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MDA SUPPORTS RULE PROHIBITING DENTURISTS PLACING DENTURES OVER IMPLANTS

The Montana Board of Dentistry is considering a recommendation from its Committee on Denturistry to allow denturists to place dentures over implants. Denturists are currently prohibited from doing so and the issue is a long-standing controversy within the Board.

The committee's recommendation calls for the repeal of "Rule j" (ARM 24.138.2302 "Unprofessional Conduct for Denturists, Section 1 (j) fitting, attempting to fit or advertising to fit prosthesis on or over a dental implant").

The Montana Dental Association expressed concerns about the serious risks to patient safety raised by repealing the rule.

"The Association continues to support 'Rule j', based on the Board of Dentistry's prior reviews and actions on the rule and the expert professional evaluation of this matter by members of the Association's Denturistry Task Force", the Association said in a statement provided to the dental board for its September 6 meeting.

MDA outlined critical clinical issues in explaining the Association's support of the current rule. These include the requirement for a dentist to control patient selection and provide patient aftercare. Other issues include the risks due to overloading implants, the patient's bone and periodontal conditions, and the types of implants and dentures proposed.

A decision to repeal or amend the rule would require the dental board to hold a hearing at a future meeting.

Members of the Montana Dental Association Denturistry Task Force include MDA President Dr. Michael A. Veseth, President-elect Dr. Christopher A. Hirt, oral surgeon Dr. Paul G. Sims (past member and past president, Montana Board of Dentistry), prosthodontist Dr. Joseph A. Meng, and Dr. Kurt S. Lindemann, MDA's immediate past president.

For a copy of the MDA's statement to the Board of Dentistry go to MDA's Montana Dental Advocate:
<http://montanadentaladvocate.com/>
 (Your user name is your last name and the initials of your first and middle names. Your password is your ADA member number.)
 Contact MDA Executive Director David Hemion for further information at dave@montanadental.org.

Dr. Jon Suzuki - Periodontal Therapies and Dental Implants 2013
Friday, September 13, 2013 7 CDE Hours
Red Lion Colonial Hotel - Helena
 For online registration visit www.montanadental.org
 Montana Dental Association
info@montanadental.org 800.257.4988




HEALTHCARE REFORM AND DENTAL PRACTICE EMPLOYEES

Learn how the Affordable Care Act affects you and your practice's employees.

On Thursday, September 19 at 7 a.m. Mountain West Benefits, the adviser for MDA's Group Benefits Trust health plan, will present an important 30 minute conference call to explain the health insurance changes occurring in the coming months

There are actions you need to take regardless of whether or not you offer health insurance to your employees. The conference call information is below. For those who cannot make this call, it will be recorded and posted to the MDA website.

Conference Call Number: 866-740-1260
Access Code: 4414713

For additional information contact:
Dara Anderson
Director, Account Sales Service & Support
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Everyone is familiar with the HIPAA regulation that requires you to distribute a Notice of Privacy Practices to all patients, who then sign an Acknowledgement indicating they have received and reviewed the Notice. HIPAA requires that certain content be included on your Notice.

Published on January 25, 2013 and in effect on March 26th, a new HIPAA Final Rule was passed. Being referred to as the Omnibus Rule, these new regulations include required changes to the wording of your Notice of Privacy Practices. Dental offices have until September 23, 2013 to comply.

One change to the Notice involves fundraising and marketing. The Notice must now indicate if the patient's Protected Health Information (PHI) is used for fundraising and give the patient the right to opt out. If there is a disclosure of PHI for marketing purposes or the sale of PHI, a written authorization must first be obtained from the patient.

The Breach Notification Rule was part of the HITECH Act that was passed back in 2009. The new Notice must now inform the patient of the dental office's obligation to notify patients in the event of a breach of unsecured PHI.

Further, the Notice must state that in the event a patient pays in full for a service out of pocket, the patient now has a right to request the dental office not to disclose treatment information for this service to a health plan.

Lastly is a change to the patient's right to a copy of their health records. If applicable, a patient now has a right to an Electronic copy of their records if they prefer. The patient must be notified of this right in the Notice of Privacy Practices.

