shortcomings with legislation passed last year.

Respectfully submitted,
H. Fred Howard, DMD
1/21/24

Report of the Northern Kentucky Dental Society:

We had a meeting January 16th where Dr. Smith reviewed oral pathology. The annual golf scramble will be May 17th.

Ryan Estes

18.KDPAC. Dr. Samantha Shaver, Chairperson of the KDPAC gave the following report.



KENTUCKY DENTAL POLITICAL ACTION COMMITTEE

9 February 2024

Make your contribution payable to:

Kentucky Dental Political Action Committee
c/o Darren Greenwell, Treasurer
1920 Nelson Miller Parkway
Louisville, KY 40223



KDPAC Board

Chair
Samantha Shaver
Sec/Treasurer
Darren Greenwell

Shea Cheavrant
Fred Howard
Bill Lee
Garth Bobrowski
John Roy
Carson Keally
Bruce Wilson
Sean Aiken
Joe Morton
Jonathon Rich
Don Heine

Current Balance: \$ 27,000
Monthly recurring donations: \$1,000

Through the financial contributions of member dentists, KDPAC supports congressional candidates who understand the importance of dentistry and its contribution to overall health. Regardless of party affiliation, KDPAC supports candidates who will advocate for dentists and patients. Your KDPAC dollars help keep health care policy sane. Legislators write laws. Agency workers interpret laws and create policies and rules. We need to influence rational decision making at all levels.

The KDA has become a “player” in state politics. We need contacts for all our legislators. I have attached a contact form. Please distribute these to your members. Our goal is to have a KDA contact for every member.

2024 Kentucky Senate races

Odd-numbered Senate districts are on the ballot this year, which means **19 of the chamber’s 38** seats are up for grabs.

Republicans currently hold a super-majority of the seats, 31-7. In eight Senate districts, Democrats did not field a candidate, and in four districts, Republicans aren’t competing. Seven districts have candidates from both parties. In total, there are 23 Republicans vying for the Senate and 13 Democrats.

2024 KY House of Representatives races

All 100 districts of the House of Representatives are on the ballot this year. Representatives serve two-year terms.

Republicans currently hold a super-majority of the seats, 79, compared to Democrats’ 20. The Republican Party has 114 candidates running in 88 districts. Democrats fielded 78 candidates in 57 districts. In all, 55 districts have candidates of only one party.

After the primary KDPAC will become quite active. We must continue to support those legislators that support us.

The current legislative session is already half over. Multiple bills have been brought forward that affect our profession. Including...

HR65

HONORING DR. CLIFFORD LOWDENBACK (*BROWN JR., GEORGE*)

SR106
HORNING DR. CLIFFORD LOWDENBACK (*THOMAS, REGINALD*)

HB141
WATER FLUORIDATION PROGRAMS (*HART, MARK*)

HB34
UNIVERSAL RECOGNITION OF OCCUPATIONAL LICENSES (*DOAN, STEVEN*)

HB317
PRIOR AUTHORIZATION (*MOSE, KIMBERLY POORE*)

HB103
PATIENT MEDICAL RECORDS (*DOAN, STEVEN*)

HB144
HEALTH SERVICE PROVIDERS (*DOAN, STEVEN*)

HB159
HEALTHCARE CRIMINAL LIABILITY (*FLANNERY, PATRICK*)

HB174
PATIENT MEDICAL RECORDS (*RAYMER, REBECCA*)

HB194
WORKPLACE VIOLENCE AGAINST HEALTHCARE WORKERS (*MOSE, KIMBERLY POORE*)

HB318
PRIOR AUTHORIZATION (*LOCKETT, MATT*)

HB397
LICENSURE OF MILITARY-CONNECTED INDIVIDUALS (*KOCH, MATTHEW*)

HB530
MEDICAID MANAGED CARE ORGANIZATIONS (*FRAZIER GORDON, DEANNA*)

SB24
MANAGED CARE ORGANIZATIONS (*MEREDITH, STEPHEN*)

SB26
MEDICAID OVERSIGHT AND ADVISORY COMMITTEE (*MEREDITH, STEPHEN*)

SB65
DEFICIENT ADMINISTRATIVE REGULATIONS (*WEST, STEPHEN*)

HB530
MEDICAID MANAGED CARE ORGANIZATIONS (*FRAZIER GORDON, DEANNA*)

HB539
WAGES FOR EMPLOYMENT (*ROARX, RACHEL*)

The KDA has been involved in discussions on the majority of these bills. We will continue to monitor and keep our membership informed.

As you can see, we must stay vigilant, and we have to build up our KDPAC funds. Please encourage your membership to donate!!



Respectfully submitted,
Samantha Shaver, DMD – KDPAC Chair

19. WORKGROUP REPORTS.

Kentucky Dental Association consensus statement regarding dentist and dental hygienist compacts

Work Group members: Matt Milliner (msmilliner@gmail.com), Jill Keaton (jillkeaton@upike.edu), Adam Rich (adam.rich@uhc.com), Sam Shaver (samsworld@aol.com), Stephen Robertson (steve@kyda.org), Kate von Lackum (kvonlack@gmail.com).

SUMMARY: Licensure portability presents a significant issue for the dental and dental hygiene profession. The majority of students at over half of the country's dental schools do not practice in the same state where they were educated. Clinicians in dentistry desire the ability to relocate as better professional opportunities arise. The current statutes governing licensure in the state of Kentucky are liberal in the variety of clinical examinations that are accepted and do not encumber the dental professional with particularly difficult or costly requirements to obtain a license to practice dentistry and dental hygiene in our state. The Kentucky Dental Association is in favor of supporting legislation that keeps licensure jurisdiction and agency governing licensing with the Kentucky Board of Dentistry. Currently, there are many legal questions not yet answered regarding possible risks or disadvantages should Kentucky participate in any interstate compact. This work group has discussed the compact legislation, the need for interstate portability, the stakeholders involved, the possible legal ramifications of joining compacts, and we conclude that the Kentucky Board of Dentistry and the Kentucky Dental Association both need more time and legal resources to determine if our state should support legislation that enacts a dental and dental hygienist compact.

