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BRIEFS

FDI registration price increases after Aug. 28 Online registration discounts for the 104th FDI World Dental Congress in Poznan, Poland, are avail-

able through Aug. 28. After that date, registration can only be done on-site at a higher price.

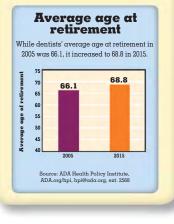
The FDI World Dental Congress, where the official language is English, will convene Sept. 7-10 at the Poznan International Fair.



The Congress will feature a broad scientific program including panel discussions, global oral health forums, an exhibit hall, interactive sessions on dentistry's cutting-edge topics and disciplines as well as meet-theexpert sessions and courses.

Register online at fdi2016poznan.org for the meeting, social programs and tours. The website also offers the official preliminary program, airline discounts and links to hotel accommodations.

JUST THE FACTS



Association: Contact Congress about discrimination rule

BY JENNIFER GARVIN

Washington — The Organized Dentistry Coalition has asked the U.S. Department of Health and Human Services' Office for Civil Rights for an extension of the implementation deadlines for the recently released final rule on Section 1557 of the Affordable Care Act. Section 1557 prohibits discrimination in health care on the basis of race, color, national origin, age, disability and sex, including discrimination based on pregnancy, gender identity and sex stereotyping. The final rule, which was implemented July 18, applies to health care providers who receive certain funds through HHS, including Medicaid and the Children's Health Insurance Program. It does not apply to providers who only receive reimbursement under Medicare Part B, but as of July 18 the agency had not clarified whether the rule applies to dentists who receive reimbursement under Medicare Part C, also known as Medicare Advantage.

In a July 29 letter to Jocelyn Samuels, OCR director, the coalition

See RULE, Page 15



Thank you: Marty Jones, clinic director of St. Francis Mission Dental Clinic, and Father John Hatcher, director of the St. Francis Mission, present ADA President Carol Gomez Summerhays, center, with a traditional star quilt as a sign of their appreciation to organized dentistry for its continued support of the volunteer clinic, which has been providing free dental care to the Rosebud people since 2012. See story, Page 9.

Evidence shows kids strongly benefit from dental sealants

BY MICHELLE MANCHIR

A systematic review and the updated clinical practice guidelines it helped generate published in the August edition of The Journal of the American Dental Association give a clear indication to dental professionals as to the marked benefit of the use of sealants in preventing and managing occlusal caries in children and adolescents, said the article's lead author, Dr. John Timothy Wright.

See SEALANTS, Page 2

National media focus on floss; government confirms importance

BY MICHELLE MANCHIR

Cleaning between teeth with floss and the use of other tools such as interdental brushes is an important oral hygiene practice and, along with professional cleanings and tooth brushing, has been shown to disrupt and remove plaque, the U.S. Department of Health and Human Services said in a statement Aug. 3.

The statement came in response to an ADA News inquiry about why flossing was not included in federal dietary guidelines released in 2015, when the practice had been included in past guidelines. The Associated Press noted the omission in an August news story that questioned the benefits of using dental floss.

See FLOSS, Page 5



BPA in dental sealants safe

BY MICHELLE MANCHIR

Dentists have a new resource from the ADA to help answer patient questions about the safety of bisphenol A exposure in dental sealants for their children.

Research published in the August issue of the ADA Professional Product Review shows that a 6-year-old child is exposed to more BPA from food; drinks; sunscreen, shampoo, body wash and other cosmetics;

ADA Professional Product Review. dentists in the U.S. The analysis indicated that the BPA release from dental sealants is very low — 0.09 nanograms. This amount is well below the limit proposed for a 6-year-

and air and thermal paper (such as cash register receipts) than from the amount that is in dental sealants.

The ADA Science Institute staff tested the BPA release from 12 dental sealants used by

dentists in the U.S. The analysis indicated that the BPA release from dental sealants is very low -0.09 nanograms. This amount is well below the limit proposed for a 6-year-old child (who weighs about 20 kilograms, or 44 pounds) by the U.S. Environmental Protection Agency (1 million nanograms per day) and the European Food Safety

See BPA, Page 5



Sealants

Continued from Page 1

"The guidelines show that sealants are more effective in managing pit and fissure caries than fluoride treatments, such as varnish," said Dr. Wright, a professor and the director of strategic initiative in the department of pediatric dentistry at the University of North Carolina School of Dentistry. "They also show that benefits are obtained by the variety of materials currently marketed in the United States for sealant use (e.g. resin-based materials, glass ionomer materials, polyacid-modified resin, and resin-modified glass ionomers)."

The ADA Council on Scientific Affairs and the ADA Center for Evidence-Based Dentistry, in collaboration with the American Academy of Pediatric Dentistry, convened a working group to update sealant guidelines, which the council first developed in 2008.

The working group, which included clinical experts, stakeholders and methodologists, undertook a systematic review that informed development of the evidence-based guidelines.

The group's literature search identified 23 relevant clinical trials evaluating sealants and their ability to prevent or manage dental caries for two years or longer, and the group included the data from all of the clinical trials in their analysis, Dr. Wright said.

The analysis indicated that children treated with sealants have about a 70 to 80 percent reduction in the incidence of occlusal caries compared with children that do not receive sealants.

There were no reports of any adverse outcomes or health concerns related to the use of pit and fissure sealants, adding further to the merit of using sealants as a routine part of preventive dental services.

