

Thursday, June 10

- 8 a.m. Set-up of the dental clinic begins
- 4 p.m. News conference

Friday, June 11

- 4:30 a.m. Volunteers arrive to “walk the line”*
- 6 a.m. Doors open for patients
- 4 p.m. News conference (preliminary data should be available at this time regarding types of treatment delivered, numbers of patients, etc.)

Saturday, June 12

- 4:30 a.m. Volunteers arrive to “walk the line”*
- 6 a.m. Doors open for patients
- 3 p.m. Volunteers begin to dismantle clinic
- 4 p.m. News conference (preliminary data should be available at this time regarding types of treatment delivered, numbers of patients, etc.)

Sunday, June 13

- 8 a.m. Final clean-up of the clinic area

Tuesday, June 15

- Final news release issued with complete data

Check the ISDS Foundation website “Media Room” for periodic updates:
<http://www.isds.org/ISDSFoundation/imommedia.asp>

To schedule an interview in advance of the event, contact either Lee Ann Beane, ISDS Director of Communications or Greg Johnson, ISDS Executive Director, at 217-525-1406.

**It is common for Mission of Mercy free care events to attract several hundred people who will wait in line for hours, or even days, before the doors open.*

Mission of Mercy Background

While there are other Missions of Mercy around the country, ours is a gathering of volunteer dental professionals who, along with a volunteer staff of several hundred, hold free, two-day dental clinics at locations around the country.

The Illinois Mission of Mercy is held with assistance from America's Dentists Care Foundation. It is a non-profit organization dedicated to providing and maintaining all the equipment necessary to put on a "MOM" event. In addition, the Foundation provides the methods for organizing the volunteers necessary to treat 1,500-plus patients over a two-day span and the expertise to organize, set-up, run, and tear-down each Mission of Mercy event. Much of the equipment used during the event is transported via semi truck and rented from America's Dentists Care Foundation Missions of Mercy at a cost of \$30,000.

While the care provided to the patients is given at no charge to them, the dental organizations in the state where the event is held must raise thousands of dollars in private donations to cover all the costs. Donations may come in the form of funds, supplies, donated meals and/or snacks, tables and chairs, badges, forms, and a variety of other support items.

The process of hosting a Mission of Mercy typically takes about 18 months to plan, and the "missions" are spearheaded by the state dental associations. They require hundreds of volunteers, thousands of dollars in donations, and facilities large enough to set up a large-scale dental clinic and host more than a thousand people.

The events rely exclusively on volunteers. No one is paid. In many cases, dental professionals travel from all over the country to attend and participate at MOM events outside their home states.

Since 2000, more than 50 "MOM" events have been held all across the country in several different states, including Kansas, Arkansas, Colorado, Wisconsin, Texas, Virginia, New Mexico, Iowa, Oklahoma, Oregon, and others.

For additional information, visit www.adcfmom.org.

Bradley W. Barnes, DDS
Co-Chair



Dr. Bradley Barnes, a general dentist in Normal, Illinois, is a 1985 graduate of the University of Iowa College of Dentistry.

Dr. Barnes has been active in organized dentistry since his graduation. On a local level he has served as President of the McLean County Dental Society. On the state level, he has served on several committees, including the Public Relations Committee, PANDA, (Prevent Abuse and Neglect through Dental Awareness), General Chair for Annual Sessions, and Trustee on the Illinois State Dental Society Board of Trustees.

He has also served nationally on the American Dental Association Council on Communication and is a member of both the American College of Dentists and the International College of Dentists. Dr. Barnes is co-chairing the Illinois State Dental Society Foundation's first Mission of Mercy. He has been on several mission trips to places in Africa and Haiti. Dr. Barnes remains active in his church and community, serving in groups like the Boy Scouts of America, and Jeremiah Sportsmen. He and his wife, Becky, reside in Bloomington with their two children.

Mark J. Humenik, DDS, PC
Co-Chair



Dr. Mark J. Humenik is a graduate of the University of Illinois College of Dentistry. He currently practices general

dentistry for adults and children in Northbrook.

Dr. Humenik serves on the Illinois State Dental Society Board of Trustees and is the Board's liaison to the Access to Care Committee.