WHAT IS THE DDH COMPACT?

The Dentist and Dental Hygienist Compact (DDH Compact) is an interstate occupational licensure compact. Interstate compacts are constitutionally authorized, legally binding, legislatively enacted contracts among states. This compact enables licensed dentists and dental hygienists to practice in all states participating in the compact, as opposed to them obtaining an individual license in every state they want to practice.

The Council of State Governments (CSG) has facilitated the development of the DDH Compact as model legislation in partnership with the American Dental Association (ADA), American Dental Hygienists' Association (ADHA). The CSG claim that the DDH Compact will increase the mobility and multistate practice for licensed dentists and dental hygienists while preserving state sovereignty and public protection. Each state must enact the model legislation to join the compact. If a participating state adopts DDH Compact legislation, the compact applicant does not obtain a state dental license. Rather, they obtain "privilege" from the compact commission. The compact commission would have direct jurisdiction over compliance, legal actions, orders, etc. in the participating state. There are unknown annual charges that will impact the state dental board.

WHO CAN USE THE DDH COMPACT?

A dentist or dental hygienist is eligible to participate in the compact and obtain privilege to practice in a DDHC participating state if they have:

- An active, unencumbered license in any state participating in the compact. (Note: as determined by the DDHC commission, not the state dental board)
- Passed the National Board Examination or other exam accepted by the compact commission.
- Completed a clinical assessment. (Note: The American Association of Dental Boards (AADB) report that the DDHC language states that a hand-skill testing by an independent third-party is **NOT** mandatory)
- Graduated from an education program accredited by the Commission on Dental Accreditation (Note: The AADB authors state that the DDHC language states this requirement is **NOT** mandatory).
- No disqualifying criminal history. (Note: The DDHC commission has jurisdiction over compliance, legal actions, and orders, **NOT** the state dental board.)

WHAT IS THE AABD COMPACT?

The [American Association of Dental Boards](#) (AADB) has drafted alternative compact language (the AADB Compact). The AADB Compact is an agreement among participating U.S. states and territories to work together to significantly streamline the licensing process for dentists and dental hygienists who want to practice in multiple states. It offers a voluntary, **expedited** pathway to licensure for dentists and dental hygienists who qualify.

The mission of the AADB Compact is to allow for expedited licensure portability and ease of movement between states for professionals while allowing states to independently regulate the

practice of dentistry and establish a uniform licensure examination testing psychomotor and cognitive skills. The American Association of Dental Boards (AADB) Dental and Dental Hygiene Licensure Compact also provides access to the AADB Licensure Repository, a portal for the original source verification of the documents required for dental and dental hygiene licensure. This portal supports expedited licensure and public protection by enhancing the ability of states to share investigative and disciplinary information through a centralized Clearinghouse.

Who is the AADB?

The American Association of Dental Boards (AADB), formerly known as the American Association of Dental Examiners (AADE), originally chartered on September 10, 1896, and renewed in 1944, is comprised of State Dental Boards in the United States and its territories. The AADB is a national association that encourages the highest standards of dental education, promotes higher and uniform standards of qualifications for dental practitioners, and advocates uniform methods in the conduct, operation, and working of dental examining boards. AADB membership is comprised of boards of dentistry, specialty boards, present and past board members, board administrators and attorneys, and dental educators. Currently, 35 boards are members of AADB.

Who Developed the AADB Compact?

A variety of State Dental Board stakeholders developed the AADB Dental and Dental Hygiene Licensure Compact over a period of multiple months. Current and former State Dental Members, Executive Directors, and Legal Counsel all came together to design a licensure compact that supports and aligns with the mission of State Dental Boards to protect the public. A draft compact was introduced publicly in August 2023.

The AADB chose not to engage the CSG during the development process. The CSG reports that the AADB drafted alternative compact language (the AADB Compact) in less than three months and with no public input.

Who Manages the AADB Compact?

The American Association of Dental Boards Compact Commission manages the compact. The Commission is comprised of two (2) members from each AADB member jurisdiction and an Attorney's Committee.

How Does the AADB Compact Work?

Eligible dentists and dental hygienists can qualify to practice dentistry in multiple states by completing just one application within the Compact, **receiving separate licenses from each state in which they intend to practice**. These licenses are still issued by the individual states – just as they would be using the standard licensing process – but because the application for licensure in these states is routed through the Compact, the overall process of gaining a license is significantly streamlined. Dentists and dental hygienists receive their licenses much faster and with fewer burdens. **The licensing is all state-based**. The Commission does not issue a “Compact license” or a nationally recognized license for dentists and dental hygienists. Only states and territories that have formally joined the Compact can participate in this streamlined licensure process. States and

territories must pass legislation authorizing their institutions to participate in the Compact. AADB Member State Dental Boards may choose to utilize the AADB Repository even if the legislature in their state does not participate in the AADB Dental and Dental Hygiene Licensure Compact.

WHAT ISSUES LED TO THE CSG, ADA, AND ADHA TO COLLABORATE ON AN INTERSTATE COMPACT?