While it is a violation of HIPAA Security to send a patient's PHI over normal email without any type of encryption or security measures, a dental office is allowed to send regular email containing PHI directly to the patient, but only if the patient requests this, their email address is verified, and the patient is informed of the possible security risks of emailing sensitive information. However, secure emails are always recommended if possible when sending PHI.

The Notice of Privacy Practices should contain an effective date of when the office first started distributing the new Notice. Distribution is only required to patients as they come in for appointments and only new patients who have not yet signed an Acknowledgement of Receipt Privacy Practices Notice are required to sign a new Acknowledgement. No changes are required to the Acknowledgement form.

If a dental office has a website, as of September 23rd they are required to post their updated Notice of Privacy Practices to the website.

For more information or to receive a copy of a new and compliant Notice of Privacy Practices, available on paper or electronically, please call The Dental Record at 800-243-4675 or visit www.dentalrecord.com. The Dental Record is endorsed by your state dental association. Please review the full details of HIPAA regulations and contact your attorney for legal advice.

The Montana Dental Association

Presents



Dr. Jon B. Suzuki

Non-Surgical and Surgical Periodontal Therapies and Dental Implants

Friday - September 13, 2013

Red Lion Colonial Hotel

2301 Colonial Dr., Helena, Montana

Registration, 8 am
Class, 8:30 am – 4:30 pm

About Dr. Suzuki

School of Medicine and professor of Periodontology and Oral Implantology in the School of Dentistry at Temple University. He serves as the chairman and program director of Graduate Periodontology and Oral Implantology at Temple University. He has been Dean of the School of Dental Medicine at the University of Pittsburgh, CEO of the faculty dental practice plan, and Chief of Hospital Dentistry.

Dr. Suzuki received his D.D.S. from Loyola University of Chicago and Ph.D. in Microbiology from the Illinois Institute of Technology. He completed an N.I.H. Fellowship in Immunology at the University of Washington in Seattle, and a Clinical Certificate in Periodontics at the University of Maryland.

Dr. Suzuki is the immediate past-chairman and current panel member of the Food and Drug Administration Dental Products Panel. He served as chairman of the ADA Council on Scientific Affairs, and continues to serve as a consultant to the Scientific Council, Practice Management Council, and Commission on Dental Accreditation.

Dr. Suzuki is a fellow of the American and International colleges of dentists, a board specialist microbiologist and former board examiner of the American College of Microbiology, a diplomate and current board examiner of the International Congress of Oral Implantology, and a diplomate of the American Board of Periodontology.

PERIODONTAL THERAPIES AND DENTAL IMPLANTS

7 Credit Hours All Dental Team Welcome

Periodontal surgery and non-surgical therapies are indicated for patients with periodontitis. Selected patients may require mucogingival and osseous surgeries for crown lengthening, pre-implant surgery, and pre-prosthetic treatment planning. This course will highlight anatomical and biological principles for periodontal and implant surgeries. Classic and regeneration periodontal surgeries will be presented according to bone loss and pocket type, with suggested treatment approaches.

Learning Objectives

1. Determine non-surgical periodontal treatment plans
2. Determine surgical periodontal treatment plans
3. Treatment planning for dental implants
4. When is site preparation surgery required?



Thank you for pre-registering... Lunch and breaks are included in the cost of tuition. No refunds will be issued after the course date.

- MDA Member Dentist \$ 245
- With CE Sticker \$ 220
- ADA Member/other than Montana \$ 290
- MDA Retired Volunteer Dentist \$ 75
- Non-Member Dentist \$ 380
- Hygienist/Staff Attend with Dentist \$ 95
- Hygienist/Staff Attend w/o Dentist \$ 110

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Be Healthy – Pay Less!

The 2013 Wellness Program is on the home stretch!

Participation deadline is **October 15** - don't miss this saving opportunity!

