Meeting Notice

Missouri Dental Board

May 27, 2011

Missouri Council of School Administrators
3550 Amazonas Drive
Jefferson City, Missouri

Notification of special needs as addressed by the Americans with Disabilities Act should be forwarded to the Missouri Dental Board, 3605 Missouri Boulevard, Jefferson City, Missouri 65109 or by calling 573-751-0040 to ensure available accommodations. The text telephone for the hearing impaired is (800) 735-2966.

Except to the extent disclosure is otherwise required by law, the Missouri Dental Board is authorized to close meetings, records and votes, to the extent they relate to the following: Chapter 610.021, Subsections (1), (3), (5), (7), (13), (14), and Chapter 324.001.8 and 324.001.9 RSMo.

The Missouri Dental Board may go into closed session at any time during the meeting. If the meeting is closed, the appropriate section will be announced to the public with the motion and vote recorded in open session minutes.

Please be aware that according to Missouri law, the Board can have open discussion and votes only on items included on the open agenda. If there is a topic you would like included on the open agenda, please notify the Board office not less than forty-eight (48) hours prior to the start of the meeting.

Please see the attached tentative agenda for this meeting.

cc: Members, Missouri Dental Board
    Members, Advisory Commission for Dental Hygienists
    Tina Crow Halcomb, Attorney-at-Law
    Office of Administration
    Vicki Wilbers, Executive Director, Missouri Dental Association
    President, Missouri Dental Association
    President, Missouri Dental Hygienists’ Association
    Missouri Dental Assistants’ Association
    Missouri Dental Assistants Educators
    Jane Rackers, Director, Division of Professional Registration
Open Agenda

Missouri Dental Board
May 27, 2011

Missouri Council of School Administrators
3550 Amazonas Drive
Jefferson City, MO  65109

1. 10:00 a.m. Call to Order  Dr. Titterington
2. Roll Call  Dr. Aubert
3. Approval of the Agenda  Dr. Titterington
4. Arnold S. Barber, D.D.S.  Dr. Titterington
   • 10:00 a.m. – Probation Violation Hearing
5. Missouri Dental Board review of Greater Springfield Dental Society mid-level provider proposal  Dr. Titterington
6. Motion to go into closed session for deliberation on hearing  Dr. Saladin
   Closed meeting pursuant to Sections 610.021 (1), (3), (5), (7), (13) and (14), RSMo, 324.001.8, RSMo and 324.001.9, RSMo.
7. Adjournment
The open meeting of the Missouri Dental Board was called to order by Dr. Paul P. Titterington, President, at approximately 10:03 a.m. on Friday, May 27, 2011 at the Missouri Council of School Administrators, 3550 Amazonas Drive, Jefferson City, Missouri.

BOARD MEMBERS PRESENT:
Dr. Paul P. Titterington, President
Dr. Mark F. Saladin, Vice President
Dr. Eric J. Aubert, Secretary
Dr. Kevin D. Wallace, Member
Ms. Deborah K. Polc, R.D.H., Member
Mr. Randall Relford, Public Member

STAFF MEMBERS PRESENT:
Brian Barnett, Executive Director
Bonnie Mengwasser, Licensing Supervisor
Kevin Davidson, Investigator II

LEGAL COUNSEL PRESENT:
Earl Kraus, Division Counsel
Audrey Danner, Division Law Clerk

To better track the order in which items were taken up on the agenda, each item in the minutes will be listed in the order it was discussed in the meeting.

APPROVAL OF THE AGENDA
A motion was made by Dr. Saladin and seconded by Dr. Aubert to approve the open agenda as written. The motion carried unanimously.

CLOSED SESSION
At approximately 10:06 a.m., a motion was made by Dr. Saladin and seconded by Dr. Aubert to move into closed session pursuant to Chapter 610.021, sections (1), (3), (5), (7), (13) and (14), RSMo, and Chapter 324.001.8 and 324.001.9, RSMo, for the purpose of discussing general legal actions, causes of action or litigation and any confidential or privileged communications between the Board and its attorney, and approval of closed
minutes. Those voting yes: Dr. Titterington, Dr. Saladin, Dr. Aubert, Dr. Wallace, Ms. Polc and Mr. Relford. The motion carried 6 to 0.