In September of 2018, the ADA, American Dental Education Association (ADEA) and American Student Dental Association (ASDA) published a Report of the Task Force on Assessment of Readiness for Practice.^A Each year nearly 6,000 students graduate from dental schools across the United States. To practice dentistry, they must first obtain a dental license, the purpose of which is to ensure public safety by showing that new dentists can provide safe and quality dental care on day one of their careers. Similarly, out of over 196,000 active licensed dentists in the United States, more than 10,000 moved across state lines from 2011 to 2016.¹ To continue practicing dentistry, each must obtain a new state license.

Ensuring patient safety and that each dentist meets professional standards for practice are the critical underpinnings of the dental licensure process. It is the responsibility of state boards of dentistry to establish the qualifications for licensure and subsequently issue licenses to qualified individuals.

Licensure portability also presents a significant issue for the dental profession in both expected and unexpected ways. The majority of students at over half of the country's dental schools do not practice in the same state where they were educated. For students in states with restrictive licensure policies, the cost of licensure in another state is often extremely expensive and unnecessarily burdensome. A similar burden exists for the over 10,000 active licensed dentists who moved across state lines between 2011 and 2016.

Restrictions on portability of dental licensure also have some unexpected impacts on society:

› Although dentists serving in the military and federal services are afforded a level of professional mobility, their spouses are not. When following a spouse or partner to a new military posting, the civilian spouses who are practicing dentists may be forced to spend significant financial resources and time submitting extensive documentation required for licensure by credentials; some are also required to re-take a procedure-based patient clinical exam. Others simply stop practicing, which impacts their professional identities and their family's economic stability and further reduces access to care.

› Academia is a highly mobile profession. Dental school faculty who move across state lines for employment must go through a similar process as described above. While it may be possible for faculty members to get a "restricted license" to teach in the dental school clinic, they are typically not allowed to participate in either faculty practice or private practice. Most clinical faculty members see patients in the school's faculty practice or private practice one or more days per week in order to remain current and supplement their income. As a result, this type of limited license, which diminishes the individual's earning power and practice opportunities, creates a challenge for schools when recruiting new faculty members.

› Restrictions on mobility also impact dentists' ability to participate in volunteer outreach efforts to increase access to care, such as Missions of Mercy, Remote Area Medical or emergency response such as the response to Hurricanes Harvey, Irma and Maria in 2017. While some states allow for volunteer licensure, particularly for the provision of free dental care, most do not.

Barriers to licensure can have adverse impact on state and local economies. The federal government and the Federal Trade Commission (FTC) are also interested in the requirements for obtaining occupational licensure at the state level. This interest includes licensure of the health professions, with dentistry featured predominantly in several papers. According to Kleiner in *Reforming Occupational Licensure Policies*: "...by making it more difficult to enter an occupation, licensing can affect employment in licensed occupations, wages of licensed workers, the prices for their services, and worker economic opportunity more broadly. Indeed, economic studies have demonstrated far more cases where occupational licensing has reduced employment and increased prices and wages of licensed workers than where it has improved the quality and safety of services.⁴" Johnson and Kleiner pointed out in 2017⁵ that occupational licensure, one of the most significant labor market regulations in the United States, may restrict the interstate movement of workers. They analyzed the interstate migration of 22 licensed occupations. Of note, the paper stated:

"...three occupations stand out as showing substantially limited interstate migration, at a level comparable to lawyers: social workers, dental hygienists, and dentists."

OVERVIEW OF EXISTING LICENSURE PROCESSES

In the U.S.A., licensure requirements are set by the state board of dentistry, also known as the board of dental examiners or licensing board. Although requirements vary from state to state, all dental licensure applicants must meet three basic requirements: educational, written examination, and clinical examination. Nearly all states require a D.D.S. or D.M.D. degree from a university-based dental education program accredited by the Commission on Dental Accreditation (CODA). All U.S. licensing jurisdictions require licensure candidates to pass the Integrated National Board Dental Examination (INBDE). The INBDE was developed in response to changes in educational curricula and instructional methods and launched August 1, 2020. Candidates for dental licensure in most U.S. licensing jurisdictions are subject to a clinical examination requirement. Most state boards of dentistry rely on regional testing agencies to administer a clinical examination.

State boards of dentistry are entrusted with establishing the qualifications for licensure and for issuing licenses to qualified individuals as part of their responsibility to protect the public. This includes establishing rules of practice and conduct and taking disciplinary action against licensees who engage in misconduct.

In the state of Kentucky, licensing and registration of dentists, dental hygienists contain the following main requirements among others. (To see a complete list of Kentucky Laws and Rules on Licensure see [APPENDIX A.](#))

- Provide proof that the applicant is a graduate of a Commission on Dental Accreditation (CODA) accredited dental school or college or dental department of a university.

- Provide proof that the applicant has successfully completed Part I and Part II of the National Board Dental Examination, which is written and theoretical, conducted by the Joint Commission on National Dental Examinations.
- Each individual desiring initial licensure as a dentist by examination shall successfully complete a clinical examination within the five (5) years preceding the filing of the application. The board shall accept the following regional clinical examinations:
 - (a) The examination of the Council of Interstate Testing Agencies (CITA);
 - (b) The examination of the Central Regional Dental Testing Service (CRDTS);
 - (c) The examination of the Commission on Dental Competency Assessments (CDCA);
 - (d) The examination of the Southern Regional Testing Agency (SRTA);
 - and (e) The examination of the Western Regional Examining Board (WREB).

An individual desiring initial licensure as a dentist by examination more than two (2) years after fulfilling all the requirements of his or her CODA accredited dental education shall:

- (a) Hold a license to practice dentistry in good standing in another state or territory of the United States or the District of Columbia;
- or (b) If the applicant does not hold a license to practice dentistry in good standing, complete a board approved refresher course prior to receiving a license to practice dentistry in the Commonwealth of Kentucky.