Those participants enrolled in the health plan who do not use tobacco products, manage their weight, manage their blood pressure, cholesterol and glucose level will receive a **special premium holiday in November 2013.**

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For more information, contact:

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dara@askmwb.com or call 406-441-4713

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EFDA TASK FORCE TO SURVEY MEMBERS

The MDA's Expanded Function Dental Auxiliary (EFDA) Task Force will be surveying all MDA members about EFDAs this month. The survey will assist the MDA Board of Directors as it considers a legislative proposal to create an EFDA scope of practice as a new dental team position in Montana.

"The scope would be similar to EFDA models that have existed in the military dental corps, Indian Health Service and 24 states for many years," said Dr. Ken Small, task force chair and MDA Board member representing the Fourth District.

"Before we go further, the task force wants to assess the interest and questions Montana dentists have about EFDAs."

"The task force is interested in what MDA members think about EFDAs. Would you utilize an EFDA in your practice? If so, what functions would you be confident delegating to a qualified EFDA?"

"Your input is valued and necessary for MDA to make crucial decisions", Dr. Small said.

What is an EFDA?

EFDAs are typically dental assistants (and sometimes hygienists) who obtain the required qualifications and who perform specific functions under delegation by a supervising dentist. They are not "mid-level providers". No EFDA can perform an irreversible function.

EFDAs can place and finish amalgam and composite restorations following preparation of the tooth by a dentist. They may also take impressions and perform some functions under general supervision. EFDAs may only perform functions that are reversible.

Studies have show that EFDAs can increase the efficiency of a dental practice, saving time for the dentist to perform other procedures.

How will EFDAs be regulated?

EFDAs will be regulated by the Montana Board of Dentistry and must be approved by the Board. EFDA candidates would complete didactic and clinical EFDA training, an approved preceptorship under a dentist and demonstration of competency. Only dental auxiliaries who obtain certification or licensure in expanded functions can be EFDAs.

A link to the online survey will be sent by email to all members. Please take few minutes to complete the survey. All responses are confidential and no identifying information will be released.

"The MDA EFDA Task Force appreciates your response to this survey," Dr. Small said.

For additional information, please contact:
David Hemion, MDA Executive Director
dave@montanadental.org or (800) 257-4988

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WESTERN STATES PRESIDENTS CONFERENCE

MDA President Dr. Mike Veseth, President-Elect Dr. Chris Hirt and David Hemion, executive director attended the Western States Presidents Conference in Jackson, Wyoming in August. The conference brings together dental association leaders from 14 states and the ADA to consider the challenges facing organized dentistry.

Here is a report from Dr. Veseth and Dr. Hirt

"I think all state dental associations have the goal of providing outstanding member value," said Dr. Veseth. "The problems faced are similar, but not identical. Meeting regularly to discuss and compare ideas is a real benefit for all members."

"The goal of this meeting is not to solve anyone's problem, but to keep each state up to date on what is happening and what might be coming," Dr. Hirt added.

Some of the common issues among the states were insurer contracts and reimbursement, membership and the growth of corporate dentistry.



Dr. Mike Veseth
MDA President

"The California Dental Association pointed out that Delta Dental of California is trying to change the provisions of provider agreements" Dr. Veseth noted. He said those changes would restrict the ability of dentists to challenge the insurer's actions and would eliminate the requirement that the insurer justify reimbursement changes.

Recent cuts to Delta's reimbursement rates in Oregon were also a concern, Dr. Hirt reported. "Oregon's leaders estimate it takes about 30% out of the bottom line for dentists who are Delta providers," he said. "During this discussion, it was mentioned that Delta had sent out a letter to dentists who were participants asking for input on the make-up of the Delta Board of Directors. The return rate of this survey was dismal! This was a golden opportunity for the Oregon dentists to possibly have some control on this rate reduction. Unfortunately, when member dentists were asked if they responded to the letter, many said they never saw it!

"The take home message here: Read your regular mail! Have a conversation with your team about what regular mail you see," he said.

"Corporate dentistry is a growing concern, both for the reasons you think and others you may not have thought about," Dr. Hirt said. "We are fortunate in Montana that dental practices have to be owned by a dentist. In Colorado, any business entity can own a dental practice." It was noted that out-of-state dentists can comply with the dentist-owned statute if licensed in Montana, even if they don't actively practice in the state.

