In response to growing consumer demand, DDOK has developed DeltaPatient Direct™ - our new discount referral program that allows patients to access quality dental care and pay dentists directly - at the time of treatment.

Currently, there are an estimated 1.5 million Oklahomans without access to employee-sponsored dental benefits. Delta Dental of Oklahoma has developed DeltaPatient Direct™ to benefit these Oklahomans who might not otherwise be able to access quality dental treatment. Additionally, we want to help bring additional patients to our valued participating dentists.

Here's how it works...

DeltaPatient Direct™ is not an insurance product. Individuals or families pay a low annual fee to DDOK. This fee provides access to a network of participating DeltaPatient Direct™ dentists, treatment financing options through Care Credit, vision care benefits from EyeMed, educational and treatment resources (including “Ask a Dentist”), and much more.

Dental services are offered at discounted rates that you, the provider, agree to. The patient visits your office and pays you at the time of treatment, according to the DeltaPatient Direct fee schedule.

It's that easy!

- No claim forms!
- No administrative costs!
- No verification of maximums and deductibles!

If you are currently a DeltaPreferred Option (DPO) dentist, or if you wish to add additional patients to your practice with no additional paperwork - we invite you to consider DeltaPatient Direct™.

Access 1.5 million patients while incurring no administrative costs, no network enrollment fees and no verification of maximums or deductibles. DeltaPatient Direct™ from one of the most trusted names in dental benefits - Delta Dental of Oklahoma.

Be sure to visit www.PatientDirect.NET. Should you need an enrollment package, or if you have additional questions about our new DeltaPatient Direct™ network, please contact Kim Montgomery, with our Professional Relations Department at: 405-607-2142 (OKC metro) or 800-522-0188, ext. 142 (outside the OKC metro).
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Dr. Richard Haught, ADA President, Tulsa

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The month of February marks the beginning of the 2005 Oklahoma State Legislative session. The session begins Monday, February 7 and will end by 5:00 p.m. on Friday, May 27. These four months are the window of time through which all state legislation will be crafted. This means a lot of legislation will be considered and decided upon in a very short amount of time—and much of this legislation will affect all of us both as practicing dentists and business owners.

This is because legislation introduced and passed this year has the capability of being good or bad for the oral health of all Oklahomans, legislation may increase or decrease Oklahomans’ access to dental care, it may protect or hamper the scope of practice of Oklahoma dentists, and legislation may aid or hurt the viability of small businesses.

The possible outcomes of legislation related to dentistry have drastic implications for both the oral health of all Oklahomans and for every licensed dentist. This is why it is imperative that our voice is heard at the Capitol. Every time an issue arises at the Capitol that impacts dentistry, every single Legislator must know our position on the issue—they must understand how we stand collectively as an Association and they must know how we stand individually as voters, citizens, neighbors and potential political supporters.

During this past legislative off-season, the ODA has done several things to position the Association to increase our political influence for 2005. For example, DENPAC has developed guidelines for how and when politicians are supported by DENPAC funds. These guidelines explicitly tie financial support to whether or not a politician is supportive of legislation that is good for oral health, dentistry, and small business. Also, ODA contract lobbyist Scott Adkins and ODA Executive Director Dana Davis have implemented procedures and plans to constantly monitor and evaluate the situation at the Capitol, so that ODA members are immediately made aware of any important legislation. This means that from this point forward, the ODA will not be blindsided by legislation that is damaging to the oral health of Oklahomans.

While these Association changes are essential to our legislative success in 2005, they are just the beginning of a formula of legislative success. To be truly successful legislatively, to protect all of the things that are important to us—our patient’s oral health, the profession of dentistry, the health of small business—we must each reach out and do our part to be heard at the Capitol.

For the ODA to be a force at the Capitol, we must each:

- **JOIN DENPAC** – DENPAC is the political action committee that supports state and national politicians who are friendly to oral health, dentistry, and small businesses. DENPAC is the backbone of the Association’s collective political efforts, and it is imperative that each of us belong.

- **BECOME A CONTACT DENTIST** – We must have at least one contact dentist for every member of the Oklahoma Legislature. A contact dentist is the ODA member that is responsible for contacting individual Legislators on behalf of the ODA. Become a contact dentist now. Contact Stephanie Trougakos (405.848.8873; strougakos@okda.org) to volunteer or for more information.

- **ATTEND “DENTIST DAY AT THE CAPITOL”** – Dentist Day at the Capitol is February 15th. Come see Dr. Richard Haught address the Oklahoma State Legislature. Politically, there is strength in numbers—join us so that our State Legislators witness the strength of our Association.

- **GET TO KNOW YOUR LEGISLATOR** – Invite your Senator and Representative to your office or make an appointment to stop by and see them. Get to know them and communicate your concerns about issues related to dentistry. When you have a personal relationship with a Legislator, they are more apt to consider your opinion when you contact them, and they may actually contact you when they have a question that relates to oral health.

- **RESPOND TO ODA LEGISLATIVE ALERTS** – When important legislative issues arise, the ODA may choose to send a legislative alert to all ODA members. When this happens, read the alert and follow through on the recommended actions. This often involves simply calling, faxing, or e-mailing your Legislator. When the Capitol is inundated with the opinions of over 1,500 ODA members, WE WILL BE HEARD!!!

Legislatively, this year will be an important one for the ODA. This year we will fully establish our influence at the Oklahoma State Capitol—an influence that will bear fruit for years to come. However, we can only establish this influence with your help. The Association’s political power is only equal to the number of our members who are active and supportive of our efforts. So, let’s roll up our sleeves and get to work. I’m excited about what we can accomplish together, and I thank you for all of your efforts.

We “packed the house” for our November 12th speaker Dr. Newton Fahl, Jr., who presented an awesome program on “Composite Artistry-Mastering Anterior Restorations.” We want to recognize and say “Thank You” to Ultradent Products, Inc. – Rep Chris Chenoweth; 3M ESPE – Rep Bill Gates; and AXIS Dental – Rep Todd Lester who co-sponsored Dr. Fahl’s program.