Dr. Elliot Abt, chair of the Council on Scientific Affairs, which oversaw the systematic review and the guidelines, said the two publications demonstrate one of the main tenets of the ADA, which is producing and effectively communicating useful scientific information, including guidelines, to its members.

"A guideline basically is a presentation of the evidence," Dr. Abt said. "It's not a protocol, it's not a standard of care. It's basically saying to the user, 'Here's the current best evidence on this topic.' You can combine that evidence with your clinical experience and patient circumstances to make a sound clinical decision."

To watch a video of Dr. Abt discussing these guidelines, visit ADA.org and search for "Evidence Shows Kids Strongly Benefit from Sealants."

The guidelines and the systematic review of randomized controlled trials related to sealants are available online at JADA.ADA.org. Every month, JADA articles are published online in advance of print publication.

For more information about this and other ADA-developed scientific information, email science@ADA.org.

To help explain sealant benefits to patients, the ADA Catalog offers three illustrated handouts: the brochure "Dental Sealants: Protecting Teeth, Preventing Decay," available in English or Spanish (item W291); the mini-brochure "Seal Out Decay" (W191); and the "Sealants Quick Reference," a twosided card (W276).

All three titles say what a sealant is and how it is applied, with before-and-after photos of sealant application.

These and other patient education materials can be ordered online at ADAcatalog.org or by calling the Member Services Center. Use promo code 16124 to get a 15 percent discount on orders placed by Sept. 30.

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Conference focuses on small group practices

BY KELLY SODERLUND

Denver — Find out why more dentists are joining or starting small group practices at a conference preceding ADA 2016.

BIG Idea: Small Group Practice is scheduled for Oct. 19 from 8:30 a.m.-5 p.m. at the Hyatt Regency Denver. Attendees can eat breakfast and network with exhibitors starting at 7:30 a.m. and the conference includes lunch, two breaks and a full day of education. Dentists can select their own continuing

education from one of three tracks — feasibility, development or operations — allowing them the opportunity to receive six hours of

CE credit.

"Juggling the responsibilities of a solo practice sometimes makes it difficult to devote the time it takes to learn more about other practice models and opportunities," says Dr.



chair of the ADA Council on Dental Practice. "This conference gives dentists the opportunity to gain in-depth knowledge about the risks, rewards and opportunities that can occur in small group practices. Attendees at all stages of their careers will gain valuable information about this fast-growing and very satisfying practice model."

Dr. Chris Salierno, editor of Dental Economics, will deliver the keynote address, and Dr. Roger Levin, CEO of Levin Group Inc. and eight other presenters will lead sessions within each track.

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ADA Officer Campaign Statements

andidates seeking ADA-elected offices prepared platform statements and profiles for the ADA News. Each candidate was sent a profile form with the same questions and asked to list no more than five items for professional memberships, volunteer posts/elective offices and main qualifications.

Publication of these statements and profiles should not be construed as an endorsement of any candidate by the ADA News or other staff of the ADA or its subsidiaries. These statements and profiles are presented as information for Association members.

The candidates included are those who — as of Aug. 8 — had decided to seek national office through the upcoming Association elections being held concurrently with the Oct. 21-24 House of Delegates meeting in Denver.

Candidates are listed by office sought in alphabetical order. Delegates will vote on Oct. 23.

The candidates' profiles and statements are also available on ADA.org for Association members only.

President-elect candidates are presented here; the second vice president candidate is presented on Page 6.

Terry L. Buckenheimer, D.M.D.

Joseph Crowley, D.D.S.

President-elect candidate

love the profession of dentistry. I intentionally say profession as there are many forces outside dentistry that seem intent on calling us "providers" instead of professionals. Never has it been more important for the ADA to serve and protect our profession.

Our patients and those in need deserve only the best. The future of dentistry depends on it.

Challenges that we face today create opportunities to advance our profession. The diverse opinions expressed by our members, young and old, are our strength.

They allow us to explore the many possibilities of adapting and thriving as professionals. Together, we can develop a bold path for the ADA to take that will retain relevancy to all dentists.

I want to work to ensure the ADA continues to be the professional organization dentists want to join.

It is a wonderful time to be a dentist. Listening to the concerns and ideas of all our members, staying positive, and building consensus towards the common goal of serving our profession and our patients is how we will succeed.

I ask for your support to lead our ADA, an organization with a 150-year history of ethics and professionalism, now and into the future.

President-elect candidate

am running for ADA president-elect because I am passionate about our great profession and I want to make sure the next generation of dentists experiences the same opportunities and autonomy that we enjoy.

Today, our profession is

facing significant challenges, including evolving demographics, marketplace changes and growing regulatory burdens. I have strong convictions as to how to navigate these issues to ensure that the ADA remains efficient and effective for the benefit of our membership.

I believe in:

• Freedom — we must ensure that we can provide the care our patients need free from unnecessary interference.

• Ethics and honor — we must promote the highest levels of professionalism so that dentistry remains a respected and trusted profession for our patients and the public.

• Inclusion and unity — we must build a tripartite that represents all dentists regardless of their gender, race, ethnicity or practice type — we are all the ADA!

If we address these issues related to our practices, our profession and our association, we will continue to be the envy of other professions, capturing the best and brightest to bring in a new era of dentistry.