"Washington and California are experiencing strong growth in corporate dentistry, Dr. Veseth said. "Compared to the single practitioner, the corporation can lower costs and can be more flexible as it can spread expenses over more dentists."

"One of the fundamental conflicts all dentists/business owners face is the drive to sustain a profitable business and provide what patient's need," Dr. Hirt said. "As dentists we are a trusted source of information and possess a very unique skill set. That skill set gives us the potential to produce profit for a business."

"Dentists are governed by a Code of Ethics that a non-dentist business owner may not follow. The potential to over treat to reach production goals in order to satisfy the non-dentist owner comes into view at this point."

Dr. Veseth was impressed with work of the Arizona dental association on behalf of dentists. "They are working to prevent corporation policies from interfering with the clinical judgment of the dentist and to prevent retaliatory actions by corporations against dentists," he said.

Conference attendees focused on why more dentists are entering corporate practice.

"The increase in student debt is driving new graduates into corporate employment," Dr. Veseth said.

Dr. Hirt agreed "I can't help but think these are young (or old) dentists who have a mountain of debt, bright ideas, and a will to work hard. Unfortunately, I believe these dentists are often shunned by private practice owners because they are affiliated with the big bad corporate industry."

One conclusion at the meeting was that the ADA, state associations and local components need to deliver services that enable dentists to maintain the private practice model, especially for new graduates.

"The Arizona Dental Association has established a program called To Help Each Other Succeed or THEOS, for new dentists to receive help and mentoring on a regular basis," Dr. Veseth said. "This helps young dentists set up practices."



Dr. Chris Hirt
MDA President-Elect

“Reaching out to these dentists and providing resources that are useful to them is something organized dentistry will be working on,” Dr. Hirt added.

Efforts to reverse the decline in the percentage of dentists who are members was a major issue at the conference. Although MDA members are about 82 percent of all practicing dentists

in Montana, other states are dropping into the 60 percent or less range.

“How an association can use modern technology to build effective regular communication with members is a concern to all states,” Dr. Veseth said. He noted MDA’s Technology Committee is currently assessing how to improve online and electronic member communications.

“California realized the importance of demonstrating membership benefit by showing how advocacy success can translate into savings and improvements for the dental practice,” he said.

“We also need to make dental associations attractive to those who do not go directly into private practice, Dr. Veseth said. “Those who first work for community health centers, the Indian Health Service and other organizations need a reason to belong.”

“Overall, the meeting was a welcomed opportunity to connect with the leaders of our neighboring states and share details of the issues we are all facing,” Dr. Hirt said. “I came away with a feeling of pride. Being one of the smaller states we have a tighter knit group of professionals. I like the slightly wild west feeling we enjoy in Montana. And as the delivery of dentistry evolves, we will work together shape it in the best way possible.”

SHARE YOUR PHOTOGRAPHY SKILLS WITH MDA



*Photo submitted by Dr. Andy Hyams, Billings
Duck Creek, Yellowstone County*

Once again we are asking if you would like to share your photography skills with MDA.

Examples of previously submitted snapshots include Montana scenery, MDA events, MDA component get-togethers, wildlife, flowers, ghost towns, outdoor adventures, and sunsets. MDA will use the photos in the membership directory, newsletters, and other publications.

You may submit your photo to jeans@montanadental.org.

Thank you for considering this request and for all the wonderful pictures submitted since 2007.

ADA SAYS SENATE REPORT ON CORPORATE DENTAL PRACTICES RAISES ETHICAL CONCERNS

This is a reprint of an article by Craig Palmer that appeared in the ADA News regarding the Senate Finance and Judiciary Committees' "Joint Staff Report on the Corporate Practice of Dentistry in the Medicaid Program". The investigation was requested by Finance Chairman Sen. Max Baucus (D-MT) and Ranking Judiciary Member Sen. Chuck Grassley (R-IA)

Corporate pressure or requirements that dentist employees perform unnecessary procedures in order to maximize profits, as alleged in a Senate report, would represent "a clear violation of the ethical codes of the profession as set forth in the ADA Code of Professional Conduct," the Association said.