He is a founding member of El Nino Rey, a mission organization that provides dental care to the people of Quechultenango, Guerrero, Mexico. Dr. Humenik is co-chair to the 2010 Illinois Mission of Mercy and serves on the Advisory Council to Mission of Mercy States and Americas Dentists Care Foundation.

Dr. Humenik has attended three other Mission of Mercy events, Wisconsin, Oklahoma and Arkansas, since 2009. He and his wife, Mary Beth, are actively involved with their large families and volunteerism through their parish, St. Norbert.

LuAnne McClean, DMD, President
ISDS Foundation



Dr. McClean has served as President of the ISDS Foundation since 2004. She is a graduate of Southern Illinois

University School of Dental Medicine and maintains a private practice in Quincy. She has held multiple positions in organized dentistry at the local, state, and national levels, including past president of the T. L. Gilmer Dental Society, delegate and an alternate delegate to the ISDS House of Delegates, member of the ISDS Board of Trustees. She is a fellow in the International College of Dentists and has been an alternate delegate to the ADA House of Delegates.

Dr. McClean was a founder of the Adams County Health Department Dental Clinic and has served on the Health Department Dental Task Force since its inception in 1995. She was also instrumental in starting another Medicaid Clinic in a neighboring Carthage, IL. Dr. McClean was privileged to be a member of the first People to People Mission to Tibet, China where dentists met with their Tibetan counterparts and exchanged information on treatment modalities.

Dr. Larry W. Osborne, President
Illinois State Dental Society



Dr. Larry W. Osborne, president of the Illinois State Dental Society, is a 1982 graduate of Southern Illinois University

School of Dental Medicine with a general practice in Decatur. He is a past president of DENT-IL-PAC, an American Dental Association Grassroots Legislative Team Leader and past chair of the ADA Council on Government Affairs. While serving as chair, he worked as a volunteer dentist in the remote villages of Alaska to learn about the unique access to care problems occurring in these isolated locations.

A fellow in the American College of Dentists, the International College of Dentists, and the Academy of General Dentistry, he was honored in 2009 by being elected into the SIUE Alumni Hall of Fame. Dr. Osborne had the privilege to work this past January at the Oklahoma Mission of Mercy.

He is a lifelong member of First Lutheran Church ELCA where he serves as treasurer of the Church Foundation. A past member of the Macon County Board of Health, he also chaired the March of Dimes Walk America and Decatur Celebration Smile Contest. He formerly chaired the Richland Community College Board of Trustees where he is now serving his second board term. He resides in Decatur with his wife Nancy and two children.

- The Illinois State Dental Society Foundation hosts its first Mission of Mercy, or “MOM,” event at the Interstate Center in Bloomington on June 11-12.
- More than 900 volunteer dentists, hygienists and others from throughout Illinois will provide free basic dental care and oral surgery to needy patients.
- Volunteers will utilize 93 portable dental units. These include dental chairs and specific equipment.
- Roughly 800 people will receive free dental care each day, providing an estimated \$900,000 in free dental services. Both children and adults will be treated.
- Not all dental services will be available. Emphasis will be placed on basic dental care, such as fillings, extractions and cleanings. Priority will be given to patients suffering from dental infections or pain.
- No appointments will be taken. No pre-registration is available. Care is provided on a first-come, first-served basis.
- Doors open at 6:00 am each treatment day (Friday and Saturday).
- Based on other Mission of Mercy events held across the country, it is anticipated that patients will start lining up several hours before the doors open.
- Patients will not receive comprehensive care—in other words, all the care and dental work that is needed in their mouths. Dental problems will be prioritized with the most critical being treated.
- No false teeth will be made.
- Unfortunately, the program is unable to treat patients with specific medically-compromising conditions (e.g., extremely high blood pressure, high blood sugar levels, severe disabilities).
- Patients of all ages will be seen. Children under the age of 18 must have a parent or guardian present.
- Translators (Spanish and French) and signers for the hearing impaired will be available.
- The Illinois State Dental Society Foundation’s Mission of Mercy will serve to highlight the serious problem that Illinois citizens have in accessing dental care. The event will relieve some suffering, but it won’t solve the problem.
- Only the Illinois Legislature can provide the solution through adequately funding the dental Medicaid program in Illinois.
- More than 2.6 million Illinoisans are enrolled in state-sponsored health insurance. Two-thirds of those enrolled in government-sponsored health care are children. While Illinois has experienced a steady increase in public aid enrollment, funding for the most critical oral health procedures has not increased in more than 30 years.

