

DRIVING CHANGE
TOGETHER
NATIONAL • STATE • LOCAL
ADA Membership Conference

Welcome Remarks



Cesar Sabates, DDS
President
ADA



Raymond A Cohlma, DDS
Executive Director
ADA



April Kates-Ellison, MS, CAE
Chief Client Services & Tripartite Relations Officer
Member and Client Services, ADA



April Kates-Ellison

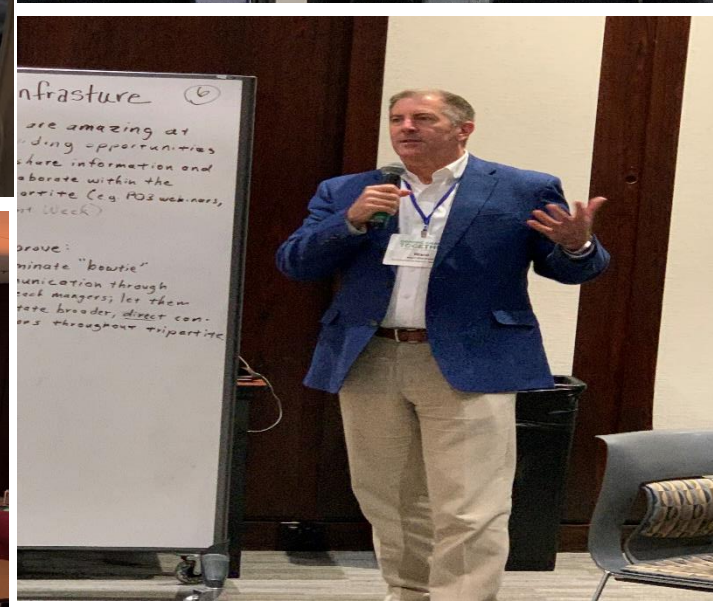
Chief Client Services & Tripartite Relations Officer

Division of Member and Client Services

Driving Change Together – Day 1



Driving Change Together – Day 2





WHAT

Focus & Align

WHY

Maximum Impact

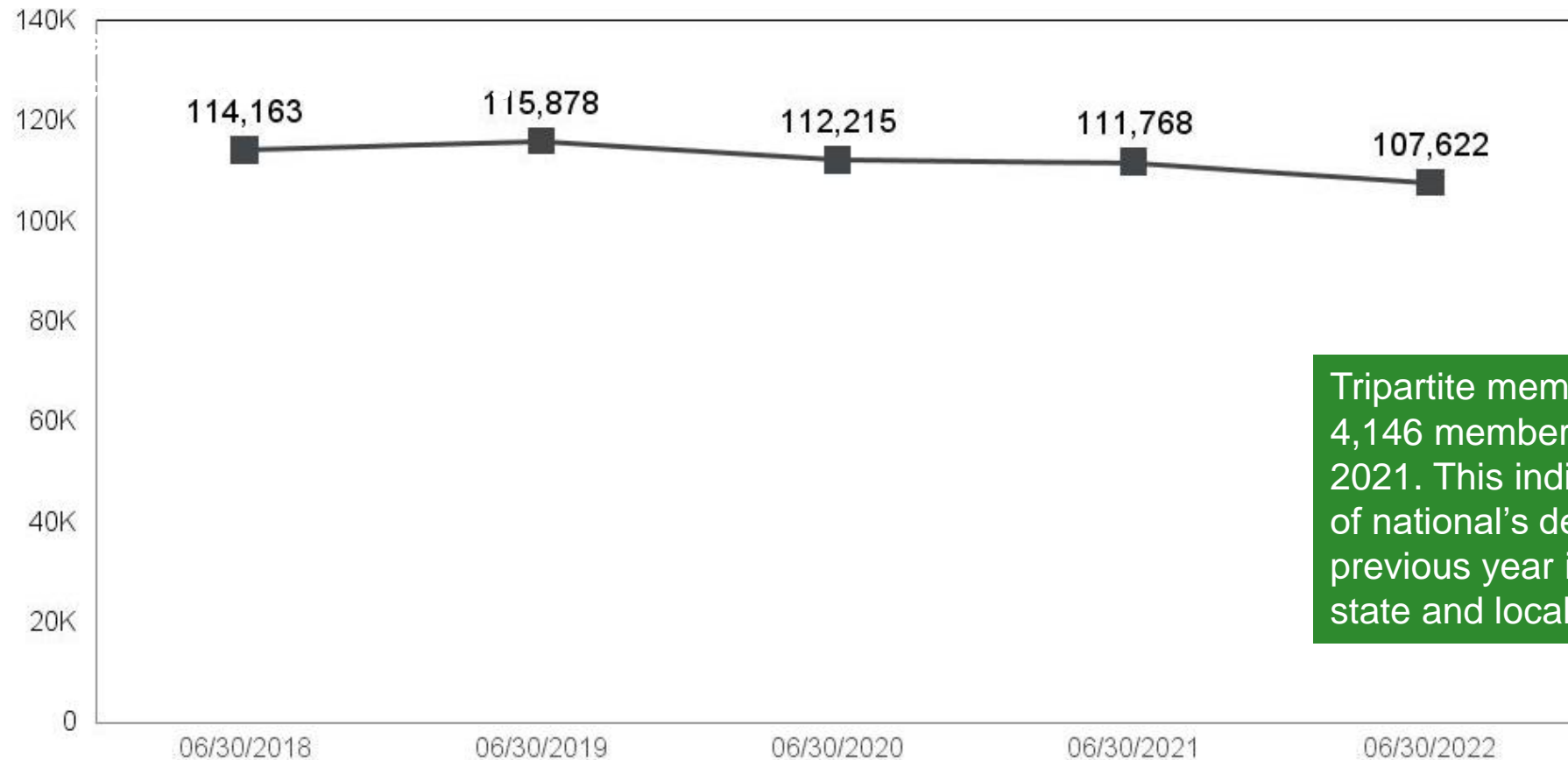
Tripartite Membership Trends

National Overall Membership



Tripartite Membership Trends

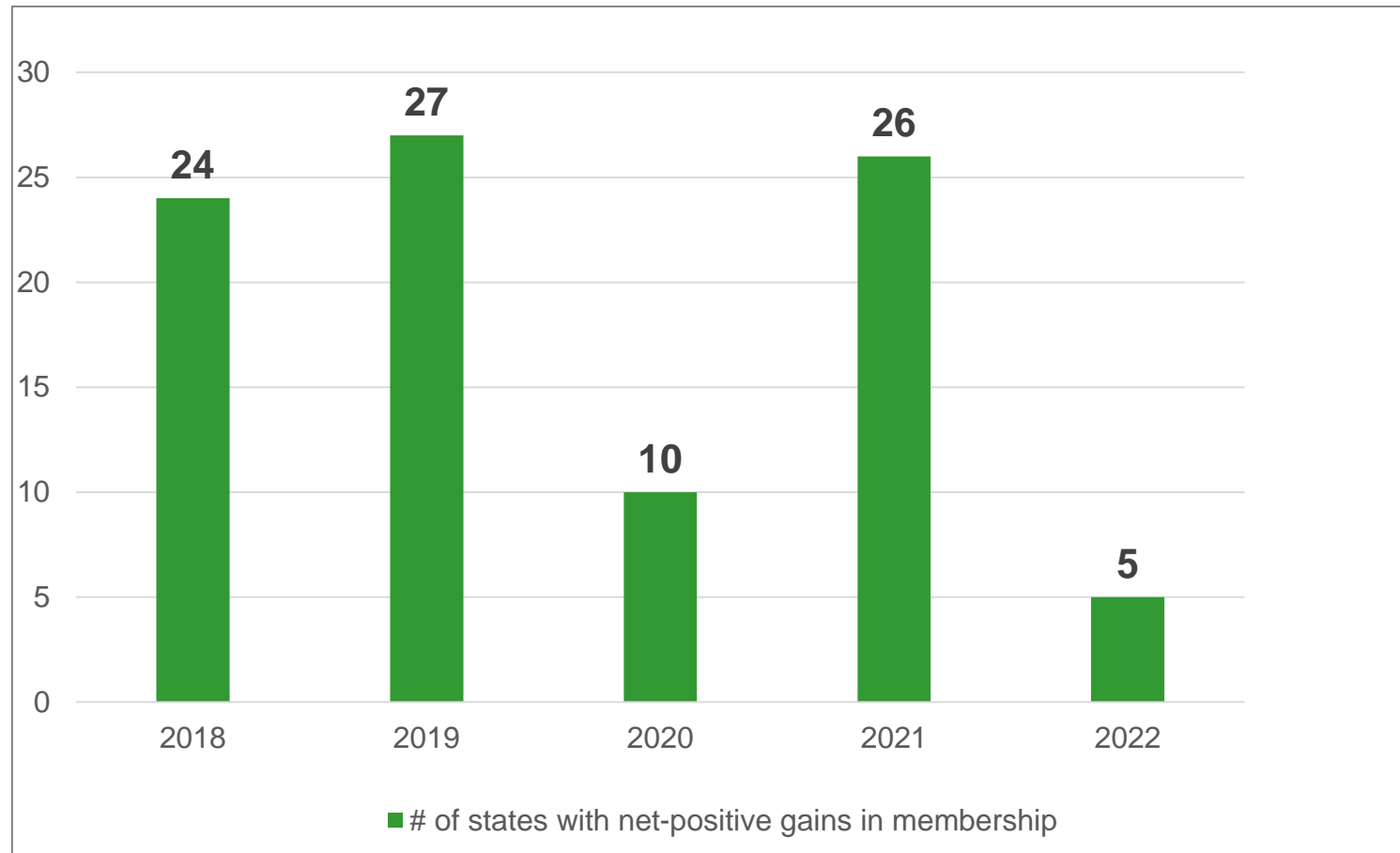
Tripartite Membership (Excluding ADA Direct Categories)



Tripartite membership is down 4,146 members from June 2021. This indicates that 100% of national's deficit over the previous year is being driven by state and local performance.

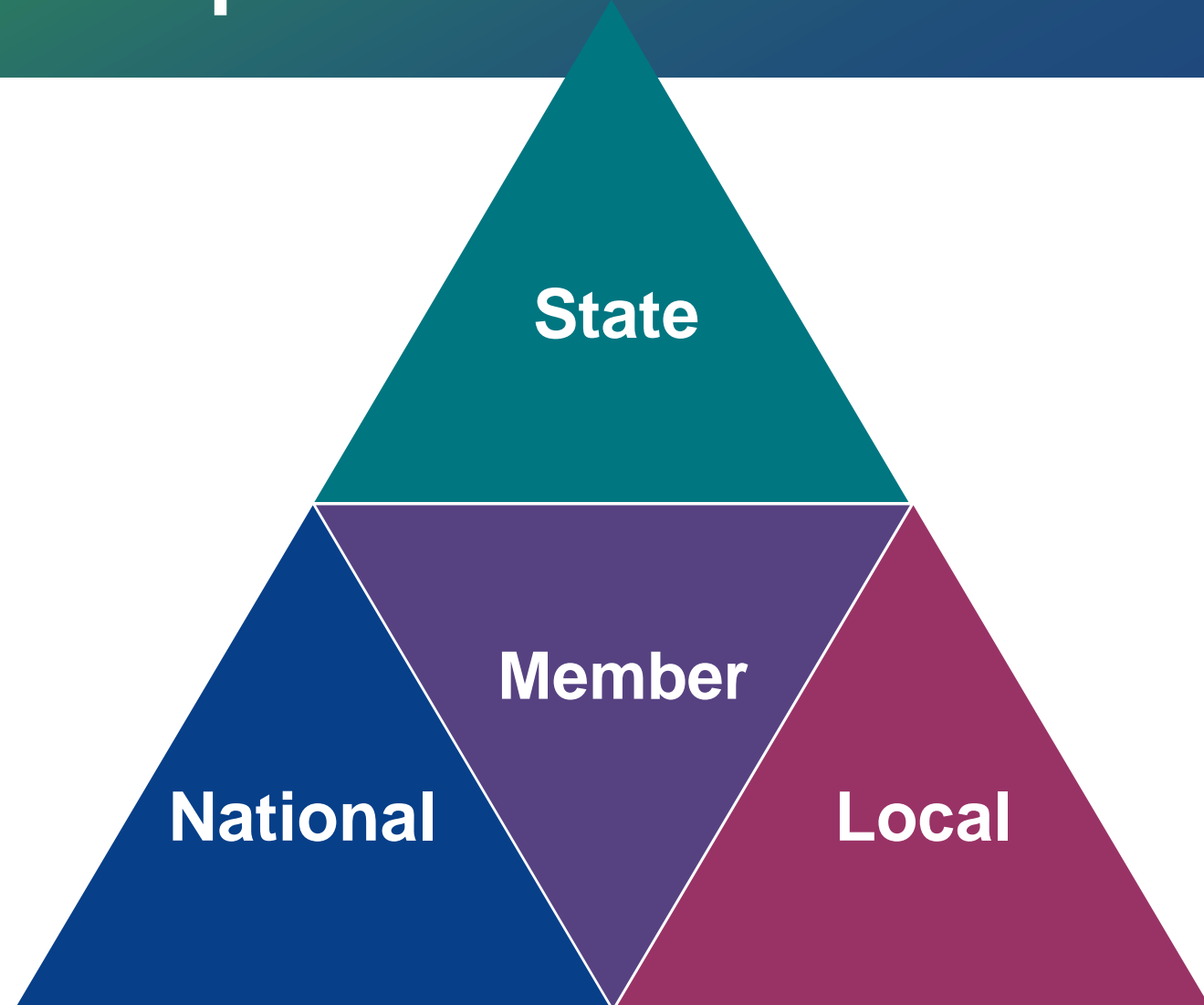
Tripartite Membership Trends

States with Positive Net Gains



Our Future Success is Interdependent

Members find
value about
equally across
all three levels



Partnering for Success



How to be a Change Hero

Dr. Steve Shepard, MBA, PhD
President, Shepard Communications Group



I was to learn later in life that we tend to meet any new situation by reorganizing, and a wonderful method it can be for creating the illusion of progress while producing confusion, inefficiency, and demoralization.



-Petronius Arbiter,
Emperor Nero's
Minister of Communications

Change. Why?

- **First and foremost:** Dentistry is evolving (at every level): We can ride the wave, or be buried by it
- Avoidance of status quo
- Demonstrates commitment
- Opportunity to involve staff in business evolution
- Deliberate act to defy complacency
- Recognizes change as an important life/work factor
- And—we can't stop it



Change Manager vs. Change Leader— What's the Difference?

- Manager

- Tactical/Operational
- Day-to-day event coordination
- 'Keeps the lights on'

} Change **Management**

- Leader

- Strategic
- Long-term focus
- Ensures there's a reason to have lights to keep on!

} Change **Leadership**

The Power of Adverbs



The personality or the soul of an organization – the articulation of a company's shared beliefs and values.

Values

Culture.

Mission

A set of norms and values that are widely shared and strongly held throughout the organization.

Vision



STR

"Hard work spotlights the
some turn up the

along the n



DGE

"Slogan Leadership"

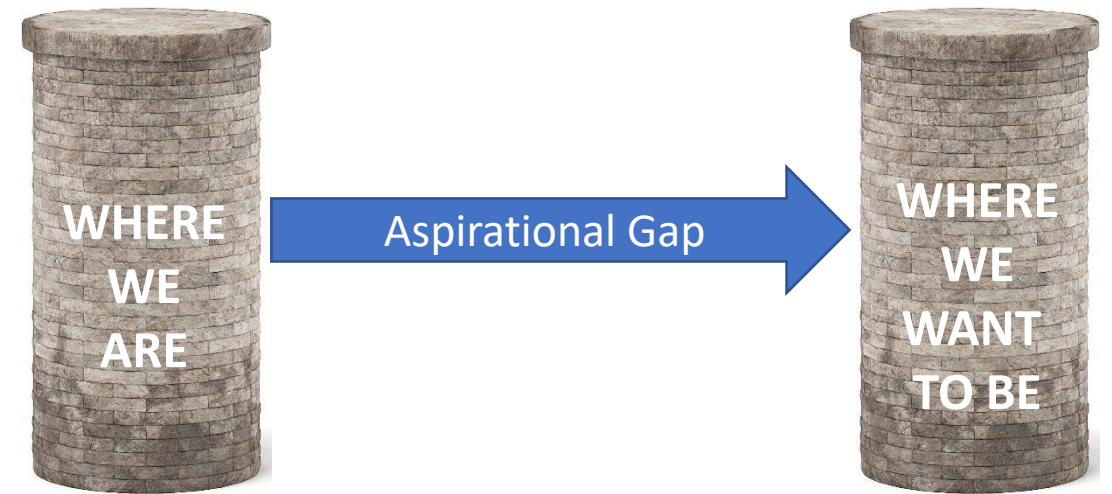


AMBITION

Sometimes the journey of a thousand miles ends very, very badly.

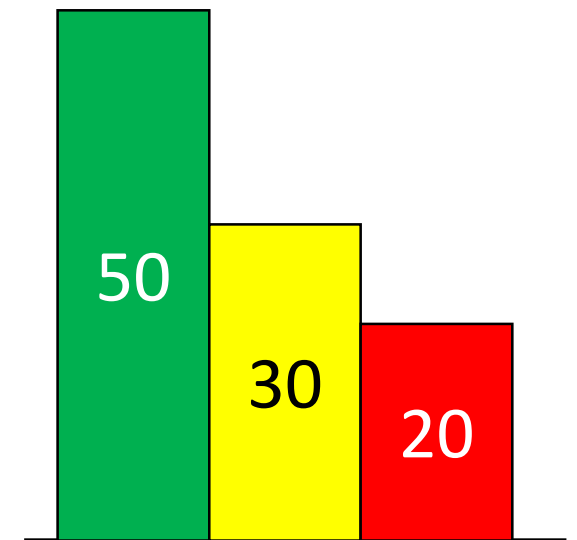
'Culture Shift'

- Demand for a “culture shift” – meaning, what, exactly? What is ‘culture’? And why does it need to change?
- Culture changes ONLY IF techniques used are out of character with rules that govern old culture – **why?**
- Can’t allow existing culture to dictate terms and conditions of how change will occur
- Culture shifts **MUST** be guided by where the organization needs to go, not where it has been
- **Never forget:** Loyalty to organization is essential; loyalty to culture is optional



Measurement & Reward Systems

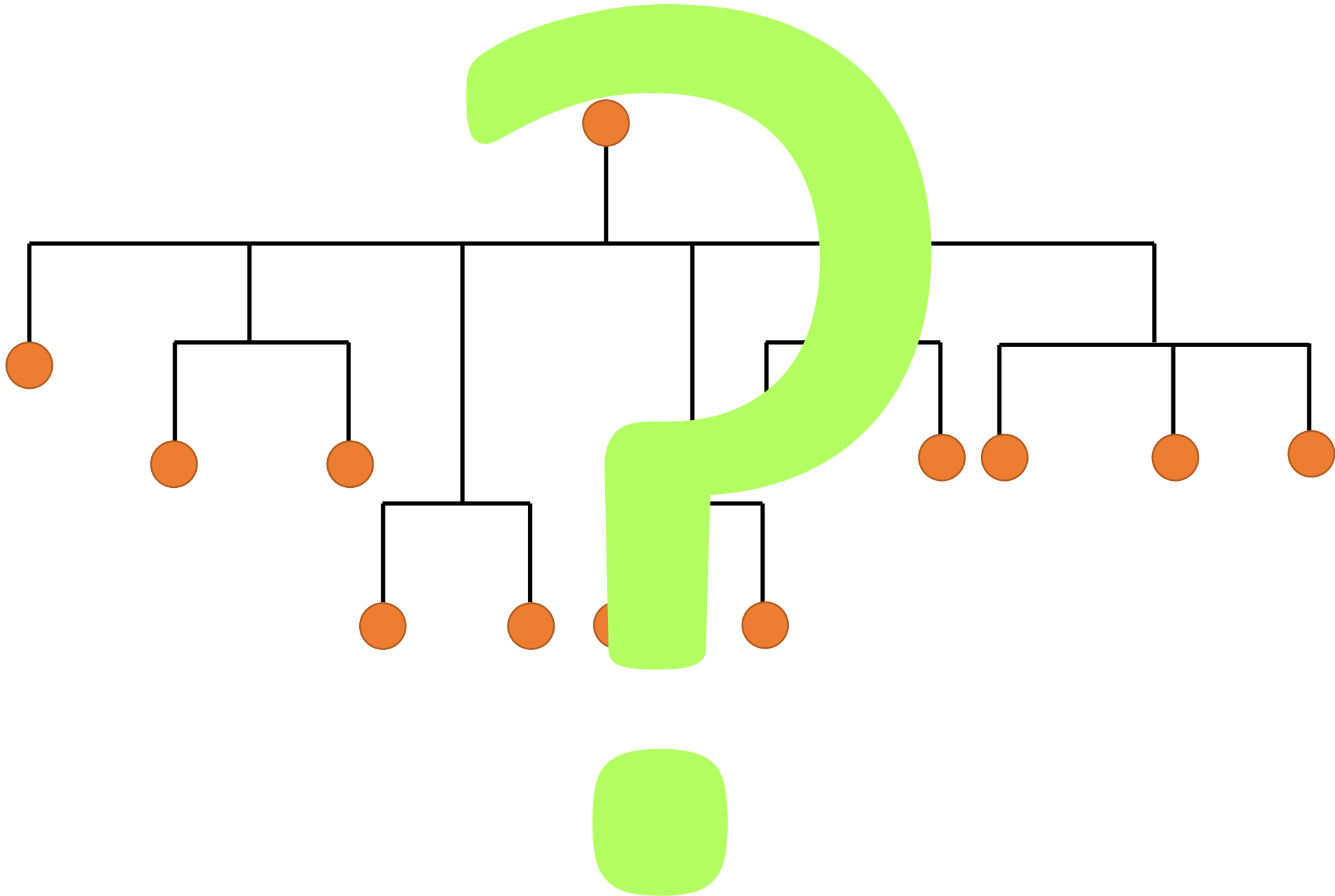
- No changes to the reward system? Reward resistance
- People **MUST** see big payoff for altered behavior
- *REMEMBER: Existing culture is sustained by current reward structure – **so change the structure!***
- Measure change, reward results
- Give everyone personal accountability for transformation
- Don't reward those who perpetuate old culture
 - Don't allow "upward delegation"



Irony of Transformation

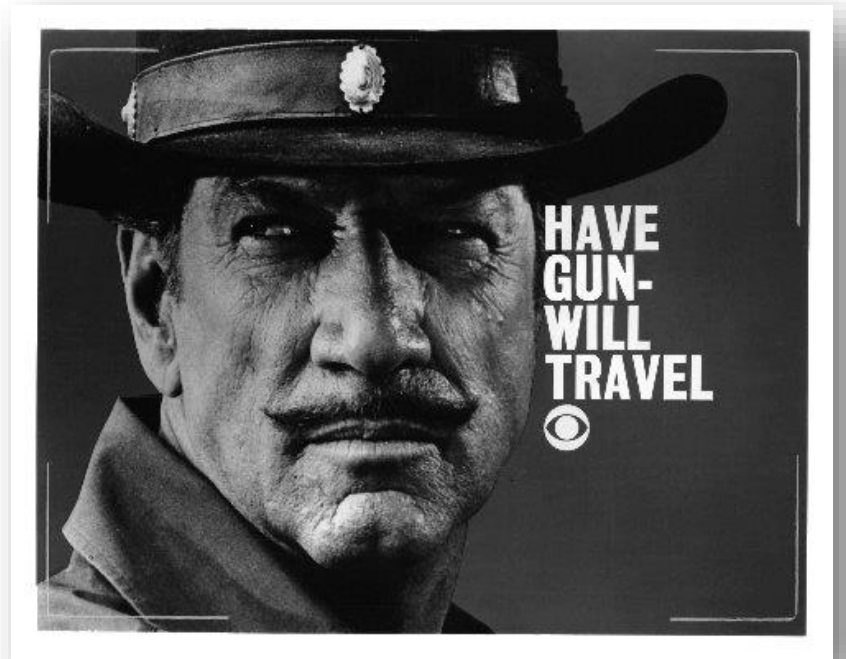
- Employees feel busier than ever, but productivity is down
- Busy leads to burnout, burnout to loss of commitment
- Change causes emotional attachment between employee, company to weaken
- Two types of employees emerge ...
- MUST re-recruit employees you want to keep



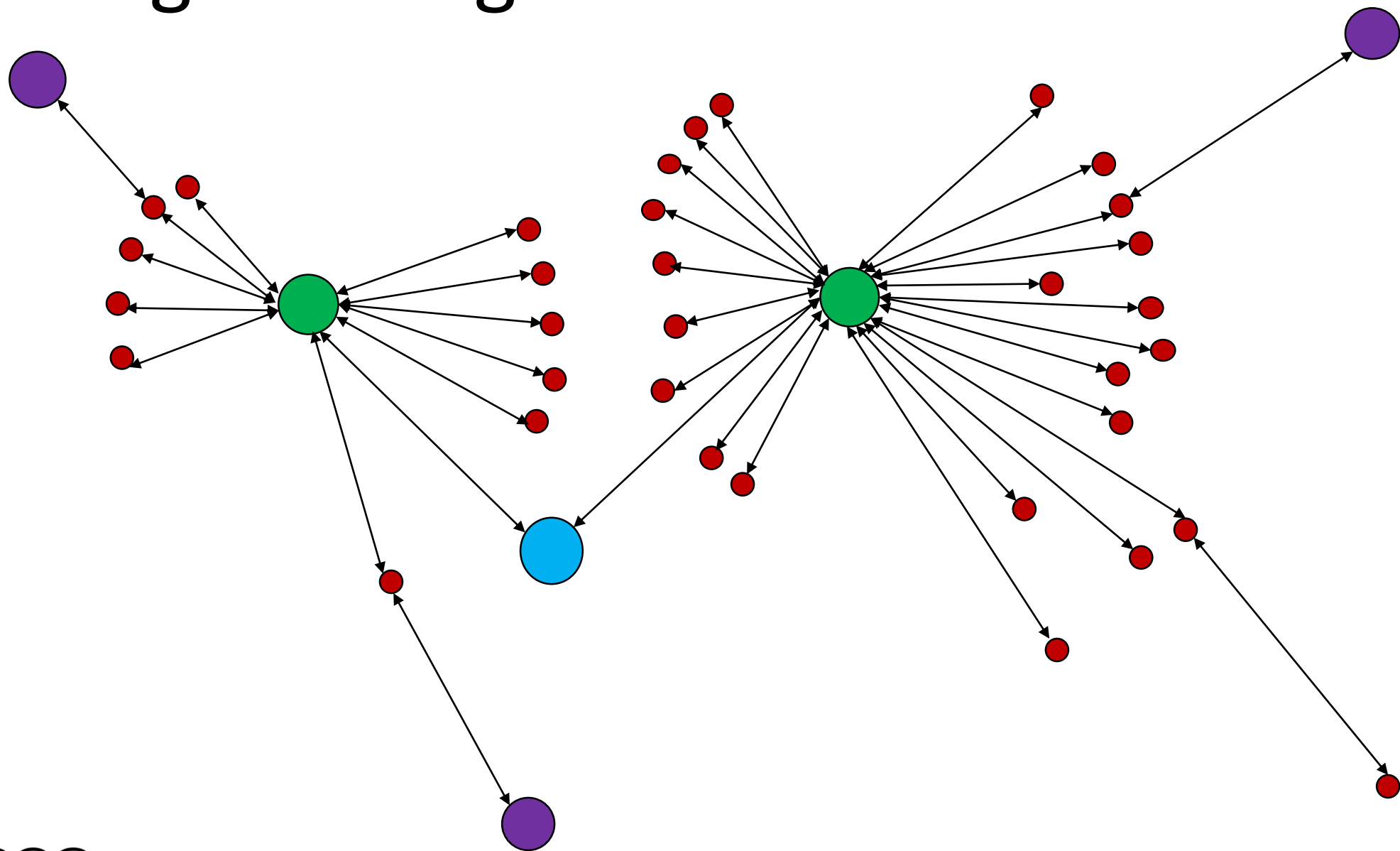


Why Informal Networks Matter

- Foster innovation through non-traditional (but highly-functional) practices
 - Google 80:20 requirement, 3M 15% Rule
- Serve as learning mechanisms for the spread of best practices
 - Peers training peers
 - Identify hidden skills
- Accumulate and archive wisdom (institutional memory)