"The Code states that 'professionals have a duty to act for the benefit of others' and that 'contract obligations do not excuse dentists from their ethical duty to put the patient's welfare first'," the Association said in a press release.

"The ADA strongly believes that any pressure applied to dentists in conflict with this code should be reported and pursued aggressively. Regardless of how they are employed, dentists must protect and promote the best interests of the patient above all else. That is the purpose of the ADA Code, by which all member dentists agree to abide," the Association said.

"We believe that all dentists, whether they are ADA members or not, should follow this code. States have legal and regulatory power to hold all dentists providing care within their jurisdictions to the same legal standards, regardless of who owns those dentists' practices. State dental boards should exercise that authority."

The Senate Finance and Judiciary Committees' "Joint Staff Report on the Corporate Practice of Dentistry in the Medicaid Program" was posted online at the Finance Committee website July 23.

The bipartisan Senate investigation focused primarily on organizations "that identify themselves as dental management companies" and treat Medicaid-eligible children "almost exclusively," said the 1,500-page report's 33-page executive summary.

"Notably, these clinics tend to focus on low-income children eligible for Medicaid," the summary said. "However, these clinics have been cited for conducting unnecessary treatments and in some cases causing serious trauma to young patients; profits are being placed ahead of patient care," the report asserted.

"In one case, the corporate structure of a dental management company appears to have negatively influenced treatment decisions by over-emphasizing bottom-line financial considerations at the expense of providing appropriate high-quality, low-cost care. As a consequence, children on Medicaid are ill-served and taxpayer funds are wasted."

The "discouraging report on ways in which some large dental practices are putting profits before patients ... is particularly disturbing in that most of the alleged fraud and abuse of patients involved children," the Association said.

"Such conduct is inexcusable and should be prosecuted vigorously," said the ADA statement. "However, equally disturbing is the broad brush that implicates a whole class of practice models rather than focusing on actual offenders."

The Senate report included "a stated concern about the ability of the dental profession to provide access to care to millions of low-income families and other vulnerable populations," the ADA statement said. "But the causes of what amounts to a dental health crisis affecting these underserved Americans are complex and require a comprehensive set of solutions.

"The ADA, state dental societies and individual dentists have for decades wrestled with this situation as advocates before state and federal governments, in addition to their traditional roles as caregivers. There has been significant progress made, especially in bringing more children into dental offices for much-needed care. But much more is needed, especially with regard to young adults, who have the lowest rate of dental visits of any age group."

For a copy of the Senate report and the ADA's press release regarding it go to MDA's Montana Dental Advocate:

<http://montanadentaladvocate.com/>

(Your user name is your last name and the initials of your first and middle names. Your password is your ADA member number.)

Contact MDA Executive Director

David Hemion for further information at dave@montanadental.org.

ADA NEW DENTIST CONFERENCE STIRS INVOLVEMENT

*Submitted by Dr. Stacey L. Simmons
Hamilton, Montana*

This past July, I had the exciting opportunity to attend the American Dental Association New Dentist Conference in Denver, Colorado. This was a first for me and I confess, my participation within the Association prior to this meeting was minimal. I had every excuse in the world NOT to involve myself, yet despite all my commitments, I was asked by a friend to attend so I could see firsthand what organized dentistry was about and perhaps become involved. My staff, sensing my eagerness at such a prospect, sent me on my way, by myself, with little to recommend me except my excitement and anticipation of what was to come.

The goal of the New Dentist Conference (and the general American Dental Association Conference Annual Session), is to bring dentists together and unite ideas on a common ground. The continuing education benefits are always a plus, but the networking of friends and associates is even better. While in Denver, I met the Chair of the New Dentist Committee (Dr. Chris Salierno) and several representatives of nationwide districts. I also met our District 11 New Dentist Committee representative Dr. Dan Bruce of Boise), 11th District ADA Trustee Dr. Roger Kiesling of Helena, and 11th District ADPAC board member, Dr. Doug Hadnot.

