Question 1: The mission of DDWA is: "We disrupt, transform, and revolutionize the oral health industry in order to remove barriers to healthcare and improve overall health." How do you see this mission serving the profession of dentistry and how do you intend to represent our profession within this mission?

Answer: To deliver on DDWA mission, it is crucial to recognize the vital role that dentists have. Dentists are interacting with patients, understanding their needs, and identifying the barriers they face in accessing care. For this mission to succeed, dentists need the right resources and support, and their input must be considered.

Having experience in both community health centers and private practice, I've observed the challenges that arise from limited resources.

While financial barriers are significant, it's essential to address other critical issues, such as workforce shortages, Medicaid expansion, support for independent practices, benefit plan management, leadership development, educational debt, and continuing education opportunities. These factors all play a role in determining whether patients can access and receive the care they need.

In representing our profession within this mission, I plan to advocate for a broader discussion that incorporates multiple perspectives, especially the voice of the dentist. I will work to ensure that it is heard and valued, not only at the board level but also in decision-making processes across the organization.

Furthermore, I am committed to raising patient awareness about the value of dentistry and the importance of preventive care. This can be achieved through educational programs that promote oral health and emphasize the benefits of regular dental visits.

Success in my role on the DDWA Board of Directors would involve positive collaboration with the Washington State Dental Association (WSDA), staying aligned with DDWA's mission, vision, and values, and promoting transparency, open communication, and accountability within dental partnerships.

Advocating for these changes, I aim to help DDWA and the dental professionals to work together to create a system where barriers are reduced, dentists are supported, and patients receive the best possible care.

Question 2: The vision of DDWA is: "All people can enjoy good and overall health with no one left behind." Do you believe frequency limitations, bundling, missing tooth clauses, and waiting periods align with this vision?

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Answer: The policies of frequency limitations, bundling, missing tooth clauses, and waiting periods can be extremely frustrating for both dental teams and patients. They can act as deterrents to patients receiving necessary care, which seems to conflict with the vision of Delta Dental of Washington (DDWA): "All people can enjoy good and overall health with no one left behind."

However, my perspective is from my experiences as an affiliate faculty member at the UW School of Dentistry, where I have taught Ethics and Jurisprudence for over six years, and through my role on the DDWA credentialing committee.

In my role, I meet with dental students to discuss ethical cases and national headlines that reflect violations laws and ethical principles. Over the past three years, I've also been involved in reviewing the credentialing applications of dentists practicing in Washington, evaluating cases of malpractice, license issues, complaints, and other quality control concerns. I've learned that while most dentists practice ethically, there are cases where fraud, mistreatment, or overtreatment occurs, which can damage the profession's reputation and public trust.

Policies like frequency limitations, bundling, missing tooth clauses, and waiting periods, while frustrating, were understandably developed to address these concerns. They serve as safeguards to protect patients from overtreatment, reduce administrative costs, and promote preventive care and continual dental coverage. Even so, the impact of these policies often leaves dental professionals feeling constrained and patients confused or disappointed when they cannot access the care they need.

In light of DDWA's vision, I believe that while these policies serve a purpose, there is room for improvement to ensure that they align more closely with the goal of leaving no one behind. I would advocate for a balanced approach that continues to protect patients but also removes unnecessary barriers. For example, allowing more flexibility in preventive care services. Being Chair of MAP, I've witnessed in discussion in MAP meetings having a direct impact on preventive care such as adding OHI to the prevention metric and changes to occlusal guard reimbursement. I want to continue this productive discussion in the organization's decision-making process.

By taking into consideration both the ethical and the practical frustrations experienced by providers and patients, we can find ways to refine these policies, ensuring that they better align with DDWA's commitment to improving overall health for all, without leaving anyone behind.

Question 3: The Washington State Democratic Party supports a Medical (Dental) Loss Ratio of 85%, do you support this position?

Answer: I support the principle behind the Washington State Democratic Party's position on an 85% Dental Loss Ratio (DLR), which aims to hold dental and medical insurance companies accountable for directing the majority of patient premiums toward actual care rather than administrative or operating costs.

I commend Massachusetts for introducing a DLR of 83% in 2021, and I understand they are tracking the data starting July 2024 to report to the Massachusetts Division of Insurance. The goal of refunding patients if insurance companies fail to meet this percentage is commendable in its intent to make care more affordable. However, we must carefully examine its long-term impact.