RECONVENE
The Board reconvened in open session at approximately 10:36 a.m.

GUESTS PRESENT:
Lori A. Bruce, R.D.H., Advisory Commission for Dental Hygienists
Debra Fletcher Adams, R.D.H., Advisory Commission for Dental Hygienists
Kari Schulte, Legal Counsel for Arnold S. Barber, D.D.S.
Janet Sell, Ozarks Technical Community College
Margaret Bell, R.D.H., Ozarks Technical Community College
Mary H. Burke, D.D.S.
Deborah Trunk, R.D.H., Missouri Dental Hygienists’ Association
Bonnie Branson, R.D.H., Ph.D., President, Missouri Dental Hygienists’ Association
John I. Haynes, D.D.S.
Patricia A. Lepp, R.D.H.
Ms. Wendy Wakefield, Greater St. Louis Dental Assistants Society
Ms. Marjorie Stoeker, Missouri College
Ms. Marcie Todd, Missouri College
Vickie A. Adams, R.D.H., Greater Springfield Dental Hygienists Association
Ms. Karen Dent, Missouri Primary Care Association/Oral Health Network of Missouri
Rolfe C. McCoy, D.M.D., Missouri Dental Association
Timothy S. Taylor, D.D.S., Greater Kansas City Dental Society
Jerry F. Cash, D.D.S.
Darren W. Mahaffey, D.D.S., Greater Springfield Dental Society
Sarah L. Mahaffey, D.D.S.
Jody B. Vance, D.D.S.
Stuart W. Scott, D.D.S.
Gilbert R. Hart, D.M.D.
Joseph E. Sokolowski, D.D.S.
John R. Landgraf, D.D.S.
John C. G’Sell, D.D.S., Missouri Academy of General Dentistry
Ms. Mary Lou Young
George H. Bailey, D.D.S., Missouri Dental Association
Ross A. Bennett, D.D.S.
Ernest W. Jackson, D.M.D.
Kwai L. Young, D.D.S., Missouri Dental Association
Jacob J. Lippert, D.D.S., Central Regional Dental Testing Service
Matthew A. Niewald, D.D.S.
Guy S. Deyton, D.D.S.
Merle A. Nunemaker, D.D.S., Missouri Dental Association
Ms. Vicki Wilbers, Executive Director, Missouri Dental Association
Mark R. Zust, D.D.S., President, Missouri Dental Association
David A. Groenke, D.M.D.
Adam J. Montgomery, D.D.S., President, Greater Springfield Dental Society
At approximately 10:41 a.m., the Board heard comments from the legal counsel representing both parties in the matter of Missouri Dental Board, Petitioner, v. Arnold S. Barber, D.D.S., Respondent, Case Number 2009-007207. The discussions were recorded by a court reporter and a transcript of the discussions will be retained as a permanent record of the Board. The discussions concluded at approximately 10:49 a.m.

CLOSED SESSION
At approximately 10:50 a.m., a motion was made by Dr. Saladin and seconded by Dr. Aubert to move into closed session pursuant to Chapter 610.021, sections (1), (3), (5), (7), (13) and (14), RSMo, and Chapter 324.001.8 and 324.001.9, RSMo, for the purpose of discussing general legal actions, causes of action or litigation and any confidential or privileged communications between the Board and its attorney, and approval of closed minutes. Those voting yes: Dr. Titterington, Dr. Saladin, Dr. Aubert, Dr. Wallace, Ms. Polc and Mr. Relford. The motion carried 6 to 0.

RECONVENE
The Board reconvened in open session at approximately 11:08 a.m.

ARNOLD S. BARBER, D.D.S.
Mr. Kraus announced that the Board has deliberated on the request for a continuance of Dr. Barber’s probation violation hearing, and it was the decision of the Board to continue the hearing. Dr. Barber and his attorney will be notified of the new hearing date once it is scheduled.

Dr. Titterington introduced the Board’s recently appointed public member, Mr. Randall Relford, as well as Mr. Kevin Davidson, the Board’s new investigator.