...continued on back

- ISDS is actively working to increase Medicaid reimbursement rates. Illinois has some of the lowest Medicaid rates in the nation.
- Currently dentists are only paid 46 cents on the dollar with their overhead costs averaging 64 cents on the dollar. Dentists literally must pay every time they see Medicaid patients.
- Raising funding levels to simply cover the cost of providing treatment has been proven to significantly increase patient access.
- Since 2000, more than 50 Mission of Mercy (MOM) dental programs have been conducted across the United States to provide free dental care to more than 100,000 adults and children who otherwise were unable to receive treatment.

More information on the event is available by clicking on the home page “Mission of Mercy” graphic at www.ISDS.org.



QUICK FACT

- **Illinois has among the lowest funding rates in the nation for critical dental procedures**

For more than three decades, government sponsored health care programs have been grossly underfunded by the State of Illinois. In 2002, the General Assembly event voted to reduce Medicaid dental funding by seven percent to help balance the state's budget.

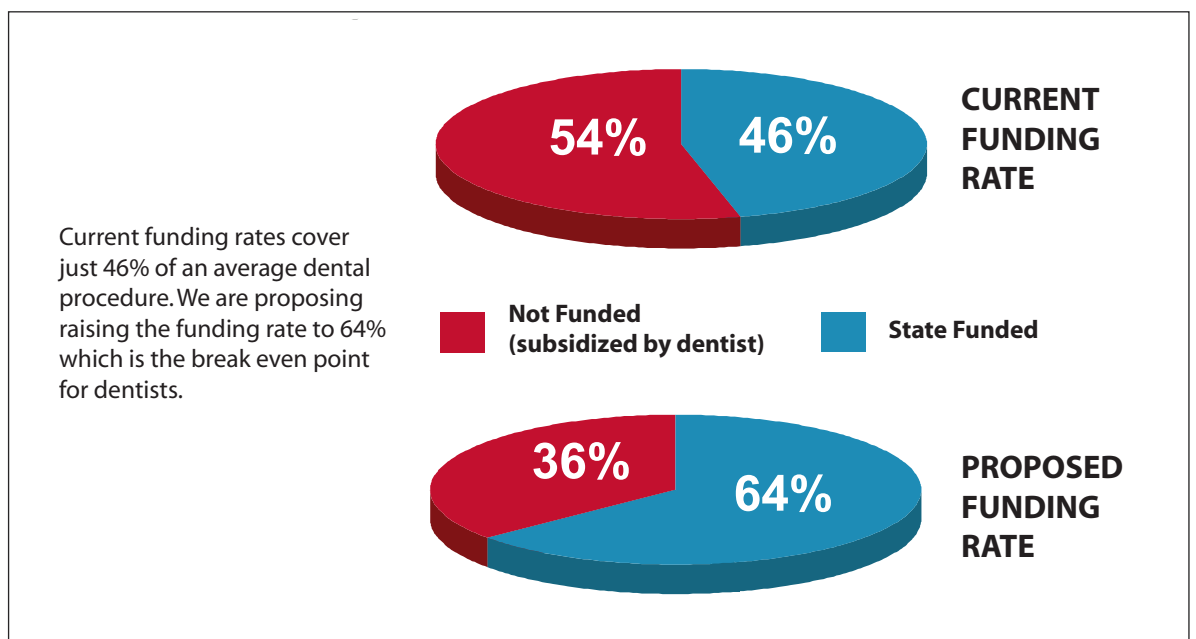
INCREASED ORAL HEALTHCARE FUNDING IS PROVEN TO IMPROVE ACCESS TO CARE

A study conducted by the National Academy for State Health Policy looked at six states where funding levels were raised to simply cover a dentist's expenses and found access to dental services for patients increased significantly. The number of dentists enrolled in public aid programs to treat low income patients increased by at least one-third and in some cases doubled. In its own 40 state study, the U.S. Government Accountability Office (GAO), an independent Congressional agency, found that

INCREASE DENTAL FUNDING

Illinois has one of the lowest funding rates in the U.S. for most dental procedures. Dentists who treat patients covered by programs such as Medicaid, KidCare, All Kids, Family Care and Illinois Covered are reimbursed only about \$46 for every \$100 in fees (see Chart 2.1). About 64 percent of a typical dentist's fees is the cost of care. Funding rates do not even cover the out-of-pocket costs of keeping the doors open, supplies, and staff salaries.