Congratulations to our TCDS golfers – Drs. Roger Andrews, Roger Baker, Craig Bunteyemier, Jan Cobb, Nick Hunter, Mike Kincaid, Gary Kuening, John Lockard, David Pedicord, Wade Sessom, Pat Shannon, and Gary Theobald – who won the Wisdom Cup Golf Tournament at Karsten Creek on October 29th.

Our December 9th Holiday Casino Party “rocked” with our “DJ” Dr. Steve Lusk! It was a special evening with 228 people enjoying an evening filled with great friends, delicious food and a lot of action at the black jack and roulette tables. And a BIG THANK YOU to the following who donated the door prizes and congratulations to the winners!

Peoples State Bank donated the 1st grand prize - $500 in gift certificates to Woodland Hills Mall – winner Allene Donley, (Dr. Paul Strahan’s team member); TCDS donated the 2nd grand prize - 2 Sooner Packs - Basketball Tickets Packs – winner Tiffany Seal, (Dr. Wrany Southard’s team member); Patterson Dental donated the 3rd grand prize - Gift Certificate to Mahogany’s Restaurant – winner Amy Emerson, (Dr. Clint Emerson’s wife); Sullivan-Schein donated a Golf Certificate to McGill’s Restaurant – winner Brittany Moshburn, (Dr. Ray Beddoc’s team member); POH Company donated a Williams-Sonoma Gift Certificate – winner Dr. Stephen Glenn; EODDS donated a Gift Certificate to Atlantic Sea Grill – winner Sam Osburn, (Dr. Kimberly Cozort’s team member); Tulsa Drillers donated a Fan Pack – winner Sheila Beesley, (Dr. Paul Strahan’s team member); Dr. Mike Kincaid donated four hockey tickets to the January 29th OKC Blazers game in Tulsa – winner Laura Shannon, (Dr. Kyle Shannon’s wife); Burkhart Dental donated a Gift Certificate for Burkhart merchandise – winner Claudia McGinnity, (Dr. Tom McGinnity’s wife); the Renaissance Hotel donated a Friday or Saturday Night Stay and Breakfast for Two – winner Lynn Kincaid, (Dr. Mike Kincaid’s wife); $20 Cinemark Movie Dollars Packages donated by TCDS – winners: Dr. K.D. Parks, Dr. Misty Bowler, Dr. Ray Beddoc, Dr. Tawana Bourlier, Dr. Ray Smith, Jr., Lori Savage, (Dr. Walter “Flash” Davies, Ill’s, fiancé); Marie Roberts, (Dr. Newton Simer’s team member), Margaret Michalopulos, (Dr. Larry Sims’ team member), Jenny Haberman, (Drs. Wade and Carrie Sessom’s team member), Susan Davidson, (Dr. Gary Davidson’s wife), and Stacie Donecel, (Dr. Kimberly Cosort’s team member); and Charleston’s Restaurant Gift Certificates donated by TCDS – winners: $25 certificates: Dr. Jon Cooper, Dr. Walter “Flash” Davies, Ill, Chris Rice, (Dr. David Pedicord’s team member’s spouse),

(continued on pg. 8)
FEBRUARY

FEBRUARY 1 – OUCOD Senior Night, Faculty House
FEBRUARY 4 – Give Kids a Smile! Day
FEBRUARY 7 – Tulsa County Dental Society Executive Meeting
FEBRUARY 10 – Oklahoma County Dental Society Dinner Meeting, Homebuilders
FEBRUARY 11 – ODA Strategic Planning Session, OKC
FEBRUARY 15 – ODA Dentist Day at the Capitol
FEBRUARY 21 – Retired Dentist Lunch, ODA Headquarters
FEBRUARY 22 – Oklahoma County Dental Society BOT Meeting

MARCH

MARCH 4 – ODASCO Shareholder’s Meeting, ODA Headquarters
MARCH 4 – ODA Board of Trustees Meeting, ODA Headquarters
MARCH 7 – ADA Washington - Leadership Conference, Washington, DC
MARCH 8 – ADA Washington - Leadership Conference, Washington, DC
MARCH 9 – ADA Washington - Leadership Conference, Washington, DC
MARCH 15 – Tulsa County Dental Society Awards Banquet & Installation of Officers, Renaissance Hotel, Tulsa
MARCH 15 – Tulsa County Dental Society All-Day Meeting Featuring Dr. Charles Wakefield, Renaissance Hotel, Tulsa
MARCH 21 – Retired Dentist Lunch, ODA Headquarters
MARCH 22 – Oklahoma County Dental Society Board of Trustees Meeting
MARCH 24 – Oklahoma County Dental Society Dinner Meeting, Homebuilders
MARCH 25 – Oklahoma County Dental Society Continuing Education, Homebuilders
MARCH 28 – Tulsa County Dental Society Executive Meeting

ARE YOU A MEMBER OF A DENTAL FAMILY?

The ODA LEGACY project is currently seeking information from ODA members who have parents, grandparents, siblings, cousins, or other family members that are also dentists.

Please contact the ODA and provide your dental family tree and photographs. This information will be used to honor dental families at the ODA Annual Meeting, in various publications, and at events related to the ODA Centennial celebration.

Contact Kay Mosley to submit your family information: 405.848.8873; kmosley@okda.org

Have an event you would like listed on the ODA Calendar?

Email details to events@okda.org
Dan Draper, Jr.
Birth: 1940
Death: November 18, 2004
Stillwater, Okla.

Dan Draper, former ODA lobbyist, passed away Thursday, November 18, 2004 from an apparent heart attack at the age of 64.

Mr. Draper, former Oklahoma House Speaker, was first elected to the House in 1970 and helped lead the state through the oil boom years of the 1970’s and early 1980’s.

He later went on to serve at the Capitol as a lobbyist for several organizations, including the Oklahoma Dental Association.

Dear Editor:

For the ODA membership’s edification and enlightenment: The cost of your federal narcotic license has increased 85.7% over the last three years.

Sincerely,
Dr. Don Smith, Oklahoma City

LETTER TO THE EDITOR

Welcome!