Building a Sociogram



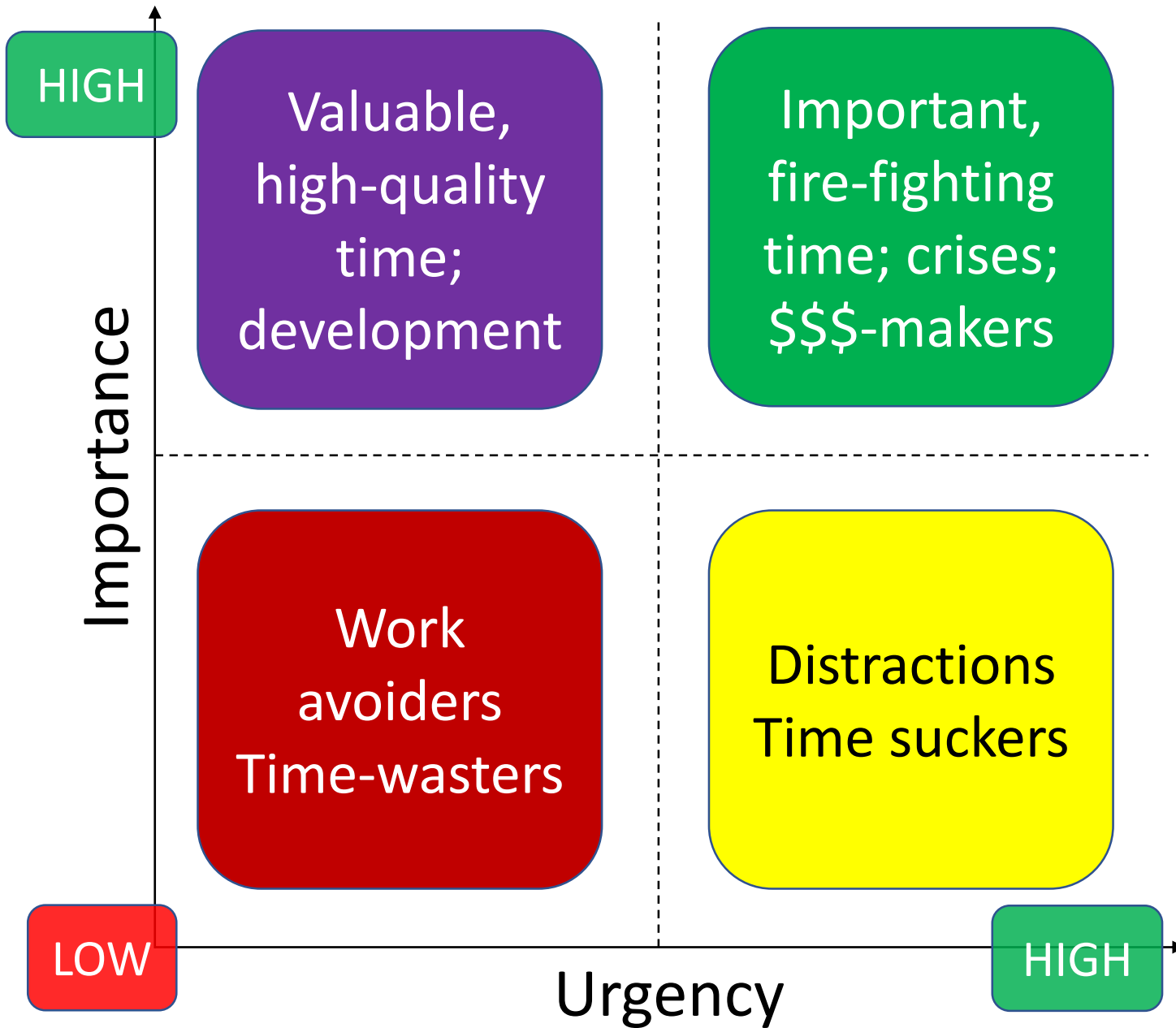
Remember These?



ROUTING SLIP

Please read, initial, and
forward to next name on list

~~Rich Meyer~~ RM
~~Warren Wilson~~ WW
~~George Vasquez~~ GV
~~Kenn Sato~~ KS
~~Debbie Long~~ DL
~~Dennis McCooey~~ MC
~~Ana Alvarez~~ A
~~Bob Taylor~~ B
~~Rock West~~ RW
Dewey Long



Be deliberate about time usage—for you AND your staff.

Do an activity inventory—
What do people spend most of their time doing?

How to Be a Change Hero (for Everyone!)

- Create and communicate the vision
 - Understand your audience and articulate your ideas in ways that resonate with what they are concerned with: **WHY**, not **WHAT**
 - Just because you think something is important doesn't mean they will—and vice-versa
- Create a sense of urgency around the need for change
- Remove obstacles
- Create short-term wins
 - Build on them
- Anchor changes in the corporate culture

How to Be a Change Hero (for Everyone!)

- Identify your span of control and influence
 - *Probably greater than you realize*
- Seek out champions
 - Recognize hidden skills, assets
- Challenge your own beliefs and assumptions
 - What's real? What's dogma?
- *Finally, make change the responsibility of everyone in the organization*



Thank you!

Steven Shepard

+1-802-238-1007

Steve@ShepardComm.com

Copyright 2022 Shepard Communications Group, LLC. All Rights Reserved.

The Future of Oral Health in America



Marko Vujicic, PhD
Chief Economist and Vice President
ADA Health Policy Institute



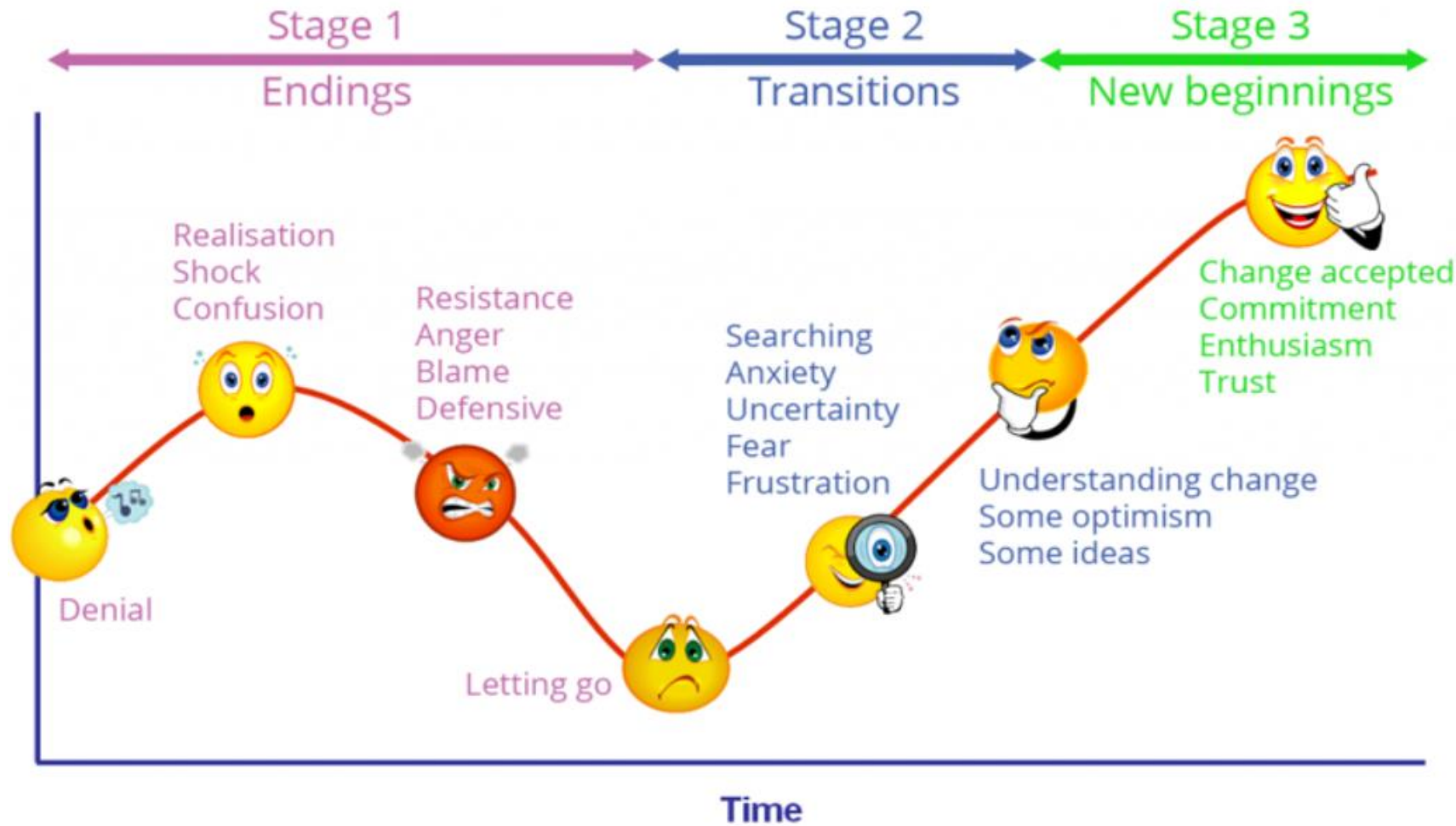
Dave Preble, DDS, JD, CAE
Chief Strategist and Senior Vice President
ADA Practice Institute

Today



1. *Update on some key trends in oral health in America*
2. *Some soul-searching questions about organized dentistry's vision for the future*

This Will Probably Get Uncomfortable....That's OK



Recognize your emotions around change!

Lots of New Data on Trends in the Past 20 Years



International Journal of Health Economics and Management
https://doi.org/10.1007/s10754-019-09274-x

RESEARCH ARTICLE

Consolidation in the dental industry: a closer look at dental payers and providers

Kamyar Nasheh¹ · John R. Bowblitt² · Marko Vujcic¹ · Sean Shengshu Huang³

Received: 14 May 2019 / Accepted: 25 September 2019
© The Author(s) 2019

Abstract
We examine the effects of consolidation in the dental industry on the dental market. Data from the American Dental Association (ADA) and the American Dental Association's (ADA) Fair Health Study (FHS) are used to analyze the size of dental practices, the number of dentists, and the number of dental procedures performed. The findings suggest that consolidation in the dental industry has led to a decrease in the number of dentists and an increase in the number of dental procedures performed. This is likely due to the fact that larger dental practices are able to attract more patients and offer a wider range of services.

Keywords Dental industry · Consolidation · Dental payers · Dental providers

JEL Classification I11 · J24

Introduction
Traditionally, U.S. dentists have been self-employed. However, in recent years, there has been a trend toward consolidation in the dental industry. This has led to a decrease in the number of dentists and an increase in the number of dental procedures performed. This is likely due to the fact that larger dental practices are able to attract more patients and offer a wider range of services.

Oral Health Cost & Use

By Marko Vujcic, Thomas Buchmueller, and Rachel Klein

Dental Care Presents The Highest Level Of Financial Barriers, Compared To Other Types Of Health Care Services

Abstract
This study examines the financial barriers to dental care. Data from the American Dental Association's (ADA) Fair Health Study (FHS) are used to analyze the financial barriers to dental care. The findings suggest that dental care presents the highest level of financial barriers compared to other types of health care services. This is likely due to the fact that dental care is often more expensive than other types of health care services.

Key Points
Question: Since 2001, what changes have occurred in the financial barriers to dental care?
Findings: In this study, we found that the financial barriers to dental care have increased since 2001. This is likely due to the fact that dental care is often more expensive than other types of health care services.

Objectives
To examine trends in self-employment and employment of health care professionals from 2001 to 2015.

Design, Setting, and Participants
Survey study of health care professionals (self-employed, employed by private sector, or employed by government) and annual labor earnings for 50 states and the District of Columbia were extracted from the 2001 to 2015 American Community Survey. The analyses were restricted to 175,714 self-identified dentists, physicians, pharmacists, optometrists, podiatrists, chiropractors, and physical therapists aged 30 years and older who worked at least 40 weeks per year and 20 hours per week. Controlling for age, sex, race/ethnicity, year, and state of residence, median regression models were used to measure the gap in annual labor earnings between self-employed and employed health care professionals.

Main Outcomes and Measures
Annual labor earnings, defined as the sum of self-employment and wages or salary income.

Results
Our sample of 175,714 respondents included 99,077 physicians, 20,008 dentists, 26,143 pharmacists, 4,238 optometrists, 2,076 chiropractors, 194 podiatrists, and 19,108 physical therapists. The weighted percentage of self-employed physicians decreased from 35.2% (95% CI, 34.4%–36.7%) in 2001 through 2005 to 24.7% (95% CI, 24.2%–25.2%) in 2014. Of 41,203 physicians in 2011 through 2015, the percentage of self-employed dentists decreased from 71.0% (95% CI, 71.7%–74.8%) in 2001 through 2005 to 65.7% (95% CI, 63.7%–68.4%) in 2014 through 2015. Among physicians, the regression-adjusted earnings gap narrowed from \$30,448 (95% CI, \$23,040–\$37,855, P < .001) during 2001 through 2005 to \$21,291 (95% CI, \$15,725–\$26,859, P < .001) during 2011 through 2015. From 2001 to 2015, the earnings gap also narrowed among pharmacists, optometrists, and podiatrists. The regression-adjusted earnings gap narrowed among chiropractors and physical therapists.

Conclusions and Relevance
Since 2001, the percentage of health care professionals who are self-employed declined, and the gap in earnings between self-employed and employed health care professionals narrowed.

JAMA Network Open. 2019;2(8):e1904043. doi:10.1001/jamanetworkopen.2019.04043

Open Access. This is an open access article distributed under the terms of the CC-BY License.

JAMA Network Open. 2019;2(8):e1904043. doi:10.1001/jamanetworkopen.2019.04043

June 25, 2019

Health Policy Institute
ADA American Dental Association

International Students in U.S. Dental Schools

627 INTERNATIONAL DENTAL SCHOOL GRADUATES WERE ADMITTED WITH ADVANCED STANDING IN 2018-19. More than two of every three were admitted in the 2nd year of the program.

SECOND YEAR **THIRD YEAR**

Dentist Earnings and Business in the U.S.

AVERAGE ANNUAL NET INCOME, DENTISTS IN PRIVATE PRACTICE

EMERGENCY DEPARTMENT VISITS FOR DENTAL CONDITIONS – A Snapshot

EMERGENCY DEPARTMENT VISITS FOR DENTAL CONDITIONS BY AGE GROUP

EMERGENCY DEPARTMENT VISITS FOR DENTAL CONDITIONS BY PAYER

EVERY 14 SECONDS
How often, on average, someone visits a hospital emergency department for dental conditions in the United States.

2.2 MILLION
Total number of hospital emergency department visits for dental conditions in the United States in 2016.

70%
Percentage of hospital emergency department visits for dental conditions occurring outside of normal business hours.

\$2.4 BILLION
Total amount of dollars spent on hospital emergency department visits in the United States in 2016.

41%
Percentage of hospital emergency department visits for dental conditions among adults in the United States that are paid for by Medicaid.

68%
Percentage of hospital emergency department visits for dental conditions among children in the United States that are paid for by Medicaid.

Medicaid expansion under the Affordable Care Act led to increased dental coverage and dental care use among Medicaid-enrolled adults, some of which occurred in hospital emergency departments.¹

Source: HPI analysis of the 2016 Nationwide Emergency Department Sample, Agency for Healthcare Research and Quality, as part of the National Emergency Department Study. Majority of dental-related emergency department visits take place in hospital emergency departments. Health Policy Institute Research Brief American Dental Association, August 2019. 1. Chalmers N, Goss L, Campbell R. After Medicaid expansion in Kentucky, use of hospital emergency departments for dental conditions increased. Health Affairs. December 2018;37(24):e12832. Published August 2019.

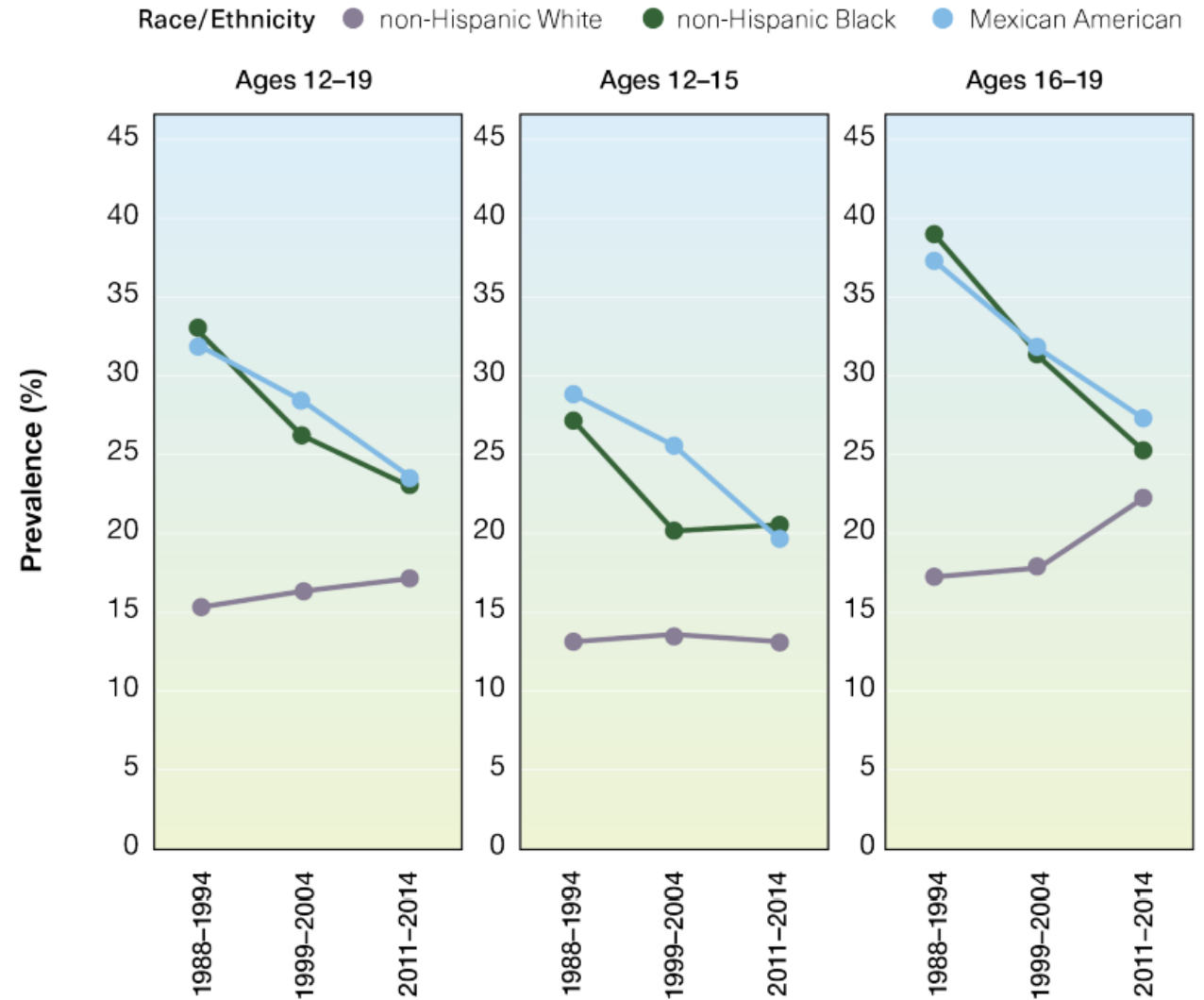
For more information, visit ada.org/HPI or contact the Health Policy Institute at hpi@ada.org.

Key Takeaways We Want to Highlight

1. **Mouth is connected to body.** Lots of new, compelling evidence today about oral health's link to overall health and well-being, health care costs, and the economy.
2. **Big gains in oral health among kids.** Steady improvements in most oral health measures, big increases in dental care visits. Largest gains have been among low-income children and non-white children. These improvements driven by significant expansions of dental coverage for kids, primarily through public programs.
3. **Much less progress for adults and seniors.** For working-age adults, oral health outcomes have not improved. Dental care use has been declining very slowly. Disparities by income and race have been stable. For seniors, some improvements in some oral health outcomes, but mostly among the wealthy.
4. **Cost barriers are really important.** Dental care stands out from other health care services in terms of being unaffordable. Working-age adults, especially low-income adults, face the highest cost barriers to dental care. Cost is the top reason adults and seniors do not go to the dentist.
5. **Big picture**, the current model of dental care delivery and financing is working fairly well for three groups of people: kids, middle- and upper-income adults and seniors, and providers. There is huge upside to expand the patient base...but it will take a big departure from the status quo.

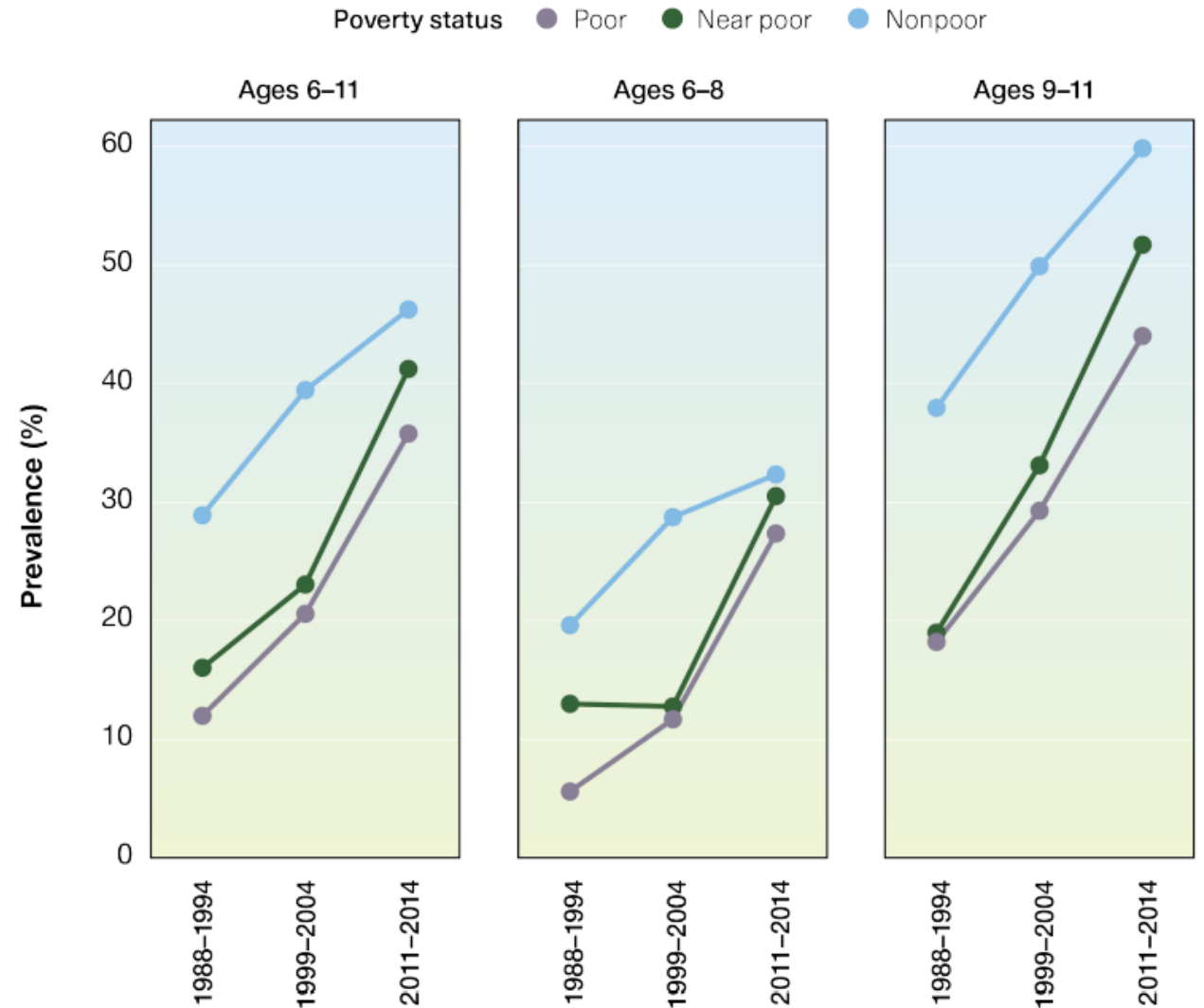
Prevalence of Untreated Caries – Children

There have been major reductions in untreated caries among non-white adolescents. Disparities by race are narrowing.



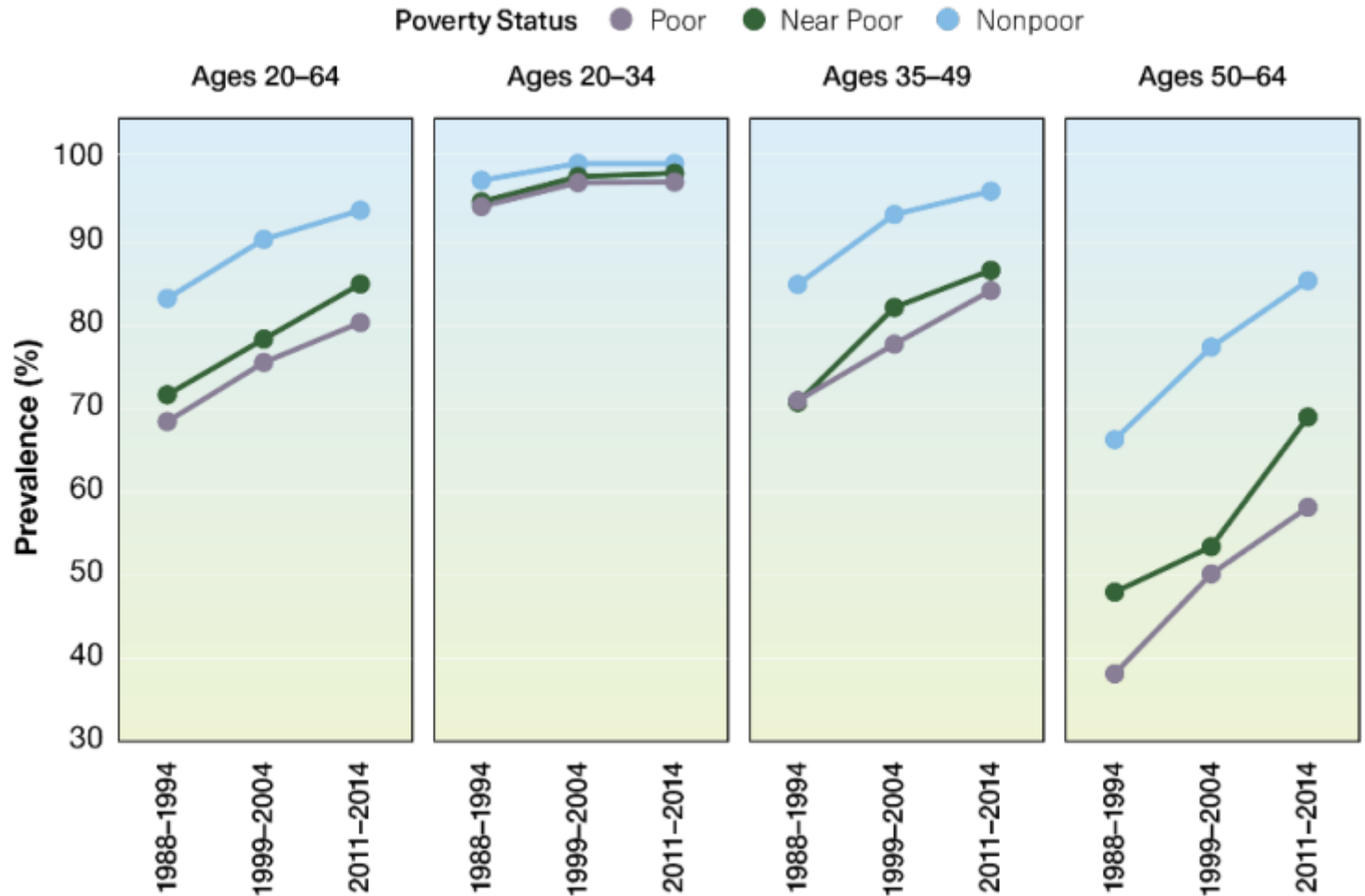
Prevalence of Dental Sealants – Children

Sealant use has increased, particularly for low-income children. Disparities by income are narrowing.