**CHART 2.1:
FUNDING RATES FAIL TO COVER COSTS: GENERAL CARE**



“dentists cite the primary reason for not treating more Medicaid patients is that payment rates are too low.” The study further shows, “most states that reported improved utilization paid rates that were at least two-thirds of the average regional fee, while most states without improvement had lower payment rates.”

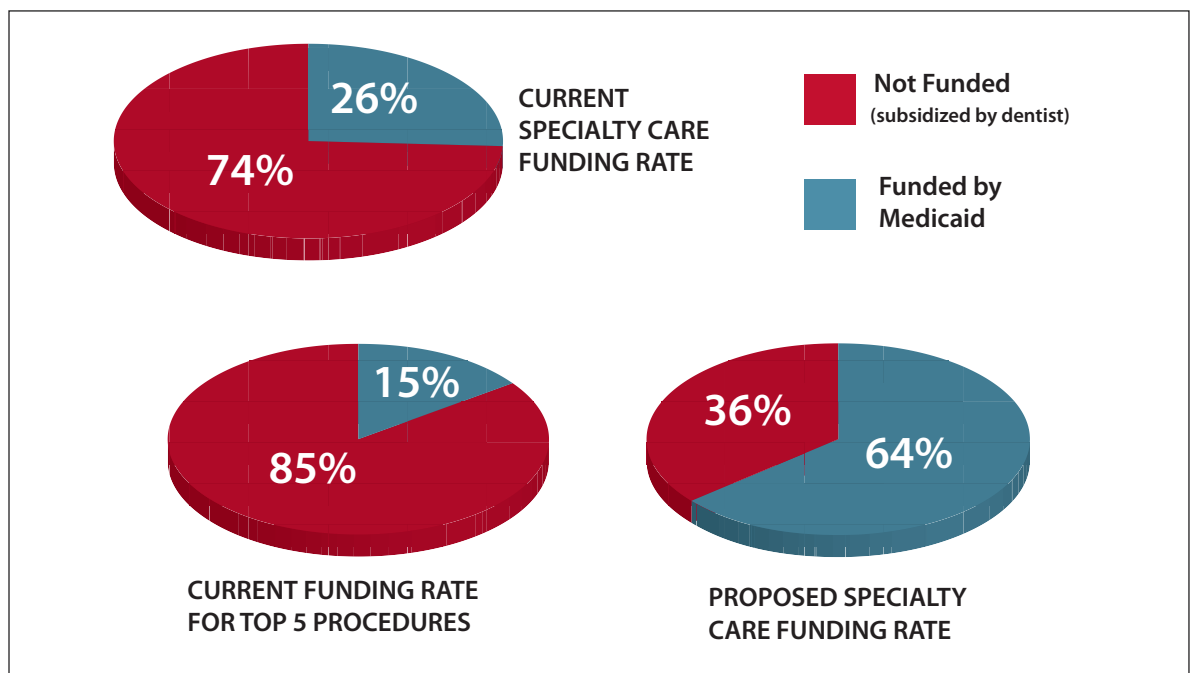
In 2005, federal law required states to provide children with the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit. It was mandated that Medicaid cover comprehensive preventive dental care for children. As a result, funding levels were increased to enable providers to treat more patients, which has translated into improved access and better care for children. A study of low-income children showed that parents who received preventive dental care were five times more likely to take their children for a dental visit, compared with parents who received no dental care or visited a dentist only in an emergency situation.

FUNDING NOT KEEPING PACE WITH DEMAND

More than 2.6 million people are enrolled in state sponsored health insurance. Two-thirds of those enrolled in government sponsored health care are children. While Illinois has experienced a steady increase in public aid enrollment, funding rates for the most critical procedures have not increased in more than 30 years. In fact, funding has been cut and dental facilities eliminated in areas that have no other options for dental services. Current funding rates for the five most common specialty care procedures cover just 26 percent of the procedure cost, far below the national average.

CHART 2.2:
This chart illustrates that Illinois’ average funding rate for the five most common specialty care procedures (90% of all specialty care procedures) covers just 16% of the procedure cost. Studies show a direct relationship between reasonable funding rates and improved utilization.