ODA NEW MEMBERS

1

LESLIE CHRISTOPHER – TULSA COUNTY
1638 S Carson #1112, Tulsa, OK 74119
(918) 584-3176

2

KHEM WOOD – TULSA COUNTY
401 - A South Utica Ave, Tulsa, OK 74104
(918) 599-8383

In Memoriam

build.
ODA JOURNAL

Assuming leadership positions in dental school. The party theme was “Fiesta”, with tables decorated with miniature piñatas, sombreros, and confetti. Dinner featured a main course of enchiladas catered by Tony Marbel’s in Norman, which was muy bueno! We hope to see more of the first-year students involved in our upcoming events and assuming leadership positions in the near future. Good luck to all of you and welcome to the profession!

ODA also held its first membership Meet N’ Greet at the ODA building on November 9 to attract new members from the practicing community. Three local Oklahoma wineries (Indian Creek, Nuyaka Creek, and Red-land Juice Company) were on hand to provide samples of their products. A feast of finger foods “munchies” at bay!

Special guest Lee Beasley (ODA President) welcomed the group and stayed to visit with OAWD members. Mary Martin and Tamara Berg supervised the door prize giveaway and new members were given the chance to get acquainted with both state and student officers as well as current members. All in all, it was a delightful evening that is sure to be repeated. We extend a special welcome to our newest OAWD members: Martha Garzon, Vann Greer, Stacy Revels, and Susan Whiteneck.

OKLAHOMA ASSOCIATION OF WOMEN DENTISTS

By: Jeannie C. Panza, DDS

The Oklahoma Association of Women Dentists (OAWD) sponsored its annual “Back To School Bash” at the OU College of Dentistry on August 31 to welcome the new freshman dental students. The 34 attendees included sophomore, junior, and senior dental students, practitioners from the community, and ten freshman “guests of honor”. Each first-year student received a “goodie bag” of items that might be useful during a hectic first year in dental school. The party theme was “Fiesta”, with tables in the Student Commons decorated with miniature piñatas, sombreros and confetti. Dinner featured a main course of enchiladas catered by Tony Marbel’s in Norman, which was muy bueno! We hope to see more of the first-year students involved in our upcoming events and assuming leadership positions in the near future. Good luck to all of you and welcome to the profession!

Centennial Member, Dr. Tamara Berg, explains why she supports the new ODA Headquarters

“I contributed to the centennial campaign in order to give back to dentistry. The ODA has been there for me and I want the Association to continue to serve my needs as a dentist. I hope that one day I can share with my child or grandchild that I helped in building the ODA Headquarters and that I attended the groundbreaking ceremony. Building a place like this will probably only happen once in my lifetime and it is important for me to be a part of the centennial campaign.”

(Left to right) Seniors Jennifer Chambers and Jessica Spring (in blue scrubs) chat with new freshmen Randy Kahue, Kendra Hammond, and Natalie Spring.
In January, the roof was completed on the new ODA headquarters. The parking lot is in the process of being poured and windows are being installed. Additionally, inside the building electrical and plumbing work is being completed. The new ODA headquarters is located at N.E. 13th and Stiles.

Make your pledge to help pay for the new ODA Headquarters today. Your contribution is tax deductible as a business expense and by paying for the new headquarters now, the association will save $25,000 per year in interest payments alone.

Become an ODA Builder today by calling 800-876-8890 or by visiting www.okda.org.
The Ski 'n Learn Seminar offers 16 hours of continuing education held Monday, March 21 through Thursday, March 24. A morning session will be held from 7:30-9:30 a.m., with an afternoon session from 4:30-6:30 p.m. A full breakfast will be served to seminar attendees at the morning sessions and snacks and beverages are offered during the afternoon sessions.

Session Highlights:
- DIVAS in Dentistry
- Over 130 sessions
- More hands-on participation courses
- More staff programs for 2005
- On-line Housing - On-line Registration

San Antonio Highlights:
Alamo, River Walk, Market Square, Missions, Six Flags Fiesta Texas, Sea World, San Antonio Zoo, San Antonio Botanical Gardens, La Villita, Rivercenter Mall, Hemisfair Park, Tower of Americas and much more!!

Outstanding Speakers:

Call 800.489.2532 for registration information.
Visit the www.okda.org for more information.
O D A  C O - S P O N S O R S  S K I  ' N  L E A R N  S E M I N A R

The Oklahoma Dental Association is a host for the Ski 'n Learn Seminar at Big Sky Resort in Big Sky, Montana, March 19-26, 2005. Several other state dental associations will also co-sponsor the trip including Alabama, North Dakota, South Dakota, Tennessee, Maryland and Missouri.

The Ski 'n Learn Seminar offers 16 hours of continuing education held Monday, 7:30-9:30 a.m., with an afternoon session from 4:30-6:30 p.m. A full breakfast will be served to seminar attendees at the morning sessions and snacks and beverages are offered during the afternoon sessions.

Staff Responsibility Chart

October 2004

Announcements:

DR. DEVAUGHN TO CHAIR OKLAHOMA COMMISSION FOR HUMAN SERVICES
Dr. Richard L. DeVaughn of Enid has been named the new chairman of the Oklahoma Commission for Human Services by Governor Brad Henry. The panel oversees the state’s largest agency, the Oklahoma Department of Human Services. DeVaughn was appointed in November 2003 to a nine-year term on the commission, which expires in August 2012. DeVaughn received his undergraduate degree from OSU and his dentistry degree at the University of Missouri School of Dentistry in Kansas City. He has practiced family dentistry in Enid since 1967.

DR. MARK SMITH NAMED RURAL DENTIST OF THE YEAR
During its annual meeting in Oklahoma City, the Rural Health Association of Oklahoma presented its award for the Rural Health Dentist of the Year for 2004 to Dr. Mark D. Smith. Smith graduated from Grand View Elementary School and Broken Arrow High School, and received his bachelor’s degree from Northeastern State University. He pursued his dental education at the University of Oklahoma College of Dentistry. In November 2000, Smith – along with his wife of 13 years, Sharla, and two children, Hunter and Sierra – moved back to Tahlequah to open a private practice.