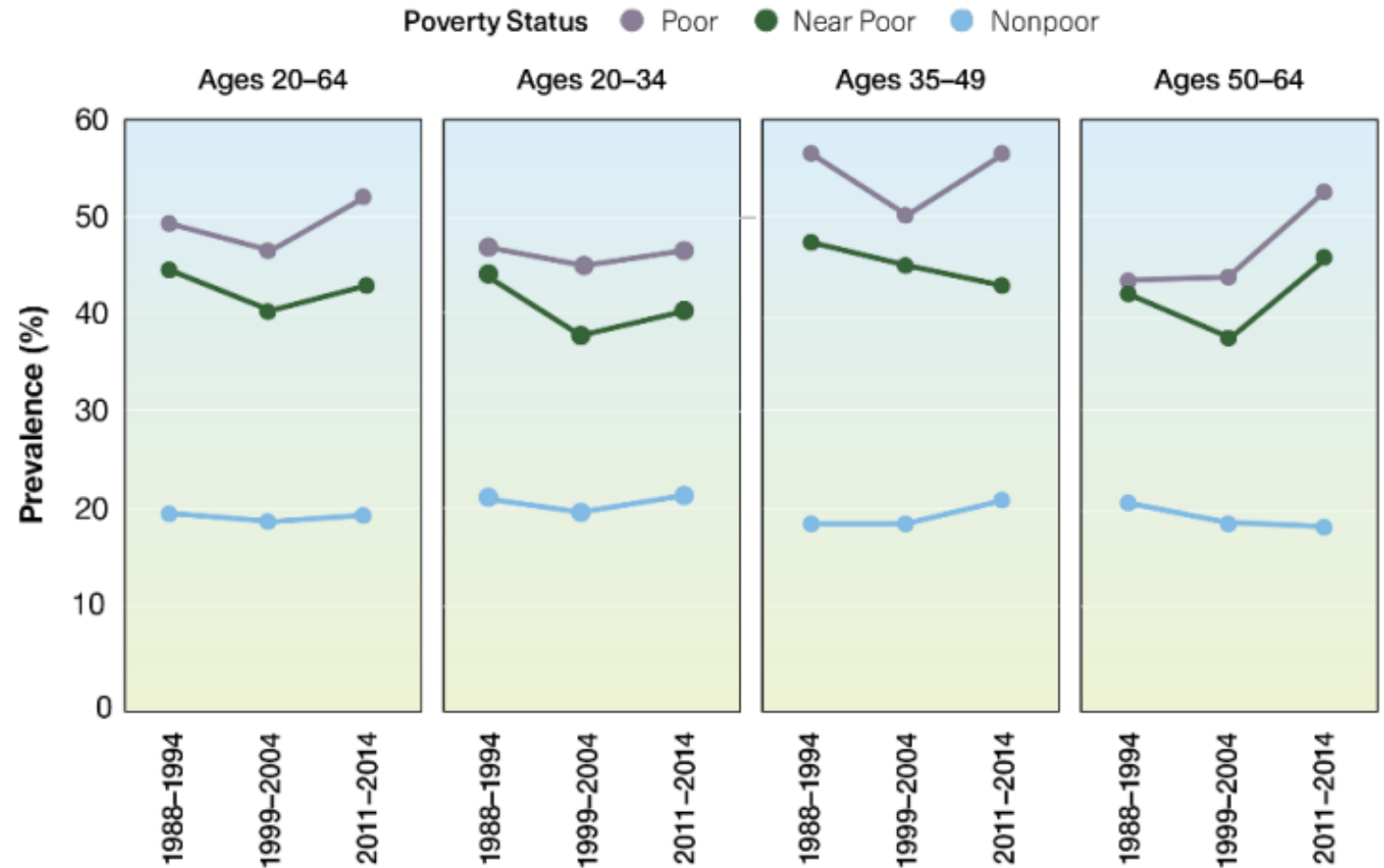
Prevalence of Functional Dentition – Adults

There have been gains in functional dentition. Disparities have not narrowed over time, unlike for children. In addition, as people age, these disparities magnify.



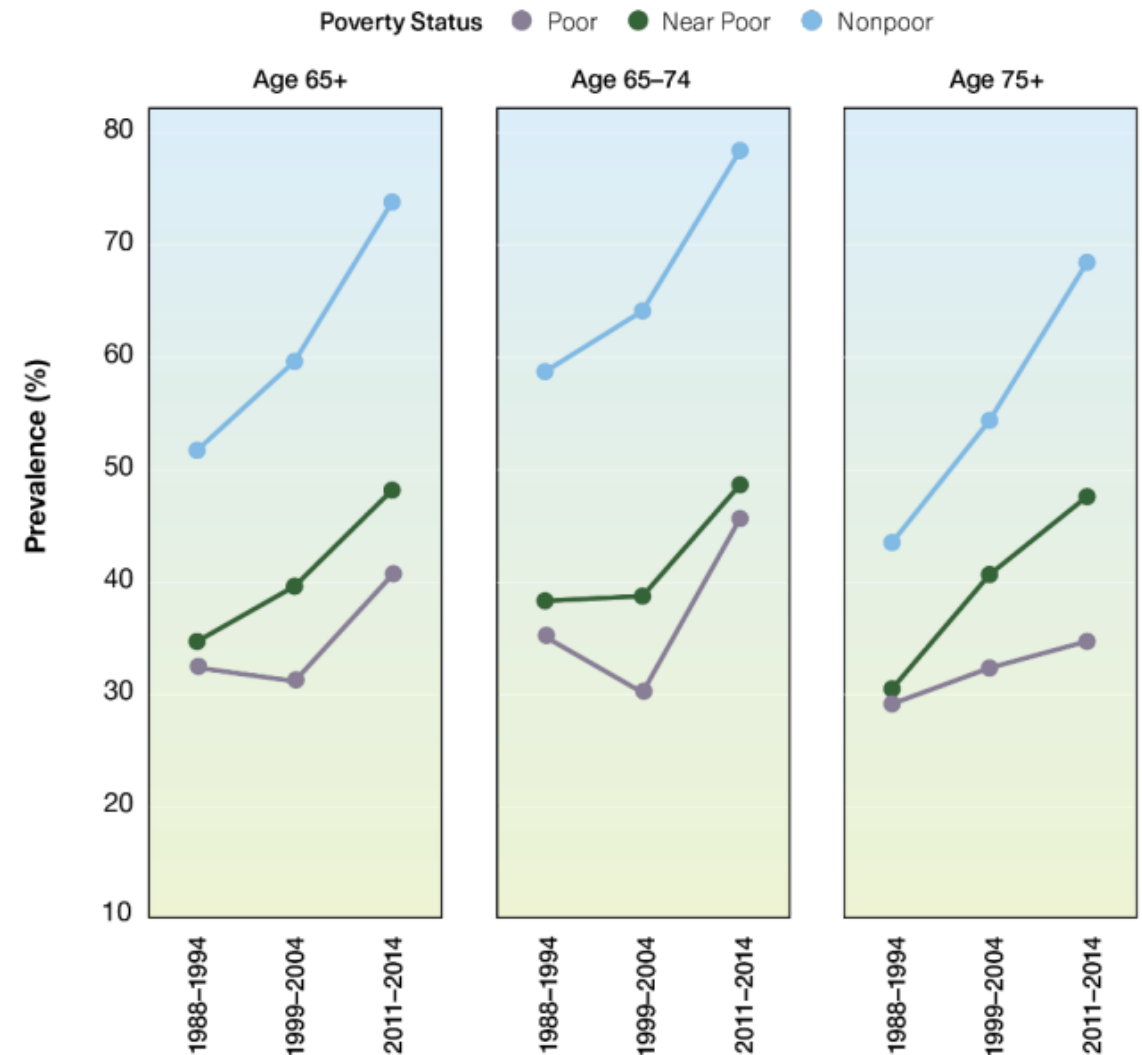
Prevalence of Untreated Caries – Adults

Untreated caries rates have not changed much, and if anything, have increased for low-income adults. Disparities by income have widened.



Prevalence of Functional Dentition – Seniors

There have been gains in functional dentition, most significantly for high-income seniors. Disparities by income are widening.



Half the Population Not Seeing a Dentist Regularly



About **40-50%** of the U.S. population visit the dentist within the year.

Rates have increased among kids and seniors, decreased among adults.

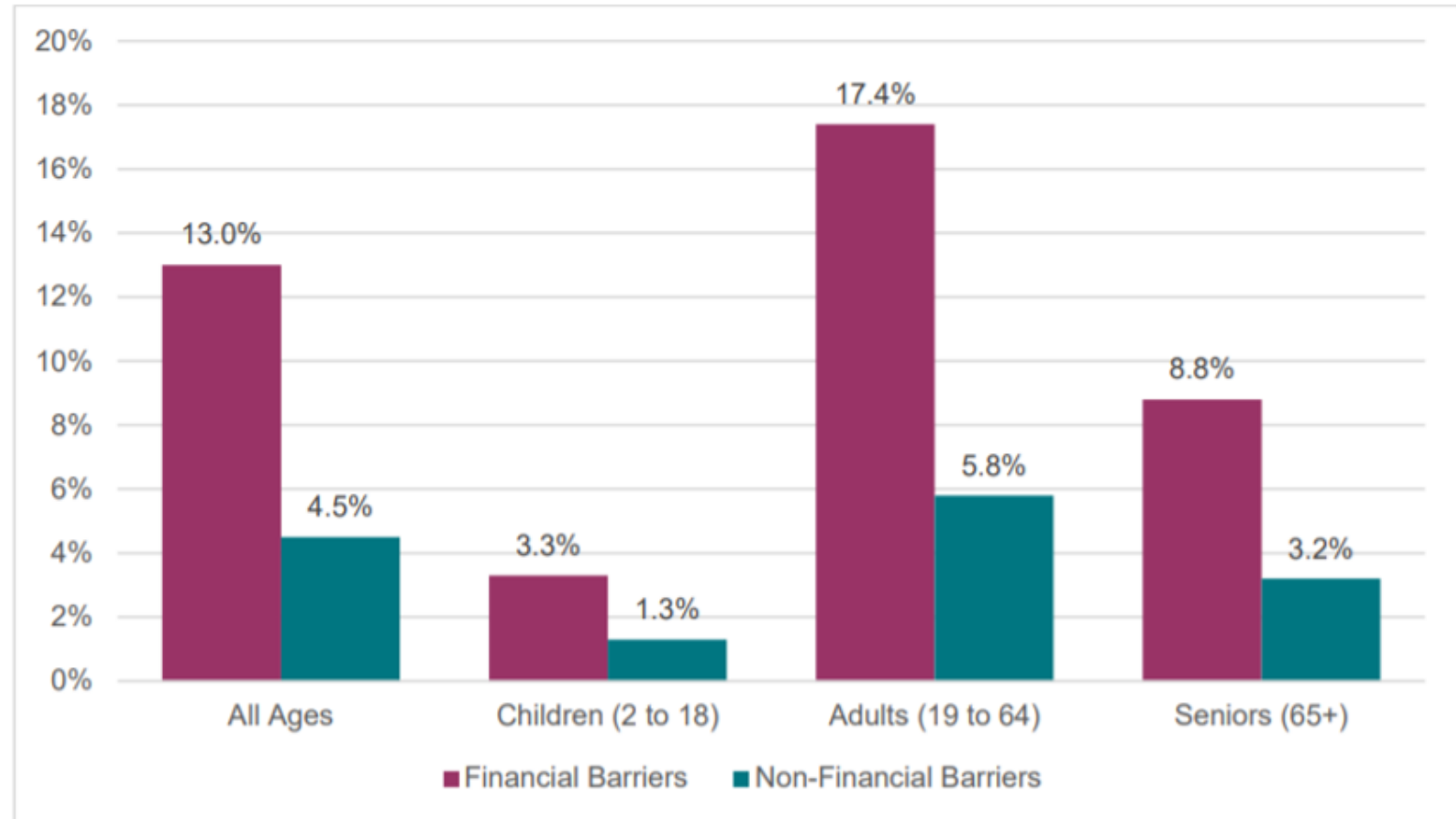


Why Don't More People Visit the Dentist?

By far, cost barriers are much more important than any other type of barrier when it comes to visiting the dentist.

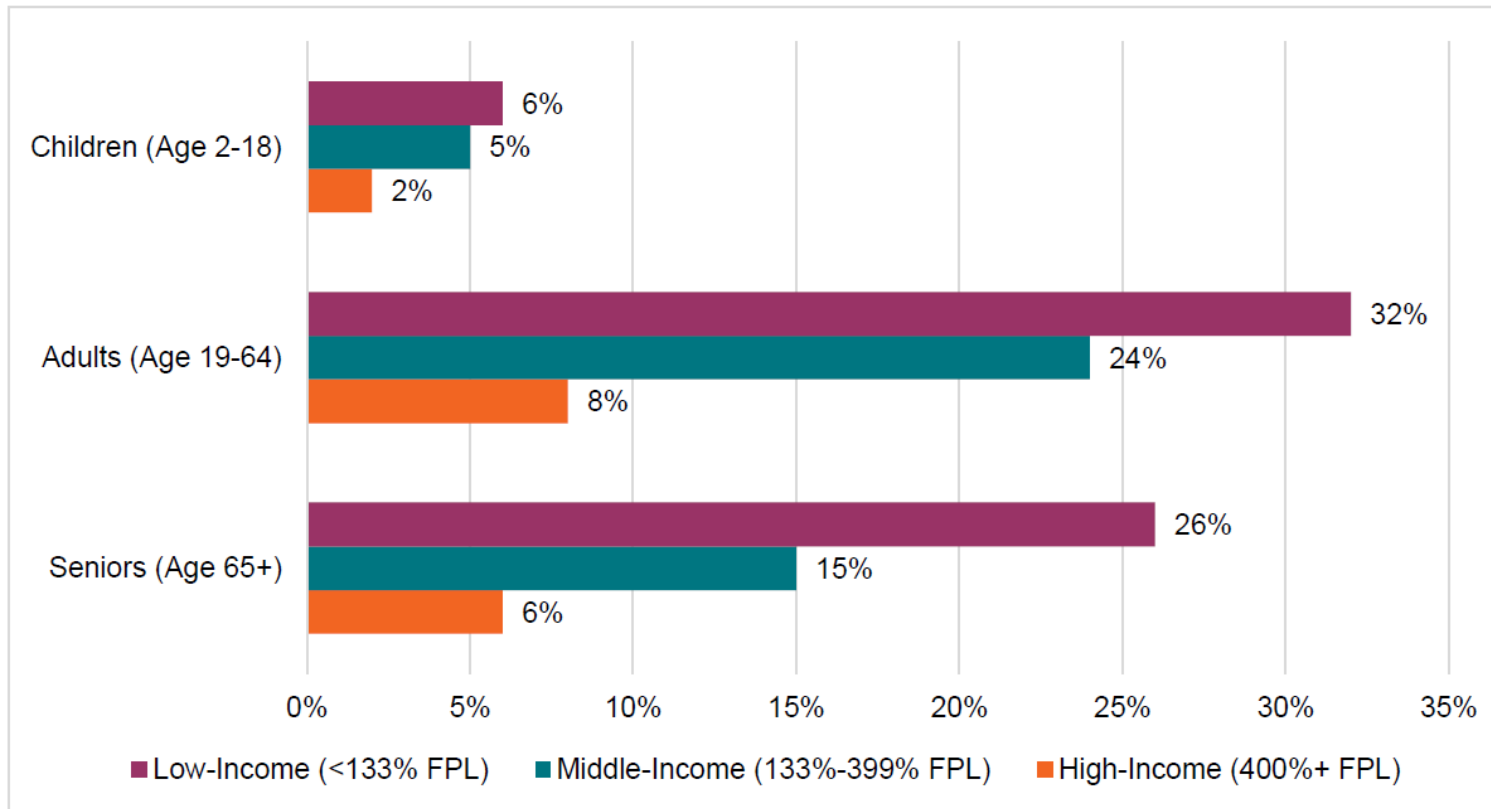
Adults face more barriers to dental care than children and seniors.

Percentage Indicating Financial and Non-Financial Barriers to Needed Dental Care



Low-Income Adults Face the Biggest Cost Barriers

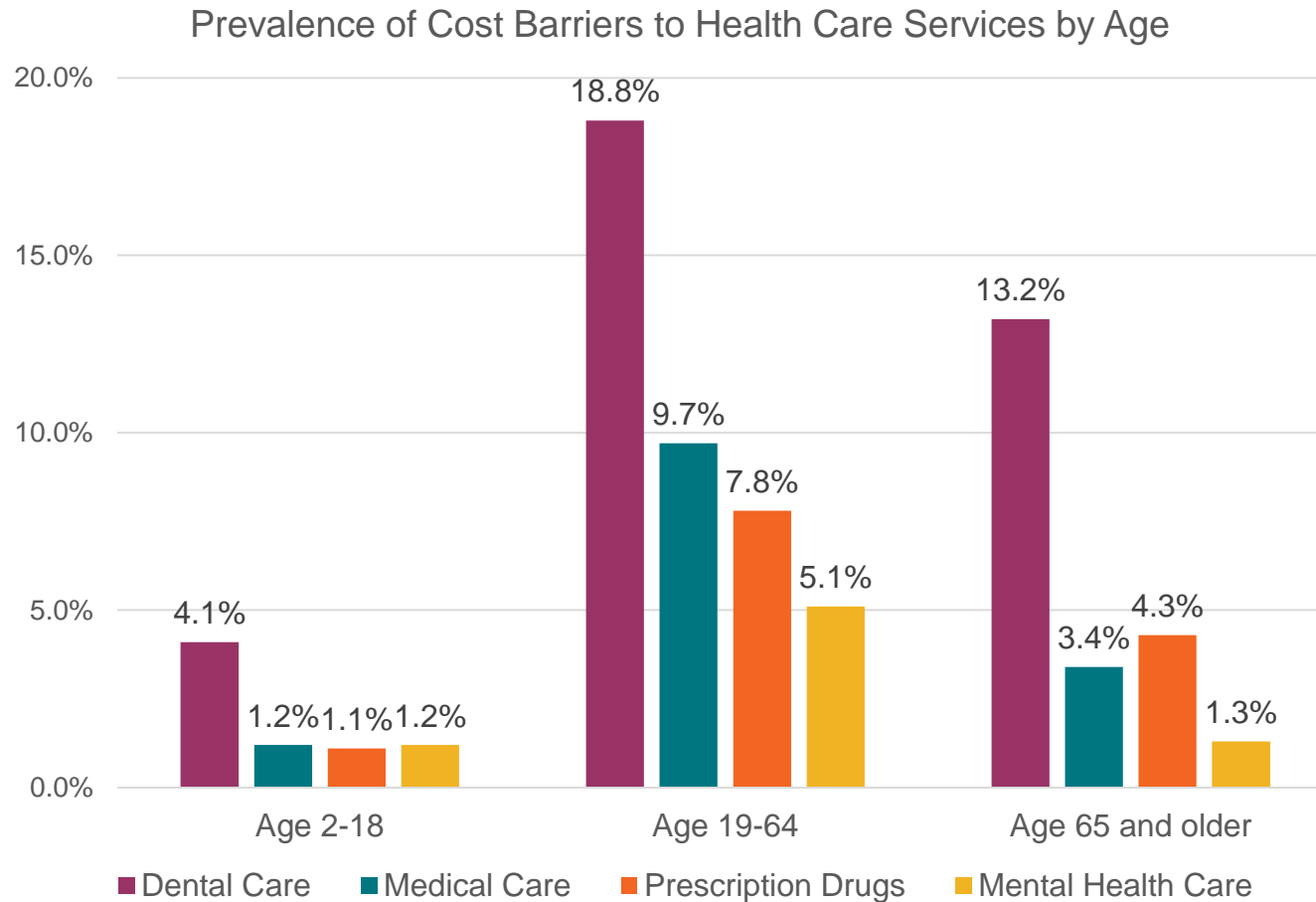
Figure 1: Prevalence of Cost Barriers to Dental Care by Age and Income Level



Of any age and income group, low-income adults face the most significant cost barriers to dental care.

Source: Health Policy Institute analysis of National Health Interview Survey data for 2019. **Note:** Percentages indicate those who needed dental care but did not obtain it in the past 12 months due to cost. FPL: federal poverty level.

Dental Care Stands Out as Being ‘Unaffordable’

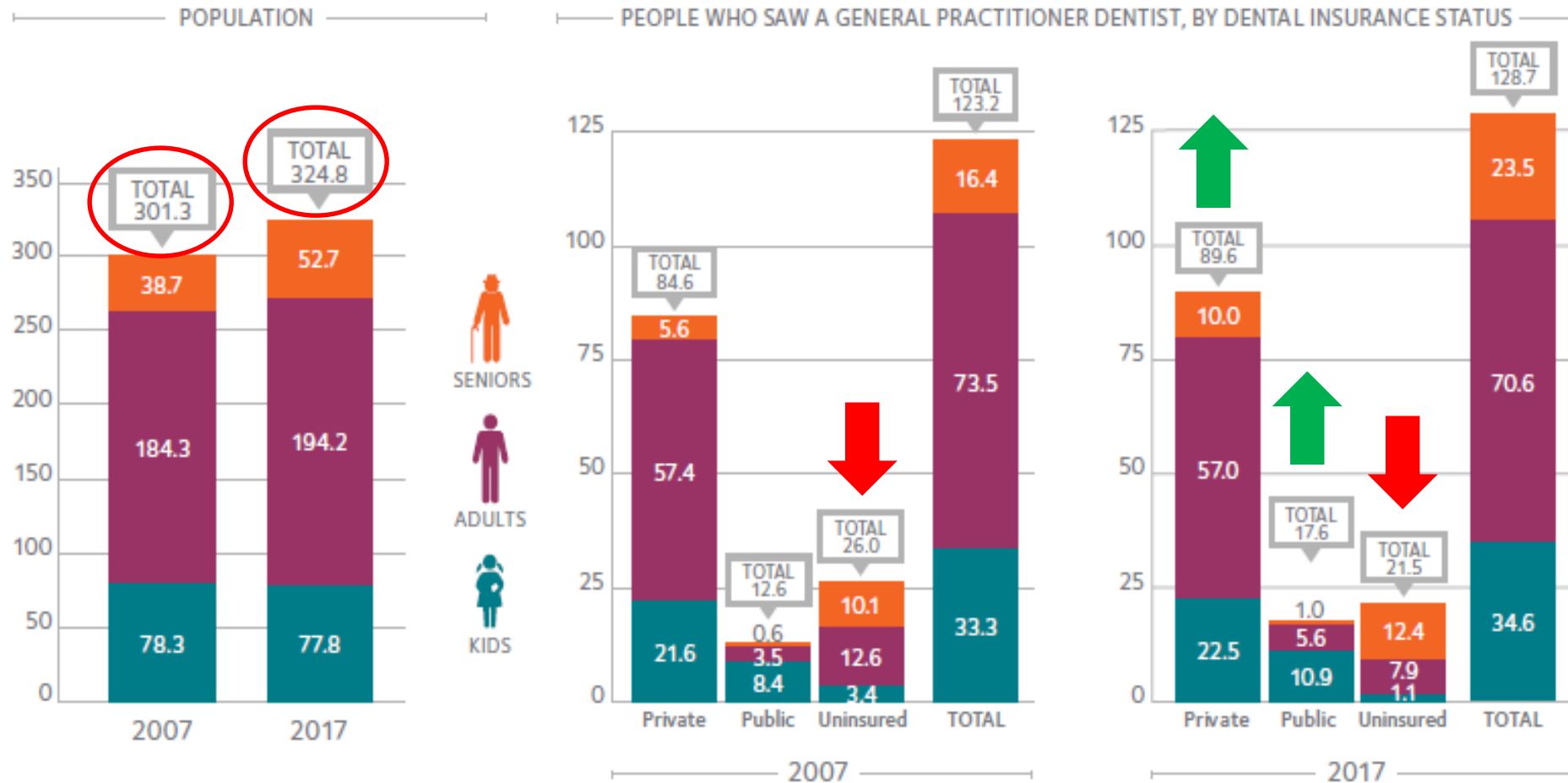


Cost barriers to dental care are higher than for any other type of health care service.

Source: Health Policy Institute analysis of National Health interview Survey data for 2019. Unpublished. **Note:** Percentages indicate those who reported they did not obtain needed services in the past 12 months due to cost.

The Shifting Patient Mix

BREAKDOWN OF THE NUMBER OF AMERICANS VISITING A GENERAL PRACTITIONER DENTIST (IN MILLIONS)



The insured patient base is expanding. Both public and private.

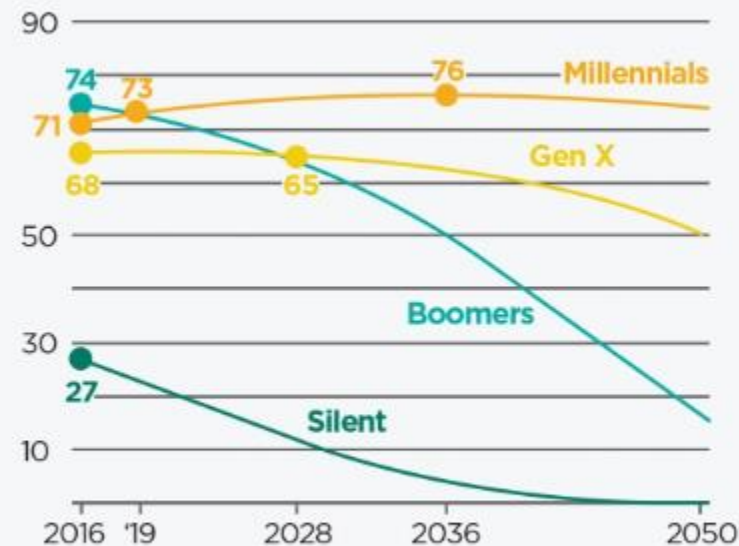
The self-pay patient base is shrinking... and is about to go off of a cliff as senior #s start to decline.