CLOSED SESSION
At approximately 11:24 a.m., a motion was made by Dr. Saladin and seconded by Dr. Aubert to move into closed session pursuant to Chapter 610.021, sections (1), (3), (5), (7), (13) and (14), RSMo, and Chapter 324.001.8 and 324.001.9, RSMo, for the purpose of discussing general legal actions, causes of action or litigation and any confidential or privileged communications between the Board and its attorney, and approval of closed minutes. Those voting yes: Dr. Titterington, Dr. Saladin, Dr. Aubert, Dr. Wallace, Ms. Polc and Mr. Relford. The motion carried 6 to 0.

RECONVENE
The Board reconvened in open session at approximately 12:03 p.m.
MISSOURI DENTAL BOARD REVIEW OF THE GREATER SPRINGFIELD DENTAL SOCIETY’S MID-LEVEL PROVIDER PROPOSAL

The Board heard the following comments from the below organizations and individuals:

Missouri Dental Association (MDA)
Dr. Mark Zust informed the Board that the MDA cannot support the development of a dental therapist in Missouri. The MDA believes that adding this new provider to the dental team is not a cure-all for solving the access to care issue, but rather, it needs to be part of a larger, more comprehensive approach that also places heavier focus on prevention efforts. The MDA believes the dental profession must work to improve the dental health safety net and to place renewed focus on oral health education and prevention. The MDA feels the dental therapist proposal places too much focus on restoration and not enough on prevention. Instead of a dental therapist, the MDA supports the development of a community dental health coordinator and an oral preventive assistant.

Greater Springfield Dental Society (GSDS)
Dr. Adam Montgomery reported that a motion was passed 14 to 2 by the Board of Directors of the Greater Springfield Dental Society in favor of forwarding the proposal of a mid-level dental therapist to the Missouri Dental Board. Dr. Darren Mahaffey informed the Board that after studying the recent trends in dentistry, several members of the GSDS feel it is inevitable that within approximately the next ten (10) years, the dental profession in Missouri will be dealing with the dental therapist model, therefore, they believe that licensed dentists in Missouri should be a part of developing the language to create a dental therapist.

Missouri Dental Hygienists’ Association (MDHA)
Dr. Bonnie Branson reported that over the past four (4) years, the MDHA has enjoyed a fairly open and cooperative relationship with the Board and the MDA. This relationship has created a level of respect for all of us as oral health professionals. The MDHA feels it is critical that a respectful and cooperative relationship continue in order for any changes to take place in the current model of dentistry. Dr. Branson said that the MDHA feels that a dental hygienist has valuable background, which could serve as a stepping stone for a dental therapist provider. The MDHA is submitting an advanced practice dental hygienist companion proposal that it feels should go hand-in-hand with the dental therapist proposal the Board is reviewing. The MDHA believes that a dental therapist should work collaboratively with a dentist and that in order for a dental therapist to provide dental hygiene services, s/he must have completed a competency-based curriculum equal to that of a dental hygienist, as well as successfully passed all associated credentialing exams. The MDHA also believes that a dental therapist must be educated in an accredited program and should have direct access to the public through a collaborative arrangement in order to serve the needs of the under-served and un-served.
Missouri Academy of General Dentistry (MoAGD)
Dr. John G’Sell reported that the MoAGD stands in favor to increased access to care, but is opposed to the proposed legislation. The MoAGD believes that only licensed dentists should be allowed to perform irreversible procedures. The MoAGD also stands in opposition to the creation of a second tier of dental providers. The MoAGD believes that DDS and DMD degrees represent the minimum competency required for performing operative dentistry, tooth extractions, and any other irreversible procedures performed in dentistry. Dr. G’Sell provided the Board with the Academy of General Dentistry’s (AGD) “White Paper on Increasing Access To and Utilization of Oral Health Care Services” and the AGD’s “Position on Workforce Issues.”

Greater St. Louis Dental Society (GSLDS)
Dr. Earl Larson reported that the GSLDS is opposed to the establishment of a dental health therapist model for the state of Missouri. The GSLDS believes that the dental therapist proposal would allow less trained, mid-level providers to perform surgical and irreversible restorative procedures. The GSLDS believes that diagnosis is an ongoing process that doesn’t necessarily end once treatment begins. As such, irreversible procedures are better suited to delivery by dentists who can take into account the pertinent aspects of the patient condition with respect to the current diagnostic information so as to adapt the treatment accordingly. The GSLDS is opposed to the creation of a two-tier system of dental delivery that the dental therapist model would provide because individuals who have the means to seek care by a fully trained dentist would continue to do so, while those of lesser means would rely on the care provided by mid-level providers with significantly less training.