NEWS YOU CAN USE

PAYCHEX – THE PAYROLL SOLUTION
15% OF PAYROLL PROCESSING

• Special National Account discount for Oklahoma Dental Association members.
• Convert non–productive time calculating payroll and preparing tax deposit payments into productive, profitable time.
• Payroll checks, journals, earnings statements, department summaries, and quarterly and year-end reports are all included.
• With Taxpay, you no longer worry about missed deadlines and penalties – Paychex will make sure your tax payments are accurate and timely, plus automatically file quarterly and year-end returns.
• Direct Deposit eliminates checks signing, bypasses the check cashing routine, speeds check reconciliation and eliminates special payments.

Paychex is the company that made automated payroll efficient and cost effective for any size organization.

Call 1-800-729-2439
Electronic transmissions are becoming the preferred media of communication for documents of all sorts. We use fax machines and e-mail, and we can “scan in” virtually any documents (photos, copies of text, or even colorful greeting cards) and send them over those little wires that connect our whole world together. At the other end, our recipient can view it (literally in seconds) just the way we sent it. Whether it’s a fax machine or a computer, the same basic method of transmission is used. Let’s look at the general system.

Fax machines, e-mail, electronically scanned documents – we all use them, but how do they work?

Let’s look at the fax machine. Incidentally, if you didn’t know it, “fax” is short for “facsimile.” Anyway, the operational steps are simple. We take the sheet of paper that has our message, slide it into the machine, dial the number, and let it go. When you insert the sheet, it is scanned into the machine, much like a copier at your local store. Scanning converts the text into an electronic language. This is comparable to the old telegraph or the “Western Electric Telegram”, based on the traditional Morse code system, in which the telegraph operator reads each letter of the document and converts them into dots, dashes, etc. until the entire document is finished. On the other end, the receiving operator listens to those dots and dashes, recreates the corresponding letters, and physically writes them down until the transmission is complete. The readable document is then delivered to the recipient.

The same thing happens with faxes except that fax machines have their own specific language or code. The fax machine creates a “non-visible” dot pattern on a sheet of paper. Each dot is very small and is assigned a location, much like a mathematical graph. You know – go “x” number of units over and “y” number of units up. As the paper is scanned into the machine, the specifically located dots are read. If the machine sees a dark spot where a dot is located, it marks it as “positive” (“1” in binary language); blank areas are marked as “negative” (“0”). Remember that text and photos are nothing more than black and clear dots arranged in a pattern reflecting the text or photo. After the document is scanned, the machine creates a stream of information (thousands of dots being read as negative and positive) that is then sent over the phone line. The receiving fax machine then “decodes” this format, recreating the positive and negative dot locations. Voila! You now have in your hands an identical copy of the document, sent from possibly thousands of miles away and having traveled through a virtual maze of phone lines.

The fax machine has certainly revolutionized the communications industry and has made a considerable influence on how we conduct our everyday business. However, many consider the limitations of the machine no longer acceptable. Transmissions and receptions are in black and white, the system can be tediously slow and, depending on the type and supply of the paper used in sending and receiving machines, the subject may remain the same but the overall layout and design of the document can change dramatically.

To be able to send color, transmit faster and, most importantly, recreate the received document in the exact format, look, and content of the original document would be a logical step forward. Take our own ODA Journal as an example. It is available on the website for viewing, reading, and reference. Since it is in full color with multiple graphics, it would certainly be nice to be able to view it in its actual format.

Enter “Adobe Acrobat Reader”. This system is probably the most widely used scanning and transmission system for this purpose. It uses the same basic format as a fax machine, but it can incorporate color, format, size, etc. to receive and reproduce the exact document on the receiving end. Adobe Acrobat Reader is free software that lets you view and print Adobe PDF (Portable Document Format) files on a whole host of devices and computer operating systems. It is available at the Adobe website (adobe.com); however, we have provided that same link and download at our ODA website. If you don’t have the Acrobat Reader installed in order to view our journal (or many of our other documents) you can easily download it by clicking on “download” and then “install”. After installation is complete, the document you are trying to read should pop up. You’re done! Best of all, when you go to other sites, or if someone sends you a “PDF” document, you don’t have to re-install the reader. Just click on the document, Adobe Acrobat will automatically open, and the document will pop up for your viewing or printing.

Many of you have asked how to create these documents. Please note that Adobe Acrobat Reader is a “read only” version of the software and is, as previously mentioned, free. If you wish to expand your options, you can download (for a fee) the full version at that same site; it is also available on disk at your local retailer. There are many additional features in this purchased version, but mainly it will allow you to create PDF documents for storage, sending, etc.

By the way, if you haven’t been to the ODA website recently, you’re in for a surprise. We are constantly modifying it, and adding new and exciting items and features. So check back often. Just to remind you, the website address is: www.okda.org.

Adobe Acrobat Reader and the “PDF” document is your key to viewing the wealth of pages and information just the way the author intended for you to view it – in full color, exact paragraph format, text copy, you name it. Try it today at your ODA website. Nothing But The Fax, Maam? I say, “No way, let’s ‘PDF’ it!”

Until next time,
Raymond Cohlmia

To download the Adobe Acrobat PDF reader follow these steps:

1. Go to www.adobe.com
2. Click on the “Get Adobe Reader” icon
3. Follow the instructions
FINANCIAL SERVICES

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**EBSCO Reception Room Subscription Services**
Reception Room Magazine Subscriptions
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**TeleVox**
Message on Hold
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**TNT Dental**
Web Hosting
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**WebMD Dental**

TRAVEL

**World Travel Service**
Business/Leisure Travel
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**Hertz**
Car Rental
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#CDP#0042371
(800) 654-2201

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Shelly Murphey is the Executive Assistant to ODA’s Executive Director Dana Davis. Born and raised in Edmond, Oklahoma, Murphey attended the University of Central Oklahoma where she received a Bachelor’s degree in Journalism and Public Relations. An avid photographer and skier (water and snow), Murphey joined the ODA in 2002. As Executive Assistant, Murphey is ODA Executive Director Dana Davis’ right-arm assisting her with the implementation of ODA policies related to governance and helping plan and execute the Opening Ceremony, President’s Dinner, and VIP arrangements at the ODA Annual Meeting. Murphey is also the ODA Officer coordinator on all Executive Committee, Board of Trustees, and House of Delegates meetings. Additionally, she is responsible for maintaining both the ODA accounting system and the staff benefit program. These responsibilities make Murphey the hub of logistics and communications for the Executive Director and ODA Officers.