Patient Mindsets are Changing

There is a significant generational shift happening in the U.S. population. Millennials are flexing more economic muscle.

Projected population by generation

In millions



Note: Millennials refer to the population ages 20 to 35 as of 2016.

Source: Pew Research Center tabulations of U.S. Census Bureau population projections released December 2014 and 2016 population estimates.

GEN Z

Born 1997 and later
Age in 2019: 22 and younger

Millennials

Born: 1981 to 1996
Age in 2019: 23 to 38

Gen X

Born: 1965 to 1980
Age in 2019: 39 to 54

Baby Boomers

Born: 1946 to 1964
Age in 2019: 55 to 73

The Silent Generation

Born: 1928 to 1945
Age in 2019: 74 to 91

A Generational Shift in Patient Mindset

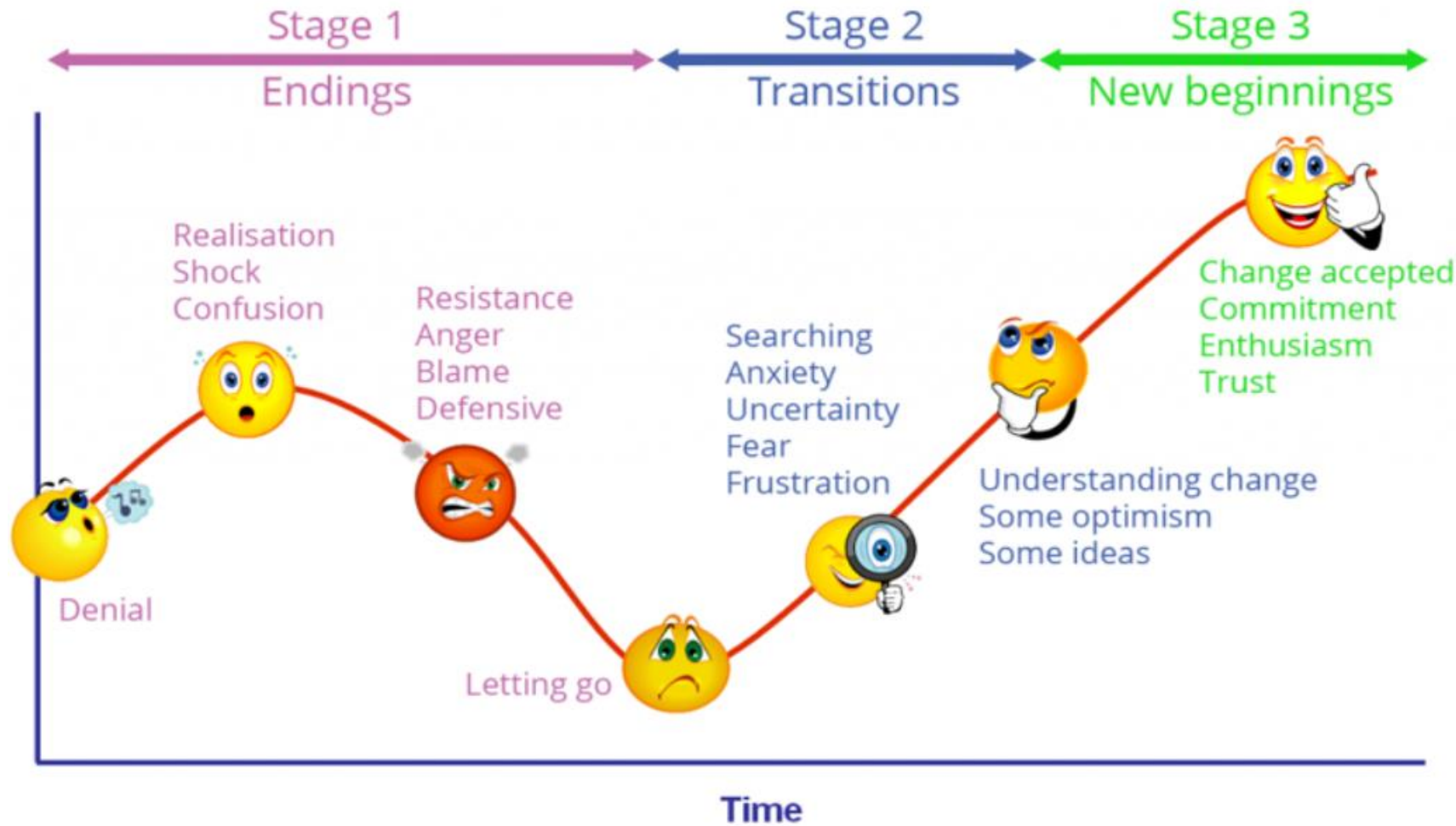


Millennial patients want to interact with health care providers much differently. Get used to it.

The Fork in the Road for the Profession

1. Is our vision that half the population go to the dentist regularly and half do not? Are we OK with that?
2. Do we really feel that dentistry should be considered 'essential' health care under federal and state health policy?
3. How intensively do we want to partner with the medical community to integrate dentistry into primary care?

This Will Probably Get Uncomfortable....That's OK



Recognize your emotions around change!

Thank You!



@ADAHPI

ADA.org/HPI

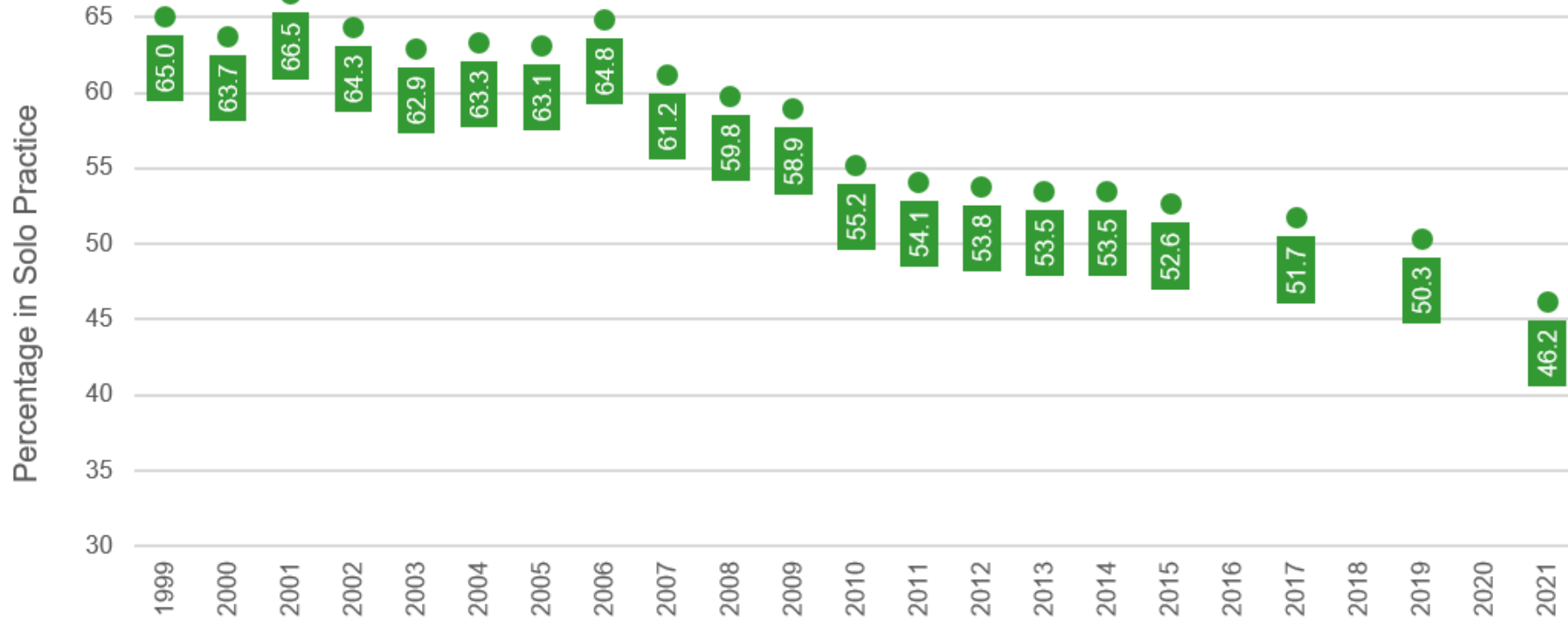
ADA.org/HPIConsulting

hpi@ada.org



ADA American Dental Association®

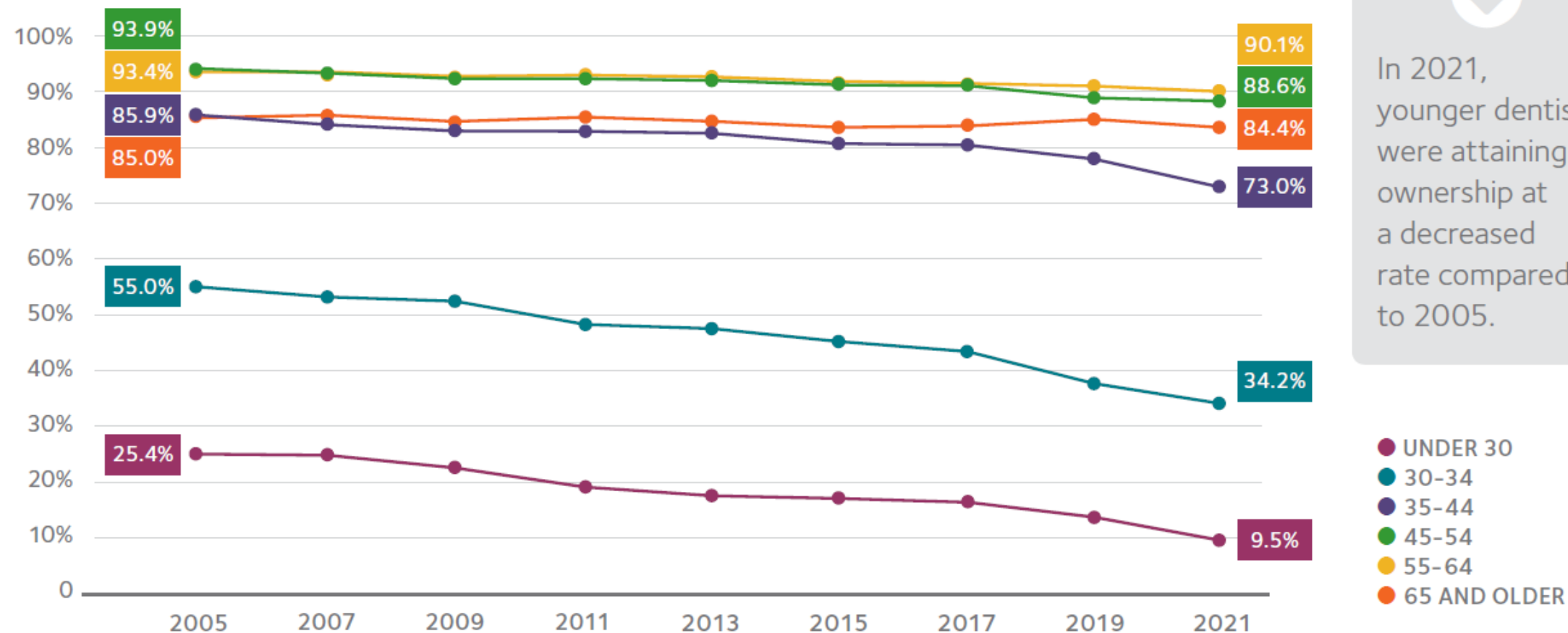
Fewer Dentists are in Solo Practice



Solo practice continues to decline. This trend is accelerating.

Ownership Rates are Declining Fastest for Young Dentists

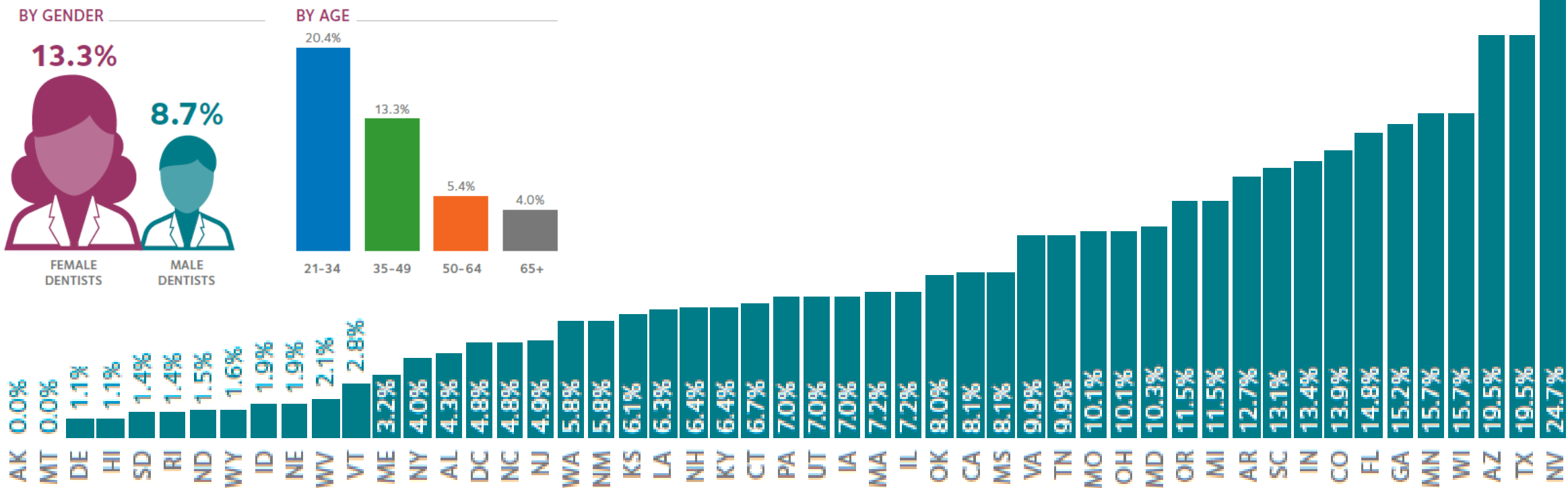
PERCENTAGE OF DENTISTS IN PRIVATE PRACTICES WHO ARE OWNERS, BY AGE GROUP



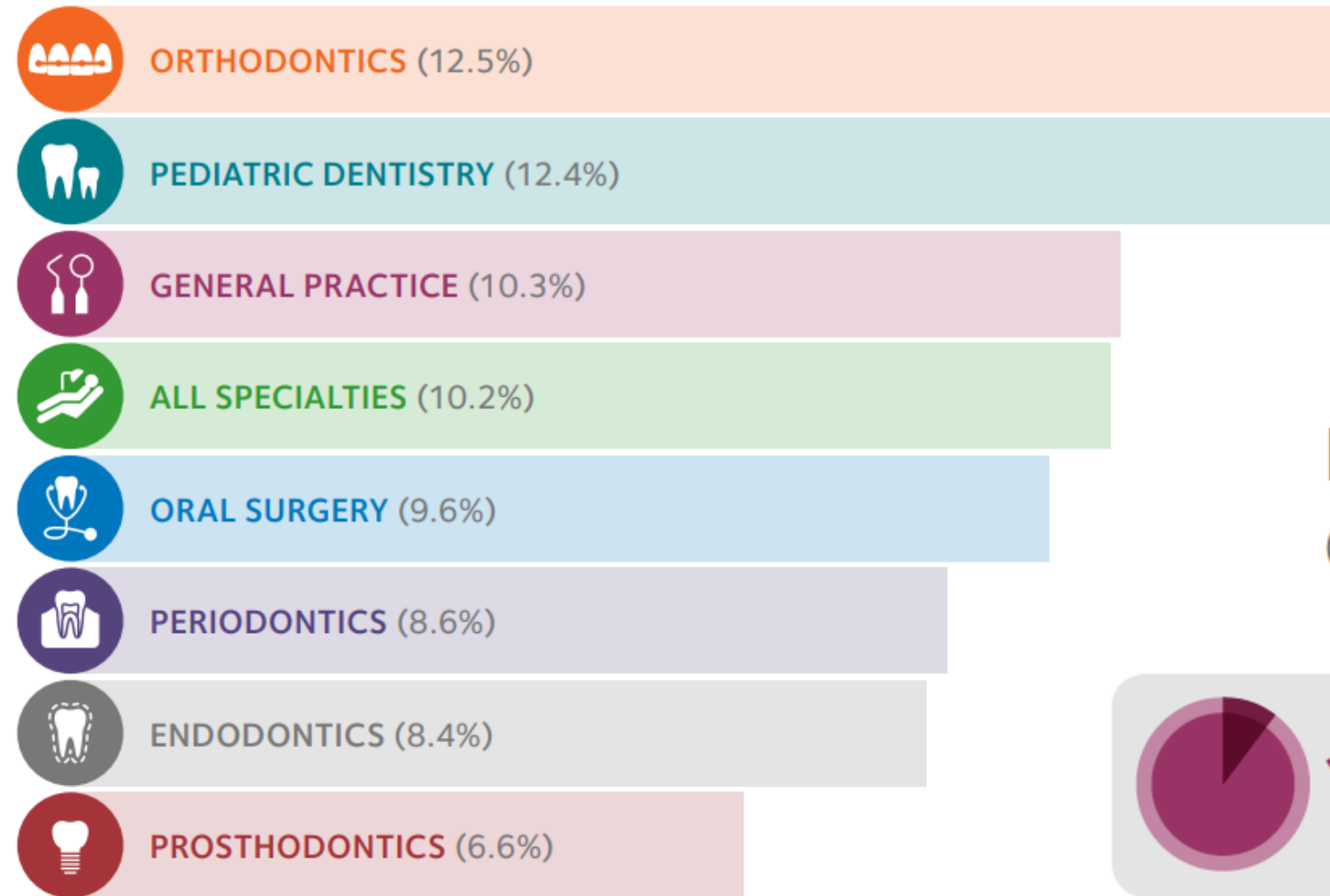
Practice Consolidation is Accelerating



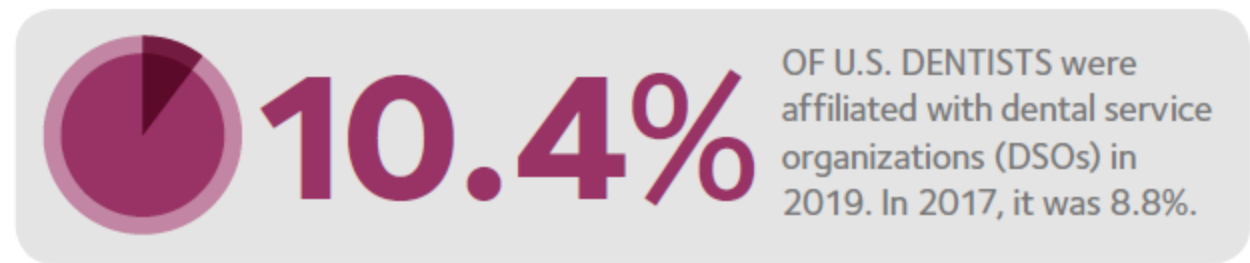
How Big are Dental Service Organizations?



Practice Consolidation is Accelerating

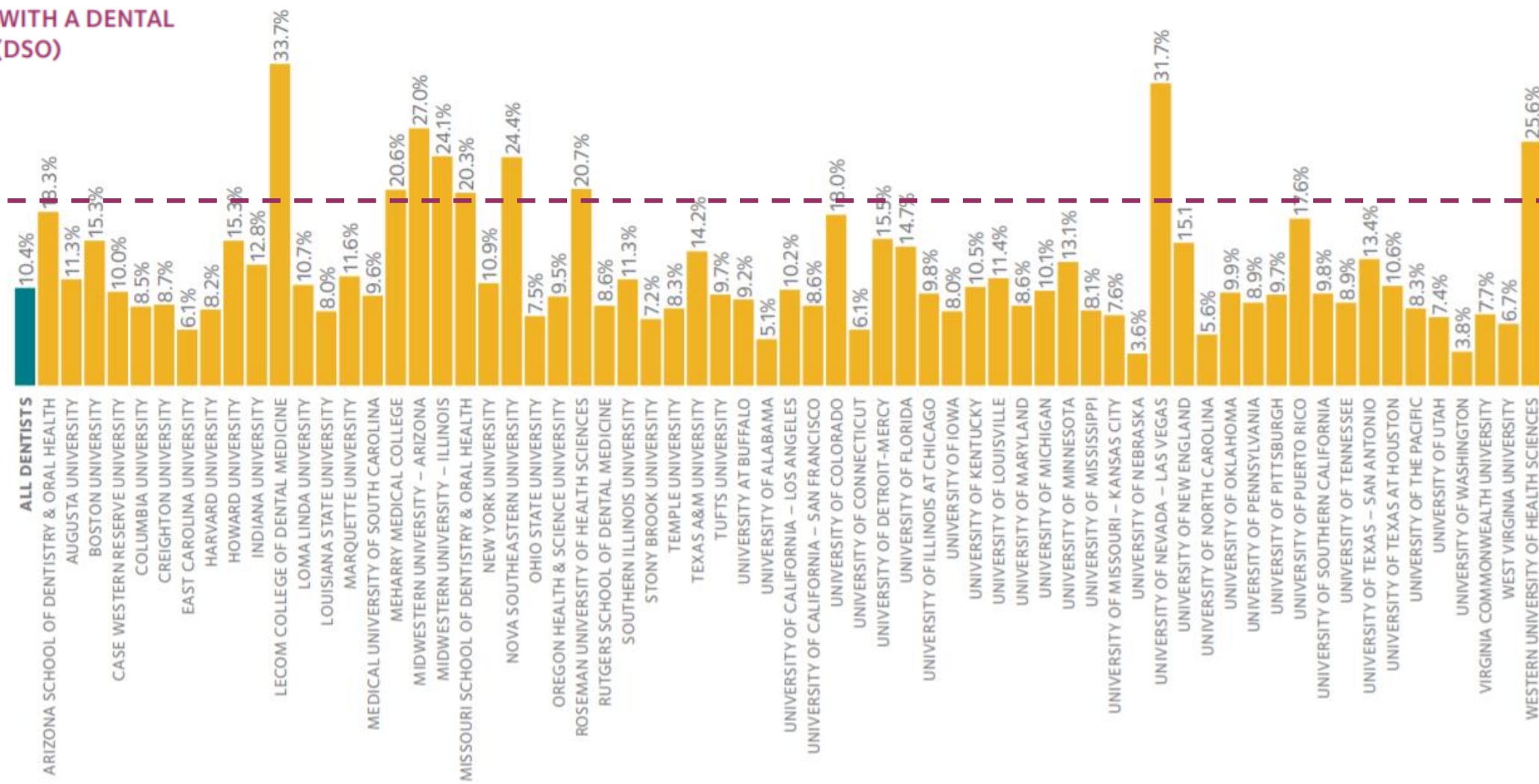


How Big are Dental Service Organizations?



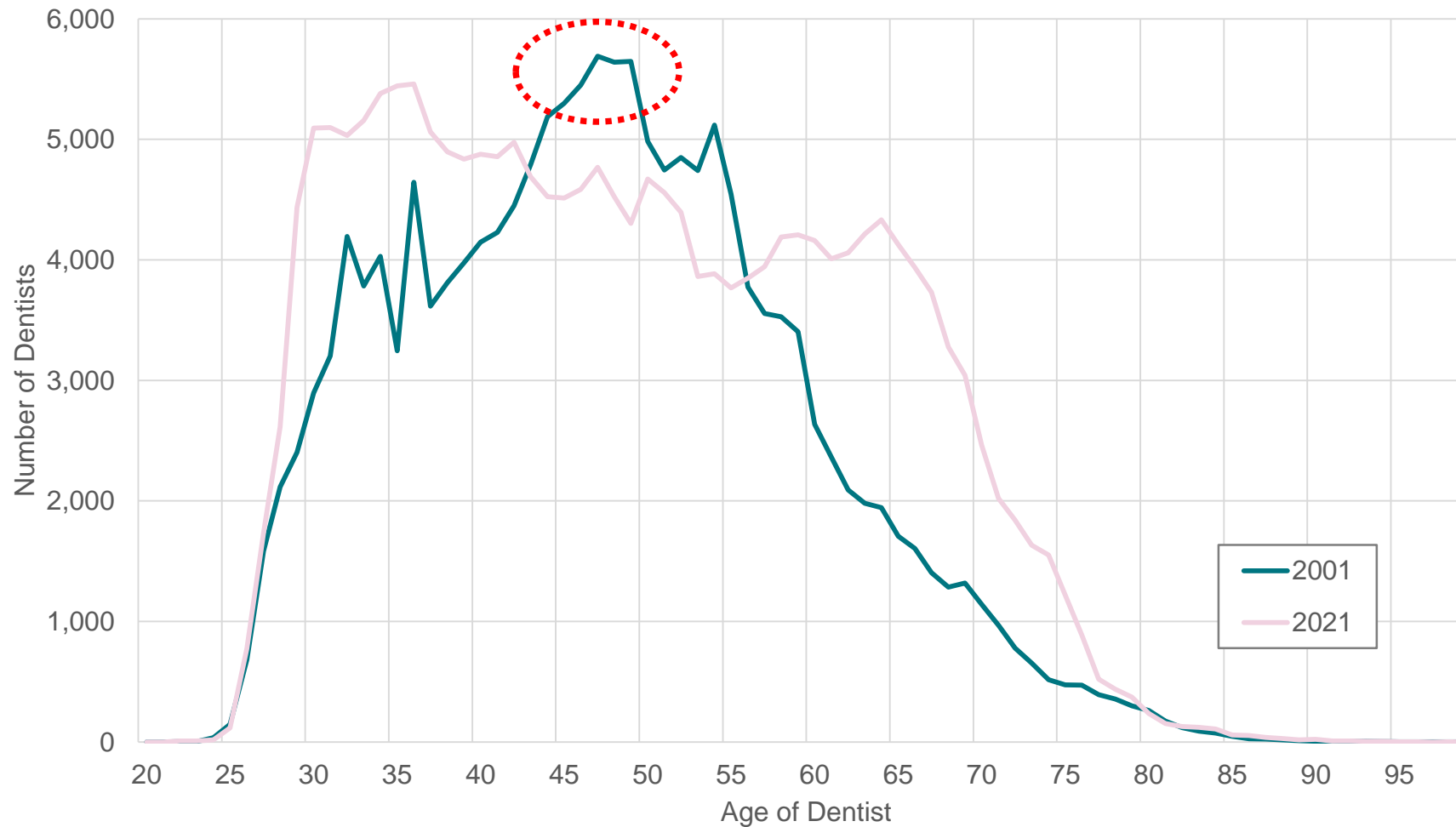
Practice Consolidation is Accelerating

PERCENTAGE AFFILIATED WITH A DENTAL SERVICE ORGANIZATION (DSO)



We Have a Major Generational Divide

Age Distribution of the Dentist Workforce

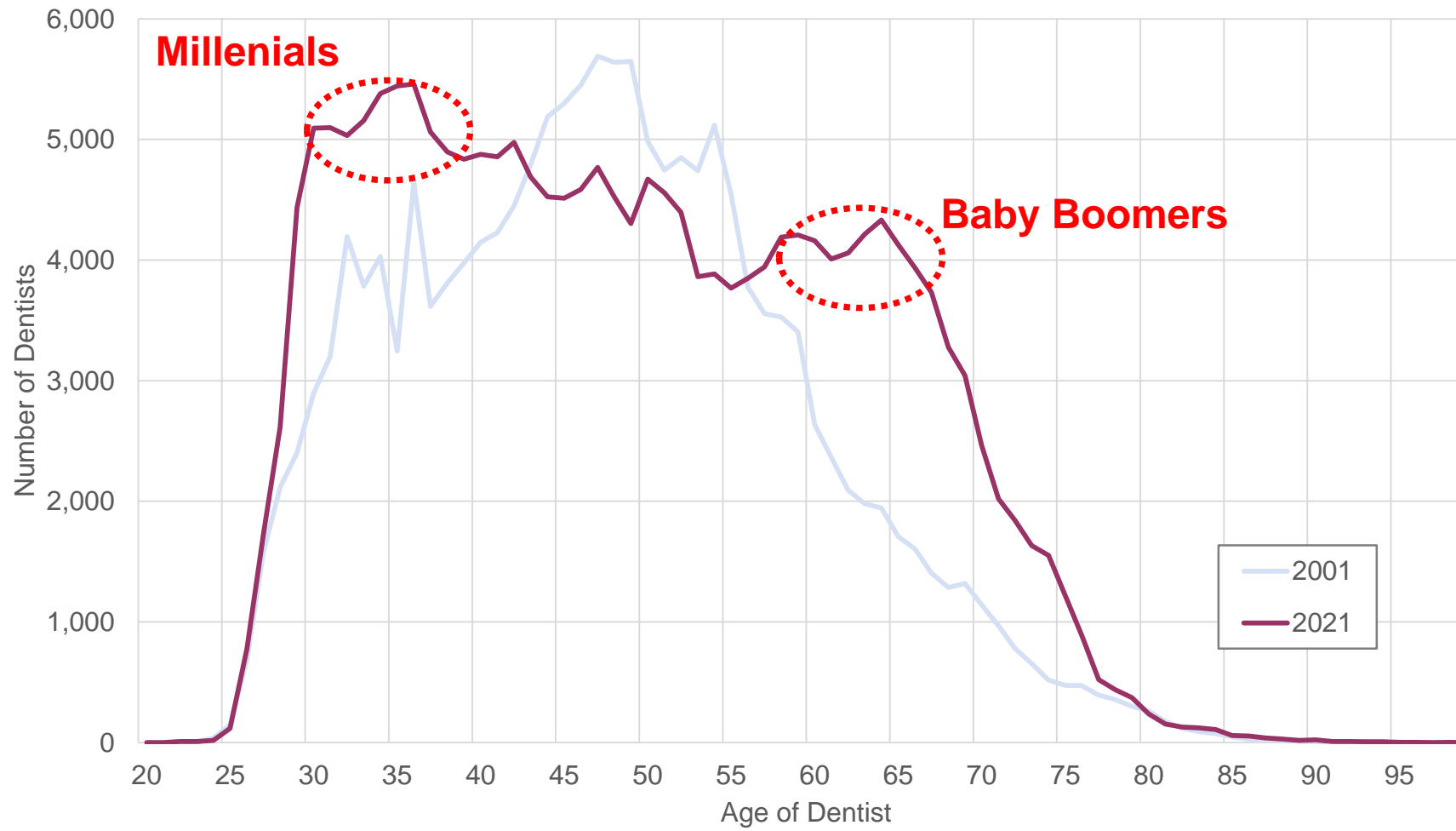


Twenty years ago, there were lots of dentists in their mid-40s.