From my recent participation in the WSDA House of Delegates in September, I found that we don't have enough data yet to fully understand how this legislation will affect practicing dentists in Massachusetts. Factors such as the saturation of dentists, utilization of dental insurance, and claim volumes vary significantly across states. Massachusetts, for instance, is about eight times smaller in size than Washington, and these differences must be considered when discussing the feasibility of a similar DLR for Washington state.

Having participated in Dental Action Day since 2011, I've witnessed legislation with good intentions lead to unforeseen challenges. This undermines the importance of creating policies that take into account the complexities of our state's dental industry. While an 85% DLR sounds ideal on paper, we must ensure it doesn't unintentionally create barriers that could complicate patient care or increase administrative burdens for providers.

Having states like Massachusetts (83% DLR) and Oklahoma (80% DLR), we have an opportunity to learn from their experiences. We need to understand how much of the refund patients are actually receiving and, more importantly, whether these refunds will motivate patients to proceed with recommended treatments and increase access.

In Washington, it is essential that we carefully consider these factors to determine a fair and practical DLR percentage that fits our state's dental landscape. By evaluating the data from other states like Massachusetts, we can form specific legislation language that promotes transparency, improves patient outcomes, and strengthens the dental profession in Washington. That way, we can be prepared for the full effect of a DLR, without introducing unnecessary complications for patients or providers.

Question 4: What action would you take if you discovered that a DDWA policy was significantly different than Delta Dentals of other states and other dental benefits carriers, resulting in far lower reimbursement to its dentists?

Answer: My approach would be to investigate the situation thoroughly. From my experience serving as a SKCDS delegate, Chair of the Member Advisory Panel, and as a Pankey Institute alumnus, I have had the privilege of hearing from dentists across Washington and nationally. Dentists have vocalized that reimbursement differences between Delta Dental plans in various states can range from 15% to 45%, which understandably causes concern among Washington dentists.

During my term with DDWA, a big priority would be to take a deeper look into these discrepancies. I would focus on understanding the specific policies or plans driving the differences and evaluate the factors contributing to the lower reimbursements. While I recognize that each state may have unique needs, structures, and volumes that could play a factor, it's essential to understand the historical context and rationale behind these differences.

I would advocate for open communication and collaboration between DDWA and dentists to ensure fair, predictable compensation, and that policies are aligned as closely as possible with national standards, while still reflecting the unique needs of our state. By taking a thoughtful, informed approach, I would work to ensure that DDWA supports its network of providers in a way that benefits both dentists and patients alike.

Question 5: Do you believe the dental benefits market should be competitive? Do you think one carrier being too large or too dominant is detrimental to patient care?

Answer: I believe that competition in the dental benefits market is essential. Competition drives innovation, encourages the development of better products and services, and improves the overall patient experience. Without it, I would be concerned about efficiency, quality of care, and the influence dentists have in shaping the dental benefits landscape. When there is competition, carriers are pushed to improve their offerings and ensure that both patients and providers receive the best possible service.

Regarding whether one carrier dominating the market is detrimental to patient care, I believe it depends on how well the carrier addresses the needs of all stakeholders patients, employers, and dentists. If a dominant carrier continues to meet these needs, there might not be an immediate negative impact on patient care. However, if the balance shifts and one group's needs are neglected, stakeholders—whether they be patients, dentists, or employers—have the choice to withdraw from that carrier. This withdrawal would ultimately affect the carrier's dominance in the market, as they would no longer be able to maintain their leading position without satisfying all involved parties.

In my own practice, I am -network with five carriers including Connection Dental (which opens to at least over 15 other smaller carriers). While having multiple carriers gives my office more options, it also introduces frustration and confusion in terms of managing different policies, reimbursement rates, and administrative tasks. While competition is beneficial overall, the complexity it brings can create challenges for providers, requiring additional time and resources to navigate various systems.

Question 6: As a Member Director, you are elected by your constituent member dentists of Delta Dental of Washington. How do you plan to provide transparency for your decisions, and how will you represent the voice of member dentists once you have signed a Non-Disclosure Agreement with DDWA?

Answer: If elected as Member Director, I understand the responsibility of representing the voices of Washington dentists while balancing the confidentiality required by the Non-Disclosure Agreement (NDA) with DDWA. My commitment to transparency begins with open communication. I will continue to actively listen to and engage with my colleagues through existing channels, including study clubs, CE courses, and events like the PNDC, Washington PFA meeting, Dental Action Day in Olympia, and Ethics course at the University of Washington School of Dentistry.