The ODA Journal recently sat down with Murphey to discuss what excites her about being an ODA staff member and what she has learned during her tenure at the ODA.

ODA: What has been the most exciting aspect of being on the ODA staff?
SM: Watching the many changes that have occurred over the past three years – it is exciting to know that I am part of a team of over 1,500 people working toward the same mission. I’m also really excited about moving into the new ODA building.

ODA: What is something you have learned about dentistry since joining the ODA?
SM: I got an interesting tutorial on implants one day when I visited Dr. Nicholson’s office. He briefly explained the procedure from start to finish. I was amazed by the sophistication of modern implant technology. Plus, the end result of what implants can do for a patient is really impressive.

ODA: What have you learned from your involvement with the Council on Bylaws and Policy efforts?
SM: I’ve learned a great deal about parliamentary procedure and the importance of facilitating a meeting so that it runs smoothly while also achieving intended goals – this has been a lesson learned from this Council and working with the Board of Trustees and House of Delegates.

ODA: What have you learned from working with ODA Executive Director Dana Davis?
SM: To look at the forest and not to focus so much on the branch of a single tree.

ODA: As part of the ODA staff, what are your goals for the ODA?
SM: I want to eventually know ODA policy and the bylaws more indepth. I am really interested in governance. I think it is amazing how an organization like the ODA takes so many diverse members and comes together to achieve common goals. The process by which an Association like ours operates and accomplishes objectives is fascinating, and I want to be an expert on the subject of governance in general and ODA governance specifically, so that I can do what I can to help this Association get to where it needs to go, and do so in a way that fully considers the opinion of all of our members.

ODA: What have you learned from working with ODA Executive Director Dana Davis?
SM: To look at the forest and not to focus so much on the branch of a single tree.
Who & What

The role of the Council on Governmental Affairs is to maintain contact with all governmental agencies involved with dental health care. The Council, along with the help of Executive Director Dana Davis and ODA Contract Lobbyist Scott Adkins, act as liaisons for the ODA membership to ensure that the voice of the ODA is heard at the Oklahoma State Capitol. The Council also monitors upcoming bills in an attempt to influence state legislation and rules or regulations that affect the dental profession and/or the dental health of the public of Oklahoma.

The Council strives to involve the entire membership and allied organizations in the legislative process through a system of contact dentists. In order to maintain communication between dentists and legislators, the ODA must have at least one contact dentist for every member of the Oklahoma Legislature. A contact dentist is the ODA member that is responsible for contacting individual Legislators on behalf of the ODA.

The Council, as the liaison with all state and federal boards and agencies involved with dental care programs, also makes recommendations concerning rules, regulations, or legislation that affect the dental profession or the dental health of the public.

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### Council Members

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**SPOTLIGHT: COUNCIL ON GOVERNMENTAL AFFAIRS**

Dr. Robert Augsburger, Council on Governmental Affairs Chair

The Council on Governmental Affairs is to maintain contact with all governmental agencies involved with dental health care. The Council, along with the help of Executive Director Dana Davis and ODA Contract Lobbyist Scott Adkins, act as liaisons for the ODA membership to ensure that the voice of the ODA is heard at the Oklahoma State Capitol. The Council also monitors upcoming bills in an attempt to influence state legislation and rules or regulations that affect the dental profession and/or the dental health of the public of Oklahoma.

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HUNTER R. STUART II, DDS, MS  405-818-0304
hrstuart@sbcglobal.net
The holiday season is now over and that can only mean one thing: The Oklahoma Legislature is about to go back to the Capitol.

On Monday February 7th, the Oklahoma Legislature will convene to kick off its 50th regular session. The faces in the House and Senate will look a little different than the last time we talked. There are 39 newly-elected freshmen in the House and 15 new Senators. That’s over 1/3 of the legislative makeup. So many new faces will make it more important than ever to develop a personal relationship with your individual senator and representative.

The 50th Legislature will be historic. For the first time since 1921, the Oklahoma House of Representatives will be controlled by the Republicans. Todd Hiett (R-Kellyville) was elected Speaker of the House by the members on January 4th. Speaker Hiett will oversee a chamber now comprised of 57 Republicans and 44 Democrats. Susan Winchester (R-Chickasha) was elected the first woman ever to serve as Speaker Pro Tem, the second ranking member of the House. Lance Cargill (R-Harrah) was selected Majority Leader by the Republican caucus. Representative Jari Askins (D-Duncan) was elected by her caucus to serve as Minority Leader.

On the Senate side of the rotunda, the Democrats still have the majority, albeit a smaller one. Senator Cal Hobson (D-Lexington) was elected President Pro Tempore by the members and will run the daily operation of the Senate. Senator Hobson will preside over 26 Democrats and 22 Republicans, a swing of 2 seats to the Republicans from last year’s 28-20 split. Senator Glenn Coffee (R-OKC) was chosen by his members to serve as Minority Leader.

The legislative session promises to be an exciting one for Oklahoma’s dentists. In February, our own Dr. Richard Haught, President of the ADA, is scheduled to visit the Capitol and address the legislature. This will be held in conjunction with our annual ODA Day at the Capitol. Also, your ODA will be tracking and assisting with potential legislation being sponsored by the state Board of Dentistry. Watch for specifics on these and other activities from the Capitol in the coming weeks.

- Scott Adkins, Lobbyist
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Dr. Richard Haught, a general dentist from Tulsa, is currently in the middle of his term as the 141st American Dental Association President. The Pryor, Okla. native has been heralded by the ADA News as possessing a “quiet determination” and was described in the same publication as epitomizing “the American work ethic with his dedication, self-discipline and goal-driven approach to life.”

None of this is any news to ODA members who have known Dr. Haught for years. He has been active at all levels of organized dentistry in the state of Oklahoma. Haught’s beginnings in Oklahoma organized dentistry included service as a member of various committees for the Tulsa Dental Society with his career of state service culminating in his installation as ODA President. He took the same path of service at the national level, by beginning his ADA service as a Delegate to the House and finally being installed at the highest position of leadership with the ADA. None of these things could have been accomplished without extraordinary levels of discipline and commitment.