An applicant who has taken a clinical examination three (3) times and failed to achieve a passing score shall not be allowed to sit for the examination again until the applicant has completed and passed a remediation plan approved by the board.

REQUIREMENTS FOR LICENSURE BY CREDENTIALS

Each individual desiring initial licensure as a dentist by credentials shall: (1) Complete all of the requirements listed in Section 1 of this administrative regulation; (2) Provide proof of having passed a state, regional, or national clinical examination used to determine clinical competency in a state or territory of the United States or the District of Columbia; and (3) Provide proof that, for five (5) of the six (6) years immediately preceding the filing of the application, the applicant has been engaged in the active practice of dentistry when he or she was legally authorized to practice dentistry in a state or territory of the United States or the District of Columbia if the qualifications for the authorization were equal to or higher than those of the Commonwealth of Kentucky.

WHAT OTHER PROFESSIONS HAVE AN INTERSTATE COMPACT?

Interstate Medical Licensure Compact (IMLC)

Nursing Licensure Compact (NLC) and Advanced Practice Nurse Compact (APRN Compact)

Emergency Medical Service Officials Licensure Compact (EMS Compact)

Physical Therapists Licensure Compact (PT Compact)

Psychology Interjurisdictional Compact (PSYPACT)

Audiology and Speech Language Pathology Interstate Compact

Occupational Therapy Interstate Licensure Compact (OT Compact)

Counseling Interstate Licensure Compact

The following table compares the two pieces of legislation for our state to consider:

	AADB Compact	CSG DDH Compact
DO YOU RECEIVE A STATE DENTAL LICENSE?	YES (EXPELITED LICENSE)	NO (PRIVELEGE FROM COMPACT COMMISSION)
WHO ISSUES YOUR LICENSE OR PRIVELEGE?	PARTICIPATING STATE BOARD	COMPACT COMMISSION
WHO HAS DIRECT AUTHORITY ON YOUR PRACTICE?	STATE DENTAL BOARD	COMPACT COMMISSION
IS HAND-SKILL TESTING BY AN INDEPENDENT THIRD-PARTY MANDATORY?	YES (ADEX)	YES, Many clinical testing instruments accepted
IS GRADUATION FROM A C.O.D.A. ACCREDITED DENTAL SCHOOL MANDATORY?	YES	YES
WHO HAS DIRECT JURISDICTION OVER COMPLIANCE, LEGAL ACTIONS, ORDERS, ETC. IN YOUR STATE?	STATE DENTAL BOARD	COMPACT COMMISSION (NO REAL STATE LICENSE, NO JURISDICTION OVER NON-LICENSEES)
ARE THERE FISCAL IMPACTS TO STATE AND DENTAL BOARDS	Unknown	YES, UNKOWN YEARLY CHARGES
DO STATUTES NEED TO BE CHANGED OR SUPERSEDED?	NO	YES (EG. IF STATES REQUIRE HAND-SKILL EXAM OR C.O.D.A. DENTAL OR DENTAL HYGIENE SCHOOL-COMPACT COMMISSION RULES APPLY)
IS THERE A TWO-TIER LICENCING REQUIREMENT?	NO	YES, (PRIVELEGE ONLY REQUIRED TO FOLLOW HOME STATE REQUIREMENTS)
COMPACT MODEL?	INTERSTATE MEDICAL COMPACT	?

ADDITIOANAL KDA WORK GROUP DISCUSSION ITEMS

Stakeholders affected by the state adoption of the DDHC compact, AADB compact or any other interstate licensure compact include:

- i. KY Licensed Dentists (Total 2024-2025 Licensees: 2, 961. General Dentists: 2,429. Specialists: 532)
- ii. Active KY Licensed Hygienists (2,794)
- iii. Out of state Licensed Dentists
- iv. Out of state Licensed Hygienists
- v. Military dentists, hygienists and their spouses
- vi. Dental Education Institutions: faculty, students

[University of Louisville School of Dentistry](#)

[The College of Dentistry | - University of Kentucky](#)

[Dental Medicine | UPIKE | University of Pikeville](#)

- vii. Dental Hygiene Education Institutions: faculty, students

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Program Director: Jamie Ely, RDH, MPH

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- viii. Dental school graduates – wanting to relocate early upon graduation and more frequently in the first six years of employment than older generations.
- ix. Dental Hygiene Programs' graduates
- x. "The BOARD" / KBD / The Kentucky Board of Dentistry is a semi-autonomous agency within state government. Its mission is to protect the public by regulating the practice of dentistry through administration of the [Dental Practice Act](#). This primarily involves licensing oral health professionals to ensure they are qualified to treat patients. Dentists and dental hygienists must successfully complete a rigorous program of education, training, and testing before being issued a license.
- xi. Public- the safety, protection, well-being, and oral health of the commonwealth of Kentucky.
- xii. KDA / Kentucky Dental Association: Next executive board meeting February 17, 2023.
- xiii. Military – DOD.

Fort Campbell

Towards the southwest portion of Kentucky, right on the border that separates the Bluegrass State from Tennessee, lies [Fort Campbell](#). Those who are stationed at Fort Campbell are only a short drive south of downtown Hopkinsville, KY, though Clarksville, TN, is also within proximity.

Fort Knox

[Fort Knox](#) is found around 45 miles southwest of Louisville, KY. Home to 12,000 people, Fort Knox covers three counties.

The Blue Grass Army Depot (BGAD)

In addition to the two military bases in KY, there is also the BGAD. Similar to an active Army military base in Kentucky, it is used as a place to store chemical weapons and ammo. The U.S. Army also uses it to repair supplies.