I ask for your support as the next ADA presidentelect.

joined the American Dental Association

right out of dental school. In these last 38 years, I have been privileged to learn more than I thought possible from my many colleagues across our country.

dedication are reasons the ADA is so strong.

Each of us shares a commitment to seeing our profession grow, addressing the issues that compete with its sustainability.

Julian Hal Fair III, D.M.D.

President-elect candidate

• It's time for action. I'm running for president-elect because I don't want to belabor the need to increase membership. I want us to work together to make it happen.

• Collectively I want to change the way foundations and insurance companies impact the way we practice.

• As one voice I want us to continue to ensure that dentistry remains a profession and not a trade.

My goal as your president-elect is to set the tone that will enable us to build the legacy of dentistry for the next generations.

Our responsibility, yours and mine, is to nurture the values of the ADA, not take them for granted.

As your president-elect, I look forward to laying the groundwork together for the next generation of dentistry. Times change, but the enduring values of our profession will never fade away.

PROFILE

Current residence: Tampa, Florida

Dental school attended: University of Pittsburgh School of Dental Medicine

Year received dental degree: 1980

Postgraduate education/specialty: GPR

Years of ADA membership: 40

Other professional memberships:

- American College of Dentists.
- International College of Dentists.
- Pierre Fauchard Academy.

Volunteer posts/elective offices held in organized dentistry:

- ADA 17th District trustee.
- Chair, ADA Council on Membership.
- Chair, ADA Diversity and Inclusion Committee.
- Board member of ADA Foundation and FDA
- Foundation.
- President of Florida Dental Association.
 - See DR. BUCKENHEIMER, Page 6

PROFILE

Current residence: Cincinnati, Ohio

Dental school attended: The Ohio State University College of Dentistry

Year received dental degree: 1976

Years of ADA membership: 40

Other professional memberships:

- Academy of General Dentistry.
- American College of Dentists.
- International College of Dentists.
- Pankey Institute.
- Pierre Fauchard Academy.

Volunteer posts/elective offices held in organized dentistry:

- ADA 7th District trustee.
- Chair, ADA Audit Committee.
- · Chair, ADA Council on Government Affairs.
- American Dental Political Action
- Committee Board of Directors.
- President, Ohio Dental Association.

See DR. CROWLEY, Page 6

PROFILE

Current residence: Wagener, South Carolina

Dental school attended: Medical University of South Carolina College of Dental Medicine

Year received dental degree: 1978

Years of ADA membership: 41

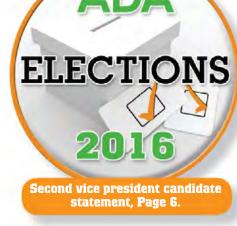
Other professional memberships:

- Academy of General Dentistry.
- American College of Dentists.
- International College of Dentists.
- Pierre Fauchard Academy.
- Academy of Dental Practice Administration.

Volunteer posts/elective offices held in organized dentistry:

- ADA 16th District trustee.
- President, South Carolina Dental Association. • President, South Carolina Academy of General
- Dentistry.
 - Chair, ADA Compensation Committee. • Chair, ADA Council on Dental Practice.
 - See DR. FAIR, Page 6







That level of support and

Floss

Continued from Page 1

When the ADA News asked the governmental agency why the 2015 guidelines did not mention flossing, the U.S. Department of Health and Human Services sent a statement that called flossing "an important oral hygiene practice" and said that the guidelines' lack of mentioning it did not imply otherwise.

Although dental floss — along with brushing teeth and using fluoridated water — was mentioned in past editions of the guidelines (in both 2005 and 2010), the statement said "it was most likely identified as a supporting recommendation along with brushing teeth, with the primary emphasis being on the nutrition-based recommendation to reduce added sugars."

Indeed, brushing and flossing have never been an integral part of the dietary guidelines, which primarily provide evidencebased food and beverage recommendations for Americans.

The Health and Human Services statement said, "since neither the 2010 nor 2015 Advisory Committees [for the guidelines] reviewed evidence on brushing and flossing teeth, the authors of the current edition decided not to carry forward the information on brushing and flossing included in past editions of the guidelines," the statement said.

"By doing so, they were not implying that this is not an important oral hygiene practice."

BPA

Continued from Page 2

Authority (80,000 nanograms per day).

"This issue of the PPR provides a muchneeded perspective on the amount of BPA in dental materials compared with other sources of exposure," said Dr. David Sarrett, PPR editor.

The publication of the PPR coincides with the August publication of a systematic review and updated clinical practice guidelines it helped generate in The Journal of the American Dental Association.

Those articles give a clear indication of the benefits of the use of sealants in preventing and managing occlusal caries in children and adolescents.

"Dental sealants offer a tremendous oral health benefit to children and should continue to be a routine preventive service," said Dr. Sarrett.

In addition to the BPA article and its corresponding laboratory reports, the August PPR includes an expert panel discussion about BPA and an essay about the BPA released from resin-based dental sealants from the Council on Scientific Affairs' caries workgroup.

The ADA Professional Product Review launched in 2006 under the guidance of the ADA Council on Scientific Affairs with the intent of providing ADA members with content compiled from the best available sources. The information aims to be user-friendly, unbiased, clinically relevant and scientifically sound.

If there's a category you'd like to see evaluated in the ADA Professional Product Review, send your suggestions to pprclinical@ ada.org.For more information or to access the current issue, visit ADA.org/ppr. ADA Member login is required for access. The Association also released a statement in response the news story, reiterating its recommendations to maintain oral health, which include "brushing for two minutes, twice a day with a fluoride toothpaste, cleaning between teeth once a day with an interdental cleaner and regular dental visits advised by your dentist."