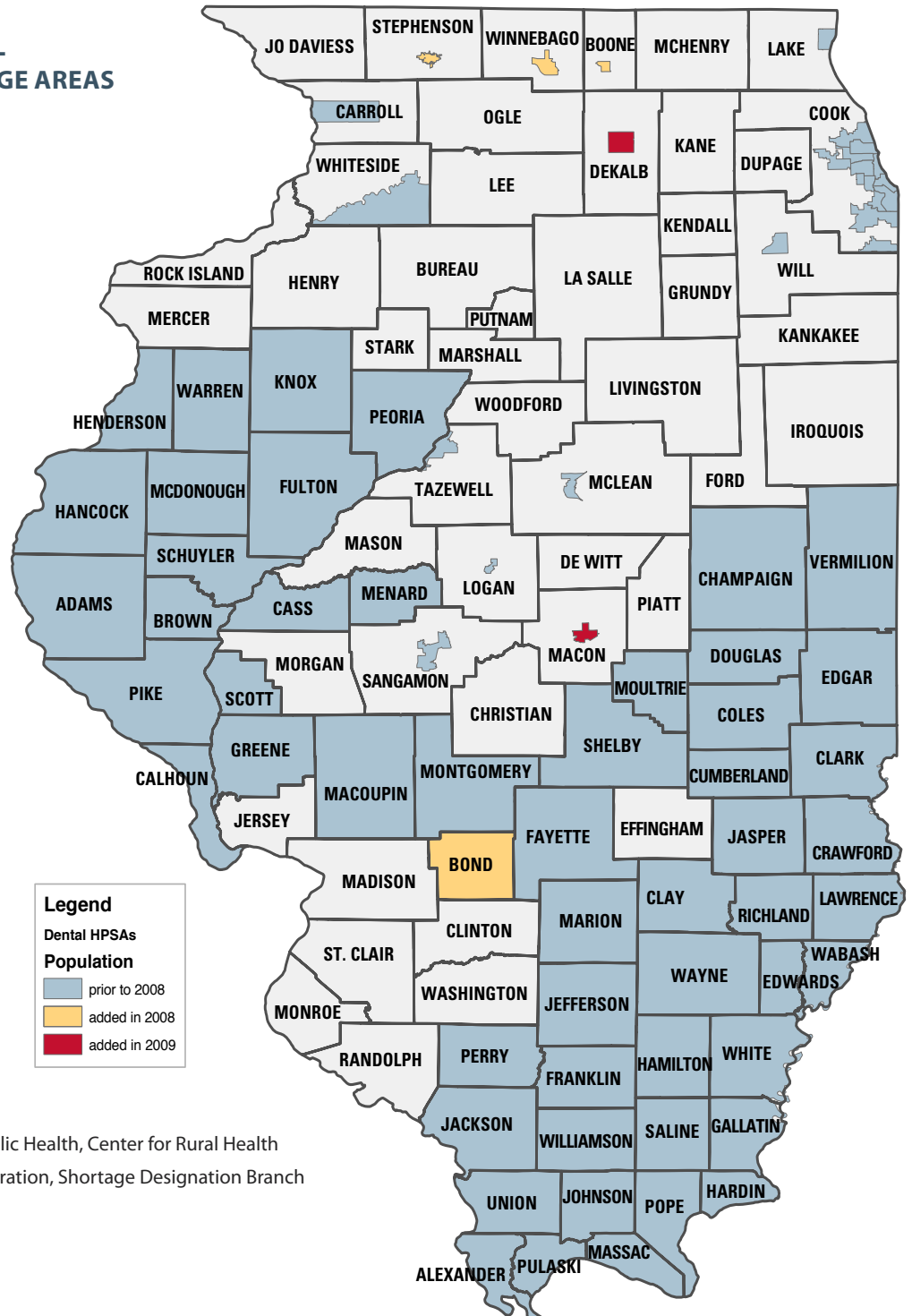
CHART 2.2:
FUNDING RATES FAIL TO COVER COSTS: SPECIALTY CARE





**CHART 1:
FEDERALLY DESIGNATED DENTAL
HEALTH PROFESSIONAL SHORTAGE AREAS**

CHART 1:
68 of 102 Illinois counties
are designated by the
federal government as
Dental Health Professional
Shortage Areas (HPSAs).
These areas are considered
underserved which means
residents have minimal or no
access to local dental care.