There were not a huge number of really young or really old dentists.

We Have a Major Generational Divide

Age Distribution of the Dentist Workforce



*Today is different.
There is a clear
generational divide –
lots of retirement
age dentists and lots
of young dentists.*

Value and Values: Navigating the Generational Demographic Membership Shift



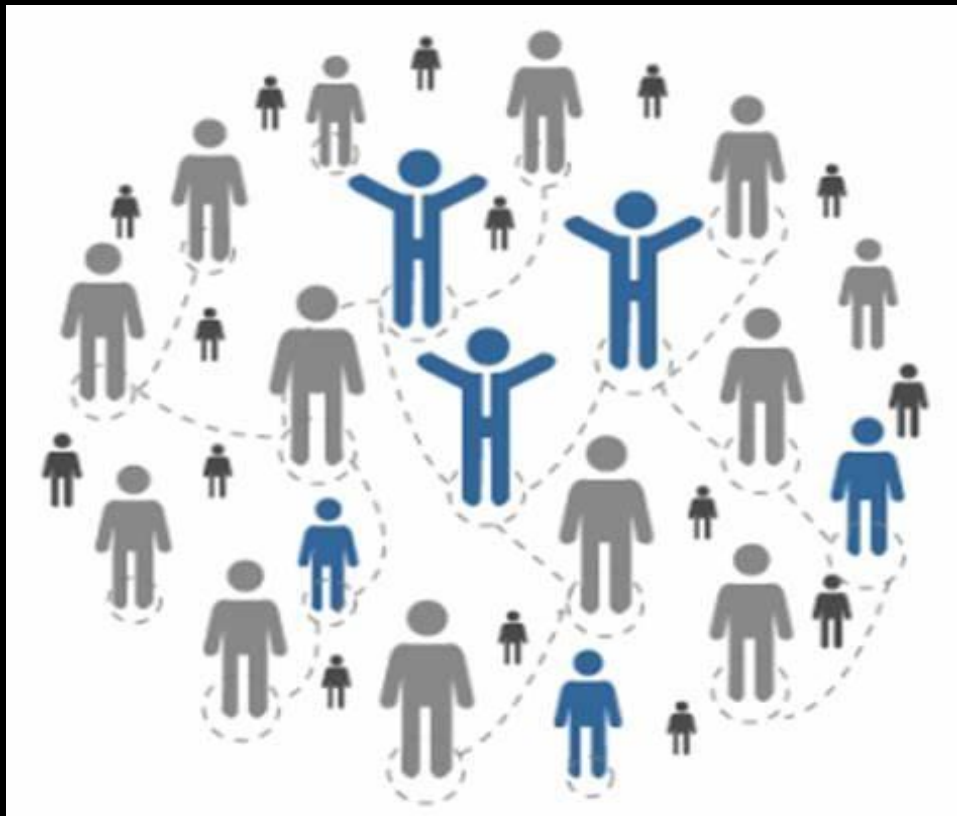
April Kates-Ellison, MS, CAE

Chief Client Services & Tripartite Relations Officer
Member and Client Services, ADA



Stephanie Moritz

Chief Marketing & Communications Officer, Integrated
Marketing and Communications, ADA



**Navigating the Generational
Demographic Membership Shift**

The Path Forward

Data Driven

Research Led

Generational Shift: 2016 – 2031

Declining Generations



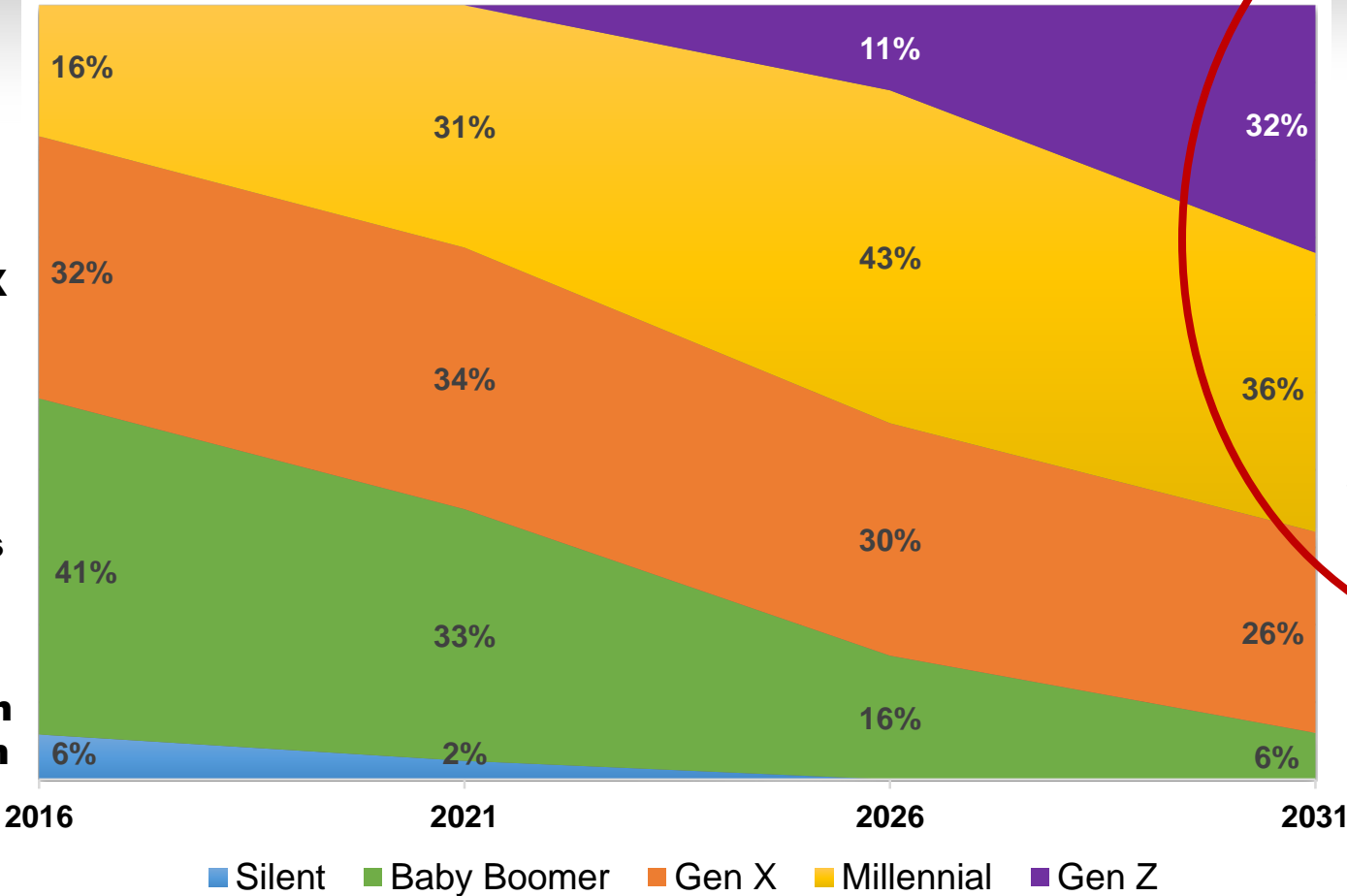
↓ **6% decrease in Generation X**



↓ **35% decrease in Baby Boomers**



↓ **6% decrease in Silent Generation**



Growing Generations

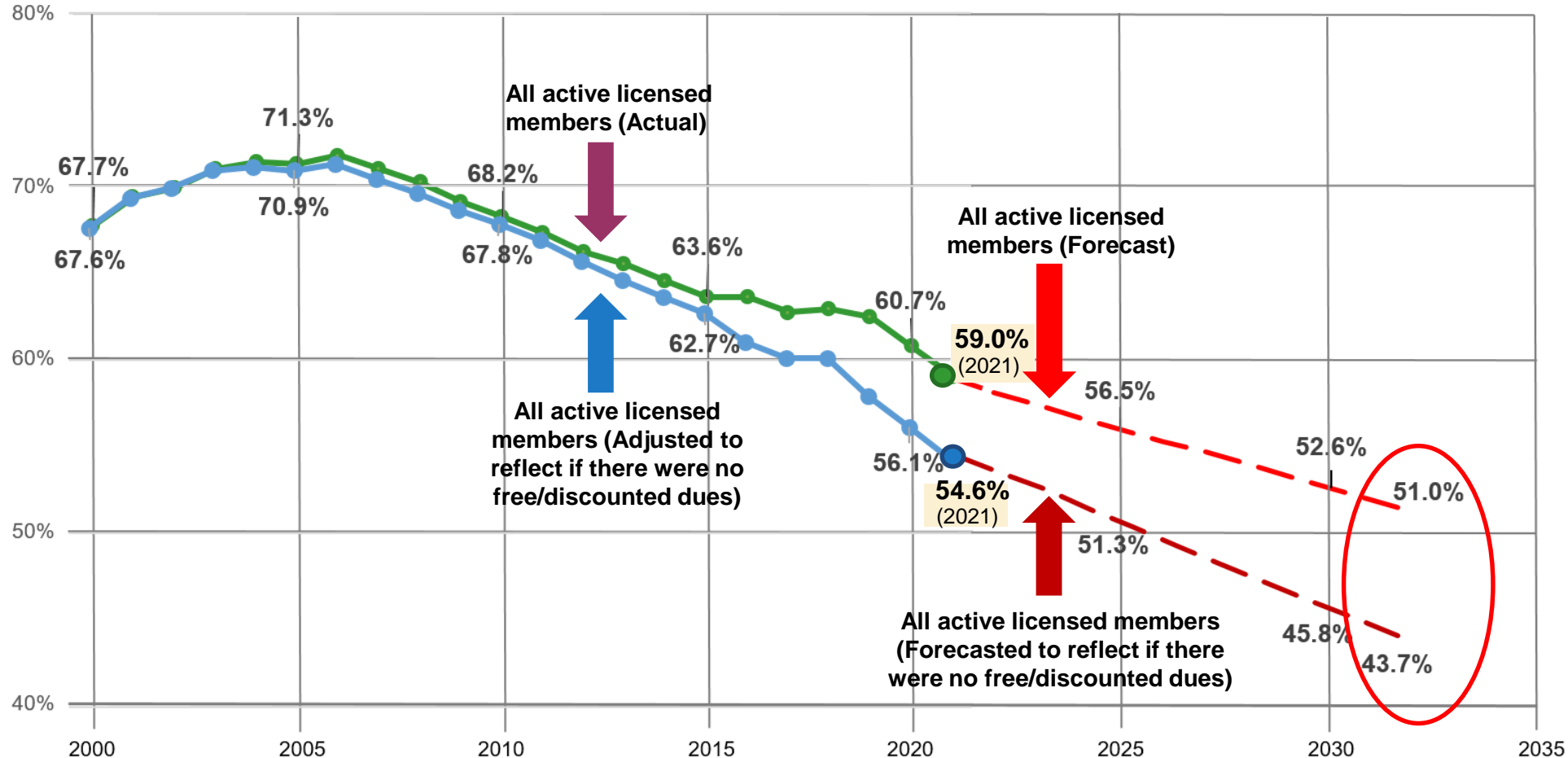


↑ **32% increase in Gen Z**
50% women
50% diverse



↑ **20% increase in Millennials**

Actual and Forecasted Market Share: 2000 – 2032

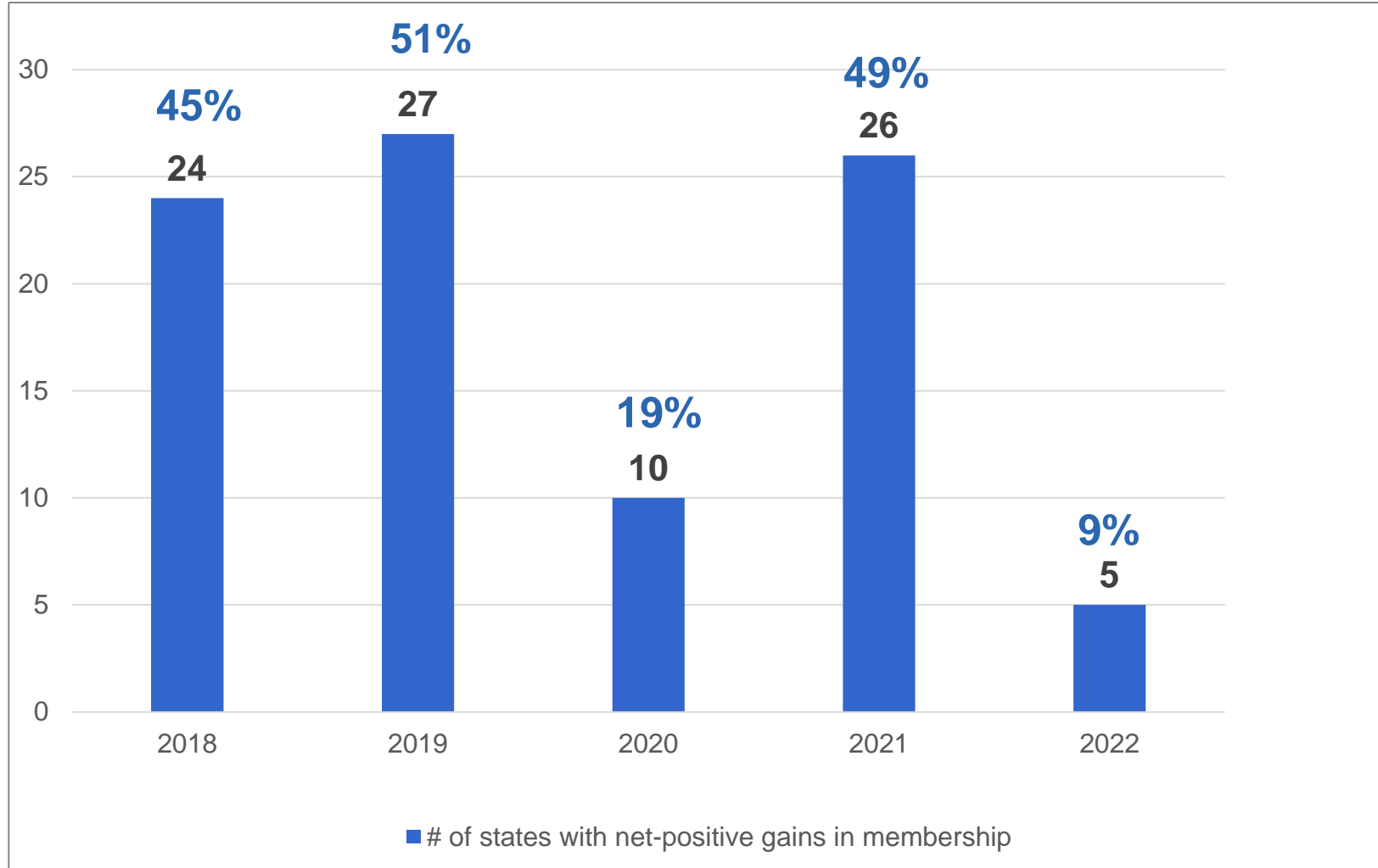


The downward market share trend is forecasted to continue through the next 10 years if the ADA continues on its current path.

If the **59%** market share in 2021 is adjusted to reflect no free or discounted dues membership, the market share would be **54.6%**.

The gap is forecasted to increase by 2032, with total market share forecasted to be **51%**. If free and discounted membership were not offered, the adjusted total is forecasted to be **43.7%**.

Percentage of States with Net Positive Gains



- Dental Societies have significant impact on ADA's overall success by virtue of their position and influence
- Dental societies vary in terms of opportunity for growth, capability and capacity
- Optimization of capacity at the state level – direct impact on member growth
- Dedicated team for targeted dental society support



WHAT WE DID

QUANTITATIVE STUDY

We surveyed 1,045 dentists across seven key segments

151 Student members

150 Boomer members

210 Gen X members

221 Millennial members

55 and
younger

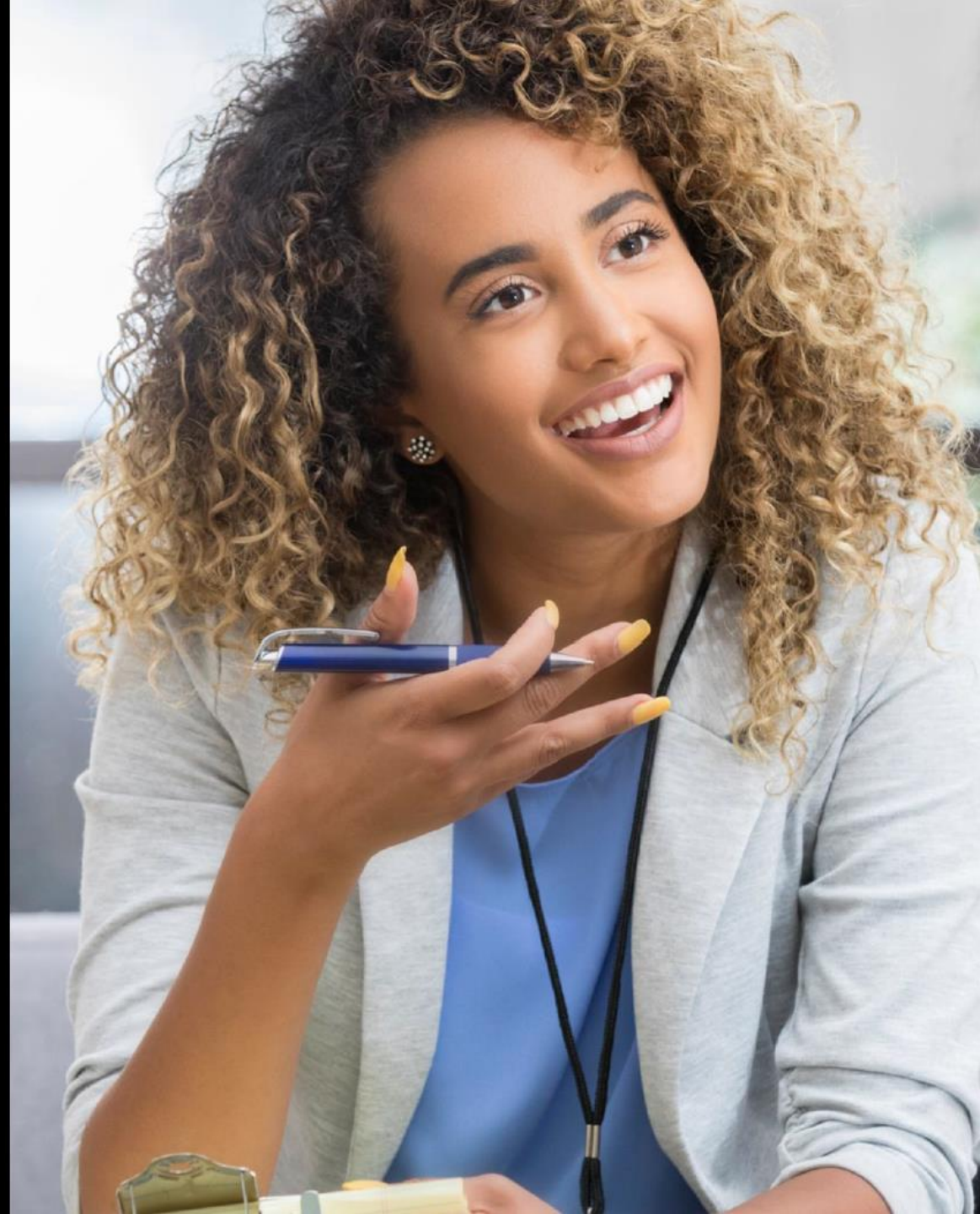
159 Racially and ethnically diverse non-members

112 White, male non-members

101 White, female non-members

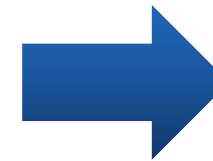
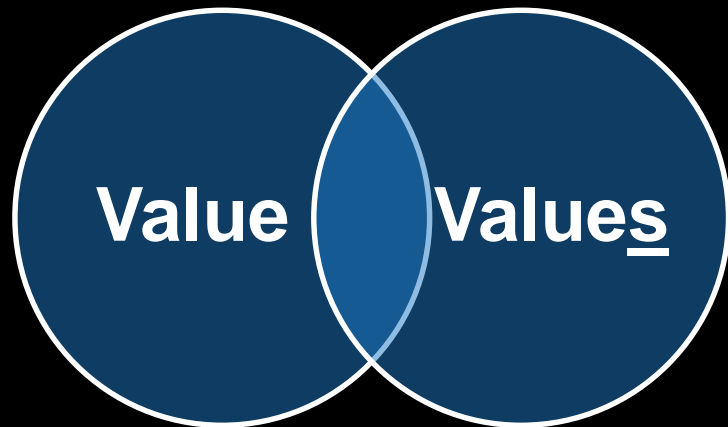
Areas of focus

- Build a deeper understanding of the relationship members and nonmembers believe they have with the ADA.
- Quantify how members' and nonmembers' values impact decision making, perceptions, and behaviors.



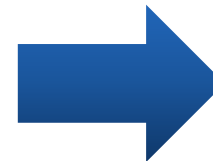
Overall Findings

**Membership
decisions are
driven by**



Value: the tangible products and services members receive in exchange for their dues

How well a dentist believes the ADA understands and can meet their specific needs (value to me).



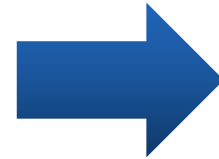
Values: the personal and professional principles and beliefs that guide decision making and actions.

How connected they feel to the broader impact the ADA has (professional/personal

Overall Findings

Valuesu matter.

**Values are a
deal-maker
or breaker.**

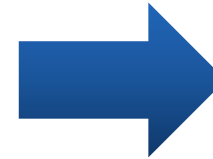


Without values, it doesn't matter how good the product or service is that you are offering. The newer generations will not purchase it if they do not see you living your values.

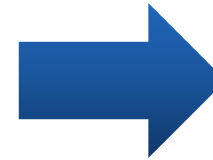
Overall Findings

There is no
“one size fits all”
for dentists

(but commitment to
patient care is
common across all).



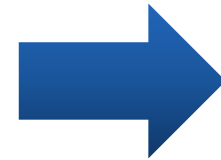
Dentists are seeking relevant and tangible value for ALL dentists across their career and across practice modalities in exchange for their dues dollars.



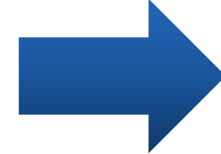
Dentists are seeking specialized and personal support (not a one-size-fits-all) that maps to their micro-identities of who they are, who they treat and how they choose to practice.

Overall Findings

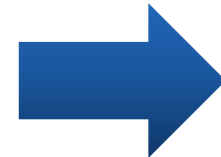
Dentists want to see the ADA **Living its Values**



Dentists want to see it. Not talk it, but see values in action.



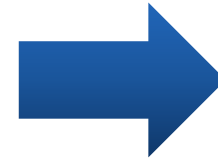
Dentists want to see the ADA organically living diversity and inclusion of all dentists every day.



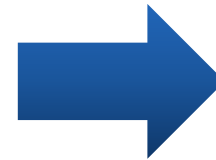
Dentists want to see the ADA's actionable commitment to improving oral health and taking a stand as it relates to health of patients.