The ADA also stated that interdental cleaners, including floss, "are an essential part of taking care of your teeth and gums."

ADA members can direct patients with questions to the Association's consumer friendly website, MouthHealthy.org, for more information about flossing.

-manchirm@ada.org

Cadavers a highlight at ADA 2016

BY DAVID BURGER

Denver — Hands-on cadaver workshops are a highlight among continuing education courses at ADA 2016 – America's Dental Meeting in October.

The six cadaver courses, which will be at the Colorado Convention Center, are:

• All-Day Head and Neck Dissection: A Cadaver Workshop, Oct. 19, 8 a.m.-4 p.m. (4201).

• Local Anesthesia Human Cadaver Dissection Workshop, Oct. 20, 9:15 a.m.-12:15 p.m. (5217). • Socket Grafting for the Clinical Staff: A Cadaver Workshop, Oct. 20, 1:15-4:15 p.m. (5236).

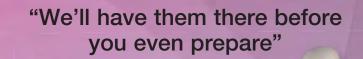
• Cadaver: Periodontal Flap and Crown Lengthening Surgery, Oct. 21, 8-11 a.m. (6217).

• Cadaver: Grafting for Implants, Oct. 21, 1:30-4:30 p.m., (6234).

• Dissections of the TMJ and Answers to Current Myths: Hands-On Cadaver Course, Oct. 22, 8 a.m.-4 p.m. (7234).

ADA 2016 – America's Dental Meeting will convene in Denver Oct. 20-24. ■

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Afte



G. Lewis (Lew) Mitchell Jr., D.M.D.

experience.

Council

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one's

core

Second vice president candidate

eflecting on platform statements that candidates make, some may conclude that those plans and priorities mean very little unless a candidate works well with members at large and with fellow colleagues on the Board of Trustees. The daunting task of managing a \$135 million budget and serving 158,000 members becomes difficult without teamwork and support for each other.

As one who believes in teamwork, perhaps the most meaningful

asset to offer to our Association is my years of experience working with many of you. Twelve years of budget experience which re-**ELECTIONS** lates to everything the ADA does, the good fortune of serving in the ADA House for 20 years and working with others on two ADA councils has provided a wealth of knowledge and

Continued from Page 4

Terry L. Buckenheimer, D.M.D.

PROFILE

What are your main qualifications for the office you seek?

Through every opportunity to serve our profession, I have gained the experience and knowledge that has developed me into an effective leader.

• Having served as president of my affiliate, component and constituent dental associations, I've gained the confidence to develop appropriate strategic plans, create effective policy, ensure financial stability and lead our political advocacy efforts.

• As chair of the ADA and FDA Councils on Membership, I've created value propositions for our members and have shown that each member is important through effective, targeted communication. Innovative forms of communication are key to reversing the declining trends in membership market share.

• As liaison to the New Dentist Committee and to the American Student Dental Association, I've learned the concerns of these young professionals and am focused on creating solutions to the challenges they face. By engaging leaders of these groups, the ADA will remain relevant as we decide how best to make their futures in dentistry bright.

• As a board member of the ADA Foundation, the FDA Foundation and the Dental Lifeline Network, I have seen firsthand how opportunities to give back to communities and to those in need can build value to belonging to an organization that supports such activities.

• Having been in practice for 35 years, I see the challenges our members face every day. I am determined to find solutions that will benefit our members, the profession and the public.

Why do you want to be an ADA officer?

I have a vision of the ADA as an organization whose diversity is its strength and its dedication is to the success of its members. I'd be honored to lead our association toward making this vision a reality.

Continued from Page 4

Joseph Crowley, D.D.S.

PROFILE

What are your main qualifications for the office you seek?

• I have been a leader at every level of the tripartite, focusing on core values to ensure our energy and resources are directed toward strategic priorities.

• I have fought the midlevel provider battle in Ohio.

• I continue to advocate to protect the dental profession from over-regulation and third-party interference.

• I have built strong relationships with legislators, locally and in Washington, D.C., testified at legislative hearings, and have been an effective spokesperson for organized dentistry.

• I have built strong alliances with key constituencies within the ADA so I am prepared to engage our leaders to be proactive in meeting emerging challenges.

Why do you want to be an ADA officer?

The practice of dentistry has allowed me to achieve my goals and aspirations both personally and professionally. Personally, my dental practice has provided me selfsatisfaction of fulfilling a childhood goal as well as the ability to provide a comfortable lifestyle for my family and my staff. Professionally, I have consistently been able to provide quality dental care for my patients in a setting of my choosing largely free from unnecessary third-party interference. Through my 40 years of involvement in professional organizations, especially organized dentistry, I have developed the skills and expertise to be well positioned to lead the ADA to meet the challenges we face as a profession and as an association. I have the passion and drive to ensure the ADA reaches its fullest potential as an organization and that dentistry continues to be a profession that is the envy of all others. I humbly ask for your support as we chart and protect our future together.

PROFILE

Current residence: Gadsden, Alabama Dental school attended: University of Alabama School of Dentistry

Year received dental degree: 1973

Postgraduate education/specialty: Fellow of the Academy of General Dentistry, Master of the Academy of General Dentistry

Years of ADA membership: 43

Other professional memberships:

• Alabama Dental Association.