In late December, during a short holiday break (from traveling, not from seeing patients), Dr. Haught spent his lunch hour speaking with the ODA Journal about leadership and dentistry, two things that have become one in his incredible journey to the top of organized dentistry.

ODA: Why did you first begin to pursue a career in dentistry?
RH: I didn’t have a relative or any relation in dentistry, but I always knew I liked medicine and dentistry. I went to the University of Oklahoma on a football scholarship, so I was able to enroll in any classes I wanted. I began majoring in electrical engineering; I took a lot of math and science classes. I was in the ROTC at the time and I wanted to be a jet pilot, which is why I thought the engineering was a good choice for a major. But then I found out I was color blind and needed glasses, so in those days that kept me from flying.

After that, I got serious about dentistry. I decided that I wanted to be a dentist because I had a dentist friend in Pryor, and I would go down and watch him and talk with him. I was convinced that by being a dentist you were more in control of your own destiny than if you were a physician, because you didn’t have a hospital connection. I also liked the idea that in dentistry you saw the results of your ability to help someone immediately. So, in that way I thought it would be more satisfying to be a dentist than a physician. As I look back, I’ve never regretted that decision.

In that vein, I would certainly recommend dentistry as a profession to anyone today. A lot of people ask me when I am all over the country, “Would you do it again?” and I tell them that I would absolutely do it again. I would encourage anyone to be a dentist. The future of dentistry is bright and there are a lot of opportunities out there for us, and we control our own destiny – a lot of professions can’t say that.

ODA: How did you first become involved in organized dentistry?
RH: My involvement in organized dentistry began when I came back from the Navy. I started practicing at the same location I am at now – I’ve been at that location for 35 years—and my associate, Dr. George Bussman, took me to my first dental meeting, so I started going to the meetings because I realized I needed the continuing education.

So, I went and started taking continuing education classes, and met a lot of people. I’ve never been afraid to ask questions, so I would always find out a lot of information on how you do something or how you handle a situation. Since I asked a lot of questions I ended up knowing a lot of stuff. So, next thing you know I was getting appointed to committees, then I got appointed as chair of committees, then I became President of Tulsa County Dental Society, then I was an ADA Delegate, and, you know, one thing just led to another. I never sat down and said I’m going to be President of the ADA; it’s just one of those things.
As ADA President, Dr. Haught has spoken in several venues and to many different dental publications. Here are some highlights:

“I know that a lot of younger folks wonder how they can be involved in organized dentistry and build a practice at the same time. It hasn’t affected my practice, but it might. I do know that I probably could not have done this if I had been in practice only five or 10 years. That seems to be the challenge—we know from our survey data that young dentists want to be involved, but they want fast in, fast out. That’s where task forces come in. You identify an area that needs investigation, appoint someone to do it, they do the work, they’re done and they get back to practice. That creates a good pathway for members to get involved without detracting too much from their practice.”

--ADA News, September 20, 2004

President Sekiguchi was very kind and allowed me to focus on the paper and we were able to get that accomplished in my year as President-Elect. So, this was a time when we were able to finish what we started and see those results, but it was only possible through the dedication of several committed people. You know, this year we have 22 key initiatives at the ADA, which is a lot for an organization. But we are a good organization and I think we are going to have a great deal of success with these initiatives. Even though we will not finish each of these initiatives in one year, it is essential that we get each of them started and get them going in a good direction.

And being a good leader means making valid conclusions. One of the things that we’ve been doing at the ADA is bringing in outside sources so that we can understand how others see dentistry. This way we get outside perspectives on things like scope of practice. For example, does the general public want individuals treating them that do not have a lot of education or training? Maybe they don’t care about this. I doubt it, but by bringing in outside views we get an idea of how others view us.

This way we aren’t just putting things together based only on how we see them. This way we are making valid conclusions about issues because we are accounting for all perspectives.

ODA: What are the challenges specific to being a leader of organized dentistry?

RH: In a leadership position in organized dentistry you soon realize that very rarely are you going to get the opportunity to start something and see it finished in a year. I’m the type of person that likes to see the results of my actions, so this fact is something that I have to be patient with. And that is why one of my goals when I was elected ADA President-Elect was to do the access white paper and get it finished my year as President. Fortunately, things fell in place and ADA

ODA: Are you enjoying your time as ADA President?

RH: Yes, I really am. It’s hard to believe that as I sit here today that it’s a 24-month obligation when you get elected as ADA President-Elect and I have only nine months left. It has really gone by quick. I like being a leader and I’m excited about being ADA President. There are times I will wake up at three or four in the morning because an idea comes to me. I’ll actually get up and write the idea down so I don’t forget it.

I think that is an indication of how much I enjoy this. Also, as ADA President I’ve had a lot of opportunities to speak to a lot of different people. And these are opportunities that I would not have otherwise. I enjoy speaking to people. I’m not the

“No person can do it all, so you have to be able to delegate. That’s true in a dental office or in a leadership position.”

--Dental Economics, October 2004

“If change is going to occur in our dental delivery system, if change is in the public’s best interest, it must be the profession that makes these decisions, not folks that have their own vested self-interest and preservation in mind!”

--Installation Address as 2004-2005 ADA President, October 4, 2004

“I’m passionate about our patients and I think the same focus has to apply to the ADA. Every discussion, every decision we make as an organization has to stay focused on patients and how we can serve the (ADA) members to allow them to work in our offices and provide solutions for patients. I know what’s important to me when I am chairside and I want to be unencumbered by unnecessary regulations. I want to be able to do what is the very best for my patients.”

--ADA News, September 6, 2004

“If change is going to occur in our dental delivery system, if change is in the public’s best interest, it must be the profession that makes these decisions, not folks that have their own vested self-interest and preservation in mind!”

--Installation Address as 2004-2005 ADA President, October 4, 2004

“I would say to any dentist that you can’t possibly do it all by yourself. Without the ADA, there is no consensus, no unified voice, no one speaking for the profession. Without the ADA research at Paffenger Center, there would be no high-speed drill, no panoramic X-rays, and no composite restorative materials. Who would have done that except us? We’re more than 149,000 members strong, we represent more than seven out of 10 dentists, and we are able to influence change. Those numbers translate into power in our advocacy efforts, and our effectiveness increases as our numbers grow.”