One of my questions at this conference was: What can I, and other dentists, gain from being a member of the American Dental Association? Being a member of an organization that has an overwhelming impact on the potential of the dental profession is crucial, especially now. Dr. Salierno stressed that “There are many challenges facing new dentists today. Fortunately the ADA continues to provide numerous resources to help us transition into practice.”

Increasing patient base. Better financial and patient management. Opportunities to improve oneself in one or all disciplines of dentistry. Economy. Medical device tax. Affordable Care Act. Retirement. Legislative representation and advocacy within congress. Multi-level outreach programs that give awareness to the general public about oral health. Publication resources. I would venture to say that one or all of these holds an interest to you, regardless of your scope of practice or when you graduated from dental school.

As oral health care providers, we have our differences on a microscopic level, yet collectively, we have similar concerns and pursuits that unite us within the profession. Membership within the tripartite organization is an all-in-one package deal!

As a friend and colleague, I am inviting you to join me and the thousands of others to be an active part in organized dentistry. Become involved! I concur with Dr. Salierno when he said, “I always return from the New Dentist Conference as a better dentist. I’ve polished my clinical skills attending outstanding lectures and I’ve reconnected with my peers from around the country. I get recharged for practice.”

I know that we all have time and financial commitments – such is the way of life! Yet I am a firm believer that even the smallest involvement can have a tremendous impact.

Are you a New Dentist (out of dental school ten years or less)? To learn how MDA’s New Dentist Committee can support you, contact your local component New Dentist Committee representative.



Dr. Stacey L. Simmons & Dr. Chris Salierno (Chair, ADA New Dentist Committee) at the ADA New Dentist Conference in Denver, Colorado.

SEALANTS FOR SMILES! THREE YEARS STRONG!

In 2011 MDA began “Sealants for Smiles!”, an innovative and collaborative dental outreach program that provides valuable dental disease prevention services to vulnerable low-income school-aged children throughout Montana. A key element of this program is the grassroots leadership and utilization of private and community health dental practices to provide care to underserved school-aged children.

In school year 2012-2013, Sealants for Smiles! coordinated care to 3,240 children, who received 3,224 dental sealants and 3,134 fluoride varnish treatments. Calibrated, local hometown dentists and their dental teams provide dental sealants and fluoride varnish at no cost to families whose children attend schools in which 50% or more of the students qualify for the State’s Free/Reduced Lunch Program. Children receive free toothbrushes and toothpaste and those with urgent treatment needs are provided case management support to ensure a Dental Home is established with a dentist and care is completed. Additionally, case manager support is utilized to provide uninsured families with assistance in applying for Medicaid/CHIP. Dental teams collect oral health surveillance data using the Basic Screening Survey to build an accurate profile of the oral health of Montana children.

As a result of its strong focus on collaboration, reproducible quality, and sustainability, the Sealants for Smiles! received a \$55,000 grant from the Caring Foundation (foundation of Blue Cross and Blue Shield) for program costs, including employing Bridgette Schrampf as the new Sealant Program Coordinator.

With this additional support and increased statewide partnerships, Sealants for Smiles! has experienced significant program growth and is currently scheduled to provide care to 8,455 low-income children in 84 schools across Montana. For more information on how to get involved in this landmark Montana program contact Bridgette Schrampf 406.548.5020 bridgette@smilesmontana.org

or Dr. Jane Gillette, DDS 406.868.1549 drgillette@SproutOralHealth.org.



Kalispell area dentists Dr. Mike Bowman (l) and Dr. Reed Thompson (r) participated in Sealants for Smiles! Program.



These kids are ready for their turns. (l) First District Board Member Dr. David Keim and his patient are all smiles! (r)



Thank you 2012-13 Sealants for Smiles! Dentists	
Dr. Mike Veseth	Malta
Dr. Chris Hirt	Billings
Dr. David Keim	Kalispell
Dr. Reed Thompson	Kalispell
Dr. Mike Bowman	Kalispell
Dr. Bob Bowman	Kalispell
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Montana School Nurses
Montana Public Schools



“I went with my dental hygienist and two dental assistants to Helena Flats School north of Kalispell in December of 2012. It was a GREAT experience and a real team builder! In about 5 hours we screened roughly 100 children and my hygienist placed about 150 glass ionomer sealants. This was a great choice for sealant material. This December we will have a chance to measure our success when we screen the children again. This program is great and very thorough!!”