 Academy of General Dentistry. • University of Alabama School of Dentistry Alumni Association.

- American College of Dentists.
- International College of Dentists.

Volunteer posts/elective offices held in organized dentistry:

- President of Alabama Dental Association.
- President of Alabama AGD.
- President of University of Alabama

School of Dentistry Alumni Association. • Chair of ADA Council on Ethics, Bylaws and Judicial Affairs.

• Chair of Alabama Section of ACD.

What are your main qualifications for the office you seek?

• Twelve years experience working with the ADA budget.

- Twenty-year member of the ADA House of Delegates.
- Adjunct Associate Professor at UAB School of Dentistry.
- Member, Council on Access, Prevention

and Interprofessional Relations (2012-16). • Member, CEBJA (1994-98); chair, 1998.

Why do you want to be an ADA officer?

With the ADA facing many issues that relate to budget matters, many colleagues suggested that if the ADA second vice president possessed budget skills, he or she could immediately be useful to the Board of Trustees. They thought that 12 years of experience working with the "Budgeteers" would prepare someone for those responsibilities. Dentistry and our national organization face matters every day that relate to our budget and how we manage our finances.

Our treasurer has worked well with the "Budget Group," and we have seen significant improvements. However, with flat membership growth and rising costs, budget challenges still remain. Budget experience will strengthen the Board by adding to its membership someone who can work with the treasurer to insure our ability to meet future challenges.

CEBJA chairmanship and CAPIR membership allows one to see the role finances play in maintaining vital programs for our current members. As an adjunct associate professor at UAB School of Dentistry, one can see the role that finances play in the lives of our future members.

We all want to make a difference. Offering my services to the profession with a background in Budget gives me an opportunity to accomplish that goal. With your help, we will.

Continued from Page 4

Julian Hal Fair III, D.M.D.

PROFILE

What are your main qualifications for the office you seek?

• Through my leadership positions I've developed the ability to facilitate and build consensus among differing opinions.

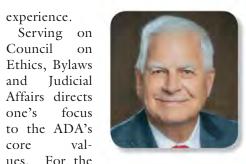
• Having a son-in-law and daughter in dentistry today and knowing the obstacles younger dentists face, along with chairing the South Carolina Dental Association long-range planning committee, I have foresight and vision that goes beyond the next two years.

• Having chaired for five years the joint Medicaid Task Force of the South Carolina Dental Association and South Carolina Health and Human Services, I have a unique understanding of the problems associated with access to care and thirdparty interference.

• Having served for four years as the liaison from the Council on Dental Practice to dental informatics and standards and two years as liaison from the Board of Trustees, I understand how dental standards affect all aspects of the dental community including the dental team, the public, manufacturers, academia, researchers, and governments, and play an important role in society enhancing oral health.

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Council on Access, Prevention and Interprofessional Relations colleagues and teaching dental students has served to increase my

last four years, working together with

knowledge and broaden my perspectives to include not just our past but also our future.

Dentists and the ADA need each other more than ever before. By working together and supporting each other, we can move our Association forward.

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References: 1. Xu T, Deshmukh M, Barnes VM, et al. *Compend Contin Educ Dent.* 2004;25(Suppl 1):46-53. **2.** Kraivaphan P, Amornchat C, Triratana T. *J Clin Dent.* 2013;24:20-24. **3.** Fine DH, Sreenivasan PK, McKiernan M, et al. *J Clin Periodontal.* 2012;39:1056-1064. **4.** Riley P, Lamont T. *Cochrane Database Syst. Rev.* 2013 Dec 5; 12:CD010514. doi: 10.1002/14651858.CD010514.pub2.

*Over time, triclosan is slowly released from the copolymer to provide sustained antibacterial activity for 12 hours. *vs non-antibacterial fluoride toothpaste 12 hours after brushing.

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ADA president visits South Dakota's Rosebud Reservation

BY JENNIFER GARVIN

Rosebud, S.D. — Her presidency has taken her all over the world, but her visit to the Rosebud Reservation is one that will stand out long after Dr. Carol Gomez Summerhays exits her ADA office.

Dr. Summerhays, along with her husband Soames Summerhays, and Dr. Steve Geiermann, senior manager with the ADA's Council on Access, Prevention and Interprofessional Relations, visited the Rosebud Reservation July 15 to hear and see firsthand the health care challenges that the Rosebud Sioux Tribe faces. Joining Dr. Summerhays were Paul Knecht, executive director, South Dakota Dental Association, and Dr. Ed Vigna, a past ADA trustee and SDDA consultant.

"It was a high priority to visit Rosebud," said Dr. Summerhays. "I was aware of the challenges the Lakota people face, but to see it firsthand was very impactful. The social issues the Rosebud tribe faces are heartbreaking."

During the visit, Dr. Summerhays met with Evelyn Espinoza, the Rosebud Sioux Tribe's director of health administration, to listen to the tribe's health care needs and concerns, especially where poor oral health impacts overall health. Ms. Espinosa invited the contingent to observe her family's Sun Dance celebration and to interact with other tribal members.

"It was an honor to be invited to attend the Sun Dance," said Dr. Summerhays.

After listening to the concerns of many tribal elders, Dr. Summerhays offered the ADA's assistance to support the tribe in pursuing optimal oral health as integral to overall health.