--Dental Economics, October 2004
type of speaker that would be a champion debater or anything like that, but I like to speak about what I believe in. And I think people can see that I believe in what I am speaking about. I enjoy speaking to people to stimulate their minds, to get them thinking about things and understanding problems and situations.

ODA: How much work and time is involved in being ADA President?
RH: A lot. Right now I’m home for a ten-day stint, which is highly unusual and it is the longest I will be home this year. From here on out I won’t even get five days home in a row. And even last year was a busy year as President-Elect. It’s funny, I told Pat Murphy – who handles all ADA travel – that I didn’t think I could get any busier than I was as ADA President-Elect because of the access white paper, all the speeches I was involved with, and other responsibilities, and she just laughed and said, “Do you want to bet?”

As ADA President, as soon as our ADA Annual Meeting was over, I met with ADA Executive Director Jim Bramson and ADA Chief Operating Officer Mary Logan, and we went to dinner. Jim had a legal pad with every line full of items he wanted to talk over with me that night, and I said, “Great job.” I told him I was going to work for the rest of the evening. I told the ADA staff what I thought about being President, and as an organization we have a firm sense of direction.

But there is a lot of work associated with being ADA President. I work three to four hours per night. If I get done with patients at 3:30, I go work out, go home and have dinner, and then work for the rest of the evening. It’s really a tremendous commitment. And the commitment began for me when I was running for President. I promised my campaign committee I would personally call all 427 ADA delegates. That’s a lot of phone calls to make. I’d get home from work and have dinner, and then start calling people. I made all of those phone calls though.

ODA: What do you remember about being ODA President?
RH: Being ODA President was a great experience. We were successful with a lot of projects and had a great annual meeting, so it was an excellent time for me.

Here’s a funny story from the time when I was ODA President, and it kind of relates to being ADA President also. When I was ODA President I got a call from Jim Saddoris. He said he had some good news and some bad news and asked me what I wanted to hear first. I said the good news. He said that he decided to run for ADA President. I told him great, good for you. Now, what’s the bad news? He said, “I need $10,000 from the ODA for the campaign.” The bad news was that money had to come out of my budget. But we got it for him, and it was worth it, obviously.

ODA: What advice can you give to other Oklahoma dentists who are leaders or considering becoming leaders in organized dentistry?
RH: The lesson I’ve learned from this experience is that if you really want to be an effective and powerful leader you have to over-prepare. Over-preparation protects you from mistakes. Even at the state level, you have to be ready, and that requires over-preparing.
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The 2005 ODA Annual Meeting is right around the corner! The 2005 meeting will be held April 28 through May 1 at the Cox Convention Center in Oklahoma City.

One of the highlights of the ODA Annual Meeting is the renowned Scientific Sessions that take place throughout the meeting. This year is no different. In fact, it is hard to remember an ODA meeting with a more compelling lineup of internationally-known speakers.

Between now and April, the ODA Journal will be running previews of the 2005 ODA scientific speakers, giving you a brief biography of each speaker and what you can expect from their session at the 2005 meeting.

James R. Dunn DDS

James R. Dunn is a full-time faculty at Loma Linda University, School of Dentistry, Loma Linda, California. He is responsible for instruction of appearance-related dental treatments and digital photography. He is active in clinical biomaterial research in adhesive materials, directs a study club in aesthetic dental treatments, and lectures and directs workshops nationally and internationally on clinical aesthetic bonding treatments and Digital Dental Photography. He is an active member in the American Academy of Esthetic Dentistry, the American Academy of Cosmetic Dentistry, the International and American Associations for Dental Research, and other dental organizations.

Session: Aesthetic Dental Treatments and Materials 2005

The “Extreme Makeover” phenomenon is driving patient interest in aesthetic dentistry. Dentistry however has the ethical obligation to “do no harm” in treating patients, and has many techniques available which enhance appearance while conserving tooth structure. This course will review the clinical techniques used in aesthetic dental bonded procedures. Topics include “microdentistry”—early caries detection and treatment, anterior direct composite bonding with natural shaded composites (are the new composites competitors for ceramic?), composite placement and finishing, direct posterior composites, matrix and wedging systems, placement, finishing, and re-bonding. Also anterior bonded porcelain veneers, preparation, temporization, and resin luting. Current information on in-office and at-home tooth whitening agents and treatments as they affect restorative dental treatments, and digital cameras for visual communication will also be presented.


Dr. Kenneth Hebel received his dental degree from the University of Western Ontario in 1979, his specialty certificate in Prosthodontics from Eastman Dental Center in 1983 and a Masters of Science degree in Anatomy at the University of Rochester in 1985. Dr. Hebel has a private practice in London, Ontario, Canada, where he provides both advanced surgical and prosthetic phases of Implant Dentistry. He is an assistant professor in the department of graduate prosthodontics at the Eastman Dental Center in Rochester, New York. He is a Certified Prosthodontist, a Diplomate of the American Board of Oral Implantology/Implant Dentistry, a Diplomate of the International Congress of Oral Implantology and a Fellow of the American Academy of Implant Dentistry.

Dr. Hebel is a published author and lectures on all phases of restorative and implant dentistry. He has presented hundreds of lectures over five continents. In addition, he is director of the HandsOn Training Institute, where he provides extensive hands-on surgical and prosthetic training in Implantology.

Session: Treatment Planning for Restorative and Implant Dentistry - The Simple Secrets every dentist must know

This presentation will emphasize the use of standard prosthodontic principles to simplify the reconstruction of dental implants. An organized approach will be presented for the evaluation, diagnosis and treatment planning of dental patients. This approach can apply to patients who are having fixed reconstructions on natural teeth, removable prosthetic reconstructions, as well as implant-supported reconstructions. The application of these principles will allow the practicing dentist to incorporate a tremendous wealth of knowledge gained over the years in fixed and removable prosthodontics into their implant practices. Simple rules for developing a proper plane of occlusion and implant-positioning will provide the foundation for the application of standard prosthodontic principles. It will enable practitioners to have a new and simplified view for reconstructing implant supported prostheses.