Map prepared by the Illinois Department of Public Health, Center for Rural Health
Source: Health Resources and Services Administration, Shortage Designation Branch
<http://hpsafind.hrsa.gov> (December 29, 2009).

“The number of people who rely on government health insurance is at a record high; for the third consecutive year in a row the number of Illinois counties designated as underserved by the federal government has increased and at the same time funding per person in Illinois has reached an historic low. This is a dangerous combination that has forced Illinois into an oral healthcare crisis.”

*Dr. Larry W. Osborne
President
Illinois State Dental Society*

DENTISTS PROVIDING CHARITABLE CARE

In 2009, Illinois dentists donated \$80 million in charitable treatment by providing free care to thousands of patients. In every instance, the demand is overwhelming, forcing some patients to leave without treatment.

UNDERSERVED COMMUNITIES ON THE RISE

Illinois has 8,500 licensed practicing dentists and specialists to meet the oral health care needs of all residents. However, low funding levels make it economically impossible for a dentist to rely on a patient base of public aid patients to maintain a practice in the numerous underserved areas of the state. The need for increased funding is reinforced by 2010 data from the federal government which shows that the number of counties designated as Dental Health Professional Shortage Areas has been growing since the late 1970s. These underserved areas are determined based on the number of dentists compared to the overall population, or the number of dentists enrolled in the Medicaid program compared to the Medicaid population.

LONG TERM HEALTH RISKS

There is an undeniable link between overall health and oral health. Studies show that poor oral health may be linked to heart disease, stroke, pre-term childbirth and oral cancer.

Oral cancer is the fourth most common cancer in the United States among African-American males and the seventh most common cancer among Caucasian males. More than 40 percent of persons diagnosed with oral cancer die within five years of diagnosis.





overview



"I have watched my son withdraw from playing with friends and fall behind in school because he is in pain and self-conscious about his appearance. The state offers dental services but we are turned away because the programs are not funded. I feel let down and completely helpless."

*Christina Sims
Working Mom of Three*

OBJECTIVE

Improve access to critical dental procedures for millions of hard working Illinois families who are suffering due to severely underfunded state dental programs.

IDENTIFYING THE PROBLEM

Each year millions of hard working Illinoisans struggle because of underfunded state oral health programs and the problem is deteriorating at an alarming rate. Critical dental treatment for Illinois' hard working low-middle income families has been severely underfunded for more than 30 years, creating a serious access to dental care gap for millions of children and adults who desperately need treatment. More than 60 percent of Illinois counties are identified as Dental Health Professional Shortage Areas (HPSAs) by the federal government (see Chart 1) which means families who desperately need dental care often go without treatment. That's in large part because Illinois has among the lowest funding rates for oral health care in the nation. Less than four-tenths of a percent of the state's total operating budget, and only two and a half percent of the state budget for healthcare programs, administered by the Illinois Department of Healthcare and Family Services (IDHFS), is spent on oral health. While there are plenty of dentists to treat public aid patients, deplorable funding rates make it difficult for these patients to receive care.

QUICK FACTS

- **Having among the lowest funding rates in the nation for critical oral health care procedures leaves millions of hard working Illinois families caught in a painful, degrading and sometimes life threatening oral health care gap**
- **The number of children and adults forced to rely on government oral health care programs continues to increase while critical oral health care programs remain severely underfunded**
- **Raising funding levels to simply cover the cost of treatment has been proven to significantly increase patient access to care**

PROVIDING CARE FOR ILLINOIS CHILDREN

Inadequate funding can have especially serious consequences for the 1.6 million children who depend on government healthcare programs. Poor oral health as a child can lead to long-term health implications and is proven to impact a child's self-esteem and ability to excel in school. There is just one dental clinic for every 8,400 children on

public aid. In Illinois, 55 percent of third graders experienced cavities and 29 percent have untreated decay. A Surgeon General's report on oral health documented linkages between oral diseases and ear and sinus infections, weakened immune systems, diabetes, heart and lung disease as well as many other serious health conditions. Low-income children are at risk and oral health remains a critical health policy challenge.



*The Bridge to Healthy Smiles campaign
is led by a diverse coalition of oral healthcare advocates and community groups
committed to bridging the access to care gap for dental coverage in Illinois.*

For more information or to become involved visit: www.bridgetohealthysmiles.com