CURRENT STATUS OF THE DDHC

To date, the compact has been **enacted** in three states: **Iowa, Tennessee, and Washington**. It has been **introduced** in Kansas and Minnesota, secured sponsors in Michigan and Wisconsin, passed the Assembly in New Jersey, passed the Senate in Ohio, and is pending in committee in Pennsylvania. Nearly a dozen other states have indicated their intent to introduce the compact in 2024. The compact will become active once it has been enacted in **seven** states. Tennessee's board and state association unaware of legislation until enacted (Steve R.).

LEGAL ISSUES

This KDA work group needs additional time and resources to decipher the legal ramifications of adopting any licensure compact. Our state board of dentistry and the Kentucky Dental Association needs to understand many imperative issues including but not limited to:

- How a compact licensee with DDHC compact "privilege" would be held accountable to compliance, criminal, orders, and other legal actions?
- What, **if any**, jurisdiction and agency the Kentucky Board of Dentistry retains in adjudicating individuals with compact "privileges?"
- What are the timeline, costs, restrictions on our state's ability to terminate participation in the compact? (KBD must give 180 days' notice of intent to leave DDHC. Statute required for authorized withdrawal from DDHC.)
- How are the compacts managed once enacted? Have major changes in rules impacted their compact once enacted?

CURRENT LICENSURE IN KY IS NOT OVERLY CUMBERSOME

The state of Kentucky is one of the more liberal states with respect to the diversity of regional initial licensure examination requirements. Kentucky recognizes **CDCA, CITA, CRDTS, SRTA, WREB** examinations successfully passed within the five (5) years preceding the filing of the application for dental licensure. Kentucky statutes and regulations also accommodate for licensure by credentials as stipulated in **201 Kentucky Administrative Regulations 8:533. Licensure of dentists (Appendix A)**. The Kentucky Revised Statutes Chapter 313 Practice of Profession. (313.030 Licensing and registration of dentists, dental hygienists, and dental assistants -- Duration, expiration, and renewal -- Disciplinary action by board - - Board's power to extend license or registration) clearly states what requirements an applicant must meet in order to obtain a professional license to practice in our state. These requirements are not overly cumbersome, nor are they financially restrictive.

CURRENT RECOMMENDATION OF THE KDA COMPACT WORK GROUP

Because we cannot at this time answer the legal, fiscal, and contract involvement questions, and there have not been any licensee requests to the KBD to alleviate the burden of interstate licensure, this

KDA work group's recommendation is to not support the adoption of any legislation involving dental or dental hygiene licensure, or any interstate compact legislation, until these mitigating factors and legal questions have been satisfactorily resolved.

ENDNOTES

^A Report of the Task Force on Assessment of Readiness for Practice Issued September 2018 A Joint Task Force of: American Dental Association, American Dental Education Association and American Student Dental Association

¹ American Dental Association Health Policy Institute. Dentist migration across state lines. Chicago: American Dental Association, 2016. At: https://www.ada.org/en/~media/ADA/Science%20and%20Research/HPI/Files/HPIgraphic_0816_1. Accessed November 2017.

² Single encounter, procedure-based examinations on patients are administered by five dental clinical testing agencies in the United States. The candidate is required to preselect usually up to three patients who have met predetermined criteria and to ensure the patients are present on the day of the test. The test takes place on one day. During this single encounter the candidate must perform the following treatment on the patient(s): periodontal scaling/root planing, an anterior restoration, and a posterior restoration. Patients receive only these specific, limited procedures.

³ ADA Council on Ethics, Bylaws, and Judicial Affairs. Ethical considerations when using patients in the examination process. Chicago: American Dental Association, 2013. At:

[https://www.ada.org/~media/ ADA/Education%20and%20Careers/Files/ethicalconsiderations-when-using-patients-in-the-examinationprocess.pdf?la=en](https://www.ada.org/~media/ADA/Education%20and%20Careers/Files/ethicalconsiderations-when-using-patients-in-the-examinationprocess.pdf?la=en).

⁴ Kleiner MM. Reforming occupational licensing policies (Discussion Paper 2015-01). Washington, DC: The Hamilton Project, Brookings, 2015.

⁵ Johnson JE, Kleiner MM. Is occupational licensing a barrier to interstate migration? (NBER Working Paper No. 24107). Cambridge, MA: National Bureau of Economic Research, December 2017.

<p>Initial Licensure Examination Requirements</p>	<p>CDCA, CITA, CRDTS, SRTA, WREB</p> <p>Successfully passed within the five (5) years preceding the filing of the application for licensure.</p> <p>Source: Kentucky Board of Dentistry Initial Licensure - Licensure by Examination</p>
<p>General Licensure Requirements</p>	<p>Kentucky Revised Statutes Chapter 313 Practice of Profession</p> <p>313.030 Licensing and registration of dentists, dental hygienists, and dental assistants -- Duration, expiration, and renewal -- Disciplinary action by board - - Board's power to extend license or registration.</p> <p>(1) The license or registration held by a dentist, dental hygienist, or dental assistant shall be valid for a period of two (2) years.</p> <p>(2) Each license or registration held by a dentist, dental hygienist, or dental assistant shall expire on December 31. A dentist's license shall expire in odd-numbered years, while all other licenses or registrations issued by the board shall expire in even-numbered years.</p> <p>(3) Each license or registration held by any person issued under the provisions of this chapter shall be renewed at least biennially. Upon receipt of the application and fee, the board shall verify the accuracy of the application to determine whether the licensee or person seeking licensure or registration has met all the requirements as set forth in this chapter and in the administrative regulations promulgated by the board, and, if so, shall issue to the applicant a license or registration to practice or engage in the activity for the ensuing licensure or registration period. Such license or registration shall render the holder a legal practitioner of the practice or activity specified in the license or registration for the period stated on it. The board shall prescribe by administrative regulation promulgated in accordance with KRS Chapter 13A the beginning and ending of the licensure or registration period.</p> <p>(4) Any person who is licensed or registered by the board who allows his or her license or registration to lapse by failing to renew the license or registration as provided in this section may be reinstated by the board on payment of the current fee for original licensure or registration in addition to any late fees and by meeting the requirements of administrative regulations promulgated by the board.</p> <p>(5) An application for renewal of a license or registration shall be completed online or, if a written request is made to the board prior to November 1 of the year of expiration, a paper application shall be sent to the last known address of each licensee or certified or registered person requesting a paper application.</p> <p>(6) Any person engaging in any practice or activity regulated by the board during the time his or her license or registration has lapsed shall be considered practicing with an expired license or registration and shall be subject to the penalties provided for violations of this chapter.</p> <p>(7) Failure to receive the application for renewal of a license or registration shall not relieve a dentist, dental hygienist, or dental assistant from the duty to renew his or her license or registration prior to December 31 of the year in which the</p>