- Dr. Roger Newman, DDS, Columbia Falls, MT

SIXTH DISTRICT DENTAL SOCIETY RECEIVES NATIONAL FLUORIDATION AWARD

Marking 68 years of community water fluoridation, the American Dental Association, the Association of State and Territorial Dental Directors and the U.S. Centers for Disease Control and Prevention recently honored 112 states and communities with 2012 Fluoridation Awards at the National Oral Health Conference. Montana received a Fluoridation Reaffirmation Award for defeating an attempt to stop fluoridation in Bozeman.

Local dentists from the Sixth District Dental Society organized health care and community leaders to convince the Bozeman City Commission to leave Bozeman's decades-old water fluoridation program in place. The Montana Dental Association provided support for the effort.

"The award recognizes the commitment of Montana dentists to water fluoridation's significant affect on preventing dental disease," said Dr. Jane Gillette, who spearheaded the successful campaign. "We are fortunate that Bozeman dentists stepped up to the challenge."

The Fluoridation Merit Award honored the Children's Dental Health Project and the Campaign for Dental Health for their efforts to maintain and expand fluoridation's benefits. The Children's Dental Health Project worked with the ADA, the City University of New York/Hunter College School of Nursing and the CDC Division of Oral Health to develop fluoridation advocacy resources.

In April, U.S. Surgeon General Dr. Regina Benjamin officially endorsed community water fluoridation as "one of the most effective choices communities can make to prevent health problems while actually improving the oral health of their citizens." The Centers for Disease Control and Prevention has proclaimed community water fluoridation as one of 10 great public health achievements of the 20th century.

A total of 16 communities in seven states were recognized with Community Fluoridation Initiative Awards for passing water fluoridation initiatives during 2012. Another 16 communities in 12 states received the Fluoridation Reaffirmation Award for defeating initiatives to discontinue fluoridation or approving initiatives to maintain fluoridation.

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MDA's Group Benefits Trust health plan is governed by a Board of Trustees nominated by MDA and elected by dentist's participating in the Trust plan. There is a vacancy on the Board. MDA members who are enrolled in the Group Benefits Plan are eligible to serve in the Board. Trustees serve a three year term.

If you are interested in being nominated, please contact David Hemion at the MDA office, dave@montanadental.org (800) 257-4988.



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Unitek Metalcraft Ortho Chair (tan color), **Adec Micro-Cart Model #2514** (with slow and high speed Midwest American handpieces), and **Ritter Super Starlite Model K dental light** (pole mounted) are all in excellent condition and being sold together as a unit. Call Dr. Pardo at (406) 585-8498 or ipardo@q.com. Bozeman, MT

Dental EZ PLR-200 chair - Recently recovered (Sable), works well. Good condition \$700. Contact info@afdm.com

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2013

September

- 13 MDA Fall CE featuring Dr. Jon Suzuki, Contemporary Clinical Periodontics 2013". Helena, Red Lion Colonial Hotel. Register online at www.montanadental.org.
- 27-28 MDA Board of Directors, Helena.

October

- 18 OSHA and HIPAA Update, speaker Steven Fuhriman. Sponsored by the First District Dental Society, KwaTaqNuk Resort, Polson. Contact Dr. Ron Davis, gpddsr@gmail.com.
- 31-Nov 3 ADA Annual Session - New Orleans.

2014

January

- 16-17 Billings Mid Winter. Contact Dr. Brian Francis, 406.656.9635
- 18 MDA Board of Directors, Billings

March

- 7 MDA Spring CE featuring Dr. Dale Miles, "Cone Beam CT", Helena.

May

- 1-2 MDA Annual Meeting, Hilton Garden Inn, Missoula.
Thurs., May 1, Dr. Joe Steven, "Efficient Dentistry". www.kiscodental.com
Friday, May 2, The Madow Brothers. www.madow.com

Keeping You in Touch with Dentistry in Montana