Overall Findings

**Align with and
enable state and
local societies**



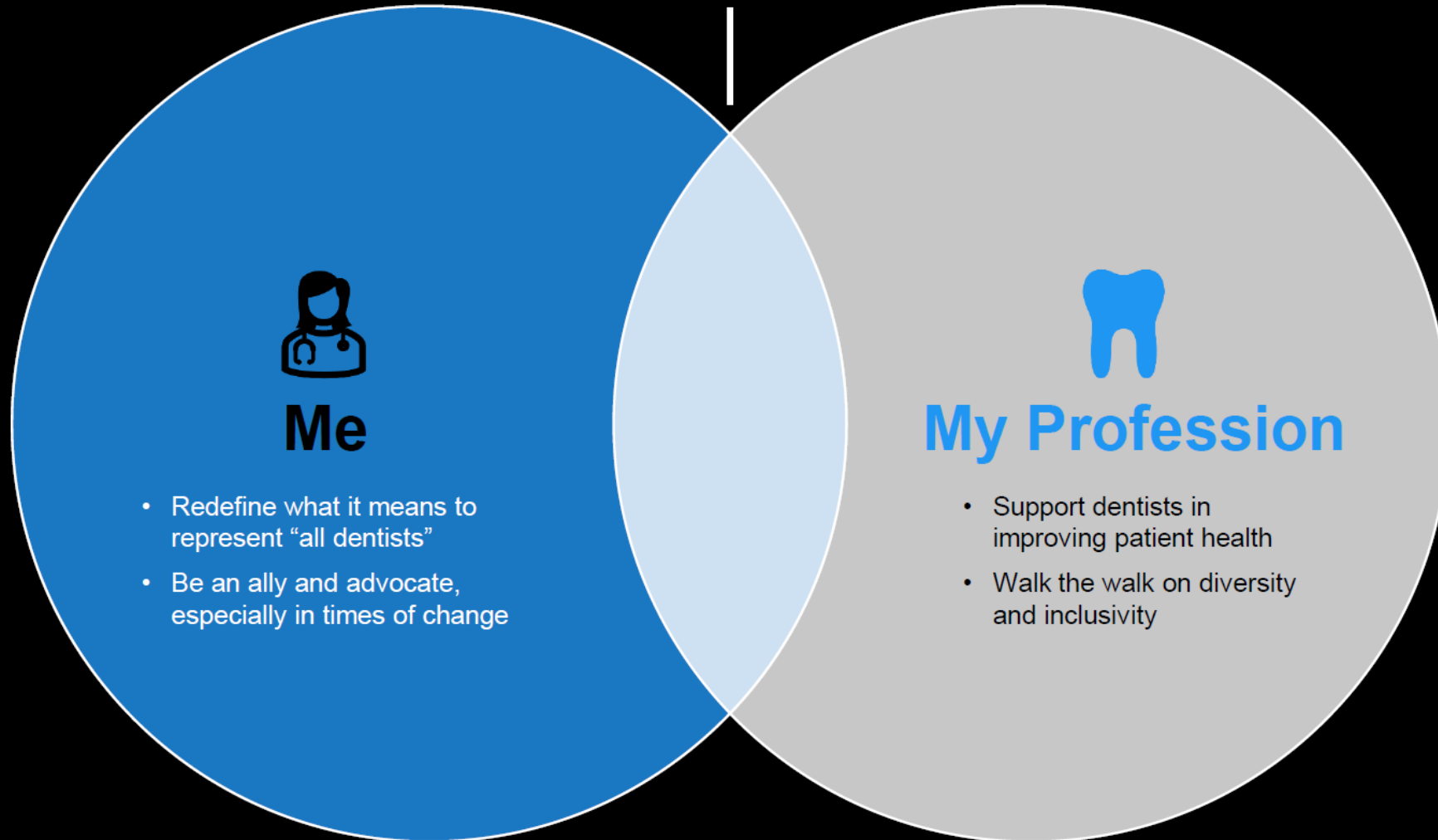
Help state and local societies support their members.



For many dentists and dental students they engage the most at the grassroots level.

Our Opportunity:

Deliver Value to....





Deliver value to me

Many dentists join the ADA as a rite of passage in dental school.

Over time, as fees increase and they become more established in the profession, dentists become increasingly critical of the value of membership, especially when they don't feel personally supported or seen by the ADA.

The Opportunities:



Representing the professional and personal diversity of *all* dentists



Being an ally and advocate, especially in times of change



Deliver Value to the Profession (Live our Values)

Dentists are not interested in seeing the ADA take a stand that divides the profession, yet they do expect the ADA to authentically deliver against its stated core values.

They expect the ADA will help them help patients by addressing inequities in health outcomes and access to care.

The Opportunities:



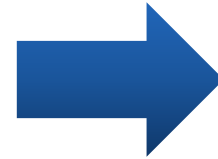
“Walking the walk”
on diversity and
inclusivity



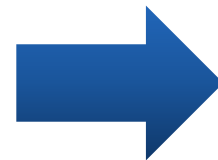
Supporting dentists in
improving patient health

ADA Board of Trustees Supports New Value/Values Focus

B-9-2022. Resolved, that in order to advance new opportunities for member growth, the Board supports staff prioritizing the following two key opportunities:

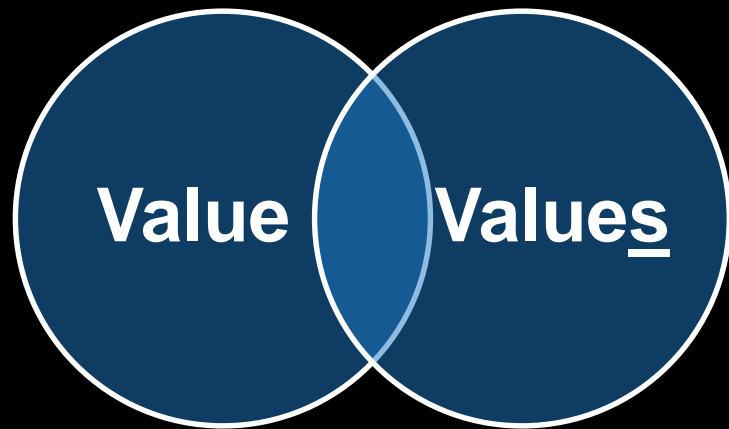


Improve the alignment of ADA's overall portfolio mix of programs, products, services and resources to meet the needs of dental students and new dentists (particularly in their first 1-3 years out of school) and the inherent diversity within them.



Accelerate Tripartite alignment across these three ADA core values: 1) commitment to improving oral health 2) diversity and 3) inclusion with an emphasis on inclusivity for all dentists across all practice modalities.

New ADA Initiatives



Early Career New VALUE Development Strategy & Implementation

What they've
told us they
want:

Career

- Career path support and mentorship
- More affordable/free CE regarding patient communication, treatment plans, improving speed and proficiency
- The business side of dentistry for non owner dentists
- A platform to track all CE (not just ADA)

Financial

- Financial journey support (financial solutions from D1 to retirement), including loan refinancing, practice purchase financing, personal and professional financial planning

Wellness

- Access on-demand counseling that doesn't impact their ability to get insurance
- Physical therapy with expertise and understanding of the physical challenges of dentists

What's planned
in 2022

Q1

- Member Value Innovation Joint Action team kick-off meeting: prioritized **mentorship** and **preparedness** concepts for development
- Develop career, financial and wellness strategies

Q2

- Audit program, product and service value offerings for early career at national, state, local levels
- Explore ally/mentorship models

Q3

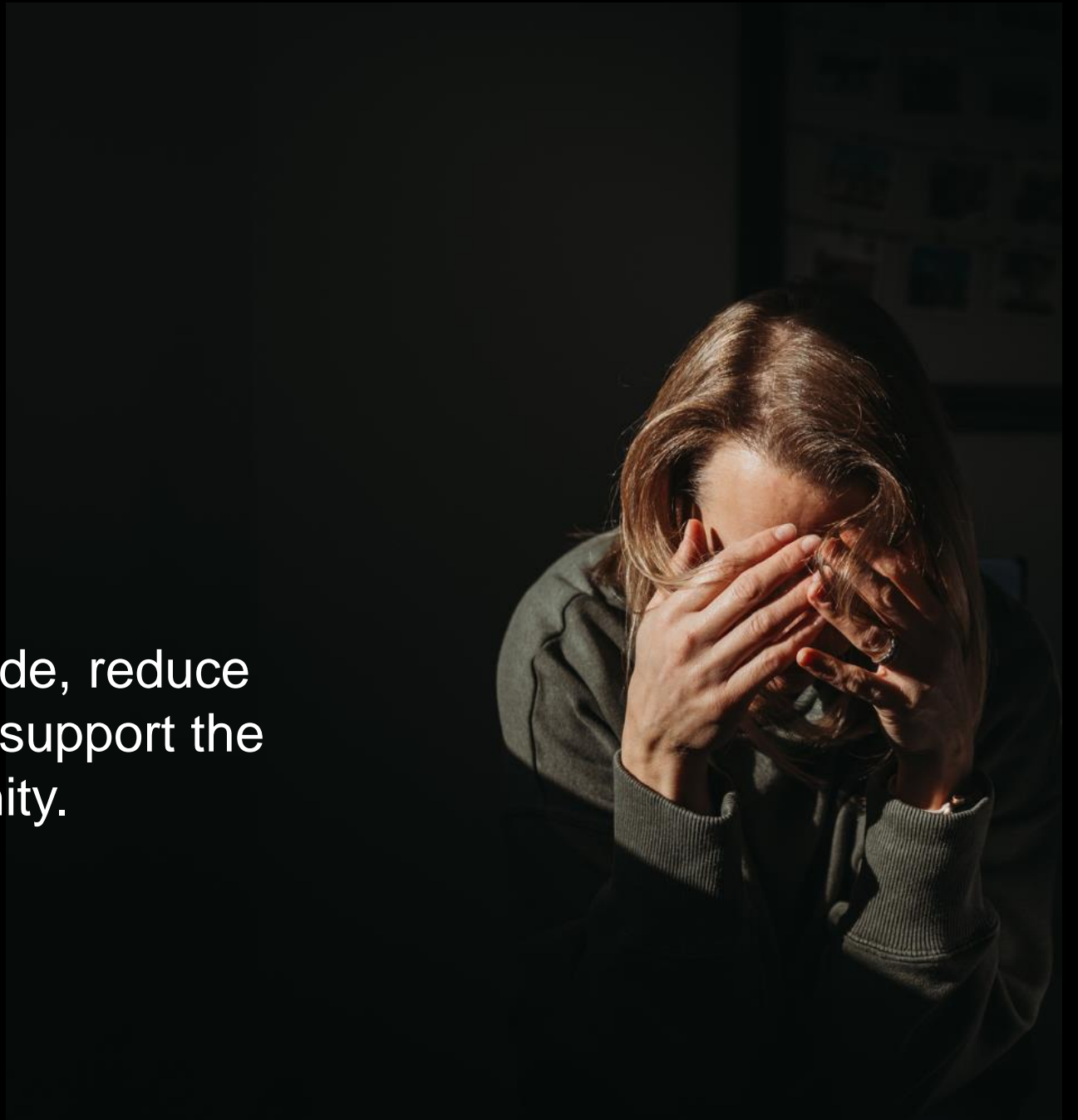
- Develop minimal viable products (MVPs) in support of the three pillar strategies

Q4

- Feature early career path support at SmileCon
- Release updated mobile app
- Pilot new ways to engage with dentists, such as 1:1 Coachsultant, Podcast, social media partnerships, two-way feedback

Wellness Ambassador Program

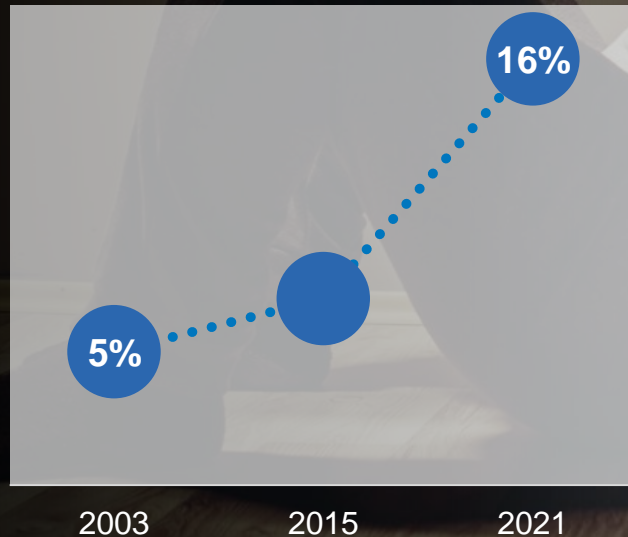
Aims to proactively prevent suicide, reduce stigma for mental health, and to support the well-being of the dental community.



In the 2021 Dentist Health and Well-Being Survey, Dentists **younger than 40 years old**:

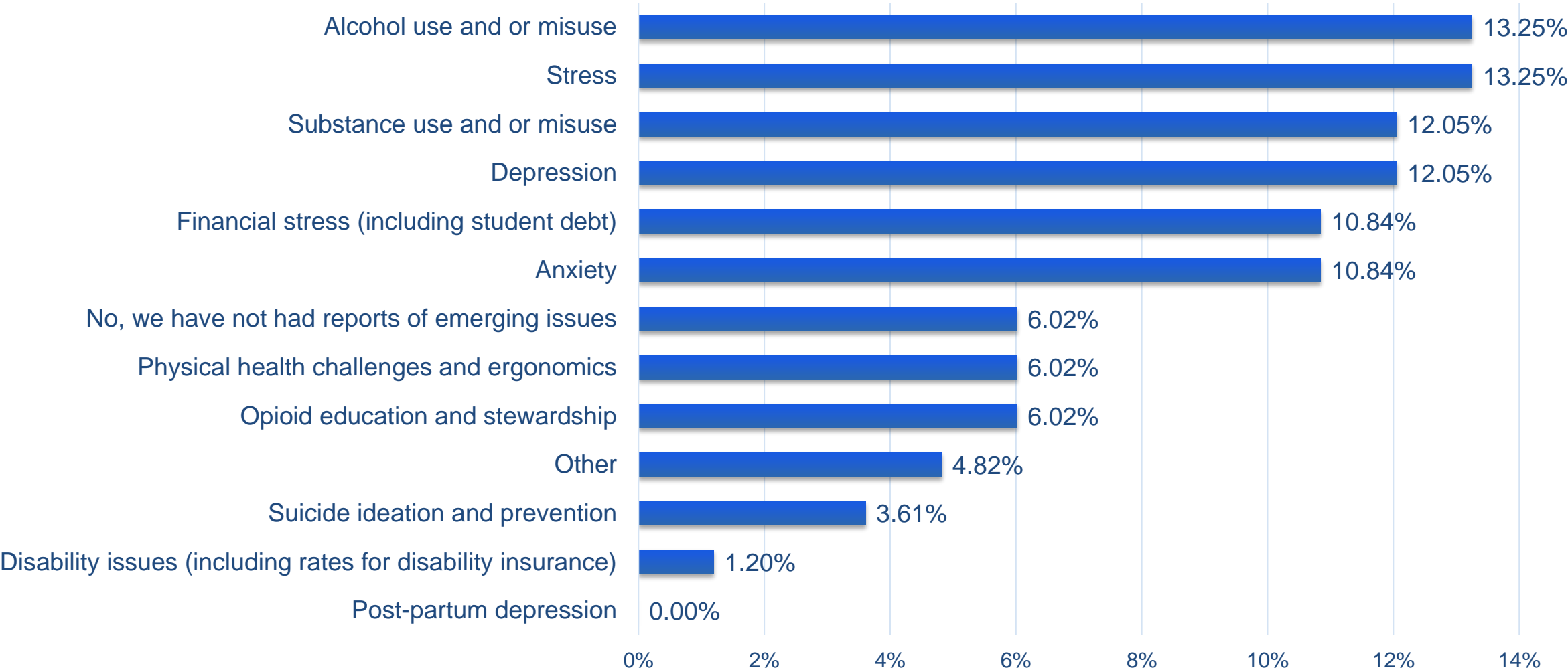
- score higher on the depression risk assessment
- have lower perceived self-competence

Dentists diagnosed with anxiety more than tripled in 2021 compared to 2003.



**“I’ve known
5 dentists in
two years
who have
died by
suicide”**

Members are Seeking Support: Emerging Health and Wellness Issues



Data from Q1'22 Survey to State Dental Association Executive Directors

Wellness Ambassador Program: Beginning September 2022

10 dentists on a mission to prevent suicide in the dental community.

Introducing the Wellness Ambassadors

Education + Training + Mental Health Support

- Starting small with opportunities to grow, the program will begin with 10 volunteer dentists, across ADA Districts, who will be trained to provide resources to other dentists in need of mental health help.
- Partnering with outside organizations with expertise in wellness and suicide prevention to ensure the program is clinically sound.

Early Career New VALUES Development Strategy & Implementation

What they've
told us they
want:

Oral Health Advancement

- Resources and support for dentists and their varying patient populations
- Advocacy for underserved populations
- Healthy Equity in Action
- Opportunities to give back to their communities

Community and Representation

- Build communities around shared identity-based affinity groups.
- CE, speakers and leadership at all three levels of the ADA that reflect their gender, age, diversity, practice choices

Change Via Inclusion

- Walk the Walk on living the ADA's values

What's planned
in 2022

Q1

- D&I Joint Action team kick-off meeting
- Activate Health Equity Action Plan
- Launch DE&I Champions Program and Release D&I Lens Tool

Q2

- Continue DE&I Roadshow at the grassroots level

Q3

- Develop minimal viable products (MVPs) in support of the three pillar strategies

Q4

- DE&I/Oral health events/activities featured at SmileCon

DEI Champions Network

Resolution 69H-2021: The ADA is committed to a culture of diversity and inclusion to foster a safe and equitable environment for its membership. In this environment, representation matters and every member is provided intentional opportunities to make meaningful contributions. Diverse viewpoints and needs are heard, valued and respected. The ADA embraces diversity and inclusion to drive innovation and growth, ensure a relevant and sustainable organization and deliver purposeful value to members, prospective members, and stakeholders. The ADA's commitment to diversity and inclusion will further advance the dental profession, improve the oral health of the public, and achieve optimal health for all.



Walking the Walk: D&I Champions Network

Goal

- Community of leaders, members and association staff that are committed to building a culture of diversity and inclusion across the organization and profession
(Living Our Values)

Objectives

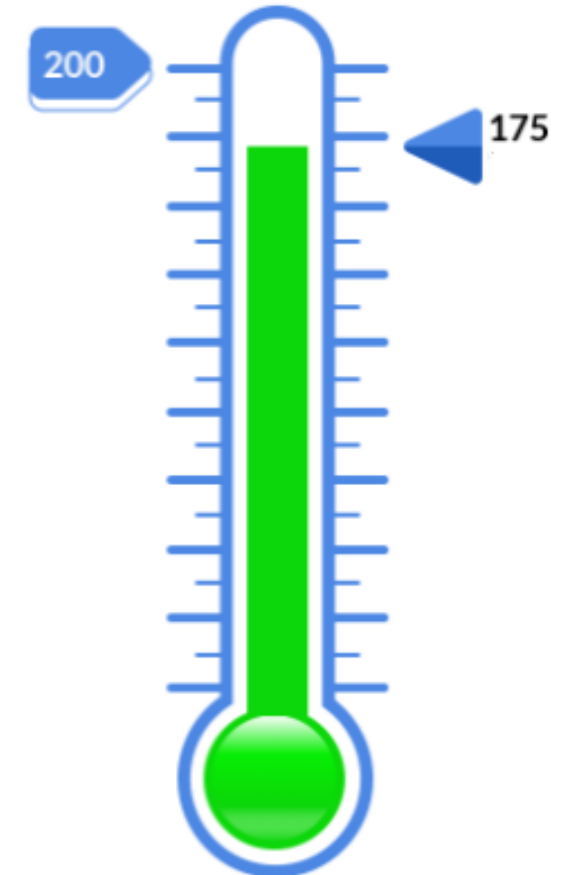
- Virtual and in-person sessions on topics such as change management, cultural humility and transformational leadership
(Champion Change)

Deliverables

- Access to resources, best practices and tools to implement diversity and inclusion efforts within their dental societies
(Connection and Partnership)

Goal: 200 Champions by SmileCon

Champions



Focus & Align for Maximum Impact

**Member
Focused**

**Profession
Focused**



ADA's mission is to
help dentists succeed and
support the advancement
of the health of the public

A top-down view of a wooden desk. In the upper right, a silver laptop is partially visible, showing its keyboard and trackpad. A black pen lies horizontally above the laptop. In the lower right, a white ceramic cup filled with dark coffee sits next to a white smartphone. The background is a light-colored wooden surface with a natural grain pattern.

Enjoy your break!

The next session begins at:

10:40 am

Driving Digital Innovation at the ADA



Stephanie Moritz
Chief Marketing & Communications Officer,
ADA



Jordan Baugh
Chief Technology Officer
ADA



DIRECT VALUE TO DENTISTS

MVP Framework – ADA Member App

ADA[®]

CO-CREATION SESSION #1 – May 4, 2022

- 10 Early Career Dentists – D3 to Y3
- Inclusive of students, gender, ethnicity and practice modalities (private to DSO practice)
- 90 minutes of innovation and creation exercises
- 5 problem and need territories
- 5 solutions/ideas created



MEET OUR EARLY CAREER CO-CREATORS

Jenna Chun – 3rd Year Student, Richmond Virginia

Zane Keller – 4th Year Student, Kansas City, Missouri

Pooja Yarlagadda – 1st Year in a Mid/Large Practice, working in Detroit, Mi

Graham Naasz – 2nd Year in Small/Solo Practice, Kansas City, Missouri

Prejith Varghese – 3rd Year in a Mid/Large Practice, working in Oklahoma

Laura Watterson – 2nd Year in a Small/Solo practice, working in San Diego, California

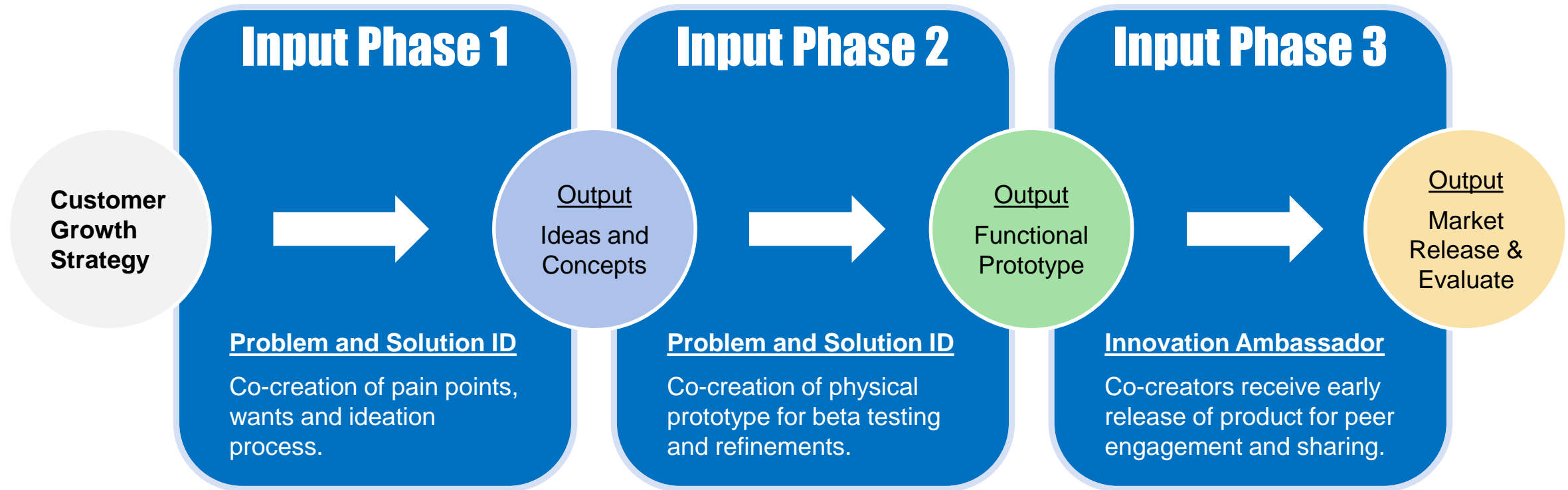
Gretchen Kreklow – 2nd Year and Practice Owner working in rural Minnesota

Anne Charlie – 2nd Year in a Mid/Large Practice, working in Texas

Alaina Kelly – 3rd Year Associate Employee in a dentist-owned practice

Kirthi Tata – 3rd Year in a Mid/Large Practice working in Oklahoma

NEW CO-CREATION PROCESS



**Innovation
Pathway**

Desirability
Customer Need
and Want

Feasibility
Operational
fidelity

Viability
Business
sustainability

OUR CO-CREATED VALUE PROPOSITION

The primary value an ADA App can provide is to provide the **confidence and security** to those new to the profession ensuring the right decisions in patient care and personal finance.