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New “tort reform” measures became law in Oklahoma in 2004. Unfortunately, exceptions to those measures leave Oklahomans with significant continuing concerns about exposure of their assets to malpractice and other claims asserted by plaintiff lawyers.

What are the appropriate responses for a dentist to make? This article is directed to dentists, but is equally applicable to anyone with significant assets.

1. The need for asset protection planning. In our litigious society, it is hard to identify a dentist who could not use asset protection planning. This was true before recent “tort reform” measures were passed. It is no less true now because of the shortcomings in the new law.

A dentist’s liability concerns are not limited to malpractice. Tort liability for automobile accidents, liability under business contracts and liability arising out of domestic relations matters can often pose threats that are greater than the risk of malpractice liability.

2. What is the “truth” about asset protection planning? The truth is that there is no “silver bullet” that fully protects one’s assets. Effective asset protection planning involves the application of multiple techniques.

Some techniques are simple. Some are complex. Some will work in the long run. Some may only partially work, and some may not work at all. Any one technique can be swept away in a moment by judicial decision or legislative action. However, the use of a variety of techniques puts the dentist in the best overall position to deal with malpractice claims and other claims of liability that are threats to wealth.

3. How does asset protection planning work? In general, asset protection planning legally organizes the ownership and location of a dentist’s assets in a manner that makes it difficult for a creditor to attach those assets in satisfaction of a judgment against the dentist. The particular techniques used vary, but frequently include a combination of the following:

   Family Limited Partnerships or Limited Liability Companies: The primary benefits of these entities to the dentist partner or dentist member of the entity are twofold. First, creditors have no right to attach the assets of the entity for claims arising outside the entity, such as malpractice judgments. Second, the rights of a creditor against the partnership or member interest of the dentist are so severely limited that settlement opportunities are maximized.

   Marital property ownership: Each spouse can hold assets as the separate property of that spouse. The creditors of the other spouse have very limited or no rights against that separate property. Of course, transferring assets solely to one’s spouse also carries with it obvious risks.

   Trusts to own property: If someone other than a beneficiary transfers assets to a properly designed trust, the creditors of the beneficiary are not able to use the assets of the trust to satisfy liabilities of the beneficiary.

   A dentist’s parents should leave their assets to the dentist in trust. Also, a dentist can establish trusts for his or her spouse and children. The trust assets are protected from claims against the dentist, and protect the spouse and children from their own potential creditors, such as spouses of the children.

   Offshore entities: Many offshore jurisdictions have local laws that make a U.S. creditor’s attempts to enforce a judgment expensive and time-consuming. Offshore entities are typically used only where the assets to be protected are substantial.

   Statutory protections: The law provides statutory protections that limit a creditor’s rights to seize certain types of assets, even though held in the name of the dentist. These include the homestead, life insurance, certain annuities, qualified plans and IRAs. Some of these exemptions are subject to complex rules and limitations.

4. What if a lawsuit is pending? If a claim or lawsuit is pending, transferring assets to protect them will not be effective. There is a concept in the law termed a “fraudulent conveyance”. A fraudulent conveyance is any transfer that is intended to interfere with the ability of a creditor to collect on a pending lawsuit or claim.

5. What are the dentist’s responsibilities? The dentist must provide a forthright disclosure of any existing or potential claims or lawsuits; financial information; and, documentation of the ownership of existing assets and beneficiary designations. That information is given in confidence, and may be protected to some degree by the attorney-client privilege.

6. What does the asset protection planning attorney do? The attorney consults with the dentist regarding his or her goals, liability concerns and general financial circumstances. Most dentists already have many elements of an asset protection plan in place, such as the home, life insurance and retirement plans. The attorney may recommend adjustments to optimize asset protection elements in place. The attorney may also recommend the creation of new entities as appropriate. Finally, the attorney harmonizes everything with the dentist’s overall estate planning goals.

Because of the significance and uncertainty about the estate tax, an update of the dentist’s estate plan is one of the early steps in the asset protection process.

Mr. Mee holds business and law degrees from O.U. He also holds a Master of Laws in Taxation from N.Y.U. Mr. Mee is a Fellow of the American College of Trust and Estate Counsel. His office is at 50 Penn Place in Oklahoma City. He may be contacted at 848-9100, or jwmjr@meehoge.com. This Article is for information purposes only. It is not legal advice by Mr. Mee or Mee, Mee & Hoge, PLLP. No particular asset protection technique should be undertaken without the prior advice of legal counsel.
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The provision for the immediate expensing of certain qualifying asset additions under Section 179 has been a fixture in the Internal Revenue Code for many years; however, this provision has undergone substantial change in recent years that enhances the provision for the taxpayer.

For the year 2004, taxpayers could deduct up to $102,000 in qualifying current year asset additions from their taxable income. This number will be indexed for inflation from year to year. The deduction is only available for taxpayers who have taxable income (including salaries and wages), and this “election” to expense assets cannot create a loss. For simplicity, this means that a taxpayer who has $50,000 in taxable income from a trade or business activity and $20,000 in wages would only be able to utilize this provision up to $70,000.

Assets qualifying for this deduction are any tangible trade or business assets (equipment, computers, furniture, computer software, etc.) originally placed in service during the current year. Real estate does not qualify.

There also is a provision for passenger vehicles (automobiles and SUV’s) to be included within Section 179; however, the vehicle must be used at least 50% in the trade or business, where the numerator, in any year, is business miles (not including commuting miles) over the denominator of total miles driven. If this percentage is less than 50%, no “election” to use the Section 179 provision is available.

In addition, vehicles that exceed 6,000 pounds in gross vehicle weight, (reserved primarily for heavy pickups and large SUV’s built on a truck chassis), have additional depreciation benefits, although these benefits are somewhat limited. Effective October 22, 2004, approved legislation limited the amount of deduction available under Section 179 for these SUV’s to $25,000. Certain pickups, however, are exempt from this limitation.

Please understand that the use of this provision, although quite beneficial in the year of the deduction, accelerates the “depreciation” available for these assets. There is a cost to such election, being the loss of depreciation deductions in future years. In other words, utilizing this provision may actually reduce the amount of tax savings you could realize from your investment in the asset. I would advise you to consult your tax advisor to determine the benefit of this election in your practice.
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