"The community health representatives are members of the tribe. They know the families and their needs. They are trusted," Dr. Summerhays said. "Funding training for more community health representatives and Community Dental Health Coordinators to work together would be tremendously positive in improving oral health by addressing individual specific needs, whether it is transportation, increasing oral health literacy or securing appointments."

In addition to dental care needs, the tribe also is burdened by high rates of early childhood caries, diabetes, obesity, suicide, substance abuse and unemployment.

Webinar to discuss signs of opioid abuse

Learn about opioid abuse, how to recognize it and how to safely provide pain management for dental patients in an upcoming webinar.

Reducing Opioid Abuse by Incorporating Patient Management Strategies from Psychiatry and Behavioral Health is scheduled for 2-3 p.m. Central time on Aug. 24. Roomana M. Sheikh, M.D., who has 20 years of experience diagnosing and treating mental health disorders, will present tools to help dentists recognize aberrant behavior and potential drug abuse.

Participants in the live webinar session are eligible for one hour of continuing education. To register, visit websurveys.ada.org/s/opioidaugust.

The group also visited the St. Francis Mission Dental Clinic, which is a collaboration Francis Mission, and Marty Jones, dental hyof the St. Fran-_____ gienist and

South

Dakota,

Father John Hatcher, director of the St.

cis Mission, the "The community health representatives clinic direc-Dakota are members of the tribe. They know Dental Association and Delta the families and their needs. Dental of South They are trusted." with

support from the Henry Schein Cares Foundation. The appreciation to organized dentistry for its volunteer clinic has been providing free dental care to the Rosebud people since 2012.

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sign of their continued support of their efforts.

For more information about volunteer-

ing at the St. Francis Mission Dental Clinic, contact Ms. Jones by email at marty.jones@ sfmission.net or by calling 1-605-747-2142 or 1-605-319-1275. Out-of-state dentists interested in volunteering must first receive a temporary license to practice in South Dakota. For more information, contact Mr. Knecht or Brenda Goeden at the South Dakota Dental Association office by calling 1-605-224-9133 or emailing paul.knecht@sddental.org or brenda.goeden@sddental.org.

For more information about the St. Francis Mission Dental Clinic visit sfmdental.com.

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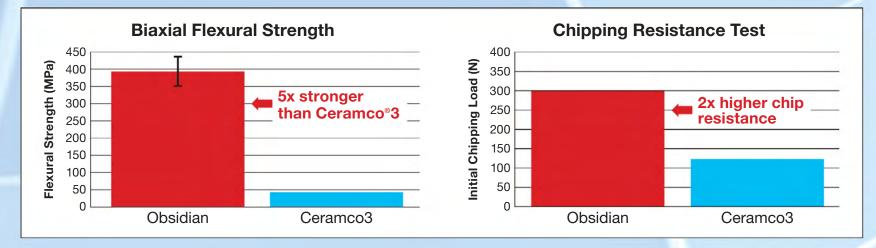
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runs from 8 a.m. to

Mr. Chatham

5:15 p.m., and the \$199 cost includes breakfast, lunch, breaks, a cocktail reception and 7.75 CE credits.

Register for this program at ADA.org/en/ meeting/continuing-education/concurrentmeetings. ADA 2016 – America's Dental Meeting will convene in Denver Oct. 20-24.

ADA 2016 registration is open. For the most updated information, visit ADA.org/meeting. Join the conversation on Facebook and Twitter using #ADADEN.

Council considers ways dental students can pay off loans

BY MICHELLE MANCHIR

Dental students are graduating with unprecedented amounts of student loan debt. Based on American Dental Education As-

sociation data, the average dental school graduate in 2014 carried \$247,227 in student loan debt, up from \$221,000 in 2013.

With this in mind, the ADA Council on Access, Prevention and Interprofessional Relations in June organized a dental loan repayment panel to review some of the options dental students have to receive assistance in paying off their educational debt.

"In the spirit of helping all of our members succeed, the Council on Access, Prevention and Interprofessional Relations decided to assemble a panel of experts to help students understand the options that are available to them in dealing with the ever-increasing educational loan burden," said Dr. Cesar Sabates, council chair.

The council's guests included Susana Galvan, ADA manager of diversity and inclusion and outreach; and Luis Padilla, M.D., associate administrator for the Health Resources and Services Administration's Bureau of Health Workforce and director of the National Health Service Corps. Below is a summary

Bill enables veterans to purchase low-premium dental coverage

BY JENNIFER GARVIN

Washington — The Senate July 13 passed a new bill that allows veterans to purchase low-premium dental coverage from private insurers.

The VA Dental Insurance Reauthorization Act, sponsored by Sen. Richard Burr, R-N.C., transitions a dental insurance pilot program that was established in 2014 to a statutory program serving all eligible veterans, survivors and dependents who are in the Veterans Affairs system. The program serves as a portal through which veterans can purchase low-premium dental coverage from private insurers. Veterans who are already eligible to receive dental care directly from the VA will not be affected by this program.

"We're supportive of all efforts to extend dental coverage to veterans, and reauthorizing this program certainly would do that," said ADA President Carol Gomez Summerhays, herself a third-generation Navy veteran. "Anything that deals with the military and veterans is very important to me."

"Making sure veterans have dental care is the right thing to do," said Sen. Burr in a news release. "The veterans' dental insurance pilot program has a track record of success, and it is time to open it up to all veterans. Medical professionals have long known that proper dental care is linked to better overall health. I am pleased the Senate has recognized the value of this dental benefit for veterans and has passed my bill." of the presentations.