THE ONE THING WE NEED TO KNOW

**Early Career Dentists
want an ADA App
to fill the gap.**



FEATURE FOCUS SUMMARY: WHAT THEY NEED AND WANT

EC Problem Territories	They Would Like to Have	Co-Created Innovation
1. Keeping Track	Vital Documents Vault	Comprehensive CE Tracker, Affordable CE Offers
2. Clinical Expert, But Inexperienced Business Person	Mentor and Quick Access to Answers	Business/Practice Management Resources/Tool Kit, Financial Boot Camp, i.e. White Coat Investor
3. Tough to Find the Right Fit	Guidance on How to make Smart Career Choices.	Mentor/Career Coach/Advice, Practice Modality Career Quiz
4. Lack of Real-Time Resources	Chat Forum for Professional Advice and Fun (i.e. Virtual Happy Hour)	On-Demand Ask-a-Specialist, Revive Oral Pathology App – fold in
5. Financial Fears	Referrals for Resources and Learning the Business of the Business	Debt and Financial Planning Planner



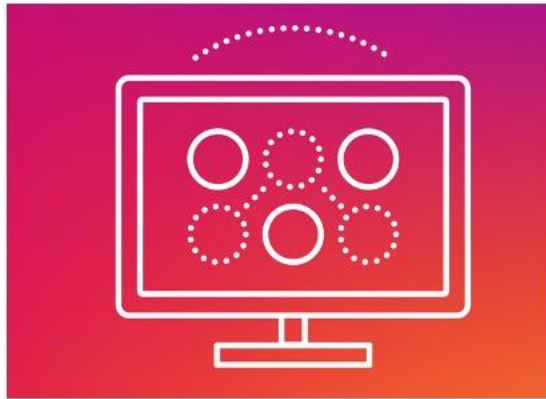
MEMBER APP MVP

Prioritized Features for Launch at SmileCon

RECOMMENDED FEATURES

Prioritized by Co-Creation Group

PRIORITIZED RECOMMENDED FEATURES



Personalized Content



Career Pathways



Community Connections



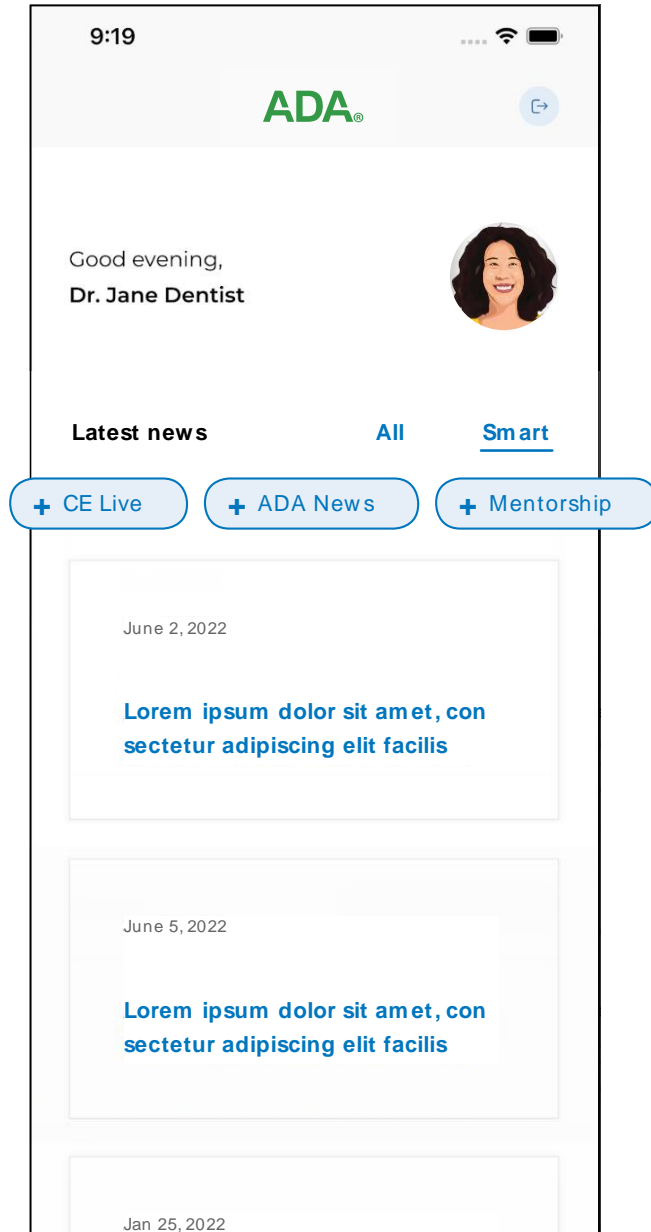
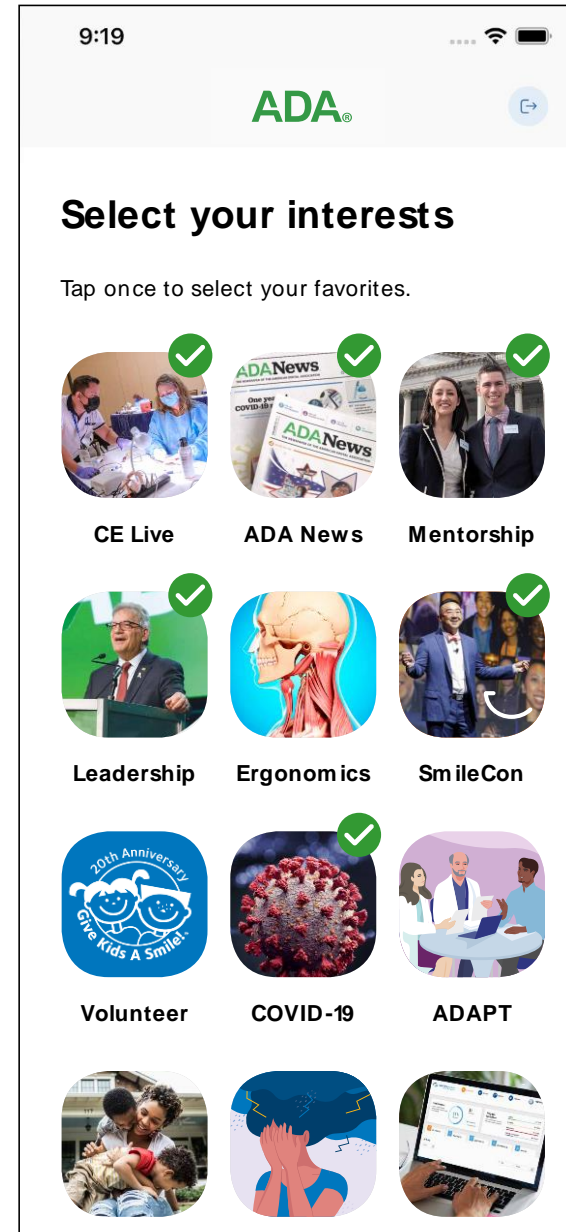
Document Vault



ADA Podcast

PERSONALIZED CONTENT EXPERIENCE

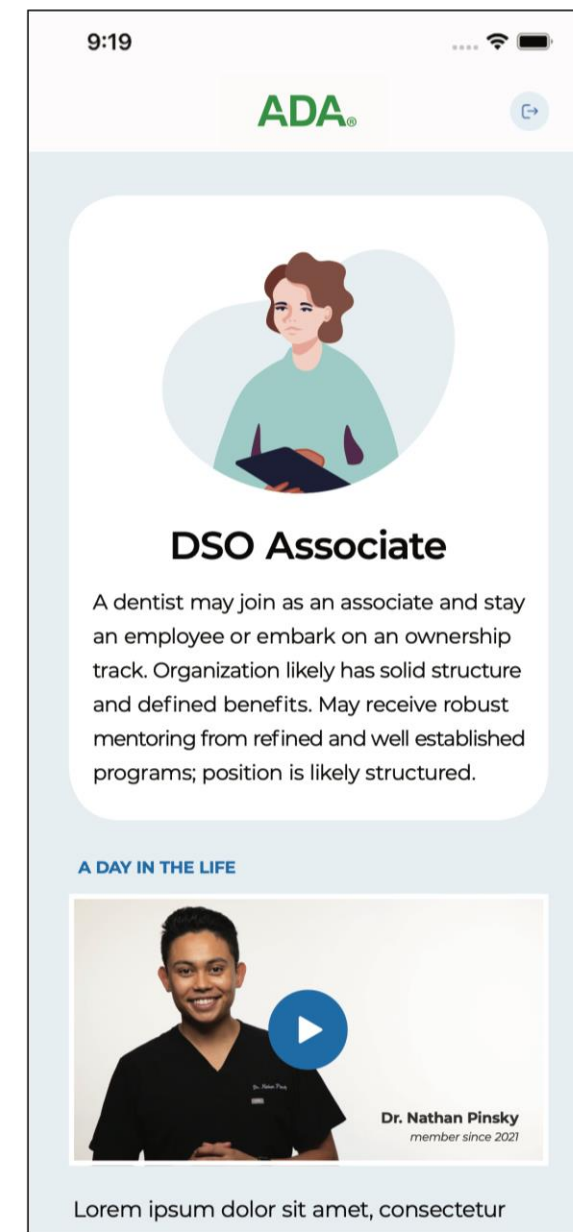
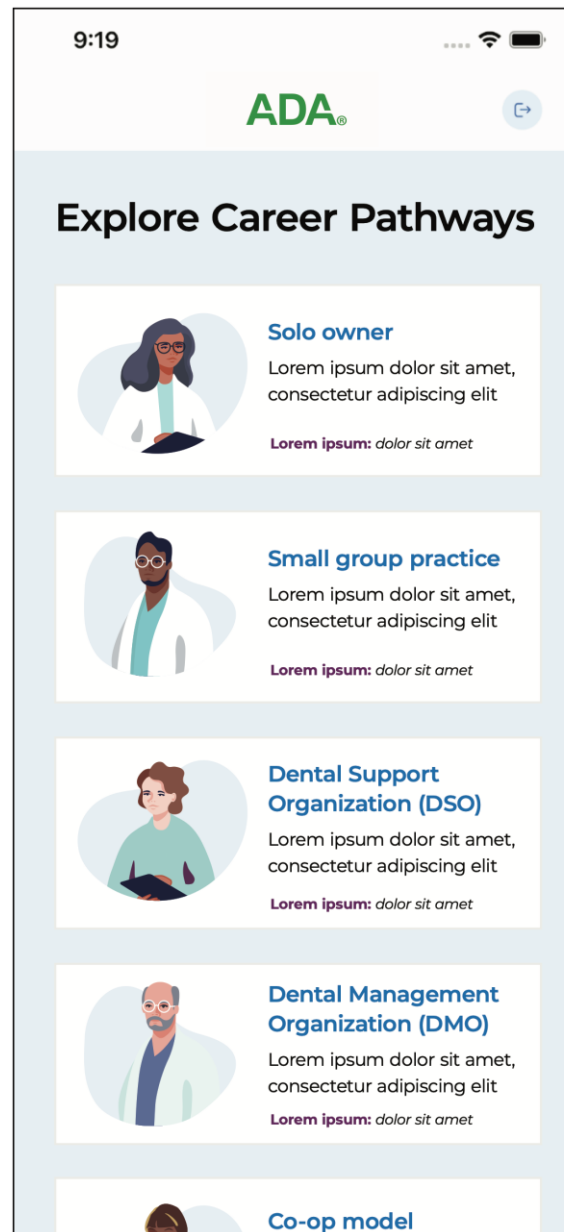
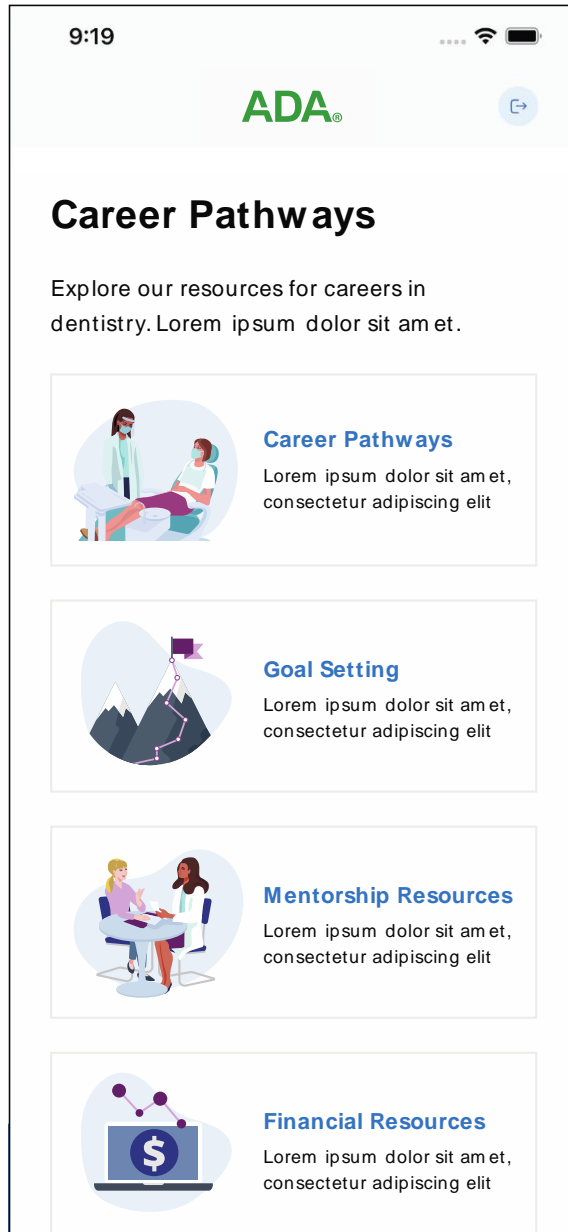
- Self-select topics of interest for a feed of content tailored to their preferences
- Able to change topic preferences, or add more at any time
- Sourced from ADA sites



CAREER PATHWAYS EXPERIENCE

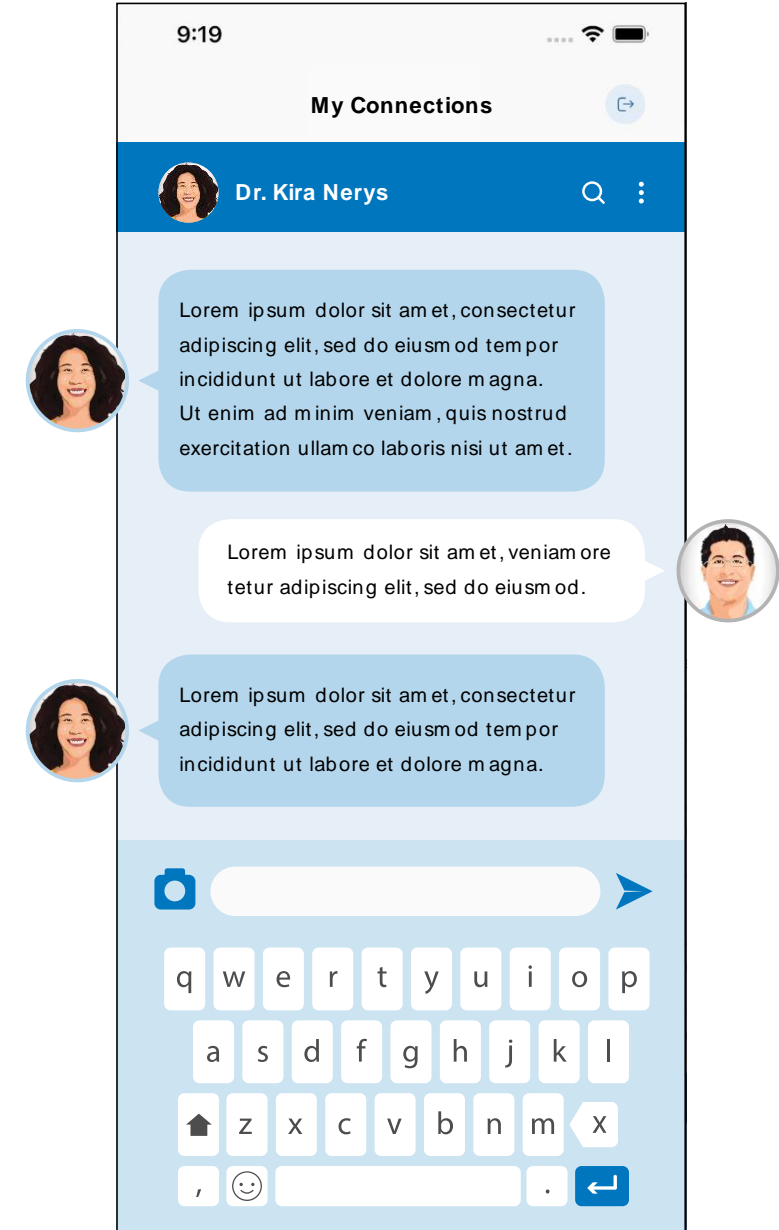
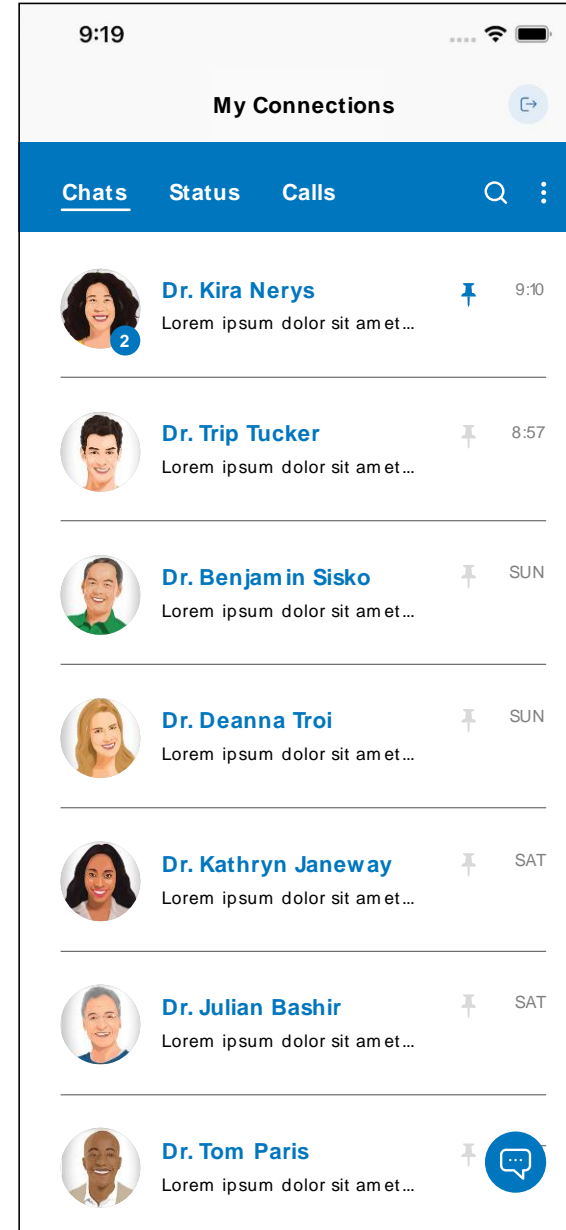
- Unique gap we can fill!
- Addresses need to learn more about the wide variety of career paths available post graduation.
- Creates engagement, membership and new partnership/sponsorship non-dues opportunities.
- Users will select from dental career options to explore content that illuminates aspects of different practice types and other career paths.
- Phase 2 (post MVP) will deliver a pathways self-assessment tool to help students understand their personal preferences.





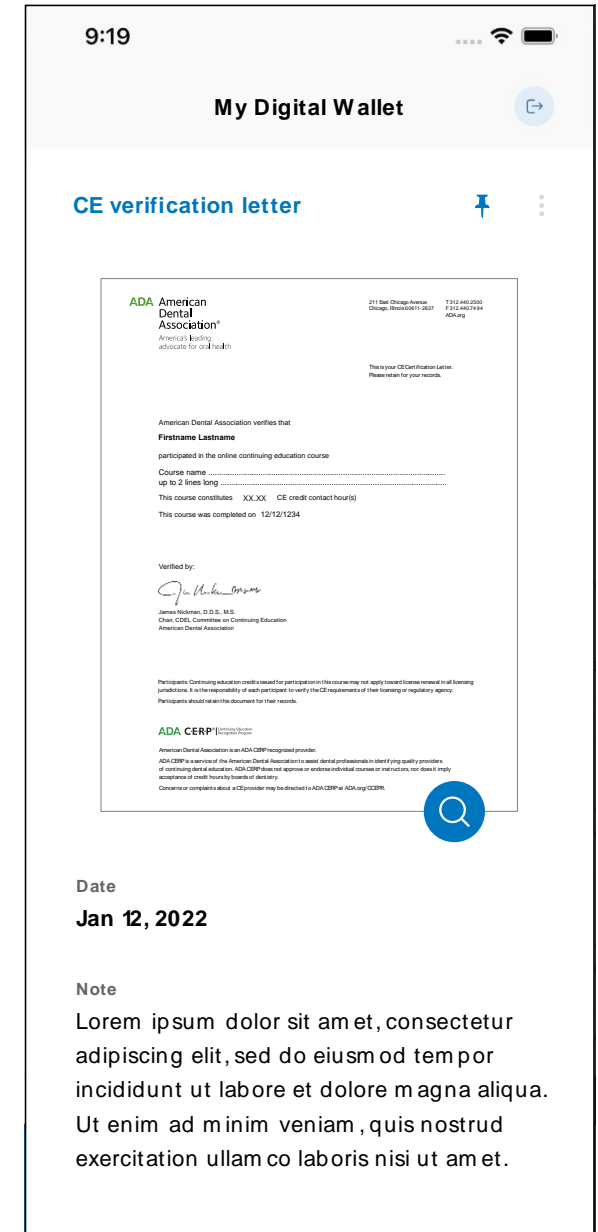
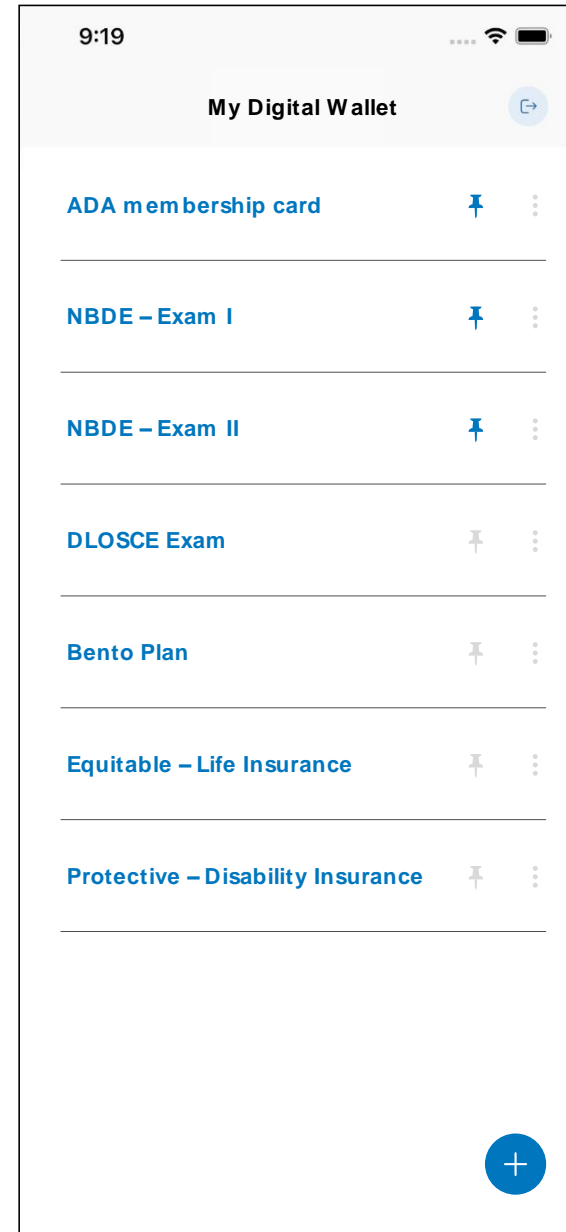
COMMUNITY CONNECTIONS – MESSAGING

- Fills a need to connect with each other for quick support on practice, clinical and personal topics – in an easy way
- Connect via searching the Member Directory to create 1:1 or small group chats to serve their immediate needs
- Opportunity to create self-identified groups with real-time messaging & engagement



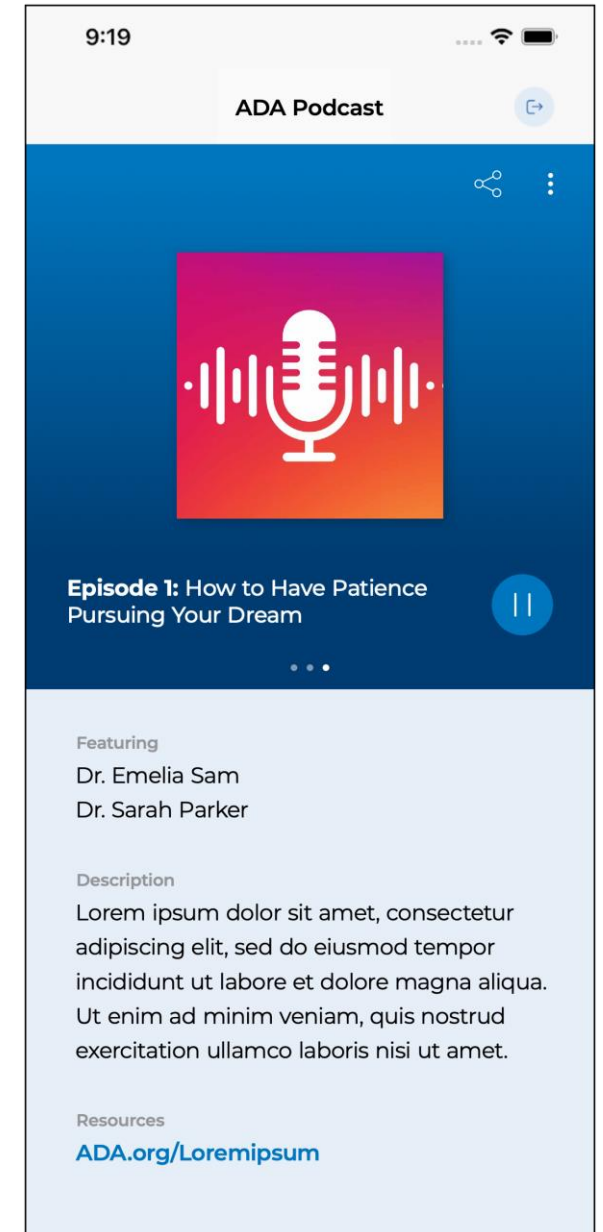
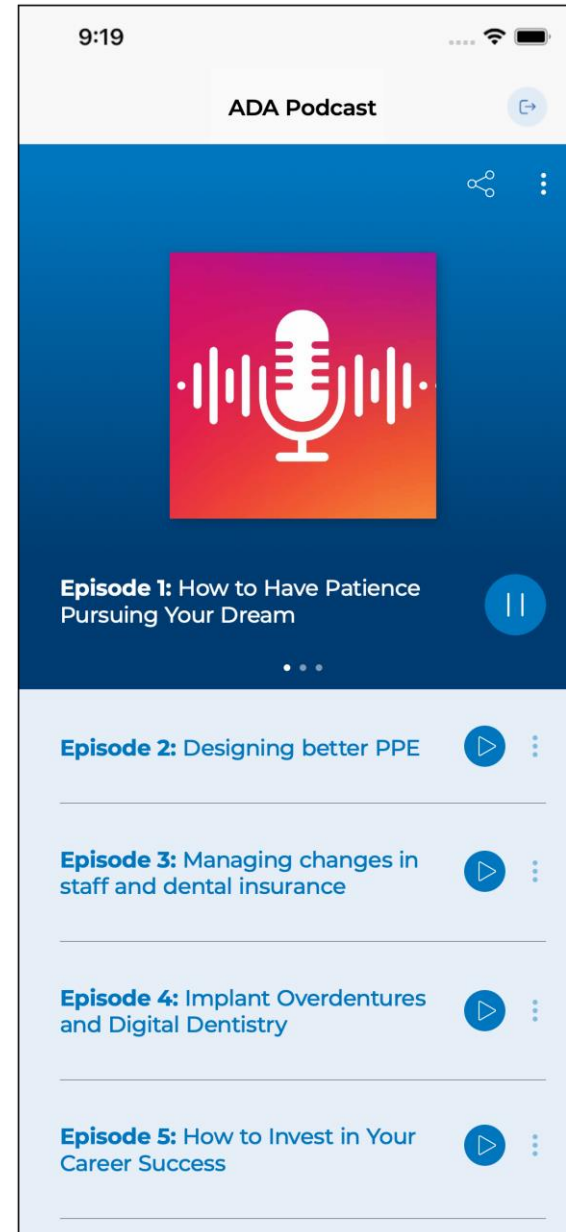
DIGITAL WALLET DOCUMENT VAULT

- A unique gap we can fill!
- Need to keep a variety of documents on hand for attesting for credentialing and licensure renewal.
- Want a place to keep all of priority docs for easy accessing and sending.
- Utilizes native security features, documents saved locally to each user's phone, not within ADA systems.



ADA PODCAST

- New way to engage!
- Listeners gain desired expert and entertaining experience and advice.
- Features inaugural and future seasonal releases with fresh and current content.
- Entertaining, fun and informative.
- Undergoing co-creation with early career dentists.