I will remain accessible through these venues, as well as through my participation in outreach programs like the Seattle King County Clinic and Oral Cancer Awareness campaigns. In addition, I will stay available through mentorship programs, including those of the WSDA and DDWA, and actively attend local dental society meetings with SCDS and SKCDS.

While I am bound by confidentiality through the NDA, I will be communicating nonconfidential updates to you and working to clarify decisions made by DDWA in ways that respect the boundaries of my role. I will strive to ensure that your concerns are heard, your questions addressed, and that you are informed of the broader trends and issues affecting dentistry in Washington state.

I am committed to being available to listen to your concerns and provide updates where possible. Transparency also requires collaboration, so I welcome any suggestions from my fellow dentists on how to further enhance communication and ensure that I represent your voice effectively. Together, we can ensure that the profession continues to evolve in a way that benefits both patients and dentists.

Question 7: Dental benefits are not insurance. Should patients have the right to use their full pre-paid benefit with the dentist of their choice, regardless of network? What responsibility do you believe dental benefits carriers have to honor a patient's choice of dentist?

Answer: As both a dentist and a mom, I view this question from two important perspectives.

From a dentist's perspective, I firmly believe that patients should have full autonomy to choose their dentist, regardless of whether that dentist is in-network or not. Ethically, patient autonomy is a foundation to quality care. The relationship between a dentist and patient is built on trust, communication, and consistency, and patients should be able to maintain that relationship without being penalized financially or administratively. To support this, dental benefits carriers should ensure that the Explanation of Benefits (EOB) is transparent, clearly outlining how patients can apply their benefits to out-of-network providers without discouraging their choice. Time and financial investment should be seen as a way to hold both the patient and dentist accountable for delivering and receiving quality care—not as a barrier to care.

My perspective, as a mom of five children, is that having choices is essential for me and my family. Every family has unique needs, and as a parent, I want the freedom to select a provider who understands those needs, especially for my children. Whether it's a matter of comfort, trust, or specialized care, families deserve the flexibility to choose the best provider for them. Dental benefit plans should honor and support that choice, ensuring that the value of pre-paid benefits can be applied equitably, regardless of network restrictions.

In conclusion, I believe dental benefits carriers have a responsibility to honor a patient's choice of dentist by providing clear, transparent benefits information and by allowing patients to fully utilize their pre-paid benefits wherever they receive care. This approach not only respects patient autonomy but also fosters better health outcomes by supporting continuity of care.

Question 8: Dentists and DDWA are often on opposing sides of legislative issues. How would you reconcile this disagreement when DDWA lobbying efforts, policies, or decisions directly conflict with the position of DDWA member dentists, especially when they relate to maintaining a viable dental practice?

Answer: I understand that there has been friction between dentists and Delta Dental of Washington (DDWA) over lobbying efforts, policies, and decisions, particularly when those policies impact the viability of dental practices. These conflicts stem from past events and

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decisions, but it's essential that we focus on moving forward and finding ways to collaborate for the benefit of all.

A significant part of this challenge is the breakdown in trust between dentists and DDWA. To rebuild that trust, it's crucial that dentists continue to have a strong voice in decisionmaking. Representation on the Board and the Member Advisory Panel, where I've had the privilege to serve, are important platforms to ensure that input from practicing dentists is heard.

As a Board Member, I recognize that I have a fiduciary responsibility to Delta Dental of Washington. At the same time, I was elected by you to represent your voice. Balancing these two roles can be difficult, but I believe that maintaining an open line of communication is key to finding that balance. While there may be times when I am unable to fully disclose certain information due to confidentiality requirements, I am committed to remaining as accessible and communicative as possible.

It's not only about airing frustrations; it's about finding practical solutions that address the needs of both dentists and DDWA. The Washington State Dental Association (WSDA) represents nearly 50% of dentists in the state and Delta Dental is represented by nearly 90% of dentists. This overlap presents a real opportunity for collaboration, and I believe we can achieve more by working together. When conflicts arise, I aim to understand all sides, listen to concerns, and seek compromises that benefit both parties.

One area that requires open dialogue is reimbursement rates, which should align with inflation and reflect the quality of care delivered by dentists. While I may not always be able to provide complete transparency due to my responsibilities on the Board, I will always strive to keep you informed of trends, decisions, and changes that impact your practice, while ensuring that your voice is heard in policy discussions.

By continuing to attend WSDA events, being accessible through various platforms, and staying engaged with the concerns of Washington dentists, I will do my best to bridge the gap between dentists and DDWA, ensuring that we work toward policies that support both the viability of dental practice and the quality of care provided to patients.