Bureau of Health Workforce

Dr. Padilla discussed the bureau's oral health programs that aim to increase U.S. patients' access to quality health care by developing, distributing and retaining a competent health work force.

The bureau offers financial assistance programs for students and clinicians.

In the 2017 fiscal year, the National Health Service Corps is expanding its Students to Service Program to provide up to 75 financial awards to dentists in their final year of school, Dr. Padilla said. That program will provide loan repayment up to \$120,000 to dental students in their final year of school in exchange for service in underserved communities. The 2017 application cycle is scheduled to open Aug. 16.

The National Health Service Corps also offers scholarships to full-time students pursing dentistry at accredited U.S. schools. The competitive scholarships include tuition, fees, books, supplies and a monthly living stipend. In exchange for those benefits, one year of service commitment is expected for each year of financial support, Dr. Padilla said.



Standing up for dental students: Ways to help dental students pay off their student loans was the topic of a panel discussion during an ADA Council on Access, Prevention and Interprofessional Relations meeting in June. The council and some guest speakers are pictured here.

Meanwhile, the service corps' loan repayment program, is available for, among other health care specialties, dentists and dental hygienists. It offers up to \$50,000 for two years of full-time service.

For more information on these opportunities, visit www.nhsc.hrsa.gov or contact the NHSC Customer Care Center at 1-800-221-9393 or by email at GetHelp@hrsa.gov.

Military options

Ms. Galvan presented military options for dental school loan repayments.

The Health Professions Scholarship Program offers prospective military dentists a paid dental education in exchange for service as a commissioned officer. It covers 100 percent of the cost of dental school tuition, a monthly stipend to cover living expenses, and a \$20,000 sign-on bonus. The active duty service obligation is one year of service for every year of receipt of scholarship. Students currently enrolled in a civilian specialty program may qualify for the military's Financial Assistance Program, which offers \$45,000 annually plus a monthly stipend of \$2,200 to cover living expenses. For this option, one year of active duty is obligated for each year of participation plus one extra year upon completion of residency.

Each of the military branches, Army Dental Corps, Navy Dental Corps and Air Force Dental Corps, have their own requirements for service and benefits, including a loan repayment program (for Army only) and bonuses.

For more information on any of these programs, email Ms. Galvan, at galvans@ada.org.

ADA members may also be able to save money on their loans through an ADA-endorsed student loan refinancing offer through Darien Rowayton Bank. Savings will vary as loans are granted based on a number of factors that are considered in any loan decision, including credit history, loan terms, income and total debt amount. For more information, visit student.drbank.com/ADA.

ADA offers tips on preparing for possible HIPAA audit

BY KELLY SODERLUND

The ADA Center for Professional Success has tips to help dental practices who may be faced with an audit from the federal government to determine whether they are complying with the Health Insurance Portability and Accountability Act Privacy, Security and Breach Notification Rules.

The U.S. Department of Health and Human Services Office for Civil Rights has sent emails to selected covered entities that will be included in phase two of its Health Insurance Portability and Accountability Act audit program. The emails are from OSOCRAudit@hhs.gov. OCR suggests monitoring spam folders for messages from this address.

The audits will examine selected covered entities' compliance with HIPAA's Privacy, Security, and Breach Notification Rules, with a focus on the Notice of Privacy Practices, patients' right of access, the timeliness and content of breach notification, and the security risk analysis and risk management processes. The Center for Professional Success offers nine tips to help dental practices be prepared for the possibility of an audit. The tips include: • Watch for an email from the Office for

Civil Rights. • Practice filling out the Office for Civil

Rights' pre-audit screening questionnaire. • Review your HIPAA compliance docu-

ments and update as appropriate.List your business associates and make sure

you have a compliant agreement with each.Review the government's HIPAA audit protocol.

• Make sure your HIPAA security risk analysis really is a HIPAA security risk analysis.

• Read about the audit program on the Office for Civil Rights website.

• Do a mock audit.

• Work hard, but don't panic.

The tips are available at Success.ADA.org/ AuditChecklist.

For more information on the audits, visit hhs.gov.

Clarification

In the July 11 ADA News My View, "Changing the Culture of Coverage," Dr. Bruce R. Terry incorrectly cited a fact from a report in the April 2014 Journal of the American Dental Association on the overuse of emergency room services for dental related problems. The accurate statement is that between 2008 and 2010, 1 percent of emergency room visits were dental related. Of those dental ER visits, 57 percent were related to dental caries and only 2.7 percent were related to swelling.

Dr. Terry regrets the error.

Oregon university pays \$2.7 million to settle potential HIPAA violations

Portland, *Ore.* — Oregon Health & Science University will pay the federal government \$2.7 million to settle potential violations of the Health Insurance Portability and Accountability Act.

The U.S. Department of Health and Human Services Office for Civil Rights began investigating the university after it submitted multiple breach reports that affected thousands of individuals, including two involving unencrypted laptops and another large breach involving a stolen unencrypted thumb drive, according to a news release. The investigation uncovered "evidence of widespread vulnerabilities within OHSU's HIPAA compliance program, including the storage of the electronic protected health information of over 3,000 individuals on a cloud-based server without a business associate agreement.