Southwest Dental Society
Dr. Gregory Kivett informed the Board that he practices in Joplin and due to Sunday’s tornado, this issue has not been a top priority. Dr. Kivett will submit the Southwest Dental Society’s thoughts in writing soon. In general, the Southwest Dental Society does not support the proposal as written.

Individual Comments
Dr. John Landgraf informed the Board that he has been practicing dentistry in St. Louis for the past thirty-two (32) years. As a whole, Dr. Landgraf sees the benefits of the dental therapist program; however, he also realizes that there is a small percentage of time when things don’t go well, and he believes it is the dentists’ additional training and skill that prepares them for those situations. Recently, Dr. Landgraf was volunteering in an inner-city clinic, when a seventy-two (72)-year-old patient presented for care. Upon examination, Dr. Landgraf noticed that the patient’s teeth 20, 21, 22 and 23 were extremely mobile and had advanced periodontal disease. In reviewing her medical history, Dr. Landgraf learned that she previously had a heart attack and was on blood thinners. She had high blood pressure and was diabetic. When Dr. Landgraf removed teeth 22 and 23, bleeding was a severe problem, but he was able to stop the bleeding due to his advanced training.
Dr. Houston Ker informed the Board that he has been practicing dentistry for forty-five (45) years, and he is also retired from the military. Dr. Ker believes mid-level providers should be prevention-oriented; they need to be kept as technicians, not as dentists. Dr. Ker is not in favor of the proposal as it came from the Greater Springfield Dental Society.

Dr. Timothy Taylor believes there hasn’t been enough research done on this issue, and he thinks it would be difficult for the Board to make a decision at this point.

Dr. Rolfe McCoy would like to see the Board begin to draft a rule in order to make everyone more comfortable and really define what this is.

Ms. Lori Bruce applauded those who put together the proposal for a dental therapist model. Ms. Bruce sees the dental therapist and advanced practice dental hygienist proposals as a “win-win-win” for dentistry. The proposals would be a “win” for dentists in that it is an opportunity to take dental care to those who need it, a “win” for dental hygienists because it is an opportunity to extend their professional services, and a “win” for the public who can’t afford dental care.

Dr. Guy Deyton informed the Board that when he was part of the ad hoc committee for expanded functions, the Board heard all of these same concerns and arguments. Dr. Deyton is certain that the Board will construct rules that will adequately protect the public. He believes the question before the Board is if the current problem facing the dental profession will be solved by keeping things the same. If the answer is “no,” then it is up to the Board to implement the necessary changes.

Dr. Stuart Scott informed the Board that he is a pediatric dentist from Springfield. Dr. Scott feels it most prudent that the Board be in control of developing this provider. If the Board doesn't do something, another group may through legislation.

Ms. Mary Lou Young informed the Board that she manages a free dental clinic. A lot of the patients that are seen in the clinic have put off their health concerns for a long time, so they are often considered high risk patients. While working on the dental therapist proposal, Ms. Young would like the Board to keep in mind that many of the patients these providers will be serving will be considered high risk.

Dr. Mark Zust informed the Board that he has to take issue with a few of the comments that have been made. One issue Dr. Zust pointed out is that there is a difference between expanded functions dental assistants and the proposed dental therapist model because dental assistants are required to work under the direct supervision of a licensed dentist. The proposed dental therapist model would allow these providers to work without the supervision of a dentist. Dr. Zust also takes issue with the comment Dr. Branson made regarding a dental therapist being required to complete a competency based curriculum equal to that of a dental hygienist. Dr. Zust believes that dental therapists should be required to complete the same competency based curriculum as a dentist.
Dr. Darren Mahaffey informed the Board that the CPI Index for dental care has risen at a much higher rate than the normal cost for goods and services in the country. A person who had a hard time affording dental care ten (10) years ago, is having twice as hard of a time today. Dr. Mahaffey would like members of the dental profession to get past the issue of whether or not a dental therapist should be allowed in Missouri because he feels that it is inevitable that the dental therapist model will one day be a reality. He believes it should be up to the Board to create the rules in order to provide the appropriate standard of care and to protect the public.