	<p>license or registration expires.</p> <p>(8) The duration of any license or registration issued by the board may be limited by disciplinary action of the board.</p> <p>(9) Every license or registration issued by the board shall have the seal of the board affixed. A holder of a license or registration shall retain it in his or her possession and be prepared to exhibit it upon demand by an employer or anyone to whom the holder of the license or registration offers treatment or any board or staff member of the Kentucky Board of Dentistry. Each license or registration issued by the board shall be posted in a conspicuous place in each place of employment of the dentist, dental hygienist, or dental assistant.</p>
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The ADA attempts to keep this information current based on information from state dental boards, clinical testing agencies and state dental associations. Individuals seeking dental licensure should consult with the state board of dentistry and their professional advisors for the complete and most recent dental licensure information, application requirements, forms and fees.

- (10) Failure or refusal to produce a license or registration upon demand shall be prima facie evidence that no such license or registration exists.
- (11) In order to ensure a proper transition during the implementation of the provisions of this section, the board may, for a period of no longer than three (3) years, extend a license or registration of any person in order to utilize the expiration date provided for in this section. The board shall, in writing, notify each person whose license or registration is extended of the extension and the new date of expiration. The extension shall be without charge.

201 Kentucky Administrative Regulations 8:533. Licensure of dentists. Section 1. General Licensure Requirements.

- An applicant desiring dental licensure in the Commonwealth shall at a minimum:
- (1) Understand, read, speak, and write the English language with a comprehension and performance level equal to at least the ninth grade of education, verified by testing as necessary;
 - (2) Submit a completed, signed, and notarized Application for Dental Licensure with an attached applicant photo taken within the past six (6) months;
 - (3) Pay the fee required by 201 KAR 8:520;
 - (4) Not be currently subject to disciplinary action pursuant to KRS Chapter 313 that would prevent licensure;
 - (5) Complete and pass the board's jurisprudence exam;
 - (6) Provide proof of having current certification in cardiopulmonary resuscitation (CPR) which meets or exceeds the American Heart Association Guidelines for CPR and ECC;
 - (7) Submit to a nationwide state and federal criminal background check by fingerprint through the Department of Kentucky State Police;
 - (8) Provide verification within three (3) months of the date the application is received at the office of the board of any license to practice dentistry held previously or currently in any state or jurisdiction;
 - (9) Provide proof that the applicant is a graduate of a Commission on Dental Accreditation (CODA) accredited dental school or college or dental department of a university;
 - (10) Provide proof that the applicant has successfully completed Part I and Part II of the National Board Dental Examination, which is written and theoretical, conducted by the Joint Commission on National Dental Examinations; and
 - (11) Provide a written explanation for any positive returns on a query of the National Practitioner Data Bank.

Section 2. Requirements for Licensure by Examination.

- (1) Each individual desiring initial licensure as a dentist by examination shall complete all of the requirements listed in Section 1 of this administrative regulation.
- (2) Each individual desiring initial licensure as a dentist by examination shall successfully complete a clinical examination within the five (5) years preceding the filing of the application. The board shall accept the following regional clinical examinations:
 - (a) The examination of the Council of Interstate Testing Agencies (CITA);
 - (b) The examination of the Central Regional Dental Testing Service (CRDTS);
 - (c) The examination of the Commission on Dental Competency Assessments (CDCA);
 - (d) The examination of the Southern Regional Testing Agency (SRTA); and
 - (e) The examination of the Western Regional Examining Board (WREB).
- (3) An individual desiring initial licensure as a dentist by examination more than two (2) years after fulfilling all of the requirements of his or her CODA accredited dental education shall:

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	<ul style="list-style-type: none">(a) Hold a license to practice dentistry in good standing in another state or territory of the United States or the District of Columbia; or(b) If the applicant does not hold a license to practice dentistry in good standing, complete a board approved refresher course prior to receiving a license to practice dentistry in the Commonwealth of Kentucky.(4) An applicant who has taken a clinical examination three (3) times and failed to achieve a passing score shall not be allowed to sit for the examination again until the applicant has completed and passed a remediation plan approved by the board.
License by Credential/ Endorsement Requirements	<p>201 Kentucky Administrative Regulations 8:533. Licensure of dentists.</p> <p>Section 3. Requirements for Licensure by Credentials.</p> <p>Each individual desiring initial licensure as a dentist by credentials shall:</p> <ul style="list-style-type: none">(1) Complete all of the requirements listed in Section 1 of this administrative regulation;(2) Provide proof of having passed a state, regional, or national clinical examination used to determine clinical competency in a state or territory of the United States or the District of Columbia; and(3) Provide proof that, for five (5) of the six (6) years immediately preceding the filing of the application, the applicant has been engaged in the active practice of dentistry when he or she was legally authorized to practice dentistry in a state or territory of the United States or the District of Columbia if the qualifications for the authorization were equal to or higher than those of the Commonwealth of Kentucky.
Specialty Practice	<p>Kentucky Revised Statutes Chapter 313 Practice of Profession</p>