The Office for Civil Rights found "significant risk of harm" to 1,361 of the individuals because of the sensitive nature of their diagnoses, the news release stated. The server stored credit card and payment information, diagnoses, procedures, photos, driver's license numbers and Social Security numbers.

OHSU is a large public academic health center and research university centered in Portland, Oregon, comprising two hospitals, and multiple general and specialty clinics throughout Portland and throughout the State of Oregon.

Rule

Continued from Page 1

urged the agency to delay the enforcement date so that dentists will have sufficient time to meet the requirements. The coalition signees included the ADA; American Association of Endodontists; American College of Prosthodontists; American Academy of Pediatric Dentistry; American Association of Women Dentists; American Society of Dentist Anesthesiologists; Academy of General Dentistry; American Academy of Oral and Maxillofacial Pathology; American Association of Oral and Maxillofacial Surgeons; American Academy of Periodontology; National Dental Association; American Association of Orthodontists; and Hispanic Dental Association.

In the letter, the coalition wrote that the "extremely short" implementation timeline has made compliance with the final rule exceedingly difficult, "especially because OCR staff have not addressed several questions regarding the rule."

The coalition stressed that it "strongly supports nondiscrimination in health care and equal access to health care for all patients without regard to race, color, national origin, sex, age, religion or disability" but said it is concerned that the final rule will negatively affect patient access to care, "particularly in impoverished communities, because health care providers may hesitate to accept the extra compliance burdens and liability risks that the final rule imposes on providers who participate in government health care programs, such as Medicaid."

For these reasons, the coalition said it "respectfully requests a delay in the enforcement date until there is sufficient time to allow for our members to meet the requirements." It also requested relief for "our members working in small practice settings and request the most burdensome regulations be limited to those who employ 25 or more staff."

This is not the first time organized dentistry has reached out to OCR. In November 2015, the ADA submitted comments regarding the proposed rule, noting that it was "confusing, duplicative and burdensome, as well as unnecessary." Since then, "OCR staff made few changes to the proposed rule, and these concerns have not changed," wrote the coalition.

The Association continues to advocate for members in regards to the final rule. On July 29, ADA emailed some 40,000 grassroots members, urging them to write their member of Congress to ask HHS Secretary Sylvia Burwell to delay implementation of the rule.

In an ADA letter to Ms. Samuels, ADA President Carol Gomez Summerhays and Executive Director Kathleen T. O'Loughlin noted that since 70 percent of ADA members practice in solo settings and employ an average of 4.9 employees, compliance within the "extremely short timeline afforded by the OCR" is difficult.

To minimize the administrative burden for member dentists who are covered entities, the ADA has prepared resources to aid in compliance with the rule, including an FAQ and checklist. Visit ADA.org/1557.

To learn more about contacting your local representatives, visit the ADA's Engage Legislative Action Center and sign up to receive critical updates on the Association's key advocacy issues. The ADA uses Engage to send out action alerts, inform dentists on critical public policy issues and put members in contact with legislators.

For more information, visit the OCR's website and search Section 1557.

—garvinj@ada.org

ADA Business Resources endorses AHI Travel

ADA Business Resources announced July 15 it endorsed AHI International Corporation as the tour and travel provider for ADA members.

The new endorsement provides members special access to deluxe travel programs through AHI, a privately held company specializing in member-based travel. Most trips are between seven and 14 days and feature on-site tour directors leading small groups.

With AHI customer service, a single AHI staffer is designated as the member contact

for each trip. This contact will help members book airfare, plan pre- or post-trip extensions and to answer any question. AHI can also work with members in various aspects of the trip including guest dietary restriction accommodations, trip information and offering travel insurance.

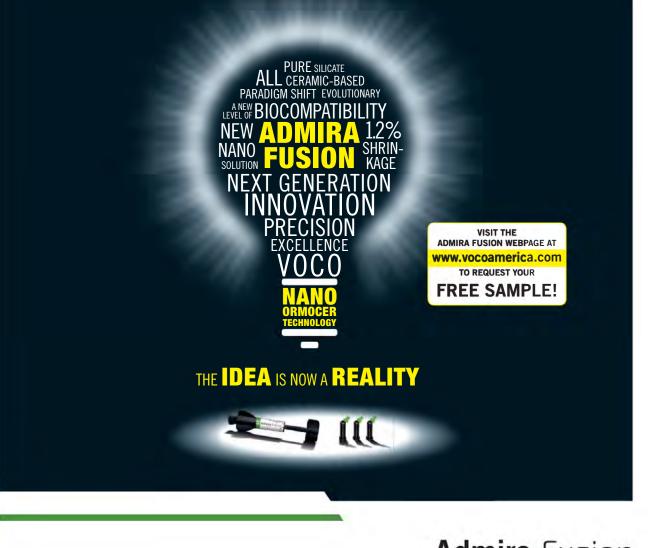
In addition, each ADA trip will include the opportunity to attend a dental-focused in-country reception.

The first ADA trips in 2017 include Cuba: People, Culture, Art, Jan. 8-16; Legends of the Nile, Jan. 10-21; Crystal Cruises – Mystique of the Maya, Jan. 11-22; and Portrait of Chile & Argentina, March 18-30.

ADA members will receive an early booking discount of \$250 per person, with prices ranging from \$2,400-\$5,600 per person. According to ADA Business Resources, an industry scan has verified that the pricing is competitive with what is in the marketplace for four-star luxury travel.

For more information, visit ADA. ahitravel.com or call 1-844-205-1171.

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