SPONSORSHIP & MONETIZATION OPPORTUNITIES TO COME

- We will be working with the Business Group to identify new opportunities for revenue that align with the core needs of the early career dentist groups. Ideas could include:
 - Sponsored content around topics of focus – finance, business, practice management
 - Limited time offers and deals revealed via customer targeting
 - Webinars / Whitepapers for lead generation opportunities
 - Products and services crafted for this audience
 - Existing services offered through ADA and ADABEI that deliver on solving problems for this career stage

UPCOMING SPRINTS & FUTURE POTENTIAL WITH SALESFORCE

UPCOMING SPRINT EFFORTS

- Headless content integration to enable **personalized content** feeds
- **User Experience design** for member interaction and new features
- My Connections **messaging prototype** for co-creation feedback
- Develop **privacy policy** and **terms of use** with legal team
- **Content development** for career pathways features by Early Career Workgroup
- **Reviewing Application** currently being used by ADAPT
- **Merchandising what's coming** – “app on a page” and dean/student engagement tool with QR code signup for Early Career Advisory Panel

THE FUTURE IS SALESFORCE



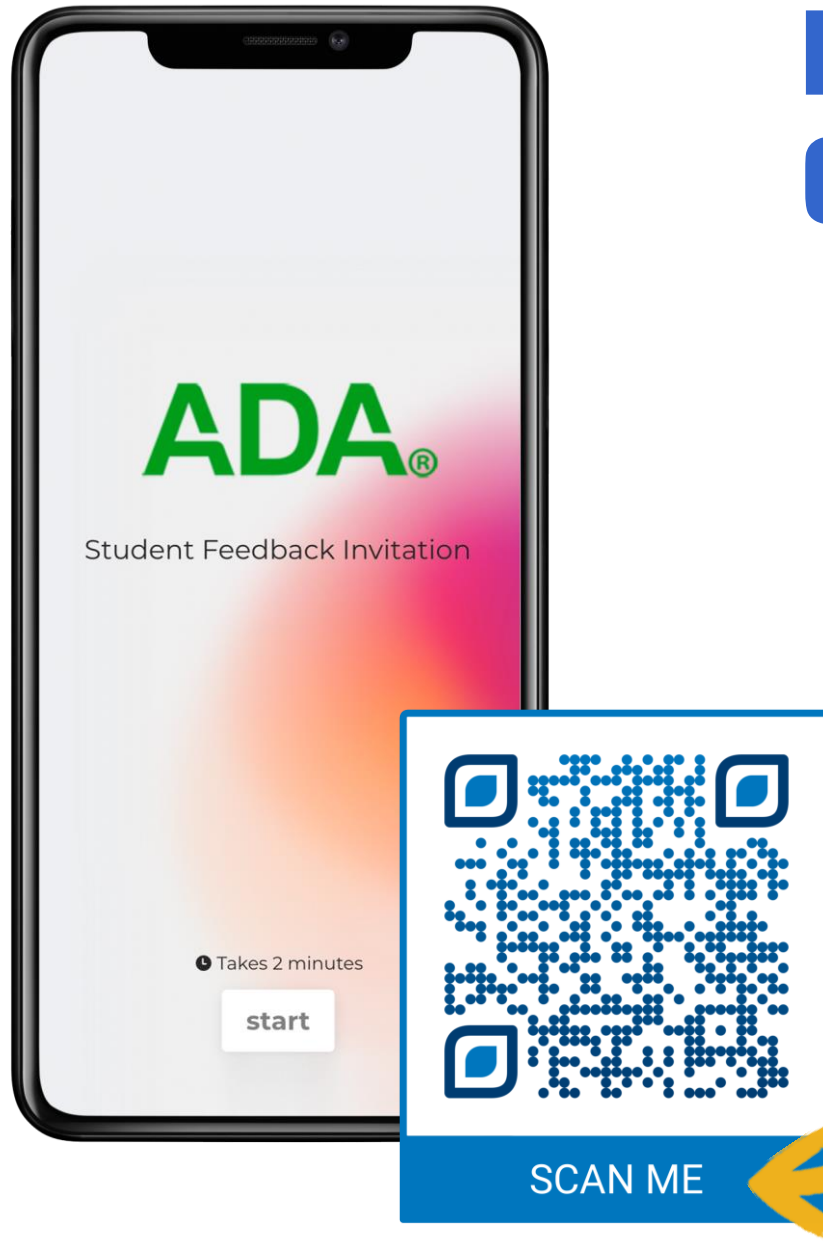
- **Mobile Publisher for Experience Cloud** – use for quick custom branded mobile app development
- **Access to Salesforce App Exchange** – thousands of ready-to-install third party apps, and customizable components, templates, automation processes and data solutions
- **Rapid Development** – using Lightning UI component library
- **Tight integration** with the underlying Salesforce CRM data
- **Simple authentication** standard across all systems (SAML)

ADA MEMBER APP PROMOTIONAL LAUNCH

PARTNERING TOGETHER

- **How can we best educate members and non-members together?**
- **How can we best partner to educate, promote and invite others in as we continue to develop, build and address pain points?**
- **What opportunities would you like to explore in the future?**

FACULTY/STUDENTS AT THE CENTER OF ITERATING

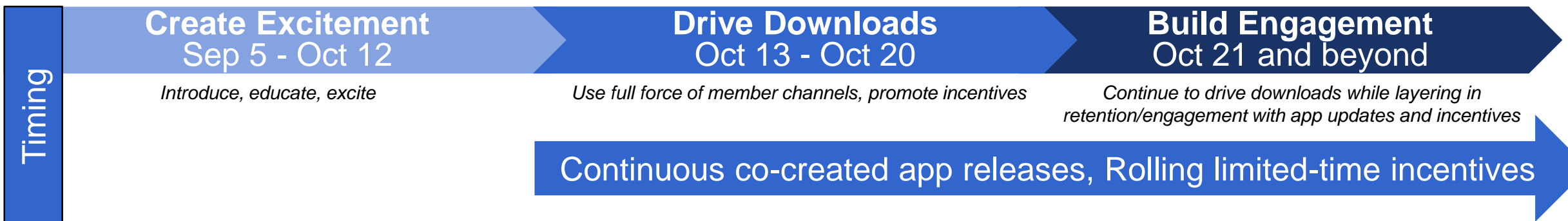


- Would you like to sign up to receive an early release of the ADA Member App and provide feedback?
- Would you be interested in participating in an ADA Student Advisory Panel?

Interested in participating? Scan the QR code and fill out our quick form.

ADA MEMBER APP PROMOTIONAL LAUNCH – DRAFT

Promotional Strategy	Business Objective	Drive app adoption that results in 100% downloads among early career member dentists (~20% of all members)
	Marketing Objective	Create awareness among early career dentists to drive downloads, gain loyalty and build long-term engagement
	Marketing Approach	Bring to life the vibrant, personalized member experience in the new My ADA Member App through a major, broad-reaching campaign timed to launch at SmileCon
	Reasons to Download (RTD)	Co-Created, Confidence, Community, Ease <ul style="list-style-type: none"> • Co-created by ADA Member dentists for member dentists • Explore career path options • Learn from the experts — tune into educational podcasts with weekly releases & CE “sound bites” playlist • Tap into a community of peers for advice, networking • Access personal and professional financial resources • Have all documents and credentials at your fingertips, in one place and secure
	KPIs	Visits to landing page; % Overall member downloads; % of EC downloads; Reach, impressions

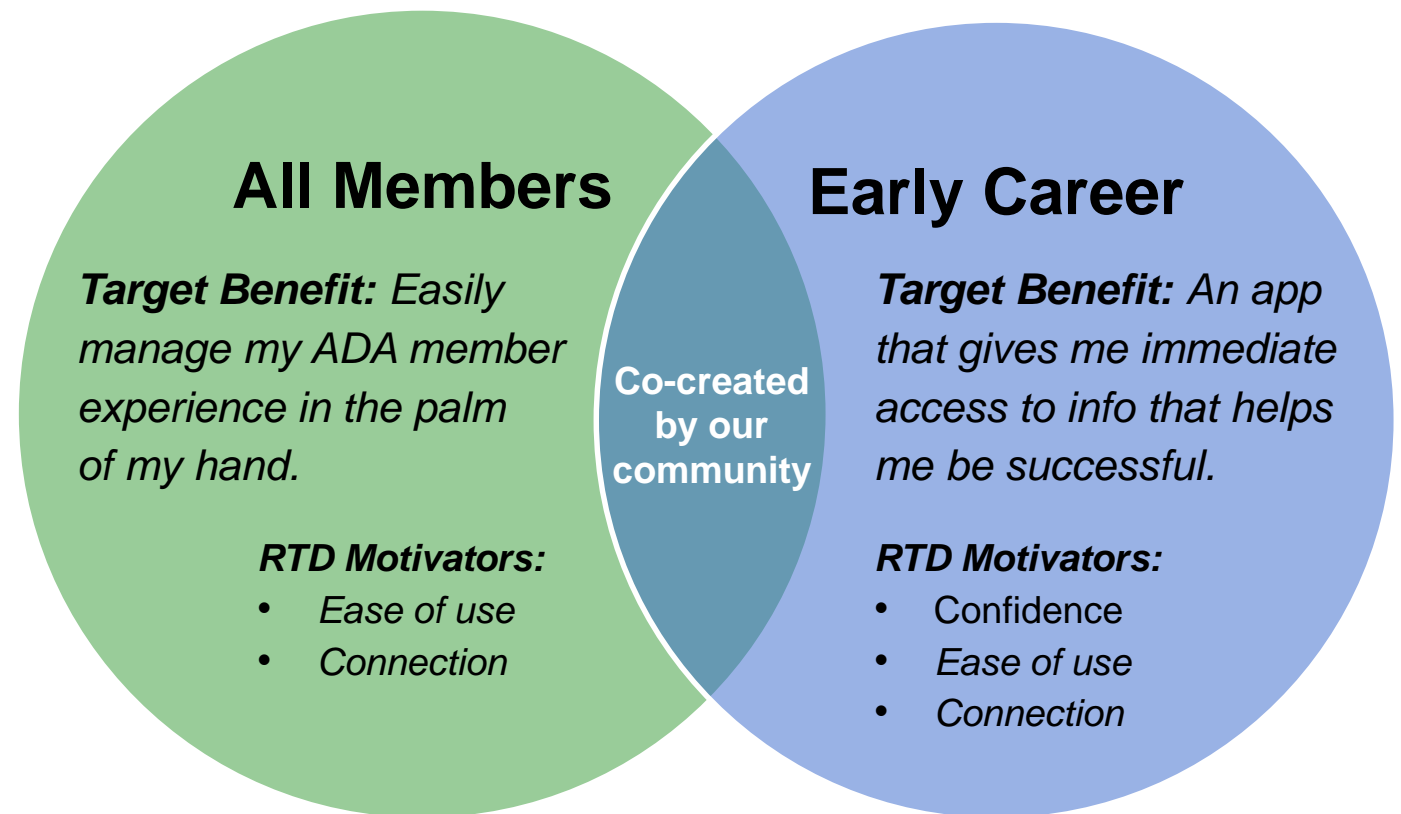


ADA MEMBER APP LAUNCH – CONTENT BLUEPRINT

Primary Message:

The *My ADA Member* app is a personal portal to your ADA life, co-created for members, by members

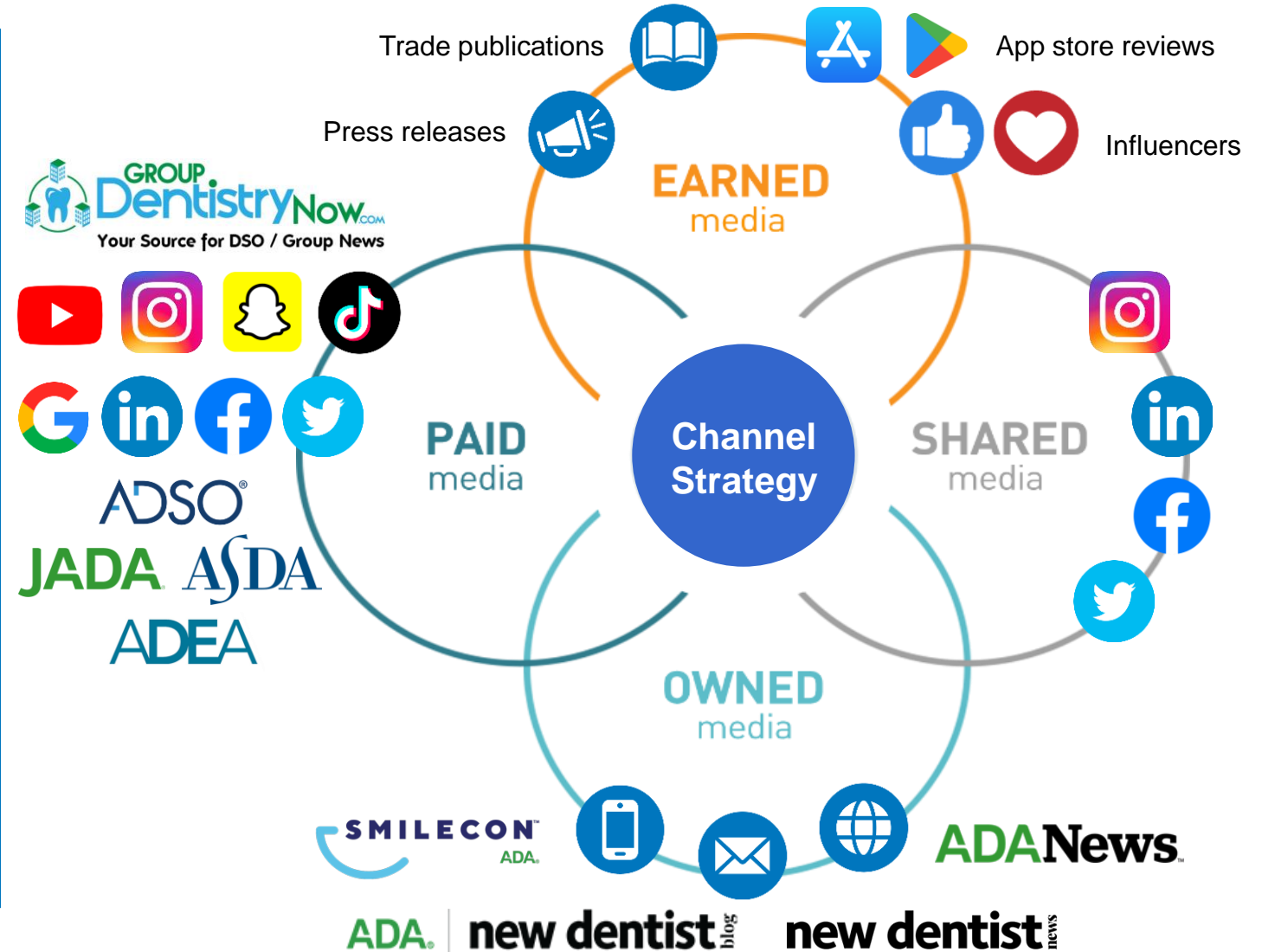
Overall Benefit of Value and Values



ADA MEMBER APP LAUNCH – ACTIVATION BLUEPRINT

Primary Execution:

Incentivized takeover campaign of all owned and high-profile channels to reach ADA members at launch



AMS/CRM Program Update

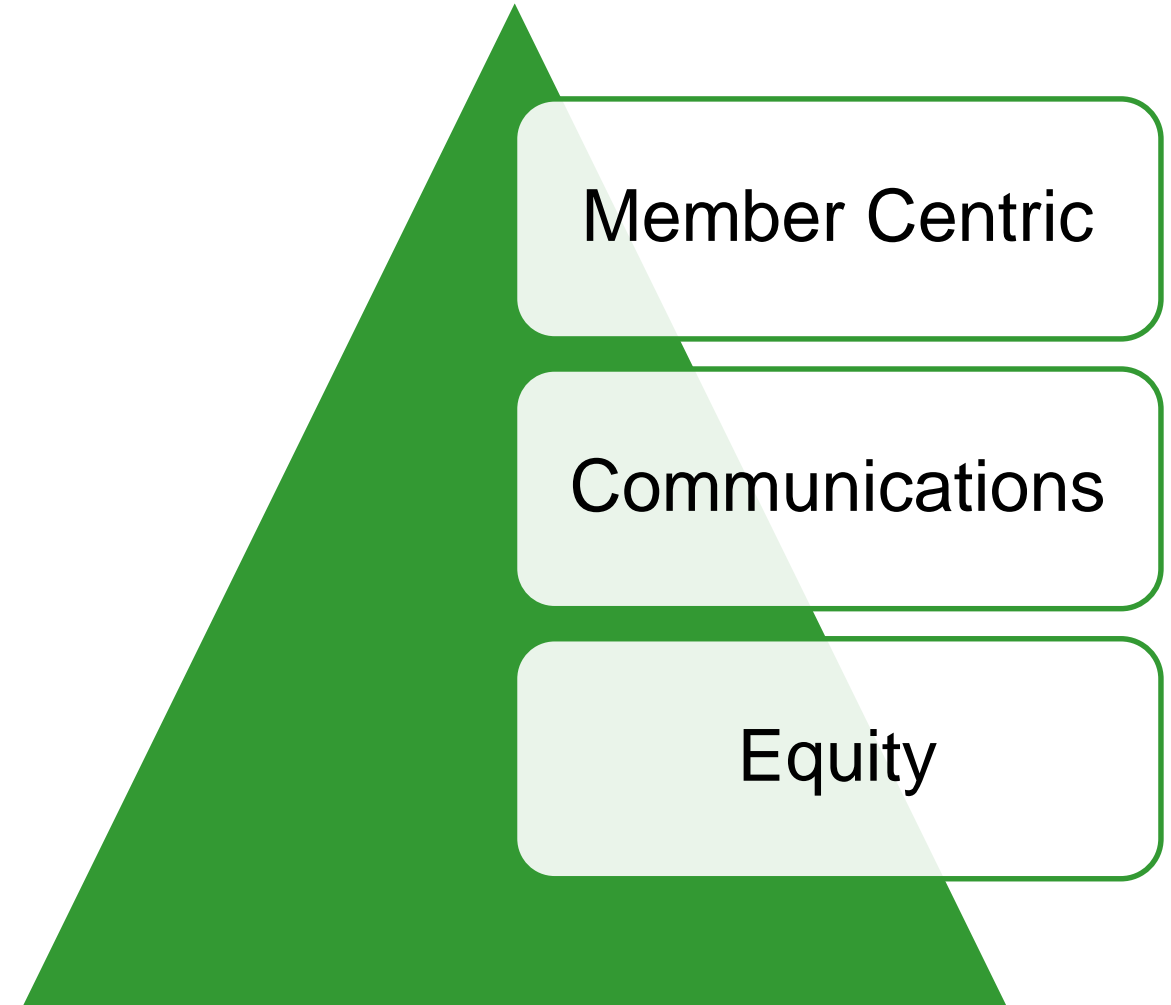
July 18, 2022

AMS/CRM Program Objectives

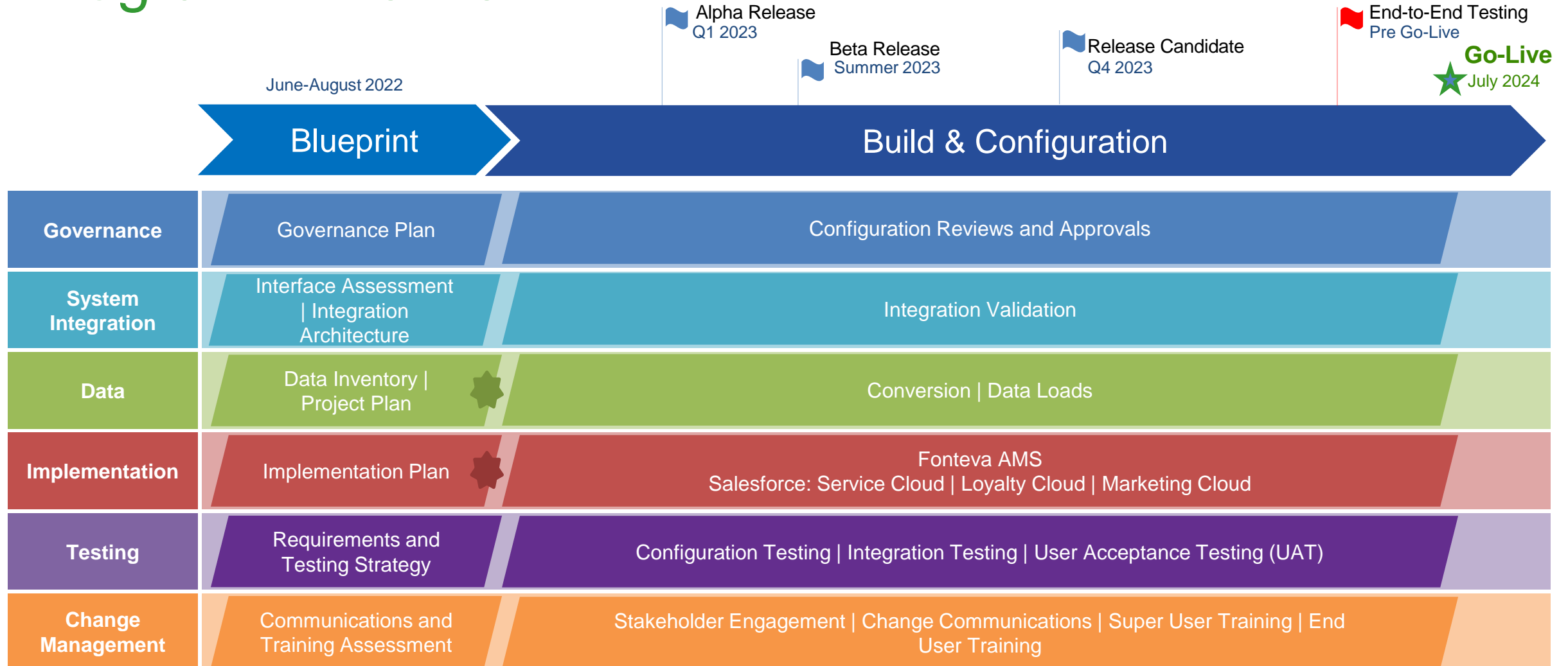
- Configure and implement Salesforce and Fonteva with few customizations to provide a single solution to the Tripartite
- Smoothly transition to new business processes through engagement, user onboarding and training support
- Leverage CRM functionality to enhance the service, support, commerce, collaboration and communication capabilities for ADA workforce and members

Primary Partner Principles – AMS Transition

Foundational
Partnership Principles
for Transitioning to the
New AMS



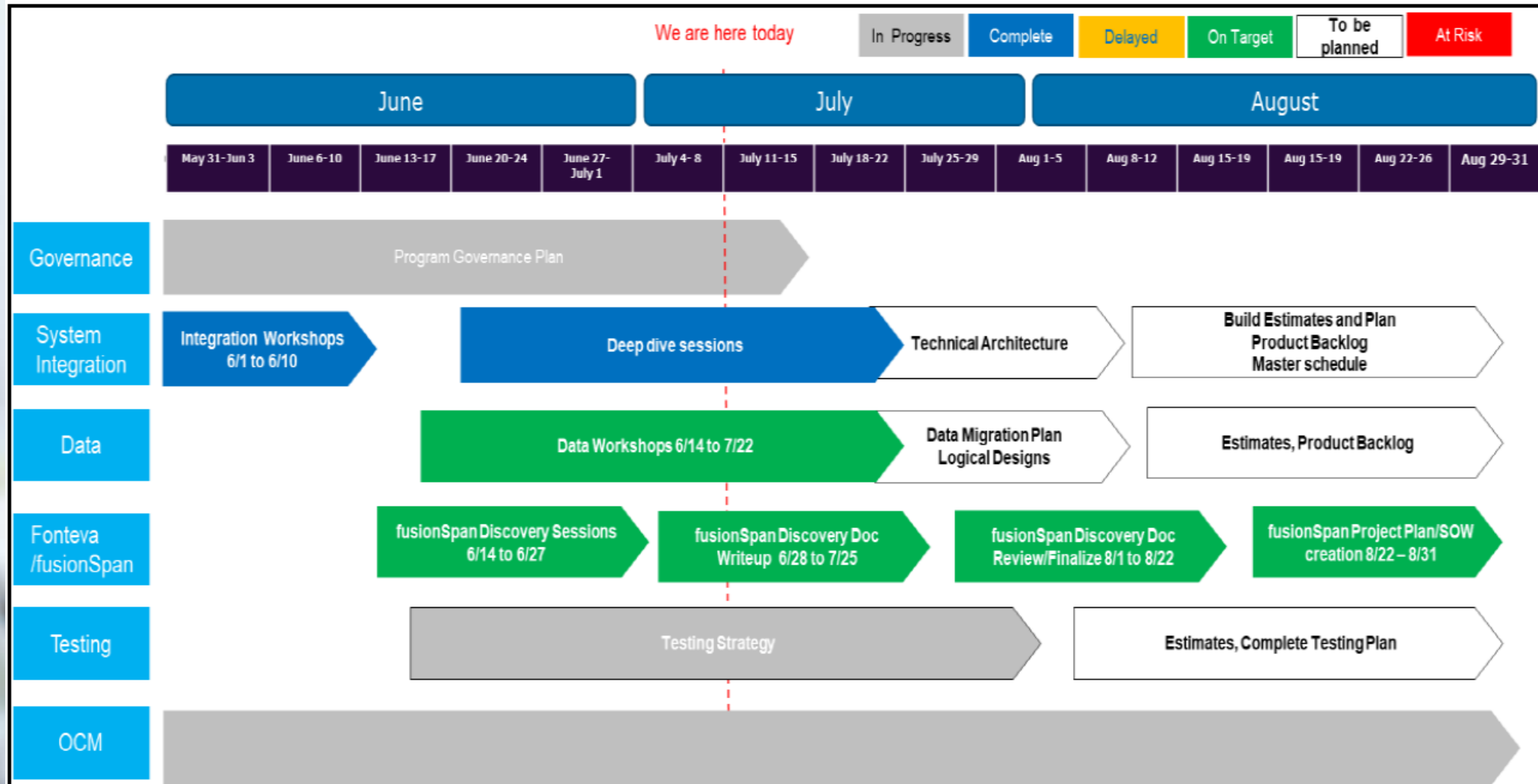
Program Timeline*



*Draft timeline subject to change

Each workstream will be executed using Agile Scrum Methodology

Current Status – On time



See Appendix for details on Vendor activities.

Stakeholder Advisory Committee

Stakeholder Advisory Committee Members	
Joshua Braswell	FL
Rachael Daigle	TX
Shelly Dates	NC
Mary Donlin	PA
Marcy Dwyer	Detroit
Stacey Hemmel	MO
Dr. Andy Kwasny	PA
Eric Larson	IL
Jody Marquardt	MI
Scott Piper	GA
Megan Stagina	St. Louis
Kainoa Trotter	WA
Grazia Yaeger	NY

Committee Role/Purpose

- Provide program advocacy, input, support and transparency
- Understand State and Local needs to increase organizational capacity
- Secure buy-in to assist Tripartite implementation

Activity/Engagement to Date

- Active participation in AMS vendor demos
- Demo feedback helped inform Fonteva selection
- Participated in fusionSPAN discovery interviews and providing feedback (in-process)

Risks and Mitigations

Risks	Mitigations
State willingness to move <ul style="list-style-type: none"> Customizing versus standardizing Concerns with the timeline Concerns with included tools 	Get state acceptance through Change Management and value <ul style="list-style-type: none"> Understand reason for customization and provide sustainable solutions Use Stakeholder Committee and other meetings to get buy in from states Identify new features that provide significant value Sell the tripartite on the network benefits of having shared information
Cutover complexity <ul style="list-style-type: none"> Amount of functionality available at launch Compressed training timeframe Vendor migration SSO migration 	Manage release through multiple modalities <ul style="list-style-type: none"> Rigorous testing of various use cases Train the Trainer to have a large training capacity Super users as knowledgeable users throughout the tripartite Regionally focused training plans (TBD)
Data Migration <ul style="list-style-type: none"> Data loss or corruption Data migration and cleanup need to be handled in a compressed timeframe 	Thorough testing protocols <ul style="list-style-type: none"> Implement comprehensive testing and run through the migration process multiple times to ensure production readiness
Release Timing <ul style="list-style-type: none"> Finding a release window that does not impact Annual Meeting or Dues Processing 	Agile process to identify necessary features for cutover <ul style="list-style-type: none"> Track and prioritize highest need functionality to be able to go live Understand what can be done later if a go-no go decision is required

Enjoy Your Lunch!

Tour: If you are interested in a quick tour of the ADA Building: Please meet at the registration table at 11:45 am.

The next session will begin at 12:30 pm.

Choose Your Own Adventure

12:30 pm – 1:50 pm

Choose Your Own Adventure!

Table 1:
What Does an
Inclusive
Organization Look
Like?

Table 2:
Moving Beyond the
Business Case for
DEI

Table 3:
Growing
Membership Among
DSO Supported
Dentists

Table 4:
Membership Models

Table 5:
First Year Out

Table 6:
New Dentist
Leadership

Table 7:
AMS & Aptify

Table 8:
ADA Practice
Transitions

Table 9:
Mental Health &
Wellness

Table 10:
Financial Realities
for New Dentists

Agenda:

First session discussion

12:35pm – 12:30pm

Second session discussion

12:55pm – 1:10pm

Third session discussion

1:15pm – 1:30pm

Fourth session discussion

1:35pm – 1:50pm

Connecting Members to Value and Values

Peggy M Hoffman, FASAE, CAE

President, Mariner Management & Marketing, LLC, an
Association Management Company