	<p>313.035 Scope of administrative regulations -- Specialties</p> <p>(1) The board shall promulgate administrative regulations in accordance with KRS Chapter 13A relating to dentists. The administrative regulations shall include the classification of and licensure of dentists, by examination or credentials, the licensure of specialists, student limited licenses, faculty limited licenses, reciprocity, retirement of a license, reinstatement of a license, charity licenses, and conscious sedation and anesthesia permits. (2) Renewal programs shall be organized to include continuing education approved by the board.</p> <p>(3) For the purposes of licensure of specialists the board shall only recognize fields of specialty duly recognized and approved by the American Dental Association. Individuals licensed as specialists shall not practice outside of that specialty except as provided for in charitable dentistry as defined by administrative regulation, during a declared disaster by order of the Governor, or when the special needs of the patient require they be followed past the age of eighteen (18) by a pediatric dentist.</p> <p>201 Kentucky Administrative Regulations 8:533. Licensure of dentists. Section 8. Requirements for Specialty Licensure</p> <p>Each individual desiring initial licensure as a specialist as defined by KRS 313.010(9) shall:</p> <p>(1) Submit a completed, signed, and notarized Application for Specialty Licensure with an attached applicant photo taken within the past six (6) months;</p> <p>(2) Pay the fee required by 201 KAR 8:520;</p> <p>(3) Hold an active Kentucky license to practice general dentistry prior to being issued a specialty license; and</p> <p>(4) Submit satisfactory evidence of completing a CODA accredited graduate or postgraduate specialty program after graduation from a dental school.</p>
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<p>Continuing Education</p>	<p>201 Kentucky Administrative Regulations 8:533. Licensure of dentists. Section 9. Minimum Continuing Education Requirements.</p> <p>(1) Each individual desiring renewal of an active dental license shall complete thirty (30) hours of continuing education that relates to or advances the practice of dentistry and would be useful to the licensee's practice.</p> <p>(2) Acceptable continuing education hours shall include course content designed to increase:</p> <p>(a) Competency in treating patients who are medically compromised or who experience medical emergencies during the course of dental treatment;</p> <p>(b) Knowledge of pharmaceutical products and the protocol of the proper use of medications;</p>
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- (c) Competence to diagnose oral pathology;
 - (d) Awareness of currently accepted methods of infection control;
 - (e) Knowledge of basic medical and scientific subjects including biology, physiology, pathology, biochemistry, pharmacology, epidemiology, and public health;
 - (f) Knowledge of clinical and technological subjects;
 - (g) Knowledge of subjects pertinent to patient management, safety, and oral healthcare;
 - (h) Competency in assisting in mass casualty or mass immunization situations;
 - (i) Clinical skills through the volunteer of clinical charitable dentistry that meets the requirements of KRS 313.254;
 - (j) Knowledge of office business operations and best practices; or
 - (k) Participation in dental association or society business meetings.
- (3) A minimum of ten (10) hours shall be taken in a live interactive presentation format.
- (4) A maximum of ten (10) hours total may be taken that meet the requirements of subsection (2)(i) - (k) of this section.
- (5) A minimum of three (3) hours of continuing education shall be taken in the use of the Kentucky All Schedule Prescription Electronic Reporting System (KASPER), pain management, or addiction disorders.
- (6) Dentists who hold a board-issued sedation permit shall also meet the continuing education requirements of 201 KAR 8:550, Section 8.
- (7) All continuing education hours shall be verified by the receipt of a certificate of completion or certificate of attendance bearing:
- (a) The signature of or verification by the provider;
 - (b) The name of the licensee in attendance;
 - (c) The title of the course or meeting attended or completed;
 - (d) The date of attendance or completion;
 - (e) The number of hours earned; and
 - (f) Evidence of the method of delivery if the course was taken in a live interactive presentation format.
- (8) It shall be the sole responsibility of the individual licensee to obtain documentation from the provider or sponsoring organization verifying participation as established in subsection (7) of this section and to retain the documentation for a minimum of five (5) years.
- (9) At license renewal, each licensee shall attest to the fact that he or she has complied with the requirements of this section.
- (10) Each licensee shall be subject to audit of proof of continuing education compliance by the board.
- Section 10. Requirements for Renewal of a Dental License.**
- (1) Each individual desiring renewal of an active dental license shall:
- (a) Submit a signed, completed Application for Renewal of Dental Licensure;

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- (b) Pay the fee required by 201 KAR 8:520;
- (c) Maintain, with no more than a thirty (30) day lapse, CPR certification that meets or exceeds the American Heart Association Guidelines for CPR and ECC unless a hardship waiver is approved by the board; and
- (d) Meet the continuing education requirements as provided for in Section 9 of this administrative regulation except in the following cases:
1. If a hardship waiver has been submitted to and is subsequently approved by the board;
 2. If the licensee graduated in the first year of the biennial license period, the licensee shall complete one-half (1/2) of the hours as outlined in Section 9 of this administrative regulation; and
 3. If the licensee graduated in the second year of the biennial license period, the licensee shall not be required to complete the continuing education requirements outlined in Section 9 of this administrative regulation.
- (2) If a licensee has not actively practiced dentistry in the two (2) consecutive years preceding the filing of the renewal application, he or she shall complete and pass a board approved refresher course prior to resuming the active practice of dentistry.