Dr. Saladin believes it is inevitable that, at some point, there will be a change in the current model. Thinks this is a potential opportunity to create a model that will be a “win” for everybody. Dr. Saladin expressed his appreciation to everyone who came to the meeting to express their opinions and take part in the discussions.

Dr. Aubert expressed his concern that if dental therapists are to some day be licensed in Missouri, there needs to be some form of a strong competency examination, as well as a strong educational requirement.

Dr. Wallace made note that dental therapists have been in existence for eighty (80) years, in seven (7) different continents, and there has been a large amount of research done, which has proven the effectiveness and the safety of properly trained dental therapists. Dr. Wallace took issue with some of the comments that have been made regarding dental therapists being lesser trained providers. He argues that dental therapists are superiorly trained individuals for their scope of practice. For example, a graduate of a dental therapist program does approximately three hundred (300) stainless steel crowns before s/he graduates, whereas, Dr. Wallace recalls only doing three (3) prior to graduating dental school. Dr. Wallace reported that in his research, he’s not found any reports of negative outcomes with regard to dental therapists.

Dr. Aubert read a letter that was provided by Dr. William Kane with regard to this issue. In the letter, Dr. Kane states that, initially, he was not in favor of mid-level providers, such as dental therapists, but his opinion has drastically changed in the past eighteen (18) months. Dr. Kane practices in Dexter, Missouri, which has a population of approximately 7,000, and there are currently only three (3) dentists in the area. Dr. Kane works five (5) full days each week and turns down patients on a daily basis. In August 2009, Dr. Kane conducted a “back to school” screening at a local church, in which he screened one hundred fifty (150) children, and noticed that over half of those children had active dental disease. Since then, Dr. Kane volunteers one Saturday each month on the “Show Me Van” in Parma and Dexter, in which patients are seen on a first come, first serve basis for a twenty dollar ($20.00) fee. Dr. Kane frequently hears how difficult it is for the patients to afford dental care in both private dental offices and in the federally qualified healthcare centers. Because of this, Dr. Kane feels that a mid-level provider would be an excellent addition to provide more care to more patients at a far less cost.
A motion was made by Dr. Wallace and seconded by Dr. Saladin that the Board approve the proposed legislation for the dental therapist and advanced practice dental hygienist, agree to move the proposals forward in the next legislative session and begin to draft rules.

Dr. Jerry Cash expressed his concern that this is a profoundly important decision. The Board has heard from several organizations that oppose this proposal, and Dr. Cash doesn’t feel this issue should be voted on without a lot more research and without making sure the dentists in Missouri are made fully aware of the proposal.

Dr. Cheryl Haley with the Greater Springfield Dental Society urged the Board to move forward. The people that developed the proposal are extremely well informed. She understands the concerns about safety, but she also realizes that a licensed dentist will be the one to diagnose the need for treatment.

Dr. Nathan Bauer informed the Board that the MDA has recently put together an ad hoc committee that will be meeting soon. Dr. Bauer asked if the Board would consider tabling these discussions until after the ad hoc committee has a chance to meet.

Ms. Patricia Lepp applauded the Board for taking a position and moving forward with this proposal.

Dr. Ross Bennett pointed out that one of the reasons why nurse practitioners have been so successful and what puts them into a different category from dental therapists is that nurse practitioners have the ability to diagnose, prescribe and refer. Nurse practitioners are not performing surgery or doing any kind of invasive procedures. Dr. Bennett also pointed out that due to the fact that a new dental school is being constructed in Kirksville, Missouri, he knows that will have some affect on the access to care issue in our state.

Those voting yes: Dr. Aubert, Dr. Wallace, Dr. Saladin, Ms. Polc and Mr. Relford. Those voting no: Dr. Titterington. The motion carried 5 to 1.

A motion was made by Dr. Wallace and seconded by Ms. Polc to include an item on the July meeting agenda to discuss how many times an applicant can fail the competency examination before remediation. The motion carried unanimously.

**ADJOURNMENT**

There being no further open business to be brought before the Board at this time, a motion was made by Dr. Saladin and seconded by Dr. Aubert that this meeting adjourn. The motion carried unanimously. The meeting adjourned at approximately 1:31 p.m.

Respectfully submitted,

Bonnie Mengwasser, Licensing Supervisor