Section 11. Retirement of a License.

- (1) Each individual desiring retirement of a dental license shall submit a completed and signed Retirement of License Form.
- (2) Upon receipt of this form, the board shall send written confirmation of retirement to the address provided by the licensee on the Retirement of License form.
- (3) A licensee shall not retire a license that has a pending disciplinary action against it.
- (4) Each retirement shall be effective upon the processing of the completed and signed Retirement of License Form by the board.

Section 12. Reinstatement of a License.

- (1) Each individual desiring reinstatement of a properly retired dental license shall:
- (a) Submit a completed, signed, and notarized Application to Reinstate a Dental License with an attached applicant photo taken within the past six (6) months;
 - (b) Pay the fee required by 201 KAR 8:520;
 - (c) Show proof of having current certification in CPR that meets or exceeds the American Heart Association Guidelines for CPR and ECC;
 - (d) Provide verification within three (3) months of the date the application is received at the office of the board of any license to practice dentistry held previously or currently in any state or jurisdiction;
 - (e) Submit to a nationwide state and federal criminal background check by fingerprint through the Department of Kentucky State Police; and
 - (f) Provide a written explanation for any positive returns on a query of the National Practitioner Data Bank.
- (2) If an individual applies to reinstate a license within two (2) years of when the license was last active, the individual shall provide proof of having met the continuing education requirements as outlined in Section 9 of this administrative regulation within those two (2) years.
- (3) If the applicant has not actively practiced dentistry in the two (2) consecutive years immediately preceding the filing of the reinstatement application, the applicant shall complete and pass a refresher course approved by the board.
- (4) If a license is reinstated in the first year of the biennial license period, the licensee shall complete all of the continuing education requirements as outlined in Section 9 of this administrative regulation prior to the renewal of the license.

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(5) If a license is reinstated in the second year of the biennial license period, the licensee shall complete one-half (1/2) of the hours as outlined in Section 9 of this administrative regulation prior to the renewal of the license.

Section 13. Requirements for Verification of Licensure. Each individual desiring verification of a dental license shall:

- (1) Submit a signed and completed Verification of Licensure or Registration Form; and
- (2) Pay the fee required by 201 KAR 8:520.

Section 14. Requesting a Duplicate License. Each individual desiring a duplicate dental license shall:

- (1) Submit a signed and completed Duplicate License or Registration Request Form; and
- (2) Pay the fee required by 201 KAR 8:520.

Section 15. Issuance of Initial Licensure. If an applicant has completed all of the requirements for licensure within six (6) months of the date the application was received at the office of the board, the board shall:

- (1) Issue a license in sequential numerical order; or
- (2) Deny licensure due to a violation of KRS Chapter 313 or 201 KAR Chapter 8. Section 16.

Incorporation by Reference.

(1) The following material is incorporated by reference:

- (a) "Application for Charitable Dental Limited Licensure", May 2023;
- (b) "Application for Dental Licensure", May 2023;
- (c) "Application for Renewal of Dental Licensure", May 2023;
- (d) "Application for Specialty Licensure", February 2023;
- (e) "Application to Reinstate a Dental License", May 2023;
- (f) "Duplicate License or Registration Request Form", December 2022;
- (g) "Retirement of License Form", February 2023;
- (h) "Statement Regarding Faculty Licensure Limitations", May 2023;
- (i) "Statement Regarding Student Licensure Limitations", May 2023;
- (j) "Verification of Licensure or Registration Form", February 2023; and
- (k) "2020 American Heart Association Guidelines for CPR and ECC", 2020.

(2) This material may be inspected, copied, or obtained, subject to applicable copyright law, at the Kentucky Board of Dentistry, 312 Whittington Parkway, Suite 101, Louisville, Kentucky 40222, Monday through Friday, 8 a.m. through 4:30 p.m. This material is also available on the board's Web site at <http://dentistry.ky.gov>.

(49 Ky.R. 1859, 2273; eff. 7-24-2023.)

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NON-DUES REVENUE WORK GROUP. Dr. Matt Johnson, chairman of the Non-Dues Revenue Work Group gave a verbal report. The entities they have discussed will be invited to become patrons. If they agree, the new patrons will be reported to the KDA Board of Directors.

20.NEW BUSINESS.

MOTION. Dr. Matt Johnson moved to change the Presidential Non Dues Revenue Work Group to a KDA Executive Board Work Group. **Dr. Andy Elliott** seconded the motion.

ACTION: THE MOTION WAS TABLED UNTIL THE NEXT KDA BOARD MEETING.

MOTION: Dr. Andy Elliott moved to request the components to sponsor the upcoming Strategic Planning Meeting by contributing \$1,000.00 to \$2,000.00 depending on the outcome of the total expenses. The KDA Executive Committee will work through the details. **Dr. Matt Johnson** seconded the motion.

ACTION: APPROVED.

MOTION: Dr. Hancock moved to send a letter of support to the President of Murray State University to expand the hygiene program. **Dr. Matt Johnson** seconded the motion.

ACTION: APPROVED.

21. EXECUTIVE SESSION. The Executive Board moved into Executive Session for the purpose of discussion personnel issues.

22. FUTURE KDA BOARD MEETINGS. The next KDA Board meeting will be June 1, 2024 and tentatively October 5, 2024.

23. ADJOURNMENT. The meeting was adjourned at 1:30 PM.

Respectfully submitted,

Dr. Kevin Wall
Secretary